NEW ZEALAND DIETETIC ASSOCIATION (INC) / DIETITIANS NEW ZEALAND (INC)

A HISTORY

The Third Quarter Century

1993–2018

Julian Jensen and Pip Duncan

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Foreword

WHEN the New Zealand Dietetic Association (NZDA) turned 50 in 1993, President Gillian Tustin summed up the situation as we launched into our second half century. Membership stood at 368; we had eight subcommittees where much of the work of the NZDA was achieved; we set up task forces for specific projects; we had six branches and special interest groups were becoming increasingly important – we had six in 1993. There were two dial-a-dietitian services – one in Auckland and one in Christchurch; the Journal and News & Views continued to be important means of communication between and among members. Awards were important, and the Award of Excellence was very new – there had been four awarded by 1993. Neige Todhunter’s bequest of over $150,000 had been received in 1993 and gave the NZDA a wonderful opportunity to assist members with postgraduate education. Gillian closed by saying “The New Zealand Dietetic Association is now in a very sound position to pro-actively support the development of the profession.”

Twenty-five years later, as we embark on our 75th Jubilee year, we can compare Gillian’s summary with today’s. Membership stood at 597 in 2017. We now have at least four people who have been members for over 60 years. There are 12 Dietitians New Zealand representatives on external groups. We have seven branches, and 17 special interest groups. We have had 25 Awards of Excellence, and 28 dietitians have benefitted from the Neige Todhunter Award for postgraduate study. Our honorary life memberships stand at eight, and seven of these were elected since 1993.

Some of the standout happenings over this past 25 years include the move from Vote: Health to Vote: Education for the training of dietitians; firstly the University of Otago Postgraduate Diploma in Dietetics, and in more recent years, the three Master’s programmes, offered by the University of Auckland, University of Otago and Massey University; the change of our name from the New Zealand Dietetic Association to Dietitians New Zealand (Dietitians NZ) and new logos; the amalgamation of our Journal with the Dietitians Association of Australia Journal of Nutrition & Dietetics, and then our withdrawal from that partnership; the change from a regionally-based executive committee to a skills-based Council; and the establishment of a national office to manage the operational aspects of Dietitians NZ. In terms of professional qualifications, the number of New Zealand dietitians with PhDs has grown from four in 1993 to 24 today with a number more in progress.

Dietitians continue to excel in many specialities, both in New Zealand and internationally. One very significant advance has been gaining the ability to prescribe special foods and other approved nutrition-related medications. Growth in many areas over that last 25 years has been amazing. However dietitians can never become complacent. Dietitians need to accept the challenges that will continue to confront them, and strive to make the dietetic profession the ‘go-to’ health profession for evidence-based food and nutrition advice.

Our stories appear in the following pages – let us be proud to be, or have been, dietitians!

Acknowledgements

Tēnā koutou katoa

In assembling this history, we have worked to ensure that we have provided a comprehensive picture of the work of Dietitians NZ and dietitians over the last 25 years. We searched and requested far and wide and were delighted with the responses, and thank the many dietitians from the regions, branches, special interest groups and unique work settings for their stories. Any omission is regretted. However, given our extensive search for content, we as editors cannot be responsible for any such omission.

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Julian Jensen and Pip Duncan

August 2018
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The last and 41st president of NZDA/Dietitians New Zealand was Kath Fouhy and the first chairperson of the new Council of Dietitians New Zealand was Claire Tahu.

Kath Fouhy  
**PRESIDENT 2013-2015**

Kath began an eight-year journey on the Dietitians NZ executive committee as the Wellington representative and a relatively new graduate dietitian in private practice. At the end of her tenure as the 41st and last president of Dietitians NZ, she was working for High Performance Sport New Zealand. She reflected after her time as president and the challenges that may face the organisation in the future:

Dietitians NZ needed to address what was important to members and how to deliver that service and member benefits. Following a comprehensive strategic planning process in 2009, the executive committee recognised that dietitians could belong to a variety of specialist professional organisations and changes were required if Dietitians NZ was to thrive and make an impact on the health and wellbeing of New Zealanders.

The policy governance model adopted in 2011 provided positive structures and processes to assist in achieving Dietitians NZ’s strategic goals.

Despite the changes to the environment and the many challenges Dietitians NZ has experienced since Kath was elected to the executive committee, the organisation has continued to grow and support its members. Kath has no doubt the changes in technology, health and food trends will continue into the future. The way nutritional status and interventions are measured may change with the use of biosensor technology. There will be advances in the understanding of human physiology, particularly the gut microbiome and its impact on health and performance. The impact of climate change and the housing crisis may affect food availability, sustainability and New Zealand agriculture and horticulture industries. However, despite all the advances, Kath believes that the fundamental role of a dietitian of changing and improving behaviour and relationships around food to promote health and performance will remain the same. She states that “the challenge for Dietitians NZ will be to remain future-focused and relevant given the fast-changing environment to stay ahead of the game.”

Claire Tahu  
**CHAIR 2015-PRESENT**

Claire considers it an absolute privilege to lead the first Council of Dietitians NZ. Claire is a British trained dietitian and the first non-New Zealander to lead Dietitians NZ in its 75 years. She came to New Zealand in 2007 and has immersed herself in Dietitians NZ’s affairs. She has been president of the Auckland Branch and on the Executive. Her work as associate director of Allied Health Nutrition and Dietetics in Counties Manukau District Health Board and more recently director of Allied Health, Scientific and Technical at Hutt Valley District Health Board has given her good insight into the health environment in New Zealand. In her role as chairperson, she has been passionate about supporting Dietitians NZ in achieving its vision and strategic objectives – aiming to advance the profession as being New Zealand’s ‘Food and Nutrition Experts’. Her particular interest is to raise the profile of Dietitians NZ by encouraging engagement with other key nutrition stakeholders and public awareness campaigns such as Dietitians Day, health expos and social media.

Annette Nistor  
**EXECUTIVE AND COUNCIL MEMBER 2001-PRESENT**

Annette has actively contributed to the executive committee/Council of NZDA and Dietitians NZ for over half of this 25-year period! As such, Annette is one of the longest serving officers in the organisation’s history. She was a member of the executive committee from 2001-2009 and president from 2009-2012. In 2016, she was elected to the Dietitians NZ Council, with her term due to
expire in 2019. Annette has been involved in two of Dietitians NZ’s recent working groups, the governance working group, and the awards protocol committee. In addition to this, she has served on her local Northern South Island Branch committee including being president twice.

Annette is passionate about Dietitians NZ. During her term as president, the decision was made to move from a regionally-based executive committee to a skills-based Council.

Her leadership in this initiative was driven by her previous significant governance experience roles that began with being the regional branch chair of Plunket, then of the Kindergarten Association Board, then chair of the Community Health Group, and then of Henley Primary School Board of Trustees and finally seven years as chair of the Waimauku College Board of Trustees. The success of the transition from the regionally-based executive committee to a skills-based Council is largely due to Annette’s guidance into the process.

A NEW NAME

Dietitians New Zealand (Inc) was proposed, voted on and accepted at the 2009 AGM. The logo was amended to reflect this change. The Executive committee sanctioned a te reo byline to be added to the logo ‘Ngā Tohunga Kai Ora’ (broadly meaning ‘experts in food’). However, this name caused offence to Māoridom as it was not an accurate reflection of the word ‘Tohunga’ in such a Pākehā dominated profession.

In 2013, Dietitians NZ formally adopted a new Māori name Ngā Pukenga Kai Ora o Aotearoa. The intention was to more actively acknowledge the Principles of Tiriti o Waitangi namely partnership, protection and participation. The name change also recognised the dual meaning of kai ora as healthy food and food for health. Christine Stewart, Dietitians NZ president at the time, commented that we embrace the new expression of our being: our faith in each other, our hope for the future and our support for each other and the people of Aotearoa.

The te reo byline has appeared as a proud and integral part of the logo of Dietitians New Zealand ever since.

TE KAHUI MANUKURA O KAI ORA (TE KAHUI)

The Dietitians NZ Māori Dietitians Group, Te Kahui Manukura o Kai Ora, was formed in 2010. The first convener of the group was Hiki Pihema, and the first planning meeting in March 2011 welcomed 12 Māori dietitians. Current active membership of the group is seven, although there is a growing number of members identifying as Māori.

The aim of Te Kahui is to support Māori dietitians and this has been achieved with bi-monthly teleconferences, mentoring and supporting Māori dietetic students, providing support with extra professional development activities and undertakings that are asked of members outside their usual professional roles. The group is keen to increase its membership of dietitians identifying as Māori. The more members, the more Te Kahui can do and the more Māori dietitians are advanced and valued as a part of Dietitians NZ.

The executive committee for the 2010/2011 year invited the Māori dietitians to appoint a representative with observer status to attend its meetings. Hiki, as convener filled this role.

With the change to the governance model, priority was given to the make-up of the skills-based Council. In light of Dietitians NZ’s commitment to our Tiriti o Waitangi principles of participation, protection and partnership, Te Kahui Manukura o Kai Ora is entitled to appoint one councillor to the Council. The councillor appointed by Te Kahui is not required to be a member of Dietitians NZ. Chelsea Marsh was the first person to fill this role in 2015, followed by Rhianne Jones in 2016.

Current members include Britanni Beavis (Ngāi Raukawa), Nadia Harvey, Rhianne Jones (Ngāi Kahungunu), Chelsea Marsh, Hiki Pihema (Ngāti Porou), Tracy Perry (Ngāti Porou, Waikato, Ngāti Waiere), and Sian Warriner.

Hiki Pihema

TE WHANAU A RUATAUPARE, NO TOKOMARU BAY, NGĀTI POROU

Hiki comments that being a dietitian is important to her because ‘I can be Māori and practise all those tikanga values that essentially make me who I am. Over the years with growing confidence and maturity I carry my Māoriness and being a dietitian with pride, knowing that my colleagues and the profession support and encourage me.’

She considers the highlights of her career have been the variety of roles that she has been fortunate to experience and that contributed to her being awarded the Dietitians NZ Award of Excellence in 1994. Her work has spanned the local level to tertiary education and government policy. Working for Tairawhiti DHB in the East Coast, a beautiful and remote area of NZ, she has contributed to substantial health gains for the local people. Her endeavours include co-ordinating a training programme for marae cooks, training health workers from Plunket, Tūranga Health, Tūhono Whānau and Te Runanga o Ngāti Porou as well as liaising with the Māori Women’s Welfare League to build capacity and capability.

Hiki has been a director on the Board of Food Standards Australia New Zealand and worked with student dietitians as a professional placement fellow for Otago University in the Interprofessional Education Programme. She was appointed to the Dietitians Board in 2015 and elected to the Hauora Tairawhiti DHB Board in October 2016.

Hiki Pihema has been a true trail blazer during her 42 year career as a dietitian and has displayed great mana in all she has done. Hiki works with grace and dignity and is an inspiration to dietitians, both Māori and Pākehā.
THE DIETITIANS BOARD - TE MANA TOHUNGAR MĀTAI KAI

The Dietitians Board, formed in 1951, is the registration body for dietitians practising in New Zealand. It was funded as part of the Department of Health until 1990. The then Labour Government determined that all occupational health boards should fund their activities from fees. Full cost recovery was phased in over two years, and dietitians saw their annual practising certificate (APC) fees increase four-fold (to $224) in the 1993-94 year. At the same time the requirement for the registrar to be a registered dietitian was rescinded and it was incumbent on the Board to appoint a registrar and a deputy registrar. The Board now sets its fees to cover activity, premises and staff and, when relevant, disciplinary levies.

In 1999, an amendment to the Dietitians Act 1950 gave the Board the power as a body corporate, with the ability to choose how to administer itself, rather than being administered by the Ministry of Health. In 2000, the Board reduced its size from 11 to seven members.

The introduction of the Health Practitioners Competence Assurance (HPCA) Act in 2003 saw the repeal of the Dietitians Act 1950. The Dietitians Board became a responsible authority with responsibility to ensure registered practitioners were fully competent and safe to practise.

TRAINING OF DIETITIANS

As previously stated, in 2012 the Board approved University of Otago and Massey University Masters Programmes, Master of Dietetics and Master of Science (Nutrition and Dietetics) and the University of Auckland Master in Health Sciences in Nutrition and Dietetics in 2013.

OVERSEAS TRAINED DIETITIANS

The Board is also responsible for assessing and examining overseas applicants for registration in New Zealand.

DIETITIAN PRESCRIBERS

The ability for dietitians to prescribe special foods and medicines accessed through PHARMAC followed discussion with representatives from the Ministry of Health. PHARMAC, the Board, and the dietetic profession. Prescribing rights were obtained in 2010, and the Dietitians Board runs prescriber training courses and regular updates. Since 2011, dietitians with a prescribing endorsement on their annual practising certificate are able to prescribe special foods and approved nutrition-related medicines.

CODE OF ETHICS

Dietitians have operated under a code of ethics since 1953. In the last 25 years, the code of ethics was reviewed in 1994, and repealed in 2007. The Association had adopted the two sets of ethics – the Dietitians Board 2003 ‘Code of Ethics for Dietitians’ and the Royal Society of NZ ‘Code of Professional Standards and Ethics’, also 2003. The most recent revision of the code of ethics and conduct for dietitians was developed in 2014. With the expansion of dietetic practice into the community, private practice and industry, the new code included the clause: ‘Dietitians advertise products, brands and services only in a manner that protects and supports the health and wellbeing of the New Zealand public, and is supportive of the Ministry of Health food and nutrition guidelines, whilst also upholding the integrity of the profession.’

CONTINUING COMPETENCE

The Dietitians Board is highly committed to the continuing competence programme, as this is consistent with the Board’s legislative responsibility to the public to ensure the safety of dietetic practice in New Zealand. With the introduction of the Health Practitioners Competence Assurance Act, the Board, was required to operate a continuing competence programme (developed with NZDA) to maintain, examine or improve the competence of dietitians to practise their profession. Evidence of continuing competence is required to attain an annual practising certificate. An auditing programme was set up and 10% of practising dietitians were randomly selected. The first audit took place in October 2004.

MYCCP

In the 2010/2011 year, the on-line continuing competence tool programme (MyCCP) was introduced and this continues to assist dietitians in developing their professional development plans and maintaining their competence for practice in the dietetic workplace.

THE DIETITIANS BOARD CHAIR

Since 1981, a dietitian has chaired the Dietitians Board. The first dietitian chair was Pamela Williams. At this time, membership of dietitians on the Board increased from two to five. (There were six other members nominated by the Department of Health). As at 2018, the Dietitians Board is made up of six dietitians and two lay members. Since 1993, previous chairs have been: Barbara Ryan, Eruera Maxted, Jane Cartwright, Janelle Wallace, Lyn Gillanders, Mary McNab, Sandy Clemett and Vicky Campbell. The chair in 2018 is Laila Cooper.

DIETITIANS SCOPE OF PRACTICE

Dietitians are registered health practitioners who evaluate scientific evidence about food and nutrition and translate it into practical strategies. Dietitians work in partnership with individuals, whanau, communities and populations, in states of health and disease, to support optimal health and well-being.

Dietitians use their dietetic knowledge, skills and judgement in a variety of contexts that include promoting and protecting public health, directing and delivering medical nutrition therapy services, and managing food and health systems. They may perform a variety of functions, including policy development, leadership, management, research, education, and communication roles.

Dietitians with a prescribing endorsement are able to prescribe Special Foods and approved nutrition-related medicines.

Dietitians are accountable for ensuring that their practice is consistent with the Dietitians Board’s competency requirements, Code of Ethics and Conduct, and relevant legislation.

August 2017
Since 1993, there have been major changes in the delivery of dietetic training programmes in New Zealand. A Government initiative to rationalise the training of health professionals and move training programmes from Vote: Health to Vote: Education impacted on the training of many health professional groups at that time.

1993 saw the introduction of the University of Otago Postgraduate Diploma in Dietetics (PGDipDiet). This 15-month course saw student dietitians based in one of five training centres (Auckland, Waikato, Wellington, Christchurch, and Dunedin) for the practical component of their training. The lecture programme was delivered to all centres via the University’s distance teaching network. The University was charged with meeting the requirements of the Dietitians Board within the parameters of appropriate academic standards.

The PGDipDiet programme was led by the Director, Penny Field and about 34 students qualified each year. The last students of the University of Otago PGDipDiet graduated in May 2012.

Two-year Masters programmes in Dietetics were introduced in 2012. These are the University of Otago Master of Dietetics with programme directors Dr Julie Weaver, and in 2018, Sue MacDonell, PhD Candidate, and Massey University Master of Science (Nutrition and Dietetics) with programme director, Dr Rozanne Kruger.

This was followed in 2013 by the University of Auckland Master of Health Science in Nutrition and Dietetics with programme director, Dr Clare Wall.

Twice as many students are trained nationwide than in the PGDipDiet days. Dietetic graduates meet the New Zealand Dietitians Board requirements for registration equipping them for diverse roles in healthcare within and outside the traditional hospital environment and in research.

Julia Sekula
Julia graduated as a dietitian in 2002 and began working at Waikato Hospital with Janelle Wallace, whom she describes as a key dietetic influence in her early career. She moved to London in 2004 and worked at The Royal Free Hospital for two years before coming back to work at Auckland City Hospital in 2006 as a senior renal dietitian and later in oncology in a part clinical-part project role. In 2007 with encouragement from Kerry McIlroy (Auckland District Health Board) and Clare Wall, University of Auckland, Julia started her MHSc. She was the first Auckland District Health Board dietitian to complete...
her MHSc while working full time. In 2014, Julia joined the University of Auckland as the clinical director and leader of teaching and learning practices in the nutrition and dietetic clinic environment. She ran the clinic for final year students, primarily focusing on the development of their counselling and education skills and core competencies of communication, professionalism and cultural competence. The work done at the university on inter-professional practice has helped develop their dietetic teaching programme. Julia has presented on inter-professional practice at the Dietitians Association of Australia Conference and this work has subsequently been published.

Julia was a recipient of the University of Auckland Vice-Chancellor’s Strategic Development Fund in 2015. For a dietitian within the academic setting to be awarded this prestigious funding is an acknowledgment of how well dietetics is regarded within the university.

Julia has been a member of the Dietitians NZ Professional Supervision working group and was a working party member of Practice-based Evidence in Nutrition (PEN) for two years. She has been an Auckland Branch president, vice president and a member of the professional development committee and a committee member of the Waikato Branch.

She has been the international representative on the American Academy of Nutrition and Dietetics Health Information Infrastructure committee since 2016, and was a member of the British Dietetic Association Ethnic Diet Sheets committee for two years.

**PROFESSIONAL SUPERVISION**

Vicki Paulin took a leading role in introducing professional supervision for dietitians and in 2003 she introduced it to the Counties Manukau District Health Board clinical dietitian team. At this time, Vicki analysed the understanding and experience of professional supervision in a sample of dietitians, and this was published in 2010. Dietitians NZ published their first supervision guidelines in 2009; these were endorsed by the Dietitians Board the following year.

In 2017, Dietitians NZ launched new guidelines for professional supervision. A baseline Dietitians NZ online survey showed that in 2016, 75% of dietitians were receiving either professional or clinical supervision. The remaining 25% was either having no supervision or receiving mentoring, practice and/or prescribing supervision.

The guidelines were prepared by a working group comprising Frances Arenhold, Julia Sekula, Kristin Ryan, Marion van Oeveren and Rena Fausett. They provide an overview of the process and the steps of professional supervision to assist both those who are new to supervision and those who are reviewing or updating their current professional supervision. Dietitians are encouraged to apply the professional supervision guidelines to their own professional contexts and requirements.

**DISTRICT HEALTH BOARDS**

**DIETITIANS LEADERSHIP GROUP**

The District Health Boards leadership group is vital to all dietitians who have a leadership role in District Health Boards, including line managers, section heads, professional leaders and those in sole charge positions. In 2003, Jo Stewart from Capital and Coast District Health Board, initiated national leadership meetings for District Health Board dietitians and chaired the group for 10 years. The purpose of the group is to provide a national forum, training and opportunities for networking, collaboration and support among dietitian leaders from the District Health Boards.

Subsequent chairs have been Claire Tahu (Auckland) and Deborah Chettleburgh (Hawke’s Bay). Helen Little (Christchurch) has held this role since 2017.

Agenda topics for the 2017 meeting included: strategic planning, national menu standards, malnutrition policy for all District Health Boards, standards of care, fluid and nutrition policy, allied health minimum data set, international dysphagia diet standardisation, workplace management tool, career progression, dietetic assistants, liaison with PHARMAC regarding medical devices and special foods, and liaison with Dietitians Board and dietetic training schools. The group acknowledges and is grateful to Nutricia for providing ongoing sponsorship for members to attend these highly valued meetings.

**Jo Stewart**

Jo has enjoyed diverse roles as a dietitian and in 1993 managed the clinical dietitians at Hutt Valley Health. Her own specialty areas were burns and plastics, paediatrics and diabetes across all age groups. She was actively involved in the Diabetes Special Interest Group (SIG) of Dietitians NZ and chaired this group for several years. Jo was also an executive committee member of New Zealand Society for the Study of Diabetes (NZSSD) and Dietitians NZ Wellington Branch, becoming president of the latter in 1998. Jo has been involved in the organisation of several dietetic conferences/national meetings over the last 25 years, including the 2017 national meeting, and has been a regular presenter.

She was the inaugural dietetic professional adviser (later professional leader) in Capital and Coast District Health Board, and continues in this role. She works with five dietitian team leaders across the District Health Board and has a clinical caseload in cardio-thoracic and general surgery at Wellington Hospital. This is consistent with her belief that “it is important to maintain a clinical role to keep things real with a clear understanding of issues in clinical practice.” Jo is involved in policy development and review and the provision of advice around contracts. An achievement has been the
opportunity to advise on the establishment of a dietitian position in the Mental Health, Addiction and Intellectual Disability Service. Jo was on the special purpose foods sub-committee of PHARMAC for 15 years and appreciated being able to be involved in decision making around the listing of products. She now comments on the enormous difference that being a prescribing dietitian has made to her practice. We can provide timely prescriptions, targeted to the right patient, in the right amounts. It encourages conversations between junior medical staff and dietitians, and better prescribing practice overall.

She is currently involved in the patient safety indicator group based around the Health Quality and Safety Commission’s work on falls risk and pressure injuries and has assisted in keeping a DHB focus on the risk that malnutrition poses. She represents allied health on the ‘Choose Wisely’ group which meets fortnightly to discuss key projects. A recent major project has been looking at total parenteral nutrition (TPN) usage across the DHB and establishing a new process to ensure appropriate referral and usage.

For the last three years, Jo has been a member of the University of Otago Dietetic Programme external advisory committee that meets annually and has a varied professional membership to ensure that training is meeting the ongoing needs of the profession.

ONE of the key achievements of the 3rd quarter century was upgrading the image of the organisation. The name New Zealand Dietetic Association (NZDA) had served us well for 50 years, but many of the public were confused about what a dietetic association did. The logo had not changed over the years and was in need of refreshing.

In 1995 members took part in surveys conducted by the NZDA and the University of Otago, and a public survey was conducted by an external marketing company. The results were used to develop, consult and complete a marketing plan by a committee under the chairmanship of Julie Lowe. The plan called for an improvement of the image and work began on a new logo and name for the NZDA.

The marketing plan was ratified in 1997 and Vicki Clarke appointed as national coordinator to begin its implementation. A new logo was adopted specifically for marketing the NZDA’s role in professional matters.

The NZDA officially launched the new logo in 2000. The final design retained the wheat and barley sheaf and the serpents of Aescapulus because that was seen as integral to being a dietitian. This was followed by guidelines for logo use being released and members were offered an extra service of a business card with the new NZDA logo.

THE JOURNAL OF THE NEW ZEALAND DIETETIC ASSOCIATION (JNZDIETASSOC)

1993. The journal continued to be a peer-reviewed journal, where New Zealand dietitians could publish their research, practice initiatives or opinion pieces. The A4 format, introduced in 1991 reflected the new NZDA corporate image. By this time, about 30% of the cost of producing the journal was met by advertising revenue.

1996–2006. In association with the journal, the NZDA published official annual conference proceedings.


2004. The NZDA executive committee decided to enter a partnership with DAA and to adopt Nutrition & Dietetics as the official journal of the NZDA. There were advantages and disadvantages seen with this arrangement; advantages included a wider readership for New Zealand authors, the possibility of Medline indexing, and a greater number and diversity of articles. Disadvantages included the loss of New Zealand content and/or editorial control.

2005. The last issue of JNZDietAssoc volume 59, number 2, was published. From December, the journal was incorporated into Nutrition & Dietetics, by-lined as ‘The Journal of the Dietitians Association of Australia including the Journal of the New Zealand Dietetic Association’. The NZDA logo appeared on the cover of the Journal along with those of Dietitians Association of Australia (DAA) and Blackwell (the publishing company). The partnership with DAA included NZDA/Dietitians NZ membership on the journal management committee and participation on the editorial board. Later, appropriately qualified New Zealand dietitians were appointed as associate editors.


2014. The Dietitians NZ executive committee resolved not to renew the contract due to financial constraints, and the partnership between Dietitians NZ and DAA in Nutrition & Dietetics ceased. Four New Zealand dietitians, Carol Wham, Jane Elmslie, Clare Wall and Andrea Braakhuis, remain as associate editors in their own right.

The Journal existed for 68 years including its incorporation with Nutrition & Dietetics. For the past five years, New Zealand dietitians have not had their own scientific journal and have sought other peer-reviewed publications to publish their research.
In 2018, News & Views became a quarterly publication. Issue 234 will be published in December and News & Views will achieve 56 years of unbroken publication.

THE WEBSITE – HTTPS://DIETITIANS.ORG.NZ

1998, Vicki Clarke, NZDA national coordinator, investigated internet facilities and opportunities. By 1999, the development of a website was well underway.

1999–2000, Sarah Ley assisted with research, development and writing for the website, and plans from various web designers were reviewed. Simone Bell, a student with a public relations company created the website as her student practicum and followed up any difficulties in the early stages of live operation.

2000, Website launched at a function in Wellington.

2001, Sarah Ley appointed as the NZDA’s website editor, overseeing the website and assisting members with queries and passwords and loading documents.

2002–2003, A website editorial group was established with a new editor, Nicky Moore, and continued to administer the website, planning for new additions.

2004, An online membership directory included in the members section of the website. Updates on the website were carried out by Carole Gibb, executive officer and later Jan Milne, executive director. Website traffic doubled in the 2004–2005 year. The addition of the evidence-based guidelines project to the members’ pages and the subsequent access by members confirmed the worth of continuing to hold a database of research in the members’ section of the website.

2007–2008, The website had a major upgrade. This included the ability for members to renew subscriptions and register for conference online, and a link for video footage. The news blog was added and used to state NZDA views on food and nutrition and to post media releases. New fact sheets were added to the website to expand the resources and information available to the general public.

2011, The website had a complete redesign with a new hosting arrangement. The website now provided a platform for practice-based evidence in nutrition (PEN), the international dietetics and nutrition terminology (IDNT), and the Journal. By this time, Nutrition & Dietetics was provided as an online publication only to Dietitians NZ members. New material and resources continued to be added to the website over this time.

2016–2017, The website was under reconstruction. The brief of the redesign was to ensure the best possible website resource for members and a strong public platform to profile and promote Dietitians NZ and the dietetic profession. The website went live in 2017.

TECHNOLOGY

Today in 2018, dietitians might wonder how their predecessors existed before the advent of so many of the electronic tools that assist current practice: tools such as blood glucose monitors, automatic messaging systems to remind patients of appointments, rather than a direct phone call; use of tablets at the bedside/in clinics and for menu selections in hospitals, pedometers, electronic scales and bioelectrical impedance to calculate body fat percentages, not to mention mobile phones with the plethora of functions they allow!

At the beginning of this quarter of the organisation’s history, we were on the cusp of an explosion of new technology. In the early 1990s the electric typewriter and the computer with printers that printed dot matrix on a continuous feed of paper were common. Students studying for the new University of Otago Postgraduate Diploma in Dietetics (PGDipDiet) had to share the use of one computer in each of five training centres. Facsimiles (faxes) were used for quick communication among the nationwide tutor team and the director in Dunedin.

Fast forward to the 20-teens and online technology. Dietitians record their continuing competence programme
Digital information sharing has revolutionised the ways in which teaching can be delivered. The ability to keep in touch instantly has enabled access to continuing education opportunities, such as online webinars and podcasts.

The electronic age has made the sharing of resources and ideas easier, using techniques such as dropbox and videoconferencing. Today some dietitians are using Skype as a means of counselling clients, making it easier and more accessible for both parties.

In 2013, following the devastating Christchurch earthquakes, private practitioner Lea Stening decided to close her physical clinics and work totally online. This involved learning more about social media, online advertising, screen sharing. The move has allowed Lea to extend her reach to clients in rural New Zealand and overseas, and sits well with busy people who are computer savvy but time poor. Children, who are always accompanied by a parent, like being able to talk to Lea from familiar surroundings and not having to endure sitting in waiting rooms or traffic to get to an appointment. Using Skype has enabled Lea to extend her educational services, offering powerpoint presentations on healthy eating to school children in Erbil, Northern Iraq, and Khartoum, Sudan.

In 2016, technology came to the 11th edition of the Clinical Handbook, and it is now available as an e-book. This is a credit to editor Anna Sloan who worked tirelessly to ensure it worked, and was as useful as an e-book as was the hard copy of the 10 previous editions.

The ‘electronic age’ is here and the huge amount of food and nutrition information now available online brings challenges as well as opportunities for dietitians. It is important for dietitians today to have the skills to evaluate the information accessed by clients to be able to help them determine what is reliable information, and what may be suspect. It is also important that dietitians continue to grow their online reputation as highly qualified, credible food and nutrition experts who are able to ‘rise above the noise’ of unqualified practitioners.

**THE MEDIA SPECIAL INTEREST GROUP**

In the last 25 years, dietitians have had a media presence. This was at its zenith when Amanda Wynne was national executive officer from 2001-2003. Amanda had previously worked for the British Nutrition Foundation (BNF) where a dietitian was rostered to speak to the media on a daily basis. Amanda had nutritional science at her fingertips and was able to speak knowledgeably and at an accessible level. Amanda was followed by Carole Gibb as executive officer and Jan Milne as executive director who were also dietitians. They also spoke pertinently and promptly on topical issues, assisted by dietitians with specific expertise. However, as the nutrition environment became increasingly flooded with mixed messages, the NZDA/Dietitians NZ voice became less forceful and struggled to be heard.

To address this, the Media Special Interest Group (SIG) was established in March 2015 and convened by Angela Berrill. The SIG established a working group to develop the Dietitians NZ media strategy. It was considered that much more could be achieved with a collaborative and coordinated approach to improve the visibility of dietitians and Dietitians NZ.

The objectives of the Media SIG have been to actively respond in a timely, efficient and accurate manner to media queries and issues, to profile the expertise, initiatives, activities and achievements of members, and to combat misinformation. This included making complaints when media organisations present erroneous information. Dietitians NZ media links have been actively encouraged to build rapport with local media personnel, so to become the ‘go-to’ person when a nutrition-related story breaks.

The Media SIG has also implemented a communication engagement plan with media and health professional publications.
including New Zealand Doctor. A monthly newsletter is circulated to media links with tips to help increase their competence and motivation in dealing with the media. An @DietitiansNZ account on Instagram, launched at the 2016 national meeting, has gained momentum, and a closed Facebook forum has provided a platform for discussion by an increasing number of members.

Lea Stening, convener since 2017, has been the media link for Canterbury since the 1980s. She and colleague Janice Bremer wrote regular columns for the Press for many years, and Lea had a regular slot on Radio ZB and Canterbury TV. As a media link, she formed useful links with local media and on many occasions responded to requests for comment on the nutrition stories of the day.

Looking to the future, the Media SIG is working with national office to open up the Dietitians NZ website to include a ‘blog’ section for dietitians, and a ‘meet our people’ section to profile dietitians and the work they do around New Zealand.

**DIETITIANS DAY**

International Dietitians Day was first celebrated in 2008 to honour and to raise the profile of all dietitians, and to encourage and attract others to the profession to help shape the future of eating and healthy living.

Dietitians NZ first joined their international colleagues in celebrating this special day in 2013, highlighting the theme ‘Eat right, your way, every day.’ Since then, dietitians here have made an annual feature of the day to raise their profile in the workplace and in the community. In 2014, the international theme was ‘Enjoy the taste of eating right.’ In 2016, when the International Congress of Dietetic Associations decided not to observe an international day, Dietitians NZ celebrated its own day. The primary goal of Dietitians Day in New Zealand was to raise awareness of registered dietitians as the key nutrition experts who translate the science of nutrition into practical use for the benefit of the public.

In 2017, Dietitians NZ celebrated with the Dietitians Association of Australia, under the theme ‘#Proud to be a Dietitian.’ This year, 2018, Dietitians NZ aligned with Dietitians of Canada to ‘Unlock the potential of food.’ Media SIG convener Lea Stening, who has been a driver of the 2018 Dietitians Day in New Zealand says “Dietitians are aware that food is not just a bunch of nutrients. Food is about enjoyment of life, traditions, culture, love, sharing and coming together, having fun, celebrating, comforting, mental and spiritual wellness. On many levels dietitians can help people to unlock the power of food to improve health and enrich their lives.”
WAITEMATA DISTRICT HEALTH BOARD DIETITIANS AND DIETITIANS DAY

Waitemata dietitians have a great team spirit, typical of so many regional dietetic teams. As part of the 2017 Dietitians Day observation, where the theme was ‘#Proud to be a Dietitian’, they shared some of their reasons for choosing a career in dietetics, some highlights of their dietetic experiences and some thoughts for future possibilities in Dietitians NZ’s 75th Jubilee year.

For Elize Van Drimmelen, bariatric dietitian, the choice of career came via an interest in nutritional genomics stemming from personal health issues. This led her from biochemical engineering to finishing a science degree majoring in nutrition. After summer studentships at universities and research institutes, Elize realised she wanted a job where she was interacting with people, so she decided to do her MDiet.

Maria Casale, outpatient dietitian, chose dietetics as a career after working too long in an industry she just didn’t enjoy, and realising that life is too short to do that. She has a passion for food and nutrition, and wanted to be able to really make a difference to people’s lives, and so training as a dietitian was an obvious choice, and she couldn’t be happier in her job.

A career highlight for Fiona Baggett, diabetes dietitian, was working in diabetes and being involved in the pilot contract for Te Hononga Oranga (Māori diabetes service) with its specific focus on improving Māori health engagement and outcomes in diabetes. She believes she has been given a great opportunity to not only work in the area of Māori health but also raise the profile of dietitians as being an important part of whanau ora model of care in diabetes.

For Roslyn Norrie, foodservice contract dietitian, the chance to see superhuman sports stars at close quarters when she worked at the London 2012 Olympics was a highpoint. As one of a handful of dietitians there, her role was to provide food knowledge and expertise in allergen communication.

The highlight for Andrea Herron, paediatric dietitian, was working as a dietitian abroad for 13 years, including three years in the United Arab Emirates.

Paediatric dietetics clinical leader, Elizabeth Maritz’s huge career highlight is the family centred tube feeding to weaning project she has been involved with. This innovative co-design between families and the multidisciplinary team (MDT) will see the development of a collaborative MDT approach across services and divisions in the tube feeding to weaning journey that will empower families in Waitemata District Health Board on this complex journey.

Laura Petitt, community dietitian, home health and older adults, and paediatrics, would like to see the profession of dietetics become more involved with primary care and preventive medicine. If patients’ nutritional status improves, they will have a reduced rate of long stay hospital admissions.

When asked to look ahead to the future, Teresa Stanbrook, professional and clinical leader Dietetics, sees the possibility of dietitians holding more roles in foodservice management across New Zealand where their advanced clinical knowledge of nutrition and disease can be employed. Teresa has also been involved in the joint study currently underway with Massey University and Waitemata District Health Board on the incidence of malnutrition in the Board’s 65 years and over population. The results of this study will provide New Zealand based evidence on the incidence of malnutrition in our elderly. Dietitians are trained to diagnose and treat malnutrition.

Dietetic Communications Adviser

The decision to employ people with governance and operational experience and skills to manage Dietitians NZ resulted in a lack of professional dietetic presence in national office. In 2017, a part-time dietetic communications adviser (DCA) position was established to provide dietetic advice to the office staff on the development of materials for Dietitians NZ publications including the regular e-newsletter to members, News & Views and the website. The DCA was also responsible for working in collaboration with Special Interest Group conveners in the preparation of public submissions, and Dietitians NZ position and media statements as required. Louise Beckingsdale established and held the position between April 2017 – February 2018 and worked remotely from Christchurch.

Dietitians NZ Representation on External Agencies

For many years, Dietitians NZ has been represented by members on various external organisations. This is a two way process where dietitians contribute their expertise and in turn alert Dietitians NZ to opportunities for further engagement with external agencies such as supporting a submission, picking up on topical issues or other activities that encourage collaboration between the Dietitians NZ membership and the external agency.
DIETITIANS NZ CURRENT REPRESENTATIVES ARE:

- Accident Compensation Corporation: Nikki Hudson
- Activity and Nutrition Aotearoa: Sophie Garty
- Allied Health Aotearoa NZ: Alison Pask
- American Academy of Nutrition and Dietetics (AND) Health Infrastructure Committee: Julia Sekula
- Dietitians Association of Australia (DAA) Food Regulations Advisory Committee: Rhodi Bulloch
- DAA Renal SIG: Lyn Lloyd
- Massey University Auckland Advisory Board: Andrew Xia.
- Ministry of Health Mobility in Action: Anna Barnett
- Ministry of Primary Industries Food and Beverage Forum: Roslyn Norrie
- Nutrition Care Process and Terminology Development Committee: Lyn Lloyd
- Practice-based Evidence in Nutrition Advisory Committee: Rebecca McCarroll and Rozanne Kruger
- University of Auckland Dietetics Curriculum Development Committee Board of Studies: Donnell Alexander
- University of Otago Master of Dietetics Curriculum Development Committee: Annette Nistor

PARTNERS AND SPONSORS 1993–2018

In 1990, the NZDA established a new corporate membership category with a range of benefits for companies that supported the organisation in this way. This membership category ceased in 2009, but over this time, 42 businesses joined. By 2009, there were 19 corporate members.

Benefits for corporate members included access to specialist dietetic and nutrition information, joint ventures with the NZDA, discounted rates for journal advertising and conference trade displays, and contact with members.

In 2010, Dietitians NZ introduced corporate partners, subscribers and sponsors. Since this time Dietitians NZ introduced guidelines for assessing and managing risk in external relationships (GAMRER). This process ensures that there is no conflict of interest in the relationship between an external organisation wishing to support the organisation and Dietitians NZ itself.

Dietitians NZ is always most appreciative of the ongoing relationship it has with its partners, subscribers and sponsors. Many organisations have supported Dietitians NZ over the last 25 years, and have assisted it by providing sponsorship for awards and major projects, support for continuing education/professional development events, and up-to-date information of products of professional interest to dietitians through written material or exhibitor displays at conferences and national meetings. Special mention must be made of Abbott Nutrition, for its continued support over the last 25 years.

ARCHIVIST

In 1996, the NZDA appointed its first archivist, Bernice Kelly. Bernice is well-known for her attention to detail, and as the organisation has grown, so has the accumulation of paper records. Bernice was the perfect person to organise the records and other items of importance to the history of Dietitians NZ. Journals, News & Views, minutes of AGMs and executive committee meetings, reports, awards, photographs and mementos were all meticulously documented and held in ‘The Store’, a self storage unit in Brooklyn, Wellington. An important role of the archivist has been to provide background information to the executive committee for professional matters under consideration. She has dealt with requests for assistance with material for obituaries of long-standing members, and a key activity at the time of the NZDA’s 60th Jubilee in 2003 was the development of a photographic record of significant achievements, events and honoured members for a poster display at the Jubilee Conference. Bernice retired from this position in 2017, and the role was taken over by Barbara Stet.

THE GENDER BALANCE THROUGH THE AGES

Dietetics in New Zealand was an exclusively female occupation until the mid-1980s when Dennis Edmondson entered the training programme in Christchurch.

When the University of Otago’s School of Home Science was renamed the Department of Consumer and Applied Science in the 1980s with greater flexibility in its degree structure, male students found the route to dietetics a viable option. Since the mid 1980s, a constant stream of male colleagues has entered the profession. Many are notable for their achievements including Paul Rigby, deputy chair of the first Dietitians NZ Council, David Roberts, a Nestlé young achiever and national dietitian for the Heart Foundation for nine years and currently nutritionist with the NZ Food Safety Authority. Jason Beyers was invited by Vanessa Shaw, editor of Clinical Paediatric Dietetics, to review and rewrite the Liver and Pancreas chapter for the 4th (2014) edition; Eruera Maxted, chair of the NZ Dietitians Board; Richard Swinbourne, PhD; David Shaw, PhD in the making; Dave Monro has been with the NZ Heart Foundation for 16 years and is currently food and nutrition manager; Mark Leydon, specialist diabetes dietitian at Waikato DHB for many years; Tom Shand, convener of the Sports SIG and dietitian, Trailblazer Nutrition. Chirac Jivanji, a 2017 graduate, was awarded the University of Auckland Fowlds Memorial Award for the most distinguished Masters Student in the Faculty of Medical and Health Sciences. The first male dietitian, Dennis Edmondson has made a name for himself as a dietitian involved with HIV/AIDS in the UK and with the British Dietetic Association.
BY 2018, Dietitians NZ had seven branches, one more than in 1993, 25 years ago. The newest was Northern South Island, established in 1993.

AUCKLAND BRANCH
This was originally formed in 1948, but folded in 1956. It reformed in 1973, under president Gillian Tustin and vice-president Kerry McIlroy. Since then it has been very active in providing a vehicle for continuing education (CE) for its members. In 1993, the Branch hosted the very successful Golden (50th) Jubilee of the NZDA.

In 1998 there were over 100 members of the Auckland Branch and by 2014 the membership was 270.

Over the years, CE events have been a key feature of the branch’s annual activities. These were held approximately monthly and since 2015 there have been six per year. The branch appreciates the generous sponsorship it has received to support these events. To make the most of advanced technology in 1995, the branch bought a radio telephone to improve the recording of CE sessions for those unable to attend.

Support for student dietitians is a key focus for the branch, and every year, at least one continuing education event is focused on students’ practicums, research projects and/or literature reviews. The branch hosts welcome events for students from both training schools in the region to provide important social and networking opportunities.

The branch has participated in a number of public events, raising the profile of dietitians in the area, and has hosted three national conferences since 1993 including the 2nd South West Pacific Dietetic Conference ‘Pacific Partners in Nutrition’ in 1999. As the branch moves into its 45th year, and under the presidency of Tracy Coote, it will again be the host branch for Dietitians NZ’s 75th Jubilee Conference ‘Remember the Past: Prepare for the Future’.

The branch communicates by a monthly newsletter. The invaluable, obliging and efficient administrative support of the branch by Anne Fortune has been acknowledged in the annual report. Until recently, Anne formatted the newsletter and maintained the branch database.

Tracy Coote
Tracy is the chair of Dietitians NZ’s 75th Jubilee Conference planning committee, and convener of the programme subcommittee. She is looking forward to welcoming delegates and sponsors to Auckland for a thought-provoking scientific programme, exciting social events and networking opportunities.

Tracy graduated PGDipDiet in 2003 and has spent most of her working life in paediatric dietetic roles. She has led the development of paediatric obesity services at Counties Manukau District Health Board and in the UK. Initially these were pilot programmes with fixed funding. The pilots in both situations showed there was a definite need for the service and permanent services evolved.

As Dietitians NZ Auckland Branch president for the past four years, Tracy has worked to increase engagement of members with Dietitians NZ through branch activities, networking and professional development. Tracy’s strong leadership over the last few years has been greatly valued.

Nicola Hartley
Nicola trained as a medical laboratory scientist and worked in London and Auckland. She was in a team meeting discussing lab results when she realised she wanted to work with real people, not just their paper results.

It seemed an obvious choice for Nicola to train as a dietitian for her second career, combining her love of food with how it affects people to improve their well-being. In 2014 she graduated with a Master of Dietetics (Otago) with distinction. Nicola has worked as a clinical dietitian at Auckland City Hospital for the past four years, in a variety of specialist areas including oncology, haematology and renal. She is currently working in the New Zealand Liver transplant service and speciality areas of parenteral nutrition and upper GI surgery.

Nicola is active in the Dietitians NZ Auckland Branch and is currently vice president. She is a member of the 75th Jubilee Conference planning committee.

THE WELLINGTON BRANCH AND REGION
The Wellington Branch of Dietitians NZ covers the Wellington, Kapiti, Hutt Valley and Wairarapa regions and in 2017, had a membership of over fifty. Since it was formed in 1981, it has supported members by providing professional development and networking opportunities as well as an annual Christmas event. Wellington has been home to student dietitians for many years, and currently under president Tania Don, the branch continues to support students and the many dietitians who work within and outside the District Health Board (DHB) sector. A professional development fund assists local members to attend professional development activities.

Wellington regional dietitians can also be found working in private practice, the Ministry of Health, the Ministry of Primary Industries, Primary Health Organisations and Regional Public Health. However the major employers of dietitians in the region are the three district health boards: Capital and Coast (CCDHB), Hutt Valley (HVDHB) and Wairarapa (WDHB).

- WDHB dietitians Max Goodall and Jane Owers provide inpatient and outpatient services across the district.
- HVDHB provides plastics, maxillofacial and rheumatology services for the wider region. Paul Rigby is manager of nutrition and dietetic service and professional leader.
- The Regional Public Health Service is also based at Hutt. Vicki Robinson, Bronwyn Wood and Jane Wylie have worked or are working at this service.
- Both Claire Tahu and Andy Harris...
hold management roles in Hutt Valley Health. Claire is director of allied health, scientific and technical, and Andy manages allied and community service.

- CCDHB comprises the Wellington Regional Hospital in Newtown with secondary and tertiary level services and with Jo Stewart as professional leader; Kenepuru Hospital based in Porirua specialises in older adult and rehabilitation, hosts the regional forensic service, and the Kapiti Health Centre offers dietetic outpatient services. The community dietetic service for the area is also run from this Health Centre.

Although the three District Health Boards are separately funded, the dietetic teams work collaboratively to the same standards of care, nutrition information sheets, and other processes and procedures where it makes sense to do so.

The clinical dietitians’ work in the District Health Board has changed with time. With the increase in the ageing population with increasing co-morbidities, hospital-based dietitians provide services of a higher acuity level for both inpatients and community referrals. Patients with long-term conditions are referred to primary health dietitians so that their care is provided closer to home.

CCDHB introduced a model of professional advisers (now leaders) in 1998. This separated the line management roles from clinical governance aspects of allied health professionals. Under this model, all dietitians reported to one team leader, who looked after standards of clinical practice, documentation, education and training needs. This was followed for nearly 17 years after which it was replaced by the national career and salary progression process and a regional allied health clinical career framework.

CCDHB and WDHB have contracted foodservice providers while HVDB has an in-house patient meal service. Prior to contracting, dietitians were part of the nutrition and dietetic service. At CCDHB, to facilitate communication, a liaison dietitian in the clinical dietetic service regularly meets with foodservice provider management and the foodservice dietitian to discuss issues regarding menus and special diet provision. About nine years ago, CCDHB introduced an electronic meal ordering system that coincided with the opening of the new Wellington Regional Hospital. This proved a time saver for dietitians and reduced the number of faxes required to get meal plans in place. This system is also used at Kenepuru Hospital. A healthy eating policy for staff and patients was introduced into CCDHB about 12 years ago and in the last two years has been adapted to be more consistent with national policies and rolled out across the three local District Health Boards.

WAIKATO/ BAY OF PLENTY BRANCH

The Waikato Branch was established in 1970 by Jocelyn Hampton and was the first official branch of the NZDA. The branch has always been active and in 2018 has 62 members.

Each year the branch holds three professional development events; at least two social events and a fundraiser, sends a branch newsletter out every six weeks, provides an annual professional development award and gives support to relevant local events. The branch continues Jocelyn’s legacy of supporting and enhancing branch members through these activities. The legacy was also seen with the branch supporting the four PGDipDiet students located in the Waikato District Health Board each year from 1993-2012. Anne Marie Farrell was the Waikato based tutor dietitian for many years.

The branch has organised three conferences in the last 25 years including the 60th Jubilee conference held in Rotorua in 2003.

TIM BROSNAHAN

Tim Brosnahan became sole charge dietitian at Masterton Hospital in 1993, part of the newly formed Wairarapa Crown Health Enterprise (WCHE). The work at Masterton Hospital and Greytown Geriatric Hospital (closed in the mid-1990s) was varied with inpatients, outpatients clinics, mental health clients, liaison with the meal service, and clinics in outlying locations such as Featherston. Tim assisted the Wairarapa Public Health Unit by delivering nutrition projects and presentations including for the New Zealand National Heart Foundation and Cancer Society and also achieved a nutrition policy for WCHE. This was Tim’s first job after graduating and while there was no direct dietetic supervision, advice from colleagues in the Wellington area was willingly provided. Tim was able to attend workshops at Hutt, Wellington and Palmerston North Hospitals for his own
professional development. He found this time in the Wairarapa challenging and at times isolated, but very rewarding. Tim left Masterton in 1998 to go to the Greymouth area where he worked until 2002.

CHRISTCHURCH BRANCH

The Christchurch Branch was founded in 1973 and over the years has had some significant achievements. The most well recognised was the production of the ‘Triple Tested Cookbook’. Proceeds from this published 30 years ago have meant that the Christchurch Branch still has money in a trust fund that is allocated twice a year to provide financial assistance to branch members to attend conferences or to help fund further study.

In recent years the branch has created a gmail account and an online drive. This allows correspondence to a central email improving communication for branch members.

Christchurch Branch has 73 members who represent a diversity of dietitians working in different areas with links to various organisations. It is currently led by president Emily Gilchrist. A comprehensive bimonthly newsletter keeps members informed with a president’s report, branch news, conference or study day reports, notifications of forthcoming continuing education (CE) and other related events. The branch organises three major CE events annually, including one with a cultural focus. It has hosted three national conferences in the last 25 years: 1994, 2001 and 2007.

Christchurch has always prided itself on being a great place to work, and the social activities of the profession are important to foster this. Each year the branch hosts student welcomes for Christchurch-based student dietitians and at Christmas, members always celebrate with a fun activity.

CELEBRATING HISTORY!

After the ‘Getting Connected’ national conference in Christchurch in September 2001, the local branch planned a Christchurch Dietitians’ Reunion. By chance, it was 75 years since the first New Zealand dietitian, Edith Reid, was appointed to Christchurch Hospital in 1926. She had gained her dietetic qualifications at Johns Hopkins Hospital in Baltimore. She introduced the use of iodised salt into hospital catering. However, her tenure in Christchurch was not a happy one as she was under the control of the matron. Nurses were reluctant to yield control of foodservice, and her role in the hospital hierarchy was never resolved. She resigned in 1928. It was also almost 60 years since Jean Williams (nee Bell – Dr Muriel Bell’s sister) was appointed chief dietitian in 1942. Jean was a BHSc graduate and registered nurse who completed special training to equip herself to manage the dietary department. Over 70 dietitians, including Jean Williams, attended the reunion, and enjoyed a celebration dinner based on menu items of 1950s and 1960s – cheese straws, breadcase savouries, salted peanuts and toothpick savouries for nibbles; a main course of Argentine steak, Oakhill potatoes, Hunza pie and salads. Dessert was creamy rice and winter fruit compote, and ice cream, chocolate sauce and crunchy topping.
NORTHERN SOUTH ISLAND BRANCH
The Northern South Island Branch was formally established in 1993 and is one of the smallest Dietitians NZ branches. It currently consists of 17 members spread across Nelson, Tasman, Marlborough and the West Coast, and is led by president Anna Verhage.

At one time, it was suggested that the branch merge with Wellington or Christchurch, but members elected to remain as a separate branch and to attend seminars and training days elsewhere. The branch usually holds two study days per year held in Nelson, Blenheim or historically, halfway in between in the Rai Valley. West Coast dietitians join the branch for study days. A recently created tri-annual branch newsletter also helps to connect members.

The Northern South Island Branch has hosted three national conferences – 1987, 1997, and 2011. The 1997 conference featured Professor Jenny Brand-Miller of GI fame, and will be remembered by many members.

Members of note have included Jenny Black and Annette Nistor who have been national presidents and Barbara Ryan who was chair of the Dietitians Board. Annette is currently a member of the Dietitians NZ Council and Jenny is chair of the Nelson Marlborough and West Coast District Health Boards.

Despite the small membership, geographic isolation and large area, members make a considerable effort to contribute to the life of the branch through attendance at study days, social gatherings and sharing of knowledge. As shown above, this is also a branch that punches above its weight!

SOUTHERN BRANCH
The Southern Branch was established in 1992, taking in locations south of the 45th parallel (including Dunedin, Invercargill, Oamaru and Central Otago) and Tracy Bransgrove served as the first president. Early meetings were enhanced by Sadie Andrews’ husband’s radio technology skills. Dunedin members used a phone to link in so that they could contribute without needing to travel.

The branch aims included providing a professional development programme, regular social occasions for networking and also fundraising to resource an annual education award. Fundraising activities have been very successful and the branch has made annual awards of approximately $500. This included selling 6,000 pens printed with dietetic and nutrition messages. Gladys Wong, a colleague from Singapore arranged the purchase and delivery, sometimes in the suitcases of dietitians returning from overseas!

In 1992, an annual study day was initiated that continues to this day. Initially it was held in Gore and thus called the ‘Gore Study Day’. Then followed a period when members met alternately in Balclutha or Gore. More recently a Dunedin venue with teleconference links to Invercargill and Central Otago has been used.

For a number of years Sadie Andrews and Moria Styles produced a local community radio programme ‘Nutrition Moods’. It provided the opportunity for branch members to gain broadcasting experience.

The Southern Branch history of electing mainly young dietitians as committee members has reaped benefits. Members developed new skills early on in their careers and this has kept the branch young, enthusiastic and vibrant. Experienced dietitians have contributed a balance of wisdom and historical perspective.

The branch organised national NZDA conferences in 1990, 1998, 2004, and 2010. These were huge events for a small branch to undertake. However, they took pride in injecting a little Southern hospitality to each one, including a medieval dinner and a local arts and crafts evening supported by some very well recognised local artists.

Louise Fangupo
Oamaru-based dietitian Louise Fangupo began working part-time (16 hours per week) in 2015 as the sole dietitian at Oamaru Hospital. This role incorporated the running of a general outpatient clinic with a smaller amount of inpatient work and liaison with the in-house foodservice.

“There are lots of learning opportunities for sole dietitians in rural areas, because as the only dietitian around, you simply have to step up and learn when a patient with a new or unusual condition presents in clinic or on the ward. Over time you build up a broad knowledge base.” Louise enjoys meeting patients of a range of ages and stages; it’s possible for her to see an infant with a food allergy in one appointment, and a malnourished elderly person in the next. “I really like being able to help people. I try to make sure that everyone who comes into clinic has a good experience and goes away with some useful information and ideas.”

In rural communities there are opportunities to advocate for dietitians to promote healthy lifestyles to reduce nutrition and lifestyle related diseases. “It’s a privilege to be part of a small community and feel that you can really make a difference.”
NORTHLAND REGION

1993 was the beginning of an era of change in dietetics in Northland. Lois Myrshall had been the sole dietitian for many years when Mary McNab replaced her. It was a time when many things in the health industry were changing. One dietitian covered all aspects of dietetic interventions and foodservices in the main hospital and three peripheral hospitals, servicing a population of around 126,000. The role was huge for one person and lonely from a professional perspective.

In 1995 a second dietitian was employed. Since then it has been a long but successful journey increasing the number of dietetic positions in the service-based structure of the District Health Board. This structure has enabled the establishment of a position in the Primary Health Organisation (PHO) and there are now three dietitian positions in the Primary Health Organisation and 16 dietitian positions in the District Health Board hospital and community settings. This, combined with working in multi-disciplinary teams, has certainly worked to the advantage of dietitians. Part of the role of dietitians is to provide education. In Northland, with the low socioeconomic status and low health literacy of the population base, dietitians have adapted their skills to meet the needs and challenges of these population groups. Dietitians are now recognised for contributing as essential members of a team in the planning and provision for the health and wellness of Northlanders. Roles have evolved along with skills into more clinical and technical areas of health. In general, dietitians have become experts in many fields of nutrition where they may have hardly played a role 25 years ago.

In the early 1990s, the dietitian was an important link in the provision of nutritional products. The dietitian undertook to order and manage the supply of nutritional products used in the hospital system and for patients in the community requiring product. If the patient lived in a provincial area, the dietitian would contact the nearest hospital and the patient to confirm the day and time of delivery on the hospital truck. The dietitian was also grateful to the ambulance service for transporting products. Such was the cooperation between departments in a provincial area.

In this era, involvement in the hospital menu was a challenge where dietitian skills and a good knowledge of the large scale catering service were required for each specific hospital site. There was one menu with all the adaptations required at the time. Special diets were made in the diet kitchen and then diet kitchens became defunct. The foodservice went out to contract in 2003 and it is interesting to observe that with all the different menu codes required today, a minimal diet kitchen has sneaked back into the foodservice.

25 years later it is heartening to be part of a growing enthusiastic and flexible dietetic workforce that meets the needs of the region and the challenges ahead.

Mary McNab

Mary McNab has been professional leader for dietitians in Northland for 11 years. She considers the future for dietetics in Northland is positive with a great team of dietitians in the District Health Board and the Primary Health Organisation. The District Health Board also provides placements for student dietitians from the Massey University dietetic training programme giving Northland dietitians the stimulus of helping shape the dietitians of the future.

Mary’s contribution to New Zealand dietetics goes beyond the Far North area, in that she has served on the NZDA executive committee and was president from 2001-2003, served as chair of the Dietitians Board and is convener of the recently formed Allergy SIG.

Eruera Maxted – Ngāpuhi, Te Arawa, Ngāti Awa and Ngaiterangi

Eruera Maxted completed his PGDipDiet in Christchurch in 1997. Most of his professional practice was in Northland, where besides working in a clinical role, he was manager and professional adviser for dietitians. He spent almost four years as a member of a Māori Health team focused on planning, funding and contract management of health services in Northland. He also conducted research with Dr Carol Wharn, centred on the nutritional wellbeing of Māori living in advanced age, and gained his MHSc during this time. Eruera chaired the Dietitians Board from 2011–2013, the first Māori dietitian, and the first male dietitian to hold this role.

HAWKE’S BAY REGION

Dietitians in Hawke’s Bay (HB) have contributed to the development of a dynamic service spanning private practice, mental health, inpatients and outpatients clinics, foodservice, community and the general practice team and the new disestablished New Zealand Academy of Sport. Gwenda Kingsland, Robyn Richardson and Wietse Cloo have moved into management and planning positions. Dietitians reflect the Hawke’s Bay District Health Board (HBDHB) commitment to moving services out to the community and to providing a service that incorporates the cultural needs of the community.

Hawke’s Bay dietitians acknowledge the never-ending support provided to them from dietitians around New Zealand particularly those from Auckland and Wellington.

Events over the last 25 years include the following:

1994. The Hastings Fallen Soldiers Memorial Hospital kitchen closed and meals were prepared at Napier Hospital, served into bulk trolleys and trucked to Hastings.

1998. After considerable debate, Napier Hospital closed and a new kitchen and Zacs café opened at Hastings Memorial Hospital. Equipment including benches and sinks were transferred from Napier and installed at Hastings. The Presbyterian Support cook chill kitchen in Havelock North was used as a cooking facility in the evenings to support the transfer of the foodservice. The dietitians from the two sites combined to form one team.

2002. A community dietetic service was established within the wider team.

2003. Janine Shepherd opened the first dietetic private practice in HB.

2009. An adult mental health dietetic service was established and subsequently expanded to include child and adolescents. The Enliven restorative home care service employed a dietitian in its community multidisciplinary team.

2010. Community and inpatient dietitians
began sharing an office to improve communication and promote workforce development.

2011. HBDHB employed a dietitian to manage the three year ‘Eat & Enjoy’ project.

2013. University of Otago Master of Dietetics students begin coming annually for professional placement. The MST (malnutrition screening tool) was implemented in HB hospital adult wards and embedded in the electronic patient management system.

2014. District Health Board dietitians were employed to work in three general practices.

2015. HBDHB was the first District Health Board to reject the Compass national food solution and remain an in-house foodservice. This decision was based on the high quality of the foodservice and the desire to support local suppliers.

Dietitians working in Hawke’s Bay in 2018:
- Andrew Pickering, Anna Horgan, Deborah Chettleburgh, Diane Stride, Heidi Geertson, Jenny Lowe, Jill Foley, Jo Tamaki, Karen Moore, Kate Gaddum, Kate Martin, Kay Ward, Kirsten Crawford, Lucy Burrows, Paula Bennett, Robyn Richardson, Ruth Ogilvie and Stacey Edwards.

TARANAKI DIETITIANS

Based at Taranaki Base Hospital, Gillian Gonthier was chief dietitian for many years until she retired in 2015. Her role became professional lead and is now held by Brenda Szabo. Brenda says, “Taranaki is a fabulous place that many dietitians have returned to, or are waiting to return to – if only we had more jobs to offer everyone.”

In 2018 well known dietitians Jill Nicholls, Rosemary Law and Suzie Konijn are still working in Taranaki Base Hospital. Joining them are clinical dietitians, Abbey Billing, Jackie Keenan, Kate Molloy, and Casey O’Byrne (in outpatients). In South Taranaki, based at Hawera Hospital, we have Judith Walsh.

Jill Nicholls and Sara Knowles work at the Public Health Unit – a new discipline that was not around until 1990. Lisa Wynter, Michelle Butler, and Niamh O’Sullivan work in childhood obesity with the Whānau Pakari Team. Kim Pennington is at the Heart Foundation and Scott Campbell works at Midlands Pinnacle Primary Health Organisation with long term conditions. Jill Nicholls, Maggie Radich, and Sarah Tuki are working in private practice and Vanessa Carey works in foodservice.

Taranaki’s foodservice has evolved over the years with the dietitians setting up trayline, and then seeing this disestablished; cook chill came and went, as did the involvement of dietitians as new contracts without dietitian involvement came about in the mid-90s. Finally, in 2018 we still have an in-house kitchen with which we are involved, even though this is managed by an external contractor.

Dietitians who have retired but had huge input into the area of dietetics in Taranaki include Bev Rea who worked in Public Health from 1990 to the 2000’s – both she and Jill had some of the first public health jobs in New Zealand. Diane Gane is another retiree who had a great influence, particularly in South Taranaki with the running of outpatient clinics and set up of a foodservices trayline in the very small Hawera Hospital to support the remote areas of South Taranaki.

Barbara Dempsey, Bev Rea, then Pauline Donovan, followed by Diane Gane were previous outpatient dietitians at Taranaki Base Hospital.
Also to note are Gaye Brett who was in charge for many years early on, and Dorothy Tyler (was Gliddon) who was her staff dietitian for a couple of years.

The Taranaki dietitians are a social team with plenty of creative ideas and a love for celebrations. They have kept up close links with colleagues who have worked in Taranaki by having reunions about every five years, in addition to the local mid-winter and Christmas social get-togethers. They are entrepreneurial with their own fundraising scheme where they have sold olive oils, created personalised tea towels, compiled and published a recipe book and been involved with the Diabetes Society to bring celebrity chef, Jax Hamilton, to the region for Diabetes Awareness Month in 2017.

THE WEST COAST

The West Coast District Health Board has an expanding dietetic service and choosing to work in rural dietetics is often related to a lifestyle choice where the outdoor opportunities and beautiful scenery can be enjoyed. The Coast dietitians manage a rural dietetic service from Karamea to Haast while maintaining an inpatient service at Grey Base Hospital. Recently the West Coast Primary Health Organisation employed two full-time dietitians, Jessica Ives and Johanna Tonnon, and has increased capacity to consult on conditions associated with primary care, leaving secondary care in the District Health Board dietitians’ hands.

Since the 1990s, many newly qualified dietitians have worked on the West Coast, usually for a relatively short tenure. However Margaret Weston, whose husband was a specialist medical officer at Grey Hospital, was dietitian in charge for 14 years until 1994, and Jo Wilton was head of department for 12 years until 1997. Dietitians on the Coast have been fortunate in recent years because of a collaborative relationship with Canterbury District Health Board shared service and clinical partnership arrangements with the Coast whereby Canterbury provides many services for the West Coast population. A great informal relationship between the dietitians of the two District Health Boards continues and the two graduate dietitians, Kimberley Browning and Sara White have Canterbury District Health Board supervisors. They can also call on their Nelson-Marlborough District Health Board colleagues and usually join these dietitians for professional development activities.

THE SOUTHLAND REGION

Today Southland is able to build on the pathway established by earlier dietitians who enjoyed long careers.

In 1993 Jenny Freeman was head dietitian at Kew Hospital followed by Anne Read (40 years of dietetic service), Margaret Waterman (30 years of dietetic service) and Joline Wilson. Jenny Walker and Sophie Smith have both had stints as dietitians at Gore Hospital, and Sophie Carty was the community dietitian in health promotion for Well South Primary Care Network until 2017.

In 1998 Jenny commenced private practice working with Southland rest homes and at Gore and Winton medical centres. Sue Wong moved from private practice to Southland Hospital in 1994 specialising in assessment, treatment and rehabilitation and continuing in paediatrics in and outpatient services until 2006.

Kate Murray worked at Kew from 1997 and then in public health before moving to Central Otago in 2000. Dietetic services expanded into the community with Kirsten Buks becoming the first Southland District Health Board community dietitian in 2005. Kirsten established the ‘Healthy Eating for Life programme and ran clinics throughout Southland, including Lumsden, Riverton, Ohai, Te Anau and Tuatapere. Jan Wisely also worked in public health as a nutrition and physical activity adviser for nine years. In 2004 Linda Harris, who had been working in private practice, began a 14-year stint for the Heart Foundation as health promotion coordinator and later adviser. Helen Reid worked in Queenstown, part-time for the Southland District Health Board and part-time in private practice, from 2000 until 2012. Makuni McKerchar, an early Māori dietitian, was based in Southland in 1994 and worked in public health as well as nationally for Te Hotu Manawa Māori. She lectured at the Department of Human Nutrition, University of Otago and became diabetes coordinator for Southland District Health Board. Makuni ended her career at Nga Kete Mātauranga Pounamu Charitable Trust in 2013.

Today Southland dietitians make up a small group of approximately 12 dietitians who meet regularly for networking, education and a journals club. They work closely with their Dunedin colleagues and professional leader Ruth Thomson provides professional support and mentoring in both regions. The Southland team is dedicated to developing and supporting new graduates and takes student dietitians from the University of Otago as part of their clinical M Diet placements. Kew Hospital now employs six dietitians, Anna Small, Chloe Hindle, Julia Cappie, Kim Taylor, Rachel Conway and Sarah Jenkin. While each has her own areas of expertise, they also need to be good generalist dietitians. Patients not meeting criteria for District Health Board patients are referred to the Primary Health Organisation dietitian Alice Nettleton who also covers Gore Hospital inpatients and outpatients.

A private practice, Renovate, is managed by Eilyn Robertson and Rene Mackintosh. This practice offers dietetic services to Southland rest homes and counsels individuals needing advice for weight management and gastro conditions. Recent graduate Lauren Richardson has a role working for the pilot programme, ‘Healthy Families’. Though not employed as a dietitian, she notes the value of her dietetic training in providing this service in health promotion.
PRIMARY HEALTH CARE SPECIAL INTEREST GROUP

Primary Health Organisations (PHO) were established in New Zealand in 2002, following the launch of the PHC Strategy in 2001. The PHC Special Interest Group (SIG) was established in 2006, and had 11 members by the end of its first year. The specialist skills of dietitians were identified as a valuable addition to the primary health care team earlier than other allied health professionals. Dietitians were able to provide clinical leadership, train GPs, practice nurses and other health care workers in effective lifestyle management of people with long term conditions, and run preventative health promotion events in the community.

The SIG was formed to support primary health care dietitians who were often working in isolation to share information about projects, systems, tools and resources being developed to improve access to health care for populations in each PHO. SIG members are mainly employed by PHO, DGB, Sports trusts or private practice. Most provide clinical services to patients via one-to-one appointments or group sessions and many members deliver services within general practice settings.

Chris Cook was an early convener of the SIG. She led the ‘Mangere Healthy Kai’ programme that promoted ready-to-eat healthy choices in the Mangere town centre to help combat obesity and lifestyle related long term conditions. The programme resulted in increased sales of filled rolls, sandwiches, grilled fish, stir fry, fruit and vegetables. Although this programme was in the advanced stages of development when the SIG was formed, SIG teleconferences became an opportunity for peer review and discussion for this and many programmes being run by members.

Alison Pask and Louise Beckingsale developed meal cards that were reviewed by SIG members several times during their development. They proved valuable for communicating healthy eating messages and were purchased by PHO to support behaviour change in populations.

In 2010, the SIG produced a position statement on ‘Dietitians in primary health care that informed key stakeholders, including the dietetic profession itself, about the wide ranging roles and specific areas of expertise held by dietitians in the primary health sector. This was superseded by a position paper and systematic review entitled ‘Contribution of dietitians to the primary healthcare workforce published in July 2014 and written by Alexandra Howatson and Clare Wall.

In 2014, Louise Beckingsale completed her Masters on the experiences and perceptions of registered dietitians delivering dietetic services in New Zealand primary health care. Louise and Dr Kirsty Fairbairn published two papers: ‘Integrating dietitians into primary health care: benefits for patients, dietitians and the general practice team’, and ‘Two working together is so much better than one: professional support needs of primary healthcare dietitians’. This work provided a useful insight into an area of practice that was new for dietitians.

Primary Health Care SIG convenors:

2006: Joen Lim
2007–2009: Christine Cook and Sarah Munn
2010: Christine Cook and Carole Gibb
2011–2015: Jan Milne
2016: Kristen Clark
2017: Tonia Talbot

Sarah MacAvoy, CORE NUTRITION, ASHBURTON

Core nutrition, a small private practice established in Ashburton in 2011 by Sarah MacAvoy, offers a range of dietetic services, including working with aged care facilities, private consultations for individuals and a dietetic service for Rural Canterbury PHO and Pegasus Health.

The PHO service started in 2012, after Sarah MacAvoy, Sarah Munn and Leigh O’Brien (independent private practice dietitians) collaborated and won a contract to provide one-to-one dietetic consultations to enrolled service users of Rural Canterbury PHO covering the Ashburton, Banks Peninsula and Hurunui and Kaikoura districts. Clinics are held at the GP practice or in a neutral setting in the community.
**DIABETES SPECIAL INTEREST GROUP**

The Diabetes special interest group (SIG) was one of the first SIGs to be established in 1991. By 1993, a newsletter was well-established and important for networking among diabetes dietitians throughout the country. Convening the SIG followed a three-year cycle, with convening moving round the country. Marilyn Cullens took over as convenor in 1993 and reported on the Eli Lilly sponsored dietitians study day, the first of a number of these, the last being held in 2002. The relationships of the SIG with the New Zealand Society for the Study of Diabetes (NZSSD) and Diabetes New Zealand (DNZ) date back to these early days. With a membership of 80, the SIG was vibrant and involved.

In 1996, the SIG was closely involved in the development of the NZDA Position on the Nutritional Management of Diabetes Mellitus. By 1997, the SIG reported an ever-increasing list of ‘email addresses’ for the tri-annual newsletter! A highlight from the 1998 annual report was a one-off grant of $10,000 from NZSSD for dietitians’ research in the field of nutrition in diabetes, received by Marilyn Cullens and Jane Elmslie.

Dietitians from the Diabetes SIG regularly contributed to the DNZ Breakthrough magazine (1993-2013), and were involved in the national diabetes working group, the New Zealand diabetes guidelines development group and the Ministry of Health’s diabetes service improvement group.

A number of issues have been addressed over the years such as glycaemic index (GI) and carbohydrate counting: standards of care for the management of type 1, type 2 and gestational diabetes were developed, setting up a SIG subgroup – diabetes in pregnancy network, and an integrated knowledge, skills and career framework (IKSCF) for NZ dietitians working in diabetes care was completed.

National diabetes dietitians study days, hosted by the NZSSD prior to their annual conferences have been well supported by dietitians. Currently convened by Shelley Mitchell, membership of the Diabetes SIG in 2018 is well over 200, reflecting the importance of up-to-date information on this lifestyle condition.

### Shelley Mitchell

Shelley completed her PG DipDiet as a student based at Waikato Hospital in 1996 and started work as a community dietitian in the King Country. She then moved to the United Kingdom in 2000 and took on the role of diabetes and primary care specialist dietitian at Bristol Royal Infirmary.

Shelley’s strong personal commitment to ongoing professional development saw her join the Diabetes Management and Education Group committee of the British Diabetic Association and from 2005-2009 she organised national diabetes study days for dietitians. She completed a Master of Science degree in Diabetes from the University of Surrey and presented her thesis at the International Diabetes Federation Congress in 2006.

With DAFNE and DESMOND emerging as the gold standards in self-management education in the UK, Shelley took on a new role to develop diabetes education programmes for adults with type 1 and 2 diabetes, across South Gloucestershire, Bristol and North Somerset. Meeting the National Institute for Clinical Excellence (NICE) criteria required her to write curricula, train educators, implement quality assurance processes and audit the outcomes. She was also invited onto the Department of Health diabetes structured education working group (2007–2009) and was a member of the NICE topic advisory group on patient education in diabetes.

Shelley returned to New Zealand with her young family at the end of 2010 and took up the role of diabetes specialist dietitian with the secondary care team based at Palmerston North Hospital. As a mentor, Marilyn Cullens helped Shelley with the transition back into New Zealand dietetics and she soon joined the Dietitians NZ Diabetes SIG and NZSSD.

Shelley became convenor of the Diabetes SIG in 2013 and was invited onto the advisory group for the Ministry of Health to develop the quality standards for diabetes care toolkit (2014). Shelley supported Alayne Healy in developing the Dietitians NZ standards of care for the nutritional management of type 1 and type 2 diabetes in adults (2015), and Kathy Crossland with the standard of care for gestational diabetes mellitus (2016).

Alongside Alayne Healy and Lynne Ferguson, Shelley’s clinical knowledge and leadership skills were instrumental in the completion of the New Zealand IKSCF for diabetes dietitians in 2016.

After completing the postgraduate Certificate in Paediatric Nutrition and Dietetics at the Royal Children’s Hospital in Melbourne in 2013, Shelley joined the International Society for Paediatric and Adolescent Diabetes (ISPAD) and was selected to attend the science school for health professionals in 2015. She is currently interested in exploring the food habits and self-management behaviours of adolescents with diabetes (type 1 and 2) and how technology can improve the experience of diabetes for young people.

### The New Zealand Society for the Study of Diabetes

NZSSD is the national advisory body on scientific and clinical diabetes care and standards. Its objectives are to promote the study of diabetes and the best standards of care of diabetes in New Zealand. It also provides the national reference source on the subject. Two dietitians have been awarded Honorary Life Membership in NZSSD for outstanding service working in the field of diabetes. Marilyn Cullens (2012) and Lynne Ferguson (2015).

### Marilyn Cullens

Marilyn worked in the field of diabetes for over twenty years (1992–2015). She has had a deep passion for this specialist area of dietetic practice, as evidenced by her active and committed membership of NZSSD having served on the committee, and was honorary vice president of Diabetes Christchurch. Dietitians NZ Diabetes SIG that she convened for many years.

Over the years, Marilyn has contributed at a high level to the NZDA’s position on the nutritional management of diabetes mellitus (1996). New Zealand Guidelines...
Group on evidence-based best practice guidelines for the management of type 2 diabetes (2003), the development of type 2 diabetes practice-based guidelines for the Canterbury Pathways initiative, geared towards seamless care for patients' care journeys, ensuring that any policies developed or guidelines adopted were based on sound clinical and academic scrutiny, and the Dietitians NZ Clinical Handbook – she has contributed to the revision and updating of the diabetes section. She has also been on the working group for the New Zealand ICSCF for diabetes dietitians.

Marilyn has also consistently promoted the expertise and knowledge of specialist dietitians locally and nationally. She was awarded the Dietitians NZ Award of Excellence in 2011.

**Lynne Ferguson**

Lynne qualified as a dietitian in 1965. Her specialised work in diabetes commenced in 1998, when she moved to Waiuku. She started work as a dietitian with the diabetes team at Counties Manukau DHB and continued up until her retirement in 2015.

She completed a postgraduate Certificate in Nutritional Science in 2002, and a Masters Degree in 2006 investigating the effectiveness of lifestyle education in European people with diabetes. She found that much of the education for people with diabetes came from practice nurses whose potential for giving inconsistent messages could confuse those trying to make lifestyle changes. Lynne went on to develop a seven-hour interactive training programme for practice nurses and diabetes nurses through Manukau Institute of Technology (MIT).

Lynne’s Masters degree had ignited a passion for research and she joined a diabetes clinical nurse manager to conduct a randomised parallel group study of group education versus standard care. They received a Novo Nordisk grant to complete the New Zealand ICSCF for diabetes dietitians.

Lynne states “My philosophy has always been to ensure education is tailored to the individual patient and to achieve this I needed to broaden my range of resources for use in clinic and with groups.” She feels very fortunate to have worked with a wonderful multidisciplinary diabetes team at Counties Manukau District Health Board where innovation was encouraged and supported financially.

**CARDIOVASCULAR DISEASE**

**Janice Bremer**

Janice is well respected as a vocal proponent for accuracy in interpreting cardiovascular disease (CVD), diabetes and body weight evidence for outcome-related translation into dietary information. She calls out inadequacies in:

- ‘dumbing down’ of the evidence for dietetic intervention - “Why have millions of dollars of evidence and not use it?”
- departure from food groups and dietary patterns education towards reading isolated nutrients on labels of processed foods and apps calculations
- an over-reliance on solely qualitative teaching for obesity-related outcomes, in guiding those seeking to help themselves make their own decisions for their own eating and health outcomes.

Janice was among the first dietitians to open private practice in Christchurch in the mid-1980s and has ensured that her practice of dietetics is well-researched, cutting edge, sound and evidence-based. In 1990, Janice began a liaison with the Heart Foundation (HF), preparing the base material for the NZDA Food Guide Poster, designed as a food-based educational tool for cardiovascular disease risk intervention. The poster and two booklets achieved endorsement from the HF and NZ College of General Practitioners. Janice lobbied to achieve both the fifth food group (the plant oil group) and inclusion of starchy vegetables into the grain group, to secure intervention use for diabetes. She defended this separation from Ministry of Health primary prevention (as distinct from intervention) guidelines, again a decade later (adding an ‘others’ group that did not meet food group criteria), this time after systematic review and evidence grading for the HF’s evidence-based cardioprotective dietary pattern - Heart Healthy Eating.

She validated each food-selection serving in each food group for the cardioprotective eating pattern starting with the 1997 National Nutrition Survey for NZ food and nutrient sources and gaps in CVD protection, and setting criteria for CVD risk protection and meeting the ‘Nutrient Reference Values for Australia and New Zealand’. These key parts of work were reviewed and overseen by David Roberts, HF, and University of Otago’s Dr Alex Chisholm for the HF’s Nutrition Advisory Committee headed by a major inspirational leader, Professor Jim Mann. These food group criteria still feature in the Dietitians NZ Clinical Handbook and Diabetes NZ materials.

Janice’s contribution to cardiovascular disease and diabetes dietary guidelines involved preparing evidence statements for New Zealand’s first evidence-based guideline for assessment and management of cardiovascular risk (December 2003) as part of the Dietary Interventions Subgroup, and the inclusion of HF’s cardioprotective dietary pattern in ‘Guidance on the management of Type 2 diabetes’ (2011) and the NZ Primary Care Handbook through to 2018.

Prior to this body of work, in the late 1990s Janice systematically reviewed evidence and wrote the peer-reviewed NZDA position paper for ‘Diet and Prevention in Cardiovascular Disease’, and ‘Dietary Patterns: an evidenced-based statement from the National Heart Foundation of NZ’s Nutrition Advisory Committee’, both with review and co-authorship from Dr Alex Chisholm. She presented a state-of-the-art evidence-based paper ‘Obesity Clinical Perspectives for a Dietitian’ at the 1998 NZDA conference. Janice was awarded the NZDA Award of Excellence in 2001 in part due to these works. She served as an honorary member of the Heart Foundation’s Nutrition Advisory Committee through the 2000s.
RENNIAL SPECIAL INTEREST GROUP

The Renal special interest group (SIG) was ratified by Dietitians NZ in September 2008. Lyn Lloyd, renal dietitian from Auckland District Health Board was the inaugural convener and Mary Kinsella from MidCentral District Health Board was the inaugural secretary. There were 29 members.

Sue MacDonell replaced Mary Kinsella as secretary in 2009 until 2010, when Kim Ashcroft from Waikato District Health Board was appointed secretary. At this time the Renal SIG introduced regular teleconferences to share presentations. These were very well received by members and presentations continue to be provided once or twice a year.

In 2009, Lyn Lloyd approached the Dietitians Association of Australia (DAA) about becoming the New Zealand representative/member of the DAA renal interest group. This has proved to be a very successful relationship and has enabled communication with our Australian renal dietitian colleagues and provided opportunities for resource collaboration and updates on renal dietetic projects and issues.

Early in 2009 the Renal SIG put out its first newsletter. The objectives included:

• education – sharing knowledge about kidney disease
• communication – feedback from conference and meetings attended
• information – informing other members about research and projects
• collaboration – on standards of care, patient resources and student dietitian lectures
• introductions – introducing new members and renal dietitians working in District Health Boards around the country.

The newsletter was supported by the Auckland Region Renal Dietitians Group (ARRD). The ARRD members form the largest number of renal dietitians in the SIG and have continued to support it since its establishment. The ARRD Renal SIG members have developed and updated standards of care in several renal dietetic areas and produced and revised many patient resources. By 2013, newsletters were a highly valued benefit of membership of the SIG. To encourage more members to contribute to the SIG newsletter, the process was changed with larger District Health Boards taking leadership for one newsletter a year and buddy ing with renal dietitians from smaller ones. There are now four editions a year filled with interesting and useful information.

Renal dietitians were very pleased to support the 2015 initiative of the PHARMAC funded micronutrient supplement for people on dialysis and with end stage kidney disease and led the implementation in their respective District Health Boards. In 2016, the SIG approached Kidney Health New Zealand (KhNZ) and set up a memorandum of understanding with Dietitians NZ. Renal dietitians are now working with KhNZ to update their website nutrition information for people with kidney disease.

In 2016 Lyn Lloyd was joined by Ashleigh Share, renal dietitian from Counties Manukau District Health Board as the Renal SIG co-convener. Ashleigh is keen to develop the Renal SIG information for dietitians on the Dietitians NZ website.

A recent innovation (October 2017) was the development of a professional development opportunity for non-renal dietitians. Sharleen Nancekivell initiated a course on nutrition for people with kidney disease for this group of dietitians.

There is a small number of specialised renal dietitians in New Zealand and the Renal SIG is an excellent way to collaborate, communicate and coordinate activities and energy to advance knowledge in kidney disease and improve patient outcomes.

NEONATAL NUTRITION

Barbara Cormack

Every year, 15 million babies are born too soon. Worldwide, about one in 10 babies is born preterm and the rate is increasing. Many require neonatal intensive care in the first few days and weeks after birth. Optimising neonatal nutrition is vitally important to enable these very small babies to achieve intrauterine growth rates, optimal neurodevelopment and long-term health outcomes.

In the early days of neonatal care (early 1900s), the importance of breastmilk was clear and there was no alternative. By the 1980s, special preterm infant formulas with increased protein, energy vitamins and minerals had been developed and were considered superior to breastmilk for achieving growth.

This changed in the early 1990s when breastmilk fortifiers became available and there was a new emphasis on using breastmilk for its numerous benefits including the prevention of neonatal complications. At this time, many neonatal units worldwide including National Women’s Hospital had a breastmilk bank, however most of these had closed by the mid-1990s due to the emergence of the AIDS epidemic. The first New Zealand breastmilk bank to reopen was at Christchurch Women’s Hospital in 2014. Helen Little, a specialist neonatal dietitian has had a key role in setting up and managing the Christchurch Women’s Hospital breastmilk bank. Work to open breastmilk banks at other New Zealand neonatal intensive care units (NICUs) is on-going.

Barbara Cormack, Neonatal Specialist Dietitian and Clinical Lead – Paediatric Dietitians, Starship Child Health, Auckland District Health Board, Auckland
In 1990, the first New Zealand specialist neonatal dietitian, Barbara Cormack, began working in the NICU at National Women's Hospital in Auckland. In 1997 as a result of reading and investigations into the nutritional care of neonates and her work as paediatric dietitian at the Hospital for Sick Children, Great Ormond Street in London, Barbara and her paediatric dietitian colleagues published the first New Zealand Neonatal and Infant Nutrition Handbook. This handbook (now in its 4th edition) gave dietitians the neonatal nutritional knowledge and tools to move into neonatal units throughout New Zealand and Australia in the following decade to improve nutritional intakes and growth outcomes for preterm babies. Dietitians were not universally welcomed into NICUs in the 1990s. However, at National Women's Hospital (then on the Greenlane site) Barbara was extremely fortunate to work with a wonderful team of neonatologists who were very interested in nutrition and growth. At this time, intravenous nutrition had become standard care for many preterm babies in the first two weeks after birth. The National Women's NICU team developed a new way of prescribing intravenous nutrition using a concentrated standard solution that was tailor-made for individual babies through the use of a computer prescribing programme. This led to a series of observational studies of nutritional practices to determine if intravenous and enteral nutrition solutions and nutrition practices delivered the recommended nutrients and influenced growth or clinical outcomes. Results were published and led to the redesign of intravenous nutrition solutions used in New Zealand neonatal intensive care units and changes in the management of intravenous and enteral nutrition.

This growing interest and involvement in neonatal nutrition research led Barbara to enrol for a PhD at the Liggins Institute, University of Auckland. Barbara’s research centres on an international multicentre randomised controlled trial in extremely low birthweight (ELBW) babies (birthweight <1000 g). The ProViDe study aims to determine in ELBW babies whether an extra 1 to 2 g/kg per day of intravenous protein for the first five days after birth will:

(i) improve survival free of neurodisability at age two years
(ii) improve body composition
(iii) prevent faltering growth at NICU discharge.

To date 344 (80%) babies have been recruited in six New Zealand and two Australian NICUs. The ProViDe study is the first study that has been adequately powered to provide urgently needed evidence about the effect of protein intake on neurodevelopmental outcomes for extremely low birthweight babies. The findings of this research are likely to change neonatal nutrition practice worldwide. Today, New Zealand dietetic masters students are doing supervised research in NICUs. The research team has international neonatal research collaborations and there are several neonatal dietitians enrolled in PhDs in NZ. Most importantly neonatal dietitians are a visible daily presence in the NICU and have become embedded in the morning ward round.

In the past two decades, numbers of neonatal dietitians in Australasia have grown. By 2008 there were 13 dietitians with a special interest in neonatal nutrition, nine from Australia and Barbara Cormack, Helen Little, Pratibha Balu and Tanith Alexander from New Zealand. In the succeeding ten years, this list of names has morphed into a network of 32 neonatal dietitians who met for the first time in 2016 in Sydney and formed an Australasian Neonatal Dietitians Network (ANDIN). Two New Zealand dietitians, Helen Little and Barbara Cormack are now on the ANDIN steering committee. Dietitians must continue to lead the development of evidence-based guidelines and nutrition policies, and participate in and lead neonatal nutrition research. Forming a network to support this is essential and this recent achievement bodes well for the future of neonatal dietitians and preterm babies.

Helen Little

Helen is clinical manager of the large dietetic department at Christchurch Hospital Campus and this year has been the acting director of Allied Health at Christchurch and Burwood Hospitals. She completed her dietetic training in 1987-88 in Christchurch and worked for several years in bariatric surgery and with adult cystic fibrosis (CF) patients. In 1992 she was invited by the gastroenterologist to watch the first gastrostomy tube placement into a CF teenager in Christchurch and subsequently initiated the first gastrostomy outpatient clinic. During her early dietetic years, she was privileged to work with Professor Don Beaven, Professor Espiner and Dr Bram Cook. Helen has a strong interest in nutrition in pregnancy and neonatology. She has worked at Christchurch Women's Hospital since 1997, and guided by Dr Nicola Austin and the late Dr Glynn Russell, and inspired, assisted and encouraged by Barbara Cormack, she has created the new role of neonatal dietitian in Christchurch. Helen opened the neonatal milk room for preparing safe enteral feeds; she has conducted many nutrition audits that have been presented at Perinatal Society Australia and New Zealand conferences; she teaches paediatric registrars, neonatal nurses and student dietitians on parenteral and neonatal nutrition.

She is an inaugural member of New Zealand’s first breast milk bank that opened in Christchurch Women’s Hospital in 2014. She is involved with Ministry of Health projects, including the guidelines for healthy weight gain in pregnancy, feeding your baby infant formula, and the online tool for health workers on the Code in New Zealand. Helen has been a member of the Code’s compliance panel for the last eight years. She is a member of the Australasian Dietitians Neonatal Network and part of the steering group planning multicentre neonatal nutrition research. She chairs the Women’s and Children’s Clinical Governance group and is on the Canterbury District Health Board Clinical Board. She is currently chair of the New Zealand District Health Board dietitians leadership group, and has served as Christchurch area representative on the Dietitians NZ executive committee.

PAEDIATRIC SPECIAL INTEREST GROUP

The Dietitians NZ Paediatric special interest group (SIG) was formed in 1993, with a membership of 18 individual or joint members. Today we have a diverse membership of more than 90. Members work in paediatrics in District Health Boards, private practice, primary health, public health, industry, research, and include university tutors and dietetic students.

Conveners of this SIG include:
1993-1994 Rhonda Akroyd
The Paediatric SIG has had a consistently active role in writing submissions and providing feedback for Dietitians NZ in our relevant area of practice — nutrition of infants, children and young people. This has included:

- PHARMAC in relationship to paediatric special foods
- FSANZ on various proposals and codes
- Ministry of Health:
  - the Food and Nutrition Guidelines for Healthy Children and Young People (Aged 2–18 Years) A background paper (2010)
  - draft position statement: feeding babies during an emergency (for babies aged 0–12 months)
  - draft plan to develop national position on infant feeding in emergencies (2014)

A working party of seven Paediatric SIG members reviewed and commented on Infant Nutrition – Infant Formula Background paper (2013) for PEN (Practice-based Evidence in Nutrition).

The Paediatrics SIG is an avenue for paediatric dietitians to network and review current practice with colleagues in New Zealand. The SIG convener updates members with relevant journal articles, clinical guidelines, Cochrane reviews and other publications and communication as they become available. Quarterly newsletters ceased in 2015, but this is currently being reviewed.

Paediatric SIG dietitians have contributed to revised editions of the Dietitians NZ Clinical Handbook, including the recent e-book, and members are always willing to share their knowledge and expertise with dietetic colleagues in New & Views. This in part reflects the growth, diversity and unique specialty of paediatric dietetics.

**Charlene Tan-Smith**

Charlene registered as a dietitian in 2005 and has specialised in paediatrics since 2006. She is currently ketogenic dietitian at Christchurch Hospital. She was previously a nutritionist for Ministry of Health in Singapore. A highlight of Charlene’s journey has been her studies at Matthew’s Friends UK Keto College, and the privilege of planning and creating Christchurch Hospital’s paediatric ketogenic dietary therapy service in 2016.

**Cystic Fibrosis Special Interest Group**

The Cystic Fibrosis SIG was established June 2010. It was recognised that this complex and unique disease would benefit from networking and mentoring dietitians working with these patients. The convener has been Tory Crowder since its inception. Membership has grown steadily with all dietitians who work with cystic fibrosis (CF), adults and paediatrics, now being members.

The SIG has strong ties with the Australian CF SIG, holding joint meetings, professional development opportunities and workshops, and attending and participating at the biennial conference. Every 4–5 years, SIG members have undertaken a practice management survey. The results of one of these have been published in the Journal of Nutrition & Dietetics. These surveys continue to be an important tool in reviewing changes in practice and highlighting areas that require education.

In 2017, the nutrition guidelines for cystic fibrosis in Australia and New Zealand were approved by the National Health Medical Research Council (NHMRC) and published by the Thoracic Society of Australia and New Zealand. This five-year project stretched across the Tasman and involved thousands of volunteer hours by members of both SIGs and has provided a robust evidenced-based guideline for practice for the future. The SIG now is looking at the implementation of the guideline and development of resources to go alongside it, and preparing to publish summaries in an international journal.

The SIG has continued to mentor new dietitians coming into the area of CF and is looking into a formal mentoring programme with Australia. The Cystic Fibrosis SIG is an active and supportive group that is committed to evidence-based and quality standards of care.

**Tory Crowder**

Tory is currently a senior clinical dietitian at Christchurch Hospital. She has specialised in adult cystic fibrosis (CF) nutrition for the last 20 years and currently manages the nutrition of 100 or so adults with the disease in the South Island. She has developed a model of care that crosses both hospital and home and is a strong advocate and pioneer in telehealth to reach her patients from all corners of the South Island.

She is passionate about the dietitian prescriber status, using cystic fibrosis as a disease to support the case to give dietitians the right to prescribe nutrition-related medicines. She has taught the prescriber course and has recently been an invited speaker at the Australasian Society for Parenteral and Enteral Nutrition (AUSPEN) 2016 on this topic.

Tory trained in 1992, graduating in 1993 at Canterbury District Health Board and ‘hit the ground running’ in a busy acute hospital dietetic team. It was a time for dietitians to change and challenge practice and this has been her mantra and vision for the next 25 years. Heading overseas from there for the next four years gave her invaluable experience opportunities working at the forefront of dietetics, doing research for the Kings Fund and ICU dietetics at the Middlesex Hospital in Central London.

Tory returned to Greenlane Hospital in 1997 in the role of head and neck/Otorhinolaryngology (ORL) dietitian. She also worked with a small population of adults with cystic fibrosis (which grew from 19 to 95 patients over the next 11 years) and the lung transplant team. She challenged the practices of delayed enteral feeding post op, reactive nasogastric vs prophylactic PEGs and brought CF nutrition care up to an international standard over this time. She was supervised by the Auckland Gastroenterology department to replace gastrostomy for her patients, practising at the top of her scope of practice.
practice. She has co-authored and published three articles in head and neck oncology nutrition and one in CF care as well as submitting posters and abstracts for conferences both in Australasia and the USA/Europe. One of her biggest career achievements has been ‘the Australian and New Zealand Nutrition Guidelines for CF 2006’ and was a lead author for the ‘Nutrition Guidelines for Cystic Fibrosis in Australia and New Zealand’ launched in 2017 by the ANZ Thoracic Society and approved by the NHMRC.

She has always advocated for the profession in roles on local Dietitians NZ branches and as vice president on the NZDA executive committee in 2008. She is current convener of the CF special interest group. She is a staunch supporter of professional supervision being integral to dietetic practice and has been part of its inception at both Auckland and Christchurch Hospital Nutrition and Dietsics teams. She is a professional supervisor at the District Health Board and in private practice. She mentors and encourages dietitians to challenge clinical practice using current evidence as well as sharing her knowledge and experience.

INHERITED METABOLIC DISEASES

Inherited metabolic diseases (IMDs) also known as inborn errors of metabolism are genetic biochemical disorders of specific enzymes or proteins. This causes a block in a normal metabolic process of protein, carbohydrate or fat metabolism. These are a group of individually rare yet collectively not uncommon diseases. There are over 500 different IMDs currently identified. Management of IMDs is complex and challenging and treatment is for life.

The national metabolic service commenced operation in 2001. The service is based in Auckland at Starship Child Health, and consults with children and adult patients from around the country. It offers an annual sponsored metabolic study day for dietitians who support IMD patients outside Auckland. The service has a metabolic dietitian, Rhonda Akroyd, who works alongside metabolic consultants, metabolic nurse specialists and a clinical psychologist. The team works very closely with the newborn screening laboratory at Auckland City Hospital.

The goals of nutrition support for IMDs are to correct the metabolic imbalance and improve the biochemical imbalance to be within target treatment range for the individual to lower the risk of morbidity and mortality associated with the specific IMD and to promote growth and development by providing adequate and appropriate nutrition.

Many of the IMDs require home emergency fluid regimens (glucose polymer based) for use during times of unwellness to provide adequate glucose energy and minimise catabolism. For some IMDs, more intense diet management and biochemical monitoring is required pre-pregnancy, during pregnancy and post-partum.

The metabolic service provides clinics in 15 centres outside of Auckland. The local paediatric (or adult) dietitian attends these clinics with the metabolic team. Depending on patient numbers and need, the metabolic team visits all centres once and up to six times per annum. Rhonda says “it is a privilege to work with families and adults with IMDs and to support them in achieving the best possible outcome for the affected individual living life with IMD, rather than IMD controlling life.”

DIETITIANS IN THE INTENSIVE CARE UNIT (ICU)

Intensive care medicine or critical care medicine is a relatively recent branch of medicine concerned with the diagnosis and management of life-threatening conditions that may require sophisticated organ support and invasive monitoring. It is usually only offered to those whose condition is potentially reversible and who have a good chance of surviving with intensive care support over time. In New Zealand, intensive care was established about 40 years ago.

Nutrition in the intensive care unit (ICU) presents unique challenges and critical care nutrition is rapidly becoming a subspecialty for dietitians in New Zealand. At first, any supportive nutritional care offered was discouraged by the medical and nursing staff.

But the first breakthrough was in Auckland where an irascible Scottish intensivist agreed, when challenged, that people needed food to survive. Alongside that was the development of specialised enteral formulae in ready-to-use form rather than milk-based powders or blenderised enteral feeds. Enteral feeding became well tolerated by most patients who in earlier times may have suffered diarrhoea. The later development of safe and effective parenteral nutrition again with dietetic ownership enabled nutrition as a lifesaving therapy to become a reality.

However, the real breakthrough has been through research proving the worth of effective nutrition therapy and the international collaborations that mainly involved the dietitian in the Department of Critical Care Medicine (DCCM) at Auckland City Hospital. Publications and presentations from this work over the past two decades in peer-reviewed journals and international meetings including ESPEN and AUSPEN enabled authority and visibility. This led to daily nutrition review as part of standard care to be given to every patient in DCCM. This approach was facilitated by the joint research projects with similar-minded colleagues in Australia through active membership in AUSPEN and with active support from Dietitians NZ.

The international critical care nutrition survey led by the Canadian Critical Care Society was a benchmarking exercise for
ICUs worldwide and another opportunity to gain visibility for nutrition therapy in the ICU. The Auckland City Hospital DCCM was in the top 10 of all ICUs for every year of participation and the worldwide top performer in 2008.

Dietitians in New Zealand were quick to realise the opportunities to become involved in the exacting field of ICU nutrition therapy (differentiating it from nutrition support) and educational forums through the Auckland Regional Nutrition support team meetings, national workshops and teaching sessions for postgraduate education were well attended. Lyn Gillanders, a key dietetic practitioner in ICU nutrition therapy, considers that “the challenges for the future will be to build on this work and continued recognition by New Zealand dietitians that data collection, collaborative projects and critical appraisal of contemporary literature together with a daily visible presence in the ICU is essential.” This last focus is ideally achieved through becoming embedded in the main daily ward round.

ICU SPECIAL INTEREST GROUP

Dietitians NZ established the ICU special interest group (SIG) in April 2017 to create a common platform to share mutual interests, and to support dietitians in the area of ICU nutrition therapy. Varsha Asrani is the convener and 20 dietitians from throughout the country are members of this SIG.

The SIG aims to engage interested ICU dietitians in relevant opportunities for clinical and professional development on ICU nutrition on one platform and to:

• organise, liaise and support dietitians with relevant webinars, symposiums and conference to support ongoing professional development and learning
• meet or communicate to discuss relevant matters in ICU nutrition
• regularly update and share recent research and change in practices in ICUs
• update and present on any ICU based trials conducted in dietitians’ respective units relevant to nutrition
• create online learning modules to assist in teaching students and new graduate dietitians.

BARIATRIC SPECIAL INTEREST GROUP

The Bariatric special interest group (SIG) was formed in 2009 to provide a link for a growing number of dietitians working in bariatric surgery. The catalyst for this was the increasing number of bariatric surgeries being performed in public hospitals, especially in the upper North Island. Initially the group began with a small membership of approximately 10 dietitians but this has grown to a membership of over 90, many of whom do not work actively in bariatrics, but may see post-bariatric patients in their clinics. Currently convened by Katie Lambert, the SIG offers teleconference meetings 3-4 times a year and an Auckland regional meeting meets 3-4 times per year.

The SIG gives dietitians the opportunity to report on overseas conferences attended, critique international guidelines and discuss how they can be adapted for the New Zealand population. Bariatric surgery is carried out in both the private and public setting but the care process remains the same for patients regardless of where they access their surgery. The SIG provides support to a group of dietitians who often work in isolation for case review and questions.

The aims of this SIG are:

• provide support to dietitians new to bariatric surgery and share resources
• discuss topical areas of interest and provide submissions when required
• keep abreast of supplements and products available from bariatric companies
• provide a forum for case study discussion and questions
• keep up-to-date with research and new guidelines.

Highlights since the SIG was formed include being involved in the organisation and presentation of material at Obesity Surgery Society of Australia and New Zealand (OSSANZ) held in Wellington in 2014, linking with the DAA SIG and sharing resources with them in 2016, and publication of guidelines for the nutritional management of bariatric surgery patients in 2017. Future goals for the SIG include organising a study day for bariatric dietitians in 2018 and developing a way for peer review for bariatric dietitians across multiple centres.

DIETITIANS IN MENTAL HEALTH

Most of the large residential psychiatric and psychopaedic hospitals had closed by the early 90s. Foodservice dietitians who worked in the large kitchens associated with these institutions had found other positions. However, there was still a need for clinical dietitians in mental health, both for inpatient and outpatient work. The national increase in mental health issues is increasing pressure on inpatient services and more resources are needed.

Globally, the importance of nutrition and the role of dietitians in mental health is being recognised, particularly in Australia. There is strong evidence that diet quality is associated with mental wellness, and increasing evidence that dietitian-led interventions can make a positive difference to the health and wellbeing of people with mental illness, but there is more work to do. Epidemiology, neuroscience, work on the gut microbiome and research by our dietetic colleagues across the globe, are improving our understanding of the connection between the brain and the body and helping establish a role for dietitians in mental health services.

Jane Elmslie

Dr Jane Elmslie has worked in mental health dietetics for the 25 years of this history. She currently leads a team of five dietitians providing dietetic services for the Canterbury District Health Board (CDHB) specialist mental health service (SMHS) including two hospitals, Hillmorton and the Princess Margaret Hospitals, and associated mental health outpatient services for the Canterbury region. She says that working in mental health is a mixture of psychology, pharmacology, biochemistry and physiology as well as more traditional dietetic competencies. Jane has published several papers on obesity and nutrition in patients with mental illness and has supervised many PGDipDiet projects and MDiethes on mental health and related topics.

Jane began working in eating disorders (ED) at the Princess Margaret Hospital in 1984 when, as new dietitians were an integral part of the ED team. The number
of people with EDs has increased as have the types of eating disorder. Anorexia nervosa (AN) and bulimia nervosa (BN) were the EDs of the 80s. Today there are also binge eating disorder (BED), eating disorders not otherwise specified (EDNOS), and avoidant restrictive food intake disorder (ARFID).

While EDs are an important focus for many dietitians in mental health settings, there is much more to mental health dietetics. In Christchurch, mental health dietitians work with children, adolescents and their families, forensics, intellectual disabilities, adult services, alcohol and drug dependence, mothers and babies (psychiatric services for pregnant and new mothers), rehabilitation, anxiety disorders and first episode psychosis. With the advent of second-generation antipsychotic medications, obesity and its co-morbidities are much more common than in the past. Nutrition-related problems in people with mental illness include obesity, metabolic syndrome, diabetes (type 1 and 2), hyperlipidaemias, gut disorders, macro- and micro-nutrient deficiencies, malnutrition, refeeding syndrome, liver disease, renal disease and swallowing difficulties so dietitians working in this setting need to be knowledgeable about all areas of clinical dietetics.

Patients with mental illness die on average 20 years earlier than the general population, as a result of physical conditions such as obesity, diabetes, heart disease, and cancer. In response to this, Te Pou (a national mental health workforce development centre) has launched ‘Equally Well’, a nationwide initiative to reduce physical health disparities between people who experience mental health and addiction problems, and people who do not. As a result, physical health issues have become a focus for CDHB mental health services and the dietitians are busier than ever. In the long term, Jane hopes more dietitians will be able to work in this challenging but very rewarding area.

**Brad Brosnan**

Brad completed a BPhysEd prior to his MDiet at the University of Otago, and has a personal training certificate from the New Zealand Institute of Sport. This background and his interest in holistic healthcare led perfectly into a role in mental health dietetics. Brad started at Te Korowai Whariki in Porirua (part of Capital and Coast District Health Board) in 2016, and using his physical education and dietetic skills, developed a holistic package of nutrition and exercise interventions. Te Korowai Whariki campus is the largest forensics and rehabilitation long-term inpatient mental health service for adults and youth in New Zealand.

As people with a severe mental illness such as schizophrenia or other psychotic disorders are prone to dying earlier than average, primarily due to preventable cardiometabolic disease, a main aim for clients on campus during their stay is improving metabolic outcomes. Brad’s greatest challenge has been changing the culture on campus to a healthier food and drink environment. Long-held habits of staff, clients’ lack of insight into nutrition and motivation to change, and limited funding for resources have needed all of Brad’s excellent personal communication skills and innovation to overcome.

Brad believes a hands-on approach is critical to the success of the programme, and he has set the campus up with healthier nutrition and exercise interventions such as growing vegetable gardens, creating team exercise groups, decreasing the sugary food and drinks offered on campus, improving snack options with something as simple as carrots and celery sticks and hummus.

Building positive relationships with clients was the most supportive thing Brad could do in his role. “I learnt that hands-on nutrition and exercise education was the way forward. When clients were queuing up for healthy food that I’d been making with them, I knew I had made it.” Cooking with individual clients and seeing their practical skills and confidence develop in the kitchen and their mental health improving was hugely satisfying for Brad. The native American proverb – ‘Tell me and I forget. Show me and I may not remember. Involve me and I’ll understand’ says it all. The foundation has been laid for a healthier food and drink environment for the long-term benefit of clients at Te Korowai Whariki.

Brad has had to be bold, brave and innovative in this role, and it has taught him invaluable lessons for his future career in dietetics. Brad now works in private practice in Auckland.

Dietitians who have worked in mental health include Aimee Burns, Alison McLeintock, Brad Brosnan, Brigit Eder, Catherine Lucey, Christine Coppard, Estelle Leek, Garalyne Stiles, Gaynor Bennett, Helen Brown, Helen Sharples, Helen Sloan, Jane Elmslie, Jill Foley, Jo Tamaki, Louise Bennett, Mandee Cameron, Marianne Goldsmith, the late Rosemary Hewson, Roslyn Norrie, Sandra van Lill, Silke Morrison, Sue Hooker, Sue Scarlett, Tim Brosnahan and Tyson Edwards. Dr Wendy Grylls is a caregiver representative on a committee of the Australasian College of Psychiatry.

### RESEARCH SPECIAL INTEREST GROUP

The dietetic profession depends on research to guide clinical practice and provide evidence of the impact of registered dietitians on health outcomes. Dietitians are increasingly involved and employed in research positions and many are now combining research with part-time or even full-time employment. The Research SIG was established in March 2016 to support the increasing network of dietitians in research, and facilitate knowledge sharing among members. The Research SIG is a relatively new group, but an important one given the strong nutrition presence at the University of Auckland, Massey University and the University of Otago.

The main objectives of the Research SIG are to facilitate networking opportunities for research dietitians, to support them through collaboration and peer review, and to provide informed comment to the media on areas relating to research in nutrition and dietetics.

A Research SIG website is in the stages of development and was piloted at the recent Auckland Branch Research PD session. Further development of the website is required. The future of dietitians conducting research and in research-related positions will hinge on how our profession manages the barriers. Our challenge is to support dietitians to integrate with research professionals to design, conduct and analyse research as a collective. Studies conducted in the United States suggest most dietitians believe research is important, but that it is not part of their job. They also report a lack of time, rather than knowledge as the main reason for not participating in research.
**Andrea Braakhuis**

Andrea is convenor of the Research SIG. She has been employed as a dietitian in Australia, the United States and New Zealand. The majority of Andrea’s career has been in sport, working for Australian Rules Football team - Collingwood (1999–2002), Australian Ballet School (1999–2002), Olympic Park Sports Medicine Centre, Chiefs Rugby, Rowing New Zealand, U20 Netball NZ, Equestrian, and US sports – BMX cycling, Track and Field, US Swimming and Equestrian. In 2012 Andrea attended the Olympic Games as Lead Nutrition Provider for US Track and Field. Since 2012 Andrea has been employed at the University of Auckland as an academic with the department of Nutrition and Dietetics. She now combines professional practice with applied nutrition research.

Since coming to New Zealand, Andrea has been a committee member with the Auckland Branch of Dietitians NZ, and initiated the Research SIG of Dietitians NZ. Andrea is also an associate editor for the DAA Journal of Nutrition & Dietetics. She has published 28 peer-reviewed journal articles. Her research has been highly visible to the research and general community.

In addition to journal articles, Andrea has authored five conference presentations at international conferences. Andrea was an invited speaker at the Chinese International Dietetic Conference to present on sports dietetics as a viable career.

She has been the primary supervisor for one Honours student, seven Masters students, and is currently supervising two doctoral students. Her own future research will focus on the mechanisms of dietary bioactives on athletic performance and efficacy of clinical nutrition interventions.

**DIETITIANS IN FOODSERVICE**

**AS THE NZDA entered its third quarter century, the face of hospital dietetics was changing, especially in the foodservice area. New technologies in food production and service have included long shelf life cook-chill and cook-freeze systems, sous vide and steam-fresh technology, advances in equipment design and meal service and delivery systems. The bulk foodservice systems of old are now rarely seen, and centralised meal service systems are commonplace, with personalised patient meal service a feature.**

**CONTRACTING SERVICES**

As contract foodservice companies came of age in hospitals, and hospital management saw foodservices as a ‘hotel service’ rather than a clinical service, foodservice dietitians found their opportunities were changing. Foodservice contracting companies now provide an important career path for dietitians, both foodservice and clinical.

**DHB MANAGED FOODSERVICES**

District Health Board dietitians at many hospitals have demonstrated their skill and ability to provide a competitive, high quality foodservice. In particular, Wendy Dodunski of Waikato Hospital has managed the Nutrition and Foodservice Department since 1992. Waikato Hospital consistently achieved the highest ratings for patient satisfaction with meal services over seven years, based on a national survey sent to patients after discharge from hospital.

**FOODSERVICE IN PRIVATE PRACTICE AND CONSULTANCY**

A strong focus on foodservice management is a proven benefit for dietitians working in private practice. Dietitians often review the foodservice for an aged care facility, boarding school or hall of residence, child care centre, private hospital or commercial enterprise. They develop standards of practice for the foodservice of such facilities, plan or evaluate menus, train staff, design and/or implement food safety plans. Several dietitians have expertise in kitchen design and work with architects to ensure that a new or renovated facility provides for efficient safe food production.

**FOOD CONTROL PLANS**

Food control plans or food safety programmes have been a feature of the last 25 years. Dietitians have been key contributors in the development of food safety programmes in District Health Boards and other healthcare facilities, and Liz Fitchett took a leadership role in this aspect, helping to develop programmes that were practical, easy to follow and would be used. She provided feedback to the then New Zealand Food Safety Authority and legislative processes, ensuring that the law would be workable in busy food production operations.

Liz was involved at the legislative level with food safety and she co-authored, with Pip Duncan, three editions (and at least eight reprints) of ‘Safe Food – a food safety course for the food worker’. This book has been an important and practical working manual for people teaching food hygiene and food safety in the workplace, and
for food workers themselves to gain an increased understanding of the causes of food poisoning and to encourage hygienic practices in the workplace.

**FOODSERVICE MANAGEMENT COMPETENCE**

The education programmes for dietitians are required to enable students to become competent in foodservice management. Foodservice dietitians in District Health Boards, private practice, and contract foodservice companies across the country have contributed to dietetic education programmes over the last 25 years.

Textbooks used until 1991 were largely American. Two dietitians experienced in foodservice management, Pip Duncan and Julian Jensen, saw this gap as an opportunity to develop a New Zealand textbook, ‘Professional Foodservice’ and published in 1991, with a second edition in 2011. This textbook was nominated as one of the top five New Zealand educational texts in 2011. It has been used in both New Zealand and Australia by training organisations and larger scale catering operations.

**HEALTH BENEFITS LTD**

In 2010, the New Zealand Government established Health Benefits Ltd (HBL), to identify $700 million in savings from District Health Boards. Hospital foodservices were part of HBL’s cost-saving focus and expertise was sought from New Zealand dietitians to help with the development of detailed specifications and nutritional requirements for procurement of a national foodservice contract. The purpose was to develop national standards for hospital foodservice as there was great diversity nationwide. The expected outcome was standardisation of foodservice costs by using a national menu to enable savings by economy of scale, and improved nutritional outcomes.

Wendy Dodunski led a Food and Nutrition Advisory Group of Deborah Chettleburgh, Helen Wallwork, Nicky Moore, Penny King and Stella Welsh. Compass Group dietitians were also involved in this project. Nutrition standards for meals and menus for inpatients in New Zealand District Health Boards for both adults and paediatrics were developed with input and endorsement from dietitians representing all New Zealand District Health Boards. Specialist paediatric input was received from Kim Herbison, Nicky Clark and Paula Bennett.

**Wendy Dodunski**

Wendy Dodunski is a dietitian exemplar of this quarter-century of Dietitians NZ history. She assumed the role of manager, Nutrition and Foodservices, Waikato Hospital on the retirement of Jocelyn Hampton in 1992, and in 2018, still holds that position. She is passionate about dietetics and foodservice, and believes fervently that quality foodservice is at the heart of patient nutrition, care and recovery.

Wendy’s leadership skills have driven Waikato’s successes in patient satisfaction with foodservice as being consistently rated very highly, having the first accredited food safety plan in a New Zealand hospital, and recognition of Wendy herself as a collaborative, professional and tireless advocate for her colleagues, patients and staff. She is one of the few dietitians who has survived the challenge of a foodservice contractor bidding to take over Waikato’s foodservice management, as she has looked outside the square to seize opportunities to advance her foodservice for wider benefit.

Over the years, Wendy has had an influence across foodservice dietetics as an educator for students, a member of the NZDA executive committee and as a longstanding member of the District Health Board dietitians leadership group. She networks with other District Health Board dietitians on foodservice projects, and is a highly respected team player and hard worker. She is held in high regard by her own District Health Board management and allied health staff, the dietetic profession and the Universities who train dietitians, particularly Otago and Auckland. Wendy was the recipient of the Award of Excellence in 2017.

**Deirdre Johnston**

Deirdre Johnston qualified as a dietitian, specialised in foodservice management and has worked in acute public and private hospitals, and contracts with the New Zealand Defence Force. For the last 10 years Deirdre has worked in food safety compliance as a Ministry of Primary Industries (MPI) registered verifier and as a consultant developing food safety programmes/custom food control plans and providing food safety training for staff. She also had a part-time lead foodservice role in Massey University’s Master of Science (Nutrition and Dietetics) programme. Deirdre has recently taken a full-time role with a certified auditing body conducting verification assessments under the current food safety legislation.

**Nicky Moore**

Nicky is the Service Manager, Food and Beverages, Canterbury District Health Board and a previous Treasurer of the Dietitians NZ executive committee. Currently, Nicky serves on the project group designing Canterbury hospital kitchens and on the New Zealand Health Partnerships Ltd food and nutrition advisory group.
IN THE last 25 years private practice has become a popular and viable dietetic career choice. Both solo practitioners and group practices have been very successful in offering dietetic services not traditionally offered by District Health Boards. Other dietitians established roles as specialist consultants, such as in sports nutrition, len Hellemans, Jeni Pearce, food safety, Liz Fitchett, Deidre Johnston; portfolio management, Kaye Dennison; Robert Quigley and Carolyn Watts established a consultancy in 1995 to help companies with policies and programmes that enhance the health and wellbeing of their communities.

Many solo practitioners work in specialist clinical areas. We acknowledge the stirring work of stalwarts; for example, Aucklanders, Anna Richards with her allergy specialty and Mary Rose Spence for her work in metabolic syndrome. Lea Stening in paediatrics and family nutrition, and Janice Bremer in cardiovascular health, both in Christchurch.

Group practices often provide specialist work across the spectrum of dietetics. Sarah Ley was a ‘trail blazer’, whose legacy is ‘Consulting Dietitians’, a nationwide network of dietitians, and more recently, Josephine Greer, of ‘Nutrition & Life’, leads a Dunedin-based business with seven dietitians working across the South Island.

Sarah Ley
CONSULTING DIETITIANS LTD, AUCKLAND

Sarah Ley considers founding and operating her business, Consultant Dietitians (CDL), one of the most exciting challenges of her life. She says, “There is nothing quite so rewarding as having existing clients request to expand your services or refer enthusiastically to others because they like what the company provides. Of course, it can work both ways so you have to deliver 100% of the time! It was not so exciting for family and friends however, as work took front and centre stage often throughout this journey.”

Some of Sarah’s greatest influences and insights were from business and professional networks and presentations she attended over the years. These included ATEED (Auckland Tourism, Events and Economic Development), Ice House, Chamber of Commerce, Dietitians NZ, Dietitians Association of Australia and New Zealand Business. Inspirations were also gleaned from articles and books – in particular two oldies were standouts for her – ‘Good to Great’ by Jim Collins, and ‘Good Business’ by Mihaly Csikszentmihalyi.

“I found dietitians in New Zealand and overseas very generous with sharing their expertise and time. In particular Deidre Johnston, Julian Jensen, Kaye Dennison, Kerry McIlroy, Pip Duncan and Vicki Paulin come to mind. Soon after the company was formed in 2004, Kristin Ford and Kirsten Crawford took on stellar work developing guidelines and strategies for new areas of CDL work with Mercy and Ascot Hospitals in Auckland. Julie Averill joined the team soon after and brought her considerable foodservice skills to the mix. Since then Kristin Perry, Robyn Frogley, Sharon Carey, Virginia Te Au, Viv Dykes and others also joined CDL, ably assisted by Ruth Chong in administration.

Sarah’s philosophy was always to think of the business as a group of experts with her role to lead these clever people. This meant allowing individuals freedom to develop their own paths to the end goal of better nourished individuals in care and better educated staff.

After more than 13 years with CDL, in 2017, Sarah handed the reins to Lynda and Grant Walter, while remaining as a consultant to the business.

Angela Berrill
ABC NUTRITION, AUCKLAND

Angela is a well-respected dietitian and an accomplished speaker and presenter. She is regularly called on to share her expertise and opinions by the media especially on national television and various publications. After graduating she worked in the dairy industry where she was involved in driving product reformulation, writing nutrition and marketing communications, ensuring claim compliance in accordance with food regulations, and launching nutritionally-focused dairy products around the globe.

In 2008, Angela founded her nutrition consultancy business, ABC Nutrition, on the belief that good nutrition and eating well should be easy and uncomplicated. Angela is passionate about health and nutrition, and believes in finding ways for people to enjoy food while also nurturing their bodies.

In 2018, ABC Nutrition has an established team of dietitians and nutritionists catering to a diverse market and operates throughout New Zealand with team members. Anna Keeley, Auckland, specialises in the modified Atkins diet (MAD) and ketogenic approach for the management of epileptic seizures, weight management, the FODMAP diet for irritable bowel syndrome (IBS) and provides nutrition support to older adults and aged-care facilities, as well as working with ACC clients in the community. Julia Bates works in the Auckland clinic with general nutrition, healthy eating for all ages, weight concerns, diabetes and has a speciality in kidney disease. She is passionate about simplifying nutrition and has a keen interest in a weight-neutral non-diet approach to stop the dieting cycle and improve clients’ relationships with food. Alayne Healy, Auckland, and Rochelle Hawkins, Wellington, both work in the ACC sector providing education for people with a spinal cord injury, traumatic brain injury and many other conditions.

Estella Leek
MINT NUTRITION, AUCKLAND

Estella Leek is one of New Zealand’s foremost eating disorders dietitians. She has a wealth of experience working for public and private health providers and has specialised in weight management, food and allergy tolerance, cardiac rehabilitation, as well as eating disorders. This experience includes five years as a community paediatric dietitian where she developed the ‘Food with Attitude’ programme for paediatric weight management. Her move to the Auckland regional eating disorders service at the Auckland District Health Board followed her interest in developing expertise in supporting eating behaviour and working for nine years with a team of psychologists and psychotherapists.

From 2010–2016, she was senior eating disorders dietitian at Thrive Eating Disorders Service. Here she worked in a multidisciplinary team of health professionals to set up and deliver nutrition treatment programmes to residential and day patients with eating disorders, including anorexia and bulimia. The foodservice component covered planning a three-week cycle menu, development of a meal support programme and ongoing staff training.
to improve patient outcomes. She also designed the mini-commercial kitchen where meals are prepared for the complex range of individual dietary requirements.

In 2009, Estella and psychologist Dr Jan Geary established the Shelly Beach Practice. This practice offers psychological and dietetic treatment to clients with eating disorders and weight management issues. In 2018 the practice has grown and now includes two specialist dietitians and three psychologists.

In 2017 Estella and dietitian colleague Kate Syers established Mint Nutrition to offer a range of nutrition services to corporate companies and the community. Mint Intuitive eating programme supports people of all ages in a wide range of settings.

Throughout her roles Estella has brought a strong creative streak that has assisted in developing outstanding visual and audio resources. These have been used for a wide range of audiences – the general public, patients and their families, dietitians and other health professionals.

Kaye Dennison

**OPTIMIZE HEALTH SOLUTIONS LTD, AUCKLAND**

Kaye Dennison chose to set up her private practice to enable her to work in a portfolio career. This decision came as a result of career coaching Kaye participated in during a review of allied health services in the District Health Board where she was employed. She identified her desire to work in project management in areas of dietetic work she enjoyed and that energised her.

Kaye established her Auckland-based business Optimize Health Solutions Ltd in 2014, after completing an internationally accredited project management course. Her business has three portfolios: project management, professional supervision and her clinical interest of gerontology nutrition.

She has not regretted the decision to start a new and innovative business in the private sector. After four years in the business, Kaye continues to enjoy the variety of work and the ability to be flexible.

Cathy Khouri

**NUTRITION CARE, HAMILTON**

Cathy is a leading dietitian in the Waikato district. She has been involved in Hamilton since 1982, firstly at Waikato Hospital, but for most of Dietitians NZ’s last quarter-century she has worked in private practice, and in a number of consulting, advisory and teaching roles.

Cathy Khouri and Janelle Wallace established Nutrition Care, a private practice in Hamilton in 1995. They provided both clinical and foodservice dietetics. The major proportion of Cathy’s practice has been seeing patients on a one-to-one basis, covering all aspects of clinical dietetics. Initiatives included nutrition assessment, intervention, and monitoring and evaluation service for all areas of clinical practice.

For more than five years Cathy was part of the bariatric surgery team, designing the dietetic processes for pre- and post-operative care. Another venture was the development of menu and meal audit tools for rest homes and schools. Community projects such as health programmes in the workplace and GP practices and public education forums were also a feature.

She was involved (2008-2015) as a professional practice fellow for the University of Otago Master of Dietetics programme, teaching, supervising, assessing and reviewing postgraduate students.

During 2012 she worked as a consultant to the specialist eating disorders service, Waikato District Health Board, strengthening the role of the dietitian as part of the team, and since 2012 Cathy has been an independent contractor to the Dietitians Board, working as an adviser on a number of initiatives. One of the most important of these for the profession is the continuing competence programme.

A charitable trust established by Cathy and her husband, Zaf, generously offers financial support for graduate students or dietitians wishing to attend a nutrition conference or course in New Zealand or overseas. Several dietitians have benefited from the Cathy and Zaf Khouri Charitable Trust and have been most appreciative of the opportunity to participate in professional development activities made possible by a grant from this special trust.

Nutrition Care has recently been purchased by Niki Russell and continues to be a vibrant practice in Waikato.

FoodSavvy

**WELLINGTON AND NELSON / MARLBOROUGH**

The team of dietitians at Wellington’s FoodSavvy is committed to helping clients feel their best. In 2006, Sarah Elliot opened FoodSavvy, now co-owned with Angela Phillips. Situated in Wellington’s central business district, the team is familiar with the challenges of a busy lifestyle and understands that getting balance in today’s lifestyle can require extra support. They see clients with a wide range of health concerns but particularly specialise in gastrointestinal health.

Sarah previously worked as the immunology dietitian at Wellington Hospital and at the Peter Beaumont Eating Disorder day programme in Australia, helping people recover from diagnosed eating disorders. Having a life-changing diagnosis of Crohn’s disease in 1996, she became interested in nutrition in relationship to inflammation and the gut microbiome, and made the decision to help others like her. She says “I love helping people gain control of their symptoms and feel confident about their food choices.”

Angela established the Nelson FoodSavvy branch where her specialties include maternal and child health, and she enjoys brainstorming with parents on solutions that make food enjoyable and fit the family’s lifestyle and food preferences.

Georgia Wakefield and Michelle Kendall currently work in the Wellington office. Tonia Talbot in the Nelson office and Natasha McEwan in Marlborough. Other dietitians who have worked for FoodSavvy include Becky Jones, Emma Davidson, Gemma Dunkley, Julia Garde, Nola Wood-Harris and Tutangi Amataiti.

Fiona Boyle

**TAURANGA**

Currently runs Food Solutions private practice and contracts to Tauranga Hospital to provide a dietary outpatient service to community mental health clients.

Nicky McCarthy

**WANAKA**

Owns NutritionWorks, a Wanaka-based private practice, and runs part-time for Central Otago Health Services Ltd in Clyde, providing hospital and outpatient dietitian services in the area.
SPORTS nutrition has become an important practice speciality for dietitians over the last 25 years and is a significant employer of dietitians. The Sports special interest group (SIG) was established in 2012, convened by Nicola Martin and Kathryn Beck, and membership in that first year reached 51, and 125 in 2017.

The first NZDA position paper on sports nutrition, ‘Nutritional considerations for physically active adults and athletes in New Zealand’ authored by Jeni Hellemans, was reviewed by Jeni Pearce, Kerry McIntyre, Christine Thomson and Dr David Gerrard published in 1992. Since then there has been a steady increase in awareness and demand for sports nutrition services, and New Zealand dietitians have responded.

Four New Zealand dietitians have headed international sports nutrition departments – Christine King (Aspetar, Qatar), Kirsty Fairbairn and Richard Swinbourne (Singapore Institute of Sport), and Jeni Pearce (English Institute of Sport). Several dietitians have also contributed to pinnacle events, working with New Zealand athletes. Jeni Pearce (Commonwealth Games, Auckland 1990 and Glasgow 2014), Jen Helleman (Athens Olympic Games, 2004), Dane Baker (Rio Olympic Games, 2016). Others have worked with New Zealand national teams, for example, Lea Stering (Black Caps, New Zealand Rowing and Paralympics – including the Wheel Blacks), Jen Helleman (Triathlon).

High Performance Sport New Zealand has a team of six dietitians in its Performance Nutrition programme, who provide world class evidence–based nutrition and dietetic support to carded athletes and coaches. New Zealand sports dietitians are active internationally – many belong to Sports Dietitians Australia, and Kim Abbott from Hamilton is the New Zealand representative on PINES (Professionals in Nutrition for Exercise and Sport).

Jeni Pearce MNZM

Jeni is one of the world’s leading health and sports dietitians. In 2015 she became a Member of the New Zealand Order of Merit (MNZM) in the Queen’s Birthday Honours for services to sports nutrition. The award citation acknowledges Jeni’s ‘contribution to sports nutrition as a recognised pioneer and world leader in the field’.

Since 2013, Jeni has been head of Performance Nutrition at High Performance Sport New Zealand. She is committed to the provision and growth of cutting edge evidence–based performance nutrition services to Olympic and Paralympic athletes, coaches and support teams.

Jeni left New Zealand for the United Kingdom in 2007. She was appointed head of performance nutrition at the English Institute of Sport (EIS), the Olympic nutritionist for Team Great Britain in Beijing 2008 and London 2012, England Cricket and McLaren F1. She has been president of the international organisation Professionals in Nutrition and Exercise for Sports (PINES) and co–chair of the American College of Sports Medicine (ACSM) special interest group in nutrition.

For over 20 years before moving to the UK, Jeni managed her private nutrition clinic practice. She served as chairperson of the New Zealand Nutrition Foundation and executive officer of Agencies for Nutrition Action. She has authored 12 books, co–authored textbook chapters (including in the latest edition of Clinical Sports Nutrition) and research articles and has given lectures and conference addresses in New Zealand and internationally. Her passion for sports nutrition is legendary.

Katrina Darry

In the early 2000s, Kat Darry set up a private practice clinic at Sports Med in Christchurch, and started working for the Canterbury Crusaders. Over the next few years, she became lead nutrition provider to New Zealand Women’s Hockey, Silver Ferns Netball, Super Rugby teams and worked with a number of Olympic athletes. She was also well known on the school rowing circuit and amongst sports individuals throughout the country. Professional rugby was starting to take off and people were aware of the importance of diet, realising that ‘good food creates great athletes’.

In 2008, Kat applied for her ‘dream job’ as dietitian and nutritionist to New Zealand’s All Blacks, and now, in 2018, she is in her tenth year with the national rugby team. A highlight was working with the All Blacks during the 2011 and 2015 Rugby World Cups. When she’s not busy with NZ’s national rugby team, she helps athletes at her clinic with sports–related issues including weight loss, energy requirements, teenage nutrition and medical–related nutrition.

“Working with clients, I try to look at what they are doing, and set goals. The key is to get back to whole foods in the diet as much as possible. The same goes for any sports person and it’s exactly the same with an All Black, each player is seen individually and a food plan is put together. I work closely with our trainer and medical team with the aim to maximise the right food intake to get an overall better performance. I am here to assist them be their very best. They become very motivated to eat well once they see and feel the benefits both on and off the field.”

Kat loves every minute working with such incredible sportsmen. She rates meeting Prince Harry after the World Cup win at Twickenham as a huge highlight, but most of all having the privilege to work with the top All Black team in history. She says “The days are long and very busy during the All Black season that runs from May through to the end of November, so naturally you need to pace yourself. But you are part of a great management group, coaches, physios, doctors, media, trainers, and support staff, everyone is working hard and looking after each other.”

Janine Shepherd

Former Hawke’s Bay dietitian Janine Shepherd holds the Webb Ellis Cup after New Zealand won the Rugby World Championship in 2011. From 2005–2012, Janine was Sports Nutritionist for the New Zealand Rugby Union under 20s, Hawke’s Bay ITM Cup, Rugby Academy and regional age group rugby teams.
THE aged care setting was a prime target for private practice dietitians; this was a setting that did not traditionally employ dietitians, although some did, for example, St Andrews in Auckland employed Juleen Walsh and Alison Orchard.

SPECIAL INTEREST GROUP FOR NUTRITION AND GERONTOLOGY

With the growth in interest and practice of dietetics in aged care, in both secondary care and the rest and residential care sector, it became evident that there was a need to establish an NZDA special interest group in nutrition and gerontology (SING) for this discipline. At its inaugural meeting at conference in Dunedin in 2004, 35 dietitians who had an interest in nutrition for older people attended. Work settings included dietitians in geriatric units in public hospitals, public and private community dietitians, dietitians employed by aged care facilities, consultants. Membership is currently close to 100.

Sandra Van Lill made her mark very quickly on arrival in New Zealand, and was the foundation convenor. After four more convenors, Jo Morete, Heather Phillips, Gaye Philpott and Carole Gibb, between 2007 and 2017, Sandra is back in the role.

Regular newsletters for members were published for over 10 years, and from 2011-2017, quarterly e-bulletins were emailed to 600 residential aged care facilities. This was initially developed in 2004, 35 dietitians who had an interest in nutrition for older New Zealanders. Work settings included dietitians in geriatric units in public hospitals, public and private community dietitians, dietitians employed by aged care facilities, consultants. Membership is currently close to 100.

Carol Wham and Rozanne Kruger worked on the review of the Ministry of Health food and nutrition guidelines for older New Zealanders.

Katrina Pace developed practice guidelines for the management of pressure ulcers.

Julian Jensen led the development of a checklist for audit agencies on best practice in matters pertaining to food and nutrition in this setting, and training on these.

Gaye Philpott was a member on the MoH New Zealand dementia care pathways sector advisory group.

Liz Beaglehole and Sandra Van Lill were involved with Dietitians Association of Australia on best practice guidelines for residential aged care facilities.

A number of SING members had input into the Dietitians NZ submission on the MoH healthy ageing strategy.

SING has run seven one-day seminars, one with the New Zealand Nutrition Foundation and New Zealand Association of Gerontology. Members have assisted in student dietitians’ research projects. Thanks to these research initiatives and research carried out by Carol Wham, Sue MacDonell, Sally Watson and others, we now have more data on nutrition issues in older New Zealanders.

CANTERBURY DIETITIANS LTD, CHRISTCHURCH

Canterbury Dietitians was established in 2008 by Leigh O’Brien and Liz Beaglehole. The company primarily has a focus on providing support to residential care facilities in both foodservice and clinical dietetics. Alongside this, Liz and Leigh also hold contracts with ACC providers and Rural Canterbury Primary Health Organisation. Maz Black joined the team in 2014 and became a partner in 2016.

The three partners have different areas of interest and provide a full range of services to residential care facilities and hospital foodservices. Liz has a wide knowledge of food safety and texture modified diets. Leigh is currently doing her Master of Science in older persons’ nutrition and gut health. Maz’s special interest is cognitive impairment and changing food and eating practices to cater for individuals.

Gaye Philpott and Sally Watson

Dietetics is a family affair for Gaye and Sally. Not only are the two sisters dietitians but the late Gendy Brown was part of their extended family. Gaye and Sally enjoy being able to discuss their shared interest in gastroenterology and gerontology nutrition and how their work impacts on the people they work with and the communities they live in.

Gaye started her dietetic career as a staff dietitian with the Canterbury District Health Board in the early 1980s. After travelling and working as a locum dietitian in the United Kingdom, she returned to work at Palmerston North Hospital. Balancing family commitments and career, she began lecturing nutrition at Universal College of Learning (Ucol) before starting in private practice. An invitation to work in an aged care facility in Levin in the mid-1990s cemented an interest in older people’s health. She joined SING (the nutrition and gerontology SIG) at its inception and has been a member of the Health of Older People Network for the Central Technical
and Advisory Services (TAS). More recently Gaye has rejoined the team of dietitians at Palmerston North and Whanganui Hospitals as professional adviser.

Sally spent the early years of her dietetic career in the United Kingdom as a nutritionist for the English Milk Marketing Board and then as a community dietitian for the National Health Service (NHS). She returned to New Zealand in the early 1990s and set up a private practice specialising in the dietary management of gastrointestinal disorders. Alongside this, Sally has held a variety of other dietetic roles, including working for a medical nutrition company, as a public health dietitian for Older Persons Health, Canterbury District Health Board (CDHB) and more recently as dietitian liaison for CDHB’s Canterbury Initiative. As dietitian liaison, a key achievement has been the development of the dietitians single point of request (SPOR) for general practice referrals to publicly funded dietitians in Canterbury.

**SENIOR CHEF**

Senior Chef is a community-based cooking programme for older adults living in the community who are at high risk of poor nutrition. Dietitian Sally Watson led the Canterbury District Health Board (CDHB) team that developed and piloted the programme in 2009, and launched it Canterbury-wide in 2010. It is a free 8-week cooking class for people aged 60 and over (55 and over for Māori and Pacific clients) who wish to improve their cooking skills, confidence or motivation around cooking for one or two. Originally, the programme was run by the Older Persons Health service at CDHB and funded by the Ministry of Health. It is now co-ordinated from Pegasus Health Primary Health service, with CDHB funding. The programme won the ‘Improved Health and Equity for Population’ category of the 2012 CDHB quality improvement and innovation awards.

**NEW ZEALAND DEFENCE FORCE**

In 2005 the New Zealand Army established the first position for a uniformed dietitian within Army Health Services. In 2015 there was a significant change to the structure of health services within the New Zealand Defence Force (NZDF). Health services that were previously managed by the single services – Royal New Zealand Navy, New Zealand Army and Royal New Zealand Air Force – were combined to form the joint operational health group. Nutrition and dietetics now sits within Performance Health, alongside exercise physiology, physiotherapy and strength and conditioning specialists. Performance Health aims to optimise an individual’s physical fitness, health and resilience to enhance operational readiness.

NZDF dietitians are responsible for the delivery of a high quality nutrition and dietetic service across the Defence Force. They are by all accounts ‘specialist generalists’ and maintain a broad scope of practice, covering public health, clinical, and sports nutrition delivered through research, policy, governance, education, project management, foodservice and operational ration packs. NZDF dietitians bring an evidence-based approach to support policy and practice, while accommodating the unique challenges and constraints of military environments.

Attitudes towards nutrition within the NZDF have evolved over the past 10 years, with increased recognition that nutrition contributes to a fit, healthy and resilient operational force by enhancing both the physical and cognitive performance of personnel. In the military population, this is achieved through the effects of nutrition on energy stores, hydration status, body composition, injury prevention, recovery, immune system function, sustaining morale and long-term maintenance of optimal health. In this way, dietitians are ‘combat multipliers’ – enabling more personnel to be operationally ready.

Alongside their specialist role, NZDF dietitians must also maintain military officer standards, physical fitness standards, core military skills, attend various military courses, and fulfil various military representational and regimental roles.

Sport is an integral component of the NZDF culture, contributing to values of courage, commitment and comradeship. Defence Force dietitians regularly engage in NZDF sport which provides a further opportunity to ‘walk the talk’.

Key projects initiated and managed by Defence Force dietitians include:

**2006.** A comprehensive review of the NZDF 24hr operational ration pack began, starting with the development of nutrition specifications for individual components across four ration packs. This was followed by a significant review of components and suppliers.

**Since 2006.** Dietitians have been engaged in the developing of and delivering nutrition modules to NZDF medicals, physical training instructors and caterers during their respective training courses.

**2007.** Minimum nutrition standards were developed and introduced for garrison catering. In 2014, these standards were significantly reviewed and updated as the NZDF catering nutrition standards (CNS). The new CNS also include specifications for fresh feeding during field training and for catering in the maritime environment outside Australasian waters. The CNS have been subsequently shared with key coalition partners.

**2008.** Nutrition was a key contributor to the establishment of the New Zealand Army wellness programme. This was updated in 2017 for NZDF and is currently undergoing trial phases.

**2009 and 2010.** The New Zealand Army Recruit nutrition and health study was completed. This work was considered fundamental in the development of a workforce that is ‘Fit to Fight – Fit for Life’.

**Since 2009** Nutrition education has been integrated into the NZDF leadership framework as a key ‘lead self and wellness’ component. This provides dietitians with an opportunity to engage with personnel of all ranks throughout NZDF.

**2014 to 2016.** Data were collected to establish a situational awareness of iron and vitamin D status in New Zealand Army female recruits and investigate any associations with physical performance, injury risk, cognitive functioning, well-
being, fatigue and mood states. The research is linked to the NZDF’s More Military Women programme. This programme is examining the recruiting, progression, retention and safety policies and processes within the NZDF with a view to removing barriers and implementing change.

Since 2015, Dietitians have provided enhanced nutrition support to navy divers, including nutrition and supplement education, catering advice and hydration testing.


2017. Development of an NZDF sports supplement policy began.

Major Nicola Martin

Nicola studied at the University of Otago and gained a Bachelor of Science (Physiology) and Bachelor of Consumer and Applied Science (Human Nutrition) before completing her PGDipDiet in 2002.

In 2000, Nicola joined the Army Reserves as a medic and in 2005 was commissioned as the first New Zealand Army dietitian. Following this appointment, she was awarded the NZDA Nestlé Young Achiever Award in 2006 for ‘outstanding work, innovation and commitment to public health nutrition’.

Career highlights have included training in a United States Army field-based surgical hospital, developing specifications for operational ration packs at the United Nations Headquarters in New York, deploying as a dietitian on the USNS MERCY (hospital ship) as part of Pacific Partnership through Indonesia, and presenting at national, and international conferences. Pacific Partnership is a multi-nation (United States Navy led) deployment to improve the interoperability of the region’s military forces, governments and humanitarian organisations during disaster relief operations while providing humanitarian medical, dental and engineering assistance to nations of the Pacific.

Nicola is currently completing postgraduate research through Massey University investigating the nutritional health of female recruits and any associations with physical or cognitive performance during basic combat training.

Sub Lieutenant Rebecca Smeele

Rebecca studied at the University of Otago and gained a Bachelor of Science majoring in Human Nutrition and Psychology before completing a Master of Dietetics (passing with distinction) in 2013.

She joined Army Health Services as a civilian dietitian at the beginning of 2014 and worked for three years in this capacity before joining the Royal New Zealand Navy as an officer in 2017.

A career highlight for Rebecca was deploying with the New Zealand Army to Northland as part of a major dental and health promotion task group. She was responsible for developing and leading the healthy lifestyle programme delivered to schools. The aim was not only to deliver the programme to students, but also to teach and transfer ownership to local health promoters from Northland District Health Board and health trusts. Other career highlights include presenting the NZDF CNS at an international defence feeding systems integration symposium in 2016, being hosted by the sports nutrition service at the Australian Institute of Sport and learning about best practice in sports catering and foodservice, and capturing the NZDF touch team at world masters games in 2017.

PUBLIC HEALTH NUTRITION POLICY IN NEW ZEALAND – A MINISTRY OF HEALTH PERSPECTIVE FROM 1991–2017

The history of Dietitians NZ would not be complete without recognising the significant involvement of the Ministry of Health (MoH), and its impact on the way in which dietitians have practised over the last 25 years. Public health nutrition policy has guided every sphere of dietetic practice, including public and primary health, the community, clinical work and the food industry.

The Ministry of Health has responsibility for national public health nutrition policy in New Zealand and undertakes activities to inform policy development and guide nutrition action. The Ministry was also responsible for domestic food policy, development, administration and promulgation of food legislation until 2002 when the New Zealand Food Safety Authority was established. Subsequently the New Zealand Food Safety Authority was incorporated into the Ministry of Agriculture and Forestry and is now part of the Ministry for Primary Industries.

A significant number of dietitians have worked at the MoH, the longest serving being Elizabeth Aitken, who is currently principal adviser (nutrition). She led the New Zealand delegation to the UN Codex Alimentarius Commission’s Committees on Food Labelling (CCFL) in Canada, and Nutrition and Foods for Special Dietary Uses (CCNFSDU) in Germany for a decade. She was an adviser to the World Health Organization for the 2003 Western Pacific Region’s consultation on the global strategy for diet, physical activity and health and in 2004, Elizabeth received the Dietitians NZ Award of Excellence.

During this period her dietetic colleagues at the MoH have included Anna Jackson, Carolyn Watts, Catherine Lofthouse, Christine Stewart, Donnell Alexander, Eirean Gamble, Jane McLennan, Jenny...
In 1995, the Governments of Australia and New Zealand signed a treaty for a joint food standards setting system to come into force in July 1996. The bi-national organisation is now known as Food Standards Australia New Zealand (FSANZ) and the joint food standards that replaced the New Zealand Food Regulations (1985) are contained in the Australia New Zealand Food Standards Code.

MINISTRY OF HEALTH AND THE PUBLIC HEALTH COMMISSION

During this period the Government introduced the concepts of purchaser-provider split, competition and contestability into the New Zealand health system. The MoH retained responsibility for development, administration and promulgation of food legislation. The Public Health Commission (PHC) was responsible for developing food and nutrition policy advice from 1 July 1993 until 1 July 1996, when the PHC was disestablished and the food and nutrition policy accountabilities were returned to the MoH. During the 1993-6 period the PHC provided advice to the Minister of Health. The MoH was requested to review and comment on PHC advice and respond to the Minister of Health with ‘contestable’ advice. Elizabeth Aitken and Jenny Reid worked at the PHC.

Key areas of food and policy advice provided by the PHC included:

- Advice to health nutrition practitioners and consumers on folic acid supplementation to reduce risk of pregnancies being affected by neural tube defects.
- The development of Food and Nutrition Guidelines for Healthy Children, Adolescents, Older People, Pregnant Women, and Breastfeeding Women in the form of background papers for health practitioners and accompanying health education resources for consumers.

Food and Nutrition Guidelines for adults was undertaken and the report published in 1999.

Food and Nutrition Guidelines for Healthy Pregnant and Breastfeeding Women were combined and revised in 2003. The report published in 2003.

2001-2005 Nutrition highlights

- Toolkits to guide District Health Boards on best practice or best evidence to make progress on improving the health of New Zealanders were developed in 2001 for each of the 13 population health objectives.
- New Zealand Health Monitor (2002) established the periodic survey programme with either a children’s or adults’ national nutrition survey to be undertaken every five years.
- The first national children’s nutrition survey was undertaken in 2002 and the report published in 2003.
- Nutrition and the Burden of Disease (2003) was based on international work and the first attempt to quantify the burden of non-communicable diseases from poor nutrition and excess body weight.
- Food and Nutrition Guidelines for Healthy Adults (2003) and resources were reviewed.
- Healthy Eating Healthy Action (HEHA) strategy released in 2003 and implementation plan released in 2004. This comprehensive integrated framework and plan addressed the nutrition, physical activity and obesity objectives of the NZHS. In following years, a significant amount of new funding was provided to the health sector to support staff and many new programmes to be rolled out and evaluations undertaken.
- Tracking the Obesity Epidemic (2004) compared data from successive national nutrition survey time for adult New Zealanders and compared cohorts by age and gender.
- First schools participated in Fruit in Schools programme (2005).

2006-2010 Nutrition highlights

- Resulting from a National Health and Medical Research Council of Australia and Ministry of Health project, the first joint Nutrient Reference Values for Australia and New Zealand were published in 2006.
- Food and Nutrition Guidelines for Healthy Pregnant and Breastfeeding Women were combined and revised in 2006, along with the related resources.
• The only comprehensive food and nutrition monitoring report was published in 2006.
• The Health Select Committee undertook an inquiry into obesity and type 2 diabetes (2006-7), with support provided by the Ministry of Health.
• Implementing and monitoring the International Code of Marketing of Breast-milk Substitutes in New Zealand. The Code in New Zealand was published in 2007. This document contains New Zealand’s interpretation of the international code for protecting, promoting and supporting breastfeeding. There are two voluntary codes: one for health workers and the other for the Infant Nutrition Council (industry), as well as a process for managing complaints.
• Roll out of the HEHA implementation plan and Mission-on health targets 2007/08. Mission-on was a government initiative focused on children and young people including the health, sport and recreation, and education sectors. Food and nutrition-related highlights included development and implementation of the food and beverage classification for schools and early childhood education centres, and the nutrition fund.
• Food and Nutrition Guidelines for Healthy Infants and Toddlers (Aged 0-2 years) and resources were updated and published in 2008.
• 2008/09 New Zealand adult nutrition survey was undertaken.
• Development of the first evidence-based Clinical Guidelines for Weight Management in New Zealand Adults and New Zealand Children and Young People (2009).

2011–2017 Nutrition highlights
• New Zealand Health Survey moved from a periodic survey to a continuous survey in 2011. This included measured heights and weights for reporting on body mass index for those over two years of age and introduced annual reporting as a Tier 1 statistic. Annual reports of key results are published and it is now possible to aggregate data over several years for ethnic groups as well as for medium and smaller District Health Boards.
• In 2011, an evaluation of the Food and Nutrition Guidelines series was undertaken.
• Revised Food and Nutrition Guidelines for Children and Young People (combining those for children and adolescents), and Older People and related resources were published in 2012 and 2013 respectively.
• Consensus Statement on vitamin D and sun exposure in New Zealand (2012) and Companion Statement on vitamin D and sun exposure in pregnancy and infancy in New Zealand (2013).
• The Childhood Obesity Plan with 22 initiatives was published in 2015.
• The Eating and Activity Guidelines for New Zealand Adults and resources were released in 2015, and are part of a new series that will replace the Food and Nutrition Guidelines series.
• Health Loss in New Zealand 1990-2013 (2016). This report updated the burden of disease and life expectancy data. The report identified that for the first time the combined effects of dietary risk factors on health loss are estimated to exceed that of tobacco.
• Updated guidance, especially for use in primary care settings, has been provided in the Clinical Guidelines for Weight Management in New Zealand Children and Young People, and for New Zealand Adults and were published in 2016 and 2017 respectively.

THE MINISTRY OF HEALTH AND THE HEALTH PROMOTION AGENCY
In 2012, the Health Promotion Agency (HPA), a new crown agency, was established. Key functions of the HPA include promoting health and wellbeing and encouraging healthy lifestyles; preventing disease, illness and injury; and enabling environments that support health, wellbeing and healthy lifestyles. As a result, most social marketing campaigns and the management of health education resources were transferred from the Ministry of Health to the HPA. Dietitians who have worked or are working at the HPA include Amanda Wynne, Dr Mary Ann Carter and Susan Cook.

MINISTRY OF PRIMARY INDUSTRIES (MPI)
Dietitians working in government help to contribute specialist nutrition knowledge to a wide range of government activities. The Food Science team at the Ministry for Primary Industries (MPI) includes three registered dietitians. Charlotte Channer is the acting manager of this group. She started her dietetic career working at Christchurch Hospital, travelled to the UK, and worked in various London Hospitals before returning to New Zealand to work in paediatric dietetics at Wellington Hospital. She then moved to the New Zealand Food Safety Authority to become MPI. Rebecca Doonan has been with MPI since graduating just over a year ago, and Donnell Alexander started at MPI three years ago after a long career in nutrition communications, research management and public health. The team’s permanent manager, Julia Edmonds, also a dietitian, is currently on maternity leave. The team maintains close relationships with dietitians and others working in industry, other government departments (especially the Ministry of Health) and academic researchers.

The total MPI Food Science team comprises of nine people with a mixture of dietetic, nutrition, food technology and food science skills, making them a key source of scientific knowledge on food-related issues. Their work is diverse and provides key inputs into local food labelling and composition standards including nutrition and health claims, Healthy Star Rating system, sugar labelling of foods, fats and oils labelling infant and follow-on formula, folic acid fortification, and global standards setting work (CODEX), most notably for infant and follow-on formula composition, front-of-pack labelling and food additives.

Practising dietitians are most likely to interact with MPI dietitians when they have questions about the Australia and New Zealand Food Standards Code.
or are actively involved in various consultation processes such as the review of the Health Star Rating System. Roslyn Norrie of Auckland is Dietitians NZ’s representative on the MPI Food and Beverage Forum, run under MPI’s Plants, Food & Environment division. Dietitians NZ is also a key stakeholder on the Food & Beverage Advisory Forum that is the primary MPI mechanism for regular contact with companies, special interest groups, and organisations involved with the food industry and the Food Act.

Jenny Reid began working for the Department of Health in the area of nutrition policy in 1990. Her role as nutrition adviser in the newly established ‘Healthy Communities’ team included being the technical adviser to the National Nutrition Taskforce. She then moved to the short-lived but extremely active Public Health Commission (PHC) as senior policy analyst (nutrition). While at the PHC Jenny represented New Zealand at the first International Congress on Nutrition (ICN) where the global commitment to developing national plans of action for food and nutrition was launched. In 1996 Jenny completed a Master in Public Health where she developed the still current food security questionnaire tool that was subsequently attached to the national nutrition survey to assess levels of food insecurity in New Zealand.

Her next move was to the Australia New Zealand Food Authority (ANZFA), the predecessor of Food Standards Australia New Zealand (FSANZ). This ignited in Jenny an interest in food regulations. In 2003 she moved to the newly established New Zealand Food Safety Authority (NZFSA) to continue to work in food regulations, both domestic and international. Key areas of work included the developing trans-Tasman food regulatory system that covers domestic regulations for composition and labelling, and supporting their development from both a technical and policy perspective. While at the NZFSA she completed a Master in Public Administration through the Australasian School of Government. Jenny says “this was a totally challenging but very rewarding time.”

The area of international food regulations has provided some of the greatest highlights in Jenny’s career and she has continued to lead the New Zealand delegations to the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) and the Codex Committee on Food Labelling (CCFL) at the NZFSA and its various incarnations including in her current position at the Ministry for Primary Industries (MPI). New Zealand has taken a major lead in these committees with CCFL leading work on nutrition labelling and currently leading with Costa Rica work on front of pack nutrition labelling and in the CCNFSDU leading the highly contentious review of Follow up Formula. Through her work in Codex she has strengthened connections with WHO and continued to be involved in global nutrition related work. Jenny spent a month in Geneva developing draft global guidelines for front of pack labelling for WHO in 2017 and led workshops on nutrition labelling for WHO in Thailand in 2018. Jenny appreciates her nutrition and dietetic training and working for government has provided a superb background for her passion in international nutrition and related regulations and policies.

**ACCIDENT COMPENSATION CORPORATION**

The Accident Compensation Corporation (ACC) is a New Zealand Crown entity responsible for administering the country’s universal no-fault accidental injury scheme. The scheme provides financial compensation and support to citizens, residents, and temporary visitors who have suffered personal injuries.

Dietitians are among the health professionals contracted to ACC care providers and are often called on to provide nutritional care to ACC clients. Nikki Hudson is Dietitians NZ’s representative for ACC. Her role serves to advise ACC on dietetic issues and to increase the profile of dietitians in ACC, to liaise between ACC and private practice dietitians, to assist in maintaining standards of dietetic practice in ACC that are professional, evidence-based, cost-effective, and complying with ACC and Ministry of Health service provisions and contracts.
PUBLIC HEALTH

PUBLIC HEALTH (PH) SPECIAL INTEREST GROUP

In 1991, the NZDA special interest group for Community Dietetics was established. This existed until 2001, when it was wound up and replaced by the Public Health SIG that better reflected the focus of the group and the direction of the health environment. This group started off with 32 members, and now has links with almost 150 members. Kate Sladden and Chris Cook were the inaugural conveners with Kate Sladden editing the biannual newsletter. Vicki Robinson was convener of the group from 2011 to 2017 during which time it considerably expanded in scope and size.

A key function of the SIG has been to raise awareness and profile of public health nutrition within the dietetic profession. To strengthen the group, new members were recruited including Delvina Gorton (HF), Sarah Hanranan (NF) and Rebecca Whiting (HPA). Julia Lyons (ANA). They played a key role in driving the initial group and the SIG’s work with Dietitians NZ to develop the risk management tool, GAMRER, and a new more transparent approach to sponsorship and partnerships. The SIG has allowed for strengthened networks and ways of working and supported a shift in focus to influencing wider socioeconomic issues through settings, submissions, research, and policy to impact nutrition. These networks have facilitated sharing of the Christchurch fruit and vegetable cooperative model to help access to fruit and vegetables to be undertaken in other regions including Wellington, strengthened work on sustainability, development of resources for applications for the disability allowance for those eligible; and Massey University and University of Otago research on cooking skills and food policy. Most significantly the SIG network has facilitated development of the recently completed national DHB food policy undertaken alongside the Ministry of Health as one way to address nutrition nationally. In 2018 Rajdri Roy took over the convener role and the SIG continues to strengthen and welcome new members, including those working for Healthy Families, PHOs and universities.

Christine Cook

Chris has had a long career that has encompassed many facets of dietetics: ‘straddling the continuum - from individual health to population health’. She has practised in London, South Australia, Victoria and the Northern Territory of Australia. A highlight was working with Aboriginal communities on Groote Eylandt and being successful in assisting the health workers to get many more infants on the road to health. On her return to New Zealand in 1987, Chris enjoyed working as a clinical dietitian in general outpatients and in diabetes services. Gradually the desire to work upstream became pressing and Chris decided to study public health so that she could reorient her career. As many years had passed since she was a student, she was set the challenge of passing two stage 3 sociology papers with at least B+ to be able to enter the Master of Public Health programme.

Chris comments that she could feel her mind being stretched as the paradigms of public health were introduced. Fellow students came from diverse backgrounds and class discussions were stimulating. It involved a complete change of mindset to see that traditional health practices were often ‘victim blaming’ and that individuals needed a supportive environment and a reoriented health sector to facilitate change. Those with the greatest disease burden were generally the most ill-equipped to take up messages delivered by education alone.

Chris worked at Auckland Regional Public Health Service (ARPHS) as nutrition co-ordinator initially for the health protection team. This later merged with health promotion and a stronger team was built, enabling all strands of the 1986 Ottawa Charter for Health Promotion to be addressed. Kate Sladden delivered strategies aimed at informing and reorienting the health sector. Pip Duncan worked with chefs and the food industry to encourage healthier meals in hospitality and foodservice. A highlight was winning the Health Innovation Awards Excellence in Prevention Award and the Supreme Award in 2007 for the ‘Healthy Kai’ programme. ARPHS had many community partners in the delivery of this programme that was directed at encouraging both the supply of and demand for healthier food options in low decile shopping centres. A Chinese nutritionist (Kai Hong Tan) was invaluable in working with retailers to increase their understanding and engagement. The Labour government of the time was supportive of public health and as their programme, Healthy Eating Healthy Action (HEHA – 1999-2008) was comparatively well-resourced, this era became public health nutrition’s ‘moment in the sun’.

Kate Sladden

Working at Good Health Whanganui as a community dietitian was the first step in Kate’s rewarding career in public health. She had trained in Christchurch, and worked there and in the UK on her OE before choosing to work in this regional city.

In 1994, Kate relocated to Auckland and worked for Te Whanau o Waipareira Trust and Auckland District Health Board on a partnership nutrition programme. In this role, she established and ran a community nutrition ‘train the trainer’ programme – Kai Oranga Tinana Mo Waipareira. The programme focused on building nutrition capacity in the West Auckland community.

Kate moved to Massey University to work on the pilot for the New Zealand children’s nutrition survey. She helped develop the methodology for the dietary assessment tools used in the survey. This pilot led on to the National Children’s Nutrition Survey, published by the Ministry of Health in 2003.

She was then employed by Auckland Regional Public Health Service (ARPHS) working on a range of projects including writing the hugely successful public health nutrition newsletter. These newsletters were for practice nurses to enable them to give evidence-based nutrition information to their patients. They were soon sought by other health professionals, teachers and District Health Boards.
Healthy Eating Healthy Action (HEHA) was a Government strategy with a wide range of initiatives and Kate became the HEHA manager (Planning and Funding) for the Auckland District Health Board. She implemented the HEHA programme within schools and communities. The HEHA programme was disbanded with a change of government. It had operated from 1999-2008. By this time, the numbers of dietitians working in public health was growing and informal meetings were held during the annual conference.

In 2004, during her public health career journey, Kate gained a Masters in Public Health from the University of Auckland. She is currently manager, Planning and Funding, for Older People’s Health in the Auckland and Waitemata District Health Boards. She manages contracts for aged residential care, home and community support services as well as contracts for non-government organisations (NGOs).

**Rebecca McCarroll**

Rebecca was one of the last group of students to qualify with a PGDipDiet from the University of Otago (2012) and graduated with a Master of Health Sciences with First Class Honours from the University of Auckland in 2015. She is currently a professional teaching fellow in the dietetic training programme at the University of Auckland and public health dietitian in Planning and Funding at Waitemata and Auckland District Health Boards.

As a public health dietitian, Rebecca is a member of the National District Health Board Healthy Food and Drink Environments Network. She is part of the group of nutrition, dietetic, foodservice and other public health representatives from all New Zealand District Health Boards who, alongside Ministry of Health advisers, have developed the national healthy food and drink policy. The policy aims to demonstrate commitment to the health and wellbeing of District Health Board staff, visitors and the general public by providing healthy food and drink options consistent with the Eating and Activity Guidelines. The policy, based on evidence and best practice, provides consistent nationwide guidelines on how to provide healthier food and drink environments.

Since 2015 Rebecca has represented Waitemata and Auckland District Health Boards on the Healthy Auckland Together (HAT) interagency group. This is a group of 21 organisations (including Auckland Council, Transport Universities, District Health Boards, Heart Foundation) working together to change Auckland’s public health policy, infrastructure and environments to encourage physical activity and good nutrition. The group’s leadership and vision are inspirational and targeted at policy areas that are likely to have the greatest effect on improving nutrition and physical activity. They are working in an area that is political and continually challenging.

Rebecca, with Rozanne Kruger, is a Dietitians NZ representative on the Dietitians Association of Australia (DAA) Practice-based Evidence in Nutrition (PEN) Advisory Committee. Since 2014 she has provided strategic guidance to DAA and the PEN Global Team. She also works to promote PEN in New Zealand and provide insight to DAA on New Zealand’s use and perception of PEN and has presented on PEN at the Dietitians NZ 2016 conference.

As Dietitians NZ’s representative on the Activity and Nutrition Aotearoa (ANA) Member Forum, Rebecca is inspired by the integral work ANA does to promote nutrition and physical activity while staying relevant.

**Delvina Gorton**

Growing up in a vegetarian household, with parents who were into wholemeal bread when everyone else was eating white, it was natural that Delvina eventually found her way into a career in nutrition. She studied at the University of Otago as a mature student, having tried different careers and travelling beforehand. She became a dietitian, but was never keen on working in the hospital system.

After working in private practice, she moved to the diabetes service at Waitemata District Health Board. Faced every day with the struggles people had to change their habits within a food environment seemingly designed to help them fail, her interest moved to population health and population health research with the National Institute for Health Innovation, where she learnt from a lot of very smart people. The next steps were national nutrition adviser for the Heart Foundation, and then senior adviser in the Healthy Environments team at Auckland Regional Public Health Service working with the Healthy Auckland Together (HAT) coalition. Both were really rewarding roles with great colleagues. But her passion for mountain biking and running trails soon took over, and she packed up and headed for the mountains in Queenstown where living at the base of some of the most amazing biking and running trails in our stunning country was the reward and the challenge.

Delvina is currently studying public policy part-time while doing contract work, with the aim of moving into a policy analyst role. She is looking forward to working on the social determinants of health from a different perspective, and helping influence the public policies that shape our towns and cities, our country and our lives.
THE HEART FOUNDATION
As the Heart Foundation celebrates its 50th year in 2018 it is timely to reflect on the significant contribution that Dietitians have made to the organisation.

This work has been at multiple levels from board, expert advisory groups, policy, and research and through its population health and heart healthcare related programmes.

BACKGROUND OF THE HEART FOUNDATION
The Heart Foundation mission is to stop New Zealanders dying prematurely of heart disease and help people with heart disease to live full and productive lives. A small group of enthusiastic cardiologists and business people concerned about the high number of Kiwis dying from heart disease met together in 1968. They created The National Heart Foundation of New Zealand: with the aim of using education and research to improve the heart health of all New Zealanders. The Heart Foundation quickly grew into a reputable charitable organisation which had a big impact on addressing the heart disease ‘epidemic’ of the 1960s. Since then, the organisation has grown into a highly-respected charity with a network of branches throughout the country.

DIETITIANS AT THE HEART OF THE FOUNDATION’S WORK
Heart Foundation dietitians have played a key role in developing public facing and culturally appropriate resources for New Zealanders to improve heart health. They have supported health professionals with the latest heart health nutrition advice, contributing to the Dietitians New Zealand clinical handbook and the Ministry of Health and New Zealand Guidelines Group evidenced-based practice guidelines for the assessment of cardiovascular disease and diabetes, launched in 2003.

VISUAL FOOD GUIDE
Through the 80s and 90s, the healthy food pyramid and the healthy food shell (an adaptation for Pacific people) were used to show the proportion of foods to have in a heart-healthy diet. Twenty years on, dietitians from both within and external to the Foundation played a key part in the redevelopment of the old healthy food pyramid to the new ‘Healthy Heart’ interpretation. This updated the guide with modern nutrition science, and the process involved literature reviews of overseas models, evidence gathering, scoping public and health professional engagement, communication and ongoing refinement of the model. The ‘Healthy Heart’ visual food guide continues to be the cornerstone of our food and nutrition advice to shoppers, children and health professionals.

IMPROVED FOOD LABELLING AND FOOD COMPOSITION
Dietitians have helped shape the organisation’s advocacy across a number of areas, including successfully lobbying for the introduction of saturated fat on nutrition information panels.

In addition to this work, the Foundation launched the Tick programme in 1991 to further educate shoppers and provide them with more information to make healthier choices. Dietitians continually evolved the nutrient criteria that underpins the programme. The programme was retired in 2016.

Dietitians also supported the extension of the expertise of the Tick programme into a number of other important areas.

- In 2006 the Foundation decided to extend its food reformulation work into low-cost, high-volume foods by setting salt reduction targets with food industry and, in 2016, sugar reduction targets.

- Since the Heart Foundation took over management of the Ministry of Health’s Food and Beverage Classification System (a tool designed to support schools and early childhood education services to stock and promote healthier food items for children) in 2016, dietitians have evolved the nutrient framework that underpins the system and placed a greater focus on whole and less processed foods.

POLICIES, POSITION STATEMENTS, AND A TRANSITION FROM NUTRIENTS TO FOODS
The Foundation’s first comprehensive set of food and nutrition policy statements were developed in 1999. Dietitians were pivotal in doing the evidence reviews and creating the policies and played a key part in the peer review of these policies as representatives of the Heart Foundation’s Food and Nutrition Advisory group.

Heart Foundation dietitians have been crucial in transitioning the Foundation’s food and nutrition philosophy away from specific nutrients and foods to placing a greater focus on whole and less-processed foods, and the principles demonstrated in the ‘Healthy Heart’ visual food guide.

This change in philosophy is demonstrated in a new project called Easy Meals with Vegetables which leads with food skills and focuses on cheap, easy to prepare meals that increase the consumption of vegetables.

PACIFIC HEARTBEAT
The Pacific Heartbeat (PH) team was set up in 1991 and Heart Foundation dietitians were involved in planning and delivering nutrition training for its part-time health presenters and developing Pacific recipes for the Heart Cookbook.
In 1998 PH funded a Pacific dietitian to take over nutrition training to build capacity in the Pacific community, including the development of the Certificate of Proficiency in Pacific Nutrition (CPPN) delivered by the Auckland University of Technology. The PH dietitian led the community consultation underpinning the revision of the Pacific Food Shell model and developed the current Eat for Health pamphlets in English, Samoan, Cook Island, Tongan and Niuean.

PRIMARY CARE
Dietitians are integral to the delivery of a range of Heart Foundation programmes and services in the regions. They continue to employ dietitians who support health providers – particularly in primary care – with up-to-date heart healthcare advice and support to people and their families who have been affected by heart disease.

SCHOOLS AND EARLY LEARNING CENTRES
Another strategically important area where the dietitians are important is in the delivery of education programmes to schools and early childhood services. Dietitians work with these sectors in a number of ways, from educating children on healthy eating, supporting the schools and early childhood centres to implement healthy food policies and practices, through to providing regional leadership in facilitating and advocating for sustainable change.

COOKING CURRICULUM AND EASY MEALS WITH VEGETABLES
Dietitians have also been actively involved in developing a new piece of work focused on supporting year 7 and 8 students to cook a healthy meal as part of the school curriculum.

Dietitians who have been (and are currently) Heart Foundation staff or in advisory roles to the Heart Foundation’s work include: Ada Cheung, Alex Chisholm, Angela Bernill, Anna Malan, Anne Trappitt, Bev Watson, Branko Cvjetan, Brianna Tekii, Catie Pearson, Cheree Mellow, Dave Monro, David Roberts, Deb Sue, Delvina Gorton, Heather Fear, Hollie Buchanan, Jane Johnsson, Janene Garner, Janice Bremer, Jeanette Rapson, Jenny Reid, Joanne Arthur, Julia Jack, Kelsey Link, Kim Pennington, Kit Cohr, Leanne Young, Lily Henderson, Linda Harris, Mafi Funaki-Tahifote, Margaret Till, Mary-Ann Carter, Megan Grant, Nikki Chilcott, Penny Bailey, Pip Duncan, Qa-t-a Amun, Rebecca McCarroll, Rebecca Wilson, Rhodi Bulloch, Sarah Goonan.

NEW ZEALAND NUTRITION FOUNDATION
Since registering as a charity nearly 40 years ago the New Zealand Nutrition Foundation has worked with dietitians to improve the local food environment. Early projects were large one-offs like Food Glorious Food in the early 90s and Breakfast Club extolling the importance of breakfast in the mid 90s. An important initiative of the Foundation involving dietitians was the formation of the Committee for Healthy Ageing in 2003. This group has provided education seminars and resources to a range of organisations and to community living older people.

JUST COOK, the Foundation’s most recent flagship campaign launched in 2011 aimed initially to develop cooking skills in youth. The programme expanded in 2016 to encompass the Foundation’s healthy ageing programme – JUST COOK Healthy Ageing. The programme expanded in 2018 to include a Unit Standard for older people delivered by a dedicated group including retired and newly graduated dietitians, and an eight-week programme. Tika Tunu, for wāhine and tāne in prison. In 2018 Tika Tunu expanded to include a Unit Standard and has been adapted to a community programme for high-needs communities, including women in refuge and families dependent on food banks, as a way of improving long-term whānau health and well-being.

Communicating nutrition science in a clear accessible way was always a priority for the Foundation through campaign messages, teaching materials, articles and seminars. Over time this has changed to websites (there are now three), social media, providing comment for the media and hands-on training.

With the expansion of dietetic training over recent years, student dietitians have completed placements with the Foundation. Sarah Hanrahan, CEO and dietitian, comments that “they have made significant contributions to our programmes and provided a highly valued perspective on our activities.”

Special note should be made of some of the many dietitians who have made a significant contribution to the Foundation over the years, including Belinda McLean, Christine King, Fiona Carruthers, Jeni Pearce, Julian Jensen, Kaye Dennison, Pamela Williams, Sally Watson and previous CEO Sue Pollard, along with the many others who have served on committees, acted as advisers and inspired its work.

STROKE FOUNDATION NZ
The Stroke Foundation is the only national organisation dedicated to reducing the incidence of stroke, improving treatment outcomes, and supporting those affected by stroke.

Julia Rout
NATIONAL HEALTH PROMOTION MANAGER
Julia and her team aim to create environments where it is easier for New Zealanders to lead a healthy lifestyle. Their goal is to reduce the number of people experiencing stroke, especially in high risk communities. Initiatives include the Big Blood Pressure Check, Pacific Stroke Prevention Project and FAST campaign (Face dropping, Arm weakness, Speech difficulty, Time to call 111). Julia has worked in public health for over a decade and is a New Zealand

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registered dietitian. She joined the Stroke Foundation in 2013. She has held positions in both government and non-government organisations, including ANA for five years. Julia is an experienced project manager, specialising in finding clever solutions to complex problems, working across cultures, stakeholder engagement, evidence-informed practice, leadership and advocacy.

**CANCER SOCIETY OF NEW ZEALAND**

The Cancer Society’s vision is to be the leading organisation dedicated to reducing the incidence of cancer and ensuring the best cancer care for everyone in New Zealand. The society has core services in health promotion, support, information and resources and research and provides leadership and advocacy for improving community wellbeing by reducing the incidence and impact of cancer. It is a non-government organisation reliant on community support and donations.

Many dietitians have contributed to the Cancer Society as part of their health promotion work. Previous employees of the Cancer Society include Pamela Williams, CEO of the Canterbury and West Coast Division between 1990 and 2003, and recent graduate Alex Govan was a health promoter in 2017, also for the Canterbury and West Coast Division based in Timaru.

**Sophie Carty**

Sophie Carty is a registered dietitian and is currently employed by the Otago and Southland Division of the Cancer Society as health promotion and advocacy manager – located in Dunedin. In her previous role as a health promotion specialist at WellSouth in Otago, she was involved in the coordination of health promotion programmes, as well as public health advocacy, research, policy development, and participation in local networks and advisory groups.

Sophie has served as convener of the Public Health SIG, and has a passion for public health dietetics, sustainable food systems, and creating environments that empower people to make informed choices to better their wellbeing. As a new Activity and Nutrition Aotearoa (ANA) board member, and as Dietitians NZ’s representative on this body, she looks forward to the opportunity to improve health and health equity.

**ACTIVITY AND NUTRITION AOTEAROA (ANA)**

Activity and Nutrition Aotearoa (ANA, formerly Agencies for Nutrition Action) is a vibrant organisation with a purpose of connecting people and organisations engaged in the cause of improving the nation’s nutrition and physical activity levels. ANA was established in 1993, following collaboration among the then NZDA, Heart Foundation, Cancer Society, Te Hotu Manawa Māori (Toi Tangata) and the Nutrition Foundation. A mandate was set to combine and strengthen the voice of public health nutrition issues. Heather Fear, as the then vice president of the NZDA, was one of the founding members of ANA. Since then ANA’s work has grown to include the promotion of physical activity and a very active voice in 2018 as it approaches its 25th Jubilee.

There have been many dietitians actively involved with ANA. Nicola Chilcott was the executive director for ten years and Julia Rout was awarded the Nestlé Young Achievers Award while working at ANA in her early career. The legacy of dietitians continues with two dietitians employed by ANA currently, Alison Pask, health promotion manager and Chelsea Slobbé, professional development co-ordinator.

Kate Sladden is an ANA past chairperson and in 2018 Mafi Funaki-Tahifote is the chairperson. Sophie Carty is on the ANA board and Dietitians NZ representative, while Rebecca McCarroll participates in the biannual ANA member forums as Dietitians NZ representative.

**Alison Pask**

Alison Pask’s early career took her to Palmerston North where she was exposed to a wide range of clinical conditions. Alison is driven by improvement and she is always seeking more efficient and effective ways to work. Health and wellbeing are where her passion lies. She began her public health career as a health promotion manager and ANA uses her skill set. As of 2018, she is Dietitians NZ representative on Allied Health Aotearoa NZ.
**THE Dietitians in the Food Industry (DIFI) special interest group (SIG) was established in 2005 by Julie North with assistance from Jane Dodd and Donnell Alexander. There had been earlier networking groups championed by Dr. Heather Spence; however, by 2005, there were sufficient numbers in established positions to start this SIG.**

Registered dietitians and nutritionists in the food industry are influencing the New Zealand food environment in many ways, including the guidance of new product development and associated education and marketing. They ensure that their approaches align with public health issues and dietary guideline recommendations. In this way, registered dietitians and nutritionists help to ensure a balanced range of products are available to consumers and that their nutritional attributes are appropriately communicated.

Current membership of the SIG is about 68 dietitians and related professionals, including some Australian members and key objectives include:

- building an understanding of the role of dietitians and related professionals working within the food industry.
- networking with stakeholders to form a consensus of opinion on nutrition-related matters pertaining to the food industry.
- assisting Dietitians NZ in policy development as it relates to the food industry.
- promoting relevant Dietitians NZ services within the food industry.

Over the years since the SIG was established, key activities have included many seminars for DIFI and other members on items of topical interest in the food and beverage industry. NZDA/Dietitians NZ and its relationships with industry, e.g., feedback on the NZDA framework for relationships with external organisations, and consideration on offering some work experience to student and graduating dietitians.

**2006.** A discussion forum between the DIFI SIG and Public Health SIG shared views and discussed the dilemmas facing the two SIGs.

**2008.** Submission made on the Public Health Bill, as part of the NZDA submission.

**2009.** Submission made on front-of-pack labelling policy, as part of the NZDA submission.

**2013.** Submission made to the Dietitians Board on the proposed revised code of ethics.

**2015.** Input into Dietitians NZ submission for advertising to children review.

_Inaugural convener: Julie North; current convener: Cherry Baker._

**Julie North**

After her honours year at the University of Otago and before completing dietetic training in Wellington, Julie gained a summer intern position with the New Zealand Dairy Board. It was a game changing three months as it opened her eyes to the significant influence a role in industry can have. After graduating, she returned to the New Zealand Dairy Board for two years before going overseas with fellow dietitian Kit Cohr. Enormously grateful to Penny Field for writing her a reference to the British Dietetic Association of the sexual dysfunction clinic at St. Mary’s Hospital in London to a locum position as clinical dietitian in Britain’s only remaining tri-service military hospital, in Gosport – the pay was 50p more an hour. Back in New Zealand, Julie was a nutrition adviser with Food Standards Australia New Zealand (FSANZ), before heading to Auckland for the nutrition manager position at Wattie’s. Her role expanded to cover Australia during her 12 years there, and included being a member of Heinz global infant nutrition team led from Italy. With a love for communications, Julie thoroughly enjoyed a year with Network Communications as head of FoodGroup, before moving to Nelson where she now runs her own food consultancy and tries to grow a vegetable garden.

Career highlights to date include presenting at a public health conference in Beijing on the importance of solid relationships between industry and government for infant health and safety, and memorable for being brought to tears by the reality of food sabotage and its heartbreaking effects – an issue fortunately not prevalent in New Zealand. With a deep understanding of food manufacture and marketing and a desire to reach practical solutions for public health issues, Julie values her roles on government advisory groups such as Health Star Rating, and Food and Beverage Classification System.

**THE FOOD INDUSTRY**

By the late 1980s dietitians had moved into primary industries, Isabel MacNeil at the Dairy Board, and Beef + Lamb New Zealand, (then The Beef and Lamb Marketing Board) had employed high profile dietitians Sally Knight, Cindy Williams and the British trained Fiona Carruthers. Pip Duncan worked for the New Zealand Pork Industry Board and was followed by Jan Hales. Julie North, Sara Collie, and Penny Bailey all worked for Wattie’s as nutrition managers. Another dietitian working long term for the food industry is Jenny Yee, nutrition and claims manager at Frucor Sunfory in Auckland.

**Penny Bailey**

Penny Bailey, infant and corporate nutritionist at Heinz Wattie’s, is proud to be a dietitian working in the food industry and to be part of a positive nutrition-related influence. Her role is diverse and includes working with a wide range of people from business teams such as marketing, regulatory and product development through to consumers, health professionals and industry groups. Much of her work is reviewing and updating the nutrition guidelines applied to new product development and in driving reformulation of foods. She participates in project teams to ensure nutrition targets are technically achievable and the products deliver consistent quality and great flavours. As Penny realistically says “after all, there is no point in working to improve the nutrition profile of products if they do not appeal to consumers.”

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She works closely with the Heinz Wattie’s regulatory affairs team and food technologists skilled in the regulatory environment to ensure nutrition messaging is in line with the FSANZ Code regulatory requirements. Penny’s role at Heinz Wattie’s is varied and hugely rewarding, particularly the support she can provide towards solutions aimed at improving the food environment for New Zealanders.

Pip Duncan

Pip has worked concurrently with public health and the food industry to successfully combine core population health values with food industry initiatives without compromising. She worked for the Auckland Regional Public Health Service and the Heart Foundation and for the food industry including New Zealand Pork to produce a range of consumer and foodservice/hospitality resources covering food, nutrition and food safety.

Since 2009 she has worked for vegetables.co.nz in education and marketing roles. Vegetables.co.nz is an organisation funded by New Zealand commercial vegetable growers to promote fresh vegetables. Pip has successfully run evidence-based, peer-reviewed campaigns for all sectors from early childhood education centres to aged care and involving related organisations. For the last two years this has included taking a lead role in the vegetables.co.nz and Heart Foundation’s Cooking curriculum Project for years 7 & 8 and ‘Easy meals with vegetables’, a partnership with the Health Promotion Agency, Heart Foundation and vegetables.co.nz.

THE PHARMACEUTICAL INDUSTRY

Carol Wham was an early pioneer in this area. She joined Douglas Pharmaceuticals and worked on product development and marketing of Scientific Hospital Supplies specialist paediatric products. This led to more dietitians working for Douglas and she was pivotal in the Nutricia takeover. Nutricia in turn has employed many dietitians, including Julie Lowe, Sarah Hanran and Susan Ke work who now works for Nestlé in Singapore in regional nutrition.

Julie Lowe

Julie was involved with the setup of Nutricia in 1991 importing pharmaceuticals into New Zealand. Her role was sales, marketing, medical affairs and regulatory work. In 2018 these roles are all separate functions and held by a bevy of Julie’s well qualified colleagues. As the company grew, Julie’s roles grew and she has worked in sales and marketing, been on the sales and marketing team for New Zealand, spent several years on the Australasian management team and is now medical affairs manager for Frailty in New Zealand and Australia as well as managing both market access and external affairs. A great communicator, Julie has had to deal with many government organisations such as the Ministries of Commerce and Health, PHARMAC and local health authorities just to secure permission to import and gain market access. Julie is proud to be a dietitian as it has given her great depth of background and applying clinical knowledge has made her many roles easier and more rewarding. She says “Once a dietitian, always a dietitian.”

THE PUBLIC RELATIONS INDUSTRY

Belinda McLean was a trailblazer in the public relations (PR) field, a dietitian and journalist; she worked on food clients’ campaigns introducing the importance of evidence-based information. While some dietitians do consultancy work for PR companies, others like Jane Dodd, Donnell Alexander, Julie North and Claire Owen successfully held full time positions. In 2018 Jane is running her own PR Company, Donnell is working at MPI and Claire has a management role at Montana Catering in Hamilton.

Dietitians working in PR have the opportunity to promote healthy eating in ways that have wide and sustained impact. The digital landscape for example is another environment to positively influence better eating and lifestyle habits amongst people.

Jane Dodd

Jane’s career in PR spans 25 years. In 1993, she worked in Wellington in a food marketing role with a small company and gradually moved into mainstream PR. Over the years, she has worked with a wide range of food and health related clients including New Zealand Nutrition Foundation, Cancer Society, New Zealand Food Writers Guild, New Zealand Blood Service, Arthritis New Zealand, Asthma and Respiratory Foundation, Child Cancer, Heinz Wattie’s, Beef + Lamb New Zealand.

Currently Jane runs her own consultancy, the Clique, and provides PR services to a range of clients including food and beverage companies, charities and corporates. The aspect of dietetics that always interested Jane was communication. She says “It’s the end goal is to help people live better healthier lives, effective communication can make that easier. In PR, we have an opportunity to promote healthy eating in ways that can have wider and sustained impact. The qualities and values required of a dietitian are similar to communications roles and require evidence-based decision making, good planning and execution and ethical socially responsible behaviours.”

Jane has been president of the Wellington Branch and vice president, president and past president of the NZDA (1997–2002).

Claire Owen

Claire graduated from the newly developed Master of Dietetics, University of Otago in 2013. After 18 months, she moved into a career in the food industry – as a dietary consultant for Network Communication PR company where she worked with a range of companies, including Sealord, Nestlé, Heinz Wattie’s, McDonald’s and Ceres Organics. “I loved my role working with these companies. I was able to influence change on a mass scale, changing the food environment and nutrition literacy at a population level.”
Deb Sue

Deb has also been a member of the DIFI, executive committee from 2014-2017, and was treasurer of the Dietitians NZ has held roles at branch level as treasurer, an active member of Dietitians NZ, Deb provides nutrition education to chefs, teachers and students. She currently works as a food quality assurance manager for Montana Catering and oversees the food control plan across 30 sites, including schools and universities. She conducts menu audits, works with chefs to improve nutrition and provides nutrition education to chefs, teachers and students.

Claire is a strong advocate for the dietetic profession and Dietitians NZ, having been a member of the Auckland Branch committee. She is current president of the Waikato/BOP Branch, and nationally, is one of six dietitians on the Dietitians NZ Council, where she chairs the external relationships sub-committee.

THE FOOD RETAIL INDUSTRY

Deb started her career at Whanganui District Health Board as a clinical then community dietitian before heading to Auckland to pursue her interest in paediatrics at Starship Children’s Hospital and then to the Harley Street Clinic, London. This was followed by five years as the advisory service manager for Nutricia where she managed the team providing infant nutrition and feeding advice to parents and healthcare professionals.

In 2011, Deb moved on to become the Tick Programme manager at the Heart Foundation and stayed until the Tick Programme was retired. In 2017, Deb became the nutritionist and quality specialist for Countdown. In this newly created role, Deb works with the Own Brand teams to reformulate their products improving the nutritional profile, and helps set nutrition and health targets for the organisation, and provides nutrition messages for the marketing team.

An active member of Dietitians NZ, Deb has held roles at branch level as treasurer and was treasurer of the Dietitians NZ executive committee from 2014-2017. Deb has also been a member of the DIFI, Paediatrics, Public Health and Media SIGs.

Nadia Lim

Nadia has been interested in food and nutrition since she was knee high. When Nadia was 12 years old, Jamie Oliver presented The Naked Chef, his first TV show, and he inspired her to pursue a life-long love and interest in cooking, with the dream of one day being able to write her own cookbooks. Nadia studied nutrition and dietetics at the University of Otago, graduating in 2008. She decided to go into the area of diabetes, working as a clinical dietitian for the Auckland District Health Board’s diabetes clinic at Greenlane Hospital.

During her 3½ year stint there, she realised that basic cooking had become a lost skill. Nadia has always believed that cooking is one of the most important skills needed for health and happiness - “if you cook, you are in control of what goes in your food instead of allowing the factories to be.” While there are lots of schools of thought and debate around what kind of diet is ‘the best’ diet, the one thing that everyone agrees on is that the less processed food you eat, the better. Leave food as nature intended it to be, full of goodness. As Michael Pollan summed it up, “Eat (real) food. Mostly plants. Not too much.”

In 2010 Nadia was 24 years old, in a bit of a rut, not really satisfied with where she was at, and the opportunity to enter MasterChef New Zealand came along. The experience scared the ‘beepers’ out of her to be in front of a million Kiwis every week watching her cook under pressure, however she knew she had to do it to test her love for cooking. After 3½ months of competition, Nadia cooked her way to the top, winning the title. Now the hard work started, instead of making hay while the sun shines, she set about pursuing a long-term career and creating a brand around My Food Bag.

My Food Bag launched in early 2013 delivering dinner recipes and ingredients to families around New Zealand. Nadia believes that as well as being an incredibly convenient way of solving the ‘what’s for dinner?’ dilemma, it’s also a great way of educating people what a balanced meal looks like (the plate model) and introducing them to a wider variety of foods that they might not have tried before. Some of the most common feedback My Food Bag gets is “I never liked fish before, but now I do!” or “I never knew what to do with (e.g.) fennel until now.”

To date (as of mid 2018) My Food Bag has delivered over 40 million meals and is the third biggest food retailer in New Zealand. Nadia considers that the best thing to come out of My Food Bag is helping thousands of Kiwi kids with their confidence and interest in the kitchen. That is the thing she is most proud of – it will have a ripple effect in the future, because if someone knows how to cook from scratch, and has the confidence to do so, or she will not have to rely on processed foods and takeaways in the future – and hopefully these skills will be passed onto their children and grandchildren. It all comes back to the fact that cooking is one of the most important skills we can have for our health and happiness.

But feel free to have whatever you like the other 10% of the time and don’t feel guilty about it just enjoy it!

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Dietitians NZ involvement with Nutrition Care Process and Terminology

Lyn Lloyd

In 2009, the International Confederation of Dietetic Associations (ICDA) recommended the adoption of Nutrition Care Process (NCP) and associated terminology (NCPT). NCP and NCPT were first presented by the Academy of Nutrition and Dietetics (AND) almost 15 years ago to provide dietitians with a framework for critical thinking and decision making. It was designed to improve consistency of nutrition care and the predictability of nutrition care outcomes.

Dietitians NZ has been involved with the implementation of NCP and NCPT from those early days and with the support of Dietitians Association of Australia was one of the first associations outside of the USA to introduce NCP/NCPT to its membership.

The New Zealand Dietitians Board has recognised the benefit of NCP/NCPT to dietary practice and recommended this be adopted in dietary training programmes. For practising dietitians, training workshops facilitated by Franca Yovich were held around the country. She has also made annual submissions to the NCPT Committee relating to New Zealand dietitians’ experience in practice. Dietitians NZ and clinical lead dietitians have supported Franca and Dietitians NZ has provided access to the NCPT website and updates for members.

In 2012, Lyn Lloyd was asked to join the AND NCPT international workgroup. Twelve members from different countries and regions of the globe make up this group whose function is to provide international expertise and advice to the NCPT Committee for the maintenance and continuing development of NCP/NCPT and to ensure it is useful internationally.

Dietitians NZ representation on this international workgroup has led to opportunities for New Zealand dietitians to have input into the development of NCP terminology. The University of Auckland dietetic training school is using the AND Health Informatics Infrastructure (ANDHII) tool to instruct students and measure the effectiveness of their student-led outpatients clinic. Julia Sekula, director of the clinic, is currently on the Academy’s ANDHII development workgroup.

New Zealand dietitians took part in an international survey on implementation of NCP and NCPT. New Zealand had the third highest NCP implementation of the 10 countries in the study.

In 2016, the NCPT committee was renamed the Nutrition Care Process Research Outcomes committee (NCPRO) to reflect current and future NCP and NCPT needs. It provides strategic direction and co-ordination for NCP and NCPT. Lyn Lloyd was appointed to the NCPRO in 2016 and made chair-elect in 2017. She will be the first international dietitian to be elected NCPTO chair in 2018.

The NCPRO workgroup members have lobbied their country SNOMED-CT (Systematized Nomenclature of Medicine-Clinical Terms) representatives to include NCPT in the SNOMED international terminology. The inclusion of NCPT terms looks likely to begin in 2018. This is important for the future of NCP and the increasing use of electronic health records and alignment with NCPT to capture dietetic intervention outcomes data.

Dietitians NZ remains committed to supporting the implementation of NCP and NCPT for all dietitians including public health and foodservice. There is a need for strategic NCP/NCPT ongoing implementation plans to achieve full and successful implementation among dietitians in New Zealand.

Working in Australia

Sally Evans

Sally graduated BHSc from the University of Otago in 1981 and completed her dietetic training in Christchurch, and had a year at Waikato Hospital before heading overseas. She loved the science of clinical dietetics, and her thirst for knowledge and a life-long commitment to searching for and transferring the best practice globally has been a hallmark of her career. She has worked and lived in NZ, Australia, UK and Hong Kong with responsibilities extending to the Asia Pacific region, primarily China and Japan. She was the 2002 Telstra Business Women’s Award recipient (Private & Corporate Sector) and Australian Financial Review/Westpac 100 Women of Influence 2013 Corporate sector finalist.

In Australia, Sally was seconded to the Public Sector Management Commission in 1990 to restructure Queensland Health regions and the central office. She found this an intense immersive experience of aligning structure and strategy, organisational change and the political process required to deliver successful public sector change. This was followed by roles leading the implementation of many Commonwealth and State funded service re-design projects.

Sally is now a non-executive director and the former head of Retirement at AMP. She is recognised for her abilities in resolving complex situations, her deep knowledge of retirement and aged care customers, creating value for customers and shareholders and the design and delivery of digital-enabled solutions and shared value partnerships. She has become an advocate of public and private sector partnerships that draw on the strengths of both sectors. She learned what was required to set up partnerships to succeed – designing sustainability into the partnership business model – and the price you pay if you fail to do this.

Sally began her executive career in Australia. In 2011, she joined the Board of Opal Aged Care, one of Australia’s leading privately owned aged care providers. Over 70 homes in four states provide specialist aged care services for a range of needs such as dementia, hospice and respite care. She has recently become a non-executive director of Oceania Healthcare.
Three beliefs have been constant throughout her career and were embedded in the dietetic training and experience she received. Her mantra has always been to make a difference for people.

1. Do the right thing for the right reasons.
2. Shared value creates sustainable business models.
3. Pass on the wisdom that so many others have shared with you.

She would particularly like to thank the fantastic women in the dietetic profession who taught her that women are great leaders – intelligent, fair, creative and fun. Sally is the Constance Shearer Lecturer for the 75th Jubilee year.

WORKING IN SINGAPORE

Gladys Wong

Singaporean Gladys Wong came to New Zealand to complete her matriculation year at Otago Girls High School. She attended the University of Otago and then trained at the then Canterbury Health Board under tutors Madeleine Price and Mary Bonner. She returned to Dunedin and worked at Dunedin and Wakari Hospitals for about five years.

On her return to Singapore, Gladys spent five years at Temasak Polytechnic planning the curriculum and lecturing in the first tertiary level nutrition qualification in Singapore. This qualification is approved for advanced study of dietetics overseas.

Gladys has been instrumental in establishing a memorandum of understanding (MOU) with Flinders University, Adelaide, for Singapore students to gain the dietetic academic component at Flinders with the practical dietetic placements completed in Singapore. This MOU relationship has since been populated to other Singapore hospitals and Australian universities, such as Queensland University of Technology and Curtin University, Perth to increase the pool of dietitians in Singapore.

In 2000, Gladys moved to the Alexandra Hospital and was involved with planning the new hospital. It opened in 2010, renamed Khoo Teck Puat Hospital (KTPH). As chief dietitian, Gladys has clinical, foodservice and community roles. She was instrumental in establishing KTPH as the first WHO Health Promoting Hospital in Singapore. KTPH regularly conducts activities to educate and empower patients and the public to make informed health-related choices, and the staff and the community to maintain a healthy lifestyle.

Gladys has been a member of the Singapore Nutrition and Dietetics Association (SNDA) since she returned to Singapore and has held numerous committee and office bearer roles since 1996. She was instrumental in the bidding process for SNDA to host the 2011 Asian Congress on Nutrition in Singapore.

Gladys attributes her dietetic success to the strong foundation and high standards of the dietitians working in Christchurch and her five classmates when she was training. It was demanding training under the leadership of Pamela Williams but upon reflection, she would not have wanted less. Elizabeth Fleming and Moira Styles from Dunedin Hospital, her first bosses, also made a significant impact in moulding the then young Gladys into what she is today.

FROM ACROSS THE TASMAN:
DAA CONGRATULATES DIETITIANS NZ

“Dietitians NZ and the Dietitians Association of Australia (DAA) have enjoyed a warm and enduring relationship over the years,” writes CEO Claire Hewat in her congratulatory message on the occasion of Dietitians NZ’s 75th Jubilee. Informal networks have been in place for many years, and the two associations have supported each other with the 1977 and 2012 ICDs in Sydney, the inaugural South-West Pacific Regional Dietitians Conference in Brisbane (1995) and a joint conference in New Zealand (1999).

Notable activities affecting both associations have been mutual recognition of dietetic qualifications where both DAA and the NZDA played instrumental roles, the development of a joint Journal, the PEN collaboration, joint food standards, submissions, resources development and shared professional development opportunities. Both associations have provided valuable contributions of personnel for the benefit of the other, for example Journal editors and reviewers.

Attendance at each other’s national meetings provides opportunities to meet and exchange ideas. Claire continues by saying we have so much in common, yet so much to learn from each other. We face many of the same challenges and are stronger facing them with mutual support.

“It is always a joy to arrive at a Dietitians NZ event and immediately feel welcome and very much at home! We look forward to an even stronger and more productive relationship in the future.”
Carol Wham

Dr Carol Wham has had three ‘careers’ in her thirty years as a New Zealand registered dietitian. She spent the first decade as a clinical dietitian specialising in paediatrics and during this time was awarded a Royal Society Prince and Princess of Wales award to study for the advanced certificate in paediatric nutrition at the Institute of Child Health in London.

In her second decade Carol worked in the private sector where she used her knowledge and skills in the development of the Karicare range of nutrition products, led and executed nutrition promotion initiatives with the New Zealand Nutrition Foundation, Osteoporosis New Zealand and led external nutrition communications and PR activities related to milk and nutrition. During her second decade Carol undertook further study and gained a MSc with distinction from the University of Otago with an investigation of iron status of 9–24 month old infants. She then gained a PhD from the University of Adelaide on the investigation of nutritional implications for the decline of milk intake over the previous 20 years.

Carol spent the third decade in academia and is now an Associate Professor at Massey University in Auckland with the role of domain leader for public health nutrition on the dietetic programme. Her work in Life and Living in Advanced age: a Cohort study in New Zealand (LiLACS NZ) provides the first detailed examination of nutrient intake in Māori and non-Māori octogenarians. These together with the shortfall in Māori in the dietetic workforce have led to her passionate work with Māori in the dietetic workforce.

Carol was a paediatric dietitian at Christchurch Hospital since 1985, and in 1991, moved to work in Canterbury’s Crown Public Health Unit into a newly created health promotion position as the community paediatric dietitian. Working in public health provided opportunities to explore further the nutrition for infants and children, with the goal of disease prevention and Julie became more involved in breastfeeding promotion and the importance of nutrition in pregnancy. She became involved in the establishment of the New Zealand Breastfeeding Authority (NZBA), a non-government charitable organisation in 1999.

Her involvement with NZBA grew and she became executive officer in mid-2003. The NZBA had Ministry of Health contracts since 1999 to establish, manage and develop the WHO/UNICEF Baby Friendly Initiative (BFHI) in New Zealand. The organisation administers the Baby Friendly Initiative (an International WHO/UNICEF Initiative in operation in over 170 countries). Currently there have been two aspects developed: Baby Friendly Hospital Initiative (BFHI) and Baby Friendly Community Initiative (BFCI).

The main focus for the NZBA was on early nutrition especially breastfeeding and appropriate infant feeding. As the executive officer, Julie managed the organisation that included staff and contractors. The position involved liaising with the Ministry of Health, NZBA Board, member organisations, and a wide variety of health providers in New Zealand, and other countries’ BFHI coordinators, the World Health Organization (WHO) and UNICEF.

This position enabled her to work at a local, national and international level and has involved working with a wide range of cultures and people from different nationalities both here and overseas. Julie has been involved with supporting WHO in revitalising BFHI in Vietnam.

During Julie’s 17 years with NZBA she became increasingly involved with the international BFHI coordinators’ network for industrialised countries and was coordinator for four years (2012–2016). This network met biannually. The WHO and UNICEF in 2015 began a revision of the BFHI and established an external review group of experts, of which Julie is a member. Recently the BFHI country case studies were published by the WHO with the New Zealand case included.

Gill Dal Din

After a 25-year career in dietetics, Gill Dal Din now works in the field of business and innovation. As business development manager for the Canterbury Development Corporation (CDC), she runs business growth programmes and incorporates...
changes in technology that are impacting the world. She has always been fascinated by the wave of change and latest research and realised early on that she had an inquiring mind and liked change and new perspectives.

Following Gill’s graduation from Otago, she worked in Palmerston North at MidCentral Health where she undertook a variety of dietetic roles from clinician to clinical manager to foodservice operations management over six years.

Always fascinated with the psychology of eating, Gill trained in neuro-linguistic-programming (NLP) and later applied this to a licensed programme she operated called the HUGS programme by Canadian dietitian Linda Omichinski. The programme ‘Stop Dieting and Start Living’ was very popular in the late 1990s.

Gill hugely values her dietetic training and the variety of perspectives and experience it has given her along with the people connections and foodservice business operations. Today she blends the people connections and foodservice experience it has given her along with the variety of perspectives and new insights.

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Robertine ‘Rob’ van der Zwan

Rob has worked with the NZDA since 1991, having worked as a NLP master trainer and an NZDA executive committee member. One of her roles has been to set up and establish the Dietitian and Nutritionist Business Development Programme (DNBDP).

In 2007, Jenny was encouraged to stand for the Nelson Marlborough District Health Board (NMDHB) in the triennial elections. Partially due to the public profile she had had as a public health dietitian, she was a known face and was successful in that and the next four elections. The first three years were a very steep learning curve – she knew about her area of health in a clinical sense but knew very little of the business and the enormous beasts that District Health Boards are. Jenny realised to her delight that she enjoyed this view of health; she learnt governance as opposed to management and it was another way in which she could give back to her community. Jenny was appointed chair of NMDHB in 2010 and added the West Coast District Health Board in 2016.

Jenny comments that “the threads that have connected my two careers in health are many. Dietitians are pragmatic, well organised, caring and generally don’t suffer fools! Running a District Health Board requires all of that, too. People who work in health, care. They care about their workmates and those they look after. It is a privilege to be surrounded by these people.”

Dietitians work to improve people’s present and future health. Charring a District Health Board adds the population/regional view to that same goal. District Health Boards are charged with providing services and improving the population’s health. Jenny considers herself to have been very lucky to have had two careers in health, appreciating the people she has met along the way who have supported and mentored her. She hopes to be able to pass some of her learnings on to others so that they too can make a difference.

Mary Bonner

After 20 years working as a dietitian in Canterbury, Mary changed course and began a second career in health service management. She completed a Master in Business Studies in 1992, during which time she was acting manager, Quality Analyst Performance Audit Unit at Canterbury Area Health Board. Later, Mary was periooperative manager and deputy general manager, Christchurch Hospital Services (1993-1997).

She had an offer she could not refuse, chief executive, Southland District Health Board/Southland Health. Mary’s father, Dr Hunter had been medical superintendent at Southland Hospital, and for Mary to follow her father in a strategic role in Invercargill was very special for her. She held that role for 4½ years. Mary had two more positions in New Zealand – acting chief executive, Taranaki District Health Board, and general manager, Health Services, Waikato District Health Board.

Mary crossed the Tasman in 2006 and held two senior positions; firstly, two years as general manager Royal North Shore and Ryde Health Service, Northern Sydney, New South Wales, then her most rewarding role as district chief executive, Townsville. This was the largest district hospital in Australia servicing a geographical area 3½ times the geographical area of New Zealand. There was huge political interest in this area with frequent visits from political figures. The remoteness and indigenous population provided many challenges and interest.

One of Mary’s most rewarding experiences was turning an action group into a support group with a change in the
provision of dementia care in Charters Towers. This was done over a period of two years and such outcomes are only achieved by a strong leader and a committed team. Decision making was fast, as Mary reported directly to the Queensland Director General (DG) of Health (no board involved) who was an excellent leader of the 15 Queensland District CEOs.

Shoulder-tapped to come back home again in 2010, Mary became chief executive of Capital and Coast District Health Board, a role she held for 3½ years, until her retirement in 2013.

Mary credits the diversity of her dietetic training and practice for providing her with an excellent background for these roles. Staff management was part of all roles, and whether in dietetic management or general management, with five or over 5000 staff, the issues are the same. Being fair, firm and flexible is mentoring advice she gives. Mentors who played a large part in her career and influenced her journey include the late Professor Don Beaven. Mary’s dietetic training also gave her a broad clinical understanding and ability to appreciate the clinical perspective that helped her develop strong clinical governance models in each organisation.

**Jane Cartwright**

After registration as a dietitian in 1986, Jane worked at Christchurch Hospital in both clinical and foodservice management. She then travelled overseas, where she worked in the UK and Saudi Arabia.

On her return to NZ, Jane was appointed to the role of senior foodservice dietitian at Sunnyside Hospital before embarking in 1990 on her MBA at the University of Otago. This was the beginning of Jane’s health sector management career. She wrote the business case to move dietetic training from the internship style in a hospital environment to a competency-based programme hosted in the University of Otago.

Back in Christchurch in 1992, Jane worked in a range of general management roles for the then Canterbury Health Board, then Healthlink South Crown Health Enterprise (CHE), and Hospital and Health Services (HHS) that built on her clinical knowledge and management skills. During this time she was appointed to the Dietitians Board and chaired it from 1996–2002. These were the days of the drafting of the Health Practitioners Competence Assurance (HPCA) Act, consumer rights, biculturalism, the funder/provider split and developing the dietitians’ continuing competence programme.

She worked in local government in 2005 where she developed and used her dietetic skills in strategy, policy development, people management, systems thinking and public health. In 2008, Jane was appointed as CEO of the new Partnership Health Primary Health Organisation. In this role she was a funder for nutrition-related diseases and contracted appropriate services. Jane held this role for five years until it merged with Pegasus Health in 2013/2014.

The broad range of skills Jane gained as a dietitian have been key to her ability to undertake many executive positions and governance roles in health, education and local government. She is committed to furthering her skills to enhance her ‘employability’ through her MBA, Directors training, and selectively focusing her annual continuing competence activities. Jane’s advice is to ‘support your colleagues; help younger people get started; be a mentor; ask for help; find mentors; value your profession and offer to help when you can - actions speak louder than words. ’

**Desiree Lowe**

Desiree is a registered dietitian of five years standing who enjoys the fast pace of hospital clinical dietetics. In her role as a clinical cover dietitian in the acute adult department at Auckland City Hospital she is exposed to a wide range of inpatient clinical specialties.

Soon after completing her postgraduate diploma in dietetics at the University of Otago in 2012, Desiree volunteered for the Heart Foundation in Auckland. This led to her presenting about healthy food choices through cooking demonstrations and engaging with communities in South Auckland. She then worked with Nestlé as a key facilitator of their ‘Cook for Life’ programme targeting Pacific and Māori youth, again in South Auckland. Desiree taught the fundamentals of healthy eating and how to prepare easy and healthy meals for the entire family in ways that are culturally appealing. She says it helped that she came from a Pacific background. Desiree was then shoulder-tapped to work as a dietitian for Waitemata Primary Health Organisation, focusing on patients with type 2 diabetes. This involved one-to-one
patient consultations and group nutrition education sessions for patients and GP practice nurses. This role opened her eyes to the huge but unfunded demand for more dietitians to be working in primary health, given the level of obesity in our children and young adults.

Desiree is passionate about making new connections with, and having a positive influence on, people from all backgrounds. She would love to see many more dietitians from a Pacific background being trained and believes this would significantly strengthen the messages promoting healthy lifestyle changes in Pacific communities.

**Rebecca Watkin**

Rebecca Watkin is a Master of Science (Nutrition and Dietetics) graduate from Massey University. Since graduating in April 2015, Rebecca has been working as a clinical dietitian at Waitemata District Health Board in Auckland. While in this role, she has worked across a variety of areas including medical, oncology, mental health, respiratory, orthopaedics, rehabilitation and cardiology. She also currently holds an associate role with Optimize Health Solutions, directed by Kaye Dennison. This role has a focus on critical analysis of research, and the development of evidence-based reports, as well as conference and educational materials in the world of nutrition and dietetics, with a particular focus on gerontology. While only in the first few years of her career, Rebecca has developed a strong passion for gerontology nutrition and high quality healthcare. This interest was sparked by her Master’s research on nutrition risk and dysphagia screening in older adults newly admitted to age-related residential care in the Waitemata District Health Board region. This research contributed to a journal article recently accepted for publication in the Australasian Journal on Ageing (2017). Rebecca was selected to present her research at the 2016 Nutrition Society of New Zealand conference, and more recently at the 2017 Waitemata District Health Board Health Excellence Awards where she was the recipient of the Emerging Researcher and Margaret Gadsdon Memorial Grant awards.

Rebecca’s achievements outside dietetics have largely been sporting ones. She has been engaged in competitive karate for the past 18 years. She first qualified for the New Zealand national team in 2006 and since then has continued to compete at an international level. Juggling training, study and work has at times offered many personal challenges, but has also brought with it many rewards. Rebecca has competed at two senior world karate championships (Austria in 2016 and Paris in 2012). She is a six-time Oceania Championship medalist, has medaled at the Commonwealth Karate Championships and continues to represent New Zealand at an international level. Karate has allowed her to travel across multiple continents and integrate with an array of cultures. Along with this, Rebecca has had the opportunity to help many elite athletes with their nutritional requirements, enhanced with gaining a level one ISAK (International Society for the Advancement of Kinanthropometry) accreditation in anthropometry in 2015. This has further assisted her development not only in her day-to-day work life as a dietitian but also within the sporting field.

While the direction of Rebecca’s career over the next 25 years is yet to be determined, she will strive to be at the ‘top of her game’ in both karate and dietetics. The ‘juggling act’ is set to continue, Rebecca is proof that it is possible to pair an active life balance with dietetics, even when competing in elite sport!

**Daisy Power and Sylvia Pyatt**

Daisy Power graduated with a Master of Dietetics 2015–2016, and since 2017, has been working as the Raising Healthy Kids training dietitian at Auckland District Health Board and Greenlane Clinical Centre nutrition outpatient clinic cover. She appreciates the variety of experiences that have given her the opportunity to develop many skills (public health and clinical), network across specialties, travelling around New Zealand and working outside
Jeanette Rapson
Jeanette recently graduated with her Master of Science (Nutrition and Dietetics) from Massey University. For her thesis, she investigated early childhood educators’ nutrition and physical activity knowledge and perspectives for pre-schoolers. She was awarded a Massey University Summer Dissemination Grant to publish three research papers.

Since graduating, Jeanette has worked on the Heart Foundation Food and Nutrition team’s cooking curriculum project. Jeanette is involved in Dietitians NZ as a member of the Auckland Branch professional development committee.

Jeanette plans to continue to develop her dietetic skills and experience in New Zealand. She will also pursue her studies at Massey University, where she has been offered a scholarship to complete a PhD. She plans to conduct a randomised control study (RCT) investigating the impact of a vegetables-first approach to complementary feeding on children’s taste preferences.

Sylvia Pyatt graduated from the University of Otago with a Master of Dietetics in 2015. She currently works as eating disorders dietitian at Tupu Ora Auckland Regional Eating Disorders Service (REDS). In the last three years, Sylvia has experienced a wide range of practice settings, and is well aware of the scope and diversity of practice settings. While she has no firm goals for her future, she is of the strong opinion that it will be important to maintain flexibility and keep her options open and to maintain a diverse portfolio of practice experiences in a broad range of settings.

Lisa Henderson, Chirag Jivanji and Sonja Olney
Lisa, Chirag, and Sonja represent the new breed of dietitians, all having graduated in 2017 from Massey University Master of Science (Nutrition and Dietetics), the University of Auckland Master of Health Science in Nutrition and Dietetics, and the University of Otago Master of Dietetics respectively. All three are clinical dietitians at Palmerston North Hospital. Working under professional leader Gaye Philpott, they have been well supported as clinical dietitians in a range of practice specialities.

Chirag’s goals are to specialise in intensive care and surgery in a tertiary level hospital, and become involved in clinical management and research. Sonja sees her future in developing and advancing her clinical expertise and skills. Lisa’s goal of becoming a clinical dietitian has been 10 years in the making, and from her earliest days as a student, she has been interested in the development and promotion of the dietetic profession.

The vision of these young graduates is important for the future of the profession as it moves forward to its centenary in 25 years. Sonja intends to play her part in strongly advocating for the work dietitians do. Chirag has already volunteered as a member on the Dietitians NZ’s 75th Jubilee Committee, and Lisa wants to find opportunities to contribute to dietetics in a way that raises the profile of dietitians in the health sector.

Daisy has worked as a volunteer for the Heart Foundation, Vegetables.co.nz, Eat My Lunch, Diabetes New Zealand, All Saints fruit and vegetable co-op, and the New Zealand Nutrition Foundation. She believes this provides a great opportunity to network and learn more about the industry, discovering where one would like to work and gain the support to get there.

Sylvia Pyatt graduated from the University of Otago with a Master of Dietetics in 2015. She currently works as eating disorders dietitian at Tupu Ora Auckland Regional Eating Disorders Service (REDS). In the last three years, Sylvia has experienced a wide range of practice settings, and is well aware of the scope and diversity of practice settings. While she has no firm goals for her future, she is of the strong opinion that it will be important to maintain flexibility and keep her options open and to maintain a diverse portfolio of practice experiences in a broad range of settings.

Lisa Henderson, Chirag Jivanji and Sonja Olney
Lisa, Chirag, and Sonja represent the new breed of dietitians, all having graduated in 2017 from Massey University Master of Science (Nutrition and Dietetics), the University of Auckland Master of Health Science in Nutrition and Dietetics, and the University of Otago Master of Dietetics respectively. All three are clinical dietitians at Palmerston North Hospital. Working under professional leader Gaye Philpott, they have been well supported as clinical dietitians in a range of practice specialities.

Chirag’s goals are to specialise in intensive care and surgery in a tertiary level hospital, and become involved in clinical management and research. Sonja sees her future in developing and advancing her clinical expertise and skills. Lisa’s goal of becoming a clinical dietitian has been 10 years in the making, and from her earliest days as a student, she has been interested in the development and promotion of the dietetic profession.

The vision of these young graduates is important for the future of the profession as it moves forward to its centenary in 25 years. Sonja intends to play her part in strongly advocating for the work dietitians do. Chirag has already volunteered as a member on the Dietitians NZ’s 75th Jubilee Committee, and Lisa wants to find opportunities to contribute to dietetics in a way that raises the profile of dietitians in the health sector.

Jeanette Rapson
Jeanette recently graduated with her Master of Science (Nutrition and Dietetics) from Massey University. For her thesis, she investigated early childhood educators’ nutrition and physical activity knowledge and perspectives for pre-schoolers. She was awarded a Massey University Summer Dissemination Grant to publish three research papers.

Since graduating, Jeanette has worked on the Heart Foundation Food and Nutrition team’s cooking curriculum project. Jeanette is involved in Dietitians NZ as a member of the Auckland Branch professional development committee.

Jeanette plans to continue to develop her dietetic skills and experience in New Zealand. She will also pursue her studies at Massey University, where she has been offered a scholarship to complete a PhD. She plans to conduct a randomised control study (RCT) investigating the impact of a vegetables-first approach to complementary feeding on children’s taste preferences.

Sylvia Pyatt graduated from the University of Otago with a Master of Dietetics in 2015. She currently works as eating disorders dietitian at Tupu Ora Auckland Regional Eating Disorders Service (REDS). In the last three years, Sylvia has experienced a wide range of practice settings, and is well aware of the scope and diversity of practice settings. While she has no firm goals for her future, she is of the strong opinion that it will be important to maintain flexibility and keep her options open and to maintain a diverse portfolio of practice experiences in a broad range of settings.

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AWARDS AND RECOGNITION OF NEW ZEALAND DIETITIANS

Dietitians NZ Award of Excellence

The Award of Excellence was established by the NZDA in 1990 and recognises outstanding contributions by dietitians to the advancement of the profession of dietetics. It is the highest honour Dietitians NZ can bestow on a member. Award winners are presented with a silver dress pin engraved with the recipient’s name and date of award and a commemorative certificate.

Recipients of the Award of Excellence are eligible in one or more of the following categories:

- Outstanding achievement in Dietetics
- Outstanding contribution to Clinical Dietetics and Nutritional Care
- Outstanding performance in Foodservice Management
- Excellence in the provision of Nutrition Education.

1990: Bernice Kelly  Outstanding achievement in Dietetics
1992: Julian Jensen  Outstanding achievement in Dietetics
1993: Janelle Wallace  Outstanding achievement in Dietetics
           Pamela Williams  Outstanding achievement in Dietetics
1994: Hikihiki Pihema  Excellence in provision of Nutrition Education
1996: Mary Johnston  Outstanding performance in Foodservice Management
1999: Gillian Tustin  Outstanding achievement in Dietetics
2000: Moira Styles  Outstanding achievement in Dietetics
2001: Janice Bremer  Outstanding achievement in Dietetics
           Cheree Mellow*  Outstanding achievement in Dietetics
2002: Lyn Gillanders  Outstanding achievement in Dietetics
           Outstanding contribution to Clinical Dietetics and Nutrition Care
2003: Kerry McIlroy  Outstanding achievement in Dietetics
2004: Elizabeth Aitken  Outstanding contribution to Clinical Dietetics and Nutrition Care
2005: Penny Field  Outstanding achievement in Dietetics
2006: Pip Duncan  Outstanding achievement in Dietetics
2008: Jane Cartwright  Outstanding achievement in Dietetics
2009: Elizabeth Fitchett  Outstanding achievement in Dietetics
2011: Marilyn Cullens  Outstanding contribution to Clinical Dietetics and Nutrition Care
           Excellence in the provision of Nutrition Education
2012: Barbara Cormack  Outstanding achievement in Dietetics
           Outstanding contribution to Clinical Dietetics and Nutrition Care
           Kaye Dennison  Outstanding achievement in Dietetics
2013: Ien Hellemans  Outstanding achievement in Dietetics
2015: Winsome Parnell  Outstanding achievement in Dietetics
2016: Lyn Lloyd  Outstanding achievement in Dietetics
           Outstanding contribution to Clinical Dietetics and Nutrition Care
2017: Wendy Dodunski  Outstanding Achievement in Dietetics
           Carol Wham  Outstanding Achievement in Dietetics

*Deceased
**HONORARY LIFE MEMBERS**

HONORARY Life Membership may be conferred by NZDA/Dietitians NZ on any member who has rendered meritorious service to the organisation, or on any person who, not being eligible for professional membership, has contributed to the knowledge of dietetics and nutrition, or advances the interests of the profession of dietetics.

1943
**Dr Muriel Bell**
CBE, MD, MHSc, FRACP, FRNSNZ, FNZIC*

Dr Bell was Nutritionist to the Department of Health. From the late 1930s until her retirement, almost every event in human nutrition in New Zealand was initiated by Dr Bell. Her contribution to dietetics is immeasurable. She was a strong supporter of dietetic training and the formation of the NZ Dietetic Association. This was recognised with her election to honorary life membership at the inaugural meeting of the NZDA.

1943
**Sir Charles Burns**
KBE, MD, FRCP*

Sir Charles Burns, a physician, had a lifelong interest in diet and nutrition that is recorded in his many presentations at scientific meetings and his writings in medical, nutrition and dietetic journals. He was always a strong supporter of the dietetic profession from its very beginnings, and this was recognised at the inaugural meeting of the NZDA when he was elected an honorary life member.

1943
**Mary Lambie**
CBE*

While Director of the Division of Nursing, Miss Lambie played a key role in the introduction of dietitians to New Zealand hospitals. She assisted in the establishment of dietetic training by liaising with the Department of Health, University of Otago and the Hospital Boards. This was recognised with her election to honorary life membership at the inaugural meeting of the NZDA.

1943
**Dr R A Shore**

Dr Shore was Director General of Health at the time of the introduction of dietetic training in New Zealand and the formation of the NZDA. He was elected honorary life member at the inaugural meeting of the NZDA.

1945
**Professor Ann Strong, OBE***

A strong supporter of the role of the dietitian in hospitals, Professor Strong of the School of Home Science was a member of the original Planning Committee for the organisation of dietetic training in New Zealand.

1947
**Maureen Barker, MHSc***

Maureen was the first dietitian to the Department of Health from 1942-1945, and an original member of the NZDA. She developed much of the early public health nutrition material, including ‘Good Eating All’, a series of nutrition talks for use by district nurses and school dental nurses.

1951
**Rose Simmonds, OBE***

Rose Simmonds was a founder member of The British Dietetic Association and the first trained British dietitian to work in the United Kingdom. Dietitians who followed her acknowledged a great debt to her for the stamp she laid on the new profession. She was well known to many New Zealand dietitians who were privileged to work with her in London.

1956
**Dr Neige Todhunter, MHSc, PhD***

Dr Todhunter was elected honorary life member in recognition of her outstanding contribution to the study of nutrition. Most of her working life was spent in the United States of America, where she was a member of the American Dietetic Association.

1958
**Professor Evelyn Smith***

In 1957, following a distinguished career as a dietitian, educator and foodservice management consultant in the United States, Professor Smith was granted a Fulbright Research Scholarship to work in New Zealand at the University of Otago, Victoria University and with the NZDA for a year, to strengthen dietetic training instruction. Her contribution to the profession was recognised with her election to honorary life membership.

1971
**Dr Elizabeth Gregory**
OBE, MHSc, PhD, HonLLB*

As Dean of the Home Science Faculty, University of Otago, 1940-1961, Dr Gregory strongly supported the establishment of dietetic training in New Zealand and contributed very significantly to the recognition of dietetics as a profession.

1971
**Monica McKenzie**
BHSc, NZRD*

Foundation President of the NZDA. As Inspecting Dietitian, Department of Health 1947-1963, Miss McKenzie was the key person in the establishment, recognition and support of the dietetic profession in New Zealand. Her contribution to dietetics and the NZDA has been immense.

1971
**Winifred Goddard**
OBE, DipHSc*

President of the NZDA 1949-1952 and Senior Dietitian, Wellington Hospital 1947-1956. Mrs Goddard had wide involvement in NZDA affairs and was a great influence in building and maintaining the professional standards that the NZDA set out to establish. She received an OBE in 1981 for services to the dietetic profession.
1971
Eleanor Couston
DipHSc*
A foundation member of the NZDA and its first Secretary (1943-1945). Eleanor was one of New Zealand's first dietitians, working at Lewisham (later Calvary, now Southern Cross) Hospital in Christchurch in 1937. She was latterly senior Home Science Advisor, Department of Agriculture (1952-1968).

1983
Dorothy Mair
DipHSc*
Dorothy was Public Health Dietitian, Auckland District Office of the Department of Health, 1964-1983. Miss Mair was an innovative dietitian, introducing a six-day-a-week meals on wheels service to Gisborne, a selective menu to Cook Hospital and provided practical experience for Fijian trained dietitians as well as New Zealand students. She was a loyal supporter of the NZDA, being President 1969-1971. She was a member of the Dietitians Board for nine years and a state examiner for dietitians.

1983
Flora Davidson
BHSc*
As Nutrition Officer, Department of Health, Flora Davidson made a major contribution to the improvement of the health of the people of New Zealand and the South Pacific. She contributed significantly to the development of the NZDA and held offices including Secretary and President, and was editor of the Journal of the NZDA (JNZDietAssoc) 1962-1979.

1984
Shirley Thompson (née Johnson)
BHSc, NZRDR*
As Senior Lecturer in Foodservice administration, University of Otago, 1964–1983, Mrs Thompson had a major influence on students who would later be accepted into the dietetic training programme. She was a willing contributor to the NZDA, including being President 1964–1965, and a member of the Salaries Grading Committee for six years.

1988
Professor Patricia Coleman
CBE, DipHSc, MS (Texas)*
Professor Coleman, later Patricia, Lady Sayers, was Dean of the Faculty of Home Science 1962–1987, and a member of the Dietitians Board for 25 years. She chaired the 1973 Board of Health Committee on the dietetic profession that culminated in the competency-based curriculum for the training of dietitians.

1990
Emeritus Professor Marion Robinson
CBE, MHSc, PhD*
Professor Marion Robinson held a personal chair in Nutrition, University of Otago 1980-1989. She was a world leader in the field of nutrition, particularly in the research of selenium. Professor Robinson had a major involvement in the training of students, including those accepted into the dietetic training programme.

1992
Jocelyn Hampton
BHSc, NZRDR, DHA
As Director of Dietetics, Waikato Area Health Board 1969–1992, Jocelyn saw and initiated many changes in practice over the years. Jocelyn has had a life-long and active involvement in the NZDA at local, national and international level. She was President 1975–1977, a member of the working party on dietetic training, member of the DACUM committee, member of the Salaries Grading Committee, convener of the submissions subcommittee 1990–1992 and convener for the planning of the 50th Jubilee Conference, 1993.

1993
Professor Clifford Tasman-Jones
CNZM, MBChB (Otago), FRCP (London), FACP
Elected honorary life member on the 50th anniversary of the NZDA, in recognition of many years of loyal advocacy of dietitians, Professor Tasman-Jones has always seen dietitians as part of his team, whether in research, teaching or policy development. He is renowned in nutrition circles in NZ, especially the Ministry of Health Nutrition Advisory Committee and Nutrition Taskforce, the Australia New Zealand Nutrient Reference Values working party, Nutrition Society of New Zealand, Nutrition Foundation and Agencies for Nutrition Action. He was acknowledged internationally in his involvement with several prestigious international organisations, including WHO.

1994
Professor Sir Donald Beaven
KNZM, CBE, FRACP, FRCPE*
Professor Beaven was Foundation Professor of Medicine, Christchurch School of Medicine, University of Otago, and adjunct Professor, Speech Language and Communication, University of Canterbury, and an eminent medical researcher in diabetes treatment and prevention. He was an affiliate member of the NZDA, an active participant in NZDA activities, a long-standing member of the Dietitians Board and on the Board’s examination panel, external examiner in the 1970s and 1980s, and a great teacher of dietitians over many years.
The award recognises a dietitian who, within five years of registration, excels in an aspect of dietetic practice in New Zealand, beyond the usual requirements of his/her job.

1999

**Pamela Williams**
MNZM, DipHSc, NZRD, MS (Kansas), FNZIFST

Pamela has been a high-profile member of NZDA/Dietitians NZ all her professional life and beyond. She was Executive Secretary of the NZDA continuously from 1967 to 1980, and on the executive committee from 1980–1993, a period that included being Vice President, President, and Immediate Past President. She received the Award of Excellence at the 50th Jubilee in 1993, and in 2001 presented the Constance Shearer Lecture.

2001

**Sadie Andrews**
DipHSc, NZRD

Sadie is one of the NZDA's earliest community dietitians, working for over 25 years as information officer in the Home Science Information Service/University Extension at the University of Otago, promoting food and nutrition through dial-a-dietitian, media releases, radio work, public education materials and talks. She was a driving force behind the development and computerisation of New Zealand's Annual Food Costs Survey.

2002

**Bernice Kelly**
DipHSc, MS (Kansas), NZRD

A longstanding and influential dietitian, Bernice's encyclopaedic knowledge of the professional aspects of dietetics and legislation affecting it has been one of her trademarks. She was Advisory Dietitian in the Department of Health, the only dietitian Registrar of the Dietitians Board, and an ex-officio member of the executive committee for 20 years. This and her never-failing commitment to the profession saw her receive the NZDA's first Award of Excellence, and in recognition of her contribution to the education of dietitians, the NZDA created the Bernice Kelly Award for a graduating student dietitian.

2004

**Professor Jim Mann**
CNZM, MA, DM, PhD

As Professor and Head of Department of Human Nutrition, University of Otago, Professor Mann has worked closely with the dietetic profession and dietitians. He has been pivotal in the development and delivery of the postgraduate Diploma in Dietetics from its outset, and has been involved with teaching on the programme. Professor Mann's involvement internationally with many agencies including WHO/FAO has given great credibility to nutrition research capabilities in New Zealand.

2009

**Julian Jensen**
DipHSc, MS (Kansas), NZRD

Julian was the first dietetic and foodservice management consultant of her kind in New Zealand; co-author of two books 'Professional Foodservice', and 'Quality Food and Nutrition Services'. She edited JNZDietAssoc for 12 years, established and edited the NZDA Conference Proceedings including the Nutrition & Dietetic Supplements of the NZDA Conference abstracts for 8 years. She was involved with the training of dietitians for many years. Julian received the NZDA Award of Excellence in 1992 and delivered a Constance Shearer Lecture in 2007.

2016

**Lyn Gillanders**
ONZM, BHSc, NZRD

Lyn held positions as Senior Clinical Dietitian in Intensive Care, the New Zealand Liver Transplant Unit, lead clinician for the establishment of the New Zealand National Intestinal Failure Service. She was instigator and editor of the Dietitians NZ Clinical Handbook for its first 10 editions. She managed the New Zealand Manufactured Food Database for many years and was influential in the establishment of the University of Auckland’s Dietetic Programme. Lyn has received the NZDA Award of Excellence and presented a Constance Shearer lecture. She is a past chair of the New Zealand Dietitians Board.

* Deceased
**THE NEIGE TODHUNTER AWARD FOR POSTGRADUATE STUDY**

**Neige Todhunter** completed an MSc degree in Science at the University of New Zealand at Otago. She left New Zealand in 1928 to study for a doctorate at Columbia University in New York. She had an illustrious career in food and nutrition in the USA culminating as Dean of the School of Home Economics, University of Alabama. She was made an Honorary Life Member of the NZDA in 1956. On her death in 1991, she left the NZDA a major bequest of $150,000 that has formed the basis of the Neige Todhunter Award for Postgraduate Study.

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
<th>Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>Katrina Darry</td>
<td>MSc (Community Nutrition)</td>
</tr>
<tr>
<td>1994</td>
<td>Jane Elmslie</td>
<td>PhD (Human Nutrition)</td>
</tr>
<tr>
<td>1995</td>
<td>Jenny Reid</td>
<td>MPH</td>
</tr>
<tr>
<td>1997</td>
<td>Mark Leydon</td>
<td>MSc (Nutrition)</td>
</tr>
<tr>
<td>1999</td>
<td>Ingrid Peroles</td>
<td>MSc (Nutrition Science)</td>
</tr>
<tr>
<td>1999</td>
<td>Wendy Scanlon</td>
<td>MSc (Community Nutrition)</td>
</tr>
<tr>
<td>1999</td>
<td>Carol Wham</td>
<td>PhD (Nutrition)</td>
</tr>
<tr>
<td>2001</td>
<td>Nikki Hart</td>
<td>MSc</td>
</tr>
<tr>
<td>2001</td>
<td>Leanne Young</td>
<td>MPH</td>
</tr>
<tr>
<td>2002</td>
<td>Kate Sladden</td>
<td>MPH</td>
</tr>
<tr>
<td>2004</td>
<td>Charlotte Rowan</td>
<td>MPH</td>
</tr>
<tr>
<td>2005</td>
<td>Amy Pettigrew</td>
<td>MSc (Human Nutrition)</td>
</tr>
<tr>
<td>2006</td>
<td>Alwyn Todd</td>
<td>MSc (Nutrition)</td>
</tr>
<tr>
<td>2007</td>
<td>Amy Strong</td>
<td>PhD (Human Nutrition)</td>
</tr>
<tr>
<td>2008</td>
<td>Julie Sekula</td>
<td>MHealSc</td>
</tr>
<tr>
<td>2008</td>
<td>Delvina Gorton</td>
<td>MHealSc</td>
</tr>
<tr>
<td>2009</td>
<td>Kathryn Beck</td>
<td>PhD (Nutrition)</td>
</tr>
<tr>
<td>2009</td>
<td>Eirean Gamble</td>
<td>MSc (Human Nutrition)</td>
</tr>
<tr>
<td>2010</td>
<td>Varsha Asrani</td>
<td>MHealSc</td>
</tr>
<tr>
<td>2011</td>
<td>Ruth Harvie</td>
<td>MSc (Human Nutrition)</td>
</tr>
<tr>
<td>2012</td>
<td>Kylie Becker</td>
<td>MHealSc</td>
</tr>
<tr>
<td>2013</td>
<td>Catherine Wall</td>
<td>PhD (Nutrition)</td>
</tr>
<tr>
<td>2013</td>
<td>Amy Lui</td>
<td>PhD (Nutrition &amp; Population Studies)</td>
</tr>
<tr>
<td>2014</td>
<td>Amy Lui</td>
<td>PhD (Nutrition &amp; Population Studies)</td>
</tr>
<tr>
<td>2014</td>
<td>Franica Yovich</td>
<td>MSc (Human Nutrition)</td>
</tr>
<tr>
<td>2014</td>
<td>Katrina Pace</td>
<td>MHealSc</td>
</tr>
<tr>
<td>2015</td>
<td>Wathsala Nanayakkara</td>
<td>MSc</td>
</tr>
<tr>
<td>2016</td>
<td>Barbara Cormack</td>
<td>PhD</td>
</tr>
<tr>
<td>2017</td>
<td>Leigh O'Brien</td>
<td>MSc</td>
</tr>
</tbody>
</table>

**Bernice Kelly Award** is awarded annually to the most improved dietetic student from the University of Otago, Massey University or the University of Auckland. The naming of this award recognises Bernice Kelly’s contribution to the training of New Zealand dietitians for many years.

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>Mellanie Telfer</td>
</tr>
<tr>
<td>2000</td>
<td>Fiona Simpson</td>
</tr>
<tr>
<td>2001</td>
<td>Kathryn McNaughton</td>
</tr>
<tr>
<td>2002</td>
<td>Kristen Clarke</td>
</tr>
<tr>
<td>2003</td>
<td>Alicia O’Brien</td>
</tr>
<tr>
<td>2004</td>
<td>Tutangi Amataiti</td>
</tr>
<tr>
<td>2005</td>
<td>Susan Cook</td>
</tr>
<tr>
<td>2006</td>
<td>Case O’Byrne</td>
</tr>
<tr>
<td>2007</td>
<td>Hilary Totty</td>
</tr>
<tr>
<td>2008</td>
<td>Sarah Fleming</td>
</tr>
<tr>
<td>2009</td>
<td>Alison Fyfe</td>
</tr>
<tr>
<td>2010</td>
<td>Emma Jeffs</td>
</tr>
<tr>
<td>2011</td>
<td>Kim Te</td>
</tr>
<tr>
<td>2012</td>
<td>Sarah Matthews</td>
</tr>
<tr>
<td>2013</td>
<td>Caleb Robinson (Otago)</td>
</tr>
<tr>
<td>2013</td>
<td>Sarah Bodel (Massey)</td>
</tr>
<tr>
<td>2014</td>
<td>Celia Prentice (Otago)</td>
</tr>
<tr>
<td>2014</td>
<td>Zara Houston (Massey)</td>
</tr>
<tr>
<td>2014</td>
<td>Karuna Mallawar (Auckland)</td>
</tr>
<tr>
<td>2015</td>
<td>Not awarded</td>
</tr>
<tr>
<td>2016</td>
<td>Garren Espin (Otago)</td>
</tr>
<tr>
<td>2017</td>
<td>Rachel Blair (Massey)</td>
</tr>
</tbody>
</table>
The NZDA/Dietitians NZ remains indebted to the many sponsors of awards over the last 25 years and beyond. Without these, many dietitians would not have been able to attend international conferences, courses or meetings, engage in postgraduate study or complete an activity that enhances the care of their patients or clients.

<table>
<thead>
<tr>
<th>DATES</th>
<th>AWARD</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>1983-1998</td>
<td>Ecolab Awards</td>
<td>For professional development</td>
</tr>
<tr>
<td>1988-present</td>
<td>NZDA/Dietitians NZ Education Trust Awards</td>
<td>Funded by a trust originating from a bequest from the estate of Constance Shearer to assist dietitians in an aspect of professional development</td>
</tr>
<tr>
<td>1989-1993</td>
<td>Douglas Pharmaceuticals</td>
<td>For professional development</td>
</tr>
<tr>
<td>1990-present</td>
<td>NZDA/Dietitians NZ Award of Excellence</td>
<td>The highest honour that can be awarded by NZDA/Dietitians NZ to a member</td>
</tr>
<tr>
<td>1990-2006</td>
<td>Abbott Awards</td>
<td>For professional development</td>
</tr>
<tr>
<td>1993-present</td>
<td>Nestlé Young Achievers Award</td>
<td>Awarded to a member within 5 years of graduation who has excelled in an aspect of practice</td>
</tr>
<tr>
<td>1994-present</td>
<td>Neige Todhunter Award</td>
<td>Funded by a bequest from Dr Neige Todhunter for postgraduate study</td>
</tr>
<tr>
<td>1997-2003</td>
<td>Dairy Advisory, later New Zealand Milk (2 awards)</td>
<td>1. Best review article and 2. Best original research article in JNNDiet Assoc.</td>
</tr>
<tr>
<td>1998-1999</td>
<td>Top Student Award sponsored by Mead Johnson &amp; P&amp;O Services; sponsored by Spotless; sponsored by Nestlé Healthcare Nutrition</td>
<td>Top academic student</td>
</tr>
<tr>
<td>2000-2007</td>
<td>Nutricia AUSPEN Award</td>
<td>For a member to attend the Australasian Society of Parenteral and Enteral Nutrition annual conference</td>
</tr>
<tr>
<td>2008-2016</td>
<td>Nutricia Paediatric Award</td>
<td>For a member to attend the Paediatric Training Course in Melbourne</td>
</tr>
<tr>
<td>2006-2007</td>
<td>Spotless Foodservice Award</td>
<td>For one or two members working in Foodservice to further their education</td>
</tr>
<tr>
<td>2008-2009</td>
<td>Spotless Foodservice Paper Award</td>
<td>For the best published foodservice paper</td>
</tr>
<tr>
<td>2007-2009</td>
<td>Unilever</td>
<td>Funding a one-off dietetic scholarship of $10,000 annually for two years.</td>
</tr>
<tr>
<td>2011</td>
<td>Unilever Award for Māori Health and Nutrition</td>
<td>For student dietitians completing their practicum projects in Māori Health</td>
</tr>
<tr>
<td>2013</td>
<td>Unilever Postgraduate Scholarship</td>
<td></td>
</tr>
<tr>
<td>2007-2011</td>
<td>Baxter Healthcare Award</td>
<td>For the best paper published by a member in the Journal of Nutrition &amp; Dietetics. The criterion for this award was widened to include international peer-reviewed journals</td>
</tr>
<tr>
<td>2007-2009</td>
<td>FSANZ</td>
<td>For the best research paper for a postgraduate qualification</td>
</tr>
<tr>
<td>2007-2009</td>
<td>Wattie’s</td>
<td>For the best poster at Conference</td>
</tr>
<tr>
<td>2013</td>
<td>Abbott Nutrition</td>
<td>Allergy Award</td>
</tr>
<tr>
<td>2016-present</td>
<td>Dietitians NZ Special Recognition Awards</td>
<td>To recognise people who contribute voluntarily to Dietitians NZ in ways that assist the operation of the organisation and/or promote the objectives of Dietitians NZ</td>
</tr>
<tr>
<td>2016-present</td>
<td>DietitiansNZ Loyalty Awards</td>
<td>Certificates for continuous membership. Platinum (60 years), Gold (50 years), Silver (40 years) and Bronze (25 years).</td>
</tr>
</tbody>
</table>

62 DIETITIANS NZ HISTORY
1981: Winifred Goddard, OBE.
AWARDED FOR SERVICES TO THE DIETETIC PROFESSION.
Mrs Goddard was made an Honorary Life Member of the NZDA in 1971. She was heavily involved with the NZDA, as President from 1949–1952, editor of the Journal from 1955–1961, a member of the finance subcommittee from 1958–1976, and was also a member of the first Dietitians Board from 1951–1954.

2002: Pamela Williams, MNZM.
AWARDED FOR SERVICES TO THE DIETETIC PROFESSION.
Pamela was made an Honorary Life Member of the NZDA in 1999. She was Executive Secretary of the NZDA from 1967–1980, and on the executive committee from 1980–1999, including being Vice President, President and Immediate Past President. Pamela has represented NZDA/Dietitians NZ nationally and internationally. She has been the Minister’s appointee to the New Zealand Standards Council, Chairperson of the New Zealand Dietitians Board, a member of the New Zealand Food Standards Committee and the Metric Advisory Board. Professionally, Pamela served as Chief Executive, Canterbury/ West Coast Cancer Society, Chief Dietitian, Canterbury Area Health Board, and Research Home Economist, Meat Industry Research Institute of NZ.

2008: Lyn Gillanders, ONZM.
AWARDED FOR SERVICES TO NUTRITION AND DIETETICS.
Lyn is recognised internationally for her clinical expertise and leadership. She was actively involved in advancing the dietetic profession in two major projects; the development of Dietitian Prescriber training and in the establishment of the University of Auckland’s Dietetic Training Programme. As well as an exemplary role in New Zealand dietetics, Lyn has participated as a member of the Medical Advisory Panel Allergy Awareness Association and the New Zealand Health Practitioners Disciplinary Tribunal. She has contributed as Chair of the Food Composition Steering committee and managed the New Zealand Manufactured Food Database from 1993 until its closure. Lyn is also an Honorary Life Member of Dietitians NZ.

2009: Julie Stufkens, MNZM.
AWARDED FOR HER SERVICES IN NEW ZEALAND TO DIETETICS AND PAEDIATRIC NUTRITION.
After a career in clinical paediatric dietetics and community health, Julie was appointed CEO of the newly founded New Zealand Breastfeeding Authority (NZBA) in 1999. In this role, she was instrumental in implementing the Baby Friendly Initiative in hospitals (BFHI) and the community (BFCI). Julie also served as the BFHI Network Coordinator for Industrialized Countries 2012–2016 and is currently a member of the World Health and UNICEF working group for revision of the Baby Friendly Hospital Initiative programme.

2014: Jenny Black, MNZM.
AWARDED TO SERVICES TO HEALTH, NOTABLY HEALTH GOVERNANCE.
Jenny is a past President of the NZDA (1995–1997). Her dietetic practice in Nelson involved general dietetics, community health promotion, and sports dietetics. In 2007, Jenny became an elected member to the Nelson Marlborough District Health Board. This started a new career of health governance. In 2010 she was appointed Chairman, and in 2013 Jenny was successfully nominated to chair the South Island regional alliance and lead chair for all District Health Boards. In 2016, the chairmanship of West Coast District Health Board was added to her portfolio. Jenny finds these roles a privilege to hold. They provide another opportunity for a dietitian to contribute to the New Zealand health system.

2015: Jeni Pearce, MNZM.
AWARDED FOR SERVICES TO SPORTS NUTRITION.
Jeni returned to New Zealand in 2013 from the UK to Head Performance Nutrition at High Performance Sport NZ. She was Head of Performance Nutrition at the English Institute of Sport, Olympic Nutritionist for Team GB for Beijing in 2008 and London in 2012, England Cricket and McLaren F1. She is a past-President of the international organisation Professionals in Nutrition and Exercise for Sports, past chairperson of the New Zealand Nutrition Foundation and previous Executive Officer of Agencies for Nutrition Action. She is widely published as an author of 12 books, and co-author of many book chapters and research papers.
## CONSTANCE SHEARER LECTURES

**THE** Constance Shearer Lecturer is invited to deliver a lecture on a topic of his/her choice, related to and of interest to the Dietetic Profession. It is a public lecture, and lecturers are not necessarily dietitians. It is named for one of New Zealand’s highly regarded pioneer Dietitians.

<table>
<thead>
<tr>
<th>Year</th>
<th>Lecturer</th>
<th>Title</th>
<th>Publication Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1969</td>
<td>Professor Patricia Coleman</td>
<td>First Constance Shearer Lecture</td>
<td>JNZDietAssoc 1969;23(2):5</td>
</tr>
<tr>
<td>1988</td>
<td>Professor Jim Mann</td>
<td>High risk and population strategies in coronary heart disease prevention in New Zealand</td>
<td>JNZDietAssoc 1988;42(2):59</td>
</tr>
<tr>
<td>1992</td>
<td>Kate Birch</td>
<td>not published.</td>
<td></td>
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<tr>
<td>1993</td>
<td>Dr Robin Fellers, Barbara Smith, Gillian Tustin</td>
<td>50th Jubilee Conference Seminar: 50 years young, 50 years strong Nutrition services towards the next millennium</td>
<td>JNZDietAssoc 1994;48(1):4</td>
</tr>
<tr>
<td>1994</td>
<td>Dr Gillian Durham</td>
<td>A balancing act</td>
<td>JNZDietAssoc 1994;48(2):38</td>
</tr>
<tr>
<td>1996</td>
<td>Janet Hesketh</td>
<td>100 years of National Council of Women</td>
<td>Proc NZDietAssoc; Conference 1996;1:2</td>
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<tr>
<td>1998</td>
<td>Dr David Gerrard</td>
<td>Sport, medicine and dietetics</td>
<td>JNZDietAssoc 1998;52(2):60</td>
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<tr>
<td>2009</td>
<td>Janelle Wallace</td>
<td>The pitfalls of bad science and magical thinking</td>
<td>Dietitians NZ Annual Report 31.3.2010</td>
</tr>
<tr>
<td>2018</td>
<td>Sally Evans</td>
<td>75th Jubilee Lecture: Designing the next generation dietetic profession</td>
<td></td>
</tr>
</tbody>
</table>
BOOKS WRITTEN BY DIETITIANS PUBLISHED FOR THE CONSUMER MARKET 1993–2018


Duncan P. *The Egg Cookbook.* Chanel publishing 1998


Duncan P, Johnston M, Shackleton S. *Safe and Sound.* Longman Paul, NZ 1994


King C. *Por Pors cookbook: home cooking through the generations.* CPS Printer 2000 Ltd, Auckland, 2013

King C, Lam R, Lowe B et al. *The fruits of our labours: Chinese fruit shops in NZ.* Department of Internal Affairs, 2018

Leeper J. *Nosh: delicious and responsible eating.* PMP Print, 2006

Ley S. *Weight control for adults.* Healthy Lifestyles Press, Auckland, 2003

Ley S. *Weight control for children.* Healthy Lifestyles Press, Auckland, 2003

Lim N. *Nadia’s kitchen.* Random House New Zealand, 2012


Lim N. *Nadia Lim’s fresh start cookbook.* Penguin Books NZ, 2015


Lim N. *Dinnertime goodness.* Penguin Books NZ, 2017

Lim N. *Let’s eat, mostly healthy, always delicious.* Nude Food Inc NZ 2017

Lim N. *Family favourites.* Penguin Books NZ, 2018

Pearce J. *Eat to compete for young athletes.* Reed NZ 2004


Stening L. *Healthy kids, happy lives.* California, USA, 2017.

Wynne A, Crawshaw A. *The power of positive eating.* Reed Books, Auckland, 2002
1960s: Dr Margaret Gillies (nee Hankin)  
UNIVERSITY OF ADELAIDE  
Margaret left Auckland Hospital about 1962 for her PhD study that took several years. In 1986, she edited, with Dr Yola Swindells, ‘Today’s food ... Tomorrow’s health’. At that time, Margaret was Senior Lecturer Dept. of Human Nutrition, Faculty of home Science, University of Otago.

1974: Dr Robin Fellers  
UNIVERSITY OF FLORIDA, USA  
In 1972, the W.K. Kellogg Foundation awarded a large grant to the College of Education at University of Florida to train instructional personnel in the allied health professions. Robin was recruited in the first group of students and her PhD was in Curriculum and Instruction with a minor in Human Nutrition. Her dissertation was ‘Relationships between Career Satisfaction and Personality Type of Employed Dietitians’.

1975: Dr Diane Holdsworth  
UNIVERSITY OF LONDON, UK  
Diane’s thesis was ‘Low energy diets with particular reference to the metabolism of protein’. The research involved a lot of biochemistry that she found challenging as she had not majored in this subject. After obtaining her PhD, Diane’s work focused on gerontology nutrition research in the Gerontology Nutrition Unit at Queen Elizabeth College, London University with Dr Louise Davies who was Head of the Unit and Diane was Chief Researcher.

1981: Dr Heather Spence  
KANSAS STATE UNIVERSITY, USA.  
Evaluation of teaching effectiveness in dietetic education – evaluations of teaching effectiveness by current dietetic students and graduates and from colleagues in dietetic programmes US-wide indicated that practitioner experience does not necessarily make more effective teachers in dietetic programmes. Results did not support the (then) ADA requirement/recommendation that teachers in dietetic programmes have practitioner experience.

1985: Dr Tracy Perry  
UNIVERSITY OF OTAGO  
Lifestyle intervention in people with Type 1 diabetes mellitus. The aim of the study was to investigate the impact of an intensive lifestyle intervention on dietary practices, exercise and metabolic measures in those with type 1 diabetes mellitus. The study was a randomised controlled six-month intervention including 61 participants with a mean (SD) age of 42.1 (12) y. Findings from this study showed that modest changes in diet and exercise habits significantly improved measures of glycaemic control and lipoprotein mediated risk of coronary heart disease. This was independent of changes in insulin regimen and with no adverse effects on quality of life.

1988: Dr Alex Chisholm  
UNIVERSITY OF OTAGO  
Alex’s research investigated the relationship between alteration in dietary components and changes in biochemical and anthropometrical variables in treatment of lipid disorders and reduction in cardiovascular disease risk in hyperlipidaemic and normolipidaemic groups. Diets involved changes in specific food constituents (total fat, fatty acids, folate, carbohydrates, protein, phytosterols) and foods (butter, margarine, coconut fat, dairy products, nuts, monounsaturated and polyunsaturated oils, total dietary fats).

1989: Dr Jane Elmslie  
UNIVERSITY OF OTAGO  
Jane’s PhD research compared the prevalence and determinants of obesity in people with bipolar affective disorder and the New Zealand general population. People with bipolar affective disorder were more likely to be overweight or obese than other New Zealanders because of high sucrose intakes and lower levels of physical activity.

1989: Dr Wendy Grylls  
UNIVERSITY OF OTAGO  
‘Lifestyle factors associated with glycaemic control and body mass index in older adults with diabetes’. Conclusions: reducing dietary saturated fat and excess body weight may be a useful means of improving glycaemic control in older adults with diabetes. Increasing physical activity and reducing energy from dietary sucrose may assist weight control, the former particularly in women.

2000: Dr Carol Wham  
UNIVERSITY OF ADELAIDE  
Carol’s PhD thesis investigated the nutritional implications and explored attitudinal predictors for the 30% decline in annual per capita consumption of milk in the previous two decades. Findings showed that milk was an unpopular beverage choice for about one-third of New Zealanders. Low consumption was identified to be a potential problem for the nutritional status of some segments of the population, particularly for young women.

2005: Dr Kirsty Fairbairn  
UNIVERSITY OF SYDNEY  
Kirsty’s PhD thesis was ‘Intramyocellular lipid, Exercise and Insulin Resistance’ with the Human Nutrition Unit of the Department of Molecular and Microbial Biosciences, University of Sydney. While studying, she was on the Executive Board, and then President, of Sports Dietitians Australia. Kirsty has worked in Australia and Singapore. Working with Singapore’s first ever Olympic Gold Medallist, Joseph Schooling was a highlight.

2005: Dr Winsome Parnell  
UNIVERSITY OF OTAGO  
Winsome has been active in research pertaining to food security, infant, child and adult nutrition, and nutrition survey methodology, analysis and reporting for many years, during her time on Faculty at Massey University and the University of Otago. She has published widely, and contributed to the international human nutrition community through presentations at local and international conferences.

2010: Dr Alwyn Todd  
UNIVERSITY OF OTAGO  
Alwyn’s study involved a background low sodium diet and sodium supplementation administered for four-week periods in a randomised cross-over design to achieve low, moderate and high dietary sodium intakes. Sodium intake, blood pressure and pulse wave velocity were closely monitored during the interventions, and biochemical and inflammatory markers were recorded at the start and end of each intervention. The study found an increase in blood pressure and pulse wave velocity in hypertensive volunteers.

NEW ZEALAND DIETITIANS WITH PhDs
2012: Dr Amber Parry-Strong
UNIVERSITY OF OTAGO

Amber’s research was on the relationship between higher protein intake, weight and kidney function in type 2 diabetes. Those on a higher protein diet lost similar weight to those on a high carbohydrate diet, and there were no adverse effects on markers of kidney function. The study recruited 418 people across three centres, and follow up was 24 months.

2013: Dr Kathryn Beck
MASSEY UNIVERSITY

Kathryn’s research focuses on iron deficiency in young women and athletes, the development of dietary assessment tools, sports nutrition, and determinants of dietary patterns and associated health outcomes (body composition and cognitive function). Dietary patterns consider the total diet and combinations of foods we eat rather than focusing on foods and nutrients in isolation.

2013: Dr Mary-Ann Carter
UNIVERSITY OF OTAGO

Mary Ann’s thesis ‘Is junk food promoted through sport?’ was classified as an Exceptional Thesis. High participation rates in sport suggest sports settings may be ideal environments to influence food choices and promote healthy eating. Yet little is known about the marketing and availability of food and beverages in this setting. This thesis analysed the food and nutrition environment in New Zealand sport to determine whether energy-dense, nutrient-poor food and beverages (‘junk food’) are marketed and available in this context.

2014: Dr Penny Field
UNIVERSITY OF OTAGO

A theoretical model for advocacy for evidence use was developed to explore the use of evidence in public health nutrition policymaking. The model was evaluated against a rival explanation in a policy case study of food marketing to New Zealand children. The findings led to the conclusion that public health nutrition policy processes will deliver better outcomes when advocacy for the ‘idea’ of using evidence shifts meta-level policy, policymaking processes and relationships across the policy community.

2016: Dr Jennifer Crowley
UNIVERSITY OF AUCKLAND

Jennifer’s research investigated if the nutrition education that medical students receive in undergraduate training medical allows them leverage into their future medical careers as GPs. Her research found that while medical students and GPs have positive attitudes towards nutrition care, both groups perceive that they lack the knowledge, skills, and time to provide nutrition care to patients.

2017: Dr Lisa Daniels
UNIVERSITY OF OTAGO

Lisa’s research interests are in the areas of maternal and infant nutrition. Her PhD research focused on the complementary feeding period of infants where she investigated a modified version of baby-led weaning (modified to prevent iron deficiency) on the iron and zinc intakes and status of infants aged between 6 and 12 months. A baby-led approach to complementary feeding did not appear to increase the risk of iron deficiency when parents were given advice to offer iron-rich foods with each meal.

2017: Dr Michelle Jospe
UNIVERSITY OF OTAGO

The primary aim of Michelle’s thesis was to determine the effect of different monitoring strategies (face-to-face monitoring; self-monitoring dietary intake; self-monitoring daily body weight; or self-monitoring hunger) on weight loss, with particular attention to the feasibility, adherence and effect of training individuals to eat to their hunger.

2017: Dr Catherine Wall
UNIVERSITY OF OTAGO

‘Nutrition therapy for adults with active Crohn’s disease’. The thesis explored the feasibility and effectiveness of exclusive enteral nutrition and partial enteral nutrition to treat adults with active ileal or ileocolonic Crohn’s disease. The main findings were that adults were interested in nutrition therapy and enteral nutrition treatments are feasible and effectively reduce disease symptoms and serum inflammatory markers in adults without the use of corticosteroid treatment.

2017: Dr Richard Swinbourne
AUCKLAND UNIVERSITY OF TECHNOLOGY

Richard’s thesis ‘Sleep, performance and recovery in elite collision sport athletes’ reviewed the role and importance of sleep for health, performance and recovery for elite rugby players. His paper ‘Prevalence of poor sleep quality, sleepiness and obstructive sleep apnoea in athletes’ was published (European Journal of Sports Science; December 2015). Sleep interventions focused on benefits of sleep extension in professional rugby players and exploring sleep: nutrient interactions with specific emphasis on Montmorency tart cherries and sleep quality.

2017: Dr Leanne Young
AUCKLAND UNIVERSITY OF TECHNOLOGY

In her thesis ‘Under 5 Energize: Improving child nutrition and physical activity through early childhood centres’, Leanne found that Under 5 Energize, a nutrition and physical activity health service operating in 121 early childhood centres in deprived areas in the Waikato, was successful at improving the food and physical activity policies and practices. Tailoring and support from programme staff (Energizers) were key reasons for the programme’s success. Increased parental engagement would enhance the reach of the service.

2018: Dr Zhuoshi Zhang
UNIVERSITY OF OTAGO

Zhuosi’s area of interest is providing diabetes nutritional education and empowering individuals to make positive dietary and lifestyle choices. As the world migrates to digital devices, opportunities arise for education resources that have a wide reach in society. Her PhD topic was to develop and test the effectiveness of an electronic nutritional education resource for pre- and type 2 diabetes suitable for the multi-ethnic New Zealand population.

2018: Dr Renee Wilson
UNIVERSITY OF OTAGO

Renee’s PhD research involved investigating the relationship between the gut microbiota, diet and glucose tolerance across the glycaemic spectrum. As part of the dietary analysis associations between vitamin C intakes, plasma vitamin C status and glycaemic control were also investigated. A clinical trial of the impact of adding two kiwifruit per day on top of usual diet was also undertaken.
1995: Dr Clare Wall
QUEENSLAND UNIVERSITY OF TECHNOLOGY, BRISBANE
Clare completed her dietetic training at the University of Wales. Her PhD research tested the efficacy of a rice oral rehydration solution (ORS) for the treatment of diarrhoeal dehydration in young children. A prospective randomised trial was conducted to compare the efficacy of a rice-based ORS with glucose ORS in infants and children under 5 years of age with acute diarrhoea and mild to moderate dehydration. The study demonstrated rice ORS an acceptable alternative to glucose ORS in young children and that it is significantly more effective in reducing the course of diarrhoeal illness and the time taken to return to normal drinking and eating habits.

2003: Dr Rozanne Kruger
NORTH WEST UNIVERSITY, SOUTH AFRICA
Rozanne is a South African trained dietitian. Her PhD on the THUSA BANA (Transition and Health during Urbanisation of South Africans, BANA, children) study was a cross-sectional survey to investigate weight status and determinants of overweight/obesity. A random sample (n= 1257) of 10-15 year old schoolchildren, stratified for gender, type of school and ethnic group, was used. Smaller households, inactivity and increasing age for girls were found to be determinants influencing the development of overweight/obesity; and post-menarche females had higher body fat content. Overweight/obesity prevention should focus on pre-menarcheal girls.

2011: Dr Andrea Braakhuis
AUCKLAND UNIVERSITY OF TECHNOLOGY
Andrea is an Australian trained dietitian with a research interest in the clinical and health application of dietary antioxidants and phytochemicals. She is currently investigating the effect of the dietary polyphenols on immune function, breast cancer and athletic performance.

2011: Dr Louise Mainvil
UNIVERSITY OF OTAGO
Louise is a USA trained dietitian with a research interest in health promotion. Given the importance of vegetables and fruit in disease prevention and the need for robust evaluation tools, Louise designed and validated six questionnaires to measure adult fruit and vegetable consumption, stages of change, incentives/disincentives to eat fruit and vegetables (decisional balance) and confidence to eat fruit and vegetables (self-efficacy). These Transtheoretical Model concepts are widely used in clinical and community settings. These instruments were used to evaluate the effectiveness of computer-tailored communications for low fruit and vegetable consumers.

2012: Dr Caryn Zinn
AUCKLAND UNIVERSITY OF TECHNOLOGY
Caryn is a South African trained dietitian. Her doctoral work explored weight loss and maintenance outcomes in the workplace and dietitian clinic settings. A novel ‘small-changes’ nutrition, movement and mindfulness intervention was designed and implemented in two New Zealand workplaces. Long-term weight, health, productivity and return-on-investment outcomes were evaluated. In the private practice dietitian clinic setting, retrospective client weight loss and 12-month maintenance outcomes were assessed, and weight loss data compared across these two settings.

2015: Dr Marielize Richter
NORTH WEST UNIVERSITY, SOUTH AFRICA
Marielize is a South African trained dietitian. The central focus of her PhD research was the analysis of dietary fat intake and plasma phospholipid fatty acid status and associations with cardiovascular disease risk factors namely blood lipids (total cholesterol, low density lipoprotein cholesterol, high density lipoprotein cholesterol and triglycerides) and plasminogen activator-inhibitor-1 in a unique population in South Africa undergoing nutrition transition.

2016: Dr Rajshri Roy
UNIVERSITY OF SYDNEY, AUSTRALIA
Rajshri’s research on lifestyle interventions and nutritional epidemiology in young adults involved conducting an audit of the broad food environment on the University of Sydney campus, including food availability, cost and promotion in food outlets, cafeterias, colleges and vending machines. A healthy eating index was developed and applied, dietary data collated and analysed, and the impact of point-of-purchase interventions on the dietary behaviour of these students evaluated.
### DIETITIANS NEW ZEALAND/NZDA PRESIDENTS, COUNCIL CHAIRS and CONFERENCE VENUES – 1993-2018

<table>
<thead>
<tr>
<th>Year</th>
<th>President/Chair</th>
<th>Conference Venue</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017-2018</td>
<td>Claire Tahu</td>
<td>Chair</td>
<td>Auckland</td>
</tr>
<tr>
<td>2016-2017</td>
<td>Claire Tahu</td>
<td>Chair</td>
<td>Wellington</td>
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<tr>
<td>2015-2016</td>
<td>Claire Tahu</td>
<td>1st Chair</td>
<td>Wellington</td>
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<tr>
<td>2014-2015</td>
<td>Kath Fouhy</td>
<td>Last President</td>
<td>Wellington</td>
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<tr>
<td>2013-2014</td>
<td>Kath Fouhy</td>
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<tr>
<td>2012-2013</td>
<td>Christine Stewart</td>
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<td>2011-2012</td>
<td>Christine Stewart</td>
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<td>2010-2011</td>
<td>Annette Nistor</td>
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<td>Dunedin</td>
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<tr>
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<td>Julie Carter</td>
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<td>Julie Carter</td>
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<td>2006-2007</td>
<td>Sandy Clemett</td>
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<td>2004-2005</td>
<td>Helen Wallwork</td>
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<td>2002-2003</td>
<td>Mary McNab</td>
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<td>2001-2002</td>
<td>Mary McNab</td>
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<td>Jane Dodd</td>
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<tr>
<td>1998-1999</td>
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<td>Heather Fear</td>
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<tr>
<td>1993-1994</td>
<td>Heather Fear</td>
<td>President</td>
<td>Christchurch</td>
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</tbody>
</table>

1. Presidents of NZDA/Dietitians NZ were replaced by Chairpersons of the Dietitians NZ Council in 2015
2. National meeting
3. Combined meeting with other professional groups
### DIETITIANS NEW ZEALAND/NZDA SECRETARIES, TREASURERS, EXECUTIVE DIRECTORS, CEOS – 1993-2018

<table>
<thead>
<tr>
<th>Year</th>
<th>Administration</th>
<th>Secretary</th>
<th>Treasurer</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017–2018</td>
<td>Cheryl Linge (CEO#)</td>
<td>Jacqui Fitzgerald (AO#)</td>
<td>Council Subcommittee</td>
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<tr>
<td>2016–2017</td>
<td>Cheryl Linge (CEO#)</td>
<td>Georgia Wakefield (AO)</td>
<td>Council Subcommittee</td>
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<td>2015–2016</td>
<td>Cheryl Linge (CEO#)</td>
<td>Emma Jones (AO)</td>
<td>Deborah Sue</td>
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<tr>
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<td>Georgia Wakefield (AO)</td>
<td>Deborah Sue</td>
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<tr>
<td>2012–2013</td>
<td>Petrina Turner-Benny (CEO#)</td>
<td>Alex Howatson (AO)</td>
<td>Nicky Moore</td>
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<td>2009–2010</td>
<td>Jan Milne (ED)</td>
<td>Jan Milne (ED)</td>
<td>Cathy O’Leary</td>
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CEO – Chief Executive Officer  
ED – Executive Director  
EO – Executive Officer  
NEO – National Executive Officer  
AO – Administration Officer  
NC – National Coordinator  
FSC – Finance Sub Committee  
# – incumbent a non-dietitian

### DIETITIANS NEW ZEALAND DIETETIC COMMUNICATION ADVISERS

2017    Louise Beckingsale, NZRD

1A new appointment to Dietitians NZ National Office Staff from 2017
1939
- After 5 years of informal and inconsistent discussion about forming a professional group, and developing a membership descriptor, applications are sent out to those who might be considered eligible.
- 33 applications received, of whom 11 were members of either the American Dietetic Association or the British Dietetic Association. They are accepted immediately.

1941
- Bess Wilson, pro-tem secretary, circulates a postal ballot for office holders.
  - Monica McKenzie is elected the first President.
  - Eleanor Couston is elected the first Secretary.

1942
- The first two groups of New Zealand trained dietitians qualify.

1943
- May 16-18: Inaugural Conference of the NZDA.
  - Membership is 47 active members; 5 associate members.
  - The first Honorary Life Members are appointed:
    - Dr Muriel Bell CBE, MD, HonDSc, FRACP, FRSNZ, FNZIC.
    - Sir Charles Burns KBE, MD, FRCP.
    - Mary Lambie CBE.
    - Dr RA Shore.

1945
- The Department of Health issues a badge to qualified New Zealand trained Dietitians.
  - This oval badge has a blue enamel surround and the New Zealand Coat of Arms and the words ‘Department of Health New Zealand Dietitian’.

1946
- Establishment of the NZDA Bulletin.
  - Four annual cyclostyled publications (volumes I-IV) precede the Journal of the NZDA.

1947
- Salaries subcommittee established to discuss salaries and conditions of employment for dietitians with the Department of Health.
  - This results in 1948 with the establishment of a salary scale and regulations for dietitians and student dietitians under the Hospital Employment Regulations, amendment 4.

1948
- Formation of a Dietitians Committee as a controlling board for dietitians in New Zealand.
  - Authority is vested in the Department of Health.
  - Formation of an Auckland Branch (unofficial).

1950
- The Dietitians Act is passed and takes effect from January 1, 1951.

1951
  - Editorial Committee of Constance Shearer, Flora Davidson, Joyce Martin, and Evelyn Waddell.
  - The A5 version is to be published twice a year.
  - First meeting of the Dietitians Board in August.
  - Two members of the seven members are to be dietitians nominated by the NZDA.
1952

- Esme Ussher is the NDZA official delegate to the first International Congress of Dietetics (ICD), held in Amsterdam, and organised by the Dutch Dietetic Association.
  - Esme receives £15 from the NZDA towards her expenses.
  - Thirty countries are represented by 600 delegates.

1953

- The Dietitians Regulations are gazetted.
  - These make provision for the registration of Dietitians in New Zealand.
- The Certificate of Proficiency is replaced by a certificate of Registration.
- New Zealand is one of the first countries to give state registration to dietitians.

1954

- The ‘new’ lozenge shaped badge, with a green enamel surround with the words ‘New Zealand Registered Dietitian’ and a silver centre embossed with the wheat and barley sheaf entwined with two serpents of Aesculapius is introduced.
- Adoption of the NZDA’s first Code of Ethics.

1955

- The NZDA Rules revision includes a restatement of the Objects of the Association.

1956

- 2nd ICD in Rome, the NZDA official delegate is Enid Cooper.

1957

- A Department of Health Dietitians Grading Committee is established.
- Grading scale for Dietitians’ Salaries gazetted in the Hospital Employment (Dietitians) Regulations set annual salaries as: Student Dietitians £515–£560; Staff Dietitians £640–£695; Grade One £695–£780; Grade Two £780–£900; and Grade Three £950–£1150.

1958

- The first 4-day Refresher Course held in Wellington, instead of an annual conference. The theme is ‘Planning for the Future’.
- Decision to base the NZDA Treasurer in Wellington to ease the collection of subs and handling money.

1961

- 3rd ICD in London. The NZDA official delegates are Constance Shearer and Margaret Cameron.
  - Constance Shearer presented a paper.

1964

- The NZDA appears before the Lythgoe Committee of Cabinet in salary negotiations.
  - The NZDA negotiates the first salary increment for dietitians since 1957.

1965

- Roles of Secretary and Treasurer combined, and the officer to be paid an honorarium.
  - Enid Cooper is elected the first Secretary Treasurer.
- The NZDA has 214 members: 68 active life; 12 associate life; 6 honorary life; 7 affiliate; 52 active; 49 associate.
- 4th ICD held in Stockholm, Sweden. The NZDA official delegates are Margaret Till and Margaret Cameron.
  - International Labour Organisation lobbied to adopt the spelling ‘dietitian’ in the International Standard Classification of Occupations.

1965–67

- The NZDA aligns with 7 other hospital employee organisations to form a Combined Hospital Employee Organisations (CHEO) for negotiations on conditions of work.
1967
- 50% of members respond to a questionnaire that they are dissatisfied with the salary scale, especially round grades one and two.
- Pamela Williams is elected Secretary Treasurer and held this role until 1980.

1968
- A major submission on salaries was prepared by the NZDA Salaries subcommittee, seeking a revised salary scale, but it was unsuccessful.
- Constance (Connie) Shearer dies, leaving £500 to the NZDA.
  - The NZDA Education Trust is formed based on Connie Shearer’s bequest.

1969
- The first Constance Shearer Lecture is given by Professor Patricia Coleman, Dean, School of Home Science.
- Dietitians Grading Committee composition revised to include two NZDA members.
- 5th ICD in Washington DC. The NZDA official delegates are Joanne Swan and Margaret Till.
  - Margaret Till presented a paper.
  - NZ Ambassador Frank Corner, hosted a barbecue in the Embassy garden for New Zealand delegates.

1970
- The NZDA becomes a member of the Combined State Services Organisation (CSSO).

1971
- Another salary submission is prepared by the NZDA Salaries subcommittee.
- Penal rates were accepted – Dietitians were the last of the hospital professions to accept them.
- Formation of Waikato Branch.

1972
- A salary claim is filed, and a lower scale than proposed was eventually accepted.
- The NZDA to pay executive committee members 50% of their travel expenses to attend meetings.
- Auckland Branch re-formed

1973
- 6th ICD in Hanover, Germany. The NZDA official delegates are Margaret Till and Marjorie Bloxam.
  - Eight New Zealand registrants.
- Formation of Christchurch Branch.

1974
- The NZDA set up a permanent office in Wellington – moving out of the home of the honorary Secretary-Treasurer.
- CHEO becomes SHEO (Society of Hospital Employee Organisations).
- ITAC (Institutional Training Advisory Committee) established with representation from the NZDA. The Committee dissolved in 1990.
- The NZDA hosted its first Exhibitor Display at Conference.

1975
- The NZDA joined the Royal Society of New Zealand.
1976
- Belinda McLean agreed to a 12 month trial period as the NZDA Publicity Officer, and continued until 1981.
- The NZDA granted associate member status on the Hotel & Catering Industry Training Board.
- ‘Calorie Counted Cookbook’ published. Edited by Winifred Goddard for the NZDA. This was followed by a second printing.

1977
- 7th ICD held in Sydney. The NZDA official delegates are Jocelyn Hampton and Julian Jensen.
  - New Zealand agreed to support the Australian dietitians by providing a pre-congress seminar in Auckland with 400 registrations, including 240 Americans.
  - NZ Trade Consul, Joe Turnbull, hosted a formal reception for New Zealanders and the official delegates.
- An application made on behalf of the International Committee of Dietetic Associations for affiliation and observer status with the International Union of Nutritional Scientists (IUNS) was passed unanimously.
- Government wage freeze stymied attempts to seek salary increases.
- Establishment of Dial-a-Dietitian in Auckland.

1978
- The first combined conference: Nutritech '78. NZDA, Institute of Food Science and Technology, Nutrition Society of New Zealand, and the Society for the Study of Diabetes combined conference at Lincoln College.
- Dial-a-Dietitian service set up in Christchurch.

1979
- The NZDA salary claim settled, giving about a 5% increase in salaries.

1980
- The Dietitians Act amendment increased membership of the Board from 8 to 11, including 5 members who would be dietitians nominated by the NZDA. This amendment reduced the influence of the Health Department on the Board and transfers control to dietitians.
- 8th ICD in Sao Paulo, Brazil. The NZDA official delegates are Belinda McLean and Diane Gane.

1981
- A new regime of membership categories was introduced, deleting the life and associate life membership categories. Five membership classifications were; active, retired, associate, affiliate and honorary life.
- Pamela Williams appointed Chair of the Dietitians Board – the first dietitian to hold this position.
- Release of the Nutrition Advisory Committee of the Board of Health’s 12 nutritional goals for New Zealanders.
- Wellington Branch formed.

1982
- Jocelyn Hampton took on the role of Publicity Officer for 2 years.
- The annual general meeting endorsed a remit for a committee to investigate and explore opportunities for continuing education. Short courses, workshops, study days, meetings and a journal review service were preferred by members responding to a survey.
- A short-lived journal review service was introduced in the mid-1980s, in response to members’ requests.

1983
- The first awards, sponsored by Economics Laboratory (later Ecolab) presented at the 40th Jubilee dinner.

1984
- 9th ICD in Toronto. The NZDA official delegates are Penny King and Vivienne Mason.
  - Pamela Williams invited to present a paper; Bernice Kelly also presented.
- Christchurch Branch Triple Tested Cookbook published, followed by a second printing.
1985
- Dietitians begin working in new areas – private practice and consultancy.
- Public Relations firm Clarity engaged to assist in strengthening the self-image and professional image of the dietitian and the NZDA.
- 8–10% increase in dietitians’ salaries.

1986
- Trial in Christchurch of the new competency-based dietetic training programme. This was introduced to Auckland and Wellington training schools in 1988.
- The NZDA became part of the Combined State Unions (CSU).
- 36–45% increase in dietitians’ salaries – the most successful pay increases ever achieved by dietitians.

1987
- Strategic Planning Process for the NZDA initiated by President Wendy Webb.
- The first Submissions subcommittee set up.

1988
- Presentation of the first Education Trust Award for continuing education.
- Establishment of the Department of Health Nutrition Taskforce.
- Special Interest Group for private practice dietitians.
- The first edition of the Clinical Handbook published by the NZDA.
- 10th ICD in Paris. The NZDA official delegates are Sue Pollard and Christine McDonald.

1989
- Publication of the first position paper ‘The nutritional management of diabetes in New Zealand’.
- Publication of the second position paper ‘The nutritional management of food intolerance’.
- Presentation of the first Douglas Pharmaceuticals Award.
- New mission statement released ‘NZDA is a progressive and dynamic organisation which promotes a supportive environment responsive to the needs of members and committed to promoting high standards of nutrition and food management’.

1990
- Presentation of the first Award of Excellence.
- Presentation of the first Abbott Award.
- Introduction of Corporate Membership category.
- Special Interest Group for Dietitians in Industry.

1991
- The first dietetic summit meeting held to discuss professional issues.
- ‘Food for Health’ from the Nutrition Taskforce published.
- Special Interest Group for Diabetes Dietitians.
- Special Interest Group for Community Dietitians.

1992
- 11th ICD in Jerusalem, Israel. The NZDA official delegates are Patricia McFadden and Jo Stewart.
  - Permanent Secretariat for the International Committee of Dietetic Associations established in Canada.
- The NZDA Standards of Practice document released.
- Central Districts Branch formally established.
- Southern Districts Branch formally established.
- Special Interest Group for Dietitians in Management.
1993

- 50th Jubilee.
- The NZDA receives a bequest of $150,000 from the estate of Dr Neige Todhunter.
- Publication of ‘A History: New Zealand Dietetic Association (Inc) and Dietetics in New Zealand’ by Dion Crooks.
- Northern South Island Branch formally established.
- Presentation of the first Young Achiever Award.
- Presentation of the inaugural Premier Paper Award (selected from JNZDietAssoc).
- The NZDA has 23 Corporate Members.
- Introduction of the University of Otago Postgraduate Diploma in Dietetics.
- Dietitians Board becomes self-funding, resulting in a 4-fold increase in the cost of APCs.
- Special Interest Group for Paediatric Dietitians established.

1994

- Inaugural Neige Todhunter Award for postgraduate study.
- Journal of the NZDA achieved objective of being a fully refereed scientific journal.
- Continuing Competency Pilot – a joint initiative with the NZDA and the Dietitians Board.
- Core Management Group established to implement executive committee decisions in a timely manner.

1995

- Inaugural South West Pacific Regional Dietitians Conference in Brisbane.
- Marketing subcommittee formed.
- Membership services committee formed.

1996

- 12th ICD held in Manila. The NZDA official delegate is Jenny Black.
- Appointment of first archivist – Bernice Kelly.
- Special Interest Group in Gastroenterology established.
- Inaugural publication of the NZDA Conference Proceedings.
- The NZDA assumes responsibility for the Continuing Competency Programme.
- Honorarium for the President adopted.

1997

- Introduction of National Coordinator Role to market and profile the NZDA to members and the general public.

1998

- Adoption of a new logo for specific use in marketing the profession.
- A remit to change the name of the NZDA was narrowly defeated.
- Inaugural Top Student Award presented.

1999

- Inaugural Bernice Kelly Award presented.
- NZDA officers met with Dietitians Association of Australia officers in Canberra to strengthen ties between the two associations.
- The NZDA commences its association with the Allied Health Professionals Group (later [2001] Allied Health Professional Associations Forum).

2000

- 13th ICD held in Edinburgh. The NZDA official delegates are Moira Styles and Chris Cook.
- Launch of the NZDA website.
2001
- Public Health Special Interest Group established and Community Special Interest Group formally wound up.
- A full-time Executive Officer appointed.

2002
- The NZDA Public Relations subcommittee established.
- The NZDA office moved to a central Wellington location in the Betty Campbell Centre in Panama Street.

2003
- Diamond Jubilee (60 years) of the NZDA.
- ‘Dietitians Insight’ – the first NZDA newsletter for GPs.

2004
- 14th ICD held in Chicago, Illinois. The NZDA official delegates are Christine McDonald and Pip Duncan.
- Special Interest Group in Nutrition and Gerontology established.

2005
- MOU signed with Dietitians Association of Australia for ‘Nutrition & Dietetics, the Journal of the Dietitians Association of Australia including the Journal of the NZDA’.
- Special Interest Groups for Cardiovascular Disease established.
- Special Interest Group for Dietitians in Food Industry was established.
- NZDA representation at the Māori Allied Health Hui – Nga Pou Mana (Hiki Pihema).

2006
- Special Interest Group for Primary Healthcare established.
- Last issue of the NZDA Conference Proceedings published (no 11).

2007
- The NZDA Office moves to the Mibar Building in Victoria Street, Wellington.
- NZ Dietitians Board and Dietitians Association of Australia enter into a ‘Mutual Recognition Voluntary Relationship Charter’ for dietetic qualifications between the two countries.
- The NZDA Conference Abstracts published as a Supplement to Nutrition & Dietetics 2007, 64 (Suppl 3).
- Special Interest Group for Oncology established.

2008
- 15th ICD held in Yokohama, Japan. The NZDA official delegates are Vicki Paulin and Jan Milne.
- Special Interest Group for Renal Dietetics established.
- Special Interest Group for Bariatric Dietetics established.

2009
- New name announced: Dietitians New Zealand Inc (Dietitians NZ).
- External advice and consultation by consultant Sue Suckling towards a new strategic plan.
2010
  - Completion of a Governance Policy Manual reflecting a commitment towards good governance.
- Te Kahui Manukura o Kai Ora – Māori Dietitians Group formed.
  - Representative for Māori Dietitians with observer status on executive committee.
- Special Interest Group for Asian Nutrition established.
- Special Interest Group for Cystic Fibrosis established.
- Special Interest Group for Food and Nutrition Managers established.
- Prescribing rights for Dietitians achieved.

2011
- Adoption of a Governance Policy approach to the operation of Dietitians NZ.
- Appointment of a Chief Executive Officer for the operational side of the organisation.
- Launch of PEN – Practice-based Evidence in Nutrition – via the website.

2012
- 16th ICD held in Sydney, Australia. Dietitians NZ official delegates are Christine Stewart and Annette Nistor.
  - Carol Wham and Moira Styles Dietitians NZ representatives on the DAA programme committee.
- Sports Nutrition Special Interest Group established.
- Dietitians NZ office moved from Wellington City to Johnsonville.
- University of Otago MDiet introduced.
- Massey University MSc (Nutrition and Dietetics) introduced.

2013
- New Māori name adopted: Ngā Pukenga Kai Ora o Aotearoa.
- University of Auckland MHSc in Nutrition and Dietetics introduced.

2014
- Dietitians NZ terminates its partnership with DAA’s Nutrition & Dietetics, ending 68 years of Journal publication.

2015
- Media Special Interest Group established.
- Dietitians NZ led by a skills-based Council in place of a regionally-based executive committee.
  - The last Dietitians NZ President Kath Fouhy, replaced by the first Council Chair, Claire Tahu (née Green).

2016
- 17th ICD in Granada, Spain. Dietitians NZ official delegates are Penny Field and Claire Tahu.
- Establishment of Editorial Committee for News & Views.
- Formation of Research Special Interest Group.

2017
- Appointment of the first Dietetic Communications Adviser (Louise Beckingsale) to the National Office staff.
- Formation of ICU Special Interest Group.

2018
- 75th Jubilee.
- Formation of Allergy Special Interest Group.
- Formation of Ketogenic Special Interest Group.
# Dietitians in this 50-75 Year History

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