International Confederation of Dietetic Associations

Dietitians around the World

Their education and their work

2008

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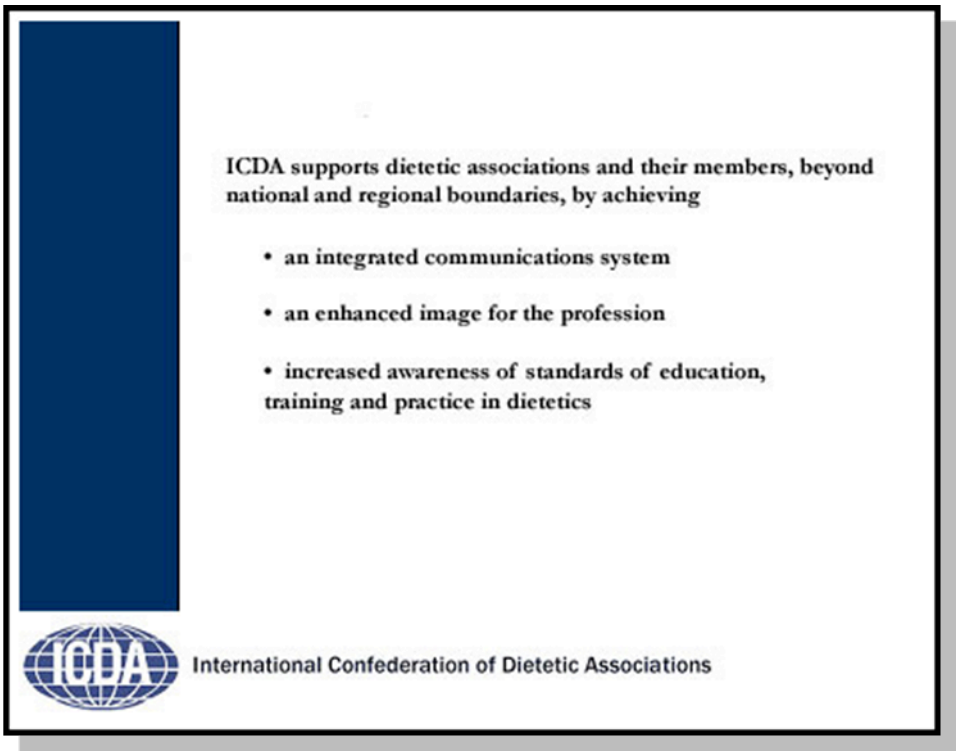
DIETITIANS AROUND THE WORLD

THEIR EDUCATION AND THEIR WORK (2008)

The following report is based on a survey of the education and work of dietitians conducted in 2008, presented at the XVth International Congress of Dietetics (ICD) by Carole Middleton on behalf of the ICDA Board of Directors.

BACKGROUND

In 2000, when the International Confederation of Dietetic Associations (ICDA) became a confederation, the representatives of the National Dietetic Associations (NDA) agreed the mission statement for ICDA as:



To enable us to raise awareness of the standards of education and training and the range in practice of dietitians it is important to continually update our knowledge of the situation around the world.

A comprehensive survey of the education and work of dietitians was conducted in 2002, in conjunction with the European Federation of Dietetic Associations (EFAD) and presented at the XIV th ICD in 2004. The survey was sent to thirty-seven (37) countries with

members in either organisation, as a paper copy, in 2002. It was completed by thirty-one (31) countries or 84%, and collated in 2003. There were a total of thirty-seven (37) questions on basic education, further education, work and working conditions. A number of problems were reported with this process, the main ones being the variation in interpretation of some of the questions, despite the provision of a glossary and explanation, and the time taken to collect, verify and collate the information.

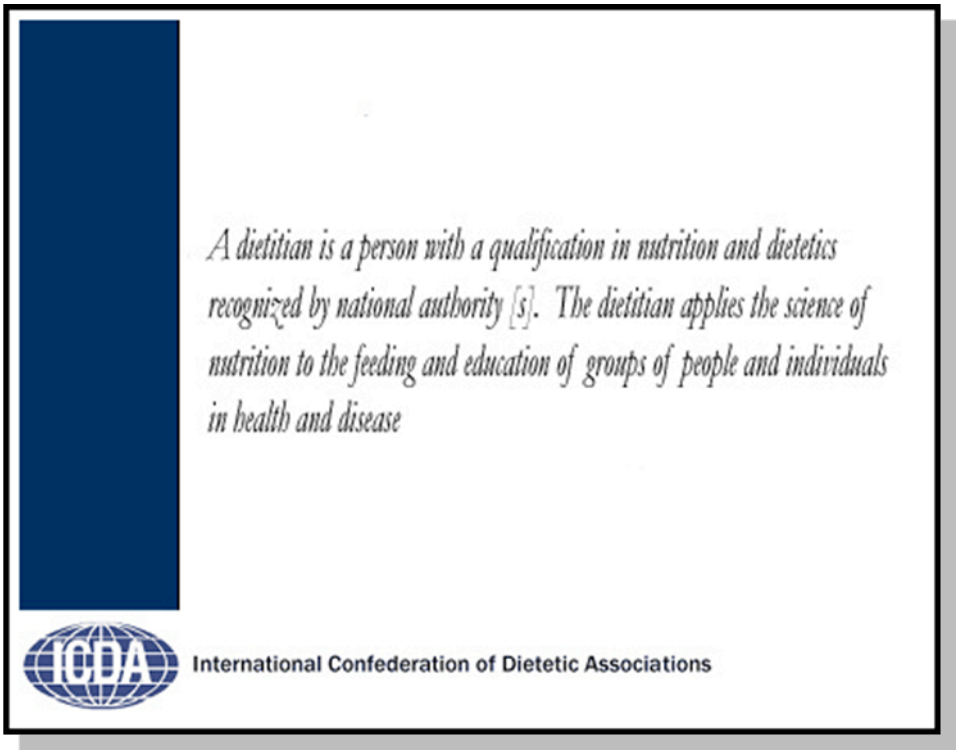
The survey was repeated in 2008 and changes made in an attempt to overcome the problems experienced previously. The survey was sent electronically in January 2008 to all ICDA members to be completed online and followed up with a reminder and word version sent to ICDA and EFAD members in a total of forty-one (41) countries. Twenty-eight (28) countries or 68% responded with sufficient information to be included in the report, though not all countries answered every question. The questions were reduced to twenty-six (26) covering the National Dietetic Association, basic education, further education, work and working environment. The information was only partially collated electronically as some needed to be added from the word documents.

The reduced number and different range of countries completing the survey make it difficult to comment on changing trends but the survey still provides some valuable information. Similar issues to the previous survey still need to be addressed, particularly the interpretation of the questions, verification of the data and the time taken to collate the information.

Countries included in the 2004 and/or the 2008 reports

Key:
[1] 2008 data only; [2] 2004 data only; [3] No data in either 2008 nor 2004

ICDA DEFINITION OF A DIETITIAN (2004)



The first questions in the survey were introduced to find out in how many countries this definition applied.

Professional title

20 countries (71%) had a recognised title that was used for a dietitian, the most common being Registered Dietitian. In 19 countries (68%) the professional title was registered, meaning that it can only be used by people that have been given permission to use it. The title was awarded by the NDA in 3 countries, by a government body in 14 countries and by other organisations in 3 countries. In only one country it was necessary to be a full member of the NDA to use the professional title.

Membership of the National Dietetic Association

NDAs were asked if there were certain standards that needed to be met before dietitians could become full members of the association; twenty-five (25) reported that this was the case.

NDAs were recognised by government bodies as providing expert opinion in nutrition and dietetics in sixteen (16) countries. In twelve (12) countries this was an informal

recognition and in four (4) this was a more formal certification. This recognition gives the general public an indication that the NDA members are experts in the field of nutrition and dietetics, compared to people that are not members.

Estimated Number of Dietitians Working / 100,000 Population

To gain an insight into the number of dietitians working in a country the actual number was compared with the population. The results showed a huge variation from 0.3 /100,000 in India to more than 25/100,000 population in Denmark and Israel and 56/100,000 in Japan.

≤ 1	India
>1 - ≤ 2	Malaysia
2 – 5	Barbados, Jamaica, Slovenia, South Africa, Spain, Turkey, Trinidad
6 – 10	France, Hungary, Iceland, Portugal, Taiwan, UK
11 – 15	Austria, New Zealand, Switzerland
16 – 20	Australia, Ireland, Netherlands, USA
21 – 25	Canada
>25	Denmark, Israel, Japan

ICDA International Confederation of Dietetic Associations

Where there was information from both 2004 and 2008 the trend suggests an increase in all countries, which was supported by the general feeling from the survey that the number of dietitians worldwide has increased. Seventeen (17) countries reported an increase in their country and four (4) reported that the numbers had remained the same.

Code of Ethics / Practice

In 2004 ICDA representatives began work on an International Code of Ethics and an International Code of Good Practice, which were adopted in 2008. To find out how many NDAs had their own codes the survey asked that question and also asked if students were taught about the codes in their basic education. Twenty-four (24) countries had their own Code of Ethics and eighteen (18) included it in the basic education. Eighteen (18) countries had a Code of Practice/Conduct and fourteen (14) included it in the curriculum.

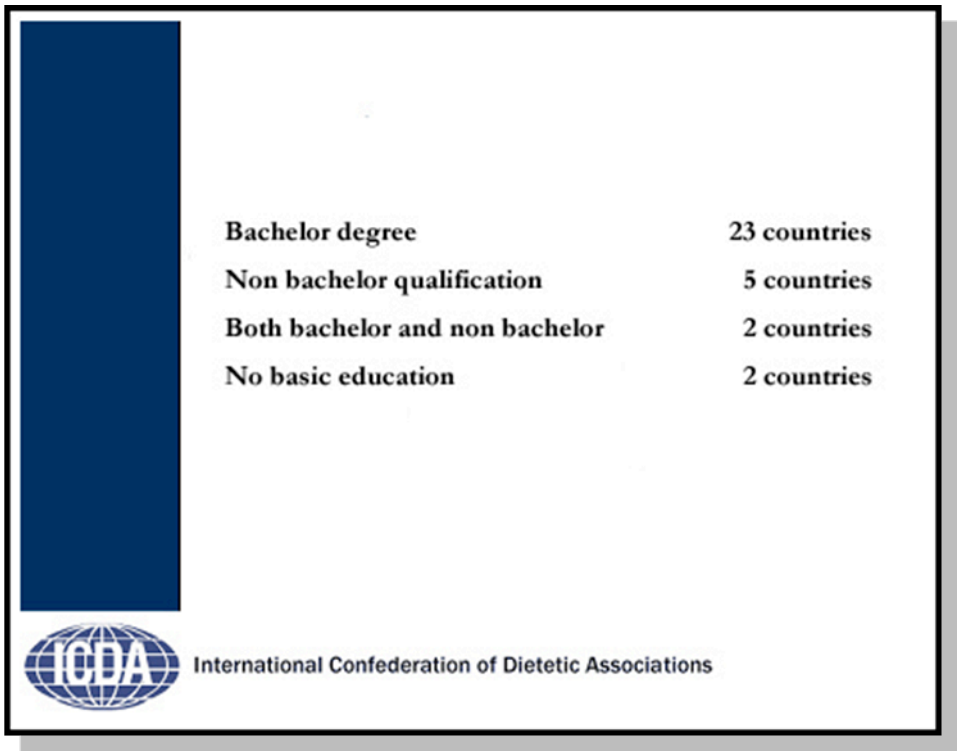
ICDA aspirational standard for dietetic education

In 2004 the following standard for the education of a dietitian was agreed as something ICDA representatives aspired to.

> *The minimum level of education of a dietitian is a bachelor degree and a period of supervised professional practice of at least 500 hours.*

The following results from the survey show how near the members responding to the survey were to meeting that standard. A number of ICDA members do not have a basic dietetic education program in their country. Dietitians working in those countries receive their education somewhere else in the world.

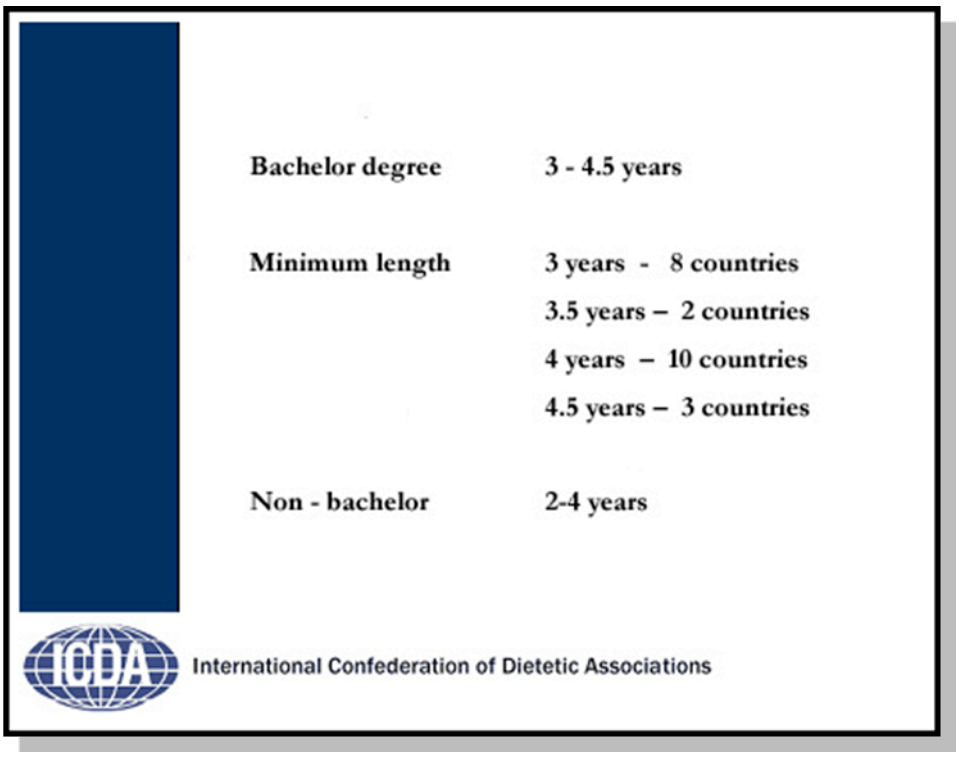
Minimum level of basic education



Two (2) countries indicated that they educated dietitians to both degree and non degree level.

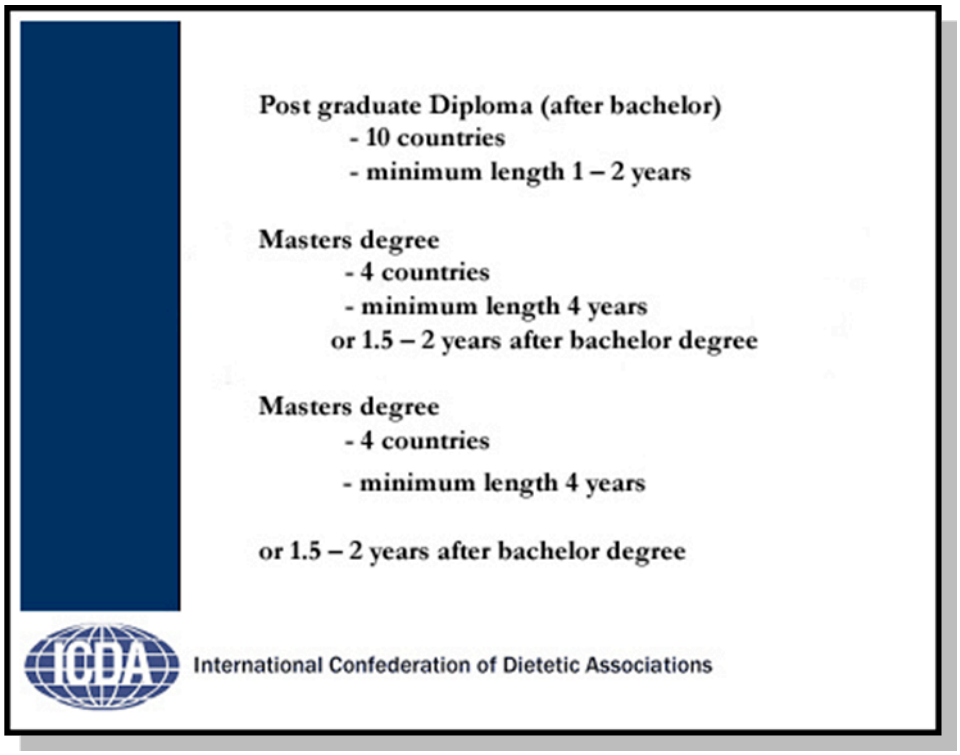
Range in length of education

Though a degree level education program was offered in 23 countries, the actual time taken to receive the degree varied from 3 years to 4½ years. The 2008 survey did not ask the number of weeks/hours but in previous surveys it was found that some courses ran over more years but students studied for fewer weeks than those running over a shorter period of time.



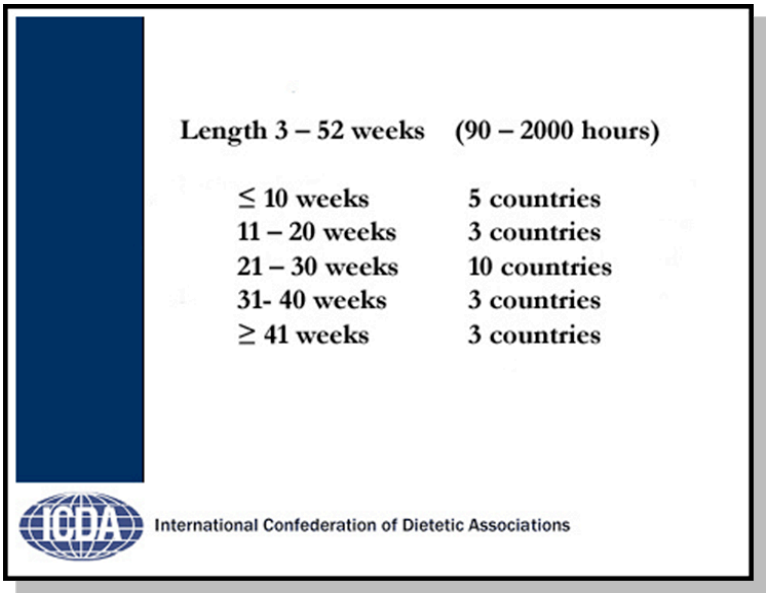
Other entry level qualifications

In some countries there are other qualifications which allow a person to practice as a dietitian. These include a Post Graduate Diploma completed after receiving a relevant bachelor degree or a Masters degree, either as a first qualification or after completing a bachelor degree.



Compulsory practical programme

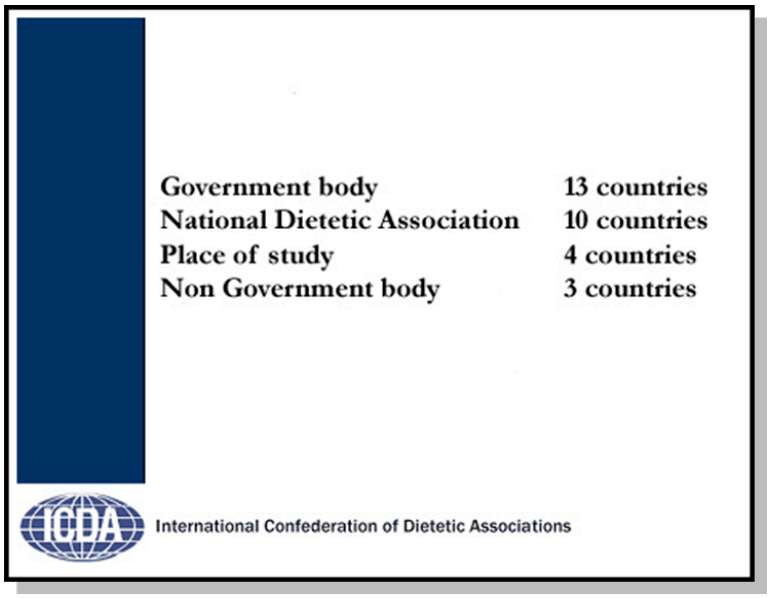
The aspirational standard for dietetic education included a supervised period of professional practice of at least 500 hours. This has been interpreted as equivalent to approximately fourteen (14) weeks. Twenty-five (25) countries reported that a period of professional practice was compulsory within the education programme. The length of practice was very varied, though most were providing more than the aspirational minimum.



A practical programme can be delivered in a number of ways ranging from one block at some point during the course, favoured by nine (9) countries; several smaller blocks throughout the course, operated in thirteen (13) countries; and separate days throughout the programme in two (2) countries. Eleven (11) countries reported that there were insufficient practice placements for all of their students, meaning that the students had to compete for the places.

National standards for basic education

Twenty-three (23) countries had national standards for the basic education program related to the course content, examinations, student assessment and/or supervised practical placement. The standards were set by a range of bodies including:



The standards were monitored in sixteen (16) countries, at a frequency of two to ten (2 – 10) years.

Competency standards

Competency standards are statements that describe the knowledge, skills and attitudes required, and the level to which they need to be demonstrated, for a person to be considered competent in that profession. Competency standards may be used as part of the assessment process to determine if a student is able to pass a basic dietetic education program.

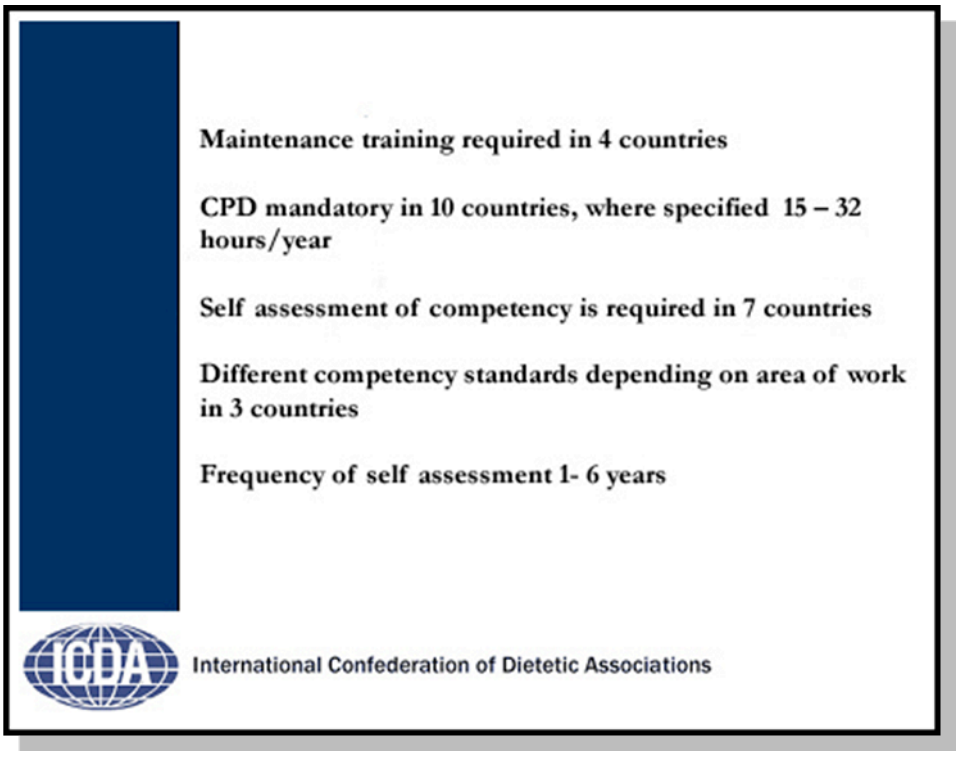
Nineteen (19) countries had competency standards that students must meet prior to successfully completing basic dietetic education programs. These were implemented and monitored by the place of study in seven (7) countries, the practical programme in one (1) country, the NDA in eleven (11) countries and a Government body in five (5) countries.

NDAs were asked if, having completed a basic education in dietetics, it was possible for a dietitian to undertake further education in the field of nutrition and dietetics. In twenty-five (25) countries there was the option of undertaking further education to PhD, Masters or Post Graduate Diploma level, regardless of the level of the basic education. In the two (2) countries offering both bachelor degree and non bachelor basic dietetic education there was the option of undertaking a bachelor degree.

Maintenance training / Continuous Professional Development (CPD)

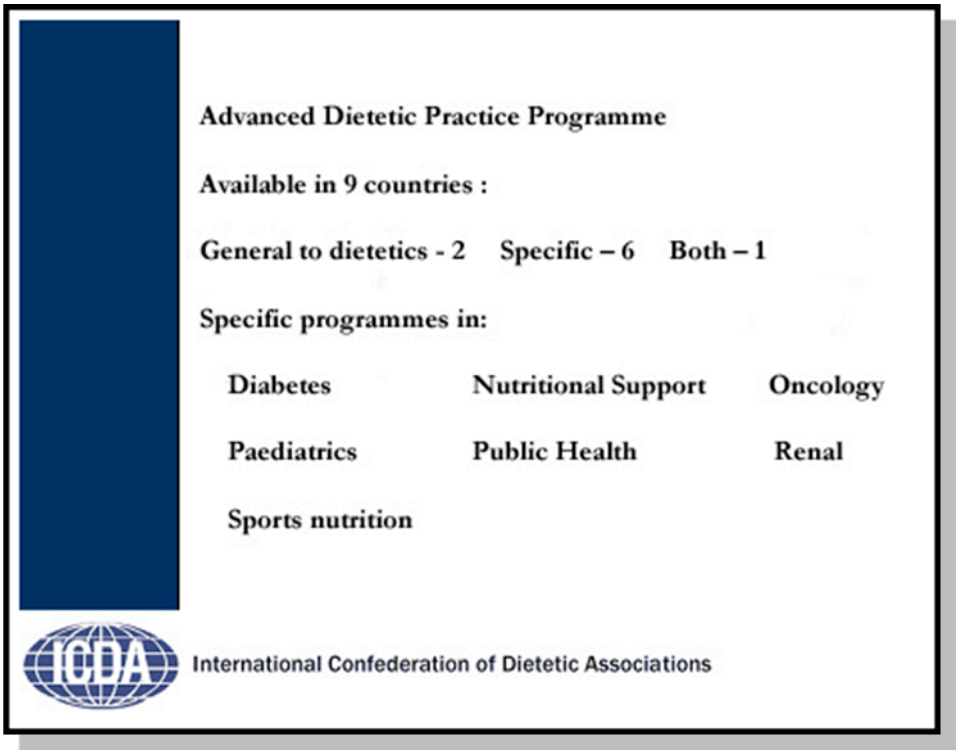
Some countries require dietitians to complete maintenance training once the basic education program has finished, in order to remain qualified. This may cover specific subjects, with an exam at the end of the training.

In other countries the NDA/Registration Body requires its members to take part in continuous professional development, which may include, for example: attending conferences or seminars, research or teaching, in order to maintain and/or increase knowledge and skills. CPD must occur over the entire time the dietitian continues to practice or wants to remain registered as a full member with the association. The amount of CPD varied and was not always specified. In some countries dietitians make a self assessment of their continued competency, which could be against different standards, depending on the area of work.



Advanced Dietetic Practice Programme

Some countries have an Advanced Dietetic Practice program which provides additional credentials to the dietitian. It gives formal recognition to a dietitian as being advanced in their field and may be general to dietetics as a whole, or specialised for example in paediatric dietetics or sports dietetics.



WORK OF DIETITIANS

Dietitians work in a wide variety of roles in, for example a clinical, public health, administrative, research or teaching capacity. Some of these roles have evolved, and continue to evolve, as dietitians seize opportunities as they arise to use their skills in other fields or areas of need. NDAs were asked to list the most common roles, an approximate percentage of dietitians currently working in each role and the most common locations for each of these roles. From the information provided it was not possible to analyse the data in the detail required to be able to say, for example, how many Clinical Dietitians there are worldwide. The most common locations cited, in order of popularity, were:

- **Hospitals (> 60% of all Dietitians)**
- **Nursing homes, family doctors, other healthcare**
- **Public Health**

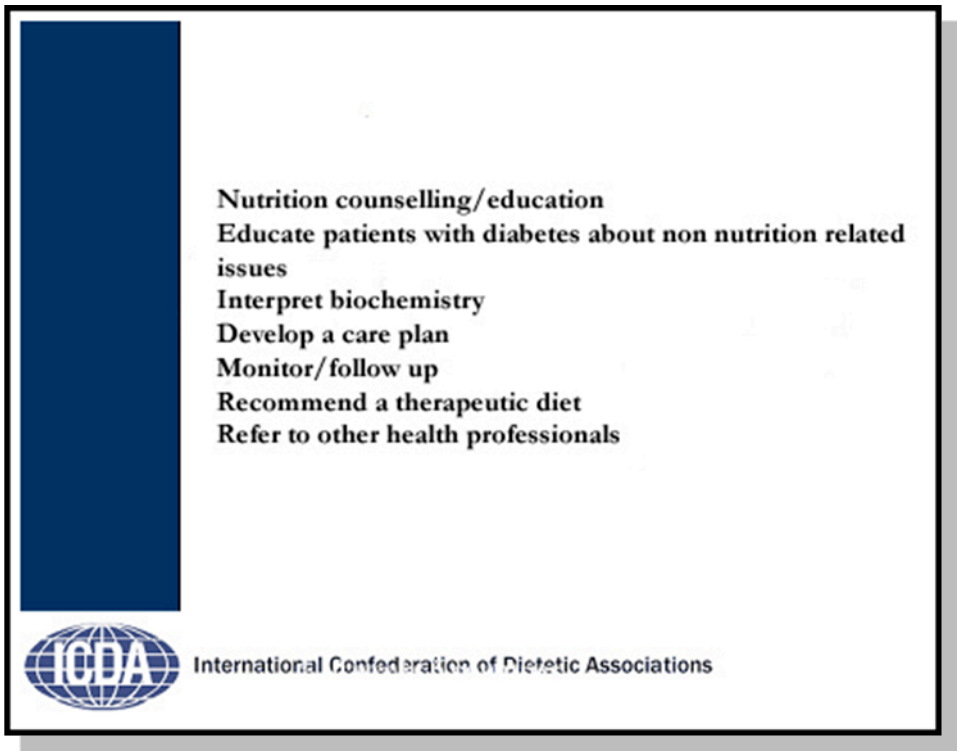
- **Commercial organisations**
- **Freelance/consultancy**
- **Education**
- **Research**

Scope of practice

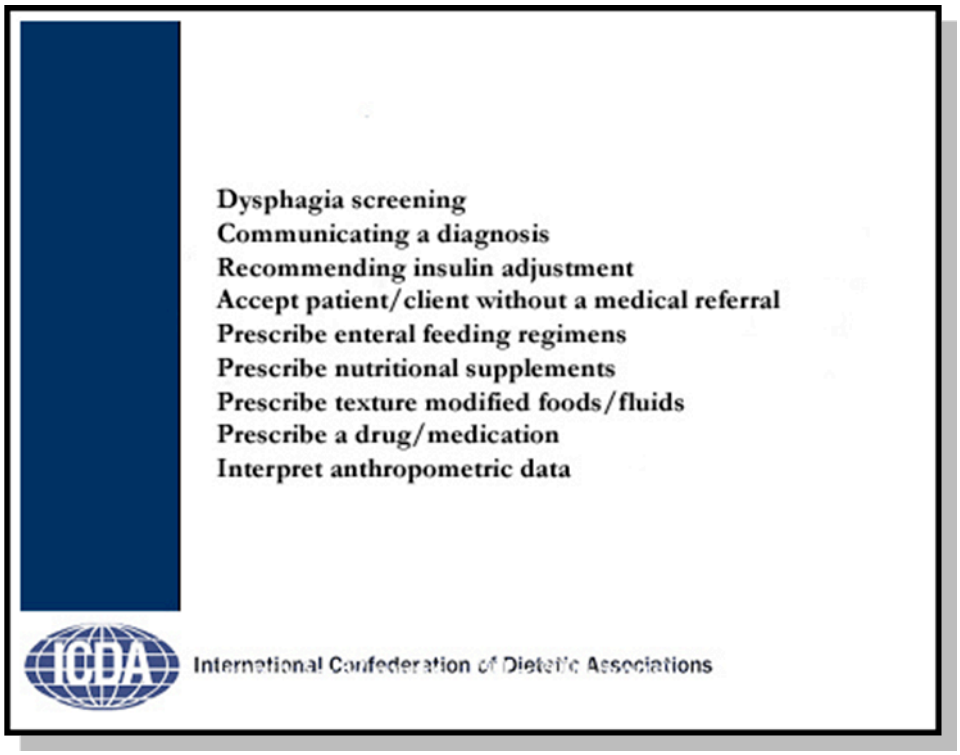
The scope of practice defines what a dietitian is and is not permitted to do. To gain a greater understanding of the diversity in the role of the dietitian a total of thirty-seven (37) different activities were listed and respondents asked to select all of the activities that dietitians are allowed to perform in that country. The activities ranged from assessing dietary intake and determining nutritional needs to prescribing parenteral feeding regimens.

In no country were all of the activities performed. The number undertaken ranged from eight to thirty-four (8 – 34) with a mean of twenty-two (22). What was not clear from the answers was if all dietitians in a country would perform all of the activities indicated or if there were several different roles a dietitian may have in that country and each would do some of the activities. What was also evident from the answers was a difference in interpretation of some of the terms used.

The activities most likely to be undertaken:



Activities least likely to be undertaken:



Teaching

In some countries there is an expectation that dietitians will be involved in teaching dietetic students, particularly during their practice placement. Some dietitians were also involved in teaching other students and professionals.

Involvement in teaching

	Yes	No	Sometimes
Student dietitians	**12**		**5**
Health professionals	**10**	**3**	**11**
Food service managers	**11**	**1**	**12**
Food service staff	**15**		**8**
Nurses	**14**	**3**	**7**
Nutrition Assistants	**16**	**3**	**1**
Medical students	**7**	**4**	**12**

Research

In twenty-three (23) countries dietitians were involved in research, which could either be led by a dietitian or part of medical research or another project.

WORKING ENVIRONMENT

A number of questions were asked about the employment of dietitians, their salary and how that compared with the national average and other professions, as an indication of the status of the dietitian in that country. These questions were less well answered probably due to variations within countries and the difficulty in finding the information.

Nineteen (19) countries answered some of the questions in this section, others answered one question only.

Salary

The starting salary of a dietitian was compared to the national average for that country, as a better comparison between countries than the actual salary. This ranged from 46% – 127% of the national average. Thirteen (13) countries had a starting salary below the national average and six (6) above the national average.

When compared to other health professionals the salary of a dietitian:

Compared to:	Similar	Higher	Lower
Physiotherapist	12	2	9
Speech Pathologist	12	3	7
Psychologist	3		21
Nurse	9	6	9

Employment

Unemployment was reported as ranging from 0 – 50% of qualified dietitians but in the majority of countries was less than 1% and less than the national average.

A shortage of dietitians was reported in 18 countries but there was no consistency, with shortages in newly qualified dietitians, experienced dietitians, specialists in a variety of fields or a variety of geographical areas all reported.

Though there remained a shortage, the majority of countries (17) had seen an increase in the total number of dietitians and an increase (17 countries) in the total number of people studying to become dietitians.

CONCLUSIONS

As concluded in the 2004 report, the education and work of dietitians around the world is a very complex and multifaceted subject. The 2008 survey has provided additional, valuable information highlighting many similarities but also many differences.

To be able to create a more detailed picture of the development and changes within the profession, surveys of this type need to be repeated at regular intervals. The challenge will be in improving the clarity of the questions being asked to avoid misinterpretation, and simplifying the method of collection to improve the response rates.

To gain a greater understanding of the content and standard of dietetic education courses and the roles dietitians play, a common terminology / standardised language is required.

It is important that we continue to develop our knowledge and understanding of both the education and the work of dietitians in order to promote the profession. A greater understanding will also help support dietitians who would like to work in countries other than where they were educated. A shortage of qualified dietitians is reported around the world. Greater understanding should help use these precious skills and resources to their full potential.