

EL-KOUR JOINS *NUTRITION TODAY* EDITORIAL BOARD



Nutrition Today welcomes Tatyana El-Kour, PhD, MS, RD, as its newest editorial board member! She is the Health and Nutrition Coordinator for the Syrian Crisis at Action Against Hunger and works at the nexus of humanitarian, nutrition, and food security in conflict-affected and high-risk areas.

For over 15 years, El-Kour has delivered progressive nutrition-specific and sensitive strategies with a behavior change focus. More recently, her technical specialty has evolved to address the changing landscape of global health and nutrition, incorporating innovations in media psychology and technology to address roots of hunger and food systems, social relations, and processes that interact with environmental, political, and economic processes within food systems—including impact of policy and trade—while also addressing linkages to health and nutrition outcomes. As a champion for innovative solutions to complex food security challenges, Tatyana brings transformative, cutting-edge approaches to promoting nutrition and health in the Middle East. She has served in technical and leadership roles at national and international levels within the World Health Organization and global humanitarian organizations, including most recently the Syrian crisis, while also strategically supporting the regional refugee nutrition response in the Middle East. She received a PhD in media psychology from Fielding University and received a combined master of science and completed her dietetic internship at Tufts University. Welcome aboard, Tatyana!

“MAKE EVERY BITE COUNT”: UPDATES TO DIETARY GUIDELINES FOR AMERICANS, 2020–2025

The new Dietary Guidelines for Americans, 2020–2025 have arrived! They were issued right before the New Year, and all of those who worked so hard on it, including Regan Bailey, PhD, RD, MPH, and Linda Snetselaar, PhD, RD, of our *Nutrition Today* Editorial Board, a big shout-out for a fine job on the Dietary Guidelines Scientific Advisory Committee, as well as Joanne Spahn, MS, RD, at the USDA, who helped with evidence reviews. Jointly published by the US Departments of Agriculture (USDA) and Health and Human Services every 5 years, this edition expands the guidance, for

the first time including the recommended healthy dietary patterns for infants and toddlers younger than 2 years. As always, the new guidelines build on the previous editions and were informed by the scientific report developed by the Dietary Guidelines Advisory Committee, along with many systematic reviews of the evidence and comments from the public and input from federal agencies. The key recommendations look similar to those of the past, suggesting that the elements of healthful diets remain constant. Two topics that garnered much attention throughout the development of the guidelines were added sugars and alcoholic beverages. The final version of the Dietary Guidelines for Americans, 2020–2025 carried forward the committee's emphasis on limiting these dietary components, but did not include changes to quantitative recommendations. The rationale for not doing so was that it was judged by decision makers that the law required evidence to support specific changes, and there was only limited evidence in the material the committee reviewed to support quantitative recommendations. However, as in prior editions, limiting intake of these two food components is encouraged, and doing so complements the eater's ability to achieve the four overarching guidelines, which encourage Americans to “Make Every Bite Count.” These guidelines are as follows:

- Follow a healthy dietary pattern at every life stage.
- Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations.
- Focus on meeting food group needs with nutrient-dense foods and beverages from 5 food groups—vegetables, fruits, grains, dairy and fortified soy alternatives, and proteins—and stay within calorie limits.
- Limit foods and beverages higher in added sugars, saturated fat, and sodium, and limit alcoholic beverages.

For more information and access to the executive summary, go to <https://www.dietaryguidelines.gov>.

FLEISCHHACKER NAMED USDA NIFA NATIONAL SCIENCE LIAISON

Congratulations to our own *Nutrition Today* Editorial Board member Shelia Fleischhacker, RD, JD, who joined the USDA's National Institute of Food and Agriculture (NIFA) in February as a National Science Liaison. The NIFA provides leadership and funding for programs that advance agriculture-related sciences. In this role, Sheila works with various stakeholder groups to strengthen the food safety and nutrition agency interactions in the Washington, District of Columbia, offices, as well as providing linkages

between stakeholders and appropriate NIFA staff based in Kansas City. Sheila previously served as the senior advisor of nutrition and food safety at USDA's Office of the Chief Scientist (2017–2018), on detail from her original position at the National Institutes of Health (2012–2018). During her federal service, she helped put forth the first-of-its-kind National Nutrition Research Roadmap and chaired a USDA Inter-Departmental Nutrition Workshop Series. She remains on the faculty at Georgetown University Law Center.

Sheila received her BS in 2000 and JD in 2007, with a Certificate in Health Law from Loyola University Chicago and a PhD in Integrative Biosciences/Nutritional Sciences from The Pennsylvania State University in 2004. Her post-doctoral training focused on urban and regional planning and public health nutrition at the University of North Carolina at Chapel Hill.

ACADEMY OF NUTRITION AND DIETETICS NAMES NEW LEADERS

Congratulations to the winners of the Academy of Nutrition and Dietetics 2021 national elections! Registered dietitian nutritionist, Kevin L. Sauer, PhD, RDN, LD, FAND, will begin his 1-year term on June 1 as the 2021 President of the Academy of Nutrition and Dietetics.

Board of Directors

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JAND RELEASES FOOD INSECURITY SUPPLEMENT

The Journal of the Academy of Nutrition and Dietetics (JAND) released a new supplement titled Building the Evidence Base by Testing Innovative Strategies to Reduce Food Insecurity in the United States: Findings From the Evaluation of Demonstration Projects to End Childhood Hunger. Food insecurity is a health and nutrition concern for many low-income households in the United States. Of particular concern is when food insecurity occurs in households with children, as it is associated with lower fruit consumption, iron deficiency anemia, lower learning and social development, and mental health disorders. The supplement was edited by Parke Wilde, PhD, professor, Friedman School of Nutrition Science and Policy, Tufts University, in an effort to provide information for both policy makers and researchers to use when considering strategies to reduce food insecurity and end childhood hunger. To read the open access supplement, go <https://jandonline.org>

THE CENTERS FOR MEDICARE & MEDICAID RELEASES THE DATA QUALITY ATLAS

The Data Quality (DQ) Atlas is an interactive, web-based tool that helps policy makers, analysts, researchers, and other stakeholders explore the quality and usability of the Transformed Medicaid Statistical Information System Analytic Files (TAF) to determine whether the data can meet their analytic needs. These need analyses of key Medicaid and Children's Health Insurance Program (CHIP) topics such as enrollment, claims, expenditures, and service use.

The charts, maps, and tables in DQ Atlas show the DQ Assessments and associated measures for each state on topics that are pertinent to Medicaid and CHIP. For each state, the DQ Assessment assigns 1 of 6 values to indicate the extent to which a state's TAF data are usable, reliable, and accurate for analyzing a particular topic. These values are used to begin evaluating whether the TAF meets the analytic needs.

Users can download DQ Snapshots, which summarize all the DQ Assessments for all states and topics. There are 2 types of DQ Snapshots: the DQ Topics Snapshot and the DQ State Snapshot. The DQ Topics Snapshots, available in Explore by Topic displays, are organized by topic area and include DQ Assessments for all topics and states for a given year. To access the DQ Atlas, go to <https://www.medicaid.gov/dq-atlas/welcome>.

NEWSBREAKS INCLUDE:

- Disparities in Breastfeeding for African American Mothers
- Lessons in Feeding Children During COVID-19 Pandemic
- Impact of Revised WIC Food Packages

CURRENT IMPACT AND FUTURE OPPORTUNITIES FEEDING SCHOOL-AGED CHILDREN DURING THE PANDEMIC

Gaps remain when it comes to feeding children. The majority of policy efforts both before and during the pandemic have focused on weekday meals, which has left millions of children hungry when schools are not in session. And, despite considerable policy progress, high rates of food insecurity among families suggest that recent efforts have been insufficient. Before the pandemic, the federal nutrition safety net included 5 major US Department of Agriculture programs aimed at alleviating child hunger. In a recent *New England Journal of Medicine* commentary, authors, including *Nutrition Today* Editorial board member Sheila Fleischhacker, PhD, JD, spoke of the gaps in the ongoing efforts to help children impacted by the pandemic. During the pandemic, schools have struggled to maintain adequate participation in programs offering to-go meals. Possibly this is because they have tried to implement modified meal programs upon short notice while communicating changing US Department of Agriculture guidance to families.

The authors identify a few programs that have been implemented, such as the Pandemic Electronic Benefits Transfer, congressional allocation of emergency of Supplemental Nutrition Assistance Program (SNAP) benefits, and the Coronavirus Aid, Relief, and Economic Security Act that provided stimulus checks to eligible families.

These programs are helpful, but their limitations give pause for not only their current impact, but also future needs in implementation needs, such as the size of the SNAP benefit, which may be inadequate due to increasing food prices, loss of access to other reliable sources of food, and loss of family income due to job loss. These problems mean that limited SNAP benefits need to stretch further than usual during the pandemic, and benefits were not increased to the 40% of SNAP participants who were already receiving the maximum benefit. During the pandemic the

loose and not always well-coordinated web of efforts to feed children on weekends and during instructional breaks did not reach all children. Participation rates were low in programs that provide food during weekends and instructional breaks, and the reach of these programs was typically limited to children who live close to participating sites.

Long-term federal approaches appear to be needed, and continued innovation will be vital for reducing food insecurity among children. Pandemic-related waivers and innovations have created an opportunity to permanently strengthen the federal nutrition safety net. According to the authors, “any changes should be based on careful evaluation of the effectiveness of pandemic-related programs and with an eye toward feeding as many hungry children as possible. The ultimate goal should be to ensure that children have adequate access to food on all days of the week, all year long, and in all settings.”

Source: Poole MK, Fleischhacker SE, Bleich SN. Addressing child hunger when school is closed—considerations during the pandemic and beyond. *N Engl J Med* January 20, 2021 DOI: 10.1056/NEJMp2033629

REVISED WIC FOOD PACKAGES AID CHILDHOOD DEVELOPMENT

Revisions to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), one of the largest US safety net programs, were made in 2009 to be more congruent with dietary guidelines. Downstream they may improve infant cognitive development, according to researchers who analyzed data from a cohort of 1222 women and children enrolled in the Conditions Affecting Neurocognitive Development and Learning in Early Childhood study from 2006 to 2011. Measures of growth and cognitive and socioemotional development were compared between WIC recipients and nonrecipients before and after policy revision. Overall, infants of women who received the WIC food package showed small but significant increases in length-for-age z scores at 12 months of age (0.33, representing approximately one-fifth of a standard deviation) compared with infants of women who did not receive the revised WIC package. In addition, the Bayley Scales of Infant Development cognitive composite score showed a 4.3-point increase at 24 months of age (approximately one-third of a SD) compared with infants of women who did not receive the revised WIC package.

No effects on growth at age 24 months or on cognitive development at age 4 to 6 years were noted, however, which suggests that the impact of the WIC program during pregnancy may fade over time. This study provides some of the first evidence that children of mothers who received

the revised WIC food package during pregnancy had improved developmental outcomes in the first 2 years of life. These findings highlight the value of WIC in improving early developmental outcomes among vulnerable children. The need to implement and expand policies supporting the health of marginalized groups has never been more salient, particularly given the nation's economic and social disparities.

Source: Guan A, Hamad R, Batra A, Bush NR, Tylavsky FA, LeWinn KZ, The revised WIC food package and child development: a quasi-experimental study. *Pediatrics* 2021;147(2):e20201853; doi: <https://doi.org/10.1542/peds.2020-1853>

ADDRESSING BREASTFEEDING DISPARITIES FOR AFRICAN AMERICAN MOTHERS

An abundance of data underscores the importance of breastfeeding and human milk for the optimal health of infants, children, mothers, and society. But while breastfeeding initiation rates have increased to more than 80% in the United States, a disparity exists for African American mothers and infants. In this group, breastfeeding is initiated approximately only 69% of the time. A new study to help identify the best strategies and practices to improve breastfeeding in the African American community leverages the opinions, knowledge, and experiences of subject matter experts with national and international exposure to policies and practices influencing African American breastfeeding initiation rates. The insight from the expert was compared with focus group data with African American mothers who identified the facilitators of and barriers to breastfeeding initiation. The comparison highlighted fundamental issues related to breastfeeding disparities, including the continued presence of stereotyping, disparities in approaches to care based on culture, and lack of access/resources in specific communities and locations.

Source: Hinson TD, Skinner AC, Spatz DL. Subject matter experts identify health equity concerns in breastfeeding for African American women [published online December 15, 2020]. *J Perinat Neonatal Nurs*; doi: 10.1097/JPN.0000000000000486

STUDY SUGGESTS COFFEE CONSUMPTION DECREASES HEART FAILURE RISK

Studies in the past have linked coffee and caffeine consumption to incident arrhythmias. Now a new study based

on pooled data from 3 large epidemiological studies indicates coffee intake was linked to a lower risk of heart failure. To develop a greater understanding of lifestyle and behavioral factors associated with negative impacts on cardiovascular health, researchers from multiple institutions in this country designed the current study to assess the impact of responses related to dietary domains on incident cardiovascular disease risk. Investigators used data from the Framingham Heart Study in their primary analysis and checked these results to validate them in cohorts from the Cardiovascular Heart Study and the Atherosclerosis Risk in Communities (ARIC) study.

Dietary variables used in the analyses included red meat consumption, whole milk consumption, and coffee consumption. Outcomes of interest included time to incident coronary heart disease, heart failure, and stroke. In their initial analyses, coffee consumption was the only dietary factor that was significantly associated with any of the outcomes of interest. Specifically, increased caffeinated coffee consumption was associated with a significantly reduced risk of heart failure (hazard ratio [HR], 0.95 per cup per day [95% confidence interval, 0.91–0.99]; $P = .02$) and stroke (HR, 0.94 per cup/day [95% confidence interval, 0.89–0.99]; $P = .02$) but not coronary heart disease ($P = .21$) or cardiovascular disease ($P = .59$). In univariable analyses, increased coffee consumption was significantly associated with decreased risk of heart failure in the Cardiovascular Health Study (HR, 0.86 per cup/day [95% confidence interval, 0.78–0.96]; $P = .005$) and also in the ARIC study (HR, 0.98 per cup/day [95% confidence interval, 0.96–0.99]; $P = .048$).

The study provides clinicians with additional evidence on the impact of coffee intake on risk of heart failure, coronary heart disease, and stroke in patients with no prior history of cardiovascular disease.

More work needs to be done, however. Study limitations included inability to determine the type of coffee consumed and manner of brewing, potential variability in measurement for 1 cup of coffee, and inability to account for other sources of caffeine such as energy drinks, caffeinated teas, and soda. But in the meantime, enjoy your cups of Morning Jo!

Source: Stevens LM, Linstead E, Hall JL, Kao DP. Association between coffee intake and incident and heart failure risk—a machine learning analysis of the FHS, ARIC, and CHS. *Circ Heart Fail* 2021;14:e006799; doi: 10.1161/CIRCHEARTFAILURE.119.006799