

American Dietetic Association/ADA Foundation 2008 Annual Report

Year in Review

New Strategic Plan, Mission and Vision

ADA's Board of Directors and Strategic Planning Task Force undertook a review and planning process to create a framework for Association activities in coming years. The Board and Task Force solicited input from members and outside stakeholders alike; identified key trends; and considered data on dietetics education, practice, research and credentialing, among other factors.

The new plan, scheduled to go into effect June 1, 2008, emphasizes the role of ADA's members in improving the health of all Americans and shifts ADA's focus outward, calling for a more active role for ADA and its members in addressing the health of Americans.

ADA's current mission and vision were also reviewed and revised. ADA's vision had been that members "are the most valued source of food and nutrition services." ADA's new vision will be: *Optimize the nation's health through food and nutrition*. ADA's mission had been "Leading the future of dietetics." Under the Association's new Strategic Plan, ADA's mission will be: *Empower members to be the nation's food and nutrition leaders*.

ADA's Board also approved three Association-wide goals to support ADA's new vision:

- 1. The public trusts and chooses registered dietitians as food and nutrition experts.
- 2. ADA improves the health of Americans.
- Members and prospective members view ADA as key to professional success.

Organizational Identity and Logo

A crucial part of ADA's process of strategic thinking and planning was a comprehensive review of the Association's organizational identity and creation of a new visual identifier, or logo. The new identifier incorporates colors of healthy foods like leafy green, apple red and plum and the strong, positive phrase that has long been associated with ADA: "Eat Right." The first revision to ADA's visual identity in more than 20 years, the new logo unifies the presentation of the organization, leading to greater credit for the Association for its activities and accomplishments and increased visibility and recognition. The new logo went into effect for all ADA entities June 1.



Continued Growth in Membership

Membership is the lifeblood of any association and ADA's membership increased every year from its founding in 1917 until the 1999–2000 Fiscal Year, the first of seven years in which ADA saw annual declines in total membership. Implementation of enhanced benefits and services tailored to meet members' evolving needs, coupled with grassroots recruitment and retention *of* members *by* members led to a turnaround in membership in 2005–06 that continued this year: ADA ended FY 2007–08 with 68,377 members, over 3 percent more than last year. ADA membership has increased by more than 8 percent in three years and is now at its highest level since 1998–99.

ADA's Elected Leaders

Members elected Jessie M. Pavlinac, MS, RD, CSR, LD, director of clinical nutrition and patient services at Oregon Health and Science University, as ADA's 2008–09 President-elect; and Ethan A. Bergman, PhD, RD, CD, FADA, associate dean of the College of Education and Professional Studies and professor of food science and human nutrition at Central Washington University, as Speaker-elect of the House of Delegates. Pavlinac and Bergman will serve as ADA's President and Speaker, respectively, in 2009–10.

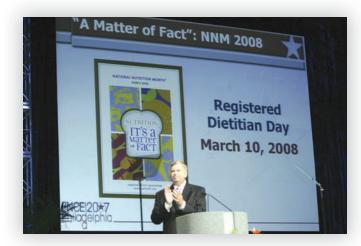
Reaching the Public with ADA's Messages

ADA's strong presence in the news media continued with thousands of interviews totaling more than 6 billion media impressions promoting the Association, its members and the dietetics profession. Coverage included regular *USA Today* blogs featuring expert advice from ADA spokespeople; and appearances by spokespeople on local

and national TV including CNN, as well as programs such as *E!* True Hollywood Stories Investigates, NBC's Today Show, CBS's Early Show and Evening News and The Morning Show with Mike & Juliet.

National Nutrition Month®

ADA won the 2008 American Society of Association Executives' first-place Gold Award for its 2007 National Nutrition Month® media materials and press kit. As a result of this press kit, ADA and National Nutrition Month generated media coverage totaling more than 76 million in media impressions. The kit was available to members on ADA's Web site.



Registered Dietitian Day

On March 10, 2008, as part of National Nutrition Month, ADA and registered dietitians around the country celebrated the first-ever Registered Dietitian Day. As the nation's food and nutrition experts, registered dietitians are committed to improving the health of their patients and community. Registered Dietitian Day commemorates the dedication of RDs as advocates for advancing the nutritional status of Americans and people around the world.

Influencing Public Policy and Legislation

ADA's advocacy program attained an unprecedented pace and assertiveness on a range of legislative and regulatory matters in Fiscal 2008. ADA looked inward as well, turning to its members on the important issue of restaurant nutrition labeling, an action that is engaging more registered dietitians and DTRs in public policy work. The restaurant nutrition labeling issue came to the forefront after the Legislative and Public Policy Committee received a request for a reconsideration of ADA's stance. ADA's President Connie Diekman, MEd, RD, LD, FADA, sent an open letter to all members inviting their comments and appointed a task force to review the science of the issues related to restaurant nutrition labeling. The task force's findings are to become the basis for ADA's representations in the future. The open process was an affirming moment for ADA's public policy and advocacy work.

ADA's legislative agenda focused significantly this year on Medicare reform and a new Farm Bill. As Congress promised to prevent cuts in fees physicians and other health providers receive, other issues were in play. Three distinct approaches to expanding access to medical nutrition therapy for Americans were outlined in legislation in the 110th Congress. The Farm Bill took shape to assure nutrition authorities would get the necessary resources so all Americans could live in a food and nutrition environment conducive to better health.

ADA directed new attention to defining and expressing how laws and regulations are shaping (and reshaping) dietetics practice. The Policy Initiatives and Advocacy Group produced original work on the effects of licensure and scope of practice on the status of registered dietitians, new regulations that call for experienced RDs in specific practice areas and new competition in areas traditionally served by RDs and dietetic technicians, registered. ADA began active work on food and nutrition labeling, prepared for work on food safety, health care reform and foods being sold in schools. ADA testified on labeling requirements for food packages and alcoholic beverages, on revisions to WIC food packages and on the national plan to improve public health. ADA worked with other groups on health policies to prevent and fight chronic disease and address childhood obesity through nutrition strategies. ADA was part of a group petitioning the Food and Drug Administration to apply stronger scientific standards in weight-loss product claims.

ADA moved ahead with new technologies and organizational structures to more effectively carry food, nutrition and health messages to decision makers. The summer of 2007 may have been the busiest in the history of ADA's advocacy program, with the Association sending out more than a dozen Action Alerts to members, encouraging them to use Web-based technology to easily contact their representatives in Washington and add their voices to a national chorus seeking better food, nutrition and health policies. ADA's Public Policy Workshop brought 500 members to Washington, D.C., to learn about and advocate on behalf of ADA-supported provisions for Medicare reforms and the new Farm Bill. These trained advocates could then take the messages back home and build a stronger network of activists. The overall effort was supported by ADA's new grassroots structure and a streamlined approach for local, state and national advocacy work. Fiscal 2008 represented the first full year of better coordination between national and local leaders in the realm of public policy, a year when many more ADA members could appreciate the power of their roles, when "all politics is local."

Finally, it was through members' support for ADA's political action committee ADAPAC that ADA was able to positively affect the national agenda on these issues and to build relationships with candidates who also are interested in better policies for infant care, school meals, food safety, agriculture policy, health literacy, weight management, nutrition services and nutrition research. In FY 2008, ADAPAC gave more than \$129,000 to Democratic, Republican and Independent candidates for the House and Senate who support ADA's views. This represented a pace of political action by ADA only surpassed in the lead-up to the breakthrough on Medicare MNT in 2000.

ADA's International Reach

The influence of the American Dietetic Association and its members on the practice of dietetics around the world continued to be felt. For example, in February, Sheikh Khalifa Medical City, flagship institution for the public health system in Abu Dhabi, capital of the United Arab Emirates, announced it was eliminating trans fatty acids from food production and distribution areas, as well as inpatient and cafeteria menus, becoming the first facility of any kind in the Persian Gulf and Middle East/North Africa to do so. The new policy, a historic development for this part of the world, came about largely due to efforts of ADA member Ellen Edwards, RD, LD, head of the department of clinical dietetics at Sheikh Khalifa Medical City. Other examples of the many ways that ADA members are making a mark throughout the world were featured in the "Year of International Dietetics" series that appeared in each issue this year of the Association's member magazine ADA Times.

Award-winning Member Publication

In the 2008 Association Trends All-Media Contest. ADA Times received the Bronze Award for Most Improved Magazine/Journal. The competition annually includes more than 400 entries from nonprofit associations.



Journal's Impact Increases

The Journal of the American Dietetic Association won the American Society of Healthcare Publication Editors 2008 Gold Award for Best Computer-Generated Cover for its November 2007 special issue on Hunger and Malnutrition. In addition, the 2007 Institute for Scientific Information's impact factor for nutrition and dietetics, an important assessment of the influence of a scientific publication, placed the Journal of the American Dietetic Association's I.F. at 3.011, up from 2.564 in 2006. That is nearly double the Journal's I.F. in 2002 and means ADA's Journal is now the 12th-most cited nutrition journal, compared to 13th last year and 21st five years ago.

Evidence-based Practice Guidelines

ADA's Evidence Analysis Library published first-of-their-kind evidence-based nutrition practice guidelines for registered dietitians on disorders of lipid metabolism, adult weight management, critical illness; pediatric weight management; diabetes; hypertension; heart failure; oncology; and chronic obstructive pulmonary disease. More than 26,000 ADA members have used the EAL from all 50 states and 171 countries and territories. Usage of the EAL has passed 4.5 million page views since the library was created in late 2004. More than 200,000 page views occurred in April.

Culture of Leadership

ADA is committed to building a "culture of leadership" among all members: to develop their capacity to lead in the Association, in their workplaces, in their careers and in the outside world. For the past five years, attending ADA's annual Leadership Institute has been a extraordinary experience for thousands of members, learning to become the types of leaders the Association needs now and in the future. The 2008 Leadership Institute was held in Henderson, Nev., and was attended by nearly 250 members.

ADA Corporate Relations Sponsors

ADA recognizes and thanks our corporate sponsors for their generous support of Association events and programs that occurred within ADA's Fiscal Year 2008.

ADA Partners

- ARAMARK
- The Coca-Cola Company
- GlaxoSmithKline Consumer Healthcare
- National Dairy Council
- PepsiCo
- Unilever

Premier Sponsors

- Abbott Nutrition
- CoroWiseTM brand
- General Mills
- Kellogg Company
- Mars, Incorporated
- McNeil Nutritionals, LLC

Event Sponsors

- American Beverage Association
- ConAgra Foods
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Operating Review

Setting ADA's Direction, Governing the Dietetics **Profession**

In advancing the profession of dietetics and leading the Association, ADA assigns distinct and coequal governance roles to the Board of Directors and the elected House of Delegates. Six House leaders serve on ADA's Board, directly connecting the professional issues of members to the interests of the entire Association.

Board of Directors

The Board is responsible for strategic planning, policy development and fiscal management for the Association. Seventeen national leaders served on ADA's Board of Directors from June 1, 2007, through May 31, 2008. Activities and accomplishments at the Board level in the past year include:

Strengthening Governance Performance

- Updated ADA's Strategic Plan based on contextual environment, trends and data.
- Evaluated and implemented, where appropriate, recommendations of Nominating Committee Governance and Structure Review Work Group.
- Implemented and monitored outcomes of Affiliate New Directions Task Force recommendations.
- Used and evaluated Certification Collaboration Guidelines.
- Enhanced and monitored relationship between ADA and educators.
- Collaborated with House of Delegates, Commission on Accreditation of Dietetics Education and Commission on Dietetic Registration in dietetics education and career laddering discussions.
- Collaborated with House on member dues deliberations.

Enhancing Public Policy and Advocacy Programs

- Strategically and actively addressed public policy at state and federal levels in priority areas.
- Supported activities that expand coverage of nutrition services.





Strengthening Member Focus through Association Programs and Services

- Oversaw annual integrated marketing plan and assessed outcomes for targeted groups.
- Actively embraced, supported and communicated transition to electronic health records/personal health records and applied science of informatics to dietetics.
- Evaluated resource distribution across areas of practice in relation to member value.
- Approved research priorities.
- Supported evidence-based initiatives that document value of registered dietitians.
- Supported work of ADA Foundation in promoting profession and members through scholarships, awards, research grants and programs addressing childhood obesity.

Providing an Effective Headquarters Operation

- Evaluated and identified market opportunities to ensure and grow revenue.
- Updated five-year membership and financial projections.
- Ensured fiscal and risk management.
- Monitored reserves and maintained appropriate reserve level.
- Continued implementation and expansion of current technology strategy and evaluated next-generation Association management systems and Web site.
- Monitored implementation of corporate relations sponsorship
- Continued evaluation of services and programs.

House of Delegates

As the deliberative body serving as the voice of all ADA members, the House monitors and evaluates trends, issues and concerns affecting RD and DTR members; debates and approves educational, practice and professional standards; establishes ethical standards for the practitioner and disciplinary procedures for unethical conduct; and identifies and initiates development of ADA position papers. During the past year, the ADA House of Delegates made significant strides, including:

- During the Fall 2007 HOD Meeting, a dialogue was conducted to explore the issue of health disparities. The outcome of the session was the establishment of an HOD Leadership Team Work Group to develop a toolkit of strategies and messages addressing identified barriers related to health disparities. The Workgroup established the Health Disparities Central Depository, located at www.eatright.org/cps/rde/xchg/ada/hs.xsl/governance_16277_ENU_HTML.htm. The Depository will assist members to develop personal plans that will enhance awareness and lead to action to eliminate health disparities.
- ADA organizational units have begun work on a variety of projects to assist members in addressing health disparities, including: 1) development of an Ethics Opinion by the Ethics Committee; 2) development of a proposed position concept for consideration by the Association Positions Committee; 3) establishment of a work group to conduct an analysis of the literature by the Evidence-based Practice Committee; and 4) investigation of a community service award for RDs and DTRs by the Honors Committee.



- Also during the Fall 2007 meeting, a dialogue session was conducted on the issue of membership dues process. The House approved a process for use by the ADA Board of Directors to increase the dues for the Active member category that is indexed to inflation and cannot exceed 3 percent per year. Dues for other member categories can be increased proportionately if deemed necessary by the Board. This dues increase process will be re-evaluated by the House of Delegates no later than 2013.
- The House conducted a town hall meeting during the Fall 2007 meeting to provide input on the Phase 2 Future Practice & Education Task Force draft report. Based on input provided, the Task Force finalized its report and recommendations for release in March 2008. During the Spring 2008 meeting, HOD discussed the final report and recommendations. HOD approved the final report and recommendations on May 30,

- 2008. The final report and recommendations can be accessed at www.eatright.org/ada/files/Final_Task_Force_Report_July_15_08_FINAL.pdf.
- A dialogue was conducted at the Spring 2008 meeting on "The Changing U.S. Family and the Practice of Dietetics." As a result of this dialogue, the following actions were approved:

 Professional Issues Delegates and dietetic practice groups will collaborate to develop plans to assist ADA members in addressing the changing family structure and eating patterns to improve health;
 PIDs and DPGs will submit an initial report to the House in May 2009 outlining current and future projects that will assist members in all areas of practice to address the issue.
- The environmental scan conducted by HOD in 2006 was published in the July 2007 *Journal of the American Dietetic Association*. "The Profession of Dietetics at a Critical Juncture: A Report on the 2006 Environmental Scan for the American Dietetic Association" can be accessed at www. eatright.org/ada/files/08Scan.pdf.
- Standards of Practice (SOP) in Nutrition Care for the RD and DTR and Standards of Professional Performance (SOPP) for the RD and DTR was approved by the House of Delegates in April 2008. It is available at www.eatright.org/cps/rde/xchg/ada/hs.xsl/advocacy_13731_ENU_HTML.htm. Delegate training was provided during the Spring 2008 HOD Meeting to assist members in understanding and implementing the new SOP/SOPP. The training materials can be accessed at www.eatright.org/cps/rde/xchg/ada/hs.xsl/home_17156_ENU_HTML.htm.
- The Emergency Preparedness Task Force published its final report and resources for member use in May 2008. Emergency Preparedness resources can be found at www.eatright.org/cps/rde/xchg/ada/hs.xsl/nutrition 17403 ENU HTML.htm.

ADA Positions

The results of carefully considered deliberations by leading authorities as well as ADA's House of Delegates, ADA Position Papers represent the Association's stance on important issues in food, nutrition and health that affect the public. During FY 2008, ADA published the following Position Papers:

- Food and Nutrition Professionals Can Implement Practices to Conserve Natural Resources and Support Ecological Sustainability (June 2007)
- Total Diet Approach to Communicating Diet and Nutrition Information (July 2007)
- Oral Health and Nutrition (August 2007)
- Dietary Fatty Acids (September 2007)
- Nutrition and Lifestyle for a Healthy Pregnancy Outcome (March 2008)
- Ethical and Legal Issues in Nutrition, Hydration and Feeding (May 2008).

American Dietetic Association Foundation

As the philanthropic arm of the American Dietetic Association, the Foundation funds the future of the dietetics profession through research and education. The ADA Foundation is the only 501(c)3 organization devoted exclusively to nutrition and dietetics.

Research

The ADA Foundation continued to raise money for the first-ofits-kind Food and Nutrition Research Endowment. Funds from this endowment keep registered dietitians at the forefront of research and position them as the unbiased source of scientific food and nutrition information. More than \$1.4 million has been raised through the support of ADA members who have joined the 21st Century Club (\$2,100 pledge), Evergreen Society (\$4,200 pledge) and those who have given at levels up to \$100,000. ADAF awarded its first \$35,000 grant from this research endowment to Karen Chapman-Novakofski, PhD, RD, of the University of Illinois, for her project "HOT: Healthy Outcomes for Teens," which offers innovative, interactive, youth-participatory treatment for adolescents at risk for type 2 diabetes.

The Foundation also supported ADA's Evidence Analysis Library, having provided the seed money to launch the initiative as well as subsequent support for additional research and staffing. ADA's Dietetics Practice Based Research Network is partially funded through the Foundation. A recent International Diabetes Outcomes Study led by ADA's Director of Research and Scientific Affairs was supported by a grant from ADAF. More than \$60,000 in research grants are available annually through named research funds.

Scholarship and Awards

The ADA Foundation continued in its role as the largest provider of scholarships and awards to the dietetics profession. In the past year, nearly \$280,000 was given to 221 students at all levels of study. More than \$150,000 for continuing education stipends, research grants and recognition awards is made available annually for dietetics professionals.



Public Awareness

The ADA Foundation continued to promote Healthy Weight for Kids and their families by supporting initiatives that make available the knowledge and expertise of registered dietitians and ADA members in addressing childhood obesity.

In 2008, the ADA Foundation and General Mills Foundation celebrated six years of funding the Champions for Healthy Kids program, which makes available



\$500,000 annually to support innovative projects or programs that promote healthy lifestyles for children and their families through better nutrition and increased physical activity. Each program is required to have a registered dietitian as part of the project team. ADAF members serve on the review and selection committee that evaluate more than 1,200 applications each year. Fifty grantees are selected each year. To date, 300 projects have received funding totaling \$3 million.

Healthy Schools Partnership

Thanks to funding from the Grocery Manufacturers Association's partner companies through the American Council for Fitness and Nutrition, the ADA Foundation successfully launched a model nutrition education program to promote healthy eating and increase physical activity in schools. The pilot project implements a crossdiscipline "energy balance" approach focusing both on energy intake and expenditure. Physical education teachers and registered dietitians who are ADA members worked to motivate students nine inner-city Kansas City schools to be more active and eat a balanced, more nutritious diet. The program is being taught by a team of registered dietitians under the leadership of head coach Katie Brown, EdD, RD, LD. Coaches for 2007-08 were Julie A. Barry, RD; Sarah L. Chellberg, RD; Kudakwashe M. Chimanya, MS, RD, LD; Melody A. Cole, RD; Jennifer B. Egeland, RD, LD; Tammi M. Linnebur, RD; Lisa M. Medrow, RD; Lorraine K. Oberholtzer, RD; Gayle Price, MS, RD, LD; Shea N. Saunders, RD; and Shelli Summar, MSEd, RD, LD. Thanks as well to Alison Kretser, MS, RD, executive director of ACFN. An evaluation team at the University of California – Berkeley, led by Patricia B. Crawford, PhD, RD, and Dana E. Gerstein, MPH, RD, is working with coaches to conduct an assessment that will document the effects of the program. Lessons learned from this pilot will allow a blueprint to be created for student health and wellness that could be replicated in schools across the country.



ADA Foundation Donors

The ADA Foundation thanks donors who made gifts of \$10,000 or more to support research, education and public awareness initiatives:

- Abbott Nutrition
- Almond Board of California
- Estate of Martha J. Alva
- American Council for Fitness and Nutrition
- ARAMARK
- Frances G. Ballentine
- The Beef Checkoff through the National Cattlemen's Beef Association
- The Coca-Cola Company
- Colgate Palmolive
- Consultant Dietitians in Health Care Facilities DPG
- CorowiseTM brand
- Dietitians in Nutrition Support DPG
- Ecolab Inc.
- Ensure
- General Mills
- GlaxoSmithKline Consumer Healthcare
- Jean H. Hankin
- Virginia F. Harger
- Diane W. Heller
- Kellogg Company
- · Kraft Foods
- Estate of Lorraine Love
- Mars, Incorporated
- McNeil Nutritionals, LLC
- Mead Johnson Nutritionals
- Estate of Marie Miske
- National Dairy Council
- PepsiCo
- Estate of Joan C. Sharp
- Unilever
- Washington State Dietetic Association
- Alice A. Wimpfheimer

Commission on Dietetic Registration

The Commission on Dietetic Registration remained committed to its public protection mission by attesting to the professional competence of more than 75,000 registered dietitians and more than 4,000 dietetic technicians, registered who have met CDR standards to enter and continue in dietetics practice.

CDR's entry-level registration examinations are accredited by the National Commission for Certifying Agencies. CDR provides credentialed practitioners with the tools to maintain and continue to advance their professional knowledge and skills. CDR administers seven separate and distinct credentialing programs: Registered Dietitian; Dietetic Technician, Registered; Board Certified Specialist in Renal Nutrition; Board Certified Specialist in Pediatric Nutrition; Board Certified Specialist in Sports Dietetics; Board Certified Specialist in Gerontological Nutrition and Board Certified Specialist in Oncology Nutrition. There are currently 1,336 Board Certified Specialists. In addition to administering examinations and recertification for these programs, the Commission on Dietetic Registration:

- Administers a prior approval process for continuing professional education program providers. More than 4,000 programs were reviewed and approved in 2007–2008.
- Administers a program provider accreditation process for continuing professional education program providers. There are currently 163 accredited providers.
- Administers the online Assess and Learn courses *Managing Type 2 Diabetes Using the Nutrition Care Process* and *Sports Dietetics: Nutrition for Athletic Performance.*
- Administers an online dietetics preceptor training course.
- Administers registration eligibility reciprocity agreements with Canada, Ireland, the Netherlands, United Kingdom and the Philippines.
- Maintains a searchable continuing professional education database of more than 35,000 programs.
- Administers licensure board services including use of CDR's entry-level registration examinations for licensure purposes and continuing professional education tracking for licensed non-registered dietitians.
- Administers certificates of training in childhood and adult weight management. Since implementation in April 2001, more than 9,000 members and credentialed practitioners have participated in these programs.

Commission on Accreditation for Dietetics Education

The Commission on Accreditation for Dietetics Education serves the American public and ADA members by working with dietetics practitioners, educators and others to develop and implement standards for the educational preparation of dietetics professionals and by recognizing dietetics education programs at colleges, universities and other organizations that meet its standards.

CADE continued to maintain the currency of educational standards and to match educational competencies to expectations for future practice by revising and approving new eligibility requirements and accreditation standards. The 2008 ERAS became available for voluntary use after March 2008 and will become mandatory, except for program-director requirements, on March 1, 2009.

From the broader framework of maintaining quality standards and a rigorous accreditation process required by the U.S. Department of Education and Council for Higher Education Accreditation, the CADE board established a new fee schedule to gradually increase CADE's financial self reliance and decrease dependence on ADA to fund accreditation functions.

CADE's scope of accreditation includes baccalaureate- and graduate-level dietetics programs, post-baccalaureate dietetic internships and associate degree dietetic technician programs. During the past year, there were almost 600 such accredited or approved programs. While the overall number of accredited/ approved programs remains relatively constant as new programs open and others combine or close each year, the total number of students enrolled in all programs increased nearly 8 percent to more than 20,000 students. Interest in the U.S. model of quality assurance and program evaluation continued to grow as reflected by a CADE site visit to a second international coordinated dietetics program and by additional requests for information about CADE review and recognition from non-U.S.-based dietetics programs.





Affiliate Dietetic Associations

All ADA members receive automatic membership in the affiliate dietetic association of their choice, making affiliates a powerful benefit of ADA membership. There are 50 state dietetic associations, plus the District of Columbia, Puerto Rico and the American Overseas Dietetic Association, all affiliated with ADA. Affiliates enable members to build lasting collaborations and relationships close to home.

Dietetic Practice Groups

ADA is committed to keeping members abreast of trends in food and nutrition and preparing members for the requirements of an ever-changing profession and marketplace. ADA's 29 dietetic practice groups create opportunities for members to excel and grow through professional development, networking opportunities, leadership development and specialization. In Fiscal Year 2008, membership in DPGs exceeded 58,000, reflecting continued growth over the last several years.

Member Interest Groups

Member interest groups provide a means for ADA members with common interests, issues or backgrounds to connect. Unlike dietetic practice groups and affiliate associations, MIGs focus on areas other than practice or geographic location. The concept of member interest groups was approved by ADA's Board of Directors in 2005. In FY 2008, two new MIGs were approved: Chinese Americans in Dietetics and Nutrition (CADN) and the National Organization of Men in Nutrition (NOMIN). ADA's third MIG is Latinos and Hispanics in Dietetics and Nutrition (LAHIDAN).

ADA Financial Statements

Consolidated Financial Statements

The Consolidated ADA, which includes the Commission on Dietetic Registration, Commission on Accreditation for Dietetics Education, Dietetic Practice Groups, Member Interest Groups, ADA Foundation and the Association, ended the 2008 Fiscal Year with a surplus of over \$2 million. This represented the sixth consecutive surplus for the Consolidated ADA. Success was reflected across all organizations with combined revenues exceeding budgeted expectations by more than 4 percent and growing 16 percent from FY 2007. Expenses were also held in check with nearly \$1.1 million in savings from original FY 2008 budgets.

The ADA Foundation had another successful year with a surplus of nearly \$836,000. This was a result of bequeaths, generous member and corporate contributions and a focus on holding down expenses. At the end of FY 2008, the Foundation reserves were at record levels with nearly \$12.4 million in assets. This will allow the ADA Foundation to invest in scholarships, awards and research to support the dietetics profession.

The Commission on Dietetic Registration, Commission on Accreditation for Dietetics Education, Dietetic Practice Groups and Member Interest Groups

all continued their financial success by performing better than their FY 2008 budgets.

The Association had another strong year with a surplus of \$355,000, driven by strong growth in membership, growth in non-dues revenues and working to maintain strong fiscal controls.

The Association's 2009 Fiscal Year budget will continue ADA's focus on increasing non-dues revenues and maintaining strong fiscal controls. In addition, ADA's Board of Directors is continuing to invest in the future of ADA members and the profession. All these efforts will allow ADA to achieve more success in meeting and exceeding members' needs in empowering them to be the nation's food and nutrition leaders.

Recent investment and economic declines are a continuing concern for FY 2009. Through October 2008, the Consolidated ADA continues to be in a strong financial position. ADA's portfolios have decreased, but not by as much as the current markets. However, ADA leaders and staff will continue to evaluate operations to ensure all organizations within ADA are positioned to handle any prolonged economic downturn.

American Dietetic Association Statement of Financial Position (Excluding ADA Foundation) At May 31,

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Inventories 794,176 513,101 Interorganizational balances 198,128 (191,817) 38,931,951 37,814,107 38,931,951 37,814,107 2,223,450 2,488,437 2,4042 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$41,163,684 \$40,326,586 \$40,000			
Interorganizational balances (198,128) (191,817) (198,107)	* *		
Property and equipment, net 2,223,450 2,488,437 2,223,450 2,488,437 2,223,450 3,40,242 3,41,163,684 3,26,586 3,24,042 3,41,163,684 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042 3,26,586 3,24,042			
Property and equipment, net Other assets 2,223,450 (8,283) 2,488,437 (24,042) Liabilities and net assets Liabilities and net assets Liabilities 1,726,688 (8,283) \$2,111,809 (8,283) Accounts payable Accrued liabilities \$1,726,688 (9,20,373) \$2,085,115 (1,597,373) Due to state associations \$2,085,115 (1,971,485) \$1,971,485 (1,971,485) Deferred revenue \$1,525,354 (1,390,097) \$2,315,871 (1,390,097) Annual meeting \$1,183,191 (1,213,802) Other \$2,652,452 (2,834,237) Deferred compensation \$49,137 (987,644) Deferred rent liability \$3,772,676 (4,018,778) Hotel assets Unrestricted Association operations \$4,334,172 (4,069,687) Commission on Dietetic Registration 7,709,697 (6,755,356) Dietetic Practice Groups 4,186,258 (4,168,119) 16,230,127 (14,993,162)	interorganizational balances	(198,128)	
Other assets 8,283 24,042 \$41,163,684 \$40,326,586 Liabilities and net assets Liabilities \$1,726,688 \$2,111,809 Accounts payable \$1,558,291 1,569,373 Due to state associations 2,085,115 1,971,485 Due to state associations 5,370,094 5,652,667 Deferred revenue 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 Verturestricted 4,621,813 5,006,422 24,933,557 25,333,424 Vurrestricted 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119			
Liabilities and net assets Liabilities \$41,163,684 \$40,326,586 Liabilities \$1,726,688 \$2,111,809 Accounts payable \$1,558,291 1,569,373 Due to state associations \$2,085,115 1,971,485 Deferred revenue \$5,370,094 \$652,667 Deferred revenue \$7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119			, ,
Liabilities and net assets Liabilities \$ 1,726,688 \$ 2,111,809 Accrued liabilities 1,558,291 1,569,373 Due to state associations 2,085,115 1,971,485 Deferred revenue 5,370,094 5,652,667 Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Other assets	8,283	24,042
Clabilities		\$41,163,684	\$40,326,586
Accounts payable \$ 1,726,688 \$ 2,111,809 Accrued liabilities 1,558,291 1,569,373 Due to state associations 2,085,115 1,971,485 5,370,094 5,652,667 Deferred revenue *** *** Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 Met assets 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162			
Accrued liabilities 1,558,291 1,569,373 Due to state associations 2,085,115 1,971,485 5,370,094 5,652,667 Deferred revenue 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 Vet assets Unrestricted 4,621,813 5,006,422 Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162			
Due to state associations 2,085,115 1,971,485 5,370,094 5,652,667 Deferred revenue *** Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	* *		
Deferred revenue S,370,094 5,652,667 Deferred revenue Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 Deferred rent liability 3,772,676 4,018,778 Vertical assets Unrestricted 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162			
Deferred revenue Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237	Due to state associations	2,085,115	1,971,485
Membership dues 7,189,288 6,920,328 Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		5,370,094	5,652,667
Registration fees 2,391,365 2,315,871 Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 14,941,650 14,674,335 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Deferred revenue		
Subscriptions 1,525,354 1,390,097 Annual meeting 1,183,191 1,213,802 Other 2,652,452 2,834,237 14,941,650 14,674,335 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Membership dues	7,189,288	6,920,328
Annual meeting Other 1,183,191 2,213,802 2,834,237 Other 2,652,452 2,834,237 14,941,650 14,674,335 14,941,650 14,674,335 Deferred compensation Deferred rent liability 849,137 987,644 987,644 987,646 Deferred rent liability 3,772,676 4,018,778 987,644 987,772,676 97 987,644 987,772,676 987,77	Registration fees	2,391,365	2,315,871
Other 2,652,452 2,834,237 14,941,650 14,674,335 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		1,525,354	1,390,097
14,941,650 14,674,335 Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Annual meeting		1,213,802
Deferred compensation 849,137 987,644 Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Other	2,652,452	2,834,237
Deferred rent liability 3,772,676 4,018,778 4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		14,941,650	14,674,335
4,621,813 5,006,422 24,933,557 25,333,424 Net assets Unrestricted	Deferred compensation	849,137	987,644
Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Deferred rent liability	3,772,676	4,018,778
Net assets Unrestricted Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		4,621,813	5,006,422
Unrestricted 4,334,172 4,069,687 Association operations 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		24,933,557	25,333,424
Association operations 4,334,172 4,069,687 Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Net assets		
Commission on Dietetic Registration 7,709,697 6,755,356 Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162	Unrestricted		
Dietetic Practice Groups 4,186,258 4,168,119 16,230,127 14,993,162		, ,	
16,230,127 14,993,162			
	Dietetic Practice Groups	4,186,258	4,168,119
\$41,163,684 \$40,326,586		16,230,127	14,993,162
		\$41,163,684	\$40,326,586

American Dietetic Association, Statement of Activities Year Ended May 31, 2008

Revenues Membership dues – net Registration and examination fees Programs and meetings Publications and materials Subscriptions Advertising Sponsorships Grants	\$8,931,135 4,126,659 4,049,838 922,769 123,000 1,888,275 308,355	Commission on Dietetic Registration \$ - 4,976,757 - 155,065 - 62,250	Dietetic Practice Groups \$1,772,319 438,648 109,405 1,269 51,875 753,211 321,996	Commission on Accreditation for Dietetics Education (CADE) \$ 22,990 520	Total \$ 10,703,454 4,976,757 4,588,297 4,314,828 924,038 174,875 2,703,736 630,351
Education program	- 1 205 461	604,523	-	910,672	1,515,195
Other	1,295,461	2,634	40,175	-	1,338,270
	21,645,492	5,801,229	3,488,898	934,182	31,869,801
Evenence					
Expenses Personnel	10,474,826	1,117,440		602,222	12,194,488
Publications	1,952,131	27,021	24,002	60	2,003,214
Travel	1,309,220	375,528	792,069	230,749	2,707,566
Professional fees	1,461,251	454,141	567,584	22,198	2,505,174
Postage and mailing service	635,852	271,748	246,525	6,604	1,160,729
Office supplies and equipment	201,671	57,393	21,782	1,761	282,607
Rent and utilities	1,108,971	105,641	850	82,800	1,298,262
Telephone and communications	244,008	40,033	33,979	11,905	329,925
Commissions		-	24,000	-	24,000
Computer expenses	273,108	-	-	-	273,108
Advertising and promotion	223,635	10,547	17,378	-	251,560
Insurance	127,536	89,923	-	14,022	231,481
Depreciation and amortization	865,120	140,838	-	14,532	1,020,490
Income taxes	15	-	-	-	15
Other	555,683	754,407	316,107	14,564	1,640,761
Donations to the Foundation	_	-	109,601	-	109,601
Examination administration	-	820,916	-	-	820,916
Meeting services	1,760,012	411,716	960,921	16,494	3,149,143
Legal and audit	151,873	-	-	-	151,873
Printing	389,292	342,939	472,426	7,026	1,211,683
	21,734,204	5,020,231	3,587,224	1,024,937	31,366,596
Increase (decrease) in net assets					
from operating activities	(88,712)	780,998	(98,326)	(90,755)	503,205
Toyreston out materia					
Investment returns Designated for current operations	1 026 400		20.071		1 065 471
Balance in excess of amount designated	1,026,400	-	39,071	-	1,065,471
for current operations	(582,448)	173.343	77,394		(331,712)
-			·		
Net investment returns	443,952	173,343	116,465	-	733,760
Increase (decrease) in net assets					
before other items	355,240	954,341	18,139	(90,755)	1 226 065
Other items—transfers	(90,755)	934,341	10,139	90,755	1,236,965
				90,733	
Increase (decrease) in net assets	264,485	954,341	18,439	-	1,236,965
Net assets Beginning of year	4.060.607	6755056	4 160 110		14 002 162
	4,069,687	6,755,356	4,168,119	-	14,993,162
End of year	\$ 4,334,172	\$7,709,697	\$4,186,258	\$ -	\$16,230,127

ADAF Financial Statements

American Dietetic Association Foundation Statement of Financial Position At May 31,

	2008	2007
Assets		
Cash and cash equivalents	\$ 473,511	\$ 350,391
Investments	11,242,941	10,627,291
Interest receivable	57,517	62,723
Accounts receivable	430,577	260,756
Prepaid expenses	2,169	847
Interorganizational balances	198,128	191,817
	12,404,843	11,493,825
Property and equipment, net	6,413	19,240
Other assets	62,302	61,975
	\$12,473,558	\$11,575,040
Liabilities and net assets Liabilities		
Accrued liabilities	\$ 43,550	\$ 19,617
Deferred revenue (annual meeting)	65,000	26,250
	108,550	45,867
Net assets		
Unrestricted	2,601,130	2,582,206
Temporarily restricted	3,707,924	3,637,359
Permanently restricted	6,055,954	5,309,608
	12,365,008	11,529,173
	\$12,473,558	\$11,575,040

American Dietetic Association Foundation, Statement of Activities Year Ended May 31, 2008

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Revenues				
Publications and materials	\$ 90	\$ -	\$ -	\$ 90
Member contributions	245,480	301,608	469,321	1,016,409
Corporate contributions	176,991	578,748	277,025	1,032,764
Sponsorships	157,900	91,500	-	249,400
Grants	50	-	-	50
Other revenue	429	-	-	429
Release from restrictions	1,165,939	(1,165,939)	-	
Total ADAF revenues	1,746,879	(194,083)	746,346	2,299,142
Expenses				
Personnel	477,107	-	-	477,107
Publications	33	-	-	33
Travel	87,610	-	-	87,610
Professional fees	384,194	-	-	384,194
Postage and mailing service	13,817	-	-	13,817
Office supplies and equipment	3,870	-	-	3,870
Rent and utilities	74,618	-	-	74,618
Telephone and communications	12,684	-	-	12,684
Insurance	14,091	-	-	14,091
Depreciation	12,827	-	-	12,827
Other	165,059	-	-	165,059
Meeting services	124,116	-	-	124,116
Printing	39,916	-	-	39,916
Scholarship and awards	413,997	-	-	413,997
Total ADAF expenses	1,823,939	-	-	1,823,939
Increase (decrease) in net assets				
from operating activities	(77,060)	(194,083)	746,346	475,203
Investment returns				
Designated for current operations	184,262	638,438	-	822,700
Balance in excess of amount designated for current operations	(88,278)	(373,790)	_	(462,068)
Net investment returns	95,984	264,648		360,632
- The threstment returns	75,764	204,040		300,032
Increase (decrease) in net assets	18,924	70,565	746,346	835,835
Net assets				
Beginning of year	2,582,206	3,637,359	5,309,608	11,529,173
End of year	\$2,601,130	\$3,707,924	\$6,055,954	\$12,365,008