Grassroots advocacy—as the term implies—is a form of advocacy that grows organically and, quite often, spontaneously at the local or regional level. As the leading food and nutrition experts, registered dietitians (RDs) are in a unique position to shape public policy, particularly at the ground level, by participating in a full spectrum of advocacy activities.

“To advance our profession, advocacy needs to be a natural part of our life and work,” noted Judith C. Rodriguez, PhD, RD, FADA, LDN, American Dietetic Association (ADA) president (1). Perhaps one of the best examples of an RD advancing the profession in this manner is Nancy Becker, MS, RD, LD, a member of the board of directors of ADA’s Political Action Committee (ADAPAC) and chair of the Oregon Nutrition Policy Alliance—the group that helped drive legislation to set nutrition standards for snack foods in Oregon schools in 2007, and in 2009 advocated successfully for the passage of Oregon’s HB 2726, Stateside Menu Labeling in Chain Restaurants (2).

“Without RDs working on menu labeling locally this never would have happened on a federal level,” says Becker. “It is my understanding that the National Restaurant Association (NRA) did not like the idea that there was going to be a patchwork of some 50 different bills due to the fact that so many states and local entities had passed a menu-labeling law. The NRA was convinced that it would be in their best interest to have a federal bill, one uniform rule for the whole country. Again, this would not have happened if it weren’t for activists, including RDs, working on this issue at a grassroots level.”

GETTING STARTED
To be an effective grassroots advocate requires the same skills that RDs already use in their professional lives, according to Becker. “You need to be able to build strong relationships and trust with policymakers until you gain credibility. And you need good follow-through, a sense of integrity, and the ability to work with others. We say policy change is a team sport, and RDs new to an issue need to find where their team is. There are so many health policy groups that are out there and they are in need of RDs and the kind of information only we can offer as the food and nutrition experts.”

No special training is necessarily required to support a grassroots cause or issue, according to Becker, who says one of the best things about the menu-labeling initiative in Oregon was that they had a lot of different RDs supporting the project, including interns. “You don’t need any special training to do what we did, but you do need to have an understanding about how policy is made and you need to be willing to look and think outside the box—and be willing to work long hours.”

“I will tell you that for a 70,000-member organization, I am going to estimate that maybe 10% are engaged in public policy, which is not a lot, but I think we are making progress as more of our members engage in advocacy efforts,” says Sister Ladonna Woerdeman, MS, RD, LD, CDE, Chair of the Legislative and Public Policy Committee (LPPC).

And while RDs can advocate for nutrition policy changes as individuals on issues that are meaningful to them, it is important to note that they cannot represent their affiliate or ADA. The affiliates look to ADA for guidance on messaging and whether there is a stance or position on a specific topic. Each affiliate has a public policy panel including a coordinator for federal legislation, a State Policy Representative that monitors state legislation, and a State Regulatory Specialist that monitors the rule-making process in each state. Each affiliate also has a written plan each year to guide its state legislative and regulatory efforts. In the absence of a stance or position, RDs are still the nutrition experts and ADA encourages them to get involved and use science-based evidence to help shape policy.
GRASSTOPS AND GRASSROOTS
Policy change typically bubbles up as a result of local level efforts, but if you really want to help influence policy, Becker advises working both with “grasstops” (or lawmakers) and grassroots groups.

“I will call a legislator’s local office and I will see when he or she is going to be in the area and I try to attend their town hall meetings,” says Sister Woerdeman. “Or I will contact the scheduler in the legislator’s Washington, DC, office to learn what events are on their schedule, and when they are home in their state. They all come home. Take advantage of this face-to-face opportunity.” As for RDs who are hesitant about engaging with legislators, Sister Woerdeman admits she was uncomfortable at first, interacting with policymakers in this arena.

“Remember, legislators are common and ordinary people. If you’re at a town hall meeting, go up and shake hands with them. It’s a good idea to be familiar with any piece of legislation that he or she has worked on in the past that relates to your cause, whether it be menu-labeling or childhood obesity or nutrition for the elderly. Introduce yourself, thank them for the support on your issue, and ask them if they will continue to support new public policy that is coming down the pipeline.”

“Have no fear,” advises Becker. “Yes, it can be slightly intimidating [to engage with legislators] at first, but think about it this way: We, as RDs, are coming from a position of strength, because everyone is interested in food, and legislators love to see passion in their constituents. Nobody knows more about nutrition than we do!”

“The first thing to remember is to let them do the talking,” adds Becker. “What I mean by that is, introduce yourself and let them know you are an RD and that you love to talk about nutrition topics, and then say, ‘What do you think about this or that? What do you think about nutrition care for the elderly or what do you think about junk food in the schools? Typically, policymakers like to talk and they have opinions, so first, listen to them, and with any luck you will get to say something.”

“It is very important to listen and pay attention,” agrees Sister Woerdeman. “There is an educational exchange happening on both sides, for the RD and for the legislator. And of course, legislators don’t want children to go hungry or to be obese, but the legislator may ask ‘How are we going to pay for this?’ The RD has to show them that whatever they are championing will be cost-effective, and that it would be much more expensive for a child to spend the night in the hospital if they get diabetes, for example. You have to help them see that in the long-run it is more cost-effective to fund RDs and to pay for prevention.”

“It’s kind of like a first date,” observes Becker. “You want to warm them up, and flatter them, but you especially want to show them you have a great understanding of the issues and that you been following [the legislator] for years. What you might find amusing is the fact that you will likely hear what the legislator had last night for dinner, or about their TOPICS OF PROFESSIONAL INTEREST

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bowel movements. It can be funny, but all you need to remember to do is to smile and nod. As I said, people love to talk about food and we can use that to our advantage in grassroots advocacy initiatives,” says Becker.

And here’s another tip to solidify relationships with policymakers—simply show up. “This past election we had a tight governor’s race, and some women legislators sent out an e-mail asking for people to help work the phones and remind them to vote,” says Becker. “I did this, and that’s because I wanted some of these local legislators, who are potential nutrition champions, to see me working hard to elect the next governor. So I put in my hours on the phone. The world belongs to those who show up, and that is an enormous lesson for RDs.”

KIDS EAT RIGHT

RDs looking for an opportunity to take a local, grassroots approach to curb the obesity epidemic in the United States—the health care issue that inspired Becker’s menu-labeling initiative in Oregon—will want to get involved in the Kids Eat Right campaign. Launched in November 2010 in response to the need for a coordinated effort to fight obesity, the campaign promotes healthy eating and preventing childhood obesity by enlisting RDs in public education projects and other programs. The campaign, informed in part by the results of the ADA Foundation’s 2010 Family Nutrition and Physical Activity Survey, features an interactive Web site, www.kidsseatright.org, which offers consumers practical tips, articles, videos, and recipes. “Kids Eat Right mobilizes and streamlines existing work by RDs . . . allowing for a coordinated grassroots effort to promote healthy eating and prevent childhood obesity nationwide,” says Katie Brown, RD, national education director for ADA Foundation.*

ADVOCACY IN ACTION

The ADA provides members with a variety of resources for becoming an effective advocate and to learn how to influence policy on a local, state, regional, and national level. In addition to the annual Public Policy Workshop, which took place this February, the ADA offers a variety of print and Web-based tools that enhance advocacy skills and educate RDs on everything from a representative’s position on an issue, to how to organize a fundraiser, to updates on nutrition education and coding regulations. One of ADA’s most popular public policy tools is the Grassroots Manager, which offers a direct link to legislators and gives members the ability to contact lawmakers via an e-mail, letter, fax, or telephone call. Members can also look for opportunities to advance their policy and advocacy skills at FNCE, affiliate trainings, or by volunteering for leadership positions in their states.

In Becker’s experience, participation in the ADA is key to achieving a grassroots-born goal. She suggests RDs become active members in their dietician practice groups, and she stresses the importance of learning who is on the LPPC and Board of Directors (BOD), and seeking out delegates and establishing a rapport with them.


References