

## Nutrition Monitoring in den USA

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(1)– Gesetzliche Grundlagen bzw. Basispapiere für Grundlagen der Ernährungsberichterstattung

[NATIONAL NUTRITION MONITORING AND RELATED RESEARCH ACT OF 1990...](#)  
OCTOBER 22, 1990 To strengthen **national nutrition monitoring** by requiring the Secretary of Agriculture... <http://www.reeusda.gov/1700/legis/nutmontr.htm>

# NATIONAL NUTRITION MONITORING AND RELATED RESEARCH ACT OF 1990

PUBLIC LAW 101-445

OCTOBER 22, 1990

To strengthen national nutrition monitoring by requiring the Secretary of Agriculture and the Secretary of Health and Human Services to prepare and implement a ten-year plan to assess the dietary and nutritional status of the United States population, to support research on, and development of, nutrition monitoring, to foster national nutrition education, to establish dietary guidelines, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

## SECTION 1. <sup>(1)</sup> SHORT TITLE.

This Act may be cited as the "National Nutrition Monitoring and Related Research Act of 1990".

## SEC. 2. <sup>(2)</sup> PURPOSES.

The purposes of this Act are to--

- (1) make more effective use of Federal and State expenditures for nutrition monitoring, and enhance the performance and benefits of current Federal nutrition monitoring and related research activities;
- (2) establish and facilitate the timely implementation of a coordinated National Nutrition Monitoring and Related Research Program, and thereby provide a scientific basis for the maintenance and improvement of the nutritional status of the people of the United States and the nutritional quality (including, but not limited to, nutritive and nonnutritive content) of food consumed in the United States;
- (3) establish and implement a comprehensive plan for the National Nutrition Monitoring and Related Research Program to assess, on a continuing basis, the dietary and nutritional status of the people of the United States and the trends with respect to

such status, the state of the art with respect to nutrition monitoring and related research, future monitoring and related research priorities, and the relevant policy implications;

(4) establish and improve the quality of national nutritional and health status data and related data bases and networks, and stimulate research necessary to develop uniform indicators, standards, methodologies, technologies, and procedures for nutrition monitoring;

(5) establish a central Federal focus for the coordination, management, and direction of Federal nutrition monitoring activities;

(6) establish mechanisms for addressing the nutrition monitoring needs of Federal, State, and local governments, the private sector, scientific and engineering communities, health care professionals, and the public in support of the foregoing purposes; and

(7) provide for the conduct of such scientific research and development as may be necessary or appropriate in support of such purposes.

### **SEC. 3. (3) DEFINITIONS.**

As used in this Act--

(1) the term "comprehensive plan" means the comprehensive plan prepared under section 103;

(2) the term "coordinated program" means the National Nutrition Monitoring and Related Research Program established by section 101(a);

(3) the terms "Interagency Board for Nutrition Monitoring and Related Research" and "Board" mean the Federal coordinated body established by section 101(c);

(4) the term "Joint Implementation Plan for a Comprehensive National Nutrition Monitoring System" means the plan of that title dated August 18, 1981 and submitted by the Department of Agriculture and the Department of Health and Human Services under section 1428 of the Food and Agriculture Act of 1977 (7 U.S.C. 3178);

(5) the term "local government" means a local general unit of government or local educational unit;

(6) the terms "National Nutrition Monitoring Advisory Council" and "Council" mean the advisory body established under section 201;

(7) the term "nutrition monitoring and related research" means the set of activities necessary to provide timely information about the role and status of factors that bear on the contribution that nutrition makes to the health of the people of the United States, including--

(A) dietary, nutritional, and health status measurements;

(B) food consumption measurements;

(C) food composition measurements and nutrient data banks;

(D) dietary knowledge and attitude measurements; and

- (E) food supply and demand determination;
- (8) the term "nutritional quality" means--
  - (A) the appropriate levels of individual nutrients in the diet;
  - (B) the appropriate levels between nutrients in the diet;
  - (C) the bioavailability of nutrients such as absorption, digestion, and utilization; and
  - (D) the nutritional importance of nonnutrient substances such as fiber, phytate, and such substances that are naturally found in the food supply; and
- (9) the term "Secretaries" means the Secretary of Agriculture and the Secretary of Health and Human Services, acting jointly.

## **TITLE I--NUTRITION MONITORING AND RELATED RESEARCH**

### **SEC. 101.<sup>(4)</sup> ESTABLISHMENT OF THE COORDINATED PROGRAM.**

- (a) IN GENERAL.--There is established a ten-year coordinated program, to be known as the National Nutrition Monitoring and Related Research Program, to carry out the purposes of this Act.
- (b) IMPLEMENTATION RESPONSIBILITY.--The Secretaries shall be responsible for the implementation of the coordinated program.
- (c) ESTABLISHMENT OF BOARD.--To assist in implementing the coordinated program, there is established an Interagency Board for Nutrition Monitoring and Related Research, of which an Assistant Secretary in the Department of Agriculture (designated by the Secretary of Agriculture) and an Assistant Secretary in the Department of Health and Human Services (designated by the Secretary of Health and Human Services) shall be joint chairpersons. The remaining membership of the Board shall consist of additional representatives of Federal agencies, as determined appropriate by the joint chairpersons of the Board. The Board shall meet no less often than once every three months for the two-year period following the date of the enactment of this Act, and when appropriate thereafter.
- (d) ADMINISTRATOR.--To establish a central focus and coordinator for the coordinated program, the Secretaries may appoint an Administrator of Nutrition Monitoring and Related Research. The Administrator shall--
  - (1) be an individual who is eminent in the field of nutrition monitoring and related areas and be selected on the basis of the established record of expertise and distinguished service of such individual; and
  - (2) administer the coordinated program with the advice and counsel of the joint chairpersons of the Board, serve as the focal point for the coordinated program, and serve as the Executive Secretary for the National Nutrition Monitoring Advisory Council.

### **SEC. 102.<sup>(5)</sup> FUNCTIONS OF THE SECRETARIES.**

- (a) IN GENERAL.--The Secretaries, with the advice of the Board, shall--
  - (1) establish the goals of the coordinated program, identify the activities required to meet such goals, and identify the responsible agencies with respect to the coordinated program;

(2) update the Joint Implementation Plan for a Comprehensive National Nutrition Monitoring System, and integrate it into the coordinated program;

(3) ensure the timely implementation of the coordinated program and the comprehensive plan prepared under section 103;

(4) include in the coordinated program and the comprehensive plan a competitive grants program, to be implemented to the extent funds are available, in accordance with the provisions of this Act to encourage and assist the conduct, by Federal entities, and by non-Federal entities on an appropriate matching funds basis, of research (including research described in section 103(a)(3)) that will accelerate the development of uniform and cost-effective standards and indicators for the assessment and monitoring of nutritional and dietary status and for relating food consumption patterns to nutritional and health status;

(5) include in the coordinated program and the comprehensive plan a grants program, in accordance with the provisions of this Act, to encourage and assist State and local governments in developing the capacity to conduct monitoring and surveillance of nutritional status, food consumption, and nutrition knowledge and in using such capacity to enhance nutrition services (including activities described in section 103(a)(5) and 103(b)(9));

(6) include in the coordinated program each fiscal year an annual interagency budget for each fiscal year of the program;

(7) foster productive interaction, with respect to nutrition monitoring and related research, among Federal efforts, State and local governments, the private sector, scientific communities, health professionals, and the public;

(8)(A) contract with a scientific body, such as the National Academy of Sciences or the Federation of American Societies for Experimental Biology, to interpret available data analyses, and publish every two years, or more frequently if appropriate, except as provided in subparagraph (B), a report on the dietary, nutritional, and health-related status of the people of the United States and the nutritional quality (including the nutritive and nonnutritive content) of food consumed in the United States; or

(B) if the Secretaries determine that sufficient data analyses are not available to warrant interpretation of such data analyses, inform Congress of such fact at the time a report required in subparagraph (A) would have been published, and publish such report at least once every five years; and

(9)(A) foster cost recovery management techniques in the coordinated program; and

(B) impose appropriate charges and fees for publications of the coordinated program, including print and electronic forms of data and analyses, and use the proceeds of such charges and fees for purposes of the coordinated program (except that no such charge or fee imposed on an educational or other nonprofit organization shall exceed the actual costs incurred by the coordinated program in providing the publications involved).

(b) BIENNIAL REPORT.--The Secretaries shall submit to the President for transmittal to Congress by January 15 of each alternate year, beginning with January 15 following the date of the enactment of this Act, a biennial report that shall--

(1) evaluate the progress of the coordinated program;

(2) summarize the results of such coordinated program components as are developed under section 103;

(3) describe and evaluate any policy implications of the analytical findings in the scientific reports required under subsection (a)(8), and future priorities for nutrition monitoring and related research;

(4) include in full the annual reports of the Council provided for in section 202; and

(5) include an executive summary of the report most recently published by the scientific body, as provided for in subsection (a)(8).

**SEC. 103.<sup>(6)</sup> DEVELOPMENT OF THE COMPREHENSIVE PLAN FOR THE NATIONAL NUTRITION MONITORING AND RELATED RESEARCH PROGRAM.**

(a) **COMPREHENSIVE PLAN.**--The Secretaries, with the advice of the Board, shall prepare and implement a comprehensive plan for the coordinated program which shall be designed to--

(1) assess, collate data with respect to, analyze, and report, on a continuous basis, the dietary and nutritional status of the people of the United States, and the trends with respect to such status (dealing with such status and trends separately in the case of preschool and school- age children, pregnant and lactating women, elderly individuals, low-income populations, blacks, Hispanics, and other groups, at the discretion of the Secretaries), the state of the art with respect to nutrition monitoring and related research, future monitoring and related research priorities, and relevant policy implications of findings with respect to such status, trends, and research;

(2) sample representative subsets of identifiable low-income populations (such as Native Americans, Hispanics, or the homeless), and assess, analyze, and report, on a continuous basis, for a representative sample of the low-income population, food and household expenditures, participation in food assistance programs, and periods experienced when nutrition benefits are not sufficient to provide an adequate diet;

(3) sponsor or conduct research necessary to develop uniform indicators, standards, methodologies, technologies, and procedures for conducting and reporting nutrition monitoring and surveillance;

(4) develop and keep updated a national dietary and nutritional status data bank, a nutrient data bank, and other data resources as required;

(5) assist State and local government agencies in developing procedures and networks for nutrition monitoring and surveillance; and

(6) focus the nutrition monitoring activities of Federal agencies.

(b) **COMPONENTS OF PLAN.**--The comprehensive plan, at a minimum, shall include components to--

(1) maintain and coordinate the National Health and Nutrition Examination Survey (NHANES) and the Nationwide Food Consumption Survey (NFCS);

(2) provide, by 1991, for the continuous collection, processing, and analysis of nutritional and dietary status data through stratified probability samples of the people of the United States designed to permit statistically reliable estimates of high-risk groups and geographic areas, and to permit accelerated data analysis (including annual analysis, as appropriate);

(3) maintain and enhance other Federal nutrition monitoring efforts such as the Centers for Disease Control Nutrition Surveillance Program and the Food and Drug Administration Total Diet Study, and, to the extent possible, coordinate such efforts with the surveys described in paragraphs (1) and (2);

(4) incorporate, in survey design, military and (where appropriate) institutionalized populations;

(5) complete the analysis and interpretation of the data sets from the surveys described in paragraph (1) collected prior to 1984 within the first year of the comprehensive plan;

(6) improve the methodologies and technologies, including those suitable for use by States and localities, available for the assessment of nutritional and dietary status and trends;

(7) develop uniform standards and indicators for the assessment and monitoring of nutritional and dietary status, for relating food consumption patterns to nutritional and health status, and for use in the evaluation of Federal food and nutrition intervention programs;

(8) establish national baseline data and procedures for nutrition monitoring;

(9) provide scientific and technical assistance, training, and consultation to State and local governments for the purpose of--

(A) obtaining dietary and nutrition status data;

(B) developing related data bases; and

(C) promoting the development of regional, State, and local data collection services to become an integral component of a national nutritional status network;

(10) establish mechanisms to identify the needs of users of nutrition monitoring data and to encourage the private sector and the academic community to participate in the development and implementation of the comprehensive plan and contribute relevant data from non-Federal sources to promote the development of a national nutritional status network;

(11) compile an inventory of Federal, State, and nongovernment activities related to nutrition monitoring and related research;

(12) focus on national nutrition monitoring needs while building on the responsibilities and expertise of the individual membership of the Board;

(13) administer the coordinated program, define program objectives, priorities, oversight, responsibilities, and resources, and define the organization and management of the Board and the Council; and

(14) provide a mechanism for periodically evaluating and refining the coordinated program and the comprehensive plan that facilitates cooperation and interaction by State and local governments, the private sector, scientific communities, and health care professionals, and that facilitates coordination with non-Federal activities.

(c) ADDITIONAL REQUIREMENTS OF PLAN.--The comprehensive plan shall--

(1) allocate all of the projected functions and activities under the coordinated program among the various Federal agencies and offices that will be involved;

(2) contain an affirmative statement and description of the functions to be performed and activities to be undertaken by each of such agencies and offices in carrying out the coordinated program; and

(3) constitute the basis on which each agency participating in the coordinated program requests authorizations and appropriations for nutrition monitoring and related research during the ten-year period of the program.

(d) **PUBLICATION OF PLAN.**--(1) **PROPOSED PLAN.**--Within 12 months after the date of enactment of this Act, the Secretaries shall publish in the Federal Register a proposed comprehensive plan for public review for a comment period of no less than sixty days.

(2) **FINAL PLAN.**--Within sixty days after the comment period under paragraph (1) expires, and after considering any comments received, the Secretaries shall submit to the President, for submission to the Congress and for publication in the Federal Register, the final comprehensive plan.

(e) **PROHIBITION ON CONSTRUING.**--Nothing in this section may be construed as modifying, or as authorizing the Secretaries or the comprehensive plan to modify, any provision of an appropriation Act (or any other provision of law relating to the use of appropriated funds) that specifies--

(1) the department or agency to which funds are appropriated; or

(2) the obligations of such department or agency with respect to the use of such funds.

#### **SEC. 104.** <sup>(7)</sup> **IMPLEMENTATION OF THE COMPREHENSIVE PLAN.**

(a) **IN GENERAL.**--The comprehensive plan shall be carried out during the period ending with the close of the ninth fiscal year following the fiscal year in which the comprehensive plan is submitted in its final form under section 103(d)(2) and shall be--

(1) carried out in accordance with, and meet the program objectives specified in, section 103(a) and section 103(b);

(2) carried out, by the Federal agencies involved, in accordance with the allocation of functions and activities under section 103(c); and

(3) funded by appropriations made to such agencies for each fiscal year of the program.

(b) **EXISTING LAW NOT AFFECTED.**--Nothing in this title may be construed to grant any new regulatory authority or to limit, expand, or otherwise modify any regulatory authority under existing law, or to establish new criteria, standards, or requirements for regulation under existing law.

#### **SEC. 105.** <sup>(8)</sup> **SCIENTIFIC RESEARCH AND DEVELOPMENT IN SUPPORT OF THE COORDINATED PROGRAM AND COMPREHENSIVE PLAN.**

The Secretaries shall coordinate the conduct of, and may contract with the National Science Foundation, the National Aeronautics and Space Administration, the National Oceanic and Atmospheric Administration, the National Institute of Standards and Technology, and other suitable Federal agencies for, such scientific research and development as may be necessary or appropriate in support of the coordinated program and the comprehensive plan and in furtherance of the purposes and objectives of this Act.

**SEC. 106.<sup>(9)</sup> ANNUAL BUDGET SUBMISSION.**

(a) ANNUAL REPORT.--The President, at the same time as the submission of the annual budget to the Congress, shall submit a report to the Committees on Agriculture and Science, Space, and Technology of the House of Representatives and to the Committees on Agriculture, Nutrition, and Forestry and Governmental Affairs of the Senate on expenditures required for carrying out the coordinated program and implementing the comprehensive plan. The report shall detail, for each of the agencies that are allocated responsibilities under the coordinated program--

- (1) the amounts spent on the coordinated program during the fiscal year most recently ended;
- (2) the amounts expected to be spent during the current fiscal year; and
- (3) the amounts requested in the annual budget for the fiscal year for which the budget is being submitted.

(b) EXISTING AUTHORITY NOT AFFECTED.--Nothing in this title is intended to either--

- (1) authorize the appropriation or require the expenditure of any funds in excess of the amount of funds that would be authorized or expended for the same purposes in the absence of the coordinated program; or
- (2) limit the authority of any of the participating agencies to request and receive funds for such purposes (for use in the coordinated program) under other laws.

**TITLE II--NATIONAL NUTRITION MONITORING ADVISORY COUNCIL**

**SEC. 201.<sup>(10)</sup> STRUCTURE OF THE COUNCIL.**

(a) IN GENERAL.--(1) ESTABLISHMENT.--The President shall establish, within ninety days after the date of the enactment of this Act, a National Nutrition Monitoring Advisory Council. The Council shall assist in carrying out the purposes of this Act, provide scientific and technical advice on the development and implementation of the coordinated program and comprehensive plan, and serve in an advisory capacity to the Secretaries.

(2) MEMBERSHIP.--The Council shall consist of nine voting members, of whom--

- (A) five members shall be appointed by the President based upon recommendations from the Secretaries; and
- (B) four members shall be appointed by Congress, of whom--
  - (i) one shall be appointed by the Speaker of the House of Representatives;
  - (ii) one shall be appointed by the minority leader of the House of Representatives;
  - (iii) one shall be appointed by the President pro tempore of the Senate; and
  - (iv) one shall be appointed by the minority leader of the Senate.

(3) EX OFFICIO MEMBERS.--The Council also shall include the joint chairpersons of the Board as ex officio nonvoting members.

(b) SELECTION CRITERIA.--Each person appointed to the Council shall be selected solely on the basis of an established record of distinguished service and shall be eminent in one of the following fields:



(1) public health, including clinical dietetics, public health nutrition, epidemiology, clinical medicine, health education, or nutrition education;

(2) nutrition monitoring research, including nutrition monitoring and surveillance, food consumption patterns, nutritional anthropology, community nutrition research, nutritional biochemistry, food composition analysis, survey statistics, dietary-intake methodology, or nutrition status methodology; or

(3) food production and distribution, including agriculture, biotechnology, food technology, food engineering, economics, consumer psychology or sociology, food-system management, or food assistance.

(c) PARTICULAR REPRESENTATION REQUIREMENTS.--The Council membership, at all times, shall include at least two representatives from each of the three areas of specialization listed in subsection (b), and shall have representatives from various geographic areas, the private sector, academia, scientific and professional societies, agriculture, minority organizations, and public interest organizations and shall include a State or local government employee with a specialized interest in nutrition monitoring.

(d) CHAIRPERSON.--The Chairperson of the Council shall be elected from and by the Council membership. The term of office of the Chairperson shall not exceed 5 years. If a vacancy occurs in the Chairpersonship, the Council shall elect a member to fill such vacancy.

(e) TERM OF OFFICE.--The term of office of each of the voting members of the Council shall be 5 years, except that of the 5 members first appointed by the President, 2 shall be appointed for a term of 2 years, 2 for terms of 3 years, and one for a term of 4 years, as designated by the President at the time of appointment. Any member appointed to fill a vacancy occurring prior to the expiration of the term for which the predecessor of such member was appointed shall be appointed for the remainder of such term. No voting member shall be eligible to serve continuously for more than 2 consecutive terms.

(f) INITIAL APPOINTMENT.--The initial members of the council shall be appointed or designated not later than ninety days after the date of the enactment of this Act.

(g) MEETINGS.--The Council shall meet on a regular basis at the call of the Chairperson, or on the written request of one-third of the members. A majority of the appointed members of the Council shall constitute a quorum.

(h) LIMITATION ON FEDERAL EMPLOYMENT.--Appointed members of the council may not be employed by the Federal Government and shall be allowed travel expenses as authorized by section 5703 of title 5, United States Code.

(i) EXECUTIVE SECRETARY.--The Administrator of Nutrition Monitoring and Related Research (if appointed under section 101(d)) shall serve as the Executive Secretary of the Council.

(j) TERMINATION.--The Council shall terminate 10 years after the final comprehensive plan is prepared under section 103.

## **SEC. 202. (11) FUNCTIONS OF THE COUNCIL.**

The Council shall--

(1) provide scientific and technical advice on the development and implementation of all components of the coordinated program and the comprehensive plan;

(2) evaluate the scientific and technical quality of the comprehensive plan and the effectiveness of the coordinated program;

(3) recommend to the Secretaries, on an annual basis, means of enhancing the comprehensive plan and the coordinated program; and

(4) submit to the Secretaries annual reports that--

(A) shall contain the components specified in paragraphs (2) and (3); and

(B) shall be included in full in the biennial reports of the Secretaries to the President for transmittal to Congress under section 102(b).

### **TITLE III--DIETARY GUIDANCE**

#### **SEC. 301. <sup>(12)</sup> ESTABLISHMENT OF DIETARY GUIDELINES.**

(a) REPORT.--(1) IN GENERAL.--At least every five years the Secretaries shall publish a report entitled "Dietary Guidelines for Americans". Each such report shall contain nutritional and dietary information and guidelines for the general public, and shall be promoted by each Federal agency in carrying out any Federal food, nutrition, or health program.

(2) BASIS OF GUIDELINES.--The information and guidelines contained in each report required under paragraph (1) shall be based on the preponderance of the scientific and medical knowledge which is current at the time the report is prepared.

(b) APPROVAL BY SECRETARIES.--(1) REVIEW.--Any Federal agency that proposes to issue any dietary guidance for the general population or identified population subgroups shall submit the text of such guidance to the Secretaries for a sixty-day review period.

(2) BASIS OF REVIEW.--(A) IN GENERAL.--During the sixty-day review period established in paragraph (1), the Secretaries shall review and approve or disapprove such guidance to assure that the guidance either is consistent with the "Dietary Guidelines for Americans" or that the guidance is based on medical or new scientific knowledge which is determined to be valid by the Secretaries. If after such sixty-day period neither Secretary notifies the proposing agency that such guidance has been disapproved, then such guidance may be issued by the agency. If both Secretaries disapprove of such guidance, it shall be returned to the agency. If either Secretary finds that such guidance is inconsistent with the "Dietary Guidelines for Americans" and so notifies the proposing agency, such agency shall follow the procedures set forth in this subsection before disseminating such proposal to the public in final form. If after such sixty-day period, either Secretary disapproves such guidance as inconsistent with the "Dietary Guidelines for Americans" the proposing agency shall--

(i) publish a notice in the Federal Register of the availability of the full text of the proposal and the preamble of such proposal which shall explain the basis and purpose for the proposed dietary guidance;

(ii) provide in such notice for a public comment period of thirty days; and

(iii) make available for public inspection and copying during normal business hours any comment received by the agency during such comment period.

(B) REVIEW OF COMMENTS.--After review of comments received during the comment period either Secretary may approve for dissemination by the proposing agency a final version of such dietary guidance along with an explanation of the basis and purpose for the final guidance which addresses significant and substantive comments as determined by the proposing agency.

(C) ANNOUNCEMENT.--Any such final dietary guidance to be disseminated under subparagraph (B) shall be announced in a notice published in the Federal Register, before public dissemination along with an address where copies may be obtained.

(D) NOTIFICATION OF DISAPPROVAL.--If after the thirty-day period for comment as provided as provided under subparagraph (A)(ii), both Secretaries disapprove a proposed dietary guidance, the Secretaries shall notify the Federal agency submitting such guidance of

such disapproval, and such guidance may not be issued, except as provided in subparagraph (E).

(E) REVIEW OF DISAPPROVAL.--If a proposed dietary guidance is disapproved by both Secretaries under subparagraph (D), the Federal agency proposing such guidance may, within fifteen days after receiving notification of such disapproval under subparagraph (D), request the Secretaries to review such disapproval. Within fifteen days after receiving a request for such a review, the Secretaries shall conduct such review. If, pursuant to such review, either Secretary approves such proposed dietary guidance, such guidance may be issued by the Federal agency.

(3) LIMITATION ON DEFINITION OF GUIDANCE.--For purposes of this subsection, the term "dietary guidance for the general population" does not include any rule or regulation issued by a Federal agency.

(4) DEFINITION OF IDENTIFIED POPULATION SUBGROUPS.--For purposes of this subsection, the term "identified population subgroups" shall include, but not be limited to, groups based on factors such as age, sex, or race.

(c) EXISTING AUTHORITY NOT AFFECTED.--This section does not place any limitations on--

(1) the conduct or support of any scientific or medical research by any Federal agency;

(2) the presentation of any scientific or medical findings or the exchange or review of scientific or medical information by any Federal agency; or

(3) the authority of the Food and Drug Administration under the provisions of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321 *et seq.*).

### **SEC. 302.** <sup>(13)</sup> **NUTRITION TRAINING REPORT.**

The Secretary of Health and Human Services, in consultation with the Secretaries of Agriculture, Education, and Defense, and the Director of the National Science Foundation, shall submit, within one year after the date of enactment of this Act, a report describing the appropriate Federal role in assuring that students enrolled in United States medical schools and physicians practicing in the United States have access to adequate training in the field of nutrition and its relationship to human health.

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(1) 7 U.S.C. 5301 note.

(2) 7 U.S.C. 5301.

(3) 7 U.S.C. 5302.

(4) 7 U.S.C. 5311.

(5) 7 U.S.C. 5312.

(6) 7 U.S.C. 5313.

(7) 7 U.S.C. 5314.

(8) 7 U.S.C. 5315.

(9) 7 U.S.C. 5316.

(10) 7 U.S.C. 5331.

(11) 7 U.S.C. 5332.

(12) 7 U.S.C. 5341.

(13) 7 U.S.C. 5342.

## (2) Die „Surveys“

*Übersicht bei Food Information System – Nutrition Survey Topic*

<http://www.nal.usda.gov/fnic/etext/000056.html>

### **Surveys and Surveillance Systems**

<http://www.cdc.gov/nccdphp/dnpa/surveill.htm>

A survey examines public health issues by asking a sample of the population about their health and lifestyles. The prevalence of health conditions or behaviors in a population is measured using surveys.

A surveillance system is a series of surveys conducted again and again, monitoring long-term trends in public health. A surveillance system is used to examine public health issues across several years; to compare information gathered, see the trends, track the ups and downs and determine whether something is improving or worsening for a specific group of people.

Both surveys and surveillance systems provide data that is used to produce public health reports and our [Physical Activity Interactive Health Statistics](#) Web site pages.

<http://apps.nccd.cdc.gov/dnpa/stats.htm>

### **Individual survey data**

<http://www.ers.usda.gov/briefing/consumption/Individual.htm>

Since the 1930's, USDA has conducted seven food consumption surveys on a National scale: 1936, 1942, 1948 (urban only), 1955, 1965-66, 1977-78, and 1987-88. The data have been used to describe food consumption patterns and to assess the nutritional contents of diets.

Research based on the surveys has influenced policies related to food production and marketing, food safety, food assistance, and nutrition education. The 1977-78 and 1987-88 surveys included two components: (1) household food use during a 7-day period and (2) individual food intakes for 3 days. While the household food use component has not been conducted since 1987-88, the individual food intake component, the CSFII, was conducted during 1989-91, 1994-96, and 1998.

### **Behavioral Risk Factor Surveillance System (BRFSS)**

<http://www.cdc.gov/nccdphp/brfss/>

The BRFSS uses a population-based telephone survey to assess behavioral health risk factors of American adults since 1984. The BRFSS provides national and state data for following trends in obesity, physical activity, and fruit and vegetable consumption.

### **National Health Interview Survey (NHIS)**

<http://www.cdc.gov/nchs/nhis.htm>

The NHIS is a household survey based at the National Center for Health Statistics (NCHS) that has used family interviews to provide national health statistics since 1957. Baseline statistics for Healthy People 2010 objectives and for the Leading Indicators for physical activity for adults come from this survey.

### **Nationwide Personal Transportation Survey (NPTS)**

<http://www.cta.ornl.gov/npts/1995/doc/index.shtml>

The U.S. Department of Transportation conducts the NPTS to obtain information on the amount and nature of daily travel of people in U.S. households. The survey provides trend data beginning in 1969 on walking, bicycling, and automobile transportation for the Active

Community Environments Initiative to promote physical activity through environmental change.

**NHTS 2001:** The National Household Travel Survey 2001, is a combined effort of Federal Highway Administration's *Nationwide Personal Transportation Survey* (NPTS) and the Bureau of Transportation Statistics *American Travel Survey* (ATS), which were conducted separately in previous years. The emphasis of the NPTS focuses on the daily, local trips, while the ATS collected longer distance travel. This One-Department of Transportation will provide the full continuum of travel, and provide national estimates of trips and miles by travel mode, purpose, and other vital travel information. Results are expected in late 2002

### **Pediatric Nutrition Surveillance System (PedNSS)**

A system for continuously monitoring the nutritional status of specific high-risk population groups, developed in 1972 by the Centers for Disease Control and Prevention in response to the United States Ten-State Nutrition Survey.

<http://www.cdc.gov/nccdphp/dnpa/PedNSS.htm>

### **Pregnancy Nutrition Surveillance System (PNSS)**

The Pregnancy Nutrition Surveillance System was developed by CDC in order to assist health professionals in achieving the goals of identifying and reducing pregnancy-related health risks that contribute to adverse pregnancy outcomes.

<http://www.cdc.gov/nccdphp/dnpa/pnss.htm>

### **The World Health Organization-MONICA Optional Study of Physical Activity (MOSPA)**

The MOSPA questionnaire was developed by CDC to compare international estimates of physical activity using the existing WHO-MONICA surveillance system. MOSPA was administered in 13 out of 40 WHO-MONICA survey sites in Europe and Asia from 1988 to 1994. Today, the data are analyzed and managed by CDC.

<http://www.cdc.gov/nccdphp/dash/yrbs/survey99.htm>

### **Youth Risk Behavior Surveillance System (YRBSS)**

The YRBSS has been monitoring health-risk behaviors among youth in grades 9-12 since 1990, and is now administered in odd-numbered years. The YRBSS includes a national school-based survey conducted by CDC as well as state, territorial, and local school-based surveys conducted by education and health agencies. Scientists use the YRBSS to investigate how nutrition and physical activity behaviors are associated with other health-risk factors.

### **Obesity Trends**

In 2000, the prevalence of obesity was 19.8% among U.S. adults, which reflects a 61% increase since 1991.

<http://www.cdc.gov/nccdphp/dnpa/obesity/trend/index.htm>

### **Survey of Food Intakes by Individuals (CSFII) 1994-96, 1998**

#### **Continuing Survey of Food Intakes by Individuals (CSFII)**

The CSFII 1994-96 was sponsored by the Agricultural Research Service, U.S. Department of Agriculture. The survey provides information on the diets of a nationally representative sample of noninstitutionalized individuals in 50 States, with oversampling of the low-income U.S. population. Data collected include food and nutrient intake for up to 2 days, where the food was obtained, nutrient and food group intake, race, sex, age, ethnicity, height and weight,

household income and composition, food stamp and WIC program participation, education and employment status of individuals in the household 15 years of age and over, and diet and health knowledge of a sample of individuals 20 years and older who completed at least 1 day of intake. In 1998, dietary data were collected only on children from birth through 9 years of age using the same methods as in 1994-96 so that the data can be merged to increase the sample size for children. The data are useful for analyzing food consumption behavior and the nutrient content of diets and for assessing policy implications for food production, marketing, food safety, food assistance, and nutrition education. Similar CSFII surveys were also conducted in 1989-91 and 1985. For more information, see the Agricultural Research Service's [CSFII website](#).

<http://www.barc.usda.gov/bhnrc/foodsurvey/Csfii94>

### **Third National Health and Nutrition Examination Survey (NHANES III)**

<http://www.cdc.gov/nchs/nhanes.htm>

NHANES III was conducted by the National Center for Health Statistics of the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services over the period 1988-94. The survey assesses the health and nutritional status of the population and monitors changes over time, especially in comparison with information from NHANES I and II, which were conducted in earlier periods. A major objective of the survey's nutrition component is to provide data for nutrition monitoring purposes, including tracking nutrition, identifying risk factors related to food insecurity, and estimating the prevalence of compromised nutritional status. A second major objective is to provide information for studying the relationships among diet, nutritional status, and health. A dietary 24-hour recall and a 1-month food frequency survey were used to obtain dietary data. The data set variables include gender, age, race, ethnicity, income, education, employment, health insurance coverage, marital status, and food assistance program participation. Outcome variables of interest include numerous nutritional and health indicators, such as food and nutrient intake, dietary practices, body measurements, hematological tests, including iron status, biochemical analyses of whole blood and serum (including lipid, lipoproteins, lead, and glucose tolerance), blood pressure, electrocardiograms, urine tests, bone densitometry, dental examinations, gallbladder ultrasonography, and cognitive and physical functioning. For more information, see the [NHANES website](#) of the Centers for Disease Control and Prevention. /

<http://www.cdc.gov/nchs/nhanes.htm>

The National Health and Nutrition Examination Survey (NHANES) is a survey conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention. This survey has been designed to collect information about the health and diet of people in

the United States. NHANES is unique in that it combines a home interview with health tests that are done in a [Mobile Examination Center](#) (MEC virtual tour).

<http://www.cdc.gov/epiinfo/ei2000.htm>

### **Consumer Expenditure Survey (CES)**

<http://www.bls.gov/cex/>

The CES is an annual survey of household expenditures conducted by the U.S. Bureau of Labor Statistics, U.S. Department of Labor. The survey has three major objectives: (1) to provide information on consumer expenditures to support revisions to the Consumer Price Index market basket; (2) to provide a flexible set of data serving a wide variety of social and economic analyses; and (3) to provide a continuous body of detailed expenditure and income

data for research purposes. The survey is comprised of two independent household components: a quarterly interview survey for broad expenditure categories and a weekly diary survey for small frequently purchased items, such as individual food items, gasoline, stamps, and other miscellaneous items. The data set includes information on age, race, sex, household size, income, geographic region, and Food Stamp Program participation. For more information, see the Bureau of Labor Statistics' [CES website](#).

### **Current Population Survey (CPS)**

<http://www.bls.census.gov/cps/>

The CPS is a large, nationally representative monthly survey that obtains information from approximately 50,000 households. The U.S. Census Bureau conducts the survey on behalf of the U.S. Bureau of Labor Statistics and other Federal agencies that support the survey. The main purpose of the CPS is to provide estimates of employment, unemployment, and other characteristics of the general labor force. In addition to the labor force data, the March CPS Supplement provides detailed data on annual income and food assistance program participation; the income data are used to calculate State and national poverty estimates. Estimates of food security at the household level are developed using items on a CPS supplement that is sponsored by USDA. The food security supplement was introduced in April 1995. The supplement is fielded annually, although the month of administration varies from year to year. Information on the CPS and its supplements can be found on the Census Bureau's [CPS website](#). Information on the CPS food security supplements can be found in the Economic Research Service's [Food Security in the United States briefing room](#). – <http://www.ers.usda.gov/briefing/FoodSecurity/>

### **Early Childhood Longitudinal Study—Kindergarten Cohort (ECLS-K)**

<http://nces.ed.gov/ecls/>

<http://www2.acf.dhhs.gov/programs/hsb/hsreac/oct99/chapter3.htm>

The ECLS-K is an ongoing longitudinal study conducted by the U.S. Department of Education, National Center for Education Statistics. The study follows a nationally representative sample of approximately 22,000 children from kindergarten through fifth grade. The children's parents, teachers, and schools are also participants in the study. The ECLS-K collects information on the children's cognitive, social, emotional, and physical development (i.e., height and weight); home environment and home educational practices; school environment, classroom environment, and classroom curriculum; participation in the National School Lunch Program, School Breakfast Program, and Food Stamp Program; and household food security status. Information is collected in the fall and the spring of kindergarten (1998-99), the fall and spring of first grade (1999-2000), the spring of third grade (2002), and the spring of fifth grade (2004). For more information, see the National Center for Educational Statistics' [ECLS website](#).

### **Food and Nutrition Service Program Operations Data**

<http://www.fns.usda.gov/pd/>

The Food and Nutrition Service Program Operations Data provide statistical information on aspects of all major Food and Nutrition Service (FNS) food and nutrition assistance programs. These programs include the Food Stamp Program; the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); Child Nutrition Programs (National School Lunch, School Breakfast, Child and Adult Care, Summer Food Service, and Special

Milk); and Food Distribution Programs (Schools, Emergency Food Assistance, Indian Reservations, Commodity Supplemental, Nutrition for the Elderly, and Charitable Institutions). Four types of tables are provided: historical summaries, annual State-level data for selected elements, monthly national-level data for major programs, and State-level participation in major programs for the latest available month. The summaries begin with 1969, the year that FNS was established to administer USDA's food and nutrition assistance programs. FNS Program Operations Data are available on the [Food and Nutrition Service website](#).

### **Food Stamp Program Quality Control Data File (FSPQC)**

<http://www.fns.usda.gov/oane/MENU/Published/FSP/DataBases.htm>

The FSPQC database contains detailed demographic, economic, and Food Stamp Program (FSP) eligibility information for a nationally representative sample of approximately 50,000 FSP units (an FSP "household" is known technically as a food stamp "unit"). The FSPQC data are generated from monthly quality control (QC) reviews of FSP cases that are conducted by State FSP agencies to assess the accuracy of eligibility determinations and benefit calculations for the State's FSP caseload. These data, which are produced annually, are ideal for tabulations of certain characteristics of food stamp units and for simulating the impact of various FSP policy changes on current FSP units. For more information, see the [Food and Nutrition Service website](#).

### **National Food Stamp Program Survey (NFSPS)**

<http://www.fns.usda.gov/oane/MENU/Published/FSP/fsp.htm>

The NFSPS was conducted in 1996 by the Food and Nutrition Service, U.S. Department of Agriculture. The survey collected information on client satisfaction with services provided by food stamp offices and agencies, the monetary and nonmonetary costs of participating in the Food Stamp Program (FSP), food shopping behaviors, items related to food security, and nutrient availability for a nationally representative sample of Food Stamp Program participants and potential participants. In addition, information on dietary knowledge and attitudes and a 7-day household food use record was collected from a subsample of 1,000 of these households. Approximately 1,000 nonparticipants were contacted through random digit dial sampling to gather information on their experiences with the FSP and their reasons for nonparticipation. For more information, see one or more of the NFSPS reports (available in PDF format), including "[Food Stamp Participants' Access to Food Retailers](#)," "[Customer Service in the Food Stamp Program](#)," and "[Food Stamp Participants' Food Security and Nutrient Availability](#)." These reports are available on the [Food and Nutrition Service website](#).

### **National Survey of America's Families (NSAF)**

<http://www.urban.org/Content/Research/NewFederalism/NSAF/Overview/NSAFOverview.htm>

The NSAF, conducted by The Urban Institute, provides a comprehensive look at the well-being of adults and children. The survey provides quantitative quality-of-life measures and pays particular attention to low-income families. The survey is representative of the noninstitutionalized, civilian population of persons under age 65 in the Nation as a whole and in 13 States: Alabama, California, Colorado, Florida, Massachusetts, Michigan, Minnesota, Mississippi, New Jersey, New York, Texas, Washington, and Wisconsin. Together, these 13 States are home to more than half the Nation's population and represent a broad range of fiscal capacities, child well-being, and approaches to government programs. For more information, see the Urban Institute's [NSAF website](#).



### **Panel Study of Income Dynamics (PSID)**

<http://www.isr.umich.edu/src/psid/overview.html>

The PSID, begun in 1968, is a longitudinal study of a representative sample of U.S. individuals and their families, including an oversampling of the low-income population. As families have grown and changed over time, the sample size has grown from 4,800 families in 1968 to 6,434 in 1999. A sample of 441 immigrant families was added in 1997. The PSID has collected information about more than 60,000 individuals spanning as much as 30 years of their lives. The central focus of the data is economic and demographic variables useful for research on dynamic processes. It contains substantial detail on income sources and amounts, employment, family composition changes, and residential location. Some waves of the study also included variables oriented more toward sociological or psychological research. The study is conducted at the Survey Research Center, Institute for Social Research, University of Michigan and has been supported over the years by funding from various government agencies, foundations, and other organizations. For more information, see the University of Michigan's [PSID website](#).

### **Survey of Income and Program Participation (SIPP)**

<http://www.sipp.census.gov/sipp/>

The main objectives of the SIPP are to collect information on income by source, employment, program participation and eligibility, and general demographic characteristics. This information is used to measure the effectiveness of existing Federal and State programs; to estimate future costs and coverage for government programs, such as food stamps; and to improve statistics on the U.S. distribution of income in the country. The U.S. Census Bureau, which conducts the SIPP, uses a longitudinal, multistage-stratified design to survey the civilian, noninstitutionalized population of the United States. The sample size ranges from approximately 14,000 to 36,700 interviewed households, with the duration of each panel ranging from 2½ to 4 years. Variables include labor force behavior; income; participation in public programs; basic demographic characteristics; living arrangements; food adequacy or abbreviated food security module; participation at the individual level in the Food Stamp Program and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); and participation at the household level in the free, reduced-price, and full-price categories of the National School Lunch Program and School Breakfast Program. For more information, see the Census Bureau's [SIPP website](#).

### **Survey of Program Dynamics (SPD)**

<http://www.sipp.census.gov/spd/>

The SPD is a special extension of the Survey of Income and Program Participation (SIPP) designed to look specifically at the effects of welfare reform. Congress mandated that the U.S. Census Bureau continue to collect data on the 1992 and 1993 panels of SIPP, as necessary, to obtain information on changes in participation in public assistance programs, employment, earnings, and measures of adult and child well-being. The data collected from the 1992 and 1993 SIPP panels provide 3 years of longitudinal baseline data prior to major welfare reform. The SPD's data include information on program eligibility, access, and participation; transfer income and in-kind benefits; food security; and detailed economic and demographic data on employment and job transitions, income, and family composition. The 3 years of SIPP data combined with the 7 years of SPD data will provide panel data for 10 years. For more information, see the Census Bureau's [SPD website](#).

### Food Security Data Information

<http://www.ers.usda.gov/briefing/FoodSecurity/data/index.htm>

ERS plays a leading role in Federal research on food security and hunger in U.S. households and communities. Food security for a household means access by all members at all times to enough food for an active, healthy life. Food security includes at a minimum (1) the ready availability of nutritionally adequate and safe foods, and (2) assured ability to acquire acceptable foods in socially acceptable ways (that is, without resorting to emergency food supplies, scavenging, stealing, or other coping strategies). USDA has developed a standardized survey module for assessing food security status. This module is included on a number of national surveys, the most prominent of which is the Current Population Survey of the U.S. Census Bureau. For more information on national surveys that include the USDA food security module, see the Economic Research Service's [Food Security in the United States briefing room](#).

(3) Die angewandten Methoden – (Questionnaires)

Food Surveys Research Group

<http://www.barc.usda.gov/bhnrc/foodsurvey/home.htm>

<http://www.barc.usda.gov/bhnrc/foodsurvey/Questionnaires.html>

### CSFII 1998 questionnaires (PDF format)

[Day 1](#) (175 kb)

[Day 2](#) (175 kb)

[Household](#) (170 kb)

[Screener](#) (35 kb)

[Handcards](#) (1579 kb)

### CSFII/DHKS 1994-96 questionnaires (PDF format)

[Day 1](#) (447 kb)

[Day 2](#) (334 kb)

[DHKS](#) (674 kb)

[Household](#) (403 kb)

[Screener](#) (285 kb)

[Handcards](#) (416 kb)

(4) Weitere Informationen

[www.cdc.org](http://www.cdc.org)

<http://www.hhs.gov/>

[www.usda.org](http://www.usda.org)

<http://www.nutrition.gov/> (wichtig)

Weitere Information – ERS-Websites

[www.ers.usda.gov](http://www.ers.usda.gov)

<http://www.ers.usda.gov/briefing/>

<http://www.ers.usda.gov/briefing/FoodNutritionAssistance/>

<http://www.ers.usda.gov/briefing/FoodNutritionAssistance/data/>

## ***Third Report on Nutrition Monitoring in the United States***

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The U.S. Departments of Agriculture and Health and Human Services have released the Third Report on Nutrition Monitoring in the United States, a comprehensive, 2-volume report that reviews and interprets data on the dietary, nutritional, and health-related status of the U.S. population, and factors that affect that status. The report includes recent and trend data on nutrition and health; food and nutrient consumption; knowledge, attitude and behavior assessments; food composition and nutrient data bases; and food supply determinations. The report profiles the nutritional status of Americans in general, as well as groups at high risk of nutritional problems. This report is issued in compliance with a 1990 Congressional mandate to publish a report at least every five years on the dietary, nutritional and related health status of Americans and the nutritional quality of the food they consume. Under the direction of the Interagency Board for Nutrition Monitoring and Related Research, the report was prepared by the Life Sciences Research Office (LSRO) of the Federation of American Societies for Experimental Biology, in consultation with experts from nutrition and health-related disciplines. LSRO evaluated data from Federal surveys, State-based nutrition surveillance systems, and other monitoring activities that are part of the National Nutrition Monitoring and Related Research Program.

### ***Report highlights:***

- Americans are slowly changing their eating patterns toward more healthful diets, but a considerable gap remains between public health recommendations and consumers' practices.
- About one-third of adults and one-fifth of adolescents in the United States are overweight. These results represent increases in the prevalence of overweight since the 1970's.
- Despite significant progress, 20 percent of Americans still have high serum cholesterol levels.
- Hypertension remains a major public health problem in middle-aged and elderly people. Non-Hispanic blacks have a higher age-adjusted prevalence of hypertension than non-Hispanic whites and Mexican Americans.
- Many Americans are not getting the calcium they need to maintain optimal bone health and prevent age-related bone loss, particularly adolescents, adult females, elderly people and non-Hispanic black males.
- Less than one-third of American adults meet the recommendation to consume five or more servings of fruits and vegetables per day.
- While the availability of food, on a per capita basis, is generally adequate to prevent undernutrition and deficiency-related diseases, the data show some Americans report not always getting enough to eat. Approximately one in 10 people living in low - income households or families experience some degree of food insufficiency.

### **TO ORDER:**

Both the full report and a separate executive summary are available from the Government Printing Office, Phone (202) 512-1800 (VISA, MasterCard, or GPO deposit account), Fax (202) 512-2250.

By mail: Send a check or money order payable to "Superintendent of Documents," U.S. Government Printing Office, Washington, DC, 20402.

- *Third Report on Nutrition Monitoring in the United States*--2 volumes, shrink-wrapped, includes executive summary, 700 pages. Available only as a set. GPO stock number: 001-000-04619-5 (\$40.00).
- *Third Report on Nutrition Monitoring in the United States: Executive Summary*--45



pages. GPO stock number: 001-000-04620-9 (\$3.75).

[Third Report on Nutrition Monitoring in the United States: Executive Summary](#) 669kb

*There is a 25 percent discount on orders of 100 or more copies of a single publication mailed to the same address.*

[www.cdc.gov](http://www.cdc.gov)

<http://www.cdc.gov/health/nutrition.htm>

## Health Topic: Nutrition

- [Anemia and Iron Status](#)
- [Data to Action: Pediatric Nutrition](#)
- [Guidelines for School Health Programs to Promote Lifelong Healthy Eating](#)
- [Healthy Eating Tips](#)
- [Nutrition and Physical Activity](#)
- [Obesity/Overweight](#)
- [Physical Activity and Health: A Report of the Surgeon General](#)
- [Pregnancy Nutrition Surveillance System \(PNSS\)](#)
- [The Pediatric Nutrition Surveillance System](#)

[www.nps.ars.usda.gov](http://www.nps.ars.usda.gov)

ARS Research is organized into 22 National Programs. These programs serve to bring coordination, communication and empowerment to the more than 1200 research projects carried out by ARS. The National Programs focus on the **relevance**, **impact**, and **quality** of ARS research. (Agricultural Research Service)

<http://www.nps.ars.usda.gov/programs/programs.htm?NPNUMBER=107>

Human Nutrition Research

Program Summary: Program Direction

Vision Statement:

Provide a nutritious food supply, promote nutritional health and quality of life, reduce morbidity and mortality associated with chronic diseases influenced by dietary intake, and develop sound dietary recommendations which can be used to establish more effective nutrition assistance programs.

**Mission Statement:**

The mission of the Human Nutrition Program is to conduct basic and applied research to identify and understand how nutrients and other bioactive food components affect health. The ultimate goal of this food-based agricultural research is to identify foods and diets, coupled with genetics and physical activity, that sustain and promote health throughout the life cycle. The research components of this program include:

- [Nutrition Requirements](#)
- [Diet, Genetics, Lifestyle, and the Prevention of Obesity and Disease](#)

- [Nutrition Monitoring](#)
- [Composition of Foods](#)
- [Health Promoting Intervention Strategies for Targeted Populations](#)
- [Health Promoting Properties of Plant and Animal Foods](#)
- [Bioavailability of Nutrients and Food Components \(e.g. phytonutrients and phytochemicals\)](#)

#### Program Summary: Program Rationale

Food is fundamental to life and health. The major product from agricultural production is food for human consumption. A viable agricultural enterprise demands that producers target consumers' needs for desirable, safe, and nutritious foods. Consumers have grown more demanding in their desire for foods that improve health and the quality of life, improve physical performance, reduce risks of chronic diseases, and increase the life span. This trend is likely to increase. The United States enjoys the preeminent role as food provider to the world. Research on human nutritional needs must continue in concert with research that increases agricultural production and improves product quality.

Human nutrition science has taken a major step forward from a focus on the prevention of nutrient deficiencies to an emphasis on health-maintenance and reduced risks of chronic diseases. Scientific research has demonstrated that what and how much we eat profoundly affects growth, development, and aging, and the ability to enjoy life to its fullest. Dietary intake is linked to risks for development of a variety of common, chronic diseases that are disabling and life threatening. Among those diseases linked strongly to diet, the cost for medical treatment and care exceeds \$200 billion per year. The annual economic impact of cardiovascular disease in the U.S. exceeds \$80 billion, that of obesity exceeds \$86 billion, osteoporosis \$10 billion for care alone, cancer \$104 billion, and cataract surgery \$4 billion. The American Cancer Society estimated in 1996 that one-third of the 500,000 cancer deaths annually in the U.S. are due to a variety of dietary factors.

The staggering cost of nutrition-related diseases clearly points out the need to develop effective strategies, based on the results of sound human nutrition research, to lower the cost of health care by prevention of diseases. The success of nutrition research in the last 30 years to reduce the incidence and severity of cardiovascular and digestive disease, and also some forms of cancer is a clear indication that alterations in diet and lifestyle have beneficial effects both through reduced morbidity and mortality and a concomitant reduction in the cost of health care. In spite of our ability to reduce health care costs through dietary interventions, our national investment in human nutrition research has not kept pace with the need for this research. Agricultural Research Service (ARS) research can be used to promote health through programs that emphasize foods for well-being, and reduce the need for medical care. ARS research can be used to establish healthful intakes of specific nutrients and to develop strategies for intervention into the diets for targeted populations. By defining interventions for reducing disease risks, health care costs can be substantially reduced.

Changing population dynamics, life style habits, food technologies, animal and crop production capabilities, biotechnology, and the globalization of the market for foods, all demand revisions in thinking about how to target food production, processing, and intervention strategies to assure optimization of health through nutrition. New approaches to elucidate the fundamental inter-relationships between diet, genetics, and health, and applying and validating strategies to stimulate healthy food, nutrition, and lifestyle behaviors must be a part of nutrition programs today. ARS has an integrated and multidisciplinary human nutrition program to address these issues.

Despite recent advances in nutrition research, much is yet to be determined. New and powerful techniques in molecular biology have recently been introduced in nutrition research. These should be used to identify those individuals at greatest risk for nutritionally related diseases, and nutrient-gene interactions. A continuing need is to expand our understanding of

the roles nutrients play in maintaining health and to identify those components in foods that are most beneficial. Determining what factors mediate food choices, how eating behavior affects food intake, and what intervention strategies can be used to change those behaviors are also critical research needs.

Using more modern methods in research, it is obvious that requirements for various nutrients clearly change throughout the life cycle and under different physiological states, such as pregnancy and lactation. Diets early in life may affect our requirements for nutrients or increase the risk for disease later in life. Scientific evidence has shown that the long term health consequences during adult life are determined to some extent by nutritional events during critical periods of child development. Proper food choices must be made to enjoy good health throughout life.

The strong connection between human nutrition research and the food and agricultural sciences can only be developed as a national effort. ARS is an ideal location for human nutrition research because of the proximity to research on basic agriculture. ARS has major research programs in animal, plant, soil and post harvest sciences that can directly respond to knowledge of nutritional concerns by modifying the food composition, expanding food choices, and providing more options for selection of healthful diets by at risk populations. If nutritionists are to be successful in providing sound dietary advice and affecting the health of the population, it is essential that the research activities take place in an environment where there is continuous dialog and collaboration between the Human Nutrition National Program and programs in plant, animal and the other agricultural sciences. As nutritional needs are identified, continual efforts will be made to distribute the information that consumers need to make wise choices. Unlike the Department of Health and Human Services and in particular the National Institutes of Health whose research is oriented toward causes and treatment of disease, ARS human nutrition research is targeted towards health, quality of life, prevention of chronic disease and promotion of a nutritious supply of food.

[www.eatright.com/stratplan.html](http://www.eatright.com/stratplan.html)

# American Dietetic Association Strategic Plan

## FY 2001 - 2004

### Mission

The American Dietetic Association promotes optimal nutrition and well-being for all people by advocating for its members.

### Vision

American Dietetic Association members are the leading source of food and nutrition services.

### Strategic Goals

1. Be the leader in selected emerging areas of food and nutrition
2. Build an active and diverse membership in the Association
3. Influence the food, nutrition and health policy initiatives of key audiences
4. Increase demand and utilization of services provided by ADA members
5. Position members to compete successfully in a rapidly changing environment
6. Set the agenda and facilitate support for food, nutrition and health services research

**Selected Areas in Food & Nutrition** (*in priority order*)

- 1. Obesity (to include primary prevention in childhood obesity)**
- 2. Complementary care and dietary supplements**
- 3. Retail food (providing quality in and preparation of food; improving food practices)**
- 4. Genetics (human genome)**

**Biotechnology (food and agricultural technology; functional foods, irradiation)**

(5) Literaturliste

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J.F Guthrie, M Nord: Federal activities to monitor food security. J Amer Diet Ass. 102(7): 904-906 (2002)

JF Guthrie, EF Myers: USDA´s Economic Research Service supports nutrition and health outcomes research. J Amer Diet Ass. 102(2) 293-297

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