

Navigating Future Practice: Population Health

The concept of **population health** describes the health outcomes of a defined population and/or subpopulation with particular attention to the distribution of such outcomes between groups. Population health is focused on the connection between all determinants of health (e.g., root causes) and health outcomes. The goal of population health is to promote health and health equity by implementing policies and creating systems and environments that come together through shared resources to mitigate the impact of determinants of health on health outcomes.

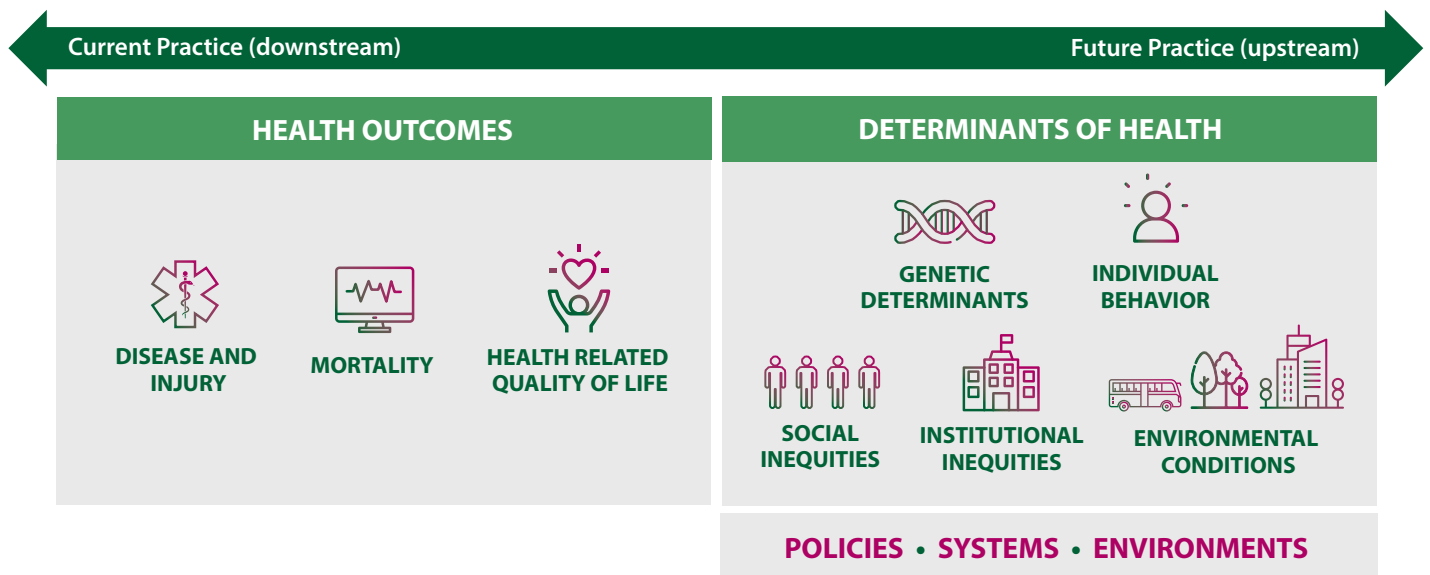
This brief describes how the concept of population health impacts current and future nutrition and dietetics practice, and the implications for credentialed nutrition and dietetics practitioners for gaining additional knowledge and skills to apply systems science.

Forecasts & Trends

What does a future focused on population health mean?

An adequately prepared nutrition and dietetics workforce will be prepared to:

- Integrate **inclusion, diversity, equity and access (IDEA)** within and across the entire population health ecosystem.
- Implement policies, systems and environments that promote consistent and equitable access to safe, resilient **food systems** (nutrition security, food security, food safety) and be able to quantify nutrition security, an identified determinant of population health.
- Work within a patient-centric **spectrum of care** that bridges the clinical practice setting to the community setting and policy.
- Use innovative, connected **technology**, that is accessible to your audience, such as Artificial Intelligence (AI), to deliver and enhance systems-oriented interventions to improve population health. For further information please see *Navigating Future Practice: Technology*.



Implications for Practice

To successfully engage within the population health ecosystem, all RDNs/NDTRs need to:

- Self-recognize and be recognized by others as an integral part of the systems to improve population health.
- Enhance skills in leadership, strategy, research and evaluation, technology and public policy to contribute to population health.
 - > As the nutrition expert, lead population health efforts within local, state, national and global entities.
 - > Learn what data are available and use it to describe populations and the distribution of outcomes within a defined population while considering the strengths, limitations, and gaps of the data being used.
 - > Expand proficiency in innovative technology platforms and the use of data-driven approaches for management (e.g., risk assessment tools).
 - > Advocate and propose public policies that positively impact population health.
- Participate in interprofessional education to facilitate the understanding and application of systems science and the interoperability of linked systems, and to contribute in a value-based system focused on health improvement which addresses determinants of health.
 - > Collaborate intraprofessionally (RDN/NDTR) and interprofessionally.
 - > Engage in cross-training at the graduate level (e.g., undergraduate in dietetics and graduate degree in public health).
- Support the building of a workforce that reflects the demographics and cultural and linguistic diversity of the people being served, and actively engage in the practice of cultural humility and anti-racism.
 - > Translation of the RDN/NDTR skill set to all systems promoting health and health equity.

Continued challenges that will be perpetuated if population health is not at the forefront of future practice:

- **Overwhelmed healthcare systems.**
Without a focus on determinants of health and the continuation of the fee-for-service nutrition service paradigm supported by the training for RDNs/NDTRs at the individual patient level, this approach will continue to result in poor health outcomes for populations, particularly during a crisis for subpopulations who have limited access.
- **Widening sociodemographic disparities.**
Value-based care is grounded in equity, meaning it does not vary in the quality of care provided based on personal circumstances. Without value- and outcomes-based health care as the cornerstone of our health care systems, health inequities often rooted in racism will be exacerbated particularly for historically marginalized populations.
- **Nutrition work will be done without RDNs/NDTRs.**
Without RDNs/NDTRs population health work will still be accomplished, but the role of RDNs/NDTRs will be diminished. The RDN/NDTR is an essential and valued actor in the population health ecosystem with engagement across the spectrum from practice to policy.
- **Reduced job satisfaction and increased burnout.**
Diminished value, job opportunities, and job satisfaction may result without interprofessional education and collaboration. There will also be increased burnout of RDNs/NDTRs in public health who have population health knowledge and skills.



This is the third in a series of briefs from the **Academy of Nutrition and Dietetics Council on Future Practice** describing change drivers that will affect the future of the profession. This brief is intended to familiarize readers with this specific change driver and its implications, so that readers can share this knowledge with their organizations. Learn more about environmental scanning for change drivers and trends [here](#).