

THE GRAPEVINE

Fall/Winter
2024

Newsletter

Issue 38



Teachers College Program in Nutrition

Find out what's *fresh off the vine*

Mixed white and brown rice
prepared by Sarde Gumalo

LETTER FROM THE *Editors*



Dear Students, Faculty, Alumni, and Staff,

Welcome to our Fall/Winter Issue of the Grapevine! Preparing for our first edition as new co-editors has given us the wonderful opportunity to connect in a deeper way with fellow classmates and alumni. We saw firsthand how this newsletter serves as a common place to share the experiences of TC students from every point in their career path - from first-year students to graduates already working in the field.

In this issue, we delve into cultural exploration as Sacha and Shirley share about their trip to the Queens Night Market and Sarde navigates the cultural significance of rice in the context of health.

Rachel shares must-visit nearby coffee shops for studying and Kathryn discusses potential changes to Medical Nutrition Therapy that may come with the transition in presidential administration.

Tyra interviews two TC Program in Nutrition alumni who went on to other careers in the healthcare field, which includes medical school and nursing school. This highlights how a foundation in nutrition can be a stepping stone for other careers in healthcare.

Lastly we hear from second-year students, Thulasi, Naheed, Sally, and Kirsten about their site placements during the Fall semester.

Wishing you all a wonderful holiday season and a well-needed semester break. See you in January!

Warmly,



Tyra Vanriel
CO-EDITOR-IN-CHIEF



Sarde Gumalo
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GLOBAL BITES AND GOOD TIMES: A NIGHT AT THE QUEENS NIGHT MARKET WITH OUR NUTRITION CREW

Shirley Song & Sacha Sulaiman



As students, our schedules are packed, and it's easy to get caught up in the grind of classes and deadlines.

But as nutrition students, we share a love for food and exploring different cuisines. So, when someone suggested a trip to the Queens Night Market in Flushing Meadows Corona Park, we were all in - even if it meant trekking a bit farther than usual.

The Queens Night Market, which first opened in 2015, has grown into a food lover's paradise, featuring dishes from over 80 countries. It's an immersive, global culinary experience right in the heart of Queens. The best part? Most dishes are priced between \$6 and \$7, making it easy to sample a variety of flavors without breaking the bank. From crispy twisted potatoes and savory empanadas to creamy pasteis de nata and Filipino street food, there's something to satisfy every craving.

We visited on a lively September evening, and the energy was contagious from the moment we arrived. The market was alive with the sizzle of street food cooking, live music playing in the background, and the joyful chatter of people enjoying the vibrant atmosphere. It was the perfect way to unwind and step outside the classroom, spending quality time with some of our cohort and bonding over our shared love for good food and new experiences.





The food and entertainment were amazing, but the real highlight of the night was spending time together. Between bites and bursts of laughter, we chatted about classes, ate baked goods from “Bahn by Lauren,” a bakery where a fellow classmate works, and talked about what we hoped to do for the rest of the semester. It was nice to step away from studying and connect outside our usual academic setting.



We indulged in dishes from all over: twisted potatoes, empanadas from Sweet & Salty, creamy pasteis de nata from Joey Bats Natas, Filipino street skewers, Peruvian food from Taypa, and our personal favorite, Korean BBQ lettuce wraps from Lettuce Meat. Every bit was better than the last, and sharing our plates made it all the more enjoyable.

If you are looking for a fun and budget-friendly outing, the Queens Night Market, easily accessible via the 1 and 7 trains, is a must-visit. Though it’s closed for the season, it will reopen in April 2025 and run through October on Saturday nights. So, mark your calendars, grab your appetite, and make it a point to experience this gem next year - you won’t regret it.



Deeply Ingrained: A Reflection on Rice, Culture, and Health

By Sarde Gumalo

In my Filipino household, we often say the phrase, “Rice is life”. It’s become our mantra whenever we spoon a hot, fluffy pile of white rice onto our plates which - for many cultures - can be with most meals. It’s not lost on me that brown rice is recommended over white rice for its benefits in fiber, micronutrients, and a lower glycemic index, so we’ve started mixing brown and white into our rice cooker at home. But for some reason, making this switch has carried more weight than other transitions I’ve made in the pursuit of health. It felt somehow off to change something so integral to my heritage and given the need for greater cultural inclusivity within US nutrition recommendations, I started to reconsider brown rice’s superiority over white.



My curiosity somewhat spiraled after learning the FDA has reported risks associated with rice intake overall - with an emphasis on brown rice due to higher inorganic arsenic levels - and recommends limiting or diversifying consumption (1). What I thought would be a simple switch from one grain to another only raised more questions. Why do so many cultures subsist on white rice over brown rice in the first place? Is pairing white rice with vegetables or legumes enough to make up for the nutrient differences? Should I have less rice overall and eat more of other grains (quinoa, farro, etc.), or do the rice recommendations stem from a lack of cultural representation? When it comes to food, when do we choose culture and when do we choose health?

I started my search by learning more about rice culture and found that in East Asian countries, white rice became the preferred option for reasons based on everything from status, convenience, economic viability, and ceremonial significance. Polishing rice to remove the bran became more common for practical reasons like having a longer shelf life (the bran contains more oils which leads to faster spoilage), a quicker cooking time, and it's more easily digested (2). Since milling rice was labor-intensive, white rice was seen as a sign of wealth, and brown rice became associated with lower classes who did not have the resources to mill rice completely (3). The cleaner, softer appearance of white rice became more appealing in East Asia reflecting European standards of beauty and aesthetics (4).



In the Philippines before Spanish colonization, the Filipino diet was not centered around rice, and root crops like yams, taro, and cassava were often more important (1). In some regions where sophisticated rice-growing systems already existed, native rice varieties were more nutritionally diverse and more closely resembled brown rice today when compared to white (1). Filipino reliance on white rice developed when the Spanish established large-scale white rice production through irrigation systems and land reforms until it became the cultural mainstay that it is today (1).

I suddenly understood the intergenerational weight that rice carried for me. Without at first knowing why, I knew that rice was somehow deeply ingrained in who I am. For many countries, rice has evolved to mean so much more than food, it symbolizes prosperity, hardship, subsistence, and life itself. It's a part of major life events like weddings, religious rituals, and ceremonies - rice literally is life.



Understanding the history of rice helped me see that choosing brown rice or other grains would not be a betrayal to my culture. Ironically, switching to other varieties could be a way of returning closer to my pre-colonial roots. My search for knowledge led me to see that in some cases history can speak louder than science when it comes to empowering people to make healthy choices about food. As rising nutrition professionals, we must remember the nuances within what food means to people. Therefore, providing nutrition advice is not just a science, but a relational art. Though I found plenty of information about everything from fiber, micronutrients, glycemic index, and resistant starch, tracing the history of rice further informed my decisions in a more meaningful way. Today many cultures are adopting brown rice and consumption of other grains now that research has touted their myriad benefits.

When the line between culture and health gets blurry, I find clarity in the notion that culture and identity are not static. I'm now introducing my palate to all sorts of new grains while still welcoming white or brown rice as a part of my plate. Rather than feeling stuck at a boundary between culture and health, I realize that I am gifted with knowledge and access to various types of food that my ancestors did not have. I find solid ground in diversifying my diet to reflect the richness of who I am - more than American, more than Filipino, more than white, more than brown, some of everything, and all in between.

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The Affordable Care Act and Potential Changes to Medical Nutrition Therapy Coverage By Kathryn Jagers



On Nov 6th 2024, I had many questions about what the next four years would hold for our country. In the wake of processing this change, I decided to focus my energy on what's most relevant to the field of nutrition and within my power to influence. I wanted to better understand the Affordable Care Act (ACA), how potential changes could impact the delivery of Medical Nutrition Therapy (MNT), and consider how we might respond as aspiring dietitians and nutrition professionals.

When the ACA passed in 2010, it made health insurance more affordable and more accessible for a significant portion of the US population. A unique characteristic of the health landscape in this country is that employers have historically sponsored health insurance plans.

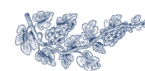
The result of this link has been vulnerability for those without employer sponsored health plans or who experience job insecurity. The ACA created new marketplaces where people could purchase health insurance and expanded Medicaid eligibility, both of which improved access to healthcare.

On top of these expansions, the ACA mandated that insurance plans cover certain preventive services without requiring a cost-share from patients. It's essential that people are incentivized to seek care that will make them healthier and reduce costs down the road. Of interest to us is that MNT is usually considered a preventive service. This means people can receive nutrition counseling at no cost to them as part of their regular annual healthcare visits. The protection of MNT by the ACA is very meaningful to our profession – it allows us to reach more people and demonstrate the value that nutrition brings to healthcare.

While significant progress has been made to American healthcare coverage, the incoming administration has indicated plans to reduce funding and roll back certain parts of the ACA. This could mean higher insurance premiums, fewer preventive services covered, and the loss of Medicaid, a safety net for those who need it most. For MNT specifically, if it were no longer a preventive service, it would be much more expensive and impossible for some people to access it.

With increasingly confusing nutrition information from large corporations and social media, it's essential now more than ever that people can receive counseling from trained dietitians. Additionally, reversing the ACA could mean reduced reimbursement rates, which are already so low that providers often struggle to stay afloat financially. This puts the burden on providers, and as a result, many may choose not to accept health insurance in their practices.

In light of these potential challenges to MNT access, I encourage our Grapevine readers to take action. This could look like speaking with policy leaders, advocating for things like the [Medical Nutrition Therapy Act](#), or working with companies that have different funding sources like nonprofits to reach the most vulnerable populations. Members of the [Academy of Nutrition and Dietetics](#) can join the [MNT Expansion Affinity Group](#) where you can meet monthly with other members and discuss priorities and strategies for advocacy. As experts in the field, it's important that our voices are heard when it comes to making regulations. The next four years could dramatically change people's health outcomes as well as the direction of the dietetic profession, and I've personally found it very motivating that I could have a meaningful impact. I hope you'll all feel equally inspired and choose to join me in advocacy for MNT coverage.



Coffee Shops and Study Spots

By Rachel Lamele

Studying in coffee shops is my preferred change of scenery and an exciting way to try new places around campus and the West side. Throughout my first semester at Teachers College, I have been exploring cafés in the neighborhood. Whether I'm seeking a midday pick-me-up between classes or looking for a space to study on non-lecture days, exploring local options is an exciting hobby.

City Coffee Bar, 914 Columbus Ave

One of my favorite spots is City Coffee Bar. Only a twenty-minute walk from campus, they offer tasty and affordable drinks, ample seating, a wall with outlets, and most importantly, reliable WiFi. The ambiance of a coffee shop is an important consideration for me when choosing the right spot. City Coffee Bar exudes a relaxing atmosphere with dim lighting and carefully curated music. I think this is a perfect destination for a caffeine boost, despite them not offering baked goods. My favorite drink here is an iced latte, but their chai latte is also a fan favorite. I have learned that it's important to make sure coffee shops allow laptop use and have public WiFi before buying coffee - some places don't encourage a work environment.



Photo courtesy of Rachel Lamele

Claire's Kitchen Café, 150 Manhattan Ave

Claire's is a small café chain with a brand new location on the corner of 107th Street and Manhattan Ave that checks all the boxes: pleasurable vibes and music, tables and couches, comfortable aesthetic with an electric fireplace, outlets, reliable WiFi, a vast Mediterranean inspired menu, and a rewards system to earn a free drink. There are two floors which allows for ample seating and lighting options for a warm work environment. Another benefit is its close proximity to Central Park! Taking a walk before or after studying is an ideal way to move the body and have a mental break.



Photo courtesy of Rachel Lamele

Coffee Shops and Study Spots (continued)

Paris Baguette, 2568 Broadway

Another reliable option is Paris Baguette. If you're looking to avoid the possibility of not finding a seat at a small coffee shop, this is a safer bet. Located approximately a twenty five-minute walk from campus, this cafe chain offers plenty of seating, reliable WiFi, and a rewards loyalty program that allows customers to accumulate points for beverages and pastries purchased. While the atmosphere may lack the charm of a mom-and-pop spot, the bright lighting and absence of music can create an easier space to focus. The 1 train from campus to 96th street can take you closer to this location on Broadway.



Photo courtesy of Parisbaguette.com

Ariston Flowers & Café, 78 5th Avenue

If you're looking to escape the Upper West Side and venture further from campus, I recommend taking the 1 train downtown to 14th Street to Ariston Flowers and Café. The decoration is in the name, with gorgeous flowers surrounding the seating area and a colorful flower shop providing the grand entrance. This cafe is an excellent choice if you can concentrate amidst background noise, as the music tends to be louder. Additionally, this café offers a student discount and a selection of seasonal drinks or pastries, to enjoy a festive treat! My friends and I shared a delicious pumpkin cookie with our coffees to fuel the study day.



Photo courtesy of Artisonflowers.com



Whether you're new to NYC or just hoping to check out different spots, visiting coffee shops is the perfect way to find new beverage creations while exploring novel atmospheres. Finding your immaculate study vibe can help you balance focusing on course content and self-care. If you are normally a library dweller or often study at home, I recommend switching up your scenery to explore some of the hidden gems in New York that bring people and culture together through refreshments and a sense of community.

Alumni Interview featuring: Cristina DelPrete, MD

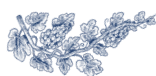
By Tyra Vanriel

Dr. Cristina DelPrete was in the Nutrition and Exercise Physiology program here at TC and graduated during COVID-19. She was in the second to last cohort that completed the Master's program before it was transitioned to the integrated program that it is today. She earned her personal training certification and worked while doing the program. She completed her MS degree in three years, which allowed her to work as a personal trainer. She was a trainer at a hospital-affiliated gym, and she was getting a lot of clients, particularly women who had other health issues, such as breast cancer survivors, fibromyalgia, diabetes, or other chronic conditions. While deciding on her thesis, she became interested in the athlete triad and relative energy deficiency syndrome and had the opportunity to work with a dietitian for the School of American Ballet and the HSS Women's Sports Medicine Center. Through those opportunities, she realized that she really wanted to combine those two interests and pursue medicine.

She then applied to medical school, and she knew early on that she would do orthopedic surgery because it is one of the only fields with pretty clear-cut delineations for medical intervention, like a broken bone or a torn ligament. Exercise is vital to rehabilitating orthopedist patients, and nutrition plays a role in bone healing and recovery from injury. She went to medical school at Rutgers Robert Wood and then matched at Columbia for her orthopedic residency. She just started her intern year and hopes to enter pediatric sports eventually.

What motivated you to pursue a Master's program in Nutrition?

Cristina: I was premed throughout college, but then I found this gap in the aspect of health that is so important, specifically nutrition and physical exercise, which are pillars in overall health. While shadowing and seeing the patients at the hospital, I wondered if we could have just prevented them from getting to this place with better dietary habits and education. So that's when I would say, my junior year of college, I shifted gears to try and find a Master's and career path that would fulfill that and the program at TC combined those two aspects purposefully for me.



Dr. DelPrete Interview (continued):

What sparked your interest in pursuing orthopedic surgery?

Cristina: I really enjoyed my MNT course with Dr. Sporny! That was when I realized that I enjoyed the clinical aspect so much. I also enjoyed physiology a lot, and I wanted to learn more, so I think that's what shifted me back to medical school. I had two interests that could melt together, and I didn't think I had to do one thing or the other. It's good to ensure you're fulfilling all aspects of your professional goals.

I will say one of the key factors was that when I was in undergrad, I didn't see much female representation, particularly in orthopedic surgery. Then, when I worked with Heidi Skolnick, who is the dietitian at the School of American Ballet and HSS, she worked at a Women's Sports Medicine Center that had all female orthopedic surgeons. Seeing representation amongst those people was really important to me, and I was like, wow I can do this as well. And I think that speaks to how important it is to be there for patients and that patients have people that look like them. It's really, really important, and so that inspired me.

How did you transition from finishing up your Master's degree to applying to medical school?

Cristina: I went to Dr Wolf, and I was like, I think I'm going to apply to medical school. Luckily, I had everything lined up prior to my junior year of college; I just had to take the MCAT. Everything else was ready. I knew who I would ask for recommendation letters and had all the prereqs.

So while everyone was applying for their internship, I was applying for medical school. And the timing worked out well, so when everyone was finding out about their internships, I was finding out about medical school, and I started right after I graduated in May.

Considering your background in nutrition, do you find that you are able to advocate for more nutrition counseling sessions with dietitians for your patients compared to those who lack the foundation?

Cristina: Going to medical school and seeing how little we learn about nutrition is really shocking. We get basic, basic, knowledge like, a carb is 4 calories and stuff like that. You get the basic biochem and very, very basic, vitamin deficiency syndromes. And if you're not in the practice, which we normally don't even see here, unless it's someone coming from a country where those vitamin deficiencies are common, people forget about it. Orthopedics people are very health-focused, so some people have a personal interest in nutrition, but there's no formal teaching.

For example, in arthroplasty, a lot of the patients need to lose weight prior to surgery; most surgeons at Columbia won't do surgery with a BMI over 30. So, the appropriate counseling about weight loss is important; I try to do a more intuitive eating and healthier choices perspective, as opposed to some people who say, "you need to lose weight, just eat vegetables." Another thing that was really important to me, which I spoke a lot about in my medical school and residency interviews, is that I want to make sure in the future that I have a practice that incorporates

Dr. DelPrete Interview (continued):

health professionals of many disciplines. Especially if I do pediatric sports, I want to ensure that a dietitian is involved, particularly for my interest in low energy deficiency. Patients need someone who will work with them regularly and teach them about food in more time than a surgeon will have to explain it. Even in the hospital, I continue to encourage the use of dietitians for nutrition consults to ensure the patient is recovering appropriately.

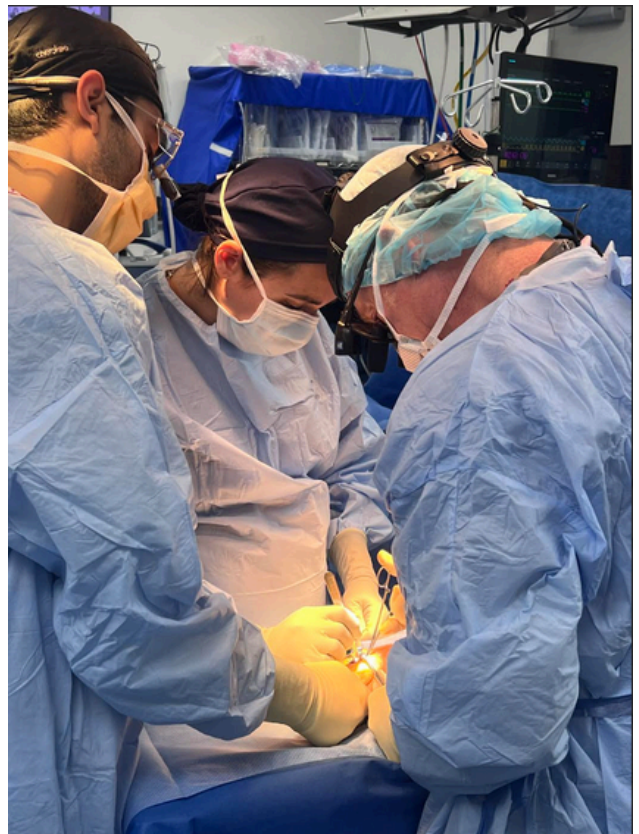
Can you describe a memorable project or a research experience that you had to do during your time at TC?

Cristina: While working on my thesis, I focused on athletes with low energy availability, which was really important to me, as well as doing the associated clinical work with a dietitian. I wouldn't have had this opportunity if I hadn't gone to TC—just through networking with other students, working with students at the School of American Ballet, and doing educational workshops with them. What I found interesting was the restrictive patterns imposed by the parents of the students at the School of American Ballet, so I could see the social aspects that contributed to the problem behaviors. I also took an optional summer course in eating disorders at TC that was really informative. So, having these clinical experiences and the educational background through the supplemental courses that were offered and then using them hands-on through the practicum that I had with Dr. Dolan in sports nutrition and going to Manhattan College to counsel rowers was really impactful. I recognized how impactful proper education techniques could be, so learning those skills and using motivational interviewing was important.

How do you think the field of nutrition will evolve in the next maybe five to 10 years?

Cristina: I think there's going to be a lot more personalized nutrition. So, in every field, there's been more robotics and testing for genes. I think there are a lot more personalized aspects in medicine. People want things to be tailored to them! I think that's going to translate over to nutrition as well, whether that's recognizing certain genes that people may digest things differently or not prescribing the same diet to everyone, which we're already aware of. Personalizing nutrition is important and I think there will be more clinical objective markers to help us do that.

"When you think you know everything about nutrition and you think you've got it all figured out, you actually know nothing; you need to keep learning. It's really important to keep questioning yourself and your foundation of knowledge. In addition to that, always learn from your patients." - Dr. Cristina DelPrete



Alumni Interview featuring: Man-Ning Feng, MS, RDN

By Tyra Vanriel

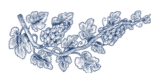
When Man-Ning, a Program in Nutrition alum, attended Teachers College, the program was not yet integrated. She completed her Master's degree in two years and then the one-year dietetic internship (DI). During the DI, Man-Ning completed a few pediatric rotations, including the Mount Sinai NICU and Elizabeth Seton Children's Center, which is when she discovered she really loved pediatrics. After passing the RD exam, she started her first job as an inpatient clinical dietitian at a small community hospital. She covered the ICU, NSICU, CVICU, NICU, pediatric, and cardiology units. At a community hospital, it is typical for one dietitian to cover four to five different units, which is different from a bigger hospital where one dietitian usually covers one



unit. To continue her passion for pediatrics, Man-Ning went on to Stanford Children's Hospital and became a pediatric dietitian. During that time, she also rotated at different units, including oncology, the cystic fibrosis center, and gastroenterology, which is ultimately when she decided to pursue nursing. Man-Ning is currently halfway through nursing school – an atypical path for our graduates, but an exciting one.

What inspired you to get a Master's degree in Nutrition after finishing undergrad?

Man-Ning: As an undergraduate, I knew that I liked food, I liked biology, and I liked taking care of people - so nutrition was the perfect major for me. I went to Taipei Medical University and the nutrition courses taught were clinical and science based. I think nutrition is really about motivation and counseling, it's not all about nutrition knowledge because even when you give your patients the knowledge, when they have other things they want to prioritize, they may not care about what you are teaching them. The most important part is how to enable them to motivate themselves to learn the nutrition knowledge and help them make changes. At TC, nutrition education is emphasized in many of the courses, such as designing counseling sessions, how to speak to patients, and developing counseling skills. This is what brought me to Teachers College right after graduating undergrad, I was in the Nutrition Education specialization which enabled me to learn these skills.



Man-Ning Feng Interview (continued):

What influenced you to pursue a career in nursing?

Man-Ning: I have been thinking about nursing since I was in grad school. As dietitians, we know a lot! We learn about biology, biochemistry, microbiology, and nutrition. But once I was in the hospital system, I realized I wanted to do even more direct patient care and provide even broader care, which is why I chose nursing. When I was a dietitian, I ordered food for my patients and I did enteral feedings. As a nurse, I will be able to do that too and collaborate with dietitians and doctors as part of a team. I think I will be able to utilize all of my nutrition knowledge while completing my nursing responsibilities and having more direct patient care.

How has the master's program or internship at TC helped you with your nursing courses thus far?

Man-Ning: I feel like the Master's program gave me a great foundation. We took MNT which teaches us about different diseases and how we should treat them. Also, since I worked in the hospital for a few years, I learned the importance of clinical judgement combined with what we learn from the readings. For example, I get an A plus in a class, but that doesn't mean I have clinical judgement – for that, you need experience. At TC, the variety of rotations such as acute care, long-term care, pediatrics, and geriatrics, gave me great exposure which helped me build my clinical judgement.

Man-Ning: As a dietitian, I found that the nurses and doctors were quick to say that someone was malnourished because of the albumin levels. I would be able to say that all of their muscles are there, they are eating fine, - they are inflamed - the albumin is not the right indicator. But in nursing school, they still teach us to, “check albumin, check albumin, if you see an elderly person admitted in the hospital, check their albumin.” So they are teaching the wrong stuff, so as a former dietitian, I am able to tell my professor, this is not correct, we shouldn't teach students that since it is so outdated. Sadly, in a hospital setting, my experience was that the doctor doesn't always respect the opinion of a dietitian, but as a nurse, you have a closer relationship with the doctor so your input is more likely to be heard and valued. So that's also why I want to be a nurse, I just want to make a difference in the hospital and for my patients.

How did your rotations at Mount Sinai NICU and Elizabeth Seton Children's Center help you find a job afterward?

Man-Ning: I have to say, there are not many people who do pediatrics, so when I was applying for pediatric jobs I got a lot of interviews! They would tell me, not many students get a lot of pediatric rotations, but you did, so we are going to give you an interview and give you a chance. They felt like I would catch up fast after training because of all the rotations I had.

Man-Ning Feng Interview (continued):

Can you share any challenges that you faced while transitioning from academia to your professional career?

Man-Ning: It is important to transition from ‘book smart’ to ‘real life smart.’ Being ‘book smart’ is good because you have all of the knowledge, but working in a hospital is very different. For example, in school, we learn that if they have specific signs of malnutrition, then we have to start nutrition support. But a lot of times in the hospital, you must deal with so many things. If they are already in pain, they do not want a tube inside their stomach, if they have poor insurance, then their insurance might not cover it; if the doctor doesn’t want to do nutrition support or enteral feedings but they want to do parenteral nutrition, then you must negotiate with the doctor. So I think one of the most challenging things is not focusing just on what we learn in school, but being able to communicate with everyone around you and how to achieve your goals by using your communication skills across an entire medical team.

How do you think nutrition will evolve in the next five to ten years?

Man-Ning: I think in recent years, people care more and more about nutrition, I’m not sure if that is just in my immediate surroundings or in general, but I think social media has been a source to encourage people to eat healthier. There are many dietitians who use social media or television to talk about how important nutrition is. It also

seems like people care about going to the gym more as they consider their nutrition. To me, it looks like nutrition is going in a positive direction, especially because our current generation speaks up for ourselves and we talk about nutrition. While there is still incorrect information being conveyed by influencers, dietitians in the field use social media to raise our voices and educate people.



“The path to becoming a great dietitian is paved with dedication, empathy, and a commitment to supporting patients and continuously expanding your knowledge. Trust the process, and you will make a big difference.”

~Man-Ning Feng



SECOND YEAR STUDENTS

INTERNSHIP EXPERIENCES IN THEIR OWN WORDS:



Thulasi Rajasekaran
**FOOD BANK FOR
NEW YORK CITY**

“I had a wonderful time at my community and food service rotation at the Food Bank for NYC! I worked at the 116th Street location which serves as a food pantry, community kitchen, and older adults center. I had the opportunity to conduct nutrition workshops based on the Just Say Yes to Fruits & Vegetables SNAP-Ed curriculum on topics including hydration, food & mood and balanced meals. I was involved in community outreach and helped sign clients up for free dental visits, mammogram appointments and prostate cancer screening checks. I also helped prepare and serve meals during community lunches and dinners. Major highlights were when I got to lead a farmer's market tour for the older adults as well as when we took a field trip with the older adults to a farm on Randall's Island where we pickled vegetables and planted sweet yellow onions. Through this rotation, I was able to gain valuable insight into how food banks operate, the critical role they play in society and the multidisciplinary nature of addressing food insecurity.”



Naheed Cantalupo
**JILL GULOTTA
NUTRITION**

“Great hands-on experience in counseling. I had four clients that I met with weekly, it was great to get experience working with people and seeing my counseling style improve and develop. I had weekly check-ins with Jill where we discussed my clients and I could ask questions and troubleshoot with her. I also got to ask business development questions about how to set up a private practice. It was a phenomenal experience and very valuable.”



Kirsten Meyer
**NOURISHED ROOTS
NUTRITION**

“My placement was with a private practice that focuses on both neurodivergent individuals and eating disorders/disordered eating from a Health At Every Size (HAES) and Intuitive Eating (IE) perspective. I was able to sit in on a few of my preceptor's clients, which was fascinating. My project was to go through her reference library, refine the articles that would stay in the library, and create a better sense of order. I learned a lot about HAES and IE interventions, as well as the factors that can lead to the development of eating disorders.”



Sally Liu
SAVOR HEALTH

“During the fall semester, I only had one worksite placement. I worked with a company called SavorHealth, which is a remote internship for roughly 6 weeks. I created cookbooks, recipes, flyers, and social media posts and promoted healthy eating habits. Something I learned was the effective strategies that cancer patients can use to prevent or alleviate side effects during chemotherapy. I understand that it is not easy for patients to manage their side effects, but I was so surprised to know that many diet modifications can be done to help them go through the cancer treatment. I really enjoyed working with the team. They provided immediate feedback and were always willing to provide me with guidelines and clarification. I wish I could work with them for a longer time. Looking forward to my next worksite placement!”

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