

Jag är dietist och kostekonom

That means I'm educated both as an administrative and a clinical dietitian. I have been in the profession for many years and have experience from leading positions in both areas.

In Sweden there are two different education programmes for dietitians. After a basic year with biochemistry, nutrition and food science the programme is divided. The administrative programme is focused on food service administration and management, business economics and food sociology. The clinical programme focuses on physiology, nutrition, dietetics, food sociology and psychology.

The basic programme comprises 3 years and leads to a BSc in Food Service Management or in Dietetics. There is also a possibility for a fourth year, leading to MSc. PhD studies are possible and the number of dietitians with a PhD is growing, both in the clinical and administrative field. The universities also offer part- or full time courses on specific topics for continuing training. Three universities offer education programmes for dietitians; Göteborg, Umeå and Uppsala.

The administrative dietitians have a long history in Sweden – the first courses started in 1917. The first regular education programmes for clinical dietitians started in the late seventies. Before that, shorter courses (1/2 to 1 year), were arranged for those who already had an exam and experience as administrative dietitian or home economics teacher.

The Swedish Association of Dietitians with mainly administrative members was established in 1921 and is probably the oldest one in Europe. The Swedish Association of Clinical Dietitians started in the seventies but has existed in its present form since 1984. Each association has about 1200 members. Both have local branches as well as sub groups on specific topics.

Clinical dietitians, along with 20 other health care professions are regulated by the general system for the recognition of evidence of training since 2006. Authorisation is given by The National Board of Health and Welfare. Dietitians from abroad have to apply for a license to practice. The language could be a barrier to work in the clinical field. A good command of the Swedish language as well as knowledge of Swedish culture, especially food culture is essential.

Swedish dietitians also need knowledge on foreign food culture. The population in Sweden is about 9 million. 13 % are born in other countries. Many come from other Nordic countries or the Baltic States, with similar food culture while other big groups come from The Middle East, Balkan, South America and Africa.

The average salaries for dietitians are similar to the average for the country and for other health professionals like nurses, physio- and occupational therapists, about 2400 €/month, but there is a wide range. In leading positions the salary could be double this amount.

Normal working conditions include 40 hours/week, often flexible working hours and 5-6 weeks holidays. Parental benefits are generous, payable for 480 days shared equally between both parents + 120 days/year to stay at home with a sick child.

Administrative dietitians : Historically most dietitians worked with food service management in hospitals, in school meals and in the armed forces. Today the municipalities are the most common employers. The dietitian has responsibility for either all food service (kindergartens, school meals and nursing homes) or for part of it. The positions in hospitals are fewer nowadays. Many tasks are delegated to other staff, management and economics are more in

focus. Other work fields for administrative dietitians include e.g. catering companies, food industry, staff restaurants and positions as teachers.

Clinical dietitians work mainly in the health care field; in hospitals, primary care centres, municipalities and in public health but also in the food- and pharmaceutical industry, as private practitioners and as teachers and researchers. At smaller hospitals and primary care centres the dietitian is often alone in her profession. At the big university hospitals there could be 50 dietitians, most of them highly specialised. Team work with doctors and nurses is common e.g. in a diabetes team or nutrition support team.

In most cases the work of administrative as well as of clinical dietitians has a high level of independence. The role for dietitians is constantly developing and changing. We need to meet the challenges and see the possibilities to be able to form the future for the profession.



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