

Professional Associations RESEARCH NETWORK

Member Attitudes to Commercial Collaborations and Partnerships

The British Dietetic Association May 2017



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1. Executive summary of key findings

Introduction

In August 2016, the British Dietetic Association (BDA) Council commissioned PARN to carry out research to gauge member attitudes towards the BDA's commercial collaborations and partnerships. The outcome of this work is presented in the following report.

The project included a survey of the full BDA membership. PARN also carried out telephone interviews with: representatives from two of the BDA's corporate members in order to obtain a balance of views in relation to commercial partnerships; and three Health Care Professional bodies (HCPs) in order to briefly consider examples of commercial partnership/sponsorship arrangements that other HCPs currently have in place.

Survey questions were developed by PARN in consultation with the BDA project steering group. The survey comprised of a total of 59 'tick box' and multiple choice questions and included four semi-structured qualitative questions.

Half of respondents agree that it is acceptable for the BDA to generate unrestricted funds through collaborative partnerships or sponsorship, with 16 per cent of respondents 'neither agreeing nor disagreeing'. Forty per cent of respondents are satisfied with the BDA's current collaborative partnerships and/or sponsorship arrangements. Furthermore, five per cent of members suggest that there should be no restrictions placed on partnerships. There is a lack of awareness amongst respondents regarding the BDA corporate membership, with just one in five respondents being aware of BDA's current corporate members.

With regard to sponsorship support, 64 per cent of respondents believe that 'sponsors supporting research, directly or indirectly', is important to supporting them as dietitians. Respondents also feel that hosting study events is valuable to them in their practice (63 per cent). However, 56 per cent state that being provided with branded materials is not important in supporting their needs as a dietitian.

Definitions

For the purposes of this project, 'commercial collaborations and partnerships' were defined in terms of the following:

• A **'partner'** or **'collaborative partner'** is an organisation with whom the BDA collaborates on a particular project where some shared aims have been identified. This may or may not be a financial arrangement, and could be an exclusive agreement or involve several organisations.

- **'Sponsors'**: the BDA has a range of commercial sponsors organisations who attend the BDA's events, advertise in 'Dietetics Today', use the BDA's digital platforms, or purchase one of the BDA's services.
- **'Corporate member'**: an organisation who wants to work with the BDA more strategically and demonstrate support for the BDA and the profession via a membership package.

Prior to completing this survey, 35 per cent of members were aware of the distinction between collaborative partnerships and/or sponsorships and corporate members, although 65 per cent were not.

Survey results

Five-hundred-and-thirty-two responses were received from members of the BDA between 18 November 2016 and 19 January 2017. The majority of respondents (94 per cent) are full members, and 67 per cent of full members have been qualified as dietitians for more than 10 years. Seventy four per cent of respondents reside in England, with a further 12 per cent residing in Scotland, seven per cent are residing in Wales and four per cent are currently residing in Northern Ireland. (Survey responses were received from all of the BDA branch areas).

Four hundred respondents report working for the NHS, with a further 86 and 62 working in freelance practice and universities respectively. Twenty one per cent of respondents work in two or more sectors.

• Collaborative partnerships and/or sponsorship, and the industry sectors that the BDA work with

The industry sector that respondents find most acceptable to work with is 'food growers and producers' (79 per cent). The sector that members find the least acceptable to work with is made up of 'food and drink manufacturers' (45 per cent); another 45 per cent consider this sector to be acceptable. (Ten per cent have no opinion on the above).

- Thirty respondents state that the above depends on the companies collaborated with within each of the sectors (also the products the companies produce)
- Twenty three members provided negative comments about food and drink manufacturers- ready to eat/packaged foods
- Twenty two respondents provided negative comments regarding working with medical food companies (for example: baby food and clinical products)
- Seventeen members state that the above depends on the type of relationship/interaction the BDA has with companies in the above sectors

- Seventeen members state that it is acceptable for the BDA to work with companies in the above sectors, where they share the same principle and values as the BDA
- Sixteen respondents state that the BDA risks losing its credibility due to commercial collaborations, and that the dietetic profession's integrity is being undermined
- Thirteen respondents provided constructive comments about the BDA working with industry (e.g. food and drink manufacturers)
- $\circ\;$ Eleven members are concerned that there is the potential for the public to interpret collaboration as endorsement
- Eleven members provided positive comments regarding the BDA working with companies in the eleven sectors
- Eight members suggest that the BDA needs to work with a wider range of parties
- Eight members feel that further transparency is required regarding the nature of collaborative partnership(s) and/or sponsors
- \circ $\:$ Six members feel that the membership should have a say as to the collaborative partners the BDA works with
- Five members suggested that although dietitians can make an informed decision about collaboration about sponsorship/partnership(s), the public are more vulnerable to picking up incorrect messages
- All collaborative partnerships and/or sponsors are listed on the material relating to the activity supported. Members were asked whether the BDA acknowledgement of collaborative partners allows them to be adequately informed

Thirty seven per cent of members strongly agree or agree that the BDA acknowledgement of collaborative partners allows them to be adequately informed, with 18 per cent agreeing somewhat. However, 22 per cent disagree somewhat or disagree with the above, and 11 per cent strongly disagree. (Twelve per cent of respondents neither agree nor disagree with the above).

• Corporate membership

Prior to completing the survey, one in five members were aware of who the BDA's current corporate members were, although 80 per cent were not.

Forty one per cent of respondents **strongly agree**, **agree** or **agree somewhat** that the corporate membership fits the BDA's core principles: (Twenty six per cent neither agree nor disagree).

• Two members **who strongly agree** with the above suggest that corporate members help to showcase dietetics and disseminate public health messages; two other respondents

state that corporate members allow dietitians to be kept up to date with available products and provide expert input into product development

- Three members **who agree** with the above suggest that collaborative partnerships and sponsors are needed as a source of income and provide business/market intelligence; two other respondents suggest the corporate members provide the BDA and dietitians with public presence
- Three members **who agree somewhat** with the above suggest that there is the potential for the BDA to have a positive impact via their association with collaborative partners

However, 34 per cent of respondents **disagree somewhat**, **disagree**, or **strongly disagree** that the corporate membership fits the BDA's core principles:

- Eleven members who **disagree somewhat** with the above, state that they are dissatisfied with the BDA's corporate members. Five respondents also state that they are dissatisfied with 'some' of the BDA's corporate members
- Seven members who disagree that the current corporate membership as a whole fit the BDA's core principles suggest that the public could potentially interpret collaboration as endorsement; six respondents also state that they are dissatisfied with the BDA's corporate members:

"Some of these corporate member products are high in fat/sugar and wouldn't be a product that I would recommend"

- Eight respondents **who strongly disagree with the above** also suggest that the public could potentially interpret collaboration as endorsement, and six members suggest that the corporate memberships weaken the BDA's professional credibility
- Considering collaborative partnership(s) and/or sponsorship in relation to supporting the BDA's core objectives

Historically, collaborative partnership(s) and/or sponsorship with industry have helped the BDA to achieve its core objectives.

• Eighty one per cent of respondents (431) consider 'supporting public health messaging and having an impact on the availability and promotion of healthier choices' to be very important or important in helping the BDA to achieve its core objectives

Currently collaborative partnership(s) and/or sponsorship are used to support areas of the BDA's activities

 At a corporate or national level, respondents consider BDA publications to be particularly important in supporting them as members, with 29 per cent (152) rating them as very important, and a further 38 per cent (204) considering it important • At a group or branch level, the majority of respondents view funding for branch or specialist group meetings as key in supporting them as members, with 70 per cent of respondents (372) reporting this as very important or important

Members are frequently offered sponsorship support from companies

- Sixty four per cent of respondents state that sponsors supporting research directly or indirectly is very important or important in supporting them as dietitians
- Collaborative partnership and/or sponsorship arrangements with the BDA that members consider to best support their needs as dietitians

When members were asked how the BDA could best support their needs both as a dietitian and as a member of the BDA, five per cent of members suggest that there should be no restrictions on collaborative partnerships/sponsorships.

Forty per cent of dietitians are satisfied with **the current arrangements described in the BDA Partnership and Collaboration Guidelines** which enables corporate membership; collaborative partnerships/sponsorship; and advertising to BDA members, and the public:

• Eleven members state that the current system works well, and five members suggest that collaborative partnerships/sponsorships are needed for financial support

A further 37 per cent of respondents feel that the BDA should adhere to the existing BDA Partnership and Collaboration Guidelines but only permit companies to advertise to BDA members:

• Twenty one respondents suggest that the public could potentially interpret collaborative partnerships and / or sponsorship as endorsement; and six members state that the BDA needs to have an independent image in the public domain

However, 18 per cent of members would like the BDA to have complete independence from corporate partners, sponsors, and advertising.

• Nine members claim that due to commercial collaborations the BDA is losing its credibility and that there is reputational damage

Telephone interviews with Corporate Members and Health Care Professional Bodies

• Telephone interviews with two Corporate Members

In addition to the member survey, PARN carried out telephone interviews with representatives from two of the BDA's corporate members, Danone and Abbott Nutrition, in order to obtain a balance of views in relation to commercial partnerships. These telephone interviews were structured to highlight some of the reasons why sponsors and commercial partners find it valuable to work with the BDA in this way.

Experience of working with the BDA

Both company representatives advise that due to the nature of their product portfolios it is key for their companies to work in partnership with Health Care Professional (HCP) Bodies. Danone went on to note that it is logical to work with people advising the public on nutrition and dietetics; whilst Abbott Nutrition advise that dietitians are a key stakeholder for their medical nutrition business.

The two corporate members have found it very useful to gain insight into the BDA membership voice. Abbott Nutrition has obtained feedback and advice from the BDA membership via focus groups and surveys. Danone has consulted with the BDA membership in relation to some of their produces via regional groups, focus groups, and surveys.

The BDA's input (from both members and staff) is considered valuable by both corporate members, even when some elements of membership have suggested that they are perhaps 'coming up short' with product offerings. Both corporate members advise that through their partnership with the BDA they are able to have frank and open conversations with groups of healthcare professionals, and work together to feed back into the business.

• Phone interviews with Health Care Professional Bodies

Phone interviews were also carried out with representatives from three Health Care Professional Bodies (HCPs) in order to briefly consider examples of commercial partnership/sponsorship arrangements that other HCP bodies currently have in place. The bodies who kindly agreed to engage with this project were: Society of Occupational Medicine; Royal Society for Public Health; and the Royal College of Emergency Medicine.

'Collaborative partnerships or sponsors'

• The Royal Society of Public Health has lots of collaborative partnerships and sponsors. In terms of their partnership with industry, they have corporate members but also partnerships and collaborations that do not warrant a corporate membership.

- The Royal College of Emergency Medicine has financial sponsors for events, workshops and conferences for example. They have also just set up the Royal College of Emergency Medicine Foundation; this is going to be used to raise income including sponsorship and will be used to promote research in emergency medicine and become a global emergency medicine resource.
- The Society of Occupational Medicine has financial sponsors for conferences; and they are currently in the process of trying to make an arrangement that will allow their members to enjoy reduced conference costs. They also have a partnership with a magazine in the sector, and are about to link up with a professional indemnity insurer to enable them to offer a good deal on commercial insurance for nurses, and other health professionals. (This will create an income stream for the body).

'Collaborative partnership arrangements in place (such as guidelines, a strategy or an ethical code)'

- The Royal Society of Public Health has developed an ongoing live document that is like an ethical framework that helps to determine when they should be partnering and if there are any potential risks. It is something that is periodically reviewed by their nominations and governance committee. (The document is used for internal purposes).
- The Royal College of Emergency Medicine advises that they have built up custom and practice over time. They have also very recently set up the Royal College of Emergency Medicine Foundation Fund. (They advise that they are aware that the European Society of Emergency Medicine has set up an ethics committee, and that they might potentially adopt it for their new foundation).
- The Society of Occupational Medicine advises that arrangements are dealt with on a case by case basis. In terms of ethics they advise that their board needs to understand anything that could potentially have reputational impact for their organisation, and that their charity trustees are the 'protector' of the above.

'Membership views on collaborative partnerships or sponsors'

• The Royal Society of Public Health has about 6,000 members and advises that the range of member views is vast. They suggest that some members would recognise the need to work with industry in order to try and help shape or develop it; whereas others might say, 'You should not work with industry full stop.' They suggest that they try and strike the 'right balance' where they are open to working with certain parts of industry, but they are very mindful that there are certain industries, such as tobacco and defense, that they do not consider to be ethical and they would not want to be associated with them.

They also advised that they regularly engage with their members through newsletters, events and conferences; that their members are kept abreast of their latest partnerships.

- The Royal College of Emergency Medicine advises that some of their members are quite commercially aware, but that a number of their members regard the pursuit of profit as fundamentally bad.
- **The Society of Occupational Medicine** advises that they listen to their members in relation to the above, for example, in relation to a recent venture, they tested the possible option with their membership at regional groups.

2. Introduction

In August 2016, the BDA Council decided to commission research work looking at (primarily) member attitudes towards the BDA's commercial collaborations and partnerships. The outcome of this work is presented in this report.

3. Project outline

It was proposed that PARN would design and implement a survey of BDA membership. It was also initially intended that this work would be supplemented by two focus groups of 'non-engaging groups' (potential members and the public). (Please see section 4.2 on focus groups for further information).

4. Methods

The project included a survey of the full BDA membership. Survey questions were developed by PARN in consultation with the BDA project steering group. Regular teleconferences were also had with representatives from PARN and the BDA steering group.

The steering group comprised of: Sue Kellie, Deputy Chief Executive Belinda Mortell, Chair of Communications & Marketing Board Anne Holdoway, Chair of the Parenteral & Enteral Nutrition Group of the BDA Camilla Durrant, Head of Member Services Jo Lewis, External Relations & Development Officer (Primary contact)

4.1 Survey

The survey comprised of a total of 59 'tick box' and multiple choice questions, dependent upon routing, and included three semi- structured qualitative questions. Sections were included on:

- Demographics
- General questions regarding commercial collaboration and sponsorship
- Collaborative partnerships and/or sponsorship, and the sectors that the BDA work with
- Corporate members
- Collaborative partnerships and/or sponsorship in relation to supporting the BDA's core objectives
- Collaborative partnership(s) and/or sponsorship in relation to supporting areas of the BDA's activities
- Collaborative partnership(s) and/or sponsorship arrangements with the BDA that are considered by members

• Sub sections regarding any involvement with collaborative partnerships/and or sponsorship for: branch committee members and special group committee members

Four of the survey questions had both quantitative and qualitative elements and are listed as follows:

- 1 'The BDA has collaborative partnerships and/or sponsorship arrangements in place across a range of sectors. To what extent do you think it is acceptable for the BDA to work with companies in the 11 industry sectors?' [Agree; No opinion; Not acceptable]
- 2 'All collaborative partnerships and/or sponsors are listed on the materials relating to the activity supported. Do you feel that this acknowledgement of collaborative partners and sponsors enables members to be adequately informed of the companies that the BDA currently works with?'

[Strongly Agree; Strongly Disagree] [option provided to explain the above answers]

- 3 'Do you feel that the current Corporate Membership as a whole fit the BDA's core principles?' [Strongly agree; strongly disagree] [option provided to explain above answer]
- 4 'Thinking about collaborative partnership(s) and/or sponsorship arrangements with the BDA, which option below best supports your needs as a dietitian and a member of the BDA?' [choice of four options to select from] [option provided to explain above answer]

Respondents were given the opportunity to provide both quantitative and qualitative answers to the above four questions. Themes and frequencies were produced for question (1); due to the semistructured nature of this question responses were coded for multiple themes. The qualitative responses for questions (2) and (3) were categorised according to their quantitative scale and themes produced for each of the categories. The qualitative responses for question (4) were categorised according to the four options provided and themes produced for each of these options. (In relation to question (4), some members suggested that an 'other option' would have been useful for this question).

The total number of responses have been listed for each of the four qualitative questions.

Communicating the survey to the BDA membership

The survey was set up using SNAP survey software and the BDA communications team were provided with the URL link to the survey and an accompanying guide on steps to participating. This was shared as an E-zine with the BDA membership on 18 November 2016. (The 'soft' deadline for the survey was 5 January).

The BDA produced a communication plan to promote the survey. This included sending three reminders to members via: further E-zines and the December 2016 edition of the 'Dietetics Today'

magazine. A final reminder of the survey deadline, and encouragement to participate in the survey over an extended two week period, was sent on 5 January.

4.2 Focus groups

At the design stage of this project it was intended that the survey work would be supplemented by two focus groups to access the attitudes and opinions of non-engaging groups (potential members and the public). It was later decided that the composition of the focus groups should be made of: group one: service users (i.e. clients of dietitians) and group two: member dietitians (selection based on sector).

Recruitment of service users for focus group one: Two of the steering group members contacted BDA members via email, across health boards and industry in the North West and the South West – these members were asked whether they had patients or service users that might be interested in taking part in the above focus group. It, however, proved to be very difficult to recruit from this particular group so it was decided that member dietitians would be recruited for both of the focus groups.

Recruitment of member dietitians for focus group two: An invitation to partake in the above focus group was included with the initial survey Ezine and four dietitians responded to the invitation. An additional mailing was sent by the BDA to a sample of 100 members randomly selected using a stratified sample of the eleven sectors¹ that the members work in. No responses were received, so a further 500 members were sampled (as above) and contacted. Interest was received from an additional five members.

A focus group was therefore arranged as follows:

- Participants: Nine member dietitians, selection based on sector
- Objectives: To consider some of the themes from the qualitative survey data
- Recruitment: as above
- Location: BDA Head Office, Birmingham
- Date: 21 March
- Structure of meeting: The meeting was to be two hours in duration. Refreshments were to be provided and travel was to be reimbursed in line with the BDA expense claim policy.

Unfortunately, two members were unable to make either of the proposed dates and three members had to cancel the week before the event. It was reluctantly decided that a focus group of four members was not sufficient to obtain data, and thus the event was cancelled.

4.3 Telephone interviews

¹ See list of sectors in the list of survey questions (Appendices 1)

In order to obtain a balance of views in relation to the BDA's commercial collaborations and partnerships, telephone meetings were also carried out with representatives from two of the BDA's corporate members. In addition, telephone meetings with representatives from three Health Care Professional Bodies (HCPs) were carried out in order to briefly consider examples of commercial partnership/sponsorship arrangements that other HCPs currently have in place.

- **Telephone interviews with two Corporate Members: Danone and Abbott Nutrition** These telephone interviews were structured to highlight some of the reasons why sponsors and commercial partners find it valuable to work with the BDA in this way. The interview questions included the following:
 - "Why did you originally decide to approach the BDA about corporate membership?"
 - "Could you possibly talk about your experience of working with the BDA?"
 - "Do you work with any other Professional Bodies?"

• Phone interviews with Health Care Professional Bodies

The bodies who kindly agreed to engage with this project were: the Society of Occupational Medicine; Royal Society for Public Health; and the Royal College of Emergency Medicine.

The interview questions included the following:

- "Do you currently have any collaborative partnerships or work with sponsors or commercial partners?"
- "Do you have any of the following: guidelines, or a strategy or an ethical code relating to your collaborative partnership arrangements?"
- "Have you gauged from your membership how they feel about collaborative partners/sponsors?"

4.4 Project timeline

Activity	Completion dates
Survey	18 Nov – 19 Jan (2016/17)
Update report	15 Dec (2017)
Focus Group, Birmingham (cancelled)	21 March (2017)
Sponsor Phone meetings	March (2017)
Steve Godwin, Head of External Affairs, Danone	
 Fabienne Garceau, Senior Communications Manager, Abbott Nutrition: 	
Data analysis	Jan – March (2017)
Interim report	6 March (2017)
Health Professional Bodies Phone Meetings	April (2017)
 Nick Pahl, CEO, Society of Occupational Medicine 	
 Gordon Miles, CEO, Royal College for Emergency 	
Medicine	
Duncan Stephenson, Director of External Affairs, Royal	
Society of Public Health	
Draft report delivery	20 April (2017)
Feedback to be provided	27 April (2017)
Report to be sent out five working days before the Council	4 May (2017)
meeting on 11 May	

5. Attitudes to Commercial Collaborations and Partnerships Survey Results

For the purposes of this survey, 'Commercial Collaborations and Partnerships' were defined in terms of the following:

- A **'partner'** or **'collaborative partner'** is an organisation with whom the BDA collaborates on a particular project where some shared aims have been identified. This may or may not be a financial arrangement, and could be an exclusive agreement or involve several organisations.
- **'Sponsors'**: the BDA has a range of commercial sponsors organisations who attend the BDA's events, advertise in 'Dietetics Today' or use the BDA's digital platforms, or purchase one of the BDA's services.
- **'Corporate member'**: an organisation who wants to work with the BDA more strategically and demonstrate support for the BDA and the profession via a membership package.

5.1. Demographics

A total sample of 532 responses was obtained between 18 November 2016 and 19 January 2017.²

Membership category

The majority of respondents are full members of the British Dietetic Association (BDA), with 13 associate members (two per cent) and a single international member (0.2 per cent).



Figure 1: Membership category

Length of time qualified for full-time members

² The survey questions are available in Appendix 1

Sixty seven per cent of full members have been qualified for more than 10 years, while a further 21 per cent have been qualified between five and ten years. (Fifty eight members have been qualified for approximately five years of which six members are newly qualified).



Figure 2: Length of time qualified for full-time members

Country of residence

Seventy four per cent of respondents (*n*=395) are from England, with a further 12 per cent from Scotland, seven per cent from Wales and four per cent from Northern Ireland. Eight members are also currently residing 'outside of the UK in Europe' and four members are currently residing 'outside of the UK in Europe' and four members are currently residing 'outside of the UK and Europe'.



Figure 3: Country of residence

Region

Survey responses were received from all the BDA Branch areas.



Figure 4: BDA Branch areas that members work in

Sectors

Figure 5 illustrates the total number of responses for each sector, with some respondents working in multiple sectors. Four hundred respondents reported working for the NHS, with a further 86 and 62 working in freelance practice and universities respectively. Just two members reported working in the trade association sector, and no responses were received from members working in the charity/ third sector. (Respondents were able to choose more than one option for this question).³





³ This figure only presents frequencies and does not present any percentages as this would not necessarily add up to 100 per cent.



Figure 5a shows the percentage and numbers of respondents who work in multiple sectors.



Members' interaction with their local branches during the past three years

Fifty nine per cent of respondents (*n*=314) have had little involvement with their branch during the past three years, and seven percent of respondents report that their local branch is inactive. Twenty nine per cent of these respondents attend branch meetings and activities. (Only three per cent of respondents are on a branch committee at present, and a further two per cent have been on a committee during the past three years).



Figure 6: Members' interaction with their local branches

Membership of the 17 BDA specialist groups

Seventy one per cent (n=379) have been a member of at least one of the 17 BDA specialist groups in the past three years as shown in Figure 20.



Figure 7: Membership of the 17 BDA specialist groups in the past three years

Of those 379 respondents, 172 report membership of two or more groups as shown in Figure 7a.⁴



Figure 7a: Number of specialist groups that members have belonged to in the past three years

⁴ This chart does not present any percentages as this is based on sub data of the data presented in Figure 7.

Figure 8 shows which of the specialist groups respondents are currently members of, or have been members of in the past three years. The Diabetes specialist group accounts for 73 responses, and the Paediatrics specialist group accounts for 64 responses. (Respondents had the option to choose more than one answer for this question as the question refers to a three year period).⁵



Figure 8: Members being part of BDA's specialist groups

Committee members of the 17 BDA specialist groups

Forty six respondents are currently members of a specialist committee, (or have been during the past three years), and 30 respondents also having been members of other specialist committees during the past three years. Thirty members have previously been members of a committee during the last three years. (Two hundred and sixty five members have never been a member of a specialist committee).⁶



Figure 9: Members being part of the committee of a specialist group

⁵ The figure presents frequencies only, opposed to percentages as the latter would not necessarily add up to 100 per cent.

⁶ This chart does not present any percentages as this is based on sub data of the data presented in Figure 7.

Of those 76 respondents who are members on the committee of a specialist group, eight members report membership of two or more groups as shown in Figure 9a.⁷



Figure 9a: Number of groups that committee members have belonged to in the past 3 years

Eighteen respondents are currently committee members of the Diabetes specialist group (or have been in the last three years). (Respondents had the option to choose more than one answer for this question as the question refers to a three year period).⁸





⁷This chart does not present any percentages as this is based on sub data of the data presented in Figure 9.

⁸ The figure presents frequencies only, opposed to percentages as the latter would not necessarily add up to 100 per cent.

5.2. Attitudes to commercial collaborations and partnerships

'To what extent do you agree that in today's society it is appropriate for sponsorship to support organisations that have a public profile?'

Thirty three per cent of all respondents (n=173) strongly agree or agree that it is appropriate for sponsorship to support an organisation with a public profile, with 19 per cent agreeing somewhat. However, 20 per cent of respondents (n=106) strongly disagree or disagree with sponsorship supporting public organisations, while ten per cent disagree somewhat. (Nineteen per cent neither agree nor disagree with the above).





"Thinking about the BDA, to what extent do you agree that it is acceptable for your professional association to generate unrestricted funds through its collaborative partnership(s) and/or sponsorship in order to advance its core principles?"

Thirty per cent of all respondents (n=158) strongly agree or agree with generating unrestricted funds through collaborative partnership(s) and or sponsorship in order to advance the professional association's core principles, and 20 per cent agree somewhat. However, 24 per cent of respondents (n=127) strongly disagree, or disagree, and 11 per cent disagree somewhat with advancing the association's core principles via unrestricted funding from collaborative partnership(s) and/or sponsorship. (Sixteen per cent of respondents neither agree nor disagree with the above).⁹



Figure 12: Generating unrestricted funds through collaborative partnership(s) and/or sponsorship in order to advance the professional association's core principles

⁹ The results obtained in Figure 7 follows a similar pattern to the results in Figure 6.

5.3. Collaborative partnerships and/or sponsorship, and the sectors that the BDA work with

The BDA has collaborative partnerships and/or sponsorship arrangements in place, across the following sectors:

- Food and drink manufacturers staple food items (for example: bread and eggs)
- Food and drink manufacturers ready to eat/packaged foods
- Trade associations
- Food services and retail
- Food growers and producers
- Medical food companies (for example: baby food and clinical products)
- Pharmaceutical companies
- Medical equipment and device companies
- Medical technology companies
- Publishers or service providers
- Non-allied companies (for example: financial institutions and travel industries)

"To what extent do you think it is acceptable for the BDA to work with companies in the following sectors?"

The sector that most respondents found acceptable was food growers and producers (79 per cent, n=418) followed by manufacturers of staple food items (72 per cent) and publishers or service providers (70 per cent). Forty five per cent of members feel that food and drink manufacturers are acceptable, with another 45 percent (n=240) considering the sector to be unacceptable and 10 per cent having no opinion on the above.



Figure 13: The extent to which the BDA members find it acceptable to work with the above sectors

Respondents were given the option to explain their answer to the above question and 134 responses were provided. Themes and frequences were produced. Due to the semistructured nature of the above question responses were coded for multiple themes.

• It depends on the companies within the sector (also the products the companies produce) x30

"I think that all the above companies can be partnered with successfully, BUT, the big issue is the choice of partners within these categories"

"This is not a blanket agreement that all sponsorship/ partnership is acceptable. Accepting sponsorship/partnership from [names of fast food and soft drink companies] etc. would be completely unacceptable but it could be acceptable from [name of a frozen meal home delivery service] or even from huge companies like [name of multinational FMCG business]"

 Negative comments about food and drink manufacturers- ready to eat/packaged foods x23

"Although I agree in principle to collaboration there would be some manufacturers or packaged foods that I would not want the BDA to be associated with"

"I feel very strongly that the BDA should not accept sponsorship from companies that make high sugar/processed foods. It goes against our professional advice that we would give the public and sends the wrong messages"

• Negative comments regarding working with medical food companies (for example: baby food and clinical products) x22

"The BDA should not support baby milk and food companies where this is contradictory to good health messages. I.e. the promotion of follow on milks etc. and ready prep baby foods all of which are not required"

"In principle I think it is acceptable for the BDA to collaborate or have sponsorship arrangements in place with manufacturers of clinical nutrition products, however, I am totally opposed to any such arrangements with manufacturers of infant milk formula. I strongly object to the advertising of infant milk formula in Dietetics Today"

• Comments stating that it is acceptable to work with clinical product companies but not infant formula companies x4

"Medical food companies: This is a mixed answer but I have answered that it is not acceptable for the BDA to be aligned with food companies as I do not support working with baby food and formula companies but I do think that it is acceptable with clinical products companies"

• Members state that it is acceptable for the BDA to work with companies/ sectors if they shares the same principle/ethos/values as the BDA x17

"I am happy for the BDA to work collaboratively with food and drink manufacturers if their principles are the same as the BDA and promote our messages"

"The BDA should have a set a core principles for sponsoring and collaborating with other sectors. So long as these principles are upheld consistently, there should be no conflict of interest"

• Comments suggesting that it depends on the type of relationship/interaction the BDA has with companies in the above sectors x17

"Whilst I do support working with partners I do feel that financial ties do not sit comfortably with me. I do not think the BDA should have any financial links with corporate companies as this could potentially undermine the work the BDA are doing as we may be seen to be biased"

"It is difficult as these groups contain a range of companies, which is difficult to assess. The interaction is also important, is it passive funding or is it a critical engagement?"

• Comments suggesting that the BDA risks losing its credibility / that the dietetic profession's integrity is being undermined by working with certain companies x16

"It is clear that collaborating/taking sponsorship from any of the above is likely to lead to conflict of interest and the risk of our profession being less credible in the eyes of the public"

"Recent choices for advertising have led to questions being raised for example [company names]. How can we possibly associate with such products and remain credible as a profession?"

 Ethical issues raised by members regarding working with companies that potentially conflict with World Health Organisation guidelines (for example, mentioning WHO or Amnesty International) x3

"I feel it is also important that any company the BDA works with is acceptable to the membership around broader ethical issues. For example, do we really want to be associated with companies singled out by Amnesty International for profiting from child labour and slavery? Please take a look at this: <u>https://www.amnesty.org/en/latest/news/2016/11/palm-oil-global-brands-</u> profiting-from-child-and-forced-labour/"

• Constructive comments about the BDA working with industry (for example, food and drink manufacturers) x13

"I think it is important that the BDA works with companies within the food industry and medical food companies in terms of encouraging them to promote healthy messages and improve nutritional profiles/composition where appropriate"

"We are in a better place to influence food and drink manufactures by working with them to advise and improve the products than to just stand in opposition. They are not going to go away and by working with them to produce healthier products we will be in a stronger position to improve health"

• Positive comments regarding the BDA working with companies in the above listed sectors x11

"It is essential for the BDA to work with the sectors mentioned above. The BDA and its members can only provide expert input where appropriate through collaborative working and there is a long history of successful and beneficial collaborative working"

"I trust the BDA as an organisation enough to support collaboration with 3rd parties"

• Partnerships help to raise the BDA's profile x3

• The potential problem of the public interpreting collaboration as endorsement x10

"The members of the public regardless of the type of sponsorship and the transparency of the process will see that the sponsorship/link with the BDA as endorsement of the product"

• Comments suggest that the BDA needs to work with a wider range of parties x8

"I think sponsorships should come from a range of companies in the same industry instead of a single company as this removes bias and allows us to create working relationships with a larger number of companies and industries"

"Although it may be acceptable to work collaboratively with partners, there needs to be an equal opportunity for various partners to be provided with this opportunity and therefore be acknowledged as mentioned above. To have 1 sponsor, for example, may be putting the BDA or service "at risk" and could be misconstrued i.e. inappropriate collaboration/ vested interest etc."

• Further transparency is required regarding the nature of collaborative partnerships and/or sponsors x8

"I also think there needs to be more transparency/information provided to members in terms of how much funding is secured, in exchange for what from the BDA, and how the BDA is using those funds - as I find it awkward having to explain to patients (and to myself) ..."

"I think the BDA needs to work alongside a range of partners, however the nature of those arrangements are not always made clear to BDA members or to the wider public"

• Members should have a say as to the collaborative partners the BDA works with x6

"Perhaps members should have input into which companies we collaborate with?"

"I think the membership are not consulted as to who and why their professional association are associating with industry and this is something that should be consulted/agreed on"

• The BDA must be an independent body and beyond the influence of collaborative partnerships x6

"The BDA must be an independent body and be beyond reproach from collaborative partnerships and/or sponsors. This should be the mainstay of the BDA now and most importantly in the future"

"We should operate as an independent body of professionals, free from Conflicts of Interest and away from the agenda of Big Business who do little to serve the interest of the individual in terms of nutrition"

 Dietitians can make an informed decision about collaboration with sponsors/partnerships whereas the public are more vulnerable to picking up incorrect messages x5

"[Company name and products] are one company the BDA have recently collaborated with and I think having their branding on materials sends the wrong messages to the public. We as dietitians understand their place but the public don't and then it looks as though we are contradicting ourselves".

• Dietitians are educated enough to discern for themselves whether a product is appropriate for their practice or not x4

"As dietitians we can then make our own mind regarding what they are advertising. I do not feel it would be ok for companies to make demands based on their sponsorship"

- The BDA is guilty of endorsement because they endorse either by receiving funds, or by being perceived as having taken funds x1
- Collaborative partnerships and/or sponsorship project based work takes extensive time, effort and requires resources which the BDA does not have x3

"I do not think that the BDA has the infrastructure to vet potential partners adequately. Issues such as ethical and sustainable food production, fair and non-discriminatory employment practices, issues of fair trade all need to be considered"

Negative comments about pharmaceutical companies x3

"I understand the need for the BDA to have sponsorship however I feel that the sponsorship should come from areas not directly linked with food/medical devices/pharmacy etc."

- Negative comment about medical device companies x1
- Special interest groups and branch groups would not be able to function effectively without sponsorship x1

All collaborative partnerships and/or sponsors are listed on the material relating to the activity supported.

"Do you feel that this acknowledgement of collaborative partners and sponsors enables members to be adequately informed of the companies that the BDA currently works with?"

Thirty seven per cent of all respondents (n=194) strongly agree, or agree that the BDA's acknowledgement of collaborative partners allows them to be adequately informed, with 18 per cent agreeing somewhat. However, 23 per cent (n=124) either strongly disagree, or disagree, and a further ten per cent disagree somewhat. (Twelve per cent of respondents neither agreed nor disagreed with the above).



Figure 14: Acknowledgement of collaborative partners and/or sponsors

Respondents were given the opportunity to explain their answer to the above question and 64 responses were provided.

Members who strongly agree:

- The relationship [between companies and the BDA] should be clearly defined and stated on all materials **x2**
- If information is clearly printed, then enough has been done for the information to be available **x1**
- Member feels adequately informed of the BDA's collaborative partnership and/or sponsorship arrangements **x1**

Members who agree:

• The BDA's involvement with collaborative partners and/or sponsors needs to be clear x3

"Being a registered dietitian who generally works with the public – I need to know who the BDA is working with"

- Member feels adequately informed of BDA's collaborative partnerships and/or sponsorship arrangements **x2**
- All commercial/sponsor [information] packages should be readily visible if members want to be informed of any advertising arrangements between the BDA and its collaborative partners and/or sponsors **x1**
- Member expects the BDA to uphold the same high principles as other professional bodies regarding acknowledgement of the collaborative partnership and/or sponsorship arrangements **x1**
- Member wants to be better informed of the collaborative partners and/or sponsors' financial and advertising arrangements **x1**

Members who agree somewhat:

• Members request for more information regarding BDA's involvement with collaborative partners and/or sponsors **x5**

"The BDA should have a list of our collaborative partners visible on our website so that we are informed before patients point them out to us on products"

• All information regarding the BDA's involvement with collaborative partners and/or sponsors should be transparent and accessible **x3**

"As I understand it, the evidence suggests that sponsorship agreements etc. can influence even when relationships are transparent etc., but the financial practicalities and need for the BDA to keep its own profile 'out there' have to be considered too"

- The BDA must still be seen as an independent body and beyond the influence of collaborative partners and/or sponsors **x2**
- Member suggests that some partners and/or sponsors damage the BDA's reputation, which also undermines the dietitian's profession **x1**
- Member suggests that although it is acceptable to inform the membership, it would be better to seek consultation and opinions of members before agreeing to work with them **x1**

Members who neither agree nor disagree:

- There is room for improvement **x1**
- Member wants to be better informed of the collaborative partners and/or sponsors' financial arrangements **x1**
- Member trusts the BDA to make appropriate choices with regard to collaborative partners and/or sponsors but suggests there should also be explanatory notes available to help keep the dietitian informed **x1**

Members who disagree somewhat:

• Members request for more information regarding BDA's involvement with collaborative partners and/or sponsors **x10**

"Update in Dietetics Today / via e-zine email would be good to see who the BDA are working with"

"This is advertising the support or sponsorship, it is not informing members about the sponsorship"

• Members are unclear about the clear extent and nature of the BDA's relationship with the collaborative partners and/or sponsors **x2**

Members who disagree:

• More needs to be done for members to be adequately informed of the BDA's collaborative partnership and/or sponsorship arrangements **x9**

"Just listing it feels inadequate. A full description of the involvement should be there"

"I think that the BDA should list all of its sponsors/ collaborative partners in regular updates for members, e.g. in dietetics today magazine"

"It is difficult to find information on sponsorship on the website"

- Member considers that some partners and/or sponsors damage the BDA's reputation, which also undermines the dietitian's profession **x1**
- Sponsors are taking up too many pages in Dietetics Today x1

Members who strongly disagree:

• Members request more information regarding the BDA's involvement with collaborative partners and/or sponsors **x9**

"If you do not receive a specific material as it is not relevant to your practice, it is then difficult to know who the BDA is working with. This detail should be on website and annual report etc."

"Needs to be a clear statement of all collaboration/sponsorship etc. on the BDA public pages"

• Members consider that some partners and/or sponsors damage the BDA's reputation, which also undermines the dietitians as impartial professionals **x3**

"It enables members to be informed but the issue in my view is that it is inappropriate in the first place and may invalidate the activity and bring the profession into disrepute"

• Member is dissatisfied with the acknowledgement of the BDA's involvement with collaborative partners and/or sponsors **x2**

5.4. Corporate membership

'Prior to completing this survey, were you aware of the distinction between collaborative partnerships and/or sponsorships and corporate members?'

Thirty five per cent of all respondents (n=185) were aware of the distinction between collaborative partnerships and/or sponsorships and corporate members, while 65 per cent (n=344) were not.

'Prior to completing this survey, did you know who the BDA's current corporate members are?' One in five members were aware of the BDA's Corporate Members.

'Do you feel that the current corporate membership as a whole reflects the BDA's core principles?' Only five per cent of respondents (n=26) strongly agree that the corporate membership fits the BDA's core principles, with 36 per cent agreeing or agreeing somewhat. However, 14 per cent of respondents (n=74) 'strongly disagree' with the above, and 20 per cent either disagree, or disagree somewhat. The remaining 26 per cent (n=137) neither agree nor disagree.



Figure 15: Do you feel that the current Corporate Membership as a whole reflects the BDA's core principles?

Respondents were given the opportunity/option to explain their answer to the above question and 194 responses were provided:

Members who 'strongly agree' that the current corporate membership as a whole fits the BDA's core principles:

- Positive comments about the BDA's corporate members fitting the BDA's core principles (x7):
 - Corporate members help to showcase dietetics and disseminate public health messages x2
 - Allows dietitians to be kept up to date with available products and provide expert input into product development **x2**

- Collaborative partners are health/nutrition focused and make a positive contribution to the profession and society x2
- General comments x1

"Corporate members agree with the BDA core principles"

Members who 'agree' that the current corporate membership as a whole fits the BDA's core principles:

- Positive comments about the BDA's corporate members fitting the BDA's core principles (x21):
 - General comments **x6**

"Companies chosen meet the BDA's core principles"

- Collaborative partnerships and sponsors are mainly needed as a source of income, and provide business/market intelligence **x3**
- To help give the BDA and dietitians more public presence x3
- Companies contribute to the dietetic management of patients x3
- Members are not aware of current corporate members but trust the BDA to make appropriate choices **x2**
- \circ ~ The products sold by collaborative members are reputable x1
- Constructive comments about working with collaborative partnerships / sponsorships in industry:
 - Both industry and the BDA can help shape future initiatives to help support dietitians x1
- Companies provide support for the BDA x1
- BDA needs to develop corporate membership or else there will be a vacuum of nonscientific organisations **x1**
- *Middle-ground comments* (x1):
 - Corporate members meet the BDA's core principles but corporate members are probably trying to generate some profit x1
- *Negative comments* suggesting that the corporate members do not fit with the BDA's core principles **(x3)**:
 - \circ The corporate members do not wholly fit with the BDA's core principles x2
 - There has to be scrutiny of marketing ploys used by the companies **x1**

Members who 'agree somewhat' that the current corporate membership as a whole fits the BDA's core principles:

- Positive comments about the BDA's corporate members fitting the BDA's core principles (x11):
 - o General comments x6

"Those involved share the same principles"

- Constructive comments about working with collaborative partnerships / sponsorships in industry:
 - There is the potential for the BDA to have a positive impact via associations with collaborative partners x3
 - Suggestions to include companies such as gluten free product producers x1
- Collaborative partnerships and sponsors are needed as a source of income x1
- *Middle-ground comments* (x4):
 - The BDA should only allow certain companies to advertise products x2
 - Corporate members do fit but the relationship with the BDA needs to be managed very carefully x1
 - Not ideal but necessary x1
- *Negative comments* about corporate members that do not meet or do not wholly fit with BDA's core principles (x9):
 - General comments x4

"Corporate members are probably trying to generate profit, and BDA is an nfp [not for profit] organisation"

- Information is biased and messages can be misinterpreted if funded by corporate members x3
- o Involvement of one corporate member at an event could create bias x1
- It could be discriminatory **x1**

Members who 'neither agree nor disagree' that the current corporate membership as a whole fits the BDA's core principles:

- *Positive comments* about the BDA's corporate members meeting BDA's core principles (x7):
 - Core principles are flexible enough to allow for corporate memberships x1
 - Member is not aware of current corporate members but relies on the BDA to make appropriate choices x1
 - The BDA ensures there is evidence based information x2
 - Constructive comments about working with collaborative partnerships / sponsorships in industry:
 - Include more companies that are from a similar sector (e.g. if the BDA is sponsored by [name of supermarket chain], then we would want more supermarkets to be involved) x1
 - Working with corporate members will help the BDA achieve more x2
- Middle-ground comments (x4):
 - Corporate members may fit the BDA's core principles but can the relationship be justified if it were to be brought up in the media? **x1**
 - It represents a broad range of companies but does not include companies that sell 'real food' and thereby promote healthy eating messages x1

- Needed for source of income but offset by accusations of corruption when accepting support from the food industry x1
- \circ $\;$ This needs to be considered from the public's perspective x1
- *Negative comments* about corporate members that do not meet or do not wholly fit with the BDA's core principles (**x20**):
 - Members are dissatisfied with the BDA's corporate members **x6**
 - Members are dissatisfied with 'some' of the BDA's corporate members x6
 - A professional organisation such as the BDA has a different set of core values than a company that is out for profit x5
 - Sales tactics employed by nutritional product companies could be seen as manipulative / lacking integrity x1
 - It affects the BDA as a source of independent advice **x1**
 - Endorsement of products which corporate members produce complicates the picture x1

Members who 'disagree somewhat' that the current corporate membership as a whole fits the BDA's core principles:

- Negative comments (x31)
 - Members are dissatisfied with the BDA's corporate members x11
 - Members are dissatisfied with 'some' of the BDA's corporate members x5
 - o Issue of the public potentially interpreting collaboration as endorsement x4
 - It affects the BDA as an independent body and diminishes the organisation's professional esteem and reputation for being unbiased x3
 - The corporate members are not sufficiently diverse and should be representative of all sectors **x2**
 - Comments on relationships with corporate members:
 - Corporate companies gain more access to the membership than the membership have with the corporate members x1
 - Wariness of bias due to corporate influence over the BDA x1
 - A professional organisation such as the BDA has a different set of core values than a company that is out for profit x2
 - Constructive comments about working with collaborative partnerships / sponsorships in industry:
 - 'One off' arrangements (e.g. for corporate members to get access to BDA opinions/views and also access to members via Dietetics Today, mailings etc.) would be more controllable x1
 - Membership fees are expensive **x1**
- *Middle-ground comments* (x1):
 - Important for the BDA to be unbiased but collaborations are also needed x1
Members who 'disagree' that the current corporate membership as a whole fits the BDA's core principles:

- Negative comments (x24):
 - Issue of the public potentially interpreting collaboration as endorsement x7
 - Members are dissatisfied with BDA's corporate members x6

"Some of these corporate member products are high in fat/sugar and wouldn't be a product that I would recommend"

- Associations with corporate companies do not promote integrity and recommendations are unbiased x2
- Voicing concerns regarding the influence of corporate members on the BDA:
 - Corporate members should not have a say in policy of the BDA x1
 - Concerned about the undue influence that powerful global partners may exert within the BDA x1
- They do not link with the BDA's core principles as they are corporate companies **x1**
- It affects the BDA as an independent body x1
- Being associated with certain food manufacturers may allow the public to have a negative perception of the BDA x1
- \circ The BDA should not be associated with food companies / high street products x1
- \circ The BDA's collaborations are biased towards particular sectors/producers x1

"BDA should also promote the use of normal, everyday foods to achieve a balanced diet"

- Comments on relationships with corporate members:
 - Companies are trying to take advantage of the BDA for monetary gain x1
- Current corporate members are too restrictive to represent the BDA core principles x1
- Middle-ground comments (x2):
 - \circ $\;$ It depends on what the corporate members are selling x1
 - Acceptance of some collaborative partners but not others x1

Members who 'strongly disagree' that the current corporate membership as a whole fits the BDA's core principles:

- Negative comments (x47):
 - Negative comments about specific corporate companies / products x23
 - Issue of the public potentially interpreting collaboration as endorsement **x8**
 - Corporate memberships weaken the BDA's image, with regard to its credibility, independence and impartiality x6

- Clinical practitioners cannot be objective and carry themselves with pride when they are influenced by companies who are out to make a profit **x5**
- Advertising with logos goes against the BDA's core principles of being unbiased x2
- The BDA's relationship with corporate members does not explain the type of relationship it would be helpful to see this openly disclosed to all members **x1**
- The corporate members are not sufficiently diverse and should be representative of all sectors x1
- Member is wary of giving any organisation blanket approval for corporate memberships x1
- Middle-ground comments (x2):
 - The BDA should not have any collaborations with certain corporate members but sponsorship of events is reasonable **x1**
 - The BDA should not be linked to commercial food companies but understandably this will have financial implications **x1**

5.6 Collaborative partnership(s) and/or sponsorship in relation to supporting the BDA's core objectives

Historically, collaborative partnership(s) and/or sponsorship with industry has benefitted the BDA in three ways:

- i. Addressing alternative income and resourcing for the BDA
- ii. Raising the profile of the BDA, reaching a broader audience and influencing more stakeholders
- iii. Supporting public health messaging and having an impact on the availability and promotion of healthier choices

"In your opinion, how important do you feel each of the above are in helping the BDA to achieve its core objectives?"

One-hundred-and-fourty-four respondents (27 per cent) consider addressing alternative income and resourcing to be very important in achieving the BDA's core objectives. A further, 213 respondents (40 per cent) also ranked this as important and 99 respondents (19 per cent) ranked this as moderately important.

Two hundred and fifty six respondents (48 per cent) state that raising the profile of the BDA, reaching a broader audience and influencing more stakeholders is very important. The majority of respondents (58 per cent) consider 'supporting public health messaging and having an impact on the availability and promotion of healthier choices' to be very important.



Figure 16: In your opinion, how important do you feel each of these are in helping the BDA to achieve its core objectives?

5.7. Collaborative partnership(s) and/or sponsorship in relation to supporting areas of the BDA's activities

Currently collaborative partnership(s) and/or sponsorship are used to support the following areas of the BDA's activities.

At a corporate / national level:

- BDA Live, BDA Vision and BDA training
- BDA publications and magazines (for example: 'Dietetics Today')
- Awards
- Travel scholarships/bursaries
- Educational grant for educational activities and
- Educational grant for the development of educational materials/resources
- Special projects (for example: BDA Work Ready)

"How important do you feel the above areas are in supporting you as a member?"

At a corporate or national level, respondents consider BDA publications to be the most important area in supporting them as members, with 29 per cent rating it very important, and a further 38 per cent considering it important. This was followed by educational grants for the development of educational materials/resources and educational grants for educational activities, with 63 per cent and 61 per cent respectively marking these as either important or very important. Respondents ranked awards as the least important, with only 39 per cent considering them to be important or very important. (Eighteen per cent do not consider awards to be important.)



Figure 17: Helping the BDA to achieve its core objectives (Corporate/National Level)

Group/Branch level:

- Funding for branch and specialist group meetings (for example: study days)
- Professional awards
- Educational grant for educational activities
- Educational grant for the development of educational materials/resources
- Research and audit awards

"How important do you feel the above areas are in supporting you as a member?"

At a group or branch level, the majority of respondents view funding for branch or specialist group meetings as key to supporting them as a member, with 372 respondents (70 per cent) reporting this as very important or important. Similarly to the pattern observed for Corporate / National level (see, Figure 12), the next two most important BDA activities are the educational grants. The least important BDA activity at local/branch level is considered to be professional awards, with less than half (42 per cent) rating this to be very important or important, and 93 respondents (17 per cent) rating this as not important.



Figure 18: Helping the BDA achieve its core objectives (Group/Branch Level)

Members are frequently offered the following sponsorship support from companies.

- Funding your attendance at professional or scientific events
- Attending your department's lunchtime meetings to update product knowledge
- Having access to product samples
- Being provided with branded materials (such as pens and post its etc.)
- Being provided with patient information sheets (such as packs for newly diagnosed clients)
- Hosting study events for dietitians to have clinical or professional updates
- Supporting research (directly or indirectly)
- Hospitality, such as a networking dinner

"How important do you feel the above areas are in supporting you as a dietitian?"

With regard to sponsorship support, the majority of respondents (79 per cent) state that sponsors supporting research, directly or indirectly, is very important, important or moderately important to supporting them as a dietitian. This is closely followed by hosting study events and having access to product samples, with 77 per cent and 75 per cent, respectively rated as very important, important or moderately important. However, 56 per cent stated that being provided with branded materials, and hospitality (40 per cent) is not important in supporting their needs as a dietitian.



Figure 19: Helping the BDA to achieve its core objectives with sponsorship support

5.8. Collaborative partnership and/or sponsorship arrangements with the BDA that members consider to best support their needs as dietitians

"Thinking about collabortive partnership(s) and/or sponsorship arrangements with the BDA, which option best supports your needs as a dietitian and a member of the BDA?"

When asked how the BDA could best support their members, 213 respondents (40 per cent) are satisfied with the current arrangements. This is closely followed by the 196 respondents (37 per cent) who feel that the BDA should adhere to the existing BDA Partnership and Collaboration Guidelines but only permit companies to advertise to BDA members. Ninety-eight respondents (18 per cent) would like complete independence from corporate partners, sponsors or advertising. The remaining 25 respondents (five per cent) would like there to be no restrictions on collaborative partnership(s) and/or sponsorship.



Figure 20: Supporting your needs as a Dietitian and a member of the BDA

Respondents were given the option to explain their answer to the above question and 121 responses were provided:

Option 1: *No restrictions on collaborative partnerships / sponsorships*

- The BDA needs to be proactive and allow for new collaborations x2
- Collaborative partnerships/sponsorships are needed as a source of income x1
- There should be no collaborative partnerships/sponsorship restrictions nonetheless the information should be easy to find **x1**
- There should be no collaborative partnership or sponsorship restrictions, but the organisations need to re-shift their focus to fit with the BDA **x1**

Option 2: As per the current arrangements described in the BDA Partnership and Collaboration Guidelines which enables corporate membership; collaborative partnerships/sponsorship; and advertising to BDA members, and the public

- The current system works well **x11**
- Information released to the public should be carefully reviewed by the BDA x5
- Collaborative partnerships/sponsorships are needed for financial support x5
- The BDA must fulfil its objective of spreading [health] messages to the public x4
- Careful selection around those chosen as collaborative partners is needed x4
 - As above, but the 'need' for sponsorship / corporate involvement is also needed x2
- Collaborative partnerships/ sponsorships raise the profile of the BDA x4
 - As above, but this must not conflict with the BDA ethos **x1**
 - As above, but too much time is also being given to commercial drug representatives in the hospital / community setting, which questions the relevance of having these relationships x1
- The BDA can no longer work alone to have an impact **x1**
- Collaborative partnerships/sponsorship are a necessity for the BDA x1
- It would be unwise to have no restrictions on collaborative partnerships/sponsorships x1
- The potential problem of the public interpreting collaboration as endorsement **x1**
- It should be clear as to 'why' the collaboration is in place x1
- The guidelines should continue to be regularly reviewed to ensure there is no inappropriate influence exerted by collaborative partners **x1**
- Collaborative partnerships/sponsorship should come from more varied companies x1
- The BDA should support the development of products **x1**
- Keep members up to date **x1**

Option 3: Adhering to the existing BDA Partnership and Collaboration Guidelines but only permitting companies to advertise to BDA members

- There is a perception by some members that the public is confused over whether the BDA is interpreting collaborative partnerships and / or sponsorship as endorsement **x21**
 - As above; the public is more vulnerable to picking up incorrect messages than dietitians who can make an informed decision **x2**
- The BDA needs to have an independent image in the public domain **x6**
- Funding from collaborative partnerships and/or sponsorships is important, but [health] messages should not be undermined **x4**
- Unhappy with BDA's partnerships / sponsorships since these companies breach or undermine national public health **x3**
- Association with some of these companies in public view could tarnish the BDA's name as a healthy eating profession and reduce credibility **x2**
- Advertising to the public may not give the BDA sufficient control over the [health] messages x2
- Dissatisfied with some of the adverts used in BDA publications as they do not fit with BDA's core ethos, and they are likely to be biased **x2**
- Dietitians and the BDA are open to criticism x1
- The benefits of these relationships need to be defined **x1**

Option 4: Independence with no corporate members, collaborative partnerships or sponsors, or advertising

- The BDA is losing its credibility and there is reputational damage x9
 - As above, but agrees with certain collaborative partnerships and/or sponsorships x1
- The BDA should be independent **x4**
 - As above, but the BDA also needs to preserve their unique selling points, such as being able to use their expertise x1
- BDA's money is not well spent **x3**
- The value of the profession lies in our impartiality x2
- Problem of the public interpreting collaboration as endorsement x2
- Educational sessions given by companies promoting a product is not education but a marketing ploy **x1**
- The BDA is being sold products that are 'demoralising' x1
- Companies influence decision around product use to both professionals and the public x1
- Healthcare should not be used to advertise money making businesses x1

5.9. Sub sections regarding any involvement with collaborative partnerships and/or sponsorship for: Branch committee members, Special group committee members, and 'Non-committee' members

'Branch Committee Members' and their involvement with the decision making process of collaborative partnership(s) and/or sponsorship

Of the 27 branch committee members, 17 state that they have been involved in the decision making process regarding collaborative partnership and/or sponsorship on at least one occasion, ten have not.



Figure 21: Branch committee members being involved with the decision making process

Of the 17 branch committee members that have been involved in the decision making process regarding collaborative partnership and/or sponsorship on at least one occasion, 14 members reported that their committee considered funding from partners for branch meetings. (Respondents had the option to give more than one answer for this question).¹⁰





¹⁰ The figure presents frequencies only, opposed to percentages as the latter would not necessarily add up to 100 per cent

The 17 branch committee members were asked whether the committee used the BDA Partnership and Collaboration Guidelines to assist with the decision making process. Six of the 17 branch committee members suggest that they have been used, and nine members are unsure.



Figure 23: Have the committee generally used the BDA's Partnership and Collaboration Guidelines to assist them with the decision making process?

- Among the 17 branch committee members who have been involved in the decision making process, six feel that the BDA's partnership and collaboration guidelines provide an appropriate framework. (Six were unsure, and five are not aware of the guidelines.)
- Of the ten branch committee members who have not been involved in the decision making process (see Figure Q17), three members feel that the guidelines provide an appropriate framework to make decisions about collaborative partnership(s) and/or sponsorship, while one member did not. Five of these members were unaware of the guidelines. (One member was unsure).

'Specialist Group Committee members' and their involvement with the decision making process of collaborative partnership(s) and/or sponsorship

Twenty seven specialist committee group members have been involved in the decision making process for collaborative partnership and/or sponsorship on one or more occasions.





Special group committees were most likely to consider funding for specialist group meetings (n=25), and funding for educational grants (n=10) or professional awards (n=9).



committee considered?

When asked whether the specialist committees used the BDA's collaboration guidelines, 13 of the 27 respondents stated they had, five claimed they had not and nine were unsure.



Figure 26: Did the committee generally use the BDA's Partnership and Collaboration Guidelines' to assist them with the decision making process?

Eleven of the 27 respondents suggest that the guidelines are an appropriate framework for decision making, with only one respondent suggesting that they are not. (Nine respondents are unaware of the guidelines).



Figure 27: Do you feel that the BDA Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

'Non-Committee' Members and their involvement with the decision making process of collaborative partnership(s) and/or sponsorship

- Those survey respondents who are not committee members of branches or specialist groups were given the opportunity to advise whether they have ever referred a company to their branch. Twenty respondents have referred a company to their branch on at least one occasion. A further five respondents have referred a company on more than one occasion.
- Nineteen of the 25 'non-committee' members were most likely to consider 'educational grants for educational activities'. Nine respondents also considered 'educational grant for the development of educational materials' closely followed by 'professional awards', which was opted by eight respondents, and one was unsure. (Respondents had the option to choose more than one answer for this question).
- Seven of the above referrals said that this led to a sponsorship arrangement with a company.
- Among the 25 'non-committee' members, 11 are familiar with the BDA Partnership and Collaborative Guidelines. However, five are unaware of the guidelines and nine are unsure.
- Ten of the eleven respondents who were familiar with the Guidelines feel that the Guidelines
 provide an appropriate framework to make decisions about collaborative partnership(s)
 and/or sponsorship, with only one respondent suggesting that they are not. However, six were
 unsure, and eight were not aware of the Guidelines.

8. Conclusions

Members generally agree with the BDA's commercial collaborations and partnerships:

Half of the respondents agree that it is acceptable for the BDA to generate unrestricted funds through collaborative partnerships or sponsorship, with 16 per cent of respondents 'neither agreeing nor disagreeing'. Forty per cent of respondents are satisfied with the BDA's current collaborative partnerships and/or sponsorship arrangements. Furthermore, five per cent of members suggest that there should be no restrictions placed on partnerships. With regard to sponsorship support, 64 per cent of respondents believe that 'sponsors supporting research, directly or indirectly', is important to supporting them as dietitians. Respondents also feel that hosting study events is valuable to them in their practice (63 per cent).

However, not all members agree with the BDA's commercial collaborations and partnerships, and some members would like the BDA to be independent from collaborative partnerships or sponsors. Nonetheless, one could argue that there are always going to be a plethora of views held by members of professional bodies, and that the above position is not exclusive to the BDA. Indeed, two of the Health Care Professionals (HCPs) bodies that were engaged with for the purposes of this project advise that their members' views also substantially vary in relation to working with industry and generating unrestricted funds.

It is interesting to note that the majority of survey questions include a neutral option response, i.e. 'neither agree or disagree', 'no opinion', or 'not applicable':

A considerable number of respondents choose a neutral answer in relation to many of the survey questions, with a broad range of between eight and 26 per cent. For example, 16 per cent of respondents 'neither agree nor disagree' that it is acceptable for their professional association to generate unrestricted funds through its collaborative partnership(s) and/or sponsorship in order to advance its core principles.

However, there are two questions where neutral answers provided may be due to reasons other than, or in addition to, neutrality. For example, although 26 per cent of respondents 'neither agree nor disagree' that the current corporate membership as a whole reflects the BDA's core principles, a number of members advise that they are unaware of who the corporate members are. This factor may have affected their neutral stance. Also although between eight and 36 per cent of members advise that they consider it unacceptable for the BDA to work with companies in the 11 industry sectors, some members state that their answer depends on the specific companies that the BDA works with. Some members may have therefore chosen the neutral answer option for the above reason.

Thirty members state that in relation to the question regarding whether it is acceptable to work with companies in the 11 sectors their answer depends on the specific companies that the BDA currently works with:

It should be noted that the working group initially considered listing a number of organisations that the BDA has worked with in a recent period, to ask members to indicate their acceptability for collaboration. However it proved difficult to systematically select companies for inclusion and the

group felt that taking a sectorial approach would give the BDA more insight into member views in order to be able to apply the findings in the longer term. It was therefore agreed that the 11 industry sectors that the BDA works with would be listed in the survey, and members were given the opportunity to advise whether they feel it is acceptable for the BDA to work with companies within these industry sectors.

The BDA has an online partnership and collaboration strategy, guidelines and toolkit which have an online presence; these are therefore available to both members and the public;

The HCP bodies were asked whether they had similar arrangements to the BDA. Although each of three HCP bodies have structured arrangements in place, none of them have a specific strategy, guidelines, or specific documentation with an online presence.

9. Appendices

Appendix 1. Attitudes to Commercial Collaborations and

Partnerships Survey Questions

Throughout the survey, 'Commercial Collaborations and Partnerships' are referred to in terms of the following:

A **'partner'** or **'collaborative partner'** is an organisation with whom the BDA collaborates on a particular project where some shared aims have been identified. This may or may not be a financial arrangement, and could be an exclusive agreement or involve several organisations.

'Sponsors': the BDA has a range of commercial sponsors - organisations who attend the BDA's events, advertise in 'Dietetics Today' or use the BDA's digital platforms, or purchase one of the BDA's services.

'Corporate member': an organisation who wants to work with the BDA more strategically and demonstrate support for the BDA and the profession via a membership package.

Questions

Q1. Which of the following BDA membership categories apply to you?

Full member Associate member (Go to question 3) Student member (Go to question 3) Affiliate member (Go to question 3) International member (Go to question 3) Alliance member (Go to question 3)

Q2. How long is it since you qualified in Dietetics?

Less than 1 year 1-5 years 5-10 years 10-20 years More than 20 years

Q3. How long have you been a member of the BDA?

Less than 1 year 1-5 years 5-10 years 10-20 years More than 20 years

Q4. What is your country of residence?

England Scotland Wales Northern Ireland Outside of the UK, in Europe (Go to question 6) Outside of the UK & Europe (Go to question 6)

Q5. Which BDA Branch area do you work in?

North East England South East England South West England East England East Midlands West Midlands London Yorkshire North West England & Northern Wales South Wales East Scotland Glasgow and West Scotland Northern Ireland

Q6. Which sector(s) do/did you work in?

NHS Freelance practice University (teaching and/or research) Social enterprise/community interest research) Local authority (including public health) Medical food companies (baby food and clinical products) Food industry (including food services, retail and manufacturing) Charity/3rd sector Trade association Non-dietetic employment Retired Unemployed Other- *Please provide further information*

To be asked of everyone

Q7. In general, to what extent do you agree that in today's society it is appropriate for sponsorship to support organisations that have a public profile?

[Strongly agree; agree, agree somewhat, neither agree or disagree, disagree somewhat, disagree, strongly disagree (or a 5 point Likert scale)]

Q8. Now thinking about the BDA, to what extent do you agree that it is acceptable for your professional association to generate unrestricted funds through its collaborative partnerships and/or sponsorship in order to advance its core principles?

[Strongly agree; agree, agree somewhat, neither agree or disagree, disagree somewhat, disagree, strongly disagree]

What is the difference between a BDA 'partner, 'sponsor' and 'corporate member?

A **'partner'** or **'collaborative partner'** is an organisation with whom the BDA collaborate on a particular project where some shared aims have been identified. This may or may not be a financial arrangement, and could be an exclusive agreement or involve several organisations.

'Sponsors': the BDA has a range of commercial sponsors - organisations who attend the BDA's events, advertise in 'Dietetics Today' or use the BDA's digital platforms, or purchase one of the BDA's services.

Corporate members are an organisation who wants to work with the BDA more strategically and demonstrate support for the BDA and the profession via a membership package.

Q9. The BDA has collaborative partnerships and/or sponsorship arrangements in place, across a range of sectors. To what extent do you think it is acceptable for the BDA to work with companies in the following sectors?

[Agree; No opinion; Not acceptable]

Food and drink manufacturers- staple food items (for example: bread and eggs) Food and drink manufacturers- ready to eat/packaged foods Trade associations Food services and retail Food growers and producers Medical food companies (for example: baby food and clinical products) Pharmaceutical companies Medical equipment and device companies Medical technology companies Publishers or service providers Non-allied companies (for example: financial institutions and travel industries)

Q10. All collaborative partnerships and/or sponsors are listed on the materials relating to the activity supported. Do you feel that this acknowledgement of collaborative partners and sponsors enables members to be adequately informed of the companies that the BDA currently works with? [Strongly Agree; Strongly Disagree]

Q11. *Qualitative Question:* If you would like to explain your answer(s) to the question(s) above, please use the space below

Q12. Prior to completing this survey, were you aware of the distinction between collaborative partnerships and/or sponsorships and Corporate Members? (Please see the hyperlinks for further information on corporate members) [Yes; No]

Q13. Prior to completing this survey, did you know who the BDA's current Corporate Members are? [Yes; No]

Q14. Do you feel that the current Corporate Membership as a whole fit the BDA's core principles? [Strongly agree; strongly disagree]

Q15. Qualitative Question: Please could you explain your answer

Q16. What interaction have you had with your local branch during the past three years?

I am currently on the branch committee (Go to Q17.) I am currently on the branch committee, but I have also been on the committee of another branch in the past three years (Go to Q17.) I have previously been on the branch committee in the past three years (Go to Q17.) I attend branch meetings and activities (Go to Q24.) I have little involvement with the branch (Go to Q24.) My local branch is inactive (Go to Q24.)

Questions for Branch Committee Members

Q17. Thinking about any collaborative partnership(s) and/or sponsorship, in the last three years have you been involved with the decision making process? Yes on one occasion Yes on more than one occasion

No (Go to Q22.) Prefer not to say

Q18. What type of collaborative partnership(s) and/or sponsorship has the committee considered? (Please tick all that apply)

Funding for branch meetings (for example: study days) Professional Awards Educational grant for educational activities Educational grant for the development of educational materials Not sure Prefer not to say Other please specify

Q19. Have the committee generally used the BDA's Partnership and Collaboration Guidelines to assist them with the decision making process?

Yes No Not sure Prefer not to say

Q20. Do you feel that the BDA's Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

Yes No (Go to Q44.) I am not aware of the above guidelines (Go to Q44.) Not sure (Go to Q44.)

Q21. *Qualitative Question:* Is there anything that you would like to add here about your involvement with the committee, or the BDA Partnership and Collaborative Guidelines?

Q22. Do you feel that the BDA's Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship? Yes (Go to Q44.) No (Go to Q24.)

I am not aware of the above guidelines (Go to Q44.) Not sure (Go to Q44.)

Q23. Please could you explain your answer to the previous question?

Q24. Have you been a member of any of the 17 BDA specialist groups in the past three years? Yes

No (Go to Q35.) Prefer not to say (Go to Q55.)

Q25. Which of the 17 BDA specialist groups have you been a member of in the past three years? (Please tick all that apply)

Critical Care Diabetes Food Allergy **Food Services Freelance Dietitians** Gastroenterology **HIV Care** Mental Health Neurosciences Obesity Older People Oncology Paediatric **Parenteral & Enteral Nutrition Public Health Renal Nutrition Sports Nutrition**

Q26. Have you been on the committee of a specialist group in the past three years?

Prefer not to say (Go to Q55.) I am currently a member of a specialist committee I am currently a member of a specialist committee, and I have also been a member of one or more specialist committees in the past three years I am not currently a member of a specialist committee, but I have been a member of one or more specialist committees in the past three years I have never been a member of a specialist committee (Go to Q35.)

Q27. Which of the following groups have you been a committee member of in the past three

years? Prefer not to say Critical Care Diabetes Food Allergy Food Services Freelance Dietitians Gastroenterology HIV Care Mental Health Neurosciences Obesity Older People Oncology Paediatric Parenteral & Enteral Nutrition Public Health Renal Nutrition Sports Nutrition

To be asked of committee members of special groups

Q28. Thinking about collaborative partnership(s) and/or sponsorship, in the last three years, have you been involved with the decision making process?

Yes on one occasion Yes on more than one occasion No (Go to Q33.) Prefer not to say

Q29. What type of collaborative partnership(s) and/or sponsorship has the committee considered? (Please tick all that apply)

Funding for specialist group meetings (for example: study days) Professional Awards Educational grant for educational activities Educational grant for the development of educational materials/resources Not sure Prefer not to say Other, please specify

Q30. Did the committee generally use the BDA's 'Partnership and Collaboration Guidelines' to assist them with the decision making process?

Yes No Not sure Prefer not to say

Q31. Do you feel that the BDA Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

Yes No I am not aware of the above guidelines Not sure

Q32. *Qualitative Question*: Is there anything that you would like to add here about any collaborative partnership(s) and/or sponsorship that you have been involved with, or the BDA Partnership and Collaborative Guidelines?

Q33. Do you feel that the BDA Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

Yes No I am not aware of the above guidelines Not sure

Q34. Please could you explain your answer to the previous question?

Questions for Non-Committee Members

Q35. Thinking about any collaborative partnership(s) and/or sponsorship that you have been involved with, in the last three years, have you ever referred a company to your branch? Yes on one occasion

Yes on more than one occasion No (Go to Q41.)

Q36. What type of collaborative partnership or sponsorship(s) has the committee considered? [Please tick all that apply]

Professional Awards Educational grant for educational activities Educational grant for the development of educational materials Other, *please specify*

Q37. Did it lead to a sponsorship arrangement with a company?

Yes No

Q38. Are you familiar with the BDA Partnership and Collaborative Guidelines?

Yes No

Q39. Do you feel that the Guidelines provide an appropriate framework to make decisions about collaborative partnerships and/or sponsorship?

Yes No Not sure

Q40. *Qualitative Question:* Is there anything that you would like to add here about any collaborative partnership(s) and/or sponsorship that you have been involved with, or the BDA Partnership and Collaborative Guidelines?

Q43. Please could you explain your answer to the previous question?

Q44. Have you been a member of any of the 17 BDA specialist groups in the past three years? Yes

No

Q45. Which of the 17 BDA specialist groups have you been a member of in the past three years?

Critical Care Diabetes Food Allergy Food Services Freelance Dietitians Gastroenterology HIV Care Mental Health Neurosciences Obesity Older People Oncology Paediatric Parenteral & Enteral Nutrition Public Health Renal Nutrition Sports Nutrition

Q46. Have you been on the committee of a specialist group in the past three years?

Prefer not to say I am currently a member of a specialist committee I am currently a member of a specialist committee, and I have also been a member of one or more specialist committees in the past three years I am not currently a member of a specialist committee, but I have been a member of one or more specialist committees in the past three years I have never been a member of a specialist committee

Q47. Which of the following groups have you been a committee member of in the past three years?

Prefer not to say **Critical Care** Diabetes Food Allergy **Food Services** Freelance Dietitians Gastroenterology **HIV Care** Mental Health Neurosciences Obesity **Older People** Oncology Paediatric **Parenteral & Enteral Nutrition** Public Health **Renal Nutrition Sports Nutrition**

Q48. Thinking about collaborative partnership(s) and/or sponsorship, in the last three years, have you been involved with the decision making process?

Yes on one occasion Yes on more than one occasion No (Go to Q34.)

Q49. What type of collaborative partnership(s) and/or sponsorship has the committee considered?

Funding for specialist group meetings (for example: study days) Professional Awards Educational grant for educational activities Educational grant for the development of educational materials/resources Not sure Prefer not to say Other, please specify

Q50. Did the committee generally use the BDA's Partnership and Collaboration Guidelines to assist them with the decision making process?

Yes No Not sure Prefer not to say

Q51. Do you feel that the BDA Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

Yes No I am not aware of the above guidelines Not sure

Q52. Is there anything that you would like to add here about any collaborative partnership(s) and/or sponsorship that you have been involved with, or the BDA Partnership and Collaborative Guidelines?

Q53. Do you feel that the BDA Partnership and Collaboration Guidelines provide an appropriate framework to make decisions about collaborative partnerships/sponsorship?

Yes No I am not aware of the above guidelines Not sure

Q54. Please could you explain your answer to the previous question?

To be asked of everyone

Q55. Historically, collaborative partnership(s) and/or sponsorship with industry have benefitted the BDA in three ways which are summarised below.

In your opinion, how important do you feel each of these are in helping the BDA to achieve its core objectives?

• i. Addressing alternative income and resourcing for the BDA

[Very Important; Important; Moderately Important; Slightly Important; Not Important]

• ii. Raising the profile of the BDA, reaching a broader audience and influencing more stakeholders [Very Important; Important; Moderately Important; Slightly Important; Not Important]

• iii. Supporting public health messaging and having an impact on the availability and promotion of healthier choices

[Very Important; Important; Moderately Important; Slightly Important; Not Important]

Q56. Currently collaborative partnership(s) and/or sponsorship are used to support the following areas of the BDA's activities.

How important do you feel these areas are in supporting you as a member?

[Very Important; Important; Moderately Important; Slightly Important; Not Important]

At a corporate/national level:

BDA Live, BDA Vision and BDA training BDA publications and magazines (for example: 'Dietetics Today') Awards Travel scholarships/bursaries Educational grant for educational activities and Educational grant for the development of educational materials/resources Special projects (for example: BDA Work Ready)

Group/Branch level:

Funding for branch and specialist group meetings (for example: study days) Professional Awards Educational grant for educational activities Educational grant for the development of educational materials/resources Research and Audit awards

Q57. Members are frequently offered the following sponsorship support from companies.

How important do you feel these areas are in supporting you as a Dietitian?

[Very Important; Important; Moderately Important; Slightly Important; Not Important]

- Funding your attendance at professional or scientific events
- Attending your department's lunchtime meetings to update product knowledge
- Having access to product samples
- Being provided with branded materials (such as pens and post its etc.)
- Being provided with patient information sheets (such as packs for newly diagnosed clients)
- Hosting study events for Dietitians to have clinical or professional updates
- Supporting research (directly or indirectly)
- Hospitality, such as a networking dinner

Q58. Thinking about collaborative partnership(s) and/or sponsorship arrangements with the BDA, which option below best supports your needs as a Dietitian and a member of the BDA?

- No restrictions on collaborative partnerships/sponsorships.
- As per the current arrangements described in the BDA Partnership and Collaboration Guidelines which enables: corporate membership; collaborative partnerships/sponsorship; and advertising to BDA members, and the public
- Adhering to the existing BDA Partnership and Collaboration Guidelines but only permitting companies to advertise to BDA members

- Independence with no corporate members, collaborative partnerships or sponsors, or advertising
- Q59. *Qualitative Question:* Please could you explain your answer to the question above