

## **House Appropriations Riders on 2015 Dietary Guidelines: Sending Science Back in Time**

The Dietary Guidelines for Americans (DGA) is updated and published by the United States Departments of Agriculture (USDA) and Health and Human Services (HHS) every five years. It provides science-based advice on diet and fitness to Americans and is the basis for nutrition policy and programs. The most recent DGA was released in 2010, and a Committee of independent experts (the Dietary Guidelines Advisory Committee or DGAC) released a report in February 2015 providing recommendations that will serve as the basis for the 2015 DGA.

### **Frozen in Time: An Anti-Science Attack on the DGA 2015**

Both the Agriculture and Labor/HHS appropriations bills currently being considered in the House of Representatives contain a rider that would limit the 2015 Guidelines in two ways:

- 1) Any new recommendations or changes to the 2010 Guidelines must be based on conclusions rated “Grade 1: Strong” by the Nutrition Evidence Library (NEL) rubric.

**Limiting the science:** The NEL rubric gives ‘strong’ ratings only to conclusions reflecting nearly uniform results across many studies. For example, the mere presence of conflict, however explained it might be by study design, can be sufficient to downgrade a finding. This requirement is extremely limiting, inconsistent with common scientific practice, and would over-ride the expert and informed judgment of the government (and the experts on the DGAC) regarding the totality of the evidence. It would exclude all but a handful of new recommendations in the 2015 DGAC Report. It also would create scientific inconsistency – many recommendations in the 2010 guidelines were based on “Grade 2: Moderate” evidence, yet would be “grandfathered” into the 2015 Guidelines. The DGAC already scored all of its recommendations using this basic rubric and included a range of recommendations based on solid evidence that received lower than a Strong grade.

- 2) New recommendations or changes may only be made concerning matters of diet and nutrient intake.

**Suppressing common-sense implications of the evidence:** This provision would exclude any advice based on new and developing science relating to physical activity, food safety, or lifestyle changes, which are critical to preventing disease, achieving a healthy weight, and overall health. It also would exclude any new or modified policy advice, including recommendations relating to food security or food safety. Further, it would not allow new advice on ways to implement the health recommendations put forth in the rest of the Guidelines. Given that two-thirds of Americans are overweight or obese and that half of Americans suffer from diet-related chronic disease, arbitrary restrictions on how to achieve the DGA’s common sense advice would be an enormous set-back for public health.

The exclusion of updates, including those recommended by the 2015 DGAC or public comments or that HHS/USDA thought appropriate, would amount to a political gag on the government’s

ability to provide the best science-based advice to the public; advice that has already been the subject of an extensive public consideration process. The riders would undermine the clear purpose, public health goals, and process of the DGA. Given the health challenges currently facing Americans, it is essential that an official government report on public health reflect up-to-date, science-based diet and fitness guidance.

### **The Harmful Impact of the Riders on Key Public Health Messages in the DGA 2015**

The 2015 DGAC Scientific Report includes many unrated recommendations that would be summarily ignored if the rider restrictions were passed, including:

- Proposed real changes to food policy that would help Americans decrease consumption of sodium, saturated fat and added sugars, like advising food manufacturers to reformulate their dishes to contain less sodium or saturated fat and recommending free water in all public settings.
- Recommendations that connect obesity with disease and suggest a healthcare shift from treatment to prevention of diet-related diseases.

Half of the American population suffers from diet-related chronic disease and even more have established risk factors for those diseases. Yet, contrary to the conclusion of the experts in the federal government or retained by the government, the 2015 DGA would not be able to update its dietary and health advice by:

- Encouraging a diet high in fruits, vegetables, whole grains, nuts, legumes, unsaturated oils, low-fat dairy, poultry and fish and low in red and processed meat, high-fat dairy, and sugar-sweetened foods and drinks based on its association with decreased risk of obesity or type-2 diabetes; and
- Encouraging exercise based on the decreased risk it promises from cardiovascular disease, bone disease, anxiety and depression, cardiorespiratory illness, hypertension, diabetes, colon cancer, and breast cancer.

Though previous versions of the DGA agree that Americans should restrict added sugars intake, the appropriations riders would bar the 2015 DGA from proposing:

- An ‘added sugars’ section on the Nutrition Facts Panel;
- Front-of-package labeling regarding added sugars in foods; and
- Economic incentives to decrease consumption of added sugars.

The Guidelines would also nonsensically be barred from including the following advice to families:

- Parents should use meal times to role model a healthy eating pattern for their children;
- Older adults should exercise to reduce falling and improve quality of life; and
- Federal food assistance programs should counsel families on how to select healthy foods within their limited budgets