

## New dietary guidelines for Americans: a recipe for poorer health



On Jan 7, 2026, the US Departments of Health and Human Services (HHS) and Agriculture (USDA) published the 10th edition of the *Dietary Guidelines for Americans* (DGA).<sup>1</sup> The new DGA are consequential, shaping personal nutritional advice and federal programmes until 2030. Yet the new DGA upended a rigorous, transparent process developed over decades and substituted a conflicted and compromised process that produced contradictory and often unscientific guidelines.

The DGA typically adhere closely to recommendations from the Dietary Guidelines Advisory Committee (DGAC),<sup>2</sup> an external group of academics whose members have undergone a public nomination process, held public meetings, and conducted evidence reviews with rigorous protocols and scientific methods over 2 years. Yet the 2026 DGA<sup>1,3</sup> largely cast aside the *Scientific Report of the 2025 Dietary Guidelines Advisory Committee*<sup>2</sup> in favour of recommendations from a group of hand-picked scientists, some of whom had conflicts of interest with meat, dairy, or dietary supplement companies.<sup>4</sup> Over 2 months these researchers developed recommendations using a non-public process based on evidence reviews less rigorous than those of the DGAC.<sup>5,6</sup> The result is a DGA that in some areas upend long-standing science-based recommendations, undermining both nutritional counselling and the integrity of federal food programmes that are based on them.

Several recommendations in the new DGA<sup>1</sup> are supported by strong nutrition science, such as advice to consume a variety of plant and animal protein foods, whole fruits and vegetables, and fibre-rich whole grains.<sup>7</sup> The new DGA also suggest choosing water and unsweetened beverages, avoiding highly processed packaged, prepared, and ready-to-eat foods with added sugars and salt, and in general staying within individual caloric needs. Much of this advice was included in previous editions of the DGA.<sup>8</sup>

However, missing from the new DGA are recommendations from the DGAC to replace saturated fat with plant-based sources of mono-unsaturated and poly-unsaturated fat, an emphasis on plant protein foods, limits on red and processed meat, and recommendations to choose low-fat over full-fat dairy products.<sup>2</sup> There are

also no quantitative guidelines on lower-risk alcohol consumption for adults or recognition of the associations between alcohol consumption and the risk of certain cancers.<sup>9</sup>

The new DGA's inconsistent adoption of scientific evidence could undermine public confidence in official nutrition advice. Although individual compliance with DGA recommendations is generally poor, DGA guidance remains a cornerstone of personal nutrition counselling.<sup>10</sup> Importantly, the new DGA do not acknowledge important barriers to healthy eating, including human behaviours and insufficient personal resources (eg, time, skills, and income). The new DGA largely dismiss the science-based findings of the DGAC<sup>2</sup> on the grounds that the Committee's analyses were developed with a "health equity lens".<sup>3</sup> By contrast, the new DGA seem to assume, against existing evidence, that simply recommending "the best possible diet" without regard to socioeconomic circumstances, the food environment, or commercial determinants of health will change behaviours.<sup>3</sup> In years past, the federal government would have leveraged the Supplemental Nutrition Assistance Program-Education (SNAP-Ed), the country's largest nutrition education programme, to ensure curricula remained current with the new DGA.<sup>11</sup> But the US Congress defunded the programme in 2025,<sup>12</sup> and the federal government has no comparable public education initiative.

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Moreover, the internal inconsistencies in the new DGA make nutrition counselling challenging. The new guidelines incorporate the saturated fat limit of 10% of daily calories included in the last four editions of the DGA. But if individuals met the new DGA-recommended daily servings of protein foods (three servings per day for a 2000 calorie diet), dairy (three servings of full-fat dairy per day), and “healthy fats” (4.5 servings per day) by consuming red meat, whole milk, and butter, it is very likely they would exceed the new DGA’s saturated fat limits. The new DGA maintain the sodium dietary reference intake values from previous DGAs (<2300 mg/day) and recommend against high-sodium processed foods. Yet they undermine that advice by asserting that highly active individuals (an undefined group) “may benefit from increased sodium intake to offset sweat losses”, while stating that salt is a way to flavour foods “if preferred”.<sup>1</sup>

Given the likelihood of corporate influence in the new DGA<sup>3,4</sup> and the reversal of some long-standing recommendations, clinicians and community educators may rightly be reluctant to use these new guidelines as the best source of nutrition advice.<sup>5</sup> Instead, they may prefer evidence-based guidelines from professional nutrition and medical societies, such as the American Heart Association’s 2021 Dietary Guidance to Improve Cardiovascular Health<sup>13</sup> and the American Cancer Society Guideline for Diet and Physical Activity for Cancer Prevention.<sup>14</sup> Or they may turn to the Center for Science in the Public Interest and the Center for Biological Diversity’s 2025–2030 *Uncompromised DGA*,<sup>15</sup> which updated the overarching guidelines of the 2020 DGA with the recommendations from the *Scientific Report of the 2025 Dietary Guidelines Advisory Committee*.<sup>2</sup> Is nutrition advice now on a path to the increasingly polarised environment that exists for vaccines?<sup>16</sup> Alternatively, will consumers feel empowered to pick and choose among the recommendations and simply follow those they like?

The DGA’s impact on federal nutrition programmes is likely to have the greatest repercussions for public health. By federal law and regulation, the DGA help shape some government nutrition programmes, including school meals and food benefits for pregnant and postpartum women, children, and older adults.<sup>17</sup> But the DGA recommendations are typically understood as an exhortation, not an ironclad requirement. It

remains unclear how the administration will implement the new DGA.

Policies that are being developed by the Food and Drug Administration (FDA) might be the first to be impacted by the new DGA, including a final rule on front-of-package nutrition labels for packaged foods, which might now exempt full-fat dairy products.<sup>18</sup> The FDA is also considering whether to make updates to its “healthy” claim—which was finalised via rule-making based on the 2020–25 DGA.<sup>8</sup> In federal child nutrition programmes, such as the National School Lunch and Breakfast Programs, USDA might seek to create additional flexibilities permitting full-fat dairy products.

Other challenges are more political than technical. Is an administration averse to widespread state intervention prepared to eliminate all added sugars until the age of 11 years, as recommended by the DGA? The DGA also advise individuals to limit their consumption of highly processed packaged, prepared, and ready-to-eat foods. Yet doing so in schools requires additional financial investments in equipment, infrastructure, and workforce training.<sup>19</sup> An administration committed to cost-cutting seems unlikely to be sympathetic to these needs.

Fortunately, HHS and USDA will be forced to put any new nutritional policies to the test in public rule-making processes in which federal agencies must notify the public, seek public comment, and consider feasibility, costs, benefits, and implementation before publishing a final rule that explains the reasons for their decisions. It will be important for health professionals and advocates to actively engage in these public processes, highlighting the internal contradictions between the new DGA’s food recommendations and nutrient standards and the importance of protecting science-based nutrition standards.

Public programme administrators will be charged with developing menus and procurement plans in the setting of vastly reduced resources. The administration of US President Donald Trump has already severely reduced funding for public nutrition education, programmes supporting local food for schools, and those supporting regional food businesses.<sup>20</sup> The 42 million Americans who rely on the SNAP programme are now facing a US\$186 billion cut over 10 years and will have an even harder time affording a DGA-aligned diet featuring expensive animal products, due to rising costs and capped benefit increases.<sup>21,22</sup> The combination of steep funding

## cuts with some dietary recommendations that cast aside nutritional knowledge is a recipe for poorer health.

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Alla Hill, Peter Lurie, \*Lawrence O Gostin  
gostin@georgetown.edu

Center for Science in the Public Interest, Washington, DC, USA (AH, PL); O'Neill Institute for National and Global Health Law, Georgetown University Law Center, Washington, DC 20001, USA (LOG)

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