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Comment #1

I support the CDC's efforts to improve data collection for public health. Collecting accurate data is important because it helps track health trends and identify problems early. This can help prevent disease and improve overall health outcomes. However, it is important that data collection is done in a way that protects people's privacy and makes participation easy. Some people may feel uncomfortable sharing personal health information, so clear communication and confidentiality are important. Overall, I believe this effort can improve public health by helping professionals make better decisions based on real data. Expanding and improving data collection can lead to better programs and better health outcomes for communities.

DHANES's Response (Comment #1)

Thank you for your comment. The National Health and Nutrition Examination Survey (NHANES) measures the health and nutrition of adults and children in the United States. NHANES data can help improve the health of Americans and has driven changes in how doctors treat patients and how public policy supports good health. The CDC's National Center for Health Statistics (NCHS) conducts NHANES and takes protecting privacy and confidentiality very seriously. NCHS staff, contractors, agents, and research partners will never disclose or release information that identifies a survey participant without their consent, as required by Section 308(d) of the Public Health Service Act and the Confidential Information Protection and Statistical Efficiency Act of 2018 or CIPSEA (44 U.S.C. 3561-3583). NHANES field staff are trained to communicate these efforts to the survey participants, and a [NHANES Confidentiality Brochure](#) is provided to describe how the program safeguards participant information. Additional details about participant privacy protections are available on the NHANES website: <https://www.cdc.gov/nchs/nhanes-participants/privacy.html>.

Comment #2

Dear Secretary Kennedy and Secretary Rollins,

I am writing to express my sincere concern over the recently published 2025-2030 United States Dietary Guidelines. I am a graduate student at Columbia University's Teachers College, studying nutrition and public health. The latest edition of the dietary guidelines are inconsistent, misleading, and inadvertently promote eating patterns consistently linked with cardiovascular disease, diabetes, colorectal cancer, and other health complications. As a future dietitian, I find the promotion of red meat consumption and full-fat dairy to be inconsistent with the USDA's goal of improving public health outcomes, and urge the committee to modify its stance to be in line with scientific consensus.

As you both know, the Dietary Guidelines for Americans (DGAs) will serve as the cornerstone for American dietary advice for the next five years. Previous committees have operated by making recommendations on concrete scientific evidence, taking into account conflicts of interest, and utilizing a rigorous vetting process of data before creating practical guidelines (Bleich et. al,

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2026). This committee did not do this, as evidenced by the promotion of red meat and full fat dairy consumption, as well as increasing protein recommendations without scientific reasoning. For this outreach, I will be focusing specifically on red meat recommendations, expressing my discontent and urging for a revision that is in line with the scientific consensus.

There is an overwhelming amount of research supporting the claim that saturated fat intake is positively correlated with negative health outcomes, specifically cardiovascular disease and obesity (Kennedy et. al, 2024). Unprocessed red meat contains high levels of saturated fats. For example, in a National Institute of Health report analyzing over 70 observational studies across 6 million patients, each additional 100g of red meat increased cardiovascular disease risk by 11% (Shi et. al, 2023). Higher intake was also positively correlated with diabetes. Promoting the increased intake of unprocessed red meats is inconsistent with the other guideline to limit saturated fat intake to 10% of daily calories. By using strategic graphics (steak being in the top-right corner of the new food pyramid), claiming that there is a “war on saturated fats,” and increasing protein recommendations, Americans are receiving mixed messages and are likely to increase their red meat and saturated fat intake past the 10% recommended limit. The health outcomes of this dietary change could increase obesity, cardiovascular disease, and rates of colorectal cancer (Laraia, 2026). As a future dietitian, it is disenheartening that I will no longer be able to cite the DGAs to my clients when providing nutritional guidance.

I am urging the committee to revisit these recommendations, reverting to previous guidelines that emphasize lean proteins, and promote plant-based alternatives as well.

Thank you for taking the time to read my letter and considering my stance. I look forward to hearing your response and continuing this conversation.

References:

Bleich, S. N., et al. (2026). *Federal dietary guidance upended*. *JAMA Health Forum*.
<https://jamanetwork.com/journals/jama-health-forum/fullarticle/2845870>

Kennedy, J., Alexander, P., Taillie, L. S., & Jaacks, L. M. (2024). Estimated effects of reductions in processed meat consumption and unprocessed red meat consumption on occurrences of type 2 diabetes, cardiovascular disease, colorectal cancer, and mortality in the USA: A microsimulation study. *The Lancet Planetary Health*, 8(7), e441–e451. [https://doi.org/10.1016/S2542-5196\(24\)00118-9](https://doi.org/10.1016/S2542-5196(24)00118-9)

Laraia, B. (2026, January 21). *How the nation's new dietary guidelines might backfire*. University of California Berkeley School of Public Health.

Shi, Z., et al. (2023). Red meat consumption, cardiovascular diseases, and diabetes: A systematic review and meta-analysis. *European Heart Journal*.
<https://pubmed.ncbi.nlm.nih.gov/37264855/>

Reflection:

The 2025-2030 Dietary Guidelines for Americans was very appealing for me to write about, as we have had interesting discussions in class, as well as it being a highly discussed topic

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among the dietitian community. As someone who grew up outside of Washington D.C., I've seen first-hand how heavily industry can influence policy decisions, but seeing these guidelines, which are contradictory and clearly support the beef and dairy industry, is incredibly disheartening. The concept of federal government nutritional guidelines have been around since 1977, where The McGovern Report was published on behalf of the Senate Select Committee on Nutrition and Human Needs (USDA, 2026). In 1980, the USDA published the first edition of the Dietary Guidelines for Americans, which has been the framework outlining our nutritional standards since. Every five years, HHS and the USDA collaborate, with a carefully selected panel of nutritional and health experts, who reassess the guidelines and make adjustments as scientific findings evolve (USDA, 2026). Those on the advisory committee are vetted for industry connections and conflicts of interest (Laraia, 2026). Each decision, including which foods to promote the consumption of and those to limit, has been made with ample scientific data to support these stances (Laraia, 2026). Of course, nutrition science is constantly evolving, which is why the guidelines are updated every five years. However, the newest guidelines are a stark departure from previous editions that it raises the question, why?

In looking at the committee's membership and disclosures, ties to many dairy and beef organizations were listed (Nestle, 2026). Some of the industry ties included relations with the National Cattlemen's Beef Association, National Dairy Council, National Pork Board, and more (Nestle, 2026). While it is helpful that these disclosures are listed (as they are legally required to), they were listed after the DGAs were published, which is too late. It would have been more ethical if these ties were listed at a time where public forum was allowed, and these advisors could be voted on by another body. Instead, we are given a set of contradictory guidelines that will surely confuse Americans into eating more red meat and dairy, which are consistently tied to the very conditions RFK Jr. claims he wants to rid the American people of.

While it is a long shot, I wrote my advocacy letter in hopes of influencing the HHS and USDA to reconsider their published stances on red meat and dairy consumption. The promotion of these products, seen in the food pyramid graphic, the declared "ending of the war on saturated fats," suggestion of consuming steak and beef tallow for protein, and increasing the protein requirements will lead to an overconsumption of saturated fats if followed. This is contradictory, as the DGAs also state that saturated fats should be reduced to 10% of total daily calories. How is the war on saturated fats being ended if the guidelines are the same here? Also, if we're supposed to be doubling our protein intake as a society, how else is someone supposed to receive this information and *not* overeat saturated fat? If the committee cared to limit saturated fat intake, lean proteins from plant based sources would be promoted. However, they are not emphasized at all. This leads me to believe that the DGA Committee had little regard for the practicality of these nutrient requirements. Instead, they are promoting a diet that, if followed, will increase the rates of cardiovascular disease, diabetes, and colorectal cancer (Shi et. al, 2023). As I mentioned in my letter, higher intake of saturated fats in unprocessed meats, like steak, are strongly correlated with dietary-related chronic diseases (Shi et. al, 2023).

My request was for the committee to revisit these guidelines and return to the scientifically proven guidance that promotes protein from lean meats and plant based sources. As a future dietitian, I want to be able to promote diets that serve the best interest of my clients while also having the opportunity to provide accessible resources. There are certain aspects of the guidelines that I appreciate: they are concise, promote the importance of eating whole

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foods, and state that ultra-processed foods are unhealthy. For many Americans' whole lives, they've been able to look to the DGAs as a credible source for information on what to eat. I would love to be able to say that my nutritional advice is in line with the DGAs, as that's how we're taught to advise clients in some of our classes. It's concerning that public trust in the government is plummeting. While for good reason, it reinforces the notion that we don't have a clear authority to trust, which leads to misinformation being spread and believed over scientific data.

In an ideal world, my letter would be read and seriously considered. It would be amazing if the guidelines were amended and the beef and dairy industry ties would be eliminated. I wish that these guidelines promoted healthy, logical dietary advice that would serve the best interest of the American people, and not the private sector.

Resources:

Bleich, S. N., et al. (2026). *Federal dietary guidance upended*. *JAMA Health Forum*.
<https://jamanetwork.com/journals/jama-health-forum/fullarticle/2845870>

Kennedy, J., Alexander, P., Taillie, L. S., & Jaacks, L. M. (2024). Estimated effects of reductions in processed meat consumption and unprocessed red meat consumption on occurrences of type 2 diabetes, cardiovascular disease, colorectal cancer, and mortality in the USA: A microsimulation study. *The Lancet Planetary Health*, 8(7), e441–e451. [https://doi.org/10.1016/S2542-5196\(24\)00118-9](https://doi.org/10.1016/S2542-5196(24)00118-9)

Laraia, B. (2026, January 21). *How the nation's new dietary guidelines might backfire*. University of California Berkeley School of Public Health.

Nestle, M. (2026, January 12). *The MAHA dietary guidelines III: Conflicts of interest*. Food Politics. <https://www.foodpolitics.com/2026/01/the-maha-dietary-guidelines-iii-conflicts-of-interest/>

Shi, Z., et al. (2023). Red meat consumption, cardiovascular diseases, and diabetes: A systematic review and meta-analysis. *European Heart Journal*.
<https://pubmed.ncbi.nlm.nih.gov/37264855/>

U.S. Department of Agriculture, & U.S. Department of Health and Human Services. (n.d.). *History of the Dietary Guidelines for Americans*. <https://www.dietaryguidelines.gov/history>

DHANES's Response (Comment #2)

Thank you for your comment. The National Health and Nutrition Examination Survey (NHANES) provides the essential evidence base for the Dietary Guidelines for Americans (DGA) by serving as one of the primary sources of data on U.S. dietary intake. NHANES data are also used by other agencies, researchers, and policymakers to develop public health policies, establish and update nutritional guidelines, and design health programs. While NHANES informs policies and research on topics such as obesity, cardiovascular disease, and environmental exposures, it does not itself establish guidelines or regulations.

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Comment #3

Testimony Submitted by: Vama Naik, MS-RDN Candidate Teachers College, Columbia University
U.S. Department of Agriculture 1400 Independence Ave., S.W. Washington, DC 20250

Dear Members of the United States Department of Agriculture,

My name is Vama Naik and I am a graduate student who is studying nutrition at Teachers's College, Columbia University. I am writing to you as a public health advocate and future dietitian who believes that our current dietary guidelines do not match initiatives backed by scientific literature and knowledge of health and medical professionals around the USA.

I strongly advocate for change in the dietary guidelines to reflect all 56 recommendations made by the Dietary Guidelines Committee, without the involvement of financial, political, and agricultural interests of the independent committee, which was appointed by the Trump Administration. Having the 2025-2030 Dietary Guidelines for Americans that align with the recommendations of the original committee, can insure that all Americans can adapt science-backed recommendations backed by trusted doctors, dietitians, and health professionals. This new change can benefit low income individuals and those who may follow a cultural diet not aligning to that of the traditional American Diet.

According to the USDA website, it is stated that this federal organization is required to provide a safety net for food insecure individuals in combination with providing dietary guidance based on scientific evidence. However, the current visual model of the food pyramid does not make space for this mission. When reading the pyramid, the first food emphasized is red meat, which experts like Marion Nestle state that guidelines like these redefine protein consumption as largely animal consumption, and avoid the evidence of plant based diets benefiting health and environmental impact (Nestle, 2026). Plant based diets are also a large part of many cultures in the United States, and including 10 animal sources and 4 plant sources can create a hierarchy between plant based and animal based proteins. Along with research citing recommendations of eating more red meat driving up heart and cardiovascular disease rates (American Heart Association 2026), is not a plausible choice economically for low income families as the cost of red meat has risen 50% from pre-pandemic levels (UC Irvine Wen Public Health, 2026).

The Dietary Guidelines Committee for 2025-2030 is built up by 20 individuals, with their expertise ranging from dietetics, medicine, and public health. The independent committee looks different, with there being one dietitian and no doctors in this group of people who corrected the recommendations of the other committee, whose backgrounds I emphasized above. A few people on this independent committee also have financial relationships to organizations including the National Cattleman's Beef Association, the National Dairy Council, and the National Pork Board. A correlation can be seen between the Trump Administration's scientific review board's financial affiliations and the content of the DGAs on the USDA's website, especially regarding the recommendations of full fat dairy and red meat as protein sources, as well as recommending butter as a healthy fat (Gov, 2025). If this is truly a causal relationship, there is a need for more transparency with the American population, and rework done by the Dietary Guidelines Committee, as their work has always been a valuable and constant part of

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writing and releasing the Dietary Guidelines through American history. As a nutrition student and future dietitian, I would like to add that doctors and dietitians are important to listen to, especially with their experience in working with the American population that these guidelines are designed to serve. There needs to be more correlation between what health professionals are educating their patients and what is being proposed in these guidelines, therefore suggesting that the people who create these guidelines should be the ones who are on the front lines nutrition and medical care around the country.

Thank you for your time, and I hope these comments are taken into consideration when improving the structure and information within the Dietary Guidelines. I look forward to seeing change in the work that the USDA puts forward, and thank you again for listening.

DHANES's Response (Comment #3)

Thank you for your comment. The National Health and Nutrition Examination Survey (NHANES) provides the essential evidence base for the Dietary Guidelines for Americans (DGA) by serving as one of the primary sources of data on U.S. dietary intake. NHANES data are also used by other agencies, researchers, and policymakers to develop public health policies, establish and update nutritional guidelines, and design health programs. While NHANES informs policies and research on topics such as obesity, cardiovascular disease, and environmental exposures, it does not itself establish guidelines or regulations.