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STATEMENT OF
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BEFORE THE HEALTH CARE AND FINANCIAL SERVICES SUBCOMMITTEE
HOUSE OVERSIGHT COMMITTEE
UNITED STATES HOUSE OF REPRESENTATIVES

REGARDING:
"BETTER MEALS, FEWER PILLS: MAKING OUR CHILDREN HEALTHY AGAIN."

September 9, 2025

A healthy diet is made up of nutrient-dense, whole foods, including a variety of protein foods, dairy, vegetables, fruits, and whole grains. Substantial research shows that when children and adolescents consume a dietary pattern that emphasizes these food groups, they have healthier growth and development patterns, and that it sets the stage for better health and disease prevention across the lifespan.

Unfortunately, most children and adolescents in the United States do not eat a healthy diet. This poor diet has resulted in worsening health outcomes among children and adolescents which have contributed to increased rates of chronic disease.

The Healthy Eating Index or HEI is an analytic tool developed by the U.S. Department of Agriculture (USDA) and the U.S. Department of Health and Human Services (HHS) that measures the quality of the overall diet. HEI scores range from 0 to 100 with a score of 100 indicating alignment with a healthy diet. The average HEI-2020 score for children and adolescents 2-18 years is a 54 out of 100. Notably, HEI scores decline throughout childhood and adolescence, with scores for adolescents approximately 10 points lower than those for young children. For example, HEI scores range from a high of 59 among females ages 2 through 4 years to a low of 48 among males ages 14 through 18 years. Poor diet quality is being driven by what children and adolescents are currently eating too much of (e.g., non-nutritive foods and

beverages) and by what they are not eating enough of (e.g., nutrient-dense versions of foods and beverages from the food groups).

Among the top sources of calories in the American diet are desserts and sweet snacks, sugar-sweetened beverages, and chips and savory snacks. These foods illustrate that the American diet is high in added sugars and refined grains.

Regarding added sugars, Americans over 1 year old consume about 270 calories from added sugars a day (68 grams), on average. Only about 10% of Americans consume less than 100 calories of added sugars per day (25 grams). Intakes can vary substantially. For example, adolescent males consume a range of about 100 to 725 calories from added sugars per day (25 to 181 grams). In teaspoons, average daily intakes among children and adolescents range from about 10 teaspoons (females 2-5 years) to 21 teaspoons (males 12-19 yrs) per day.

For refined grains, children ages 2 to 18 eat about 4 ounce equivalents per day in the youngest years and 6 to 7 ounce equivalents in the adolescent years. Top sources of refined grains are not nutrient-dense and include desserts and sweet snacks, muffins, waffles, and pancakes, as well as chips, crackers, and other savory snacks.

Collectively, many of these foods can be described as highly processed foods. Some researchers have estimated that more than half of calories consumed by adults and children in the U.S. are from foods that are highly processed. A recent report by the U.S. Centers for Disease Control and Prevention found that 61.9% of calories consumed by youth ages 1-18 years were from foods categorized as ultra-processed.

While intakes of refined grains, added sugars, and highly processed foods are high, intakes of vegetables, fruits, whole grains, and dairy are low. As examples, only 1% to 2% of adolescents 14 through 18 years meet daily recommendations for vegetables or for whole grains.

In fact, on any given day about half of our youth do not consume a vegetable or fruit. Intake of protein foods—including meats, poultry, eggs, seafood, legumes, nuts, seeds, and tofu—varies. Of note, 78% of adolescent females ages 14 through 18 do not consume enough protein foods. While some children eat enough total protein foods, most fall short of meeting recommendations for certain protein foods, like seafood. Data also suggests that some aspects of the diet are declining. For example, among adolescents, the percent reporting milk intake was 76% in 1977-1978, which decreased to only 48% in 2005-2006, and 34% in 2015-2016. Across the food groups, many of the top sources consumed are not in their most nutrient-dense form. Fried foods, for example, are commonly consumed.

The displacement of nutritious foods by non-nutritive foods has created a nutrient-deficient yet calorie-rich food environment. Poor diets of children have contributed to the current childhood chronic disease crisis. The prevalence of overweight and obesity among children and adolescents ages 2 through 19 years is 36% – or 1 in 3. Additionally, there has been an increased prevalence of chronic disease risk factors during this life stage. For example, 38% of individuals ages 12 through 19 years have prediabetes. These health concerns have immediate impacts on the health of children and adolescents and contribute to an increased risk of developing chronic diseases later in life.

USDA is committed to working collaboratively to fulfill President Trump's mandate to Make America Healthy Again. As previously noted, many foods and beverages commonly consumed by our children and adolescents are highly processed. Over the last decade, concerns have grown significantly about the increased availability and consumption of these foods that researchers often categorize as ultra-processed. Researchers have found links between consumption of these foods and a range of negative health outcomes.

With this background in mind, there is a clear need and great interest in providing the American public with guidance about consuming these foods. Some U.S. states and third-party organizations have sought to establish their own definitions of "ultra-processed foods." However, there is no single, universally accepted definition of ultra-processed foods that can be used by researchers or those developing dietary guidance -- and there are some concerns with the definitions that do exist. For example, existing classification systems may not accurately capture the characteristics of ultra-processed foods that may be impacting health the most – and there are concerns about unintended consequences of an overly-inclusive definition of ultra-processed foods discouraging intake of potentially beneficial foods, such as whole grain products or yogurt.

USDA and the HHS Food and Drug Administration (FDA) are taking steps to address the need for a uniform definition for ultra-processed foods. Recently, USDA and HHS partnered to request data and information that will be used to help develop such a definition that can be used for human food products in the U.S. food supply. A uniform definition of ultra-processed foods, developed as part of a joint effort by federal agencies, would allow for consistency in research and policy to pave the way for addressing health concerns associated with the consumption of ultra-processed foods. Comments to support this effort are welcome – we encourage anyone with an interest in this issue to submit electronic or written comments by September 23, 2025 on regulations.gov. While we are working to define ultra-processed foods, based on what we know now, there is work to do to decrease intakes of refined grains and added sugars among children while simultaneously working to improve intakes of vegetables, fruits, whole grains, dairy, and protein foods.

USDA recognizes the important role of American farmers, ranchers, and producers and USDA programs and policies in our efforts to make American children healthy again. The

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is one example of a government program that is focused exclusively on the nutritional health of its participants—pregnant and breastfeeding women, women who recently had a baby, infants, and children up to five years of age. WIC has a proven track record of improving children's health.

USDA has also already started to take action to ensure healthy families and communities by issuing State waivers to restrict the purchase of non-nutritious items like soda and candy from the Supplemental Nutrition Assistance Program (SNAP), providing guidance to school food authorities on voluntarily removing harmful additives, such as artificial dyes from products sold to K-12 schools for the National School Lunch and Breakfast programs, and purchasing millions of dollars in fresh seafood, fruits, and vegetables from American farmers and producers to distribute to nutrition assistance programs across the country. USDA and HHS are also working together to develop the next edition of the Dietary Guidelines for Americans based on sound science. USDA looks forward to continuing to work together with our federal, state, and community partners on the implementation of the Dietary Guidelines, and to identifying innovative solutions to support healthy choices, healthy outcomes, and healthy families.