Chairman Aderholt, Ranking Member Farr and members of the Subcommittee, thank you for the opportunity to present testimony in support of the Administration’s budget for fiscal year 2016. I am honored to discuss the work of the Center for Nutrition Policy and Promotion, one of two agencies in USDA’s Food, Nutrition, and Consumer Services mission area.

The mission of the Center for Nutrition Policy and Promotion (CNPP or Center), the focal nutrition policy and nutrition promotion agency in USDA, is to improve the health of Americans by developing and promoting dietary guidance that links scientific research to the nutrition needs of consumers. Specifically, the Center links nutrition science to dietary guidance and consumer education through work that spans systematic evidence-based nutrition research reviews, program-focused consumer economic analyses, dietary guidance recommendations, nutrition education resources, digital tools and outreach. We also closely collaborate with our sister agency, USDA’s Food and Nutrition Service (FNS), as they integrate our dietary guidance into their nutrition assistance programs. As Executive Director, I am committed to ensuring that the Center administers a cost-effective and efficient, integrated approach to everything we do.

It is a well-established fact that the Nation faces significant public health issues stemming from the quality of what we eat. The direct medical costs of obesity alone are estimated to be $210 billion a year, or nearly 10 percent of all annual medical spending, and will continue to escalate if current trends are not reversed. But we are starting to make some headway. For the first time, we are seeing a significant decline in obesity rates among 2- to 5-year-old children – in the last 10 years, obesity among this age group dropped by 43 percent.
The Center has a critical role in how USDA meets its strategic objective to “promote healthy diet and physical activity behaviors.” More broadly, the Center’s initiatives are fundamental to contributing toward reducing risks associated with diet-related chronic disease and subsequent health care costs, while promoting overall health among individuals and families across the United States.

**Improving the Nation’s Nutritional Well-Being**

There is much work to be done to improve our Nation’s health. About half of all American adults—117 million individuals—have one or more preventable, chronic diseases that are related to poor-quality diet and physical activity behaviors. These diseases include cardiovascular disease, hypertension, type 2 diabetes and diet-related cancers. People who are overweight or obese—now more than two-thirds of all adults—have higher risks for these chronic diseases. About 50 percent of adults who are normal weight, 70 percent of those who are overweight, and 75 percent of those who are obese have at least one cardiovascular disease risk factor.

High rates of chronic diseases and their risk factors have persisted for more than two decades. The rates of these chronic diseases disproportionately affect low-income and underserved communities. Consistent evidence demonstrates that persistent, prevalent, *preventable* health problems—overweight and obesity, cardiovascular diseases, diabetes, and certain cancers—have severely and adversely affected the health of the U.S. population across all ages for decades.

After increasing from the 1980s until about 2004, rates of overweight and obesity in children and adolescents in the U.S. have remained at very high levels. Nearly one in three youth ages 2 to 19 years is overweight or obese. Obesity prevalence increases with age and varies by race/ethnicity. The age category with the highest prevalence is 12- to 19-year-olds. The racial/ethnic categories with the highest prevalence of obesity are African Americans and Hispanics. There was the previously noted decrease in obesity among children ages 2- to 5-years-old, but it is not clear whether this comparison of only two time periods reflects an actual downward trend. We need to continue our work to educate families and communities about healthy eating and the importance of physical activity to ensure that this initial positive sign does result in long-lasting improvements.
Children and adolescents in the U.S. also have diet-related chronic diseases, including borderline high blood pressure and type 2 diabetes. Borderline high blood pressure is found in 8.3 percent of all youth ages 8-17, with higher prevalence in boys than girls, in older (13-17 years) than younger children, and in African American compared to non-Hispanic white and Hispanic children. Among children with type 2 diabetes, 90 percent are overweight or obese.

Across all age and gender groups, the vast majority of the U.S. population does not meet recommended intakes for fruit, vegetables, whole grains, and dairy food groups, seafood, nuts, seeds, and soy. Each of these food groups offers excellent sources of shortfall and under consumed nutrients of public health concern.

Across all age and gender groups, the vast majority of the U.S. population exceeds recommended intakes of refined grains and empty calories (solid fats and added sugars). Intakes also exceed limits for the nutrients sodium and saturated fat, and for the “meat, poultry, eggs” subgroup of the protein foods group.

These consumption amounts are reflected in the low Healthy Eating Index (HEI) scores for all segments of the U.S. population. Out of a total of 100 points – with 80 and above considered a good diet and below 51 considered a poor diet – America’s HEI score is 57.

Positive, healthy eating habits early on are an essential foundation for a lifetime of healthy eating. Many young children start out eating very well, particularly with regard to intakes of fruit and dairy foods. Unfortunately, many of these early-life healthy habits seem to disappear as children get older. Overweight and obesity and other diet-related chronic diseases are “weighing down” multiple systems – healthcare, education, military, industry – and millions of Americans, including children, must deal with the short- and long-term consequences of this national public health problem. Helping the public’s eating habits move closer to the Dietary Guidelines – starting early in life – is pivotal to moving to closer to being a healthier America.
Advancing Science-Based Dietary Guidelines for Americans

Relied upon as a central, science-based blueprint for promoting good nutrition and health across the country, the Dietary Guidelines for Americans is the science-based foundation for nutrition standards in all Federal nutrition assistance and education programs throughout government; it also helps guide nutrition research and education and is used widely in private sector nutrition and promotion efforts. The Dietary Guidelines is mandated under the 1990 National Nutrition Monitoring and Related Research Act (Public Law 101-445, Section 301[7 U.S.C. 5341], Title III). Developed jointly by CNPP and the Health and Human Services (HHS) Office of Disease Prevention and Health Promotion, it is required to be based on the preponderance of current scientific and medical knowledge and to be released by the Secretaries of USDA and HHS at least once every five years. The process to develop the 2015 Dietary Guidelines is currently under way. The Guidelines provide advice for Americans, aged two years and older, about food choices that promote health and help prevent disease.

To support the development of the 2010 Dietary Guidelines, the Center established the Nutrition Evidence Library (NEL), an evidence-based systematic review entity used by the 2010 Dietary Guidelines Advisory Committee (Advisory Committee or Committee) to review the most current scientific literature. Considered the gold standard for informing recommendations, the use of systematic reviews originated in the medical field to inform clinical practice guidelines and is now used broadly in the nutrition field. The NEL provides a rigorous and transparent system to review the scientific literature and uses the preponderance of science to inform nutrition policy and programs. The NEL also ensures compliance with the Consolidated Appropriations Act of 2001, or Data Quality Act, which mandates that Federal agencies ensure the quality, objectivity, utility, and integrity of the information used to form Federal guidance.

Using state-of-the-art methodology to search, evaluate, and synthesize food, nutrition and health research, this protocol-driven methodology is designed to minimize bias, maximize transparency, and ensure relevant, timely, and high-quality systematic reviews. The evidence portfolios for each research question addressed by the 2010 and 2015 Advisory Committees are posted on the NEL website (www.nel.gov) enabling the public access to the Advisory Committee’s review of the scientific evidence used to support their conclusions and recommendations. Since the launch of the NEL in 2008, ongoing quality assurance processes continue to be a priority for the Center.
During FY 2014-2015, USDA collaborated with HHS and supported the work performed by the 2015 Dietary Guidelines Advisory Committee, an external, independent group of experts. To ensure transparency throughout the Committee’s deliberations, a list of all included studies was posted on www.DietaryGuidelines.gov immediately after that specific meeting concluded. This was done for every public meeting once the Committee began its review and deliberations over the scientific literature. Additionally, all of the Advisory Committee’s NEL systematic reviews – comprising more than 1,000 pages of data and analysis – are available now on NEL.gov. The Scientific Report of the 2015 Dietary Guidelines Advisory Committee was submitted to the Secretaries of HHS and USDA in February 2015 and made available publicly at www.DietaryGuidelines.gov. Advisory in nature, the report contains the Committee’s findings and recommendations related to the state of current nutrition science. HHS and USDA will take into consideration the Advisory Report and public and Federal agency comments as the Departments now begin to jointly develop the 2015 Dietary Guidelines for Americans, which will be released by the end of 2015.

The Agricultural Act of 2014 states that beginning in 2020 the Dietary Guidelines for Americans shall include recommendations for women who are pregnant and children from birth until the age of 2. Working closely with HHS, the Center developed a framework for moving forward and has formed a Federal Expert Group (FEG) with representatives from 20 agencies to oversee the foundational work to be performed over the next two years.
Monitoring Food, Nutrition and Economic Trends

The Center’s food, nutrition and economic data monitoring and analyses serve as the underpinning to many Federal, state and local programs. Mentioned earlier in this statement, the Healthy Eating Index (HEI) is designed to assess diet quality in terms of how diets of the U.S. population and subpopulations comply with the Dietary Guidelines for Americans. The HEI is used annually by the Office of Management and Budget to inform the White House’s My Brother’s Keeper initiative and for the America’s Children: Key National Indicators of Well-Being and Older Americans: Key Indicators of Well-Being reports.

The Center oversees updates to the Nutrient Content of the U.S. Food Supply. This is an historical data series beginning in 1909, on the amounts of nutrients available in the food supply for consumption—not nutrients consumed—on a per capita per day basis, as well as percentage contributions of nutrients by major food groups. The series provides data for food calories and calorie-yielding nutrients that are closely linked to nutrition monitoring research, Dietary Guidelines, food marketing, and food and nutrition policies.

For the last 20 years, the Center also has overseen the annual updates of the USDA Food Plans (Thrifty, Low-Cost, Moderate-Cost, and Liberal), which serve as national standards for nutritious diets at various cost levels. Each plan represents a set of market baskets containing a selection of foods in quantities that reflect the Dietary Guidelines for Americans and are applicable to one of 15 age-gender groups. The Thrifty Plan is used as the basis for our sister Agency FNS’s Supplemental Nutrition Assistance Program (SNAP) allotments and the Moderate and Liberal Plans are used by the Department of Defense to determine the Basic Allowance for subsistence rate for more than 1.4 million U.S. Service members.

Since 1960, CNPP also issues the annual Expenditures on Children by Families report. This report examines current child-rearing expenses for the major household budgetary components: housing, food, transportation, clothing, health care, childcare, education, and miscellaneous expenses. These expense estimates are used by States to set child support guidelines and foster care payments. Annually, the Center updates the Cost of Raising a Child report and in 2014, the cost of raising a child, excluding college, was reaching a quarter-million dollars.
Promoting Healthful Eating Choices

To promote the messages of the *Dietary Guidelines for Americans*, the Center uses state-of-the-art, dynamic marketing and communication strategies to reach the general population and targeted audiences. The Center works collaboratively with FNS in promoting the *Dietary Guidelines* and supporting nutrition messages to reach children and low-income populations.

Following the release of the 2010 *Dietary Guidelines for Americans*, the Center launched MyPlate, the iconic symbol and food guidance system that translates the Guidelines to help consumers choose a variety of healthful options from the five food groups and build a healthy plate at mealtimes. While the MyPlate icon is a reminder to eat healthfully, [ChooseMyPlate.gov](http://ChooseMyPlate.gov) is an engaging web-based platform developed by the Center to translate the *Guidelines* into food-based recommendations and applications for individuals and families. As of 2014, three out of five Americans were familiar with MyPlate and more than one third of Americans report knowing a lot or fair amount about MyPlate. Additionally, MyPlate continues to play an important role in nutrition education for health professionals, with 73 percent of Registered Dietitian Nutritionists using MyPlate as a tool to help consumers eat healthfully.

[ChooseMyPlate.gov](http://ChooseMyPlate.gov) provides practical information to individuals, health professionals, nutrition educators and industries to help the public build healthier eating habits and be physically active. This website provides resources and tools for dietary assessment, nutrition education, and other user-friendly nutrition information. Examples include an extensive 10-Tips Nutrition Education series, sample menus and recipes, MyPlate Kids Place including interactive games, and information for consumers and professionals. In FY2014, in collaboration with FNS, the Center developed a Healthy Eating on a Budget microsite and launched a *MyPlate for MyFamily* toolkit, a cultural menus project, and an ethnic recipe project. [ChooseMyPlate.gov](http://ChooseMyPlate.gov) is one of the most visited government websites and is extremely successful in reaching the public with scientifically grounded nutrition information. Since launch in June 2011, the site has received more than 245 million page views and 103 million downloads. More than 30,000 kids have taken the “MyPlate Champions Pledge” on MyPlate Kids Place.
SuperTracker is the Center’s award winning state-of-the-art online interactive tool. Released in December 2011, SuperTracker is a comprehensive resource designed to help individuals and families make changes to their diet and physical activity. SuperTracker helps individuals to plan, analyze and track diet and physical activity, and provides personalized goal setting, virtual coaching and journaling. SuperTracker is heavily used in educational settings, with school-aged children accounting for about half of its total profiles. In January 2015, a mobile version of SuperTracker was launched resulting in a 140 percent increase in mobile traffic. As of February 2015, the site had more than 5 million registered users and 400 million page views. SuperTracker does not require registration, yet the application receives, on average, 6,000-11,000 new registered users every day.

In 2014, the Center collaborated with FNS to consolidate program recipes from its Child Nutrition, SNAP and Food Distribution Division and create a user-friendly and visually appealing web-based recipe tool. The “What’s Cooking: USDA Mixing Bowl” interactive online tool was launched in November 2014 to help low-resource consumers with healthy meal planning, cooking, and grocery shopping. The site features a searchable database of healthy recipes, options to build a cookbook, print recipe cards and share recipes via social media. Since its launch in November 2014, the site has received more than 764,000 page views and more than 119,000 users.

The Center’s Nutrition Communication Network exemplifies public-private partnerships and the power of collaboration across sectors to deliver results together that benefit the public. The Network provides an opportunity for different communities and organizations to amplify MyPlate consumer messages and help promote the Dietary Guidelines. Currently, there are more than 120 National Strategic Partners, close to 7,500 Community partners and nearly 4,000 MyPlate On Campus Ambassadors. In 2014, there were more than 1 million downloads of the MyPlate on Campus Toolkit. National Strategic Partners were responsible for more than 36 billion and 19 million consumer and opinion leader impressions of MyPlate and Guidelines messaging, respectively.
President’s Budget Request for 2016

The President’s Budget requests an increase of $2 million, for a total of $7 million, for the Center for Nutrition Policy and Promotion. Half of the requested increase will be used to implement proven strategies to reach vulnerable populations with programming to help improve eating and physical activity behaviors; the other half will be put toward continued development of dietary guidance for children from birth to age 2, as directed by the recent 2014 Farm Bill. The smallest agency within USDA, the Center serves as a critical backbone to the Nation’s food and nutrition policies and programs, often competing with multi-million dollar advertising campaigns while striving to reach the more than 320 million individuals in this country with healthful eating and physical activity messages. Our staff is dedicated to improving the health of Americans by developing and promoting revised Dietary Guidelines that links the strongest scientific research to the nutrition needs of consumers. During 2016, the Center will continue to link nutrition science to dietary guidance to consumer education. Specifically, the requested funds will allow the Center to:

- Continue, in partnership with HHS, to rigorously review the scientific evidence on nutrition and health for the birth to 24 months age group and pregnant women as mandated by the Agricultural Act of 2014. This will be accomplished using the state-of-the art methodology of the NEL. This work will provide a foundation for incorporating these populations into the 2020 Dietary Guidelines for Americans (ninth edition). Since development of guidance for this age group will be above and beyond the traditional update of the Dietary Guidelines, CNPP requests this funding to conduct the foundational work. Without funds, CNPP will be unable to conduct its work to support development of dietary guidance for this important age group.

- Complete the implementation of the 2010 Dietary Guidelines for Americans (seventh edition), and develop and release the 2015 Dietary Guidelines for Americans (eighth edition) in collaboration with HHS. This work is critical as the Guidelines are the science-based foundation for nutrition standards in all Federal nutrition assistance and education programs throughout government and in private sector nutrition and health promotion efforts.

- Undertake revisions to the Healthy Eating Index, Nutrient Content of the U.S. Food Supply, and USDA Food Plans following the release of the 2015 Dietary Guidelines for Americans.
• Update and release the 2016 Expenditures on Children in Families report and the Cost of Raising a Child infographic.

• Complete in-depth consumer research on food decision-making to determine the most effective communication strategies for individuals and families.

• Develop and implement robust strategies for communicating science-based consumer nutrition messages of the *2015 Dietary Guidelines for Americans* to the public. This includes reaching vulnerable populations (e.g., older Americans, young children), disseminating consumer-tested nutrition messages used by Federal and private sector partners, and distributing educational materials.

• Maintain, enhance and develop strategic and innovative web-based systems (www.ChooseMyPlate.gov, www.Supertracker.usda.gov, www.WhatsCooking.fns.usda.gov) designed to empower individuals and families with the best science-based advice to help consumers move toward positive dietary practices and active lifestyles. This requires: 1) efficient IT platform-based development and continual enhancements, and 2) multifaceted approaches that reflect the Department’s goal of being responsive and transforming how the Center conducts business and improves processes.

• Advance robust evaluation strategies to determine the effectiveness of national nutrition marketing, communication and education initiatives.

• Support and strengthen cooperative initiatives with Food and Nutrition Services.

  With the support of the Subcommittee, the Center looks forward to advancing the health of Americans by developing and promoting dietary guidance that links the strongest scientific research to the nutrition needs of all consumers. With this support, the Center will build, maintain and strengthen the promotion of nutrition guidance tools that millions of Americans are already using to tailor to their own efforts to eat and live more healthfully. Your support will set the foundation for national nutrition policy that is critical to addressing diet-related chronic disease such as – obesity, diabetes and cardiovascular disease – and related healthcare costs facing Americans today.

  I thank the Subcommittee for the opportunity to present this written testimony.