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The Dietary Guidelines for Americans (DGA): Current Status

The Dietary Guidelines for Americans (DGA) is a set of federally developed recommendations designed to promote health, prevent diet-related chronic disease, and meet nutrient needs. Due to its impact on federal nutrition policy and programs, consumer behavior, and industry practices, the DGA is of interest to public health, nutrition, agriculture, and food industry stakeholders. As mandated by the National Nutrition Monitoring and Related Research Act of 1990 (P.L. 101-445; 7 U.S.C. §5341), the DGA is jointly issued by the Department of Health and Human Services and the U.S. Department of Agriculture (HHS and USDA, respectively; hereinafter, “the Departments”) and must be published at least every five years. The *Dietary Guidelines for Americans, 2020-2025*, is the ninth and current edition of the DGA. The multiyear revision process is underway for the 2025-2030 DGA; the final publication is expected by the end of 2025. The Departments alternate serving as the administrative lead for each revision; HHS is the lead for the 2025-2030 DGA.

Brief Background

Federally issued dietary guidance can be traced back to 1894 when the USDA first issued dietary recommendations to the public. Over time, such guidance has shifted from focusing on nutrition adequacy (i.e., consuming enough nutrients) to reducing the risk of certain chronic diseases (e.g., cardiovascular disease), and has evolved from consumer-focused guidance to a policy document for policymakers, health care providers, nutrition educators, and federal nutrition program operators. For additional history, see CRS Report R47488, *The Dietary Guidelines for Americans: Development, Implementation, and Considerations for Congress*.

P.L. 101-445 codified the purpose and scope of the DGA, mandating that at least every five years, the Secretaries of HHS and USDA must jointly publish a report titled *Dietary Guidelines for Americans*, which “shall contain nutritional and dietary information and guidelines for the general public, and shall be promoted by each Federal agency in carrying out any Federal food, nutrition, or health program” and be “based on the preponderance of knowledge which is current at the time the report is prepared.” In addition to other populations and age groups covered in the report, the Agricultural Act of 2014 (P.L. 113-79) required the DGA to include nutrition and dietary guidelines specific to pregnant women and children up until age two starting with the 2020 report.

Guideline Development Process

The DGA revision process generally consists of four steps:

1. The Departments identify topics and scientific questions.
2. The Departments appoint the Dietary Guidelines Advisory Committee (DGAC), an external expert group, to

evaluate current scientific evidence and submit a Scientific Report to the Secretaries.

3. The Departments develop the new edition of the DGA.

4. The Departments release and implement the DGA with federal, state, and local partners and programs.

The 2020-2025 DGA was the first iteration to begin with the Departments establishing topics and scientific questions (Step 1); previously, revisions began with the appointment of the DGAC (currently Step 2). This change was intended “to promote a deliberate and transparent process, better define the expertise needed on the Committee, and ensure the scientific review conducted by the Committee would address Federal nutrition policy and program needs and help manage resources.”

As part of Step 2, the DGAC submits a Scientific Report to the Secretaries of the Departments that summarizes the scientific evidence and presents the DGAC’s conclusions and recommendations. The Scientific Report is not a draft of the DGA but rather an independent review of the current state of nutrition science intended to inform the Departments as they develop the DGA (Step 3). The primary audiences of the Scientific Report are the Departments, whereas the primary audiences of the DGA are health professionals, programs, and policymakers.

In developing the DGA (Step 3), the Departments draw upon a range of information, including the DGAC Scientific Report, comments from the public and federal agencies, and recommendations from prior DGA editions that may be reconsidered. The draft DGA typically goes through a multistep review and clearance process (e.g., review by federal and external experts, individual agency clearances) and culminates in review and approval by the Secretaries. Once approved, the DGA is released and replaces the previous version (Step 4). The DGA may be further adapted or utilized in other federal resources, including tools like MyPlate, which help consumers implement the DGA, or the Healthy Eating Index, a research tool that evaluates how sets of foods or beverages align with DGA recommendations and assesses diet quality. The DGA does not provide quantitative nutrient requirements or limits (i.e., Dietary Reference Intakes); these requirements are established and updated by the National Academies of Sciences, Engineering, and Medicine. Instead, the DGA uses such requirements (e.g., macronutrient levels) to inform food and beverage recommendations.

Current Status of the 2025-2030 DGA

The revision process for the 2025-2030 DGA began in 2021 when the Departments undertook a year-long process to develop a list of proposed scientific questions for

consideration by the DGAC. Selection criteria included a question’s relevance, importance, potential impact to federal programs, whether it duplicated existing or planned evidence-based federal guidance, and the availability of relevant research. The Departments stated that all questions would be reviewed “with a health equity lens” and that research questions would consider scientific evidence across the entire lifespan, in addition to other specifications. The proposed list also clarified that alcoholic beverages would not be examined by the DGAC (and instead included in a separate HHS-led effort) and that issues of sustainability and the relationship between nutrition and climate change would be addressed by separately.

The proposed questions were posted for public comment in spring 2022. Following the nomination and establishment of the DGAC in January 2023, the DGAC further prioritized questions and released a final list (using the same aforementioned criteria) at the DGAC’s second meeting in May 2023. The list included a description of the research methods that would be used to answer specific questions (i.e., data analysis, systematic review, evidence scan, and food pattern modeling) and provided a rationale as to why some questions were deprioritized. After a series of seven total DGAC meetings and multiple subcommittee meetings, the Scientific Report was released in December 2024, followed by a public comment period. To date, the 2025-2030 DGA process is in Step 3.

Scientific Report of the 2025-2030 DGAC

Briefly, the DGAC’s 2025-2030 Scientific Report found that few U.S. individuals follow a dietary pattern that aligns with DGA recommendations and outlined food groups that are typically under-consumed (e.g., fruits, vegetables) or consumed at or above recommend levels (e.g., meat, poultry, eggs). The DGAC recommended increased intakes of plant-based protein sources (e.g., beans, peas) and reduced intake of red and processed meats. The Scientific Report also described the rationale behind the conclusions for certain scientific questions and outlined questions that require further research. In the “Overarching Advice to the Departments” chapter, the DGAC recommended updates to the four guidelines introduced in the 2020-2025 DGA. These are briefly summarized in Table 1.

Table 1. DGAC Scientific Report Recommendations

2020-2025 DGA Guideline	2025-2030 DGAC Recommendations
1. Follow a healthy dietary pattern at every life stage.	<ul style="list-style-type: none">• Emphasize flexibility and inclusion in presenting healthy dietary patterns.
2. Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations.	<ul style="list-style-type: none">• Illustrate how the DGAs can be adapted for different cultural diets.• Provide guidance for adapting dietary patterns across different social, economic, geographic, and cultural contexts.

2020-2025 DGA Guideline	2025-2030 DGAC Recommendations
3. Focus on meeting food group needs with nutrient-dense foods and beverages; stay within calorie limits.	<ul style="list-style-type: none">• Use structured feeding practices to promote children’s intake of vegetables and fruits.• Emphasize whole grains; continue to recommend nutrient-dense foods and breakfast consumption.• Reconsider and conduct market research on nomenclature for certain food groups.
4. Limit foods and beverages high in added sugars, saturated fat and sodium; limit alcoholic beverages.	<ul style="list-style-type: none">• Clearly advise consumers about sodium levels.• Further reduce sodium in the food supply.• Maintain current limits on added sugars, saturated fat, and sodium.

Source: Adapted from HHS, USDA, *Scientific Report of the 2025 Dietary Guidelines Advisory Committee*, Part E, Chapter 1.

Issues for Congress

Stakeholders and policymakers have expressed concerns with various aspects of the DGA development process, such as the scope of the DGAC’s recommendations, DGAC membership, the process by which the DGAC reached conclusions, and specific recommendations included in the DGA. In response to such concerns, Congress has established broad requirements specific to certain editions of the DGA and included policy riders in appropriations acts, such as funding external evaluations of the DGA process. Prior efforts have sought to prohibit the DGA from including certain recommendations and to codify DGAC membership and congressional notification requirements, among other provisions (e.g., H.R. 8467). Congress’s indirect roles in the DGA process include appropriations to the Departments to fund the DGA development and Congress’s confirmation of the Secretaries, who must both sign off on the final DGA document.

Efforts in the 119th Congress (H.R. 2326/S. 1129) proposed a 10-year revision period and additional DGAC requirements, among other provisions. Congress may consider whether research gaps identified in the Scientific Report require further federal investment or evaluation. Congress may consider how the DGA could intersect with potential congressional efforts related to the Make America Healthy Again congressional caucus, federal nutrition programs, or other related policy debates. Congress may weigh whether steps in the revision process require additional transparency or congressional oversight. It remains to be seen whether recent HHS restructuring may affect the 2025-2030 DGA development process or timeline.

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