

The 2020-2025 Dietary Guidelines for Americans: CSPI's Key Takeaways

In December 2020, the federal government updated its healthy eating advice in the [2020-2025 Dietary Guidelines for Americans \(DGA\)](#). The advice is based on a scientific review by a committee of experts, and forms the basis of federal nutrition education and feeding programs impacting millions of Americans.

Overall, the 2020-2025 DGA recommends eating a diet that is rich in vegetables, fruits, protein foods (including beans and nuts), whole grains, low- or non-fat dairy foods, and unsaturated vegetable oils, and that limits saturated fat, sodium, and added sugars. The core elements of this healthy eating pattern can be modified to accommodate one's budget, cultural traditions, and personal preferences (Executive Summary, p. ix).¹ Below, we explain several of the recommendations about specific foods and nutrients, with a few clarifications from CSPI's nutrition experts.



Added Sugars

The 2020-2025 DGA recommends limiting added sugars to less than 10 percent of calories per day starting at age 2, and avoiding foods and beverages with added sugars for those younger than age 2. (Executive Summary, p. x).

Nutrition Facts	
8 servings per container	
Serving size 8 fl oz (240mL)	
Amount per serving	
Calories	110
<small>% Daily Value*</small>	
Total Fat 0g	0%
Saturated Fat 0g	0%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 5mg	0%
Total Carbohydrate 27g	10%
Dietary Fiber 0g	0%
Total Sugars 25g	
Includes 23g Added Sugars	46%
Protein 0g	
Vitamin D 0mcg	0%
Calcium 0mg	0%
Iron 0mg	0%
Potassium 40mg	0%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

The DGA adopted the “less than 10 percent” limit despite the evidence-based recommendation from the 2020 Dietary Guideline Advisory Committee to limit added sugars to less than 6 percent of calories for individuals aged 2 and older.² However, the DGA goes on to explain that recommended limits for added sugars are based on several assumptions, including overall calorie needs, stating that “[m]ost Americans have less than 8 percent of calories available for added sugars” after accounting for the calories provided by recommended daily servings of fruits, vegetables, protein foods, grains, and other nutritious foods (Ch. 1, p. 41). According to the DGA, “an individual who needs 2,000 calories per day [...] has less than 7 percent of total calories for added sugars” and only those who “need more than 3,000 calories may have a total of 9 to 10 percent of calories available for added sugars” (Ch. 1, p. 42). Based on the Advisory Committee’s recommendation, 6 percent of 2000 calories translates to 30 grams or about 7 teaspoons

of added sugar, less than the amount in a 12-oz can of Coca-Cola. In fact, sugary drinks, including soft drinks, fruit drinks, and sport or energy drinks, are the largest source of added sugars in the diets of Americans aged 1 and older (Ch. 1, p. 43).

Sodium

The 2020-2025 DGA recommends limiting sodium to less than 2,300 mg per day—and even less for children younger than age 14 (Executive Summary, p. x).

The average intake of sodium for Americans aged 1 and older is much higher than recommended, at 3,400 mg per day (Ch. 1, p. 46). Most of the sodium that Americans consume is added during commercial processing, including food preparation at restaurants, so individuals can start to lower their sodium intake by eating fewer highly processed foods and restaurant meals. Another strategy is reading the Nutrition Facts label of packaged foods to choose lower-sodium options (Ch. 1, p. 46). In the long-term, joint efforts from food and beverage industries, food service and retail establishments, and individuals are needed to lower Americans' sodium intake (Ch. 4, p. 102).

Saturated Fat

The 2020-2025 DGA recommends limiting saturated fat to less than 10 percent of calories per day starting at age 2 (Executive Summary, p. x).

To achieve this goal, foods and ingredients high in saturated fat such as high-fat meat, full-fat dairy, butter, coconut oil, and palm oil should be limited and replaced with polyunsaturated fats found in seafood, nuts, legumes, and non-tropical vegetable oils (Ch. 1, p. 44).



Seafood

The 2020-2025 DGA recommends eating at least 8 ounces of seafood per week (Ch. 4, p. 96). Pregnant or lactating women are encouraged to eat at least 8 and up to 12 ounces of seafood each week, choosing varieties that are lower in methylmercury, which can be harmful to the developing child (Ch. 5, p. 117). CSPI recommends that all individuals, especially women of childbearing age, select seafood choices that are lower in methylmercury *and* higher in healthy omega-3 fatty acids such as salmon, mussels, and shrimp. With those considerations in mind, [CSPI's Recommended Seafood Choices](#) provide clear guidance on which seafood to eat and which to avoid.

Red and Processed Meats

The 2020-2025 DGA encourages eating a variety of protein foods, including lean meats, poultry, eggs, seafood, beans, peas, lentils, nuts, seeds, and soy products (Executive Summary, p. ix).

“Lean meat” presumably includes lean beef and pork. However, elsewhere in the report, the DGA states that dietary patterns characterized by *lower* consumption of red and processed meats are associated with health benefits, including reduced risk of cardiovascular disease, type 2 diabetes, and certain types of cancer (Ch. 1, p. 23). This inconsistency leaves room for confusion about how lean meats fit into a healthy diet. Other health authorities take a plainer view of the science: [CSPI](#), [the American Heart Association](#), and the [American Institute for Cancer Research](#) recommend limiting red and processed meat, including the lean varieties, in favor of more legumes, nuts, seeds, seafood, and poultry.



Feeding Children Under the Age of 2

The 2020-2025 DGA recommends exclusively feeding infants human milk (*i.e.*, breast milk) for the first 6 months of life. When human milk is unavailable, iron-fortified infant formula is the only appropriate substitute. By 6 months of age, caregivers should begin introducing nutritious foods from all food groups, including protein foods, fruits, vegetables, and grains, while continuing to provide human milk or infant formula through the first year of life (Executive Summary, p. ix).

Many policy, institutional, and cultural barriers limit caregivers in meeting their breastfeeding goals, underscoring the need for policies to promote and support the practice. CSPI supports policies to increase access to paid family leave and supports like breast pumps and lactation

counseling, and to increase investment in federal programs like the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) breastfeeding peer counselors.



Iron-fortified infant cereals can be an important source of iron in infants' diets starting at 6 months of age (Ch. 2, p. 59). The [American Academy of Pediatrics](#) recommends feeding infants

a variety of cereal grains, including oatmeal and barley, instead of rice, because many infant rice cereals contain high amounts of arsenic.

Additionally, the DGA advises that infants less than 1 year of age should not consume any cow's milk, plant-based milk alternatives, fruit juice, or foods containing added salt or sugar (Ch. 2, p. 61-62). Toddler drinks (e.g., products labeled "toddler milk" or "transition formula") are not necessary for young children, as they often contain added sugars and do not offer any nutritional benefits that cannot be obtained from ordinary foods (Ch. 2, p. 62).

Alcoholic Beverages

According to the 2020-2025 DGA, adults of legal drinking age can choose not to drink, or to drink in moderation by limiting intake to 2 drinks or less per day for men and 1 drink or less per day for women, when alcohol is consumed (Executive Summary, p. x).

That summary makes it clear that drinking less is better for health than drinking more. The report goes on to advise additional caution based on emerging evidence: "even drinking within the recommended limits may increase the overall risk of death from various causes, including several types of cancer and some forms of cardiovascular disease. Alcohol has been found to increase risk for cancer, and for some types of cancer, the risk increases even at low levels of alcohol consumption (less than 1 drink a day)" (Ch. 1, p. 49).

Most Americans are not aware of the link between alcohol and cancer, which led CSPI and several partner organizations to urge the federal government to implement a cancer warning label on alcohol products. So far, our actions include a [petition](#) to the Alcohol and Tobacco Tax and Trade Bureau and a [letter](#) to the nominee for U.S. Surgeon General.

For more information, please contact the Center for Science in the Public Interest at policy@cspinet.org.

¹ All chapter and page references in: U.S. Department of Agriculture, U.S. Department of Health and Human Services. (2020) Dietary Guidelines for Americans 2020-2025, 9th Edition. Available at: https://www.dietaryguidelines.gov/sites/default/files/2020-12/Dietary_Guidelines_for_Americans_2020-2025.pdf

² Dietary Guidelines Advisory Committee. 2020. *Scientific Report of the 2020 Dietary Guidelines Advisory Committee: Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services*. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC.