

James Mulhern, President & Chief Executive Officer | Randy Mooney, Chairman

April 15, 2015

Ms. Tina Namian, Branch Chief Policy and Program Development Division Child Nutrition Programs Food and Nutrition Service Department of Agriculture P. O. Box 66874 St. Louis, MO 63166

Re: FNS-2011-0029, RIN 0584-AE18; Child and Adult Care Food Program: Meal Pattern Revisions Related to the Healthy, Hunger-Free Kids Act of 2010

Dear Ms. Namian:

The National Milk Producers Federation welcomes the opportunity to provide comments to the United States Department of Agriculture Food and Nutrition Service (USDA-FNS) on the proposed rule to update the requirements for meals served under the Child and Adult Care Food Program, ensuring that meals are consistent with the most recent Dietary Guidelines for Americans (DGA) and relevant nutrition science. The National Milk Producers Federation (NMPF), based in Arlington, VA, develops and carries out policies that advance the well-being of dairy producers and the cooperatives they own. The members of NMPF's cooperatives produce the majority of the U.S. milk supply, making NMPF the voice of more than 32,000 dairy producers on Capitol Hill and with government agencies. Visit <u>www.nmpf.org</u> for more information.

The Child and Adult Care Food Program (CACFP) meets important nutritional needs of millions of Americans, mostly children, many of whom live in at-risk situations. Like the federal school meal programs, CACFP provides balanced meals and snacks, providing good nutrition and modeling good dietary habits. Milk is offered with each CACFP meal and is one of four optional components of snacks within the program.

Role of Dairy Foods in the CACFP.

The rationale for including milk and other dairy foods in CACFP is clear and compelling.

 Milk and milk products are a basic food group: The 2010 Dietary Guidelines for Americans (DGA) recommend three servings each day for Americans 9 years and older, 2-1/2 servings for children 4-8 years and two servings for 2-3-year-olds. Since CACFP provides breakfasts, lunches and suppers, including dairy in each meal in ageappropriate amounts is a sensible means of meeting DGA recommendations.

Agri-Mark, Inc. Arkansas Dairy Cooperative Association Associated Milk Producers Inc. Continental Dairy Products, Inc. Cooperative Milk Producers Association Dairy Farmers of America, Inc. Dairymen's Marketing Cooperative, Inc. Ellsworth Cooperative Creamerv Farmers Cooperative Creamerv FarmFirst Dairy Cooperative First District Association Foremost Farms USA Land O'Lakes, Inc. Lone Star Milk Producers Maryland & Virginia Milk Producers Cooperative Association Michigan Milk Producers Association Mid-West Dairymen's Company Northwest Dairy Association **Prairie Farms** Dairy, Inc. Premier Milk Inc. Scioto County Cooperative Milk Producers' Association Select Milk Producers, Inc. Southeast Milk, Inc. St. Albans Cooperative Creamery, Inc. Swiss Valley Farms Company **Tillamook County** Creamery Association United Dairymen of Arizona Upstate Niagara Cooperative, Inc. Zia Milk Producers, Inc.

- Milk supplies three of the four nutrients of public health concern identified by the DGA: calcium, vitamin D and potassium.
- Consuming dairy is associated with multiple health benefits, including bone health, lower risk of cardiovascular disease and type 2 diabetes, and lower blood pressure in adults.
- Most Americans fail to meet DGA recommendations for dairy consumption. Children between ages 2 and 5 get close to the recommended amounts but, thereafter, consumption declines rapidly with age, and Americans overall consume an average of only 1.9 servings daily. Promoting dairy in CACFP can be an effective way to maintain dairy consumption at healthy levels among the youngest children, and encourage continued consumption among children in older age groups.

In general, USDA-FNS has followed recommendations for CACFP meal patterns that were provided by the Institute of Medicine (IOM). This science-based approach allows FNS to establish meal patterns that reflect expert opinion and evidence-based results. On the other hand, FNS is also appropriately mindful that considerations such as economic impacts on providers, product availability, and tastes and preferences of CACFP participants must be taken into account. Our subsequent comments will primarily center on how best to integrate science-based guidelines with these practical concerns.

Yogurt as part of the CACFP Package.

The proposed rule would permit yogurt to substitute for milk in adult meals no more than once per day. NMPF supports FNS's decision to apply this provision only to adults and not children. NMPF agrees with FNS's stated concern that less-healthy beverages may be served to children if milk is not offered as the beverage. We would add that it is critically important to model healthy dietary patterns in this program, and the provision of milk as a regular beverage is a good example of such beneficial modeling.

NMPF also strongly supports FNS's proposal to permit a meat or meat alternate to substitute for half of the grain requirement at breakfast. Meats or meat alternates such as yogurt can help kids consume protein throughout the day and contribute to satiety, which is one of the many benefits of a healthy breakfast and contributes to less snacking during the mid-morning period.

FNS specifically requested comment on two options for yogurt: either limiting sugar content to 30 grams per 6-ounce serving, or establishing this limit as a recommended best practice. NMPF believes the 30-gram parameter is reasonable, and most commercial yogurts likely to be used in CACFP would meet this standard. Additionally, for those few products or varieties of yogurts with a sugar content higher than 30 grams, it is only marginally higher, e.g., 32 grams. These products could be reformulated over time to reflect this standard.

Flavored Milk as a part of the CACFP Package.

Flavored milk is unquestionably popular with children: Nearly two-thirds of all school milk is flavored, usually chocolate, but sometimes strawberry, vanilla or other flavors. In principle, flavored milk is a good example of using modest amounts of sugar to increase the appeal (especially to children) of a nutritious, nutrient-dense beverage. Flavored milk has the same nutrient package as unflavored milk, which is the #1 source of nine essential nutrients in children's diets.

The use of modest amounts of added sugars to enhance palatability of nutrient-dense foods has the support of health professionals. A March 2015 policy statement from the American Academy of Pediatrics reiterates that "sugars can increase the palatability and desirability of foods ... Consumed within recommended calorie amounts, sweetness can offer an effective tool to promote consumption of nutrient-dense foods and beverages." AAP then provides a number of "attributes" to guide food programming choices, including selection "from the fundamental 5 food groups" including "low-fat milk and dairy."

Flavored milk is the source of only 4.3% of added sugars in children's diets. Given the small proportion of added sugars in the American diet coming from flavored milk, it clearly does not stem from flavored milk, but rather comes from nutrient-poor beverages and foods. It is in this context that NMPF considers the flavored milk options proposed by FNS for different age groups in CACFP (ages 2-4 and ages 5 and older).

First, we note that as children approach school age, unfortunately, the pattern of dairy under-consumption accelerates rapidly. According to the scientific report of the 2015 Dietary Guidelines Advisory Committee, even by ages 4-8, dairy consumption falls below recommended levels, and between 2001-04 and 2007-10, mean intake in this age group actually declined. Therefore, NMPF believes FNS should exercise caution in establishing regulations that might cause milk consumption to decline further.

An additional consideration is that, depending on the exact setting in which care is being provided, school-age children may be served along with younger children, e.g., in after-school programs. FNS has never considered banning flavored milk among schoolaged children in the federal school meal programs, and there would be no rationale for doing so in CACFP either. Yet where age groups are mixed together, it may be infeasible to have different milk options available within the same group of children, with the available options dependent on how old each child is. We doubt the practicality of such a system.

As opposed to the options FNS has suggested for flavored milk in different age groups, NMPF recommends that the agency consider a single standard for flavored milk, if offered, that would provide a self-enforcing limitation on added sugars. We recommend that FNS permit flavored milk to be offered if, and only if, it meets two basic requirements: (1) the milk is low-fat or fat-free; and (2) total calories do not exceed 150. This calorie limit is broadly consistent with the 22-gram total sugars limit in FNS's options (which derive, in turn, from IOM recommendations), but permits some flexibility for providers, depending on whether they choose to offer fat-free or low-fat milk. In the event low-fat milk was used, total sugars would necessarily have to be reduced below 25 grams in order to meet the calorie cap – a built-in discipline on added sugars.

Implicit in our position is the view that flavored milk should *not* be limited to fat-free varieties. This requirement is not contained in either the 2010 DGA, the 2015 DGAC report, or the HHFKA, but was added in regulations promulgated by FNS to implement the HHKFA. There is growing evidence that among the reasons for the recent decline in school milk consumption may be children's preferences for low-fat flavored milk rather than fat-free. We respectfully submit that FNS should not repeat this mistake in the CACFP.

Best Practices.

The concept of establishing a set of recommended best practices for CACFP providers is sound, and we strongly support FNS's initiative in doing so. However, we question whether best practices should be enshrined in regulation, or simply laid out in guidance documents.

In neither case would the best practices be binding on providers, but where they are part of a regulatory text, the process of changing them as nutrition science evolves becomes lengthy and cumbersome. Guidance documents, by contrast, would have equal exemplary authority but would be much more easily modified. Recent changes in scientific thinking on cholesterol and sodium remind us that nutrition science is not a fixed body of eternal axioms, but evolves like any other field of human knowledge.

NMPF appreciates FNS's consideration of our comments and commends the agency for its hard work to improve meal patterns in an important nutrition program. NMPF supported enactment of the HHFKA and has been pleased to participate actively in the process of implementing this important and groundbreaking law.

Thank you for the opportunity to share our perspectives. Please contact us if you have additional questions.

Sincerely,

Path Panko Britzinskii

Beth Panko Briczinski, PhD Vice President, Dairy Foods & Nutrition