

July 11, 2024

Janet M. de Jesus, MS, RD HHS/OASH Office of Disease Prevention and Health Promotion (ODPHP) 1101 Wootton Parkway Suite 420 Rockville, MD 20852

Re: Docket OASH-2022-0021

Dear Director de Jesus:

On behalf of Oldways, a 501(c)3 educational nonprofit dedicated to inspiring people to embrace the healthy and sustainable joys of the old ways of eating, we are writing to provide comments on the proposed modifications to the Dietary Patterns from 2025 Dietary Guidelines Advisory Committee (DGAC) (Docket OASH-2022-0021-0001).

Oldways has been documenting traditional cultural foodways for more than three decades, leveraging the expertise of diverse committees of subject-matter experts in both nutrition research and culinary history across a broad range of cultural diets. Additionally, our organization created and runs the Oldways Whole Grains Council and has been involved in whole grain education and labeling in the United States and in many other countries over the past 20 years.

We are deeply concerned that the DGAC is considering reducing the number of total grains recommended in the Healthy U.S.-Style Dietary Pattern without explicitly maintaining the 3 ounce-equivalent recommendation for whole grains. We are also deeply concerned that the committee is considering substituting starchy vegetables in place of whole grains. As detailed below, these modifications are directly at odds with the scientific evidence and put Americans at grave risk of diet-related disease.

Importance of Whole Grains for Human Health

The <u>Global Burden of Diseases Study</u> found that "low intake of whole grains was the leading dietary risk factor for [disability-adjusted life-years] among men and women and the leading dietary risk factor for mortality among women" ahead of high sodium intake, high trans-fat intake, and high sugar-sweetened-beverage intake. The 2020-2025 Dietary Guidelines for Americans reports that most Americans exceed the recommended intake for refined grains, while 98% fall short of the recommended whole grain intake. Deemphasizing whole grains in a population where whole grain intake is too low and refined grain intake is too high threatens public health and sends consumers the wrong signals about the role of whole grains in a healthy diet. If the intent is to reduce only refined grain intake, the guidance should state that explicitly.

In the early 1990s, dietary recommendations lumped together saturated and unsaturated fats, making no distinction between the two. When the USDA's first Food Guide Pyramid was created, all



dietary fats (both saturated and unsaturated) were relegated to the very top of the food pyramid, thereby advising consumers that all dietary fats should be consumed sparingly. Manufacturers responded by creating a wide variety of low- or no-fat foods. This proved to be bad science and recommendations changed more than twenty years ago.

We caution the DGAC not to repeat these mistakes with grain recommendations. As with saturated and unsaturated fats, refined grains and whole grains impact health quite differently. It's true that most Americans would benefit from reducing their refined grain intake, but this should not come at a cost to whole grain intake. It's essential that a distinction be made between these grain categories and their associated health impacts, and that increased whole grain intake continue to be encouraged among American consumers.

<u>Previous iterations of the DGAC Report</u> have noted, "if whole grains were consumed in the amounts recommended in the Food Patterns, whole grains would provide substantial percentages of several key nutrients, such as about 32 percent of dietary fiber, 42 percent of iron, 35 percent of folate, 29 percent of magnesium, and 16 percent of vitamin A." Now double that and imagine the nutrient contribution if we made all of our grains whole.

Folate, in particular, has been singled out as a nutrient of concern, but if Americans eat a diet full of whole grains (which would provide 70% DV for folate) and top it off with leafy greens and legumes, as advised in many of the food patterns, then it should be no struggle to get the recommended amount of folate. Grains and starches were never meant to provide 100% of all necessary nutrients, but as part of an overall balanced diet, whole grains will certainly get us much closer than alternative choices.

Although there may be clear benefits to replacing an over-consumed food group like refined grains with under-consumed food groups like dark green vegetables or beans/peas/lentils, it is imperative that the existing whole grain recommendation be maintained or strengthened. As it stands, the United States' recommendation of at least 3 ounce-equivalents of whole grains per day (or at least 48g total) is on the low end of global recommendations. Singapore recommends 50 grams daily, Denmark recommends 75 grams daily, and Sweden recommends 70-90 grams daily. The Nordic Council of Ministers increased its whole grain intake recommendation to 90g in 2023, and the 2019 Eat-Lancet Commission Report recommends 232g of whole grain per day, just to name a few examples from our peers. In the years since the 2020-2025 Dietary Guidelines for Americans were published, scientific evidence on the health benefits of whole grains has continued to grow dramatically, linking whole grains with slower cognitive decline in aging, improved weight control, and reduced risk for type 2 diabetes, among many other benefits.

Reducing Health Inequities with Whole Grain Foods

The DGAC reports that the food pattern models are meant to "better reflect intake variability and the range of possible healthful diets based on our diverse populations." What fails to make headlines, however, is that whole grains have a rich history in practically every diverse cultural food tradition on the planet. For more than three decades, Oldways has been documenting traditional cultural foodways, in which whole grains nearly always play a vital role. Erasing the



historical and cultural importance of whole grains in diverse traditional diets does a disservice to Americans of all racial and ethnic backgrounds.

While a vocal minority may assume that whole grains are not a part of certain cultural food traditions and that certain racial populations are less inclined to eat whole grain foods, the data do not support this harmful stereotype. According to the Oldways Whole Grains Council's census-representative Whole Grain Consumer Insights Survey, 75% of white Americans, 78% of Black Americans, 80% of Latinx Americans, and 87% of Asian Americans report wanting to eat more whole grains. USA Rice's 2023 Research on Rice Eating Occasions compiled by The Hartman Group found that brown rice was *more likely* to be consumed when connecting with one's own heritage or ethnicity. Similarly, uplifting traditionally-consumed whole grains (like millets) is recommended as a key strategy for culturally-sensitive carbohydrate modification. Additionally, most whole grains, including brown rice, whole grain corn, quinoa, sorghum, millet, teff, amaranth, buckwheat, wild rice, and oats, are naturally gluten-free, providing numerous flexibilities for those with dietary restrictions.

We have been monitoring whole grain trends and preferences for more than two decades, and we recognize the importance of corn- and rice-based products for certain cultural demographics. However, strengthening the whole grain recommendations in the Dietary Guidelines for Americans and other federal nutrition programs makes room for even more whole grain versions of these kinds of products to be developed and introduced. In the decade that followed the 2005-2010 Dietary Guidelines for Americans' first recommendation to make half your grains whole, data from the Oldways Whole Grain Council's Stamped Product Database indicate that manufacturers responded by increasing the percentage of the grain that is whole in their products and developing more whole-grain products for consumers. Policy changes can make a big difference in the intersection between public health and the food supply; we trust that a clear recommendation for increased whole grain consumption in the DGA would create space for an even greater number of culturally-relevant whole grain products to be brought to market at accessible price points.

Closing Remarks

Given the clear and consistent evidence linking whole grain intake with numerous health benefits, it is deeply concerning that the DGAC is perpetuating harmful stereotypes around whole grain acceptability and considering reducing the whole grains recommendation and/or replacing part of the whole grains group with other carbohydrate sources like starchy vegetables. This modification is not supported by scientific evidence and sends consumers the wrong signals about the role of whole grains in a healthy diet. In a country with chronically low whole grain intake, backpedaling on decades of progress is a public health risk that our population cannot afford.

We thank the HHS and ODPHP for the opportunity to share our expertise on the DGAC process, and we look forward to learning more about how we can work together to improve public health and support greater health equity.

Sincerely,



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