

September 28, 2020

Dear fellow Americans,

Please join us in fighting for truth, health and freedom from federal nutrition guidelines that prohibit the simple choice of Whole Milk at schools and daycares for children over age 2.

TAKE ACTION: 2 Ways to help by 1) contacting Congress, 2) getting School Boards involved:

1. **Write or Call your Representative and Senators in Congress** Find your members of Congress and their contact information by entering your address here <https://www.govtrack.us/congress/members> Then copy and/or customize this MESSAGE to send to them.

Dear Honorable Member of Congress

I am writing to ask that you cosponsor and support these bills in the U.S. Congress to allow our children the simple choice of whole milk at school: House Bill 832 Whole Milk for Healthy Kids Act <https://www.congress.gov/bill/116th-congress/house-bill/832> and Senate Bill 1810 Milk in Lunches for Kids Act <https://www.congress.gov/bill/116th-congress/senate-bill/1810>

I am also writing to ask that you consider joining with other members of Congress to write a letter to USDA Secretary Sonny Perdue and HHS Secretary Alex Azar to intervene in the process of the 2020-25 Dietary Guidelines for Americans (DGA) because the DGA Committee failed to consider ALL the scientific evidence about the role of saturated fats in healthy diets, especially the healthy combination of fats in Whole Milk, which is 3.25% fat.

Today, 60% of Americans are diagnosed with chronic illness, and childhood obesity has tripled in the past 40 years of increasingly 'fat-restrictive' Dietary Guidelines, it is clear the Guidelines have been unable to flatten the curve on diet-related disease. The most vulnerable in the COVID-19 pandemic have lower immune status and underlying health conditions that would benefit from thorough review of the science on fats. Important fat-soluble vitamins and nutrients are now a deficiency concern in DGA low-fat diets. Studies show children consuming whole milk absorb more of these vitamins and have a reduced risk of becoming overweight. A one-size-fits-all DGA process is not supported by the scientific literature. We cannot afford to wait five years for the next DGA cycle to get what's wrong, right. Over 30,000 Americans agree. See signatures and comments at this petition:

<https://www.dropbox.com/sh/qvha9521mjv6996/AADOnzRVtkfEvHp5WBGDV4Da?dl=0>

Thank you for considering my request. _____

2. **Contact your Local School Boards and other elected bodies** (even state legislatures, civic, community, health, education, parent-teacher and farm organizations) to support childhood health, well-being and learning readiness by passing resolutions and notifying Congressional delegations of these Resolutions. **SAMPLE RESOLUTION FOR SCHOOL BOARDS BELOW (followed by background information and links).**



Resolution supporting Whole Milk choice in schools

WHEREAS our nation’s future well-being relies on well-nourished children ready to learn at school;

WHEREAS our nation’s schools have been required by the U.S. Dept. of Agriculture Food Nutrition Service regulations to offer only fat-free and low-fat milk, and are prohibited from offering Whole Milk as a choice of beverage at lunch and breakfast;

WHEREAS Whole Milk is standardized to 3.25% fat with essential, bioavailable, fat-soluble vitamins and nutrients;

WHEREAS school trials showed students preferred Whole Milk 3 to 1 over low-fat, and milk waste was reduced by 95%;

WHEREAS Whole Milk sales are largest at retail, indicating more families choose Whole Milk;

WHEREAS numerous studies point to the positive to neutral effects of milkfat on health indicators;

WHEREAS Whole Milk contains a blend of fats at 3.25% that are shown to slow the rate of carbohydrate (lactose) absorption to reduce after-meal hunger cravings and reduce intolerance to lactose;

WHEREAS studies show children drinking Whole Milk had three times the essential Vit. D absorption;

WHEREAS studies show children drinking Whole Milk had 40% less risk of being overweight;

WHEREAS moderate consumption of milkfat has been associated with improved mood and cognition;

WHEREAS offering milk choice to children reduces waste and reduces shifts to sugary or artificially-sweetened high fructose corn syrup ‘à la carte’ beverages;

THEREFORE, now be it resolved that the _____ supports the end of Whole Milk prohibition and the freedom to offer Whole Milk as a beverage choice at school meals; and

THEREFORE, be it further resolved that the _____ calls upon the President, U.S. Congress, U.S. Secretaries of Agriculture, Education and Health and Human Services, Governor, State Legislature, State Departments of Education and Agriculture, and such administrators to re-examine the National School Lunch Program rules and Smart Snacks regulations regarding à la carte beverages, to allow Whole Milk as a beverage choice that supports health, growth, immune function and learning-readiness while reducing waste.

It is the intent of this Board by affirmative vote to simply support Whole Milk as a choice in schools.

Board President Date

Superintendent Date

BACKGROUND information with supportive links

We ask the federal government to get back to the science and ask the U.S. Congress to intervene in the Dietary Guidelines process because federal administrators set up the DGA process, including research screening, WITHOUT implementing the recommendations of the National Academies of Sciences, Engineering and Medicine, which Congress had previously paid to review the DGA process! Here is the National Academies Report: <https://www.nationalacademies.org/news/2017/09/new-report-calls-for-comprehensive-redesign-of-process-for-updating-dietary-guidelines-for-americans>

Americans would benefit from more healthy meal pattern choices now that almost half of America is overweight or obese, according to the CDC, especially our poorest communities where rates of obesity and diabetes are even greater on a percentage basis and as they are most reliant on government feeding programs that have over the last 40 years restricted consumption of healthy, satiating, insulin-moderating fats through institutional feeding and foodservice.

As childhood obesity rates have tripled over the past 40 years since the Dietary Guidelines were begun, the 2020 DGA failed to consider scientific reviews and other evidence both current and before 2010 due to USDA's criteria of "relevant to current federal policy" and due to commercial bias among the Committee.

Interestingly, most parents, teachers and school board members do not fully realize the power of the DGA, including the fact that their "Guidelines" have banned whole milk and real dairy products from schools and daycares. Some are awakening to the realization that full-fat dairy products improve not only nutrition, but also learning readiness, and provide satisfying options for those who are most economically and nutritionally at-risk.

Case in point are the names and comments of the 30,000-strong petition to bring the CHOICE of whole milk back to schools. You can still sign this petition to support Whole Milk for Healthy Kids legislation at this link -- <https://www.change.org/p/bring-whole-milk-back-to-schools>

You can download a copy of the petition with names through mid-June to show to your elected officials at this link: <https://www.dropbox.com/sh/qvha9521mjv6996/AADOnzRVktkfEvHp5WBGDV4Da?dl=0> --

More than 23,000 have signed with hundreds providing comments representing school leadership, health and nutrition professionals as well as dairy producers, parents, teachers, coaches, students, researchers, elected officials, and concerned citizens in general. An additional 6,000-plus signatures by mail are also included. Combined, the petition represents every state in the U.S.!

A whole milk trial at a Pennsylvania middle and high school this year showed teenagers made healthier choices. They increased milk consumption vs. other ala-carte beverages by 65% when whole milk was simply offered as a choice alongside the mandated fat-free and low-fat milk. At the same time, 95% less milk was thrown away because students had the freedom to choose whole milk.

Meanwhile, the 2020 Dietary Guidelines Advisory Committee, along with federal employees, spent the past 16 months drafting the next five years of 2020-25 Guidelines using a flawed research screening process. Congress called upon the National Academies of Sciences, Engineering, and Medicine to evaluate the way these Guidelines are set, and here is their report that called for a comprehensive

redesign of the Dietary Guidelines process: <https://www.nationalacademies.org/news/2017/09/new-report-calls-for-comprehensive-redesign-of-process-for-updating-dietary-guidelines-for-americans>

Unfortunately, USDA responded in 2018 before setting up the DGA Committee for 2020 with excuses as to why the Academies' recommendations could not be implemented. Read the USDA / HHS response here <https://www.dietaryguidelines.gov/sites/default/files/2019-03/USDA%20HHS%20Response%20to%20HMD%20Report%201.pdf>

This 2020 "Guidelines" process excluded many relevant studies about the role of saturated fats, and especially milkfat, in healthy diets. Attempts to remedy this unscientific basis for deliberation were repeatedly ignored by USDA Food Nutrition Service staff that supported the DGA Committee.

In fact, this review by scientists, including former DGA Committee members, was published in the June 2020 Journal of American College of Cardiology, showing the anti-saturated-fat edicts of the federal "Guidelines" are unnecessary, even harmful. <https://www.nutritioncoalition.us/news/saturated-fats-limit-unnecessary-journal-of-american-college-of-cardiology>

Also, one or more 2020 DGA Committee members have come forward as "whistleblowers", according to letters from:

Over 300 doctors and healthcare practitioners available here <https://www.nutritioncoalition.us/news/practitioners-urge-usda-hhs-to-delay-dietary-guidelines-report>

The Nutrition Coalition, here: <https://static1.squarespace.com/static/5a4d5666bff20053c65b7ff2/t/5ed91ec39d412854399c3991/1591287491759/Final+Letter+to+the+Secretaries.pdf>

The Academy of Nutrition and Dietetics, here: <https://www.eatrightpro.org/news-center/on-the-pulse-of-public-policy/regulatory-comments/academy-requests-more-time-for-2020-dietary-guideline-advisory-committee-report>
The current DGA 'whistleblower(s)' revealed the flawed process, citing lack of transparency, exclusion of evidence, inconsistencies, even intimidation. Read more here
<https://www.nutritioncoalition.us/news/usda-members-blow-whistle-flaws-in-process>

According to the recommendations presented at the DGA Committee's final meeting June 17, 2020, the next five years of "Guidelines" will worsen 40 years of ill advice that make it even more impossible for schools and daycares to offer choices like whole milk, whole dairy, beef and other whole foods that provide satiety and essential nutrients for strong bodies and minds.

These flawed guidelines also pave the way for multinational companies to gain even more control of childhood nutrition with 'government-compliant' meals and beverages devoid of nutrition and satiety, but full of processed carbohydrates.

In 2010, Congress linked these Guidelines more strictly to rules about what schools and daycares can offer to children over 2 years of age in terms of milk and other animal protein.

This led to a ban on whole milk as a choice in schools, allowing only non-fat and 1% low-fat to be offered, but also allowing plenty of other beverage options that lack nutrition and contain combinations of high fructose corn syrup and sucrose sweeteners that, while low in calories with zero fat, provide zero satiety, zero nutrition and further condition the palate to crave more sweetness.

The DGA Committee on June 17 admitted that under their meal pattern “Guidelines”, Americans, especially children, fall short on important nutrients of concern under these Guidelines, but they failed to address it. Read more at these links:

- 1) <https://agmoos.com/2020/06/18/one-sided-bias-evident-as-dgac-edges-fat-caps-lower-even-our-toddlers-arent-safe/>
- 2) <https://www.nutritioncoalition.us/news/draft-report-of-the-2020-dietary-guidelines-advisory-committee-ignores-concerns-continues-nutritionally-inadequate-advice-based-on-weak-evidence>
- 3) <https://agmoos.com/2020/06/29/dietary-guidelines-catastrophe-not-understood-by-most/>
- 4) <https://www.nutritioncoalition.us/2020-dietary-guidelines/>

Here are just a FEW of many examples of what the DGA Committee left out of their 15 months of deliberation on saturated fat and milkfat during the 2020 five-year cycle.

- 1) Whole Milk consumption by children reduced risk of overweight and obesity by 40%:
<https://www.sciencedaily.com/releases/2019/12/191230104810.htm>
- 2) Whole Milk consumption by children improved Vitamin D status, which is being found even more important today in terms of what we are learning during the Coronavirus pandemic and its effect on economically-disadvantaged communities <https://www.acsh.org/news/2016/11/29/whole-milk-better-low-fat-kids-vitamin-d-status-10498>
and <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4234713/?fbclid=IwAR0GH1LLniGguDIgTC3BzdAaKt-UDyQBzDIwi4kJBADMfXHJ8fhfP2pPKwE>
- 3) Whole Milk and full-fat dairy foods are linked to reduced diabetes risk, here’s an article about just one such review: <https://www.npr.org/sections/thesalt/2016/04/18/474403311/the-full-fat-paradox-dairy-fat-linked-to-lower-diabetes-risk?>
- 4) Leading Scientists, including former members of USDA Dietary Guidelines Advisory Committees, published a State-of-the-Art Review finding current government caps on saturated fats are no longer justified by the evidence in terms of weight, nutrition, cardiovascular health and all cause mortality. Many of the studies in their review were ignored by the 2020 DGA Committee:
<https://www.onlinejacc.org/content/early/2020/06/16/j.jacc.2020.05.077>

FURTHER SUPPORTING INFORMATION for whole milk in schools

Whole Milk and Vitamin D Status

Althea Zanecosky, MS, RD/LDN -- a registered dietician and nutrition professor at Montgomery County Community College -- testified at a June 18th hearing before the Pennsylvania House Agriculture Committee. She cited a 2016 study out of Canada, published in the *American Journal of Clinical Nutrition* (1) looked at over 2700 healthy children aged 1 to 6 and evaluated the fat content of their milk and its influence on weight and vitamin D status.

Consumption of whole milk (3.25% fat) showed significantly higher blood levels of vitamin D in children compared with consumption of low-fat (1% fat) milk. This is significant because a recent study in *Pediatrics* found that “50.8 million U.S. children and adolescents, representing 61% of the pediatric population, suffer from vitamin D deficiency.”

Vitamin D is a fat-soluble vitamin and is found naturally in milkfat. When this fat is removed to make fat-free or low-fat milk, vitamin D is added back in, but these results indicate this is not as bioavailable to the children consuming milk without the milkfat. The same can be said for alternative beverages that state on labels ‘fortified with vitamin D.’

Simply put, children who consumed whole milk had higher vitamin D levels than children who consumed low-fat 1% milk. In fact, it took 3 cups of 1% low-fat milk with the same vitamin D content “on paper” to reach the blood vitamin D levels of children who drank just 1 cup of whole milk (3.25% fat), showing that the nutrient dense profile of whole milk delivers more nutrition per calorie invested.

Whole milk and body fatness / obesity

Professor Zanecosky testified that the average child who drank whole milk had lower body fat as measured by BMI z-score than the average child who consumed 1% low-fat milk. Furthermore, those who consumed whole fat milk had lower odds of severe obesity.

Studies supporting this conclusion are growing in number and include a 2017 Report in the *Journal of Preventive Medicine* (2) as well as a 2013 report in the *Archives of Disease in Childhood*.

Studies out of Harvard and Tufts Universities are also contradicting the low-fat/ fat-free milk regulations based on findings that regular consumption of whole milk and full-fat dairy products are associated with a lower risk of both obesity and diabetes. (3)

Additionally, Dr. Richard C. Theuer, adjunct professor in the Department of Food, Bioprocessing and Nutrition Sciences at North Carolina State University, in his official comment to USDA Food and Nutrition Services regarding the Dietary Guidelines, makes this point: “The reason given in support of feeding fat-free and low-fat milk to children is to promote health and to reduce the risk of major chronic diseases, including obesity. Indeed, reduced fat milk does play a role in overweight and obesity among children . . . by making it more likely!” he writes.

“Recent research documents that children consuming reduced fat milks are MORE likely to be overweight or obese. Fortunately, despite the ‘Dietary Guidelines for Americans,’ most parents do not feed their young children low-fat or no-fat milk,” writes Dr. Theuer, citing his references.

“Scharf et al (Scharf, Demmer, & DeBoer, 2013) found that the majority of young children drank whole or 2% milk (87% at 2 years, 79.3% at 4 years). O’Connor et al. (O’Connor, Yang, & Nicklas, 2006) studied preschool children and found that 83% of children drank milk, with whole milk being consumed by 46.5% of the children, and only 3.1% and 5.5% of the children consuming skim milk and 1% milk, respectively. Preschool children consumed a mean total beverage volume of 26.93 oz. per day, which included 12.32 oz. of milk,” Dr. Theuer continues.

“Unfortunately, once children go to school or to a daycare setting that must comply with Federal rules, parents lose control over the beverage consumed by their children. The USDA Child Care Meal Pattern requires that ‘Milk served must be low-fat (1%) or non-fat (skim) for children ages 2 years and older and adults.’ Only low-fat milk and no-fat milk (and recently sugar-sweetened chocolate-flavored skim milk) are permitted in the School Lunch Program,” Dr. Theuer explains.

“Sugar-sweetened beverages subsequently displace whole milk in the diets of children, and these are known to encourage obesity (Harrington, 2008; Malik, Schulze, & Hu, 2006),” he adds further.

Whole milk and diabetes

Dr. Theuer reports the science behind whole milk’s benefits in preventing and managing diabetes, which is on the rise among children and teens, along with obesity.

One reason was identified by New York City registered dietitian, certified diabetes educator and author Laura Cipullo, who writes: “When someone eats full-fat dairy versus low-fat dairy, the fat will actually delay the absorption of the milk’s sugar. As a result, blood sugar rises more slowly over a longer period of time. Consequently, insulin follows this same pattern. Less circulating insulin means less risk for the development of insulin resistance and diabetes.”

Dr. Theuer adds this point: “The study suggests that specific fatty acids contained in dairy, such as pentadecanoic acid and heptadecanoic acid (two odd-carbon fatty acids) may play special roles in risk reduction.”

Whole milk and learning-readiness

Professor Zanecosky noted in her testimony before the Pa. House Ag Committee that “Whole milk provides proper nutrition and has a benefit called ‘satiety.’” The satiety of fats and proteins in whole milk help curb cravings and consumption of sugary beverages or snacks that do not provide milk’s nutrient-dense impressive nutrition profile. Proper nutrition and satiety can reduce distractions from hunger and carbohydrate craving. This can result in improved learning readiness via the satiety of whole milk offered during the school lunch or breakfast helping children feel fuller, longer.

Whole milk and long-term cardiovascular disease risk

A growing body of research is also weakening the theorized link between the consumption of saturated fat found in animal foods like whole milk and one's long-term risk of cardiovascular disease.

A recent crossover study published in the *European Journal of Clinical Nutrition* looked at whole milk, specifically, showing consumption led to **improved cholesterol levels** compared with drinking fat-free or low-fat (1%) milk. Specifically, HDL levels were significantly raised but with zero effect on LDL when whole milk and full-fat dairy foods were regularly consumed – reflecting a healthier net effect on cholesterol levels. (4)

Whole milk and digestive sensitivity

Digestive issues are also calmed with whole milk vs. low-fat or fat-free. The PA Dairy Advisory Committee and the 97Milk.com social media interface hear from consumers with digestive sensitivities who are able to tolerate whole milk, but not the fat-free and 1% low-fat milk served in schools. A more balanced and natural matrix of fat, protein and carbohydrate is present naturally in whole milk. This is very important as a growing number of children and teens are said to be lactose intolerant.

Their parents choose whole milk at home, and yet they must drink low-fat and fat-free milk at school, experiencing digestive upset that leads to drinking no milk at all, or to being distracted during class by belly pain. Cipullo explains: “Full-fat dairy is lower in lactose, making it easier for individuals with lactose intolerance to digest compared to low-fat or no-fat dairy. Meanwhile one specific fatty acid contained in dairy is known to aid in gastrointestinal health, and according to a 2013 review from Polish researchers, may actually hold promise in the treatment of IBS and promoting healthy gut bacteria.”

Whole milk and nutrient density

Whole milk contains 8 grams of complex fat, both saturated and unsaturated and with important functional fatty acids, including omega 3's. This total combination of fats comprises just 3.25% of whole milk's volume (12% of daily recommended value). For the small amount of added fat and the additional 50 to 60 calories in a cup of whole milk vs. low-fat milk, there are many benefits – especially for children ages 2 through 19 – who are governed against consuming whole milk while spending many of their waking hours in daycare and attending school.

Whole milk contains 8 grams of complete protein containing all 9 essential amino acids. Whole milk contains over a dozen other important and essential nutrients that are not found in replacement beverages, keeping children fueled and full for learning.

Research References by footnote, (others directly cited in letter)

- 1) The American Journal of Clinical Nutrition, Vol. 104, Issue 6, December 2016, Pages 1657-1664, [https://academic-oup.com.eres.qnl.qa/ajcn/article/104/6/1657/4668588](https://academic.oup.com/ajcn/article/104/6/1657/4668588)
- 2) Prev Med Rep. (U.S. Nat'l Library of Medicine, National Institutes of Health) 2017 Dec 8: 1-5 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5552381/>
- 3) Full-fat dairy consumption could reduce risk of type 2 diabetes, Diabetes.co.uk, the global diabetes community, April 8, 2016 <https://www.diabetes.co.uk/news/2016/apr/full-fat-dairy-consumption-could-reduce-risk-of-type-2-diabetes-95576109.html>
- 4) Effect of whole milk consumption compared with skimmed milk (fat-free/low-fat) on fasting blood lipids in healthy adults..., December 11, 2017, *European Journal of Clinical Nutrition* 72, 249-254 (2018) <https://www.nature.com/articles/s41430-017-0042-5> Further explanations: <https://www.diabetes.co.uk/news/2018/jan/full-fat-milk-improves-cholesterol-levels-90626725.html?fbclid=IwAR1ko6NAoB6rZWE6OP-1e4IMaLITJdT9pwEtTnOteKVMb7YyV5qVRnPaGo>

WHOLE MILK, Nature's Nutrition Powerhouse
 8 ounces, 150 calories, delivers: **Virtually 97% Fat-Free!**



Essential Nutrients by % of Recommended Daily Value (DV)










Iodine	35%
Calcium	30%
Vitamin D	25%
Riboflavin	25%
Phosphorus	20%
**Protein	16%
B12	13%
Potassium	11%
Vitamin A	10%
Niacin	10%
Vitamin B5	9%
Thiamin(B1)	7%
Zinc	7%
Magnesium	6%
Vitamin B6	4%
Folate	3%
Vitamins E & K	1%

SOURCE: USDA National Nutrient Database for Standard Reference (4-11)

97Milk.com

*The 3.25% (8 g) fat content of Whole Milk represents 12% recommended DV, including saturated, monounsaturated, polyunsaturated and omegas. ***The 5% carb content (12 g) represents 4% DV

An 8-ounce serving of milk, flavored or not, gives you the same.....

 Riboflavin as 1/3 cup of whole almonds	 Vitamin D as 3/4 ounce of cooked salmon	 Vitamin B-12 as 3 ounces of turkey
 Phosphorus as 1 cup of canned kidney beans	 Protein as 1 1/2 medium eggs	 Potassium as one small banana
 Niacin as 10 cherry tomatoes	 Calcium as 10 cups of medium spinach	 Vitamin A as 3/4 cup of broccoli

WHOLE MILK- 8 ounces, 150 calories, delivers:
 Protein 3.5% (16% DV), Fat 3.25% (12% DV),
 carbohydrates 5% (4% DV), water 88%
 (Standardized by weight)
 (Calories by % recommended DV- daily value)

More on milk health go to:
97MILK.com

