

Healthy Eating Research Nutrition Guidelines for the Charitable Food System

Healthy Eating
Research

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Introduction

Food Insecurity in the United States

Food insecurity is defined by the U.S. Department of Agriculture (USDA) as the lack of consistent access to enough food for an active, healthy life.¹ In 2018, approximately 1 in 9 U.S. households experienced food insecurity.² While hunger and food security are related, they are also distinct. Hunger refers to a personal, physical sensation of discomfort, while food insecurity refers to a lack of available financial resources for food at the household level.³ People living in food insecure households face a number of barriers to eating healthy that make them vulnerable to diet-related chronic diseases, including obesity, diabetes, hypertension, and heart disease.⁴ In recent years, strategies to address food insecurity have focused on interventions that simultaneously support food access and health.⁵

Charitable Food System

Federal food programs like the *Supplemental Nutrition Assistance Program (SNAP)* and the *Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)* are the first line of defense against food insecurity in the United States. However, these benefits are often not sufficient to meet all of the food needs of people living in food insecure households. For SNAP recipients, the average benefit amount is \$1.40 per person per meal—an amount which may not be adequate to meet household food needs.⁶ The charitable food system—a network of food banks, food pantries, and meal programs—fills this gap by distributing billions of pounds of food annually (Box 1). Feeding America is a national member organization that includes approximately 200 food banks across the United States. This food bank network distributes food through approximately 60,000 hunger relief agencies to serve an estimated 46.5 million low-income individuals each year.⁷

Food banks typically receive food (or money for food purchases) through multiple channels, including individual donors, food drives, growers, manufacturers, distributors, and retailers. The federal government also provides food and administrative funds to the charitable food system through programs such as *The Emergency Food Assistance Program* and *Commodity Supplemental Food Program*. Some states provide similar funding through programs such as California's CalFood program and the Massachusetts Emergency Food Assistance Program. Food purchasing provides food banks with greater flexibility than food donations to alter foods in their inventory.

Box 1: Charitable Food System Definitions

Meal program: A program implemented by a community organization to provide eligible clients (often seniors, adults with disabilities, and low-income individuals) with no- or low-cost meals. Many food banks also operate summer meal programs to close the gap during the summer months when school is out.

Food bank: An organization responsible for sourcing, warehousing, and distributing food to community agencies such as food pantries. Food banks also engage in other strategies to systematically address food insecurity, including policy advocacy and referrals to federal nutrition programs.

Agency: A community organization that distributes food directly to clients. The majority host food pantries, but some host meal programs. Many agencies are located in faith-based settings and community centers. Other settings include residential programs, congregate meal sites, and schools.

Food pantry: A site where groceries are distributed to individuals at no cost. Food pantries may also be called food shelves.

Food donor: Growers, manufacturers, distributors, retailers, and individuals who provide food for distribution to low-income households by food banks or agencies. The USDA also contracts with food banks to distribute food through programs such as The Emergency Food Assistance Program (TEFAP) and Commodity Supplemental Food Program (CSFP).

Clients: Individuals and families who receive food from a food pantry.

Food from the food bank is supplied to partner agencies, such as food pantries and meal programs. Groceries from food pantries and meals from meal programs are then provided directly to clients. Pantries and meal programs typically source food from their local food bank as well as their own food donors and direct purchases.

Although the charitable food system was originally conceptualized as a way to provide temporary assistance to low-income families in acute need, for a variety of complex reasons, today's charitable food system plays a critical role in supporting the ongoing food needs of many chronically food insecure households.^{7,8} Thus, more people are exposed to the charitable food system, and for longer periods of time, than in past decades.

Rationale

Nutrition, Food Insecurity, and Health

Extensive research has shown that food insecurity is a complex problem, with many food insecure families also experiencing other challenges, such as a lack of affordable housing, low wages, insufficient transportation, and fewer social supports. Poor nutrition has fueled a sharp rise in the prevalence of chronic disease in the U.S.⁹ and people living in low-income neighborhoods often lack access to healthy food, which has led to growing socioeconomic disparities in diet quality.^{10,11} As a result, individuals living in households utilizing the charitable food system are at high risk of poor nutrition and diet-related chronic disease, including obesity, diabetes, hypertension, and heart disease.^{7,12}

Charitable Food System Responses

Because the charitable food system is an important contributor to the food environment of people experiencing food insecurity, many organizations within this system have prioritized sourcing and supplying more nutritious foods.^{8,13–15} This work is particularly important because many items moving through the charitable food system are shelf-stable, highly processed foods that tend to be high in saturated fat, sodium, and added sugars. Recent efforts to promote healthy choices in food banks and food pantries include the creation and adoption of formal nutrition policies; expanded nutrition education; cultivation of relationships with food donors who can donate healthier products; and investment in capacity to store and display healthier food items.

Existing Ranking Systems

Shifting charitable food system inventory toward healthier foods and beverages requires making decisions regarding what constitutes a more nutritious food item. To this end, various nutrition ranking systems (e.g., nutrition standards or nutrition guidelines) for the charitable food system have been developed to categorize foods based on specific ingredients or nutrient criteria. In 2017, a national survey of nearly 200 state, regional, and local food banks found that more than half tracked the nutritional quality of the food they distributed.¹³ Several ranking systems were identified, including Feeding America's Foods to Encourage (F2E), the Choose Healthy Options Program (CHOP), Supporting Wellness at Pantries (SWAP), and a variety of other customized systems.

Although these ranking systems have similarities (e.g., fresh fruits and vegetables are ranked “healthy”), there are also important differences.^{8,16} Some systems have two tiers (e.g., F2E: yes vs.

no) and others have three tiers (e.g., SWAP: green, yellow, red). Some systems use a ratio of “positive” nutrients (e.g., vitamins, minerals) to “negative” nutrients (e.g., sugar, sodium, saturated fat) based on the Nutrient Rich Index (e.g., CHOP)^{17,18}, while others focus exclusively on nutrients to limit (e.g., SWAP uses saturated fat, sodium, and sugar). There are systems that rank products based on nutrient values per 100 grams or 100 calories of product in order to standardize similar products with different portion sizes, while others rank products based on nutrient values in one serving, as printed on the Nutrition Facts Label. Finally, some systems rely on food descriptions to categorize items (e.g., canned fruit in water or juice), while others set specific thresholds for nutrients (e.g., maximum of calories, grams of saturated fat, or milligrams of sodium).

Importance of Common Definitions

Inconsistencies in which foods are defined as “healthy” within the charitable food sector mirror inconsistencies in defining “healthy” food throughout the rest of the food system. However, there are important reasons to work toward a common set of nutrition criteria in the charitable food system. First, important procurement, storage, and operational decisions are made at every step along a complex pathway that moves food from the donor to the food bank where food is warehoused, and then to the food pantry or meal program where food is distributed to clients. Variation in how each stakeholder defines which foods are “healthy” creates confusion among staff, volunteers, clients, and donors. Second, food banks, food pantries, and other stakeholders interested in implementing or revising nutrition standards must often choose and operationalize a ranking system with limited access to professionally trained nutrition staff.¹⁹ The variability in nutrition ranking systems makes these activities more challenging, as each set of standards uses unique criteria with nuanced differences. For example, one set of standards might use nutrient thresholds based on 100 grams of a product, while another sets thresholds based on 100 calories. In both instances, implementation would require volunteers or staff to perform complex math calculations. Finally, alignment on common nutrition principles across the charitable food system can guide conversations with donors about which items food banks prefer to distribute; discussions with policymakers about strategies to incentivize healthier donations; and decisions concerning how food banks should use their limited dollars to purchase foods.

With these goals in mind, *Healthy Eating Research (HER)*, a national program of the Robert Wood Johnson Foundation, convened a panel of experts to create clear, specific recommendations for evidence-based nutrition guidelines tailored to the unique needs and capacity of the charitable food system.

Methodology

The recommendations included in this report were developed by a national panel of experts in the charitable food system, nutrition, and food policy fields convened by HER in 2019 (see page 2 for a full list of expert panel members). The intent of these recommendations is to improve the quality of foods in food banks and pantries in order to increase access to and promote healthier food choices.

The panel reviewed and analyzed numerous existing guidelines. Many of these were specifically designed for the charitable food system, including F2E,²⁰ CHOP,^{18,21} SWAP,¹⁴ Foodlink's The Healthy Choice system,²² the Capital Area Food Bank Wellness Tracker,²³ and the Food Assortment Scoring Tool (FAST).²⁴ The panel also reviewed guidelines from industry and the private sector (the Children's Food and Beverage Advertising Initiative,²⁵ American Heart Association (AHA) Heart Check Standards,²⁶ and Wal-Mart's Great For You Standards),²⁷ government (WIC²⁸ and Smart Snacks²⁹ for schools), and previously developed HER guidelines.^{30,31} Finally, the panel reviewed the 2015-2020 Dietary Guidelines for Americans (DGA)³² and the Food and Drug Administration (FDA) food labeling rules and regulations.³³

The panel met using video conference technology nine times between February 2019 and January 2020. Each meeting lasted approximately 1.5 hours. All meetings were recorded and accessible to panel members for ongoing review. Between meetings, panel members provided regular feedback via email and Qualtrics surveys. Panel co-chairs held additional calls on an ad hoc basis with select members of the panel to elicit specific feedback in areas of their expertise. Once the general approach to ranking was agreed upon, the bulk of the panel's discussions focused on determining nutrient thresholds (e.g., upper limits for sodium, saturated fat, added sugar) for each of the food tiers. These decisions are described in detail in this report.

The target audiences for these nutrition guidelines are food banks, food pantries, and other charitable food system stakeholders, including Feeding America. In addition, these recommendations may guide food donors to supply healthier food choices.

Key Considerations

These guidelines are intended to support systems changes in the food bank and food pantry setting that will ultimately allow pantry clients to access healthier foods. To that end, the panel considered the following important dimensions of the charitable food system throughout the development process:

- **Respect and dignity:** The charitable food system touches an enormously diverse group of people who differ in their cultural food preferences and in their health needs. The charitable food system prioritizes treating all people with respect and dignity. When implementing a nutrition ranking system, it is important to build in flexibility to acknowledge and accommodate this diversity.
- **Capacity and cost:** Food banks and food pantries have varying capacity to implement nutrition ranking systems. Capacity for implementation includes in-house expertise in nutrition, relationships with donors, access to cold storage, staff and volunteer time, and financial resources.
- **Reliance on volunteers:** Much of the work done in the charitable food system is performed by volunteers with limited expertise in nutrition. Thus, a nutrition ranking system must be simple to understand and operationalize.
- **Use of weight as a metric:** Food banks have historically measured their success by the number of food-pounds distributed. This metric focuses on food quantity, rather than quality, and may be at odds with goals to shift to a healthier inventory.
- **Mixed foods:** Large quantities of food enter the charitable food system in mixed loads containing both healthy and unhealthy items. It can be challenging to sort and rank individual items within these donations.
- **Donor relationships:** Most food in the charitable food system is donated. Many donors provide foods of variable nutritional quality. Some food banks are concerned that they will offend donors, and thus lose their engagement, if they reject donations of less healthy food or portray those foods as having lesser value or importance.
- **Consistent messaging:** Families who utilize the charitable food system are likely exposed to nutrition education messaging from other sources, including WIC, SNAP-Ed (SNAP's education arm), and school curricula. Where possible, implicit and explicit nutrition messaging in food pantries should be consistent and reinforce the same messages as these other programs.
- **Evolution of nutrition science, product formulation, and consumer information:** The evidence and recommendations on which these guidelines are based will evolve. The DGA are revised every five years, the marketplace is transitioning to a revised Nutrition Facts Label, and nutrition science continues to grow.³⁴ The current guidelines are intended to be updated over time.

Approach to Developing the Panel Recommendations

In order to develop the final recommendations included in this report, panel members had to make several key decisions regarding the approach they would take to ranking products commonly found in the charitable food system. Following review of existing standards, the panel chose to divide food products into distinct product categories, and then within each product category, foods are ranked into three tiers based on key nutrients of concern. Additional details on these key decisions follow, and tips for operationalizing them are summarized in Box 2.

Food Product Categories

The panel recommends dividing food products into eleven distinct categories: (1) fruits and vegetables, (2) grains, (3) protein, (4) dairy, (5) non-dairy alternatives, (6) beverages, (7) mixed dishes, (8) processed and packaged snacks, (9) desserts, (10) condiments and cooking staples, and (11) other miscellaneous items. Many of these categories directly align with USDA MyPlate categories;³⁵ the remainder represent product groups commonly found in the charitable food system.

Three-Tiered System

The panel recommends a three-tiered system: “choose often,” “choose sometimes,” and “choose rarely.” A three-tiered system is recommended instead of a two-tiered system for several reasons. First, a three-tiered system acknowledges that there are many foods that do not clearly fall into a “healthy” or “unhealthy” category. Second, it allows more stringent thresholds for the top and bottom tiers. Third, food banks or food pantries that want to focus specifically on increasing “choose often” foods or decreasing “choose rarely” foods can elect to collapse tiers to create a two-tiered system. This option offers food banks and food pantries flexibility in operationalizing, setting internal guidelines for tracking and monitoring, making purchasing decisions, and implementing nutrition education.

The panel considered multiple ways of labeling and communicating the three tiers. The recommendation is to combine the three phrases with the stoplight symbols of “green” for choose often, “yellow” for choose sometimes, and “red” for choose rarely. Many food banks and food pantries already use the visual stoplight coding to convey nutrition information because it is easily understood and interpretable across languages. However, food banks and food pantries should consider the specific needs of the communities they serve and choose the most appropriate words or symbols accordingly.

Ranking Within Food Product Categories

Products within nine of the 11 categories are primarily ranked based on three nutrients to limit: saturated fat, sodium, and added sugar. These three key nutrients were selected because extensive research links excess consumption

Box 2: Key Recommendations

Divide food products into 11 categories

- Categories include: (1) fruits and vegetables, (2) grains, (4) protein, (4) dairy, (5) non-dairy alternatives, (6) beverages, (7) mixed dishes, (8) processed and packaged snacks, (9) desserts, (10) condiments and cooking staples, and (11) other miscellaneous items.
- Items in the condiments and cooking staples and other miscellaneous items categories are not ranked.

Identify key nutrients of concern and whole grains

- The Nutrition Facts Label provides information on the amount of saturated fat, sodium, and sugar in a single serving.
- Added sugar content, rather than total sugar content, should be used when it is available on the Nutrition Facts Label.
- For grains and processed and packaged snacks, use the ingredient list to determine if the first ingredient is a whole grain.

Rank foods into three tiers using specific thresholds

- Tiers can be communicated as “choose often,” “choose sometimes,” and “choose rarely,” or with green, yellow, and red visual cues, according to local preference.
- Table 1 identifies tier thresholds for each product category. Overall food product rankings are determined by the lowest tier of any nutrient. For example, a product that is ranked green (“choose often”) for saturated fat, yellow (“choose sometimes”) for sodium, and red (“choose rarely”) for added sugar would receive a final ranking of red (“choose rarely”).

of them to diet-related chronic diseases, including obesity, diabetes, hypertension, and cardiovascular disease.^{36,37,38,39,9}

This is consistent with the DGA, which recommend limiting consumption of added sugars, saturated fat, and sodium as part of a healthy dietary pattern. These nutrients are also easily located on the Nutrition Facts Label, simplifying implementation of the guidelines for staff and volunteers.

Products in two categories—condiments and cooking staples and miscellaneous products—are not ranked. In addition, due to the importance of increasing consumption of whole grains, the panel also recommends using the ingredient list to assess whether the first ingredient in two categories—grains and processed and packaged snack foods—is a whole grain.

The current thresholds are based on nutrients found in a single serving of food. Although alternative nutrition ranking systems¹⁸ use standardized food measurements to rank products (e.g., nutrients per 100 grams or per 100 calories), this strategy requires complex calculations that the panel viewed as a barrier to implementation. Anchoring the guidelines to serving size allows straightforward identification of necessary information on the Nutrition Facts Label. The FDA has recently updated serving sizes to more accurately reflect usual consumption in the modern era.⁴⁰

These guidelines are designed to use the added sugar (rather than the total sugar) value on the new Nutrition Facts Label. However, because the marketplace is still in transition to the new label, the added sugar value may not always be available. In this case, the same thresholds can be applied, using the total sugar value for all food categories except fruit and vegetables and dairy. For those two categories, different sets of total sugar thresholds are provided (see Table 1 footnote).

Finally, the panel did not feel it was appropriate for rankings to be influenced by the practice of fortifying foods with vitamins and minerals.⁴¹ Thus, vitamin and mineral content are not taken into consideration in this ranking system.

Box 3: Total Sugar vs. Added Sugar and Changes in the Nutrition Facts Label

Total sugar includes both naturally occurring and added sugar.

Naturally occurring sugars are found in foods such as fruit (fructose) and milk (lactose).

Added sugars include all sugars added to foods or beverages. Added sugars can include natural sugars such as white or brown sugar; honey or agave; and manufactured sweeteners, such as high-fructose corn syrup. The American Heart Association recommends limiting added sugars to 25 grams per day for women and 38 grams per day for men. Dietary Guidelines for Americans recommend limiting added sugar to less than 10 percent of daily calories.

The updated Nutrition Facts Label includes both added sugar and total sugar. This update was required for large manufacturers in January 2020 and should be available on all packaged foods by January 2021. This information allows people to distinguish naturally occurring sugars from those that have been added during processing.



Expert Panel Recommendations

Table 1 provides a summary of the recommended nutrition guidelines resulting from the expert panel. The table includes saturated fat, sodium, and added sugar nutrient thresholds for each of the three tiers within the 11 product categories. The green columns represent the “choose often” tier, the yellow columns represent the “choose sometimes” tier, and the red columns represent the “choose rarely” tier. Product examples are provided for each of the 11 food categories (i.e., rows in the table) to illustrate the types of items that would fall into each; this is not meant to be an exhaustive list of all products in each category, but rather to guide implementers in correctly categorizing food products.

Following the table, the report sections provide further details on food category definitions, the rationale for the expert panel’s decisions, and key considerations for optimal implementation of the recommendations. These key considerations for implementation focus primarily on nutrition education messaging. Other dimensions of implementation, such as behavioral economic strategies, purchasing, and stocking will be more fully addressed in the forthcoming Implementation Toolkit.

Fruits and Vegetables

The fruits and vegetables category includes fresh, frozen, canned, or otherwise processed (e.g., dried, dehydrated) fruits and vegetables, as well as 100 percent fruit or vegetable juice. Packaged fruits and vegetables that include complementary ingredients (e.g., frozen broccoli with cheese sauce, tomato sauce) are also included in this product category.

Because fruit contains naturally occurring sugar from fructose, it is important to note that this category has different thresholds for total and added sugar. Fresh produce, as well as canned and frozen fruits and vegetables with no added saturated fat, sugar, or sodium, are automatically ranked as “choose often.” Although plain dried fruit (i.e., with no added saturated fat, sugar, or sodium) is nutrient dense, it is also more calorically dense than whole fruit due to its concentration. As a result, plain dried fruit is automatically ranked as “choose sometimes.”

The DGA recommend that the majority of fruit consumed come from whole fruit rather than juice, and that, when juice is consumed, consumption should be limited to 100 percent juice without added sugar.³² This is especially important for young children, who also need to limit total daily intake of 100 percent juice to avoid excess calories and sugar. This recommendation is in agreement with the American Academy of Pediatrics (AAP),⁴² a recent [consensus statement](#) from an

expert panel of national health and nutrition organizations including AAP,⁴³ and current WIC benefits. Therefore, 100 percent juice products without added sugar or sodium are automatically ranked in the “choose sometimes” tier, as they provide key nutrients but also can be significant contributors to excess calorie intake. It is important to distinguish 100 percent juice from “fruit drinks” that are not 100 percent juice; the latter should be ranked under the beverages category.

Although the panel encourages greater consumption of fruit in all forms (fresh, frozen, or canned), it also recognizes the need to limit added sugar in Americans’ diets, as recommended by the DGA. Thus, the panel decided to only allow canned fruit packed in water or 100 percent juice into the “choose often” tier. Fruit canned in light syrup will typically fall into the “choose sometimes” tier, while fruit canned in heavy syrup will generally fall into the “choose rarely” tier.

This decision to allow fruit canned in 100 percent juice into the “choose often” tier may appear to conflict with the default ranking of 100 percent juice beverages into the “choose sometimes” tier; however, the panel felt that fruit packed in only 100 percent juice was appropriate for the “choose often” tier as the juice content in these products is generally small, encouraging greater consumption of fruit without any added sugar.

Canned vegetables can be a good option for many families to meet their daily vegetable needs. However, these products generally contain added sodium, which is another important nutrient to limit according to the DGA.⁴⁴ Although the FDA standard to label a product “low sodium” is ≤ 140 milligrams per serving, the panel recommends a higher 230 milligrams threshold to encourage greater consumption of vegetables. The 230 milligrams threshold is equivalent to 10 percent of the recommended daily limit for sodium (for an average adult), according to the DGA. This threshold is also consistent with F2E guidelines and AHA Heart Check guidelines for canned or frozen vegetables in sauce/liquid. Rinsing canned vegetables further reduces sodium exposure, and nutrition education provided in the charitable food system often includes this messaging. If desired, food banks may opt to use a stricter sodium standard for vegetables.

Implementation considerations

Nutrition education in this category should emphasize rinsing canned vegetables to reduce sodium content prior to eating; selecting canned vegetables labeled “reduced sodium,” “low sodium,” or “no salt added”; selecting fresh and frozen products with no added sugar or sodium based on the Nutrition Facts Label; selecting fruit canned in 100 percent fruit juice or water rather than syrup; and distinguishing 100 percent juice from “fruit drinks” that contain added sugars.

Nutrition Guidelines for Ranking Charitable Food

Food Category*	Example Products	Choose Often			Choose Sometimes			Choose Rarely		
		Saturated Fat	Sodium	Added Sugars**	Saturated Fat	Sodium	Added Sugars**	Saturated Fat	Sodium	Added Sugars**
Fruits and Vegetables	Fresh, canned, frozen, and dried fruits and vegetables, frozen broccoli with cheese sauce, apple sauce, tomato sauce, 100% juice, 100% fruit popsicle	≤2 g	≤230 mg	0 g	All 100% juice and plain dried fruit			≥2.5 g***	≥480 mg	≥12 g
					≥2.5 g***	231-479 mg	1-11 g			
Grains	Bread, rice, pasta, grains with seasoning mixes	First ingredient must be whole grain AND meet following thresholds:			≥2.5 g***	231-479 mg	7-11 g	≥2.5 g***	≥480 mg	≥12 g
		≤2 g	≤230 mg	≤6 g						
Protein	Animal (beef, pork, poultry, sausage, deli meats, hot dogs, eggs) and plant proteins (nuts, seeds, veggie burgers, soy, beans, peanut butter)	≤2 g	≤230 mg	≤6 g	2.5-4.5 g	231-479 mg	7-11 g	≥5 g	≥480 mg	≥12 g
Dairy	Milk, cheese, yogurt	≤3 g	≤230 mg	0 g	3.5-6 g	231-479 mg	1-11 g	≥6.5 g	≥480 mg	≥12 g
Non-Dairy Alternatives	All plant-based milks, yogurts and cheeses	≤2 g	≤230 mg	≤6 g	≥2.5 g	231-479 mg	7-11 g	≥2.5 g	≥480 mg	≥12 g
Beverages	Water, soda, coffee, tea, sports drinks, non-100% juice products	0 g	0 mg	0 g	0 g	1-140 mg	1-11 g	≥1 g	≥141 mg	≥12 g
Mixed Dishes	Frozen meals, soups, stews, macaroni and cheese	≤3 g	≤480 mg	≤6 g	3.5-6 g	481-599 mg	7-11 g	≥6.5 g	≥600 mg	≥12 g
Processed and Packaged Snacks	Chips (including potato, corn, and other vegetable chips), crackers, granola and other bars, popcorn	None			If a grain is the first ingredient, it must be a whole grain AND meet following thresholds:			≥2.5 g	≥141mg	≥7 g
		0-2 g	0-140 mg	0-6 g						
Desserts	Ice cream, frozen yogurt, chocolate, cookies, cakes, pastries, snack cakes, baked goods, cake mixes	None			None			All desserts		
Condiments and Cooking Staples	Spices, oil, butter, plant-based spreads, flour, salad dressing, jarred sauces (except tomato sauce), seasoning, salt, sugar	Not ranked								
Miscellaneous Products	Nutritional supplements, baby food	Not ranked								

* Definitions of food product categories are included in the text of the full report.

**Use the added sugars value when available on the Nutrition Facts Label. If it is not available, use the total sugars value. The thresholds are the same for all categories except fruits and vegetables and dairy. For both fruits and vegetables and dairy, total sugars thresholds are ≤12 grams for the “choose often” tier, 13 to 23 grams for the “choose sometimes tier,” and ≥24 grams for the “choose rarely” tier.

*** The threshold for saturated fat is the same for the “choose sometimes” and “choose rarely” categories. All saturated fat values ≥2.5 grams should be ranked as “choose sometimes.” The overall ranking is based on the lowest tier of any nutrient. Thus, a grain with 3 grams of saturated fat (“choose sometimes”), 300 milligrams of sodium (“choose sometimes”), and 13 grams of added sugar (“choose rarely”) would fall into the “choose rarely” tier, while a grain with 3 grams of saturated fat (“choose sometimes”), 300 milligrams of sodium (“choose sometimes”), and 10 grams of added sugar (“choose sometimes”) would fall into the “choose sometimes” tier.

Notes: Tiers can be communicated as “choose often,” “choose sometimes,” and “choose rarely,” or with green, yellow, and red visual cues, according to local preference. Overall food product rankings are determined by the lowest tier of any nutrient. For example, a product that is ranked green (“choose often”) for saturated fat, yellow (“choose sometimes”) for sodium, and red (“choose rarely”) for added sugar would receive a final ranking of red (“choose rarely”).

Grains

The grain category includes single grains (e.g., rice, oatmeal, quinoa), as well as products that include grains as their primary ingredient (e.g., bread, cereal, and pasta). Crackers are categorized with processed and packaged snacks, rather than with grains.

Whole grains, which contain the entire grain kernel (bran, germ, and endosperm), are preferred to refined grains, which undergo processing to remove the germ and endosperm and lose important nutrients in the process. Examples of whole grains include whole wheat flour, whole cornmeal, oatmeal, and brown rice. Examples of refined grains include white bread, white pasta, white rice, and white flour.

Whole grain consumption is associated with better diet quality and nutrient intake in both children and adults.^{45,46} The Scientific Report of the 2015 Dietary Guidelines Advisory Committee found strong and consistent evidence that higher consumption of whole grains and lower intake of refined grains is associated with decreased risk of cardiovascular disease. Although the DGA recommend that half of all grains consumed each day should be whole grains, few Americans meet these recommendations.³²

Based on the importance of increasing consumption of whole grains, the panel recommends that in order for an item to qualify for the “choose often” tier in the grains category, the first ingredient of a product must be a whole grain and a single serving must meet the “choose often” nutrient requirements.⁹ Products that do not have a whole grain as their first ingredient automatically fall into either the “choose sometimes” or “choose rarely” tiers according to their saturated fat, sodium, and sugar content.

Added sugar thresholds for the “choose often” tier align with current total sugar requirements for SWAP but are more stringent than AHA Heart Check total sugar guidelines for grains (≤ 7 to 9 grams depending on fiber content). WIC standards for total sugar in cereal products is ≤ 6 grams per dry ounce, which often aligns with the 6 grams of added sugar per serving threshold recommended by the panel; however, some cereals are labeled with servings larger than 1 dry ounce. The saturated fat thresholds for grains are consistent with SWAP and F2E guidelines.

Implementation considerations

Unlike guidelines for the other product categories, determining whether a product qualifies as a whole grain requires examination of the first item in the ingredient list. Volunteers and staff will need training on how to identify a whole grain. Examples of first ingredients that indicate a whole grain are “whole wheat,” “brown rice,” “bulgur,” “buckwheat,” “oatmeal,” “whole-grain cornmeal,” “whole oats,” and “whole rye.” In contrast, if “enriched,” “unbleached,” or “wheat” are first on the ingredient list, the product should be categorized as a refined grain. Nutrition education in food pantries should also focus on helping clients identify whole grains.

Protein

This category includes protein from both animal and plant sources. Examples of animal sources are beef, pork, poultry, seafood, and eggs. Examples of plant-based sources are nuts (including nut butters, such as peanut butter), seeds, veggie burgers, tofu, tempeh, legumes, and beans. Products made from soy that are intended to resemble dairy products, such as soy milk, soy-based cheese, and soy-based yogurt, are categorized with non-dairy alternatives.

Processed meats (e.g., sausage, hot dogs, and deli meat) and canned beans are often high in sodium. The sodium threshold of ≤ 230 milligrams for the “choose often” tier represents ≤ 10 percent of recommended daily sodium and is consistent with F2E guidelines for nuts and seeds. The sodium threshold is lower than the AHA Heart Check guidelines for eggs (240 milligrams), fish (360 milligrams), meat (360 to 480 milligrams), and poultry (360 to 480 milligrams), but higher than the 140 milligrams threshold to label a product “low sodium.”

Animal proteins can also be high in saturated fat. The saturated fat threshold of ≤ 2 grams is anchored to USDA extra lean and lean meat standards and meets AHA Heart Check guidelines.

Implementation considerations

Nutrition education in this category should focus on obtaining protein from a variety of sources and frequently choosing plant-based proteins like beans, peas, or soy products. Messages that promote choosing low-sodium bean varieties and rinsing canned beans prior to use can reduce sodium content. Further, saturated fat and sodium intake can be lessened by choosing lean cuts of animal proteins and limiting processed meats, such as bacon, deli meats, and hot dogs.

Dairy

The dairy category includes milk, cheese, yogurt, and other products created from milk. Although butter is a dairy product, it is placed in the condiments and cooking staples category because of the way in which it is typically used.

While rich in calcium and other nutrients, dairy products are top sources of saturated fat in Americans' diets. The saturated fat threshold of ≤ 3 grams for the "choose often" tier allows inclusion of reduced-fat (2 percent), low-fat (1 percent), and fat-free (skim) milk, and some low-fat cheeses. The saturated fat threshold of 3.5 to 5 grams and the added sugar threshold of 1 to 11 grams for the "choose sometimes" tier allows most brands of whole milk, plain full-fat yogurt, and whole-milk yogurt and cheeses into this tier. Depending on the added sugar content, it also allows some brands of low-fat or fat-free flavored milk to be ranked as "choose sometimes." "Choose rarely" products include flavored dairy products made with whole milk and many cheeses.

The sodium threshold for "choose often" meets 10 percent of the recommended daily sodium limit and AHA Heart Check guidelines for milk and cheese products.

Milk-based desserts such as pudding, ice cream, and frozen yogurt are categorized as desserts and are automatically ranked as "choose rarely." Although they contain some nutrients found in dairy, they are also typically high in saturated fat and added sugar.

Implementation considerations

Education in this category for most populations should focus on choosing fat-free or low-fat milk, yogurt, and cheese products and meeting calcium needs through fluid milk and yogurt instead of cheese. Recommendations for dairy may vary from these guidelines for certain population groups, such as infants and toddlers (for whom whole milk is generally recommended), as well as those who are lactose-intolerant, allergic to dairy, or vegan.

Non-Dairy Alternatives

Over the last decade, there has been a proliferation of plant-based beverages and foods designed and marketed as alternatives to dairy. These products include non-dairy beverages (e.g., soy milk, almond milk, rice milk, and cashew milk), yogurts, cheeses, and cheese spreads. Spreads designed as butter substitutes are placed in the condiments and cooking staples category because of the way in which they are typically used.

Fortified, unsweetened soy milk is the most nutritionally similar of the non-dairy alternatives to cow's milk and is currently the only non-dairy alternative included in the dairy food group by the DGA. It is also the only allowable substitute for cow's milk in federal nutrition programs.^{9,47,48} Although most non-dairy alternatives are fortified with some nutrients, they do not generally provide the same overall nutritional value as cow's milk,⁴⁹ and there is limited data on the bioavailability (that is, how well our bodies are able to absorb and use) of the vitamins and minerals added to these products through fortification.^{50,9} As such, the panel recommends ranking non-dairy alternatives in their own category.

The primary nutrient of concern for non-dairy beverages and yogurts is added sugar. The panel recommends a limit of ≤ 6 grams of added sugar in the "choose often" tier to primarily promote the consumption of plain, unsweetened, and unflavored products. Thresholds are set so that flavored beverage and yogurt products are likely to be in the "choose sometimes" and "choose rarely" tiers, depending on their sugar content.

Sodium is the primary nutrient of concern for non-dairy cheese products. Sodium thresholds in this category align with sodium thresholds for other product categories and represent 10 percent of the daily limit for sodium in the "choose often" tier.

Implementation considerations

Fortified, unsweetened, unflavored soy milk is the recommended milk alternative for most people with lactose intolerance or dairy allergies, or who avoid dairy products due to religious, environmental, or cultural food preferences. Although non-dairy alternatives may be appropriate to use in place of cow's milk for particular medical conditions or dietary preferences, these products (with the exception of soy milk) are not nutritionally equivalent substitutes for dairy. Individuals who do not consume dairy should incorporate other calcium-rich foods into their diet (e.g., soybeans, calcium-fortified tofu, sardines). Education should also focus on recommending that families consult a health care provider to assist in identifying the best non-dairy alternatives for children when necessary.

Beverages

This category includes all beverages except milk (included with dairy), non-dairy alternatives (included in their own category), and 100 percent juice (included with fruits and vegetables). Examples of beverages included in this category are water, soda, coffee, tea, sports drinks, and non-100 percent juice products.

Thresholds in this category align with efforts to promote the consumption of water and discourage consumption of sugar-sweetened beverages and other beverages with limited nutritional value.^{32, 32} For example, the “choose often” tier is limited to beverages, such as water, with zero grams of saturated fat, zero grams of added sugar, and zero milligrams of sodium. All other beverages will fall into the “choose sometimes” or “choose rarely” tiers depending on their sugar and sodium contents. The sugar in many beverages comes from added sugar, with the exception of beverages that include juice as an ingredient. Sodium thresholds in the “choose sometimes” tier (≤ 140 milligrams) align with FDA labeling claims for low-sodium products.⁵¹ Diet drinks, such as diet sodas and no-sugar-added energy drinks, will typically be ranked as “choose sometimes” due to their sodium content.

Implementation considerations

Education should focus on limiting consumption of sugar-sweetened beverages and choosing water as a primary beverage.^{31, 32} Misleading marketing and confusing labels may also lead to increased consumption of unhealthy beverages. As such, education should also focus on identifying healthier beverage options by reading the Nutrition Facts label.

Mixed Dishes

Mixed dishes contain multiple whole ingredients (such as a protein, grain, and vegetable), precluding categorization into any of the other product categories. Examples include frozen, canned, and boxed meals such as frozen chicken enchiladas, pizza, beef stew, lasagna, macaroni and cheese, frozen pasta alfredo, and chicken noodle soup.

Mixed dish sodium thresholds for “choose often” (≤ 480 milligrams) align with the SWAP and USDA Smart Snacks entrée standards. The sodium threshold is higher in this product category than other categories because these products are generally consumed as a meal, rather than as a single meal component.

Implementation considerations

Mixed dishes are often canned, frozen, or boxed meals and play a critical role in the charitable food system due to their long shelf life, low cost, and convenience. These meals can be especially important for clients that do not have consistent access to a complete pantry and/or cooking facilities. Education in this category should emphasize the identification of lower sodium options and supplementing mixed dishes with healthier food items (e.g., adding frozen vegetables to boxed macaroni and cheese).

Processed and Packaged Snacks

Processed and packaged snacks include items such as chips (including potato, corn, and other vegetable chips), crackers, pretzels, popcorn, granola bars, and other snack bars. They do not include foods with minimal processing that fit into another category, such as cheese, apple slices, or plain nuts, even when they are being consumed as a snack.

Because they are shelf stable, processed and packaged snacks are frequently available in the charitable food system. Processed and packaged snacks are often high in sugar, sodium, and saturated fat, and low in nutrients and fiber. Consumption of highly processed food is associated with weight gain and poor diet quality, both of which are risk factors for chronic disease.^{52, 53} Although food companies have reformulated some products to improve their nutritional quality, most still offer few valuable nutrients and are calorically dense.

The DGA note that eating snacks between meals can be part of a healthy diet but emphasize shifting consumption away from high-calorie snacks toward nutritionally dense, less processed choices, such as fruits or vegetables.

The panel recommends including all processed and packaged snacks in the “choose sometimes” and “choose rarely” tiers. Although some snacks, such as whole grain crackers and plain popcorn, are healthier options, the panel concluded that, by nature, processed and packaged snacks should not be consumed “often.”

The panel recommends that any grain in this category, such as a cracker or granola bar, must have a whole grain as the first ingredient and meet saturated fat, sodium, and sugar thresholds to qualify for the “choose sometimes” tier. This guideline is in alignment with the DGA recommendations to shift toward more nutrient dense snack options, and with Smart Snacks standards requiring grain products to have a whole grain as the first ingredient.⁵⁴

Products without a grain as the first ingredient, such as vegetable chips or fruit bars, are ranked according to indicated saturated fat, sodium, and sugar thresholds. Sodium thresholds were anchored to the FDA labeling requirements for low-sodium products (≤ 140 milligrams). Sugar and saturated fat thresholds for the “choose sometimes” tier align with the “choose often” guidelines set for grains. Sugar guidelines for the “choose sometimes” tier are consistent with the recommended grain guidelines and are slightly more liberal than the AHA Heart Check guidelines for added sugar in snacks (≤ 5 grams of added sugar).

Implementation considerations

Nutrition education should focus on limiting portion sizes and frequency of consumption. Education should also include identifying nutrient dense snack options. Behavioral economics approaches⁵⁵⁻⁵⁷ in the pantry setting, such as placing healthier snack items in prime settings where clients will see them first, to promote the selection of healthier snacks may also be helpful. Many food banks have programs, such as backpack programs providing weekend food for school children, that prioritize small packages of shelf-stable foods. Specific guidance may be necessary for these unique programs. In this category, industry continually introduces new product types and reformulations. Ongoing and periodically updated guidance will be necessary to ensure reliable ranking in this category.

Desserts

Desserts include foods with minimal nutritional value that tend to be high in saturated fat and added sugar. This category includes cookies, chocolate and other candy bars, cakes, brownies, pastries, ice cream, frozen yogurt, boxed cake and cookie mixes, and other sweet foods.

All desserts are ranked in the “choose rarely” tier, as they are intended to be an occasional treat.

Foods from other categories that are consumed as a dessert should not be categorized with desserts. For example, an apple or 100 percent fruit juice popsicle consumed as a dessert would be ranked according to fruit and vegetable thresholds. Although frozen yogurt manufactured and packaged as a dessert is ranked as a dessert, a container of refrigerated yogurt put into the freezer at home and consumed as a dessert would be ranked according to dairy thresholds.

Implementation considerations

Similar to processed and packaged snacks, nutrition education should focus on limiting portion sizes, reducing frequency of consumption, and substituting healthier options.

Condiments and Cooking Staples

Condiments are sauces, syrups, spreads, or dressings used as complements to other foods to enhance taste. Condiments vary culturally. Examples include barbeque sauce, mayonnaise, ketchup, jams and jellies, salad dressings, soy sauce, and maple syrup.

Cooking staples are defined as single ingredient products, such as oils, spices, and seasonings, used as a key component in the cooking or baking process. Examples include flour, oil, spice blends, baking soda, baking powder, and sugar. Butter and non-dairy butter alternatives are typically used as condiments or cooking staples and are included in this category.

Condiments are not ranked in order to avoid dissuading households from preparing foods and snacks from raw ingredients, or from consuming healthy items in other categories (for example, the availability of salad dressing may increase the chance that a person will consume vegetables). Cooking staples are also not ranked because they promote home cooking and meal preparation.

Implementation considerations

Many condiments and some cooking staples are high in saturated fat, added sugar, or sodium. Nutrition education should focus on identifying which condiments to promote and which to consume in moderation. Behavioral economics approaches⁵⁵⁻⁵⁷(as previously described) to promote the selection of healthier condiments and cooking staples may also be helpful.

Miscellaneous Products

Food banks and food pantries often receive miscellaneous items, such as protein powders, nutritional supplements, and baby food. These items are not ranked as they are considered necessary only for specific populations or when treating specific disease states.

Implementation considerations

It is important to note that these miscellaneous products are by and large not appropriate for use by the general population. Rather, they should be reserved for clients with specific nutritional needs or conditions.

Table 2: General Rankings of Food Products According to Panel Guidelines

Table 2 depicts how common items typically rank using these guidelines. It is important to note that there will be variation in the ranking of individual products depending on their specific brand formulation. As such, this table does not provide an exact depiction of how all products rank.

Category	Choose Often	Choose Sometimes	Choose Rarely
Fruits and Vegetables	Fresh, frozen and canned fruits and vegetables with no added sugar or sodium; low sodium vegetables; fruit canned in 100% juice or in water	100% juice; fruit canned in light syrup; canned vegetables; plain dried fruit	Dried fruit with sugar added; fruit canned in heavy syrup; tomato sauce with added sugar; vegetables canned with high sodium
Grains	Whole grains (quinoa, brown rice, barley); whole wheat pasta; whole grain breads; whole grain cereal with ≤6 grams added sugar; plain oatmeal	Refined grain products (white breads, pasta, rice); oatmeal with added sugar; whole or non-whole grain cereal with 7-11 g of total or added sugar	Rice and pasta with salt-based seasoning mixes; whole or non-whole grain cereal with ≥12 g of sugar
Protein	Dried beans; low-sodium canned beans; some nut butters; nuts; fresh poultry; fish; eggs; tofu; low-sodium canned tuna; canned salmon	Canned beans; baked beans; some nut butters; regular canned fish; pork	Refried beans; deli meat; sausage; bacon; most red meat; breaded chicken
Dairy	Fat-free or low-fat unsweetened yogurt; skim, 1% and 2% milk; fat-free and reduced fat cheeses; light sour cream	Some reduced fat or whole milk cheeses; cottage cheese; whipped cream cheese; whole milk; full-fat sour cream; some low-fat flavored milks; low-fat flavored yogurts	Full-fat cheese and cream cheese; some low-fat and full-fat flavored milks; some flavored yogurts
Non-Dairy Alternatives	Unsweetened almond, rice, cashew, oat and pea milk; unsweetened soy, almond, rice, cashew and oat milk yogurts; some plain non-dairy alternative products with ≤ 6 g of added sugar	Plant-based cheeses; some flavored soymilks; plain and flavored soy, almond, rice, cashew and oat milk yogurts	Plant-based cream cheese; flavored soy, almond, rice, cashew and oat milk yogurts; plain and flavored coconut milk; flavored soy, almond, rice, cashew, and oat milk
Beverages	Plain water; flavored and unflavored sparkling water; plain coffee; unsweetened tea	Diet soft drinks; diet iced teas; sugar free energy drinks; sparkling water with sodium or added sugar; coconut water	Sweetened energy drinks; sports drinks; regular sodas; non-100% juice drinks with added sugar
Mixed Dishes*	Variability by product formulation is more substantial than other categories	Variability by product formulation is more substantial than other categories	Variability by product formulation is more substantial than other categories
Processed/ Packaged Snacks	None	Plain popcorn; whole wheat crackers; green pea snack crisps; rice cakes; unsalted whole grain pretzels; some snack bars	Pretzels; cheese crackers; potato chips; granola and other snack bars; flavored popcorn
Desserts	None	None	All desserts
Condiments and Cooking Staples	Not ranked		
Miscellaneous products	Not ranked		

Comparing Products across Categories

These guidelines allow for comparison of products within a category (e.g., how two grains compare to each other). Within the charitable food system, important decisions are also made across product categories—for example, in which product category to invest limited purchasing dollars. USDA recommendations indicate a healthy plate includes fruits and vegetables, whole grains, lean proteins, and low-fat dairy products. These product categories should be prioritized over mixed dishes, condiments, processed and packaged snacks and desserts when inventory is being purchased.

Implementation

Implementation of nutrition guidelines is challenging in all settings, but particularly challenging within the constraints of the charitable food system. The panel sought wherever possible to create guidelines that could be implemented in food banks and food pantries across the U.S. regardless of capacity, training, philosophy, and culture. As such, the goal was to create guidelines that were adequately flexible to allow for multiple on-ramps, adaptation, and phased implementation, depending on local needs. An implementation toolkit is being developed with multiple partners to provide practical support for this process (expected fall 2020). This toolkit will also include recommendations for complementary strategies, such as behavioral nudges, that encourage distribution and selection of healthier food choices in the pantry setting.

Alignment with Other Nutrition Ranking Systems

Guideline thresholds are anchored to the DGA as well as existing federal, food bank, and industry guidelines. In particular, the guidelines recommended here align substantially with SWAP guidelines. SWAP is also based on the DGA, uses a three-tiered approach, focuses on three key nutrients to limit (saturated fat, sodium, and sugar), and calculates a final ranking based on the lowest threshold met by a food product. Because of substantial alignment with SWAP guidelines and panel participation by developer Katie Martin, SWAP is being revised to a 2.0 version that will synchronize with these guidelines. See Appendix for how panel recommendations align with other common guidelines.

Conclusion

These guidelines are designed to provide charitable food system staff, volunteers, donors, users, and other stakeholders with a common metric for identifying foods that are more and less highly desirable for distribution based on their nutritional quality. Such alignment can support the availability of a more nutritious portfolio of food products across the charitable food system, allowing all people in the United States—regardless of income—access to the foods necessary for an active, healthy life.



Appendix: Alignment with other guidelines for saturated fat, sodium, and sugar⁺

		Panel recommendations		
Food Group	Nutrient	Often	Sometimes	Rarely
Fruit & Vegetables*	Saturated fat	≤ 2 g	≥ 2.5 g	≥ 2.5 g
	Sodium	≤ 230 mg	231-479 mg	≥ 480 mg
	Total Sugar	≤ 12 g	13-23 g	≥ 24 g
	Added Sugar	0 g	1-11 g	≥ 12 g
Grains**	Saturated fat	≤ 2g	≥ 2.5 g	≥ 2.5 g
	Sodium	≤ 230 mg	231-479 mg	≥ 480 mg
	Total Sugar	≤ 6 g	7-11 g	≥ 12 g
	Added Sugar	≤ 6 g	7-11 g	≥ 12 g
Protein***	Saturated fat	≤ 2g	2.5-4.5 g	≥5 g
	Sodium	≤ 230 mg	231-479 mg	≥480 mg
	Total Sugar	≤ 6 g	7-11 g	≥12 g
	Added Sugar	≤ 6 g	7-11 g	≥12 g
Dairy***	Saturated fat	≤ 3 g	3.5-6 g	≥6.5 g
	Sodium	≤ 230 mg	231-479 mg	≥480 mg
	Total Sugar	≤ 12 g	13-23 g	≥24 g
	Added Sugar	0 g	1-11 g	≥12 g
Non-Dairy Alternatives	Saturated fat	≤ 2 g	≥2.5 g	≥2.5 g
	Sodium	≤ 230 mg	231-479 mg	≥480 mg
	Total Sugar	≤ 6 g	7-11 g	≥12 g
	Added Sugar	≤ 6 g	7-11 g	≥12 g
Beverages	Saturated fat	0 g	0 g	≥1 g
	Sodium	0 mg	1-140 mg	≥141 mg
	Total Sugar	0 g	1-11 g	≥12 g
	Added Sugar	0 g	1-11 g	≥12 g
Mixed Dishes	Saturated fat	≤ 3 g	3.5-6 g	≥6.5 g
	Sodium	≤ 480mg	481-599 mg	≥600 mg
	Total Sugar	≤ 6 g	7-11 g	≥12 g
	Added Sugar	≤ 6 g	7-11 g	≥12 g
Processed and Packaged Snacks	Saturated fat		0-2 g	≥2.5 g
	Sodium	None	1-140 mg	>141 mg
	Total Sugar		0-6 g	≥7 g
	Added Sugar		0-6 g	≥7 g
Desserts	Saturated fat			
	Sodium	None	None	All desserts
	Total Sugar			
	Added Sugar			
Condiments & Baking/ Cooking Staples****	Saturated fat			
	Sodium	Not ranked		
	Total Sugar			
	Added Sugar			

⁺ The complexity of the guidelines may not be fully captured by the above table; For more details, refer to the full panel report; Details on [SWAP](#) and [F2E](#) can be found on the FoodShare and Feeding America resource pages, respectively

* F = fruit; V = vegetables

** The Panel recommendations and SWAP grain guidelines stipulate that the first ingredient must be whole grain to be ranked in the 'Often' or 'Green' categories; For F2E, breads, pastas and cereals must be a whole grain and meet a fiber threshold in order to qualify as a Food to Encourage otherwise they must meet the above thresholds

*** F2E requires that beans, peanut butter, nuts/seeds, meat, poultry, fish and cheese contain 0 g trans fats

**** SWAP does not have a baking/cooking staples category; Thresholds only apply to condiments

	Supporting Wellness at Pantries (SWAP)			Foods to Encourage (F2E)
	Green	Yellow	Red	Foods to Encourage
	≤ 1 g ≤ 32 mg (F); ≤ 140 mg (V) ≤ 12 g (F); ≤ 4 g (V) N/A	≤ 1 g ≤ 50 mg (F); ≤ 230 mg (V) ≤ 25 g (F); ≤ 7 g (V) N/A	≥ 1.5 g ≥ 51 mg (F); 231 mg (V) ≥ 26 g (F); ≥ 8 g (V) N/A	≤ 2 g ≤ 230 mg ≤ 12 g N/A
	≤ 2g ≤ 230 mg ≤ 6 g N/A	≤ 2g ≤ 400 mg ≤ 12 g N/A	≥ 2.5 g ≥ 401 mg ≥ 13 g N/A	≤ 2g ≤ 230 mg 0 g (grains); ≤ 12 g (cereal) N/A
	≤ 2g ≤ 200 mg ≤ 0 g (animal); ≤ 5 g (plant) N/A	≤ 5 g ≤ 480 mg ≤ 1 g (animal); ≤ 9 g (plant) N/A	≥ 5.5 g ≥ 481 mg ≥ 2 g (animal); ≥ 10 g (plant) N/A	≤ 2 g ≤ 480 mg (≤ 240 mg nut spreads) < 4 g nut spreads N/A
	≤ 1.5 g; ≤ 3 g (cheese) ≤ 180 mg; ≤ 200 mg (cheese) ≤ 12 g; ≤ 1 g (cheese) N/A	≤ 3 g; ≤ 6 g (cheese) ≤ 200 mg; ≤ 480 mg (cheese) ≤ 22 g; ≤ 2 g (cheese) N/A	≥ 3.5 g; 6.5 g (cheese) ≥ 201 mg; ≥ 481 mg (cheese) ≥ 23 g; ≥ 3 g (cheese) N/A	≤ 3 g saturated fat ≤ 480 mg ≤ 22 g flavored milk; < 30 g flavored yogurt N/A
	No Criteria; Included in Dairy			Unsweetened milk substitutes (e.g. soy)
	≤ 0 g ≤ 0 mg ≤ 0 g N/A	≤ 0 g ≤ 160 mg ≤ 11 g N/A	> 0 g ≥ 161 mg ≥ 12 g N/A	100% fruit or vegetable juice
	≤ 3 g ≤ 480 mg ≤ 7 g N/A	≤ 6.5 g ≤ 600 mg ≤ 10 g N/A	≥ 7 g ≥ 601 mg ≥ 11 g N/A	No criteria
	≤ 2 g ≤ 230 mg ≤ 6 g N/A	≤ 2 g ≤ 400 mg ≤ 12 g N/A	≥ 2.5 g ≥ 401 mg ≥ 13 g N/A	No criteria
	≤ 2 g ≤ 230 mg ≤ 6 g N/A	≤ 2 g ≤ 400 mg ≤ 12 g N/A	≥ 2.5 g ≥ 401 mg ≥ 13 g N/A	No criteria
	≤ 0 g ≤ 250 mg ≤ 2 g N/A	≤ 0.5 g ≤ 350 mg ≤ 7 g N/A	≥ 1 g ≥ 351 mg ≥ 8 g N/A	No criteria

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About Healthy Eating Research

Healthy Eating Research (HER) is a national program of the Robert Wood Johnson Foundation. Technical assistance and direction are provided by Duke University under the direction of Mary Story PhD, RD, program director, and Megan Lott, MPH, RDN, deputy director. HER supports research to identify, analyze, and evaluate environmental and policy strategies that can promote healthy eating among children and prevent childhood obesity. Special emphasis is given to research projects that benefit children and adolescents and their families, especially among lower-income and racial and ethnic minority population groups that are at highest risk for poor health and well-being and nutrition-related health disparities. For more information, visit www.healthyeatingresearch.org or follow HER on Twitter at [@HERResearch](https://twitter.com/HERResearch).

Healthy Eating Research

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