



## Dietary Guidelines for Americans 2005

Thank you for your interest in *My Pyramid for Kids – Dietary Guidelines for Americans 2005.* This nutritional educational packet contains an 8 page study guide, as well as a self test/training certificate, which fulfills two hours of training. This certificate is only valid if the self-test is completed. You are expected to review the enclosed materials thoroughly prior to completing the self-test. Answers to all questions are contained in the accompanying study guide. ***Remember, the training certificate is only valid after review of the enclosed materials and completion of the self test.***

If you have any questions as to the proper use of this packet, please contact the ICCB office and we will be glad to assist you.

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The Dietary Guidelines for Americans first published in 1980, provides science-based advice to promote health and to reduce risk for chronic diseases through diet and physical activity. The recommendations contained within the Dietary Guidelines are targeted to the general public over 2 years of age who are living in the United States. Because of its focus on health promotion and risk reduction, the Dietary Guidelines form the basis of federal food, nutrition education, and information programs.

The Dietary Guidelines for Americans, 2005, contain some very specific recommendations that, if followed, will greatly enhance the overall health of our children. These new recommendations will be highlighted and then an overview will be provided of the My Pyramid for Kids and My Pyramid for Preschoolers information that is available on the web that can greatly help parents and providers in their efforts to instill healthy habits to last a lifetime.

#### Importance of the Dietary Guidelines for Health Promotion and Disease Prevention

Good nutrition is vital to good health and is absolutely essential for the healthy growth and development of children and adolescents. Major causes of morbidity and mortality in the United States are related to poor diet and a sedentary lifestyle. Specific diseases and conditions linked to poor diet include:



- cardiovascular disease
- hypertension
- dyslipidemia
- type 2 diabetes
- overweight and obesity
- osteoporosis
- constipation
- diverticular disease
- iron deficiency anemia
- oral disease
- malnutrition
- some cancers

Lack of physical activity has been associated with cardiovascular disease, hypertension, overweight and obesity, osteoporosis, diabetes, and certain cancers. Furthermore, muscle strengthening and improving balance can reduce falls and increase functional status among older adults. Together with physical activity, a high-quality diet that does not provide excess calories should enhance the health of most individuals.

Poor diet and physical inactivity, resulting in an energy imbalance (more calories eaten than expended in physical activity), are the most important factors contributing to the increase in overweight and obesity in this country. Moreover, overweight and obesity are major risk factors for certain chronic diseases such as diabetes. In 1999-2002, 65 percent of U.S. adults were overweight, an increase from 56 percent in 1988-1994. Data from 1999-2002 also showed that 30 percent of adults were obese, an increase from 23 percent in an earlier survey.

Dramatic increases in the prevalence of overweight have occurred in children and adolescents of both sexes, with approximately 16 percent of children and adolescents aged 6 to 19 years considered to be overweight (1999-2002). In order to reverse this trend, many Americans need to consume fewer calories, be more active, and make wiser choices within and among food groups. The Dietary Guidelines provide a framework to promote healthier lifestyles.

There is a growing body of evidence which demonstrates that following a diet that complies with the Dietary Guidelines may reduce the risk of chronic disease. Recently, it was reported that dietary patterns following the current guidelines were associated with a lower risk of mortality among individuals age 45 years and older in the United States. The authors of the study estimated that about 16 percent and 9 percent of mortality from any cause in men and women, respectively, could be eliminated by the adoption of desirable dietary behaviors.



*Unfortunately, very few Americans adhere to the Dietary Guidelines at the present time.*

A basic premise of the Dietary Guidelines is that nutrient needs should be met primarily through consuming foods. Foods provide an array of nutrients (as well as phytochemicals, antioxidants, etc.) and other compounds that may have beneficial effects on health. The adequate absorption of many of these nutrients may also depend on various micronutrients that are present in the food itself that are not present in vitamin supplements.

Supplements may be useful when they fill a specific identified nutrient gap that is not being met by the individual's intake of food. However, nutrient supplements cannot replace a healthful diet. Individuals who are already consuming the recommended amount of a nutrient in food will not achieve any additional health benefit if they also take the nutrient as a supplement. In fact, in some cases, supplements and fortified foods may cause intakes to exceed the safe levels of nutrients. Some studies have also shown that some vitamin pills may pass through the digestive tract with minimal breakdown meaning that few nutrients have been absorbed thus resulting in a very expensive supplement.

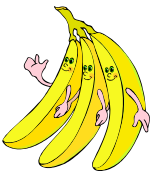


## Eat More Servings within these Food Groups for Better Health

Increased intakes of fruits, vegetables, whole grains, and fat-free or low-fat milk products are likely to have important health benefits for most Americans. While protein is an important macronutrient in the diet, most Americans are already currently consuming enough protein and do not need to increase their intake. As such, protein consumption, while important for nutrient adequacy, will not be focused upon. Although associations have been identified between specific food groups (e.g., fruits and vegetables) and reduced risk for chronic diseases, the effects are interrelated and the health benefits should be considered in the context of an overall healthy diet that does not exceed calorie needs.

### Decrease your chances of chronic disease

Compared with the many people who consume a dietary pattern with only small amounts of fruits and vegetables, those who eat more generous amounts as part of a healthful diet are likely to have reduced risk of chronic diseases, including stroke and perhaps other cardiovascular diseases, type 2 diabetes, and cancers in certain sites (oral cavity and pharynx, larynx, lung, esophagus, stomach, and colon-rectum).



### A reduced incidence of heart disease

Diets rich in foods containing fiber, such as fruits, vegetables, and whole grains, may reduce the risk of coronary heart disease.



### Build healthy bones to last a lifetime

Diets rich in milk and milk products can reduce the risk of low bone mass throughout the life cycle. The consumption of milk products is especially important for children and adolescents who are building their peak bone mass and developing lifelong habits. Although each of these food groups may have a different relationship with disease outcomes, the adequate consumption of all food groups contributes to overall health.



### Stay within discretionary calorie allowance

Discretionary calories are the number of calories remaining after one has consumed all of the nutrient dense foods that are recommended for their calorie level. These calories can come from any source, including sweets and other snacks. For example, a child requiring 1400 calories per day is allowed 171 discretionary calories. This is really not that much and can easily be met by a child consuming a little over 1/2 cup of ice cream. Most Americans eat way over their limit of “discretionary” calories and thus are deficient in the more nutrient dense foods.

**KEY RECOMMENDATIONS:**

**Fruits and Vegetables**

Fruits and vegetables provide a variety of micronutrients and fiber. Consumption of whole fruits (fresh, frozen, canned, dried) rather than fruit juice for the majority of the total daily amount is suggested to ensure adequate fiber intake. Different vegetables are rich in different nutrients. In the vegetable group, weekly intake of specific amounts from each of five vegetable sub-groups, listed below, is recommended for adequate nutrient intake. Each subgroup provides a somewhat different array of nutrients. In the USDA Food Guide at the reference 2,000-calorie level, the following weekly amounts are recommended:

**Dark green vegetables** 3 cups/week

- bok choy
- broccoli
- collard greens
- dark green leafy lettuce
- kale
- mesclun
- mustard greens
- romaine lettuce
- spinach
- turnip greens



**Orange vegetables** 2 cups/week

- acorn squash
- butternut squash
- carrots
- hubbard squash
- pumpkin
- sweet potatoes



**Starchy vegetables** 3 cups/week

- corn
- green peas
- lima beans (green)
- potatoes

**Legumes (dry beans)** 3 cups/week

- black beans
- black-eyed peas
- garbanzo beans (chickpeas)
- kidney beans
- lentils
- lima beans (mature)
- navy beans
- pinto beans
- soy beans
- split peas
- tofu (bean curd made from soybeans)



**Other vegetables** 6 1/2 cups/week

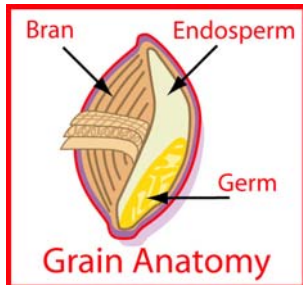
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|-------------------|------------------------|
| artichokes        | iceberg (head) lettuce |
| asparagus         | mushrooms              |
| bean sprouts      | okra                   |
| beets             | onions                 |
| Brussels sprouts  | parsnips               |
| cabbage           | tomatoes               |
| cauliflower       | tomato juice           |
| celery            | vegetable juice        |
| cucumbers         | turnips                |
| eggplant          | wax beans              |
| green beans       | zucchini               |
| green or red pep- |                        |



Most Americans do not eat the recommended intakes of many of these vegetables. The USDA Food Guide suggest increasing intakes of dark green vegetables, orange vegetables, and legumes (dry beans) as part of the overall recommendation to have an adequate intake of fruits and vegetables.

## Whole Grains

In addition to fruits and vegetables, whole grains are an important source of fiber and other nutrients. Whole grains, as well as foods made from them, consist of the entire grain seed, usually called the kernel. The kernel is made of three components—the bran, the germ, and the endosperm. If the kernel has been cracked, crushed, or flaked, then it must retain



nearly the same relative proportions of bran, germ, and endosperm as the original grain to be called whole grain. In the grain-refining process, most of the bran and some of the germ is removed, resulting in the loss of dietary fiber (also known as cereal fiber), vitamins, minerals, lignans, phytoestrogens, phenolic compounds, and phytic acid. Some manufacturers add bran to grain products to increase the dietary fiber content. Refined grains are the resulting product of the grain-refining processing. Most refined grains are enriched before being further processed into foods. Enriched refined grain products that conform to standards of identity are required by law to be fortified with folic acid, as well as thiamin, riboflavin, niacin, and iron. Food manufacturers may fortify whole-grain foods where regulations permit the addition of folic acid. Currently, a number of whole-grain, ready-to-eat breakfast cereals are fortified with folic acid.

Consuming at least 3 or more ounce-equivalents of whole grains per day can reduce the risk of several chronic diseases and may help with weight maintenance. Thus, daily intake of at least 3 ounce-equivalents (48 g) of whole grains per day is recommended by substituting whole grains for refined grains. However, because three servings may be difficult for younger children to achieve, it is recommended that they increase whole grains into their diets as they grow. At all calorie levels, all age groups should consume at least half the grains as whole grains to achieve the fiber recommendation. All grain servings can be whole-grain; however, it is advisable to include some folate-fortified products, such as folate-fortified whole-grain cereals, in these whole-grain choices.



Whole grains cannot be identified by the color of the food; label-reading skills are needed. For information about the ingredients in whole-grain and enriched-grain products, read the ingredient list on the food label. For many whole-grain products, the words "whole" or "whole grain" will appear before the grain ingredient's name. The whole grain should be the first ingredient listed. Wheat flour, enriched flour, and degerminated cornmeal are not whole grains. The Food and Drug Administration requires foods that bear the whole-grain health claim to (1) contain 51 percent or more whole-grain ingredients by weight per reference amount and (2) be low in fat.



## Milk and Milk Products

Another source of nutrients is milk and milk products. Milk product consumption has been associated with overall diet quality and adequacy of intake of many nutrients. The intake of milk products is especially important to bone health during childhood and adolescence. Studies specifically on milk and other milk products, such as yogurt and cheese, showed a positive relationship between the intake of milk and milk products and bone mineral content or bone mineral density in one or more skeletal sites.

Adults and children should not avoid milk and milk products because of concerns that these foods lead to weight gain. There are many fat-free and low-fat choices without added sugars that are available and consistent with an overall healthy dietary plan. If a person wants to consider milk alternatives because of lactose intolerance, the most reliable and easiest ways to derive the health benefits associated with milk and milk product consumption is to choose alternatives within the milk food group, such as yogurt or lactose-free milk, or to consume the enzyme lactase prior to the consumption of milk products. For individuals who choose to or must avoid all milk products (e.g., individuals with lactose intolerance, vegans), non-dairy calcium-containing alternatives may be selected to help meet calcium needs.



## My Pyramid for Preschoolers / My Pyramid for Kids



The United States Department of Agriculture has a wonderful resource available to augment the Dietary Guidelines for Americans 2005. It is available on their complimentary website: [www.mypyramid.gov](http://www.mypyramid.gov). This website offers many features to assist parents and caregivers help children develop healthy habits to last a lifetime. Please be encouraged to use MyPyramid to help your children and yourself eat well, be active, and be healthy.

One of the most useful features is that you can create a customized eating plan for your child based on their age, sex and level of physical activity. Click on My Pyramid Plan and follow the prompts.

Once the eating plan is developed (*which only takes a few seconds*) you can print it out along with a Meal Tracking Worksheet or My Pyramid Worksheet that will enable you to see if the servings of each group are being met on a daily basis.

There are also several links to articles of interest such as:

Explore ways to help your preschooler:

- [Grow up healthy](#). Complete a growth chart especially for your child to find out more about normal development.
- [Develop healthy eating habits](#). Raise a healthy eater by setting a good example and practicing positive habits.
- [Try new foods](#). Help for picky eaters.
- [Play actively every day](#). Add physical activity into your preschooler's day.
- [Follow food safety rules](#).

You can also learn more:

- [Sample Meals Patterns, Meals and Snacks](#)
- [Find Kitchen Activities for preschoolers](#)
- [Search for More Information](#).
- [Be a Healthy Role Model for Children — from the MyPyramid Ten Tips Nutrition Education Series](#)

## My Pyramid Tracker

Another very useful tool is MyPyramid Tracker. It is an online dietary and physical activity assessment tool that provides information on diet quality, physical activity status, related nutrition messages, and links to nutrient and physical activity information. The Food Calories/Energy Balance feature automatically calculates your energy balance by subtracting the energy you expend from physical activity from your food calories/energy intake. Use of this tool helps you better understand your energy balance status and enhances the link between good nutrition and regular physical activity. Keep track of your energy balance history and view it up to one year. MyPyramid Tracker translates the principles of the 2005 Dietary Guidelines for Americans and other nutrition standards developed by the U.S. Departments of Agriculture and Health and Human Services. This tool will do the following:

### Assess Your Food Intake

The online dietary assessment provides information on your diet quality, related nutrition messages, and links to nutrient information. After providing a day's worth of dietary information, you will receive an overall evaluation by comparing the amounts of food you ate to current nutritional guidance. *To give you a better understanding of your diet over time, you can track what you eat up to a year.*

### Assess Your Physical Activity

The physical activity assessment evaluates your physical activity status and provides related energy expenditure information and educational messages. After providing a day's worth of physical activity information, you will receive an overall "score" for your physical activities that looks at the types and duration of each physical activity you did and then compares this score to the physical activity recommendation for health. A score over several days or up to a year gives a better picture of your physical activity lifestyle over time.

My Pyramid Tracker requires you to create a log in and password so that your information can be accessed by you at any time.