**CSPI MAHA Report Op-Ed Template**

**Background / Resources on writing op-eds in general:**

* <https://www.theopedproject.org/submissions>
* <https://www.washingtonpost.com/opinions/2022/op-ed-writing-guide-washington-post-examples/>

**Template**

The Make America Healthy Again (MAHA) Commission released a final Make America Healthy Again (MAHA) Strategy Report on September 9, 2025. The strategy report titled “[Make Our Children Healthy Again](https://www.whitehouse.gov/maha/)” aims to provide approaches for ending childhood chronic disease. We agree that a national focus on childhood chronic disease is an urgent need. Chronic diseases are the leading causes of death and disability, costing 90 percent of the $4.9 trillion our country spends annually on healthcare. **[CITE LOCAL/STATE STATISTICS here** <https://www.americashealthrankings.org/explore/measures/CHC>

However, the MAHA strategy report’s recommendations are not going to make us healthier. The report primarily calls for voluntary industry action and public education campaigns instead of actual regulation. And when the report does recommend policy change, many of those strategies are based in misinformation and are actually poised to harm children, not help them—such as recommendations to change childhood vaccine schedules. Many of these stem from preconceived beliefs of HHS Secretary Robert F. Kennedy, Jr. The few good ideas for improving the health of American children are already [being undercut](https://civileats.com/2025/07/15/op-ed-the-big-beautiful-bill-wont-make-america-healthy-again66076/) by actions taken by the Administration and Congress. Just look at the impact of the One Big Beautiful Bill [**CITE STATISTICS about the impact of the One Big Beautiful Bill Act on school meals, SNAP, and Medicaid access:** <https://www.cbpp.org/research/food-assistance/a-closer-look-at-who-benefits-from-snap-state-by-state-fact-sheets#Alabama> / <https://www.kff.org/medicaid/allocating-cbos-estimates-of-federal-medicaid-spending-reductions-across-the-states-enacted-reconciliation-package/>]

The MAHA Commission’s strategy report also had some key omissions. The report did not mention the important role that health inequities play in harming children, families, and communities across the country. The report also did not contain any recommendations to address the needs of racial or demographic minorities. By [ignoring racial differences](https://www.nytimes.com/2025/02/26/us/politics/trump-dei-cdc-language.html) and [erasing critical data](https://civilrights.org/blog/disappearing-data-why-we-must-stop-trumps-attempts-to-erase-our-communities/), opportunities to improve people’s health are missed. [**CITE SPECIFIC STATISTICS to highlight racial and ethnic disparities in outcomes: https://www.kff.org/racial-equity-and-health-policy/key-data-on-health-and-health-care-by-race-and-ethnicity/**

If this administration is serious about improving the health of Americans, we recommend a [multi-pronged policy approach](https://www.cspi.org/resource/cspi-policy-menu-improve-us-population-health-and-wellbeing-focus-children) that is evidence-based and addresses both prevention and treatment. The government should use a range of strategies directed at the food system as well as programs that serve children and families. First, US food policy should be evidence-based so that it will benefit the public’s health, and our food supply should be healthy, safe, and transparent to prevent disease.

To that end, the federal government should publish evidence-based Dietary Guidelines for Americans, implement added sugar and sodium reduction targets across the food supply, mandate front-of-package warning labels and disclosures for nutrients and ingredients of concern, and ban harmful food additives.

The FDA should also overhaul the way it regulates food chemical safety to ensure that both new ingredients entering the food supply and the ingredients currently in our food are safe. US food policy should also reflect the needs and priorities of those most impacted by food system inequities.

Second, food provided to children and their families should be healthy and safe. This means strong science-based nutrition standards for all federal nutrition programs serving children, and ensuring that these programs—including school meals, WIC, SNAP, and SNAP-Ed—are fully funded and available and accessible to families who need them.

Third, children should be protected from harmful products, including unhealthy foods, alcohol, and dangerous dietary supplements. This can be accomplished through excise taxes on sweetened beverages, enforcement against advertising of these products to children, and improved dietary supplement regulation.

Finally, children and their families must have access to safe and effective medical care, medical devices, and medications—including vaccines. Congress should reverse Medicaid cuts that will deny millions access to health care, and ensure the program is funded and accessible to all who need it.