

Policy Priorities and Research Needs for Advancing Healthy Eating

A 2026-2027 Research Agenda for U.S. Children and Adolescents

Healthy Eating Research

March 2026

INTRODUCTION

The current food and nutrition system has made it difficult for many children and families in the U.S. to access affordable and healthy foods, thereby contributing to poor diet quality, food insecurity, and diet-related conditions, such as obesity. In addition, Americans of all ages and income levels do not meet dietary recommendations, consuming too few fruits, vegetables, whole grains, and dairy products and too many ultraprocessed foods, refined grains, saturated fats, sodium, and added sugars.¹

Evidence-based policies and nutrition programs at the federal, state, and local levels can improve the food environment by increasing the availability, accessibility, and affordability of healthy choices. In turn, a healthy food environment promotes food security, healthy eating, and healthy weight among children and families. For example, the 16 federal nutrition assistance programs administered by the U.S. Department of Agriculture, such as the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and school meal programs, are essential for children and families with lower-incomes.

Despite strong evidence supporting the success of federal nutrition programs, recent program cuts and evidence gaps threaten future progress. H.R. 1, the “One Big Beautiful Bill Act,” enacted in July 2025 as P.L. 119-21, made significant changes to eligibility requirements and federal and state cost-sharing requirements for social safety net programs, including SNAP and Medicaid.² Other programs serving children and families, such as WIC and school meal programs, are already experiencing the ripple effects of these changes. Additional cuts in federal staff, programs, and surveillance tools, namely the Household Food Security Survey,³ provide challenges in evaluating the impacts of policy rollbacks. A timely, coordinated research agenda can help to identify and fill crucial gaps in programs and policies.



Purpose

This research agenda is intended to provide a blueprint for immediate (i.e., 12-18 month) research needs to inform strategies to improve access to healthy foods, diet quality, and healthy weights among children and families. This document presents an overview of priority policy issues organized by life stage or federal nutrition program, followed by a set of research priorities aligned with three overarching themes that emerged across topic areas. The resulting research agenda reflects the collective expertise of leading researchers, advocates, and funders.

Rational

Over the past two decades, Healthy Eating Research (HER) has led the field in funding timely, policy-relevant research centered on improving the policies, systems, and environmental factors shaping children’s eating habits and weight. These studies have catalyzed meaningful policy changes to improve nutrition and health equity for children and families nationwide. Given recent changes to nutrition policies and programs and the food environment landscape, the need for new evidence on how these changes impact nutrition, health, and food access is greater than ever.

METHODS

In December 2025, an online survey was sent to 66 advocates, researchers, and senior representatives of leading organizations who are thought leaders working on food and nutrition policy in the U.S. Responses were received from 45 individuals (68% response rate). Respondents' primary areas of work included research (68%), policy (63%), advocacy (55%), and program operations (37%). The survey asked respondents to identify the most pressing public policy issues related to food and nutrition at the federal, state, and/or local levels and related research priorities within each of the life-stages or programmatic areas in which they work, including: (1) early childhood, (2) school-age children, (3) family and community, and (4) food environment, as well as (5) any other areas participants felt were important.

As a follow-up to the survey, HER held a series of five roundtable discussions with thought leaders who completed the survey. Each roundtable discussion included four to six participants and was 60-75 minutes in length.

The research agenda development process and methods are described in detail in [Appendix A](#).

SUMMARY OF TOP POLICY PRIORITIES

Identifying the most pressing federal, state, and local policy priorities for 2026-2027 was a critical first step in shaping this research agenda. While survey respondents and roundtable participants raised a broad range of concerns, this document reflects the issues most consistently identified as urgent and actionable within the next 12-18 months.

Policy priorities are organized by key life stages and policy domains, however, across these categories, four interconnected, cross-cutting themes emerged as central drivers of current and anticipated challenges to food access and nutrition security. These themes—(1) cuts to SNAP and Medicaid; (2) reductions in data collection and surveillance capacity; (3) structural barriers to program access; and (4) the availability and role of ultraprocessed foods—collectively shape how policy changes are experienced by individuals, families, and communities across the life course.

- ***Impacts of Cuts to SNAP and Medicaid*** - Participants expressed significant concern about the anticipated impacts of SNAP and Medicaid changes enacted through P.L. 119-21. These changes—including reduced federal funding, expanded work requirements, restrictions affecting certain immigrant groups, increased state cost sharing, and the elimination of SNAP-education—are expected to reverberate across multiple federal nutrition programs. In particular, disruptions to categorical eligibility and direct certification pathways threaten to weaken program coordination and exacerbate existing health and economic inequities, with consequences for food access from early childhood through older adulthood.
- ***Reductions in Data Collection Tools*** - Concerns about program access were compounded by the erosion of data infrastructure required to document need and guide policy decisions. Reductions in key tools, such as the Household Food Security Survey,³ alongside staffing losses at the Centers for Disease Control and Prevention that affect NHANES and related initiatives, undermine the nation's ability to monitor trends, identify disparities, and evaluate the effectiveness of policy interventions. These data gaps risk obscuring the full impact of SNAP and Medicaid changes, particularly for historically marginalized populations.
- ***Structural Barriers to Program Access*** - Structural barriers to program access—including administrative burden, immigration-related eligibility restrictions, and rural access challenges—were consistently identified as factors that amplify the effects of policy and funding shifts. Participants emphasized the importance of policies that center health equity, reduce administrative complexity, and elevate community-led solutions, particularly for populations most affected by reductions in federal nutrition and health programs
- ***Availability and Role of Ultraprocessed Foods*** - Finally, the role of ultraprocessed foods (UPFs) emerged as a recurring concern across life stages and settings. Participants highlighted the need for clear definitions and stronger policy levers to reduce the availability of UPFs in child nutrition programs and the broader food environment, as well as the ability to enhance capacity for scratch cooking in institutions serving children and families. These priorities were frequently discussed in tandem with concerns about data limitations and program constraints, underscoring the interdependence of food quality, access, and policy infrastructure.

Together, these cross-cutting themes inform the policy priorities that follow, which are organized by key life-stage and policy domains: (1) family and community; (2) pregnancy, postpartum, and early childhood; (3) school-age children; (4) shaping the food environment; and (5) additional policy priorities. Within each area, the cross-cutting themes of program eligibility, access, data capacity, and food quality recur in distinct but related ways. Policy priorities are presented in approximate order of importance.

Family and Community

The Family and Community category included policies and programs utilized by families with children (ages 0-18 years), including (but not limited to) SNAP, SNAP-Ed, the emergency food system, and income support policies. A description of all included policies and programs in this category can be found in **Appendix A, Table A1**.

Table 1 provides a summary of the top policy priorities identified in this category, which primarily focused on the cuts to SNAP benefits and program eligibility resulting from P.L. 119-21, along with changes in federal-state program cost sharing. Perspectives differed on state-level waivers restricting SNAP purchases, with some noting the potential for these waivers to improve diet quality and public health, while others expressed concerns about stigma or challenges in implementation. All agreed that evidence on the real-world impacts of these waivers remains limited.⁴ Shifts in Medicaid cost sharing and work requirements were also a priority for this group.

Table 1: Family & Community

Top Policy Priorities*
<p>SNAP</p> <ul style="list-style-type: none"> • Restore federal funding for SNAP; • Roll back the expanded work requirements and eliminate state-level mandatory SNAP employment and training programs; • Restore access to SNAP for sub-populations of immigrants; • Mitigate the effects of state-level SNAP administrative and benefit cost sharing increases; • Ensure that state-level waivers restricting SNAP purchases are designed to improve diet quality and public health and limit harms to SNAP participants; • Fund evidence-based nutrition education for SNAP-eligible individuals; • Provide funding and support for the charitable food system to meet an expected increase in demand due to the reductions in SNAP access; and • Reverse changes to the Low-Income Home Energy Assistance Act of 1981 (LIHEAA) and other energy assistance program payment calculations in determining the Heating and Cooling Standard Utility Allowance (HCSUA) affecting SNAP eligibility and benefit levels.
<p>Medicaid</p> <ul style="list-style-type: none"> • Roll back the expanded work requirements; and • Remove the increase in federal cost sharing and more frequent eligibility determinations for Medicaid expansion populations.
<p>*Policy priorities are listed in approximate order of importance, first by topic, and then within each topic area.</p>

Pregnancy, Postpartum, and Early Childhood

The Pregnancy, Postpartum, and Early Childhood category included policies and programs focused on children from birth to age 5 and individuals who are pregnant or postpartum, including WIC, Head Start, Child and Adult Care Food Program (CACFP), and breastfeeding promotions. A description of all included policies and programs in this category can be found in **Appendix A, Table A1**.

Table 2 provides a summary of the top policy priorities identified in this category, which includes supporting WIC and increasing participation in CACFP and Head Start. Thought leaders also raised the importance of policies to strengthen maternal health and health equity, support breastfeeding, and improve the resiliency of infant formula supply chains. However, these policies did not rise to the top when prioritizing short-term research needs.

Table 2: Pregnancy, Postpartum, and Early Childhood

Top Policy Priorities*
WIC <ul style="list-style-type: none">• Ensure full funding for WIC to allow all eligible individuals to participate without waiting lists;• Maintain the nutritional integrity of the WIC food package, including fully implementing the 2024 WIC food package and preventing any further updates not aligned with evidence;• Mitigate the impacts of Medicaid and SNAP eligibility changes on WIC participation, given that participants automatically qualify for WIC if they receive Medicaid or SNAP benefits;• Modernize WIC, including by extending access to remote services, which will end in 2026 without Congressional or Administrative action, and making this permanent; and• Prevent state-level restrictions on WIC participation based on immigration status and reduce the harmful effects of perceived restrictions, including for mixed-status households.
Childcare <ul style="list-style-type: none">• Increase participation among families in Head Start and other childcare programs participating in CACFP;• Increase reimbursement for CACFP providers and remove the tiering system for reimbursement;• Streamline CACFP provider requirements and increase provider training and technical assistance;• Strengthen nutrition standards and procurement requirements in CACFP, including reducing UPFs served through the program;• Expand CACFP access to all childcare providers through “CACFP for all” policies; and• Increase access to affordable childcare.
Medicaid <ul style="list-style-type: none">• Protect state-level policies providing pregnancy-related Medicaid coverage through 12 months postpartum.

*Policy priorities are listed in approximate order of importance, first by topic, and then within each topic area.

School-Age Children

The School-Age Children category included policies and programs focused on children from ages 5 to 18 years, or kindergarten through grade 12, including the National School Lunch and School Breakfast Programs, Summer Food Service Program, and Summer-EBT. A description of all included policies and programs in this category can be found in **Appendix A, Table A1**.

Table 3 provides a summary of the top policy priorities identified in this category, which largely centered on maintaining strong nutrition standards for school meal programs as well as protecting program access and participation. Thought leaders noted opportunities to strengthen nutrition in and improve access to other programs impacting school-age children, such as the School Breakfast Program, Summer Food Service Program, after-school snacks and suppers (served via CACFP), and Farm to School programs, including interactions among the various federal nutrition programs serving school-age children. However, beyond maintaining and expanding Summer EBT, research gaps related to other programs impacting school-age children were noted to be less time-sensitive.

Table 3: School-Age Children

Top Policy Priorities*
School Meals <ul style="list-style-type: none">Align nutrition standards for school meals with the strongest available evidence, including preserving evidence-based requirements for sodium, saturated fat, milk, and protein;Reduce UPFs served in schools and increase scratch cooking, while providing additional support to schools to mitigate practical and financial difficulties of sourcing, preparing, and serving less-processed foods at scale;Mitigate the effects of SNAP eligibility changes as SNAP participation confers automatic eligibility for free school meals and is used to determine community eligibility, reducing paperwork and expanding access for students in high-need areas; andMaintain and expand healthy school meals for all at the state and local levels.
Outside of School Policies and Programs <ul style="list-style-type: none">Maintain and expand state-level participation in Summer EBT.
*Policy priorities are listed in approximate order of importance, first by topic, and then within each topic area.

Shaping the Food Environment

The Food Environment category included policies and programs focused on shaping healthy food availability, affordability, and transparency. Examples of these policies and programs include front-of-package labeling and health claims, UPFs and food additive restrictions, food retail policies, and taxes and pricing policies. A description of all included policies and programs in this category can be found in **Appendix A, Table A1**.

Table 4 provides a summary of the top policy priorities identified, which largely centered on confronting the prevalence of UPFs in the U.S. food supply. Policy actions largely focused on defining UPFs and regulating them across venues and levels of government. Other needs related to food labeling and improving the nutritional quality of the food supply. Policies addressing food procurement, retailer strategies, and food marketing were also considered but determined to be less urgent, given limitations in funding.

Table 4: Shaping the Food Environment

Top Policy Priorities*
UPFs <ul style="list-style-type: none">Define and regulate UPFs at the federal, state, and local levels in a way that mitigates their health impacts and avoids unintended consequences (e.g., increased intake of certain less healthful foods not defined as UPFs); andReduce UPFs in schools, other venues, and the food supply more broadly.
Food Labeling and Food Supply Regulation <ul style="list-style-type: none">Establish an evidence-based mandatory front-of-package (FOP) label;Strengthen voluntary sodium reduction targets and potentially make them mandatory; andStrengthen the generally recognized as safe (GRAS) regulatory scheme for food additives.
*Policy priorities are listed in approximate order of importance, first by topic, and then within each topic area.

Other Policy Priorities

Other policies and programs were identified via the survey responses but deemed less time-sensitive in the roundtable discussions when participants were asked to consider policy priorities in the context of limited funding to address research gaps. Examples of these programs and policies include food is medicine and programs for older adults, such as senior nutrition programs. As such, these topics are not discussed in this research agenda.

THE RESEARCH AGENDA

The policy priorities outlined above underscore an urgent need for timely, policy-relevant evidence. Ongoing changes to program eligibility, funding, administration of federal nutrition and health programs, and data infrastructure have created an urgent need for evidence that can inform policy decisions in the next 12-18 months.

The research agenda that follows translates these policy priorities into a focused set of research needs. The purpose of the research agenda is to guide public and private research funders toward studies that assess the impacts of recent and proposed policy changes, fill critical evidence gaps, and support timely decision making at the federal, state, and local levels.

While the policy priorities are organized by life stage and program area, several common research needs emerged across topics. For this reason, the research agenda is organized around three overarching themes:

1. Evaluation of federal nutrition programs and other policies;
2. Data collection and surveillance; and
3. Enhancing evidence for decision-making.

Within each theme, specific research needs are presented by policy or program area to maintain a clear connection to the policy priorities described above.

Evaluation of Federal Nutrition Programs and Other Policies

Rapid-response evaluations are needed to provide timely evidence on the impacts of federal, state, and local nutrition policy changes. Priority research includes assessing the effects of SNAP and Medicaid eligibility and funding changes under P.L. 119-21 on food security, nutrition, health, and economic outcomes, including the ripple effects for other programs, such as WIC and school meals.

Evaluations should also examine the impacts of existing and proposed changes affecting access to WIC, CACFP, and school meals, as well as changes in the nutritional quality and sourcing of foods served in these programs (e.g., use of UPFs), and the role of supports for program providers. Studies should assess both the adverse impacts of cuts to program eligibility, funding, and nutrition standards, as well as the potential benefits of policy enhancements designed to strengthen food and nutrition security. All research should consider differential impacts across populations and contexts, including geography, rurality, income, and race/ethnicity. Table 5 further summarizes priority research needs.

Table 5. Evaluation of Federal Nutrition Programs and Other Policies

Topic Area	Research Needs
SNAP	<ul style="list-style-type: none"> • Impacts of SNAP eligibility, funding, and administrative changes under P.L. 119-21 on participation, food security, nutrition security, and health outcomes, including: <ul style="list-style-type: none"> – Federal funding cuts; – Expanded work requirements and interactions with Medicaid work requirements; – Changes to eligibility and access, including for certain immigrant populations; and – Other provisions affecting access and benefit levels (e.g., changes to calculations for Heating and Cooling Standard Utility Allowances (HCSUA)). • Impacts of increased SNAP administrative and benefit cost sharing under P.L. 119-21 on state budgets • Impacts of SNAP food restriction waivers on participation, food purchases, stigma, food and nutrition security, and health outcomes • Effects of state policy responses to increased SNAP cost sharing—including enrollment barriers, cuts to other programs, or new revenue strategies—on state budgets and food and nutrition security • Exploration of new state revenue strategies (e.g., state-level sugary drink taxes) to offset increased SNAP cost sharing, and their implications for state budgets, nutrition outcomes, and public health

Table 5. Evaluation of Federal Nutrition Programs and Other Policies

Topic Area	Research Needs
Program Interactions/ Multiplicative Effects	<ul style="list-style-type: none"> Impacts of SNAP and Medicaid eligibility changes and funding cuts under P.L. 119-21 on access to and participation in other programs, including WIC, school meals, and other social safety net programs
WIC	<ul style="list-style-type: none"> Impacts of funding cuts on program participation and related outcomes Comparative effectiveness of remote versus in-person services on WIC enrollment and retention Effects of federal and state immigration-related policies on WIC participation and retention Impacts of full implementation of the existing WIC food package and of proposed changes to align with the 2025-2030 Dietary Guidelines for Americans
CACFP	<ul style="list-style-type: none"> Impacts of changes to CACFP nutrition or procurement standards, including reductions in UPFs, on program participation and nutrition and health outcomes Model impacts of changes to reimbursement rates, provider requirements, or “CACFP for all” policies on provider participation, child participation, and child nutrition and health impacts Implementation challenges and solutions related to changes in CACFP nutrition or procurement standards
School meals	<ul style="list-style-type: none"> Impacts of full implementation of existing school meal standards or changes to align with the 2025-2030 DGA, on participation and nutrition and health outcomes Impacts of different definitions of UPFs and related school meal policies on participation and nutrition and health outcomes Impacts of increases in scratch cooking on school meal participation and nutrition and health outcomes Challenges and best practices for school food authorities in strengthening nutrition standards, reducing UPFs, and expanding scratch cooking Impacts of healthy school meals for all policies on stigma, participation, and nutrition and health outcomes Impacts of direct certification eligibility on participation in free school meals at the student, school, and district levels
Summer feeding programs	<ul style="list-style-type: none"> Impacts of Summer EBT participation on food and nutrition security, including comparisons between participating and non-participating states
Food environment and labeling	<ul style="list-style-type: none"> Impacts of UPF policies on product availability, reformulation, nutritional quality of the food supply, overall intake of UPFs, and diet quality Impacts of proposals to strengthen the Generally Recognized As Safe (GRAS) regulatory system on the use of food additives, food availability, and nutrition outcomes Impacts of front-of-package labeling approaches on consumer understanding, purchasing behavior, and industry reformulation Impacts of strengthening or mandating sodium reduction targets on sodium intake, health outcomes, and industry reformulation

Data Collection and Surveillance

Recent reductions or discontinuations of key food security and health surveillance tools, such as the Household Food Security Survey,³ have created critical gaps in the data needed to assess food security, diet quality, obesity, and related health outcomes among children and families. These gaps limit the ability to evaluate the impacts of recent and proposed policy changes and to identify emerging needs.

Research is needed to restore and strengthen surveillance systems by rebuilding capacity for existing tools, establishing new data collection efforts at the federal or state government levels or through non-governmental entities, and enhancing existing surveys. For example, states could add food security measures to existing surveys or conduct independent data collection and analyses. Thought

leaders emphasized the importance of maintaining nationally comparable data alongside consistent state-level surveillance to monitor trends, assess policy impacts, and guide future interventions. **Table 6** summarizes priority data collection and surveillance research needs.

Table 6.
Data Collection and Surveillance Research Needs

Topic Area	Research Needs
Restore and strengthen core surveillance systems	<ul style="list-style-type: none"> • Assess food insecurity at the national and state levels through restoration of the Household Food Security Survey and/or development of alternative tools • Assess nutrition and health status of U.S. children and adults through restoration of funding and staffing for NHANES and/or establishment of complementary surveillance tools • Assess maternal and infant health policies and programs following the shutdown of data collection systems and loss of essential staff for the Pregnancy Risk Assessment Monitoring System (PRAMS)

Enhancing Evidence for Decision Making

In many cases, policy inaction is due to challenges in communicating evidence in ways that resonate with decision makers, rather than a lack of data. Policymakers’ priorities and information needs vary by level of government, jurisdiction, policy context, or stage of the legislative or regulatory process. While public health researchers and advocates may focus on outcomes such as food insecurity or chronic disease risk, decision makers may be more responsive to evidence related to economic impacts, return on investment, or implications for specific constituencies.

First, researchers and advocates need to identify the outcomes and metrics that matter most to key decision makers. Then research studies can be designed to speak directly to those priorities. Translating and disseminating findings in accessible, policyrelevant formats is essential for supporting timely and informed decision making. **Table 7** summarizes priority research needs related to enhancing evidence for decision making.

Table 7. Enhancing Evidence for Decision Making

Topic Area	Research Needs
Economic and return on investment research	<ul style="list-style-type: none"> • Assess the return on investment and economic impacts of food and nutrition security policies and programs • Evaluate the benefits of specific policies for the broader community and key population groups • Estimate the long-term health care cost savings and economic impacts associated with specific policy changes
Health equity research	<ul style="list-style-type: none"> • Assess policy impacts for populations of particular interest to policymakers, such as rural communities and other disproportionately affected groups
Outcomes of common interest and co-benefits	<ul style="list-style-type: none"> • Identify and evaluate co-benefits of food and nutrition security policies that align with the values and interests of decision makers (e.g., economic development, workforce participation, or health care cost containment) • Examine opportunities to leverage policies of interest, such as food is medicine, to build support for complementary nutrition policies, including increased access to federal nutrition programs
Communication and dissemination	<ul style="list-style-type: none"> • Identify effective strategies for translating and disseminating research findings into formats and language that resonate with policymakers and other decision makers

CONCLUSION

Research is needed to fill in gaps in knowledge regarding design, implementation, and effects of policies to improve food security, strengthen diet quality, and reduce obesity among children and families. This research agenda is informed by leading food security and nutrition policy researchers and advocates and can provide guidance to funders, researchers, and other stakeholders regarding the most pressing short-term research needs. In an environment when many federal nutrition programs and policies have experienced reductions in funding or have been deprioritized, this short-term research agenda can catalyze action on urgent policy research needs and help to move the field forward in a unified manner.

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About Healthy Eating Research

Healthy Eating Research (HER) is a national research program with funding provided by 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).

APPENDIX A: RESEARCH AGENDA DEVELOPMENT PROCESS DETAILS

In Fall 2025, HER launched a project to develop a *national research agenda* to chart the next era of policy, systems, and environmental interventions and strategies to promote food security, support optimal diet quality, and achieve healthy weights for U.S. children and families. As part of this project, four expert-led reviews are being conducted to establish “what we know” in the areas of 1) early childhood, 2) school-age children, 3) family and community nutrition supports, and 4) policies and programs shaping the food environment. Data from these literature reviews, as well as input from organizations and individuals are being used to identify “what we need to know” – i.e., priority research questions. The resulting national research agenda will be released in early 2027 and is intended to serve as a five-year roadmap, guiding policymakers, funders, and advocates toward the most promising solutions to improve child and family nutrition.

Through initial conversations with researchers, partners, and funders, it became apparent that evidence is needed now to inform policies in the short-term. While the longer-term research agenda will be grounded in the evidence, this short term list of priorities is a consensus-driven roadmap, which reflects the expertise of leading food security, nutrition, and obesity prevention researchers and advocates. Primary inputs include (1) a survey of research and advocacy thought leaders and (2) follow-up roundtable and individual discussions with selected experts. The research agenda also reflects HER’s two decades of expertise in federal nutrition programs and funding rapid, solution-oriented research.

Online Survey

In December 2025, an online survey was sent to 66 advocates and researchers determined by the HER team to be individual thought leaders or senior representatives of leading organizations working on food and nutrition policy in the U.S. The survey questions are included in Appendix B. Responses were received from 45 individuals (68% response rate), with 31 complete responses (47%). Respondents’ primary areas of work included research (68%), policy (63%), advocacy (55%), and program operations (37%). Lenses for approaching policy were diverse and included food and/or nutrition security (82%), diet quality or improving nutrition outcomes (66%), chronic disease prevention (63%), food systems (42%), and obesity prevention (50%). Respondents had expertise across various life stages and topic areas, including 1) pregnancy, postpartum, and early childhood (68%); 2) school-age children and adolescents (66%); 3) family and community (71%); 4) shaping the food environment (47%); and 5) other policies and programs (45%). **Table A1** provides additional details on programs and policies included in each of these areas.

The survey asked respondents to identify the most pressing public policy issues related to food and nutrition at the federal, state, and/or local levels and related research priorities within each of the life stages or topic areas in which they work. Findings from the survey were evaluated to identify emerging themes across all survey responses, as well as by topic area. Learnings from the survey were used to prepare a discussion guide for roundtables to dig deeper into areas where more details were needed to refine research questions.

Roundtables

As a follow-up to the survey, HER held a series of five roundtables with thought leaders who completed the survey and indicated interest. Each roundtable focused on one life stage or topic area, included four to six participants, and was 60-75 minutes in length. A sample roundtable discussion guide is included in Appendix C. Individuals were assigned to specific roundtables based on their expertise and availability. The roundtables provided an opportunity to clarify the ranking of policy priorities and related research questions. In addition, three one-on-one conversations (~30-minutes in length) were held with individuals who were unable to join a scheduled roundtable. The roundtables and individual conversations allowed for refinement and prioritization of policy issues and research gaps based on timeliness and cost constraints, given limited research dollars available.

Table A1: Programs and Policies By Life Stage

Overarching Life Stage /Topic Area	Description
Pregnancy, Postpartum, and Early Childhood	<p>Policies and programs focused on children from birth to age 5 and individuals who are pregnant or postpartum, including:</p> <ul style="list-style-type: none"> • WIC • ECE Programs, such as CACFP, Head Start, childcare licensing • Home Visiting Programs • Childcare subsidies • Prenatal care/nutrition • Breastfeeding promotions • Infant formula access/affordability
School-Age Children	<p>Programs and policies focused on children ages 5-18 years or grades K-12, including:</p> <ul style="list-style-type: none"> • School Breakfast Program • National School Lunch Program • After school programs • Summer feeding programs (e.g., Summer Food Service Program, Summer EBT) • Food procurement policies in schools
Family & Community Nutrition	<p>Policies and programs that families with children (ages 0-18 years) directly access/utilize, including:</p> <ul style="list-style-type: none"> • Supplemental Nutrition Assistance Program (SNAP) • SNAP-Ed • Expanded Food and Nutrition Education Program (EFNEP) • Emergency food system (e.g., food banks/pantries, TEFAP, CSFP) • Income support policies (e.g., child tax credits or subsidies, TANF) • Medicaid • Children’s Health Insurance Program • Tribal food and nutrition assistance programs (e.g., FDPIR, IHS)
Shaping the Food Environment	<p>Policies and programs focusing on the macro environment, or shaping the broader food environment, including healthy food availability, affordability, and transparency.</p> <ul style="list-style-type: none"> • UPF or food additive restrictions (e.g., GRAS) • Labeling (e.g., FOP, health claims, warning labels) • Food marketing (e.g., traditional or digital) • Other food industry practices and policies • Tax and pricing policies (e.g., SSB taxes, incentives, subsidies) • Food procurement policies • Food retail policies • Nutritional content of the food supply (e.g., sodium or added sugar reduction)
“Other” Food and Nutrition Programs and Policies	<p>Policies and programs not captured by the previous categories, such as:</p> <ul style="list-style-type: none"> • Nutrition policies and programs centered on young adults or college students ages 18-25 • Adult-focused food and nutrition policies and programs • Older adult-focused (i.e., senior) food and nutrition policies and programs • Food is medicine/ food in health care programs • Obesity prevention interventions (lifestyle-based) • Public health nutrition research or program funding to improve healthy eating

APPENDIX B: THOUGHT LEADER SURVEY QUESTIONS

Background: Healthy Eating Research (HER) was established as a national program of the Robert Wood Johnson Foundation (RWJF) in 2005, with the goal of supporting and disseminating research on policy, systems, and environmental strategies that prevent child obesity and promote healthy eating among children and families. After a 20-year investment in HER and the field, RWJF's commitment to child obesity ends in December 2025.

As part of our RWJF legacy, HER is developing a national research agenda for policy, systems, and environmental (PSE) interventions and strategies to promote food and nutrition security, optimal diet quality, and healthy weights among U.S. children, adolescents, and families. To complete this project, HER has commissioned literature reviews and will be seeking input from experts on policy and research needs related to four critical life stages or systems: 1) Early Childhood, 2) School-Age Children, 3) Family and Community Nutrition Supports, and 4) Shaping the Food Environment.

While the full research agenda will not be published until early 2027, HER recognizes the need for thoughtful and practical research to inform PSE strategies in 2026. Thus, HER plans to develop a short-term, rapid-response research agenda to be released in early spring 2026 on PSE interventions and strategies to improve food security, diet quality, and healthy body weight for children and families within the next 1-2 years.

Why we are asking you to complete this survey: As a thought leader in the field, or representative of a leading organization working in this space, your perspective on the most pressing policy and research needs now is critical to informing both these short-term and long-term research agendas. Please note that this survey has been sent to only one person per organization. We encourage you to collaborate with other colleagues within your organization who work on food security, nutrition security, and obesity prevention policies to provide a single cohesive response on behalf of your organization. Survey questions touch on federal, state, and local policy issues and research gaps and needs across life stages and topic areas.

Results from this survey will be used to inform this short-term research agenda, focused on what we need to know now to protect and defend, or strengthen, nutrition policies and programs for children and families. As with the long-term research agenda, we seek to identify research gaps related to promoting food and nutrition security, optimal diet quality, and healthy weight. HER will use this short-term research agenda to advocate for additional research funding.

Thank you for taking the time to share your expertise to shape the future of food and nutrition policy research for children and families.

Please direct any questions to Megan Lott, Deputy Director, Healthy Eating Research at megan.lott@duke.edu.

HER Short-Term Research Agenda Thought Leader Survey Questions

[All respondents to complete Q1-3]

1. HER considers you and/or your organization to be a thought leader in the field of public health nutrition and food policy. Please identify the primary areas in which you or your organization work. Select all that apply.
 - a. Policy
 - b. Advocacy
 - c. Research
 - d. Program Operation

2. From which perspective(s) do you or your organization approach public health nutrition and food policy? Select all that apply.
 - a. Food and/or Nutrition Security
 - b. Diet Quality or Improving Nutrition Outcomes
 - c. Obesity prevention
 - d. Chronic disease prevention
 - e. Food Systems
 - f. Other (please describe)

3. On which of the following life stages or systems do you work? Select all that apply. If responding on behalf of an organization, please select all life stages or systems in which your organization works.
 - a. Pregnancy, Postpartum, and Early Childhood: Policies and programs focused on children from birth to age 5 and individuals who are pregnant or postpartum (e.g., WIC, ECE programs, home visiting programs, childcare subsidies, prenatal care and nutrition, breastfeeding promotion, infant formula access/affordability)
 - b. School-Age Children and Adolescents: Programs and policies focused on children ages 5-18 years or grades K-12 (e.g., SBP, NSLP, after school programs, summer feeding programs, food procurement policies in schools)
 - c. Family and Community Nutrition: Policies and programs that families with children (ages 0-18 years) directly access/utilize (e.g., SNAP, SNAP-Ed, EFNEP, emergency food system programs, income support policies, Medicaid, Children's Health Insurance Program, tribal food and nutrition assistance programs)
 - d. Shaping the Food Environment: Policies and programs focusing on the macro environment, or shaping the broader food environment, including healthy food availability, affordability, and transparency (e.g., labeling (FOP, health claims), UPF or food additive restrictions, food marketing, other food industry practices and policies, tax and pricing policies, nutritional content of the food supply (e.g., sodium and added sugar reduction), food procurement policies, food retail policies)
 - e. "Other" Food and Nutrition Policies and Programs: Policies and programs not captured by the previous categories (e.g., nutrition policies and programs centered on adults 18+, older adults, college students or young adults ages 18-25, food is medicine/ food in health care programs, funding for public health nutrition research and programs).

[Only complete Questions 4-9 if you selected early childhood and pregnancy/postpartum policies and programs (option a) in Q3]

4. On which of the following age ranges/life stages do you or your organization work? Select all that apply.
 - a. Preconception/Pregnancy
 - b. Postpartum and/or Breastfeeding
 - c. Infants less than 12 months old
 - d. Toddlers ages 12-36 months
 - e. Preschool/Pre-K ages 3-5

5. On which of the following pregnancy, postpartum, and early childhood policies and programs do you or your organization work specifically? Select all that apply.
 - a. Special, Supplemental Nutrition Program for Women, Infants, and Children (WIC)
 - b. Early care and education (ECE) programs (e.g., Child and Adult Care Food Program, Head Start, childcare licensing)
 - c. Home visiting programs
 - d. Childcare subsidies
 - e. Prenatal care/nutrition
 - f. Breastfeeding promotion
 - g. Infant formula access/affordability
 - h. Other (please describe)

6. What do you consider to be the most pressing federal public policy issues related to food and nutrition in pregnancy, postpartum, and early childhood to be addressed in 2026-2027? Please describe.

7. What do you consider to be the most pressing state and/or local public policy issues affecting food and nutrition in pregnancy, postpartum, and early childhood to be addressed in 2026-2027? Please describe.
8. Based on the issues raised in the previous questions, what are the most pressing research gaps or needs to address in 2026-2027 to strengthen policies and programs affecting food and nutrition in pregnancy, postpartum, and early childhood at the federal, state, or local levels?
9. Do you have any other comments related to policy and research considerations affecting food and nutrition in early childhood?

[Only complete Questions 10-15 if you selected school age children and adolescents' programs and policies (option b) in Q3]

10. On which of the following age ranges/life stages do you or your organization work? Select all that apply.
 - a. Elementary school students (grades K-5)
 - b. Middle school students (grades 6-8)
 - c. High school students (grades 9-12)
11. On which of the following policies and programs affecting school-age children and adolescents do you or your organization work specifically? Select all that apply.
 - a. School Breakfast Program
 - b. National School Lunch Program
 - c. After school programs
 - d. Summer feeding programs (e.g., Summer Food Service Program, Summer EBT)
 - e. Food procurement policies in schools
 - f. Other (please describe)
12. What do you consider to be the most pressing federal public policy issues affecting food and nutrition for school-age children to be addressed in 2026-2027? Please describe.
13. What do you consider to be the most pressing state and/or local public policy issues affecting food and nutrition for school-age children to be addressed in 2026-2027? Please describe.
14. Based on the issues raised in the previous questions, what are the most pressing research gaps or needs to address in 2026-2027 to strengthen policies and programs affecting food and nutrition for school-age children at the federal, state, or local levels?
15. Do you have any other comments related to policy and research considerations affecting food and nutrition for school-age children?

[Only complete Questions 16-20 if you selected family and community nutrition policies and programs and policies (option c) in Q3]

16. On which of the following family and community nutrition policies and programs do you or your organization work specifically? Select all that apply.
 - a. Supplemental Nutrition Assistance Program (SNAP)
 - b. SNAP-Ed
 - c. Expanded Food and Nutrition Education Program (EFNEP)
 - d. Emergency food system (e.g., food banks/pantries, TEFAP, CSFP)
 - e. Income support policies (e.g., child tax credits or subsidies, TANF)
 - f. Medicaid
 - g. Children's Health Insurance Program
 - h. Tribal food and nutrition assistance programs (e.g., FDPIR, IHS)
 - i. Other (please describe)
17. What do you consider to be the most pressing federal public policy issues affecting family and community food and nutrition policies and programs to be addressed in 2026-2027? Please describe.

18. What do you consider to be the most pressing state and/or local public policy issues affecting family and community food and nutrition policies and programs to be addressed in 2026-2027? Please describe.
19. Based on the issues raised in the previous questions, what are the most pressing research gaps or needs to address in 2026-2027 to strengthen policies and programs supporting families and community food and nutrition at the federal, state, or local levels?
20. Do you have any other comments related to policy and research considerations affecting family and community food and nutrition policies and programs?

[Only complete Questions 21-25 if you selected food environment policies (option d) in Q3]

21. On which of the following food environment policies and programs do you or your organization work specifically? Select all that apply.
 - a. UPF or food additive restrictions (e.g., GRAS)
 - b. Labeling (e.g., FOP, health claims, warning labels)
 - c. Food marketing (e.g., traditional or digital)
 - d. Other food industry practices and policies
 - e. Tax and pricing policies (e.g., SSB taxes, incentives, subsidies)
 - f. Food procurement policies
 - g. Food retail policies
 - h. Nutritional content of the food supply (e.g., sodium or added sugar reduction)
 - i. Other (please describe)
22. What do you consider to be the most pressing federal public policy issues affecting the food environment to be addressed in 2026-2027? Please describe.
23. What do you consider to be the most pressing state and/or local public policy issues affecting the food environment to be addressed in 2026-2027? Please describe.
24. Based on the issues raised in the previous questions, what are the most pressing research gaps or needs to address in 2026-2027 to strengthen policies and programs affecting the food environment at the federal, state, or local levels?
25. Do you have any other comments related to policy and research considerations affecting the food environment?

[Only complete Questions 26-30 if you selected “other” policies and programs (option e) in Q3]

26. On which of the following life stages and/or nutrition policies and programs not captured in the previous categories do you or your organization work specifically? Select all that apply.
 - a. Nutrition policies and programs centered on young adults or college students ages 18-25 (please describe)
 - b. Adult-focused food and nutrition policies and programs (please describe)
 - c. Older adult-focused (i.e., senior) food and nutrition policies and programs (please describe)
 - d. Food is medicine/ food in health care programs
 - e. Obesity prevention interventions (lifestyle-based)
 - f. Public health nutrition research or program funding to improve healthy eating
 - g. Other (please describe)
27. What do you consider to be the most pressing federal public policy issues affecting “other” food and nutrition policies and programs in 2026-2027? Please describe.

28. What do you consider to be the most pressing state and/or local public policy issues affecting “other” food and nutrition policies and programs in 2026-2027? Please describe.
29. Based on the issues raised in the previous questions, what are the most pressing research gaps/needs to address in 2026-2027 to strengthen these “other” food and nutrition policies and programs at the federal, state, or local levels?
30. Do you have any other comments related to policy and research considerations affecting these “other” food and nutrition policies and programs?

[All respondents to complete Q31-34]

Thank you for completing this survey and sharing your expertise. Your feedback is critical to shaping both the short-term and long-term research agendas that will guide policy, systems, and environmental strategies to improve nutrition and health for children and families. By contributing your insights, you are helping to ensure that the field focuses on the most pressing research needs now—laying the foundation for stronger policies and programs nationwide. We deeply appreciate your time and commitment to advancing this important work.

31. Please share any additional or final thoughts here.
32. May we contact you with any questions related to your responses?
 - a. Yes
 - b. No
33. Are you willing to participate in follow up conversations or small group discussions on these topics in January?
 - a. Yes
 - b. No
34. If you answered yes to being contacted by HER or to participating in small group discussions in January, please share your contact information.
 - a. Name:
 - b. Organization:
 - c. Email:

Your response has been recorded.

We thank you for your time spent taking this survey.

APPENDIX C: DISCUSSION GUIDE

The HER team prepared a discussion guide for use in facilitating each of the roundtable discussions. The discussion guide highlighted key topics from survey results on which the roundtable discussion could probe further. The roundtable discussions were particularly useful in determining which of the many topics noted in survey results are most pressing for the short-term research agenda.

Below is a sample discussion guide for one of the roundtable discussions. While the discussion guide was used to structure the session, the conversation was allowed to flow organically, and all questions may not have been asked or given equal time.

**Healthy Eating Research
Roundtable Discussion: 2026 Research Agenda
School-Age Children
February 5, 2026; 1-2:30 ET**

AGENDA

- I. Introductions** – All (5 min)
- II. Overview of Project and Goals** – Megan Lott, HER (5 min)
- III. Overview of Topline Survey Findings** – Megan Lott, HER (8 min)
- IV. Discussion of Short-Term Research Needs** – All (40-70 min)
- V. Next Steps** – Megan Lott, HER (2 min)

Discussion Questions:

1. What are the most pressing short-term (12-18 month) research questions **related to maintaining and/or strengthening the nutritional quality of school meals?**
2. What are the most pressing short-term (12-18 month) research questions **related to maintaining and/or increasing eligibility and participation in school meal programs?**
 - a. What are the most pressing short-term (12-18 month) research questions **related to maintaining/expanding community eligibility?**
 - b. What are the most pressing short-term (12-18 month) research questions **related to universal school meals/ healthy school meals for all?**
3. What are the most pressing short-term (12-18 month) research questions **related to the impacts of SNAP and Medicaid policy changes and funding cuts on school-age children?**
 - a. What are the greatest short-term (12-18 month) research needs **related to the impact of SNAP and Medicaid cuts on school meals** or other food and nutrition assistance or social safety net programs serving school-age children?
4. What are the most pressing short-term (12-18 month) research questions **related to reducing highly-processed foods and increasing scratch cooking in school meals** and other child-focused venues?
5. What are the most pressing short-term (12-18 month) research questions **related to farm-to-school and local food procurement in school meals** and other child-focused venues?
6. What research is needed to **improve the feasibility of implementing healthier school meals and changing school meal procurement policies** (e.g., reducing UPFs and increasing local foods)?
7. What are the most pressing short-term (12-18 month) **economic research questions** related to school meal programs?
8. What are the most pressing short-term (12-18 month) research questions related to the **interactions between NSLP and other in-school and out-of-school nutrition programs** (e.g., SBP, CACFP afterschool snack and supper programs, summer meals, Summer EBT)?
9. What are the most pressing short-term (12-18 month) research questions related to **non-school policies and programs impacting school age children** (e.g., sugary drink tax or warning label, reducing marketing to kids)?