



The Daily Dish

Health Policy the MAHA Way

DOUGLAS HOLTZ-EAKIN | SEPTEMBER 15, 2025

Recall that Trump Administration created the Make America Healthy Again (MAHA) Commission, which began by publishing the “[Make Our Children Healthy Again: Assessment](#).” That report summarized its view of the data on children’s health. Now the MAHA Commission has released the “[Make Our Children Healthy Again: Strategy Report](#),” which contains more than 120 recommendations spanning multiple federal cabinet departments and agencies. Eakinomics makes no pretense at being able to summarize the sweeping report; see Michael Baker’s [latest](#) for an analysis.

The ostensible goal is to reverse the putative childhood chronic illness crisis. Naturally, a reflex is to create a new bureaucracy dedicated to this task: the Administration for a Healthy America (AHA). This would require legislation, and its actual duties are not crystal clear. This is largely because the bulk of the proposed strategy is intended to be implemented using existing regulatory authorities across multiple agencies.

As Baker summarizes it, there are several overarching themes:

Promoting the National Institutes of Health as a research entity, a convener, and a cross-government analysis hub for chronic disease data and policy formulation alike.

Overhauling food policy through coordination with the United States Department of Agriculture, the Food and Drug Administration (FDA), and Environmental Protection Agency.

Enhancing conflict-of-interest transparency, consumer protections, and advertising enforcement with joint efforts by FDA, the Federal Trade Commission, and the Department of Justice.

The thread that runs through this is the claim that financial incentives, including conflicts of interest that cause the private sector to market poor choices, lead to unhealthy foods and lifestyles. Coordinating agriculture and food policy, aligning financial incentives, and cleaning up the environment will lead to less chronic disease. Meanwhile, the NIH will document this progress with MAHA research.

Maybe. Certainly, there is little disagreement that food choices and lifestyles have a big impact on personal health. But the coordination that the MAHA Commission proposes is hard to execute in practice. And if the American public is unreceptive to the opportunity to revolutionize its lifestyle choices, how coercive does MAHA intend to become?

Stay tuned. This story is not over