

Frequently Asked Dairy Questions

Infants: What Dairy When?

From birth to 6 months, infants should receive only breastmilk and/or iron-fortified formula as their primary source of nutrition. Around 6 months, most infants can begin eating complementary foods, including options like pasteurized soft cheeses and plain, full-fat yogurt. By 12 months, whole milk can be introduced.⁴³⁻⁴⁶

Allergy vs. Lactose Intolerance?

With a cow's milk protein allergy (CMPA), the immune system overreacts to the proteins in milk and other dairy foods. Children with CMPA cannot consume dairy foods. However, up to 75% of children outgrow their CMPA allergy.⁴⁷

Lactose intolerance is the inability to fully digest lactose. The American Academy of Pediatrics recommends keeping lactose-free dairy products on the menu for most children with lactose intolerance.⁴² Hard cheeses naturally contain very little lactose, and yogurt may be easier to digest if it has live and active cultures which can help break down lactose.

Toddlers: Too Much Milk?

If toddlers drink more than the recommended amount of milk, it may reduce their appetite for other nutritious foods, including iron-containing foods like meat, lentils, tofu and dark leafy greens. That is why it is important to stick to the recommended servings.

Plant-Based Alternatives?

Child health experts agree, with the exception of fortified soy beverage, plant-based beverages are not a recommended replacement for real dairy milk unless medically indicated or to meet specific dietary preferences.^{34,35} That's because most plant-based drinks have inconsistent and incomplete nutrition profiles compared to dairy milk.

Constipation?

Dairy foods do not cause constipation when consumed in recommended amounts as a part of a balanced diet. Fermented dairy foods like yogurt and kefir may help reduce gastrointestinal symptoms, such as diarrhea and constipation.^{48,49}

Added Sugars?

The 2025-2030 Dietary Guidelines for Americans recommends zero grams of added sugar for children age 0-10, and for older children, limiting added sugar to no more than 10 grams per meal and choosing dairy foods that do not exceed 2.5 grams of added sugar per 2/3 cup equivalent.⁴³

All varieties of dairy milk provide 13 essential nutrients to support children's growth, bone health, learning and development.^{50,51} The current body of science shows children who drink flavored milk do not weigh more than those who don't drink flavored milk, and adolescents who drink flavored milk tend to consume more dairy and related nutrients compared to those who don't drink milk at all.⁵⁰⁻⁵³

Raw Milk?

The body of science indicates any potential benefits to consuming raw milk are outweighed by its serious health risks. Pasteurization does not drastically change milk's nutrition, offering all the nutrients and the evidence-based health benefits, without the risk.⁵⁴ Meanwhile, raw milk can harbor dangerous bacteria, so it poses serious safety risks, especially to vulnerable populations like children.⁵⁵

Hormones?

Hormones are not added to milk, and there is no evidence that the trace amounts of natural hormones in milk play a role in puberty or overall health. There is insufficient evidence to suggest a link between milk consumption and increased risk for early puberty.⁵⁶⁻⁵⁸

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