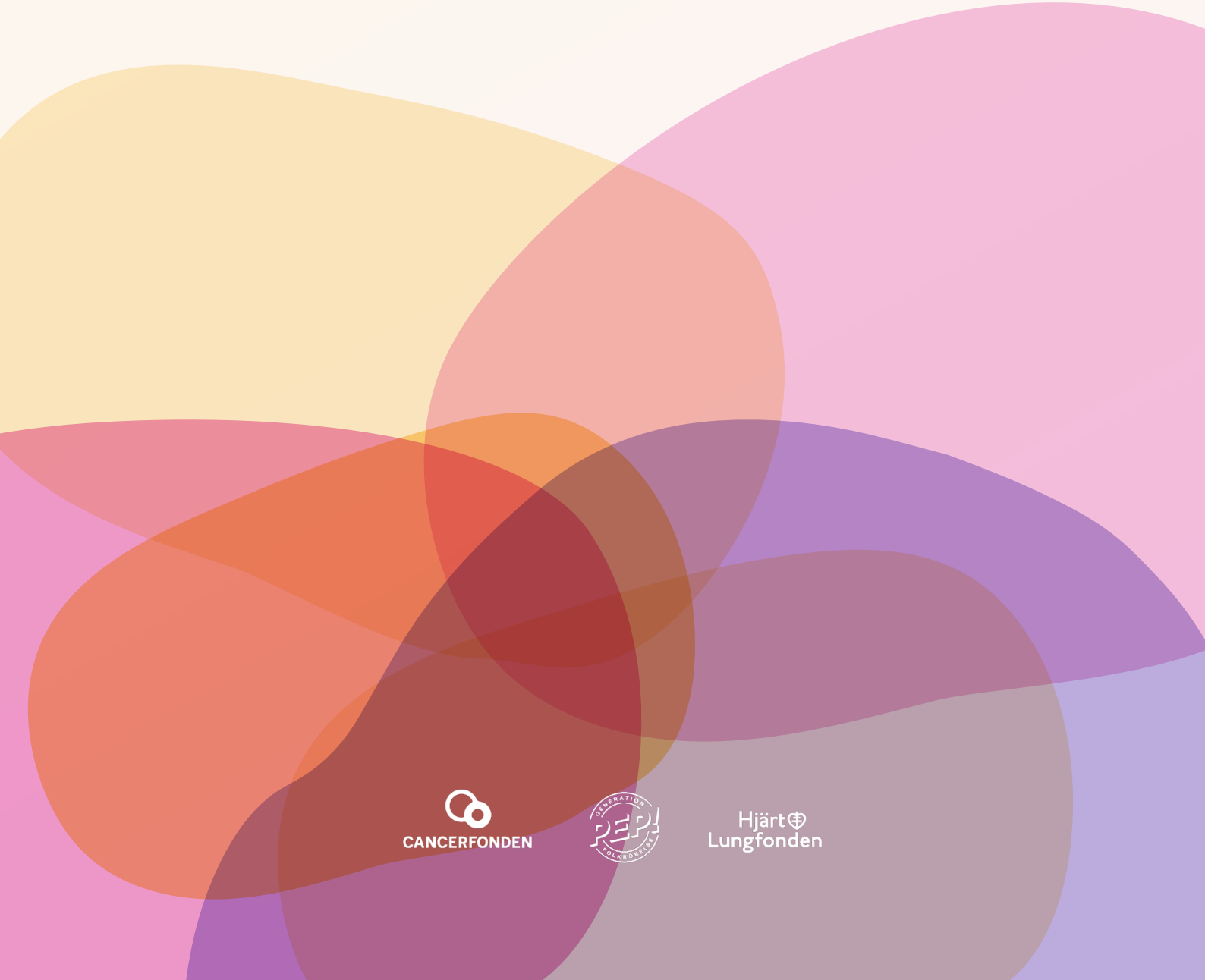
A Child Rights Impact Assessment on Marketing of Unhealthy Food



PREFACE

Healthy children are the foundation of a strong society. However, their health is being threatened by unhealthy food environments, resulting in only a fraction of children having healthy dietary habits. The dietary habits of children and young people today are a barrier to their right to the highest attainable standard of health and development.

It is an alarming trend that food is contributing to an increasing number of children suffering from disease and conditions such as overweight and obesity, type 2 diabetes, poor oral health and mental ill health. In the long run, this can lead to serious illnesses such as cancer, cardiovascular disease and depression. Today's dietary habits significantly contribute to ill health.

Children and young people are exposed daily to a significant amount of intrusive marketing that drives increased consumption of unhealthy food. Research shows that restricting marketing of unhealthy food is one of the most important measures that can change the dietary habits of children and young people. Despite this, Sweden has yet to impose such restrictions.

Protecting and promoting children's health is a complex issue that requires initiatives from multiple stakeholders. It is our collective responsibility to take action. All children have a right to the highest attainable standard of health under the Convention on the Rights of the Child. This includes access to nutritious food every day.

The Swedish Cancer Society, Generation Pep and the Swedish Heart Lung Foundation have joined forces in this initiative since we all share the vision of a Sweden in which children have the opportunity to grow up healthy. With this report, we aim to contribute to a deeper understanding of the scale of the problem caused by the marketing of unhealthy foods. We urge policymakers to promptly review the legislation to create a future in which children's right to the highest attainable standard of health and development is prioritised. Together we can make a difference.

Ulrika Årehed Kågström,
Secretary General
Swedish Cancer Society

Carolina Klüft
Operations Manager
Generation Pep

Kristina Sparreljung
Secretary General
Swedish Heart Lung Foundation

CONTENTS

SUMMARY

Under the Convention on the Rights of the Child (CRC), which became Swedish law in 2020, the best interests of the child shall be a primary consideration for all decisions affecting children. In addition, all children have the right to achieve their full developmental potential and the highest attainable standard of health. This child rights impact assessment shows that children's rights are being threatened by the current marketing of unhealthy food. According to the UN Committee on the Rights of the Child, States that are signatories to the CRC should protect children's health by regulating the marketing of and access to unhealthy food. Moreover, the UN Committee on the Rights of the Child considers a State that has ratified the CRC to be in breach of its obligations where it fails to respect, protect and fulfil children's rights in relation to business activities and operations that impact on children.

To ensure the rights of children as set out in the CRC, Sweden must impose regulations to limit children's exposure to the marketing of unhealthy food. This means taking responsibility to protect children by expanding the scope of current media and marketing legislation, which is inadequate. According to legal experts, it is possible to impose such regulations in Sweden in order to protect children's rights.

Our recommendations for the best interests of the child are:

- Marketing of unhealthy food to which children are exposed should be regulated.
- The regulation should protect all children up to the age of 18.
- The regulation should be mandatory.
- The regulation should cover all types of marketing techniques, channels and platforms.
- The regulation should cover all marketing to which children are exposed and not just marketing directly targeting children.
- A national nutrition profile should be developed to define what constitutes unhealthy food.
- The legislation should be implemented, monitored and followed up on
- Children and young people should be involved in the preparatory work of regulation.

DEFINITIONS

Child rights impact assessment. A tool for putting the CRC into practice and what is best for the child at the forefront. A child rights impact assessment means making a comprehensive judgement on what is best for a child or group of children. By undertaking a child rights impact assessment, policymakers can identify both positive and negative effects on children's rights and well-being, thereby enabling them to make decisions that are in the best interests of the child.

Marketing. The World Health Organisation (WHO) defines marketing as any form of commercial communication or message that is designed to, or contributes to, increasing the recognition, appeal and/or consumption of particular products and services. This covers all activities that profit from advertising or otherwise promoting a product or service.[1]

Marketing focuses not only on the effect of commercial communication, but also on its intention. This definition comprises different contexts in which companies profit from marketing a product or service – such as collaborations with influencers on social media platforms, sponsorships of sports events, product placement, branding, how products are displayed in stores and product design.

Food environment. The social, physical, economic and political factors that influence the food we choose. Places where we buy, eat, prepare and experience food are all part of the physical food environment. The digital food environment can include food delivery apps, e-commerce platforms, social media and gaming, for example.

Urban planning also plays a part in the food environment, for example how far away a fast-food restaurant is or what kind of food can be purchased at the public swimming pool. All of the above factors are largely shaped by society.

Unhealthy food. Food lacking in nutrients but high in fat, sugar, salt and/or calories. The definition covers beverages as well. Examples include ice cream, sweets, snacks, energy drinks, sweet pastries, fried food and sweetened drinks, as well as fast food such as hamburgers, pizza and chips.

WHY IS A CHILD RIGHTS IMPACT ASSESSMENT NEEDED?

Conditions during childhood not only affect children's health but can also affect their health as adult. A prerequisite for sound and equitable health is that all children receive a good start in life in an environment that stimulates good health, development and learning.[2] Promoting the health of all children is also important to the efforts of the 2030 Agenda for Sustainable Development.

Access to nutritious and healthy food is key to children's well-being, growth and development to their full potential.[3] At the same time, less than one in ten children consumes the recommended amount of fruit, vegetables and fish.[4] Dietary habits are established at a young age and can have lifelong consequences. Unhealthy dietary habits are one of the biggest contributors to the burden of disease in Sweden today and increase the risk of non-communicable diseases, for example type 2 diabetes, cardiovascular diseases and several types of cancer.[5, 6, 7] Furthermore, unhealthy dietary habits are strongly linked to the risk of becoming overweight and developing obesity. In Sweden and globally, there is an alarming increase in the incidence of childhood obesity.[8]

The food environment that children and young people face today drives the consumption of unhealthy food. Marketing is a part of the food environment and, according to the WHO, is a factor that strongly influences dietary habits. Children and young people are particularly vulnerable to marketing and are influenced more easily than adults by the marketing of unhealthy food. Studies show that marketing of unhealthy food and drink has a negative effect on the food children choose, their diet and which food they ask their parents to buy. Overall, this has a negative effect on the development of norms and on children's perception of food.[9] The risk is that children's health will be affected, now and in the future. Children and young people are being exposed to the marketing of unhealthy food – not just in the physical environment, but also to a great degree in the digital environment that forms a natural part of their daily lives. As a part of efforts to halt the rise in obesity among children, the WHO recommends that children's exposure to all such marketing be significantly reduced.[10, 11]

Children do not choose their own dietary habits; rather they are dependent on adults for access to and the opportunity to eat nutritious and healthy food. It is society's responsibility to create healthy food environments in which it is easy to make the right choices and where children are protected from ill health.

The UN Convention on the Rights of the Child (CRC) is a legally binding international agreement that recognises children as autonomous individuals, with their own human rights. The CRC applies to all children, that is, all people under the age of 18.[12] On 1 January 2020, the UN Convention on the Rights of the Child (Articles 1–42) was enacted in Swedish law (2018:1197). The Swedish Government, government agencies and courts now have a greater duty to consider what is best for the child in all decisions and measures that affect children.[13]

Under Article 3(1) of the CRC, States Parties that have ratified the Convention shall give primary consideration to the best interests of the child in all actions concerning children. States Parties have

“Children do not choose their own dietary habits.”

a duty to integrate and apply these principles in all legislative, administrative and judicial processes. This also applies to business operations and activities when they either directly or indirectly affect children.[14]

Under Article 4, States Parties shall take all appropriate measures to ensure compliance with and implementation of the CRC. This applies to both legislation and administrative measures.[15] Under international human rights law, States have three obligations: to respect, to protect and to fulfil human rights. According to the UN Committee on the Rights of the Child, a CRC signatory country that does not respect, protect and ensure the rights of children in connection with business activities is in breach of its obligations.[14]

According to the UN Committee on the Rights of the Child, the obligation to protect children is especially important when it comes to the business world. Signatories to the CRC must take all necessary, appropriate and reasonable measures to prevent business enterprises from causing or contributing to abuses of children's rights. This may involve them enacting and upholding laws and regulations, as well as developing policies that clearly define how businesses should act to protect the rights of children.[14]

Under Articles 6 and 24 of the CRC, all children should be able to achieve their full developmental potential and have the right to the highest attainable standard of health. These are the human rights of all children, but they are also crucial to sustainable development. These rights are threatened by the current marketing of unhealthy food.

This is why it is important to assess whether the marketing of unhealthy food that children and young people are exposed to today is consistent with Article 3 of the CRC, on the best interests of the child. This assessment covers all children (0–18 years) living or staying in Sweden.

The child rights impact assessment described in this report is built on three pillars:

- A summary of the current state of knowledge based on current research.
- Surveys of what children, young people and parents think.
- The applicable legal framework.

The analysis of the best interests of the child is described on pages 25–27 and leads to the recommendations for the best interests of the child presented on page 28 of this report.

This assessment does not take into account any interests other than those relating to the best interests of the child.

THE SITUATION FOR CHILDREN TODAY

The dietary habits of children and young people

People's taste preferences and dietary habits are established at an early age but have a lifelong impact.[16,17] Healthy dietary habits are important for brain development and for body growth. At all ages, they contribute to increased energy and better well-being.[18,19] Eating plenty of vegetables, fruit, fish and whole grains, while restricting the amount of high-energy, low-nutrient foods such as sugary drinks, sweets and crisps, promotes children's health and reduces their risk of overweight or obesity.[20] Healthy dietary habits in children also reduce the short-term risk of tooth decay, malnutrition and underweight. Over the long term, healthy dietary habits reduce the risk of chronic diseases such as type 2 diabetes, cardiovascular disease and cancer.[20, 21, 22, 23]

In Sweden, only one in ten children eats according to Swedish dietary guidelines.[4] In the survey 'Riksmaten Young Children,' which assesses the dietary habits of children aged 1.5 and 4 years in Sweden, the results show that children eat too much processed meat and sweets and not enough vegetables and fruit.[24] The survey also shows that there are already socio-economic differences among young children. Children of parents with a lower level of education eat more red and processed meat and sweets and slightly fewer vegetables than children of parents with a higher education.

Children of parents with a lower level of education eat more red and processed meat and sweets and slightly fewer vegetables than children of parents with a higher education.

'Riksmaten Adolescents' examines the dietary habits of young people in years seven and ten of secondary school and upper sixth form. Results show that children and young people eat on average 250 grams of fruit and vegetables per day.[25] This makes up only half of the minimum 500 grams per day recommended by Swedish dietary guidelines.[26] Children and adolescents whose parents have less education and/or lower incomes eat fewer vegetables and less fish, and drink more soft drinks than those with highly educated parents.[27]. At the same time, 'Riksmaten Adolescents' shows that Swedish young people have a high and widespread consumption of food that is energy-dense and/or nutrient-poor. This is true irrespective of gender, age, background and parents' level of education. These foods make up more than a third of young people's daily energy intake, leaving less room for nutritious food. Examples of such foods are sweet drinks (sweetened with sugar or sweeteners), sweets, cakes, biscuits, pastries, crisps, desserts, ice cream, jams, chips, burgers and pizza.[28]

The food and drink that children consume today increases their risk of developing non-communicable diseases earlier in life. Among 11- to 15-year-olds, obesity has become four times more common since the late 1980s[29]. In the 2021/2022 academic year, almost one in four primary school children was overweight or obese, and in recent years the proportion has increased by about one percentage point annually.[30]

The number of cases of early-onset cancer has increased, with one likely cause being unhealthy dietary habits as well as overweight and obesity.[31, 32] A large study, involving over 2.6 million individuals, showed that being overweight or obese at a young age increased the risk of 18 different types of cancer.[30] Results from the Swedish Cardiopulmonary Bioimage Study also show that being overweight or obese at age 20 is strongly associated with an increased risk of cardiovascular disease.[29] In addition, type 2 diabetes in younger people has become more common globally, with prevalence continuing to rise in many countries. Here, a high BMI is one of the strongest risk factors.[32] Those affected by type 2 diabetes are also getting younger.[33] In a Swedish study from 2019, a relatively high proportion of 6-year-olds had reduced insulin sensitivity, which may increase the risk of cardiovascular disease and type 2 diabetes later in life.[16-21, 34]

The ill health caused by the consumption of unhealthy food affects both the individual and society as a whole.[3] For children and young people, there is a high risk of overweight and obesity persisting into adulthood, but equally serious is the impact these conditions have on their physical and mental health in the here and now.[35] Obesity has the greatest impact on the child as an individual. At the same time, the social cost of overweight and obesity in school children is high. The additional lifetime cost to society is estimated at around SEK 7 billion per cohort when comparing normal weight and overweight/obesity for children aged 15.[36]

A child's food environment bears the stamp of marketing

In public spaces, food is promoted on billboards, on public transport and in shop windows. Various social media platforms spread campaigns in the digital environment, with influencers helping to showcase products to increase brand awareness and engagement. In shops, multi-buy offers, carefully designed packaging and strategic placement of food products are used to attract shoppers. All these different forms of marketing influence our purchasing decisions and ultimately what ends up on our plates and in our stomachs.[37]

"Four out of five food marketing messages that children encounter in their physical food environment are about sweets, snacks and fast food."

International research on outdoor food advertising shows that up to 89 per cent is about unhealthy food, with fast food and sugary drinks the main products marketed. This can be compared with the much lower proportion of healthy food marketing, which is put at between 2 and 20 per cent.[38]

In Sweden as well, objective studies show that the marketing of unhealthy food predominates over other types of food marketing. This is true in areas of high and low socio-economic status within Stockholm, as well as in more sparsely populated areas.[39, 40] A survey by the Swedish Food Agency also shows that around half of secondary and upper secondary schools have multiple food outlets within a short distance. Around half are less than 500 metres from a fast-food restaurant, allowing for the promotion of unhealthy food near school students.[41]

On behalf of the Swedish Heart Lung Foundation and UNICEF Sweden, the medical university Karolinska Institutet has investigated the messages that young people encounter in the physical food environment. Their results also show that Swedish children's food environment is dominated by marketing of unhealthy food – nearly 80 per cent of the advertisements and messages about food that children were confronted with were about sweets, snacks and fast food.[42]

A survey conducted in Denmark showed similar figures when it comes to social media marketing: some 79 per cent of the marketing there was about unhealthy food. When it came to material promoted by influencers, 76 per cent was about unhealthy food.[43]

More than half of online offers from Swedish grocery stores are for unhealthy food products, and four out of five are what are known as multi-buy offers, which encourage people to buy more than they really want or need.[44] According to research from Public Health England, multi-buy offers have the most powerful effect in terms of encouraging people to buy more.[45]

The impact of these offers on children has not been specifically studied, but young people who make their own purchases have both limited cognitive ability and limited finances – which may make them particularly vulnerable to this type of marketing.[43]

Nordic and European studies also show that 60–80 per cent of the food and drink marketing that children and young people encounter is about foods high in fat, salt and/or sugar.[43] At the same time, marketing is switching from traditional channels to digital media.[11, 46] This change has occurred in parallel with an increase in social media use in Sweden over the past decade, a trend that has occurred across all age groups, but especially among young people.[47]

Marketing aimed at children and young people

Marketing aimed at children and young people is often visual and interactive, focusing sharply on creating an emotional connection to the product. Using these strategies, companies seek to create lasting impressions and loyalty among young consumers, which can influence their dietary habits and preferences over the long term.[48, 49] Marketing aimed at children and young people differs in several ways from marketing aimed at adults. Below are six different strategies used to influence the food choices and consumption of children and young people.[50, 51, 52, 53, 54]

Shops that sell food products

Placement of products: Products that appeal to children are placed on shelves at eye level, often at the checkout or other strategic locations in aisles and at aisle ends to encourage impulse purchases.

Packaging design: Colourful packaging featuring cartoon characters, influencers and famous people, as well as toys and trading cards are used to capture the attention of children and young people.

Promotions and offers: Special offers and discounts on products that appeal to children and young people, such as breakfast cereals, snacks and energy drinks.

Public spaces

Outdoor advertising near schools: Signs and posters are strategically placed near schools and playgrounds and at bus stops to reach children and young people on their way to and from school.

Shop windows: Advertisements and products aimed at children and young people are promoted in window displays and on sandwich boards that are easy for them to see as they walk past.

TV and streaming services: Commercials for food are often shown in conjunction with family programming, with a focus on unhealthy food.

Digital media

Social media and apps: Games and apps aimed at children and young people contain advertisements for food products, including in-app rewards linked to purchases.

Influencer marketing: Influencers and kidfluencers on platforms such as YouTube, TikTok and Instagram promote food by showcasing unboxing videos, tastings and challenges.

Interactive campaigns: Websites and apps with games and activities engage children and young people and link to food products/groceries.

Fast food chains

Menus for children and young people: Many restaurants have special menus with toys and meal boxes designed to appeal to children.

Mascots: Chains use famous mascots and cartoon characters in their campaigns and restaurants to create a child-friendly environment.

Birthday parties and events: Many fast-food chains offer birthday packages and events with food, activities and giveaways to attract families.

Packaging

Design and motifs: Packaging featuring popular characters from films, comics and toys is used to make products more attractive to children.

Interactive elements: Packaging can include games, stickers or QR codes that link to web content to engage children.

Collectible promotions: Products that offer trading cards, toys or other items that children can collect and exchange with friends.

Sports sponsorships

Role models and idols: Sports stars and other celebrities often act as role models and idols for children and young people. When these celebrities are associated with specific food products or brands, young fans tend to want to emulate them and favour those products.

Engagement and emotional connection: Sporting events create strong engagement and emotional experiences. By sponsoring these events, brands build a positive association with excitement and fun, which can influence children and young people's attitudes towards their products.

Marketing can influence children's and young people's food-related behaviours in a number of ways, for example what food and drink they prefer and request as well as how much of that food they eat. Marketing thus plays a central role in different parts of the food environment and is used in several parallel ways to influence the consumption of food by children and young people. It is also the case that children and young people are more impressionable than adults.

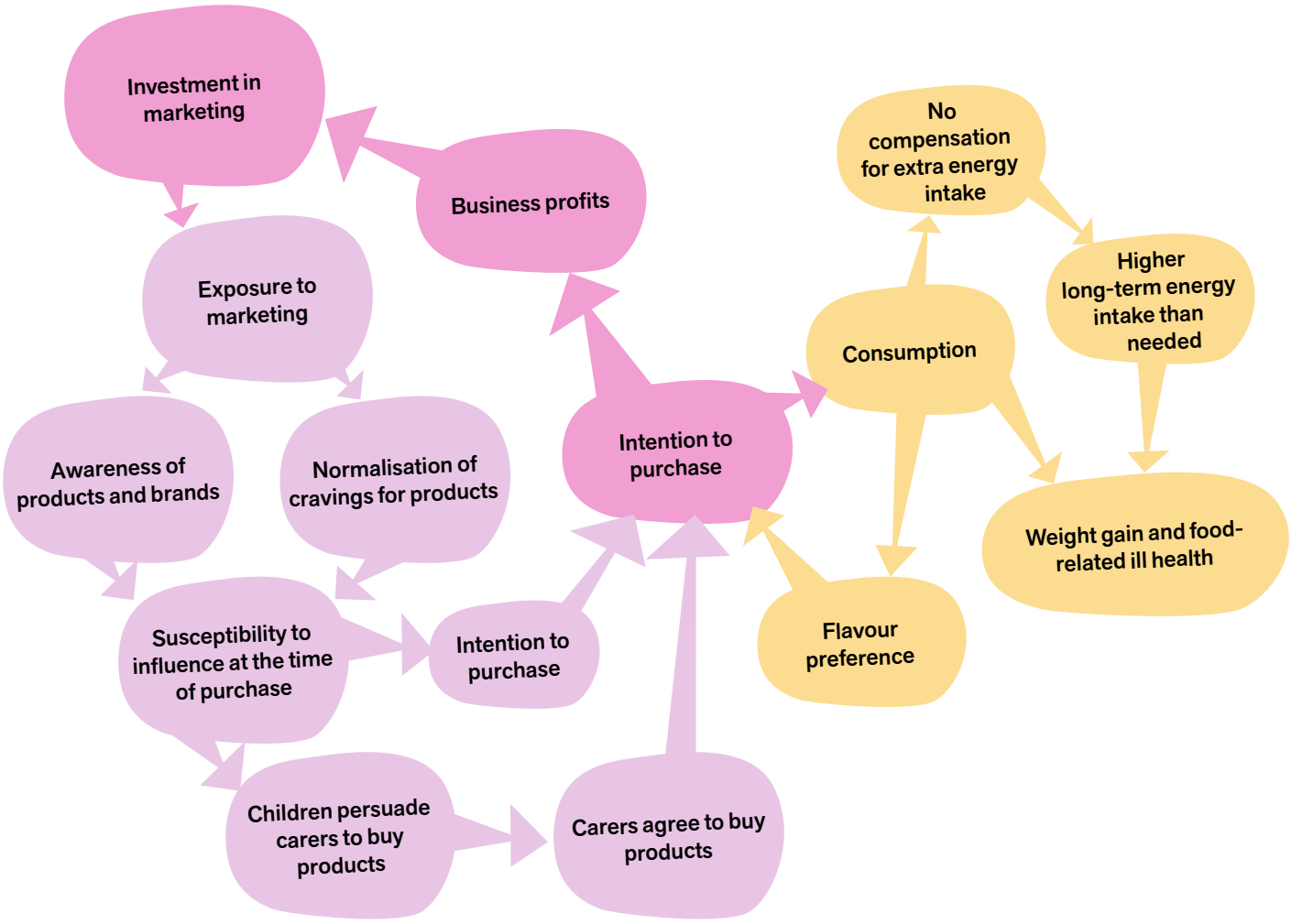
"Marketing convinces children that they need a certain product to be happy."

Why children are particularly vulnerable

- Children's brains are not yet fully developed. As a result, children are more susceptible to influence and find it more difficult to understand the purpose of marketing as compared to adults.
- Children are more susceptible to commercial messages as they do not have the same critical ability as adults to evaluate marketing. They may also have difficulty distinguishing between marketing and programme content.
- With their lack of experience, children are also unable to understand the manipulative techniques used in marketing.
- Marketing convinces children that they need a certain product to be happy or popular. As a result, they are tempted to want to buy the marketed products, sometimes without a real understanding of their own needs or the financial implications.[52]

Why young people are particularly vulnerable

- Socially and developmentally, young people are more sensitive to what is socially acceptable and are more vulnerable to social pressure from their peers.
- Young people are in the process of developing their identities and finding where they fit into social contexts.
- Young people's behaviour is less driven by rational thinking and critical judgement.
- As part of their identity formation, young people are often impulsive and take risks. They seek short-term rewards, as they lack the ability to recognise long-term consequences – such as illness later in life or long-term rewards such as future health.
- Young people are vulnerable to new marketing techniques, such as digital marketing, which is subtle and speaks directly to the emotions and culture of young people.
- Young people have more financial autonomy and more money compared to younger children and make more choices themselves about what they spend their money on.
- Young people are an attractive target group in their role as future customers.[43]



The image illustrates the commercial drivers of marketing and shows how exposure to marketing of energy-dense and nutrient-poor foods to children can ultimately affect food-related health.[77, 78, 71] Public Health Agency of Sweden 2025.[69] Adapted from Kelly et al. 2015 and WHO, 2023.

Effective yet harmful marketing

The promotion of unhealthy food takes place through a variety of media channels and uses sophisticated techniques specifically targeting children and young people. This type of marketing is effective and has a negative impact on various health behaviours of children. There is strong scientific evidence that the marketing of unhealthy food influences children's consumption, food choices and food preferences.[10]

Today, food is marketed through a variety of channels such as the internet, social media, television, cinema advertising and promotional games. Regardless of channel, the impact on children and young

people's food consumption, food choices, preferences and product knowledge is clear.[13, 55, 56, 57, 58, 59, 60, 61] In terms of marketing techniques, cartoon characters have a significant impact on children's food choices and food consumption.[62] Using celebrities, influencers and popular media figures increases children's and young people's consumption of and preferences for the food being marketed.[60, 61, 63, 64] The marketing of food had no effect on healthy lifestyle in adults while children's consumption increased significantly[10]. Social media marketing influences young people's food choices, increases their consumption of unhealthy food and drink, and also significantly strengthens brand recognition as young people remember the unhealthy products after seeing posts on various digital platforms.[60, 61]

Children exposed to marketing in promotional games, known as advergames, have been shown to have an increased calorie intake when compared to children who had not seen the marketing. Marketing thus influences children's food choices and food consumption, even when food is embedded in other entertainment.[58, 59]

Finally, a review of research shows that the marketing of food causes greater activity in the brain areas that affect children's self-control and food cravings in comparison to non-food marketing.[65, 66]

WHAT DO CHILDREN, YOUNG PEOPLE AND PARENTS SAY?

What children think

It is clear children are exposed to marketing of unhealthy food, but how do they perceive it themselves? In 2022, the Swedish Heart Lung Foundation, UNICEF Sweden and Karolinska Institutet presented the report 'In your face – about the food environment of children and their exposure to food advertisements'.[42] Children were invited to reflect on and discuss their experiences of their food environment together.

Participants were surprised by how much marketing of unhealthy food they saw and the different ways they were exposed to it. The report's name 'In your face' comes from the fact that children found that food adverts were constantly in their faces. Before participating in the project, they had not thought about marketing actively, but they realised that they had been surrounded by it, and it had become a natural part of their daily lives. Below are some quotes from the report:

> "It's annoying when there are food advertisements everywhere when you are hungry as well. You walk around and there are food advertisements wherever you look. Then you get even hungrier and feel you have to buy something."
>
> Child, Gävle

> "It's also extra appealing when there's a discount. 2 for 1 and it's cheaper than what it usually is. Then it's extra appealing to buy. If there's a discount."
>
> Child, Gävle

> "I also think how they can attract people with unhealthy food, I mean they mostly have advertisements for unhealthy food, and they don't think about that these people will have it, it will be bad for their health if they eat it, if you eat it too much. They don't think about that."
>
> Child, Stockholm

When asked if there was anything they would like to change in their current food environment and how the food environment could be adapted to facilitate healthy food consumption, some of the responses included:

> "There are two different options here which you could choose between. Either you stop, you reduce the amount of buns and that kind of unhealthy stuff, or you remove these discounts, so that people are simply not tempted as easily. Or like, you create, you do the same thing, but with fruit."
>
> Child, Stockholm

In 2024, UNICEF and the Swedish Heart Lung Foundation invited young people and policymakers to discuss how to create environments that encourage healthier and more sustainable food choices. The initiative is detailed in the report from the meeting, 'Dags att ta plats vid bordet – ungdomar och beslutsfattare möttes om hälsosamma matmiljöer' (Time to take a seat at the table – young people and policymakers met to discuss healthy food environments).[67] Below are quotes from some of the young people who took part:

"You're affected by what you see every day. It's important that it's healthy food. If we constantly see unhealthy food, it affects our choices.."

"Unhealthy is cheaper, for example you can get three 200-gram chocolate bars for the price of a chicken salad."

"Feeling peer pressure from what's in the feeds of TikTok, Instagram, Snapchat, etc. Online celebrities showing that they choose a product, and then I want to do the same thing. For example, someone who is famous on TikTok that I follow and like, drinks Pepsi Max, so I also want to do it."

"There should be more advertising of healthy products to attract children and young people, and unhealthy products should be more expensive."

The dialogue revealed that young people want marketing to be regulated and the price of healthy food to be reduced to make it more appealing and accessible.

"The government could do something about all the advertising of unhealthy food. For example, have the same amount of advertising for healthy and unhealthy food."

What parents and young people think

To capture what parents thought about the situation, the Swedish Heart Lung Foundation commissioned a survey from the opinion and social research company Kantar Sifo in May 2023, involving 1,000 adults with children aged 0–18 years. The responses showed strong support among parents for regulating advertising of unhealthy food that reaches children. In brief, the results showed that:

57

PER CENT

of parents feel that advertising unhealthy food has a negative impact on what their children request or buy.

67

PER CENT

think it would be very good or quite good for Sweden to regulate the type of food that can be marketed in advertisements that reach children and young people.

68

PER CENT

think it would be very good or quite good for Sweden to regulate advertising of unhealthy food that reaches children and young people in social media and other digital channels through legislation.

In autumn 2024, the Swedish Cancer Society, with the help of Novus, conducted a qualitative survey of parents with children aged 3–12 and young adults aged 16–25. The survey was conducted in the form of focus groups to understand the target group's attitudes and opinions on various aspects of the food environment, such as price, marketing and the food on offer.

Parents report a strong norm that children should eat a varied diet according to the plate model and avoid unhealthy alternatives such as processed and sugary foods. However, despite the will and intent to feed their children healthy food on a daily basis, parents do not always succeed in doing so, which gives rise to stress and guilt. Some say that it is easier to eat healthily themselves than to get their children to do so.

In addition to the challenges of making daily life work for their family and preparing healthy food that children enjoy, parents also face other obstacles. These include social media trends, peer pressure from friends and food-themed days, which frequently focus on unhealthy food.

It was clear from the interviews that TikTok, YouTube and other platforms play a major role in shaping the dietary habits and preferences of children. Several parents emphasised how difficult it is to prevent children from being influenced by the content.

Parents are critical of food marketing aimed at children. Many feel the advertising shown during family programmes on TV and on platforms such as YouTube Kids mainly features unhealthy products such as sweets and soft drinks, which they see as a problem. They see commercial enterprises as having a strong influence on children and young people through their marketing, as young people are particularly susceptible to influence. Several also criticise the use of children in advertising, especially for unhealthy products, and consider such inclusion unnecessary. Many felt companies have a responsibility for how they market and sell products to children and young people. However, some were sceptical about companies taking responsibility for children's health themselves, as they are primarily driven by profit. Therefore, rules on marketing should instead be tightened through legislation.

Young people are also critical of the marketing of unhealthy food and report that a lot of advertising is about unhealthy products such as fast food, crisps and energy drinks.

Young people feel these advertising campaigns create a craving for unhealthy food. The advertisements are often distributed via social media platforms such as TikTok and Instagram, which means that they reach children and young people in particular.

However, they do state that the advertisements are not perceived as being aimed solely at children and young people, but rather at a broader target group. Although they belong to the target group, they do not perceive the marketing as aimed at them specifically.

"I've had a lot of adverts from like McDonald's, Burger King and Max, where they present the food in a way where they try to seem 'relatable' and like you have to try their new burger because it's a 'challenge.'"

"You feel like a small piece on a big board in a game you don't realise you're a part of."

CURRENT REGULATIONS AND POLICY DOCUMENTS

Examining opportunities to regulate the marketing of unhealthy food to children requires a thorough review of the laws, regulations and policies in this arena.

The UNCRC recognises the rights of all children

On 1 January 2020, the UN Convention on the Rights of the Child (Articles 1–42) was enacted in Swedish law (2018:1197). The Convention on the Rights of the Child sets out the rights of all children in the world, which means that all children aged 0–18 living or staying in Sweden have the same rights. All children, regardless of their background, have the right to the highest attainable standard of health, and society has a duty to fulfil this right. The Convention on the Rights of the Child should be viewed as a whole. Articles 2, 3, 6 and 12 are the four general principles on which all other articles of the Convention are based.

Article 2: All children have the same rights and equal value. All children are entitled to all the rights set out in the Convention on the Rights of the Child, regardless of the child's or carer's background. This means that no child should be discriminated against.

Article 3: The best interests of the child must be taken into account in all actions and decisions concerning children. The best interests of the child are the cornerstone of the Convention on the Rights of the Child and must always be taken into account in decisions and actions concerning children. What is in the best interests of the child is decided on a case-by-case basis, taking into account the child's own views and experience.

Article 6: All children have the right to life, survival and development. The child's development should be considered from a holistic perspective. It is not only about the child's physical health, but also about mental health and social development.

Article 12: All children have the right to express their opinion, to be heard. All children who are able to form their own opinions are entitled to a voice and the opportunity to express it on issues that concern them. When considering a child's opinions, the age and maturity of the child should be taken into account.

Other relevant articles include

Article 24: All children have the right to the highest attainable standard of health. All children have the right to the highest attainable standard of health. This means that all children have the right to physical, mental and social well-being and the right to grow and develop in conditions that promote their health. This includes the right to nutritious and healthy food.

Article 17: All children have the right to information, but should also be protected from harmful information. All children have the right to information from sources such as newspapers, the internet and television, especially information that promotes their health and development. At the same time, children have the right to be protected from information that is harmful to them.

Public health policy objectives

Sweden has an overarching public health policy goal: to create societal conditions for good and equitable health throughout the population and to close the avoidable health gaps that exist within a generation. To achieve the objectives, there are eight key target areas. The two target areas most clearly linked to this child rights assessment are target area 1, 'Early life' and target area 6, 'Healthy lifestyle'.

"To achieve good and equitable health, it is important to improve people's opportunities to act."

The first target area focuses on good living conditions and opportunities early in life as important prerequisites for good and equitable health. Creating, supporting and reinforcing a good start in life is essential for all children to have the basic conditions to develop cognitive, emotional, social and physical abilities.

When it comes to healthy lifestyle, these have a major impact on health. To achieve good and equitable health, it is important to improve people's opportunities to act and to lead a healthy life. Key focus areas are firstly, limiting access to harmful products; secondly, increasing access to healthy products, environments and activities; and thirdly, strengthening welfare organisations' health promotion and preventive efforts regarding healthy lifestyle.[68]

Targets for sustainable and healthy food consumption

The Public Health Agency of Sweden and the Swedish Food Agency were jointly commissioned by the Swedish Government to develop goals, indicators and action areas for sustainable and healthy food consumption. In February 2024, they reported back, proposing two targets to be achieved by 2035: food consumption will have contributed to better and more equitable health, ecosystems will have increased and the negative impact of food consumption on climate, biodiversity and ecosystems will have decreased.[3]

In February 2025, the Public Health Agency of Sweden and the Swedish Food Agency also reported on a government commission to improve food consumption among children and young people, particularly focusing on socio-economic disparities. Following the government commission that reported its findings in 2024, this latest commission highlights five specific actions to promote sustainable and healthy food consumption among children and young people. The first of five measures proposed to be of relevance for this child rights impact assessment:

- Investigate the prerequisites for restricting the marketing of unhealthy foods to which children and young people are exposed in order to reduce consumption[69].

Two relevant goals from the 2030 Agenda

In September 2015, the UN General Assembly adopted the 2030 Agenda, which includes 17 Sustainable Development Goals and 169 associated targets. The 2030 Agenda aims to promote socially, environmentally and economically sustainable development by 2030. Each country's government is responsible for implementing and following up on the 2030 Agenda.[70] The goals most relevant to the current assessment are Goal 2, Zero hunger, and Goal 3, Good health and well-being.

Goal 2. Zero hunger – Target 2.1

By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round.[71]

"Target 2.1 refers to access by all people to safe and nutritious food."

Goal 3. Good health and well-being – Target 3.4

By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.[72]

"Target 3.4 aims to reduce mortality from non-communicable diseases."

LEGAL ANALYSIS OF CURRENT SWEDISH REGULATIONS RELATED TO MARKETING

Swedish legislation to protect children from marketing has not kept pace with social developments. Nor has the legislation been reviewed with reference to the Convention on the Rights of the Child.

In connection with this child rights assessment, the law firm Advokatfirman MarLaw AB was commissioned to document which marketing law provisions would be applicable to the Swedish market under Swedish law. The assignment included addressing the marketing of unhealthy food aimed at children and young people from a legal perspective, including both physical and digital marketing. The analysis was based on the definition of marketing contained in the Swedish Marketing Act.

The following laws and regulations were found relevant:

- The UN Convention on the Rights of the Child, incorporated into Swedish law by the Act (2018:1197) on the United Nations Convention on the Rights of the Child
- Swedish Marketing Act (2008:487, MFL)
- Regulation [EU] 2016/679 (General Data Protection Regulation/GDPR)
- Swedish Radio and Television Act (2010:696, RTL)
- International Chamber of Commerce (ICC) rules on advertising and marketing communications
- ICC Framework for Responsible Food and Beverage Marketing Communications
- Regulation (EU) 2022/2065 (Digital Services Act/DSA) as well as specialised regulation and the legal conditions for children to enter contracts.
- The report adds case law at both the national and EU level.

The principle of considering children as a group worthy of special protection in marketing is evident from the preparatory work for the Swedish Marketing Act, the ICC's rules on advertising and marketing communications, the GDPR and court rulings. The assessment of marketing aimed at children must now also take into account the Convention on the Rights of the Child, with a focus on the best interests of the child. This approach requires protecting children from marketing that may be harmful or otherwise negatively affect them, protecting children's privacy and clarifying for children and young people what constitutes marketing. No assessment of marketing in light of the CRC has yet been made in the application of Swedish law.

All the regulations mentioned above provide general protection for children in marketing. As it stands today, Swedish legislation lacks specific protective legislation regarding the marketing of unhealthy food to children and young people. However, the ICC Framework for Responsible Food and Beverage Marketing Communications provides some guidance on interpreting the ICC rules on advertising and marketing communications, as well as restrictions on the marketing of alcohol and tobacco-free nicotine products to persons under 25 years of age.

The law firm's analysis concludes that it could be possible to regulate the marketing of unhealthy food aimed at children. To implement such a ban, it must be justified on health grounds and be in line with EU law.

So far, the CRC has not been implemented in Swedish marketing law, but theoretically it could be. The law firm's analysis is in line with an analysis conducted by the Swedish Agency for Public Management in 2019.[73]

ANALYSING THE BEST INTERESTS OF THE CHILD

"Access to nutritious and healthy food is a prerequisite for development and well-being"

The summary of the current state of knowledge shows that children and young people are exposed to marketing of unhealthy food in their everyday lives, in both physical and digital food environments. At the same time, research shows that children are particularly sensitive to the influence of marketing as their brains are not fully developed. As a result, they also find it more difficult to understand the purpose of marketing and to think critically. This in turn leads to both an increased demand for and a normalisation of unhealthy food. In addition, research shows that the promotion of unhealthy food increases the consumption of such food. For children and young people, this can mean an increased risk of food-related ill health in both the short and long term. The evidence summarised in this child rights impact assessment clearly shows that children today are not getting enough of the food they need to thrive and develop. At the same time, high consumption of unhealthy food itself can lead to overweight and obesity and increase the risk of earlier onset of several major diseases. Early in children's lives, there are also disparities due to socio-economic factors, as children of less-educated parents eat less well than children of parents with more education.

From a child rights perspective, this is serious in several ways. All children have the right to life, survival and development according to the basic principle of Article 6 of the Convention on the Rights of the Child, and the right to the highest attainable standard of health under Article 24. Access to nutritious and healthy food is a basic prerequisite for development and well-being, which, under the articles above, is a human right for all children in Sweden.

The food environment in which children in Sweden currently find themselves, together with the widespread and sophisticated marketing they are exposed to on a daily basis, jeopardises these rights as children are influenced to eat more food that fails to promote their health; on the contrary it risks having harmful effects. At the same time, unhealthy food is taking the place of the healthy and nutritious options that would promote children's health. This is despite the fact that all children have the right to both physical and financial access to nutritious food.

From a children's rights perspective, it is also serious to note inequities in the way children and young people eat that are linked to the socio-economic situation of their family. This inequity means that children growing up under more difficult conditions are also at greater risk of ill health and negative development.

According to the basic principle of Article 2 of the CRC, no child should be discriminated against and all children have the right to all articles of the CRC. Unequal access to nutritious food for children from different socio-economic backgrounds is therefore a serious concern from a child rights perspective, as it violates the principle that no child should be discriminated against. Parents' differing knowledge, capacity, economic opportunities or interests should not penalise the child; all children have the right to the highest attainable standard of health and development. Therefore, action is needed to support all children and parents, not least those who are most vulnerable. Harmful food environments and the marketing of unhealthy food not only hinder children's right to nutritious food; they also make it difficult for parents to fulfil their parental responsibilities under the CRC.

The UN Committee on the Rights of the Child, in its General Comments on Article 24, emphasises that the prevention of non-communicable diseases should start as early as possible in children's lives, for example by promoting healthy lifestyles among young children. The Committee also emphasises that States should work to reduce overweight and obesity among children and young people, and that children's exposure to unhealthy food should be limited. Finally, they emphasise that the marketing of such food should be regulated, especially marketing aimed at children, as well as the availability of such products in schools and other places where children and young people spend time[76].

"The UN Committee on the Rights of the Child emphasises that countries should work to limit children's exposure to unhealthy food."

The summary of the state of knowledge in this child rights impact assessment clearly shows that the marketing of unhealthy food is present in children's everyday lives, including in Sweden. At the same time, unhealthy food is easily accessible and visible to children and young people in the vicinity of schools and during leisure time. From a children's rights perspective, this is serious as it is also recognised that children are particularly sensitive to marketing, and that marketing of unhealthy food increases the consumption of such food.

Article 17 of the CRC states that children have the right to information from the media while being protected from harmful information. In this context, the UN Committee on the Rights of the Child emphasises that the responsibilities of the mass media and social media in relation to health can be expanded, and that the media could work more to both support health-promoting information and limit material that is harmful to children's health.[74]

The UN Committee on the Rights of the Child has also produced a General Comment on the rights of the child in the digital environment. This emphasises the importance of considering the best interests of the child in relation to the digital environment, an environment that was not created for children but has a major impact on their lives. It also emphasises that use should not be harmful and that it is important to consider the impact of digital media use on children's health and development.

The UN Committee on the Rights of the Child's General Comment emphasises that States Parties should prioritise the best interests of the child when regulating marketing addressed to and accessible to children. State Parties should also regulate age-inappropriate advertising, marketing and other relevant digital services to prevent children's exposure to the promotion of unhealthy products, including certain food and beverages.[75]

Based on current knowledge, the digital environment, just like the physical one, is dominated by advertising for unhealthy food. Today's digital environment therefore risks jeopardising children's health and violating their human rights under Article 17, Article 6 and Article 24.

According to the UN Committee on the Rights of the Child, it is the States' obligation to ensure that business does not negatively impact on children's rights and health. Marketing must not have a negative impact on children's rights, and it is the duty of States to ensure this and to put in place appropriate regulations. It also mentions the marketing of unhealthy foods and drinks high in saturated fats, trans fats, sugars, salt or additives as potentially having a long-term impact on children's health.[14]

According to the basic principle of Article 12 of the CRC, children should always have the right to be heard and express their views on issues and decisions affecting them. In this child rights impact

assessment, children's views have been obtained from previous surveys and interviews with children. It is clear that the children surveyed feel negatively affected by the marketing of unhealthy food to which they are exposed, and they are clearly in favour of regulating the marketing of unhealthy food. Parents surveyed also feel that both they and their children are negatively affected by the marketing of unhealthy food, despite parents' basic knowledge and willingness to buy and offer their children healthy food. Parents, like children, are in favour of regulating unhealthy food. In an assessment of the best interests of the child, it is important that children's views are taken into account.

There is support for regulating the marketing of unhealthy foods that reach children and adolescents in both the Convention on the Rights of the Child and the General Comments of the UN Committee on the Rights of the Child.

Under Article 3 (1) of the CRC, in all actions concerning children, signatory countries should give primary consideration to the best interests of the child. This principle should guide governments and government agencies when considering legislation or decisions affecting children. Furthermore, signatories to the CRC must take all necessary, appropriate and reasonable measures to prevent business enterprises from causing or contributing to abuses of children's rights. This may involve them enacting and upholding laws and regulations, as well as developing policies that clearly define how businesses should act to protect the rights of children.[14] According to the UN Committee on the Rights of the Child, a CRC signatory country that does not respect, protect and ensure the rights of children in connection with business activities is in breach of its obligations.[14]

Since 2020, the Convention on the Rights of the Child has been Swedish law and, under Article 3, the best interests of the child must always be taken into account. Based on this review of the current state of knowledge, we know that:

- The majority of food marketing that children and young people encounter in their daily lives features unhealthy food
- The marketing of unhealthy food influences children's food consumption, choices and preferences
- Children are particularly sensitive to marketing
- The majority of children and young people do not eat enough of what they need for their well-being, and many consume too much of what they don't need, increasing the risk of ill health in both the short and long term
- An increasing number of children and young people are overweight or obese, which increases the risk of physical and mental health problems

The Convention on the Rights of the Child is clear that:

- States Parties have a duty to work to promote children's health and development and reduce the risk of disease
- All children have the right to access to nutritious and healthy food
- States Parties should work to reduce overweight and obesity
- Countries should regulate advertising and marketing that may be harmful to children
- States Parties should regulate advertising of unhealthy food and drink and restrict the availability of unhealthy food

- States Parties should give primary consideration to the best interests of the child in all actions concerning children
- Signatories to the CRC must take all necessary, appropriate and reasonable measures to prevent business enterprises from causing or contributing to abuses of children's rights

In addition, the legal review in this child rights impact assessment shows it is entirely possible to regulate the marketing of unhealthy food aimed at children in Sweden, provided it can be justified on health grounds and is in line with EU legislation.

This assessment does not take into account any interests other than those relating to the best interests of the child.

RECOMMENDATIONS FOR THE BEST INTERESTS OF THE CHILD

The overall determination of this child rights impact assessment is that the marketing of unhealthy food permitted in Sweden does not take into account the best interests of the child, with commercial interests outweighing these interests.

To uphold children's rights as set out in the Convention on the Rights of the Child, Sweden must impose regulations to limit their exposure to the marketing of unhealthy food that risks damaging their health in the short and long term.

Protecting children requires expanding the scope of current media and marketing legislation, which remains inadequate.

Our recommendations for the best interests of the child are:

- Marketing of unhealthy food to which children are exposed should be regulated.
- The regulation should protect all children up to the age of 18.
- The regulation should be mandatory.
- The regulation should cover all types of marketing techniques*, channels** and platforms.
- The regulation should cover all marketing to which children are exposed and not just marketing directly targeting children.
- A national nutrition profile should be developed to define what constitutes unhealthy food.[76] ***
- The legislation should be implemented, monitored and followed up on.
- Children and young people should be involved in the preparatory work of regulation.

These evidence-based recommendations are supported by the WHO, which has come to similar conclusions regarding which efforts can limit the marketing of unhealthy food to which children are exposed.[78]

---

* Examples of techniques include the use of cartoons, celebrities/influencers, mascots, branding, packaging, product placement, sponsorship and other techniques to which children are exposed.

** It should include a wide range of media channels where marketing is present both physically and digitally such as TV, films, advertising, billboards, outdoor marketing, social media and advergames.

*** The WHO has created a nutrition profile to identify unhealthy food. Based on scientific guidelines and recommendations, it is designed to support policy work on the marketing of unhealthy food to children[78].

Thank you

This child rights impact assessment was produced by the Swedish Cancer Society, Generation Pep and the Swedish Heart Lung Foundation.

We would also like to thank our external reference group of experts from relevant organisations who provided valuable input and knowledge in the preparation of this report:

- Public Health Agency of Sweden
- Swedish Food Agency
- UNICEF Sweden
- Obesitas Sverige
- Uppsala University
- Swedish Association of Local Authorities and Regions
- Swedish Paediatric Society
- Svenska Skolläkarföreningen (Swedish school doctors' association)
- Swedish Association of Registered Dietitians

For questions about the report, please contact:
Anette Jansson anette.jansson@hjart-lungfonden.se,
Lydia Ersberg lydia@generationpep.se
Maiju Wetterhall maiju.wetterhall@cancerfonden.se

REFERENCES

1 World Health Organization. 'A framework for implementing the set of recommendations on the marketing of foods and non-alcoholic beverages to children'. Geneva: World Health Organization; 2012.

2 Statens offentliga utredningar (Swedish Government Official Reports). 'Nästa steg på vägen mot en mer jämlik hälsa' (The next step on the road to more equitable health). 'Förslag för ett långsiktigt arbete för en god och jämlik hälsa' (Proposals for a long-term approach to good and equitable health). 'Slutbetänkande av Kommissionen för jämlik hälsa' (Final report of the Commission for Equal Health). Stockholm: 'Statens offentliga utredningar' (Swedish Government Official Reports); 2017. SOU 2017:47.

3 Public Health Agency of Sweden. 'En hållbar och hälsosam livsmedelskonsumtion' (A sustainable and healthy food consumption). Report on government assignments, including appendices. Stockholm: Public Health Agency of Sweden; 2024.

4 Annwall E, Ersberg L, J-son Höök M. 'Pep-rapporten 2024' (The Pep report 2024): 'Ekonomisk ojämlikhet bidrar till barnens hälsoklyfta' (Economic inequality contributes to the child health gap). Sweden: Generation Pep; 2024.

5 Swedish Heart Lung Foundation. 'Preventionsrapporten 2024' (Prevention Report 2024). Stockholm: Swedish Heart Lung Foundation, 2024.

6 'Andersson E, Nilsson K, Persson S, Fridhammar A. 'Kopplingen mellan påverkbara riskfaktorer och cancer i Sverige – Totalt och uppdelat efter utbildningsnivå' (The association between modifiable risk factors and cancer in Sweden – Total and by level of education). Lund: Swedish Institute for Health Economics (IHE); 2023.

7 Institute for Health Metrics and Evaluation (IHME). 'Global Burden of Disease 2021: Findings from the GBD 2021 Study'. Seattle, WA: IHME; 2024 [cited 11.11.2024]. Retrieved from: https://www.healthdata.org/research-analysis/library/global-bur- den-disease-2021-findings-gbd-2021-study

8 World Health Organization. 'Obesity and overweight' [Internet]. Geneva: World Health Organization; 2024. [cited 11-11-2024]. Retrieved from: https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight#:~:text=The%20prevalence%20of%20overweight%20(including,21%25%20of%20boys%20were%20overweight

9 Boyland E, McGale L, Maden M, Hounsome J, Boland A, Angus K, et al. 'Association of food and nonalcoholic beverage marketing with children and adolescents' eating behaviours and health: a systematic review and meta-analysis'. JAMA Pediatr. 2022 Jul 1;176(7):e221037.

10 World Health Organization. 'Policies to protect children from the harmful impact of food marketing'. WHO guideline. Geneva: World Health Organization; 2023.

11 World Health Organization. 'Report of the commission on ending childhood obesity. Implementation plan: executive summary'. Geneva: World Health Organization; 2017.

12 UNICEF. Convention on the Rights of the Child [Internet]. Stockholm: UNICEF; 2024 [cited 18.11.2024]. Retrieved from: https://www.unicef.org/child-rights-convention..

13 UNICEF. 'Barnkonventionens ställning i Sverige' (The status of the Convention on the Rights of the Child in Sweden) [Internet]. Stockholm: UNICEF; 2024 [cited 11.11.2024]. Retrieved from: https://unicef.se/barnkonventionen/barnkonventionens-stallning-i-sverige

14 UN Committee on the Rights of the Child. 'Committee on the Rights of the Child General Comment No. 16 (2013) on State obligations regarding the impact of the business sector on the children's rights'. UN Committee on the Rights of the Child; 2014.

15 United Nations Convention on the Rights of the Child (SFS 2018:1197). Stockholm: Ministry of Health and Social Affairs.

16 Ventura AK, Worobey J. 'Early influences on the development of food preferences'. Curr Biol. 2013;23(9):R401-408.

17 Craigie AM, Lake AA, Kelly SA, Adamson AJ, Mathers JC. 'Tracking of obesity-related behaviours from childhood to adulthood: A systematic review.' Maturitas. 2011 Nov;70(3):266-84. doi: 10.1016/j.maturitas.2011.08.005. Epub 2011 Sep 15. PMID: 21920682.

18 Nordic Council of Ministers. 'Nordic Nutrition Recommendations 2023: integrating nutrition and physical activity.' 6th ed. Copenhagen: Nordic Council of Ministers; 2023. ISBN 978-92-893-7030-1.

19 Johansson U, Lindberg K, Öhlund I, Hernell O, Lönnerdal B, Lundén S, et al. 'Acceptance of a Nordic, Protein-Reduced Diet for Young Children during Complementary Feeding – A Randomised Controlled Trial'. Foods. 2021;10(2):275.

20 World Health Organization. 'Global strategy on diet, physical activity and health.' Geneva: World Health Organization; 2018.

21 Seow WK. 'Early childhood caries'. Pediatr Clin North Am. 2018;65(5):941-954.

22 Kjellberg E, Roswall J, Bergman S, Almquist-Tangen G, Alm B, Dahlgren J. 'Longitudinal birth cohort study found that a significant proportion of children had abnormal metabolic profiles and insulin resistance at 6 years of age'. Acta Paediatr. 2019;108(3):486-492.

23 Laitinen TT, Pahkala K, Magnussen CG, Viikari JSA, Oikonen M, Taittonen L, et al. 'Ideal cardiovascular health in childhood and cardiometabolic outcomes in adulthood: the Cardiovascular Risk in Young Finns Study'. Circulation. 2012;125:1971-1978.

24 Swedish Food Agency. Moraeus L, Bjermo H, Petrelius Sipinen J, Patterson E, Larsson E, Stenberg K, Lindroos A K. 2024. L 2024 No 12: 'Riksmaten young children 2021-24 – What do small children in Sweden eat?' Swedish Food Agency report series. Uppsala.

25 Swedish Food Agency. 'Riksmaten Adolescents 2016-17'. 'Så äter ungdomar i Sverige' (How young people eat in Sweden). 'Del 1 Livsmedelskonsumtion bland ungdomar i åk 5, åk 8 och åk 2 på gymnasiet' (Part 1 Food consumption among young people in years seven and ten of secondary school and upper sixth form). Uppsala: Swedish Food Agency, 2018.

26 Swedish Food Agency. 'The Swedish Dietary Guidelines. Find your way. Eat greener, not too much and be active'. Uppsala: Swedish Food Agency; 2022.

27 Swedish Food Agency. Mattisen, I. 2016. L 2016 No 09: 'Socioekonomiska skillnader i matvanor i Sverige' (Socioeconomic differences in dietary habits in Sweden). Swedish Food Agency report series. Uppsala

28 Swedish Food Agency. Patterson E, Lindroos AK. 2024. L 2024 No 02: 'How much, when and where do adolescents consume foods that are energy-dense, nutrient poor?' Swedish Food Agency report series. Uppsala.

29 Bergström G, Rosengren A, Bacsovics Brolin E, Brandberg J, Cederlund K, Engström G, et al. 'Body weight at age 20 and in midlife is more important than weight gain for coronary atherosclerosis: Results from SCAPIS'. Atherosclerosis. 2023;373:46-54. doi:10.1016/j.atherosclerosis.2023.01.024.

30 Recalde M, Pistillo A, Davila-Batista V, Leitzmann M, Romieu I, Viallon V, et al. 'Longitudinal body mass index and cancer risk: a cohort study of 2.6 million Catalan adults'. Nat Commun. 2023;14(1):3816.

31 Ugai T, Sasamoto N, Lee H-Y, Ando M, Song M, Tamimi RM, et al. 'Is early-onset cancer an emerging global epidemic? Current evidence and future implications'. Nat Rev Clin Oncol. 2022;19(10):656-73.

32 Zhao J, Xu L, Sun J, Song M, Wang L, Yuan S, et al. 'Global trends in incidence, death, burden and risk factors of early-onset cancer from 1990 to 2019'. BMJ Oncol. v2023;2(1):e000049. doi:10.1136/bmjonc-2023-000049.

33 Swedish Diabetes Association. 'Typ 2 diabetes hos barn och unga' (Type 2 diabetes in children and adolescents) [Internet]. Stockholm: Swedish Diabetes Association; 2022 [cited 06.06.2024]. Retrieved from: 33https://www.diabetes.se/ungdiabetes/diabetes/typ-2-diabetes-hos-barn-och-unga/

34 Kjellberg E, Roswall J, Bergman S, Almquist-Tangen G, Alm B, Dahlgren J. 'Longitudinal birth cohort study found that a significant proportion of children had abnormal metabolic profiles and insulin resistance at 6 years of age.' Acta Paediatr. 2019;108(3):486-92. doi:10.1111/apa.14599.

35Public Health Agency of Sweden. 'Övervikt och fetma' (Overweight and obesity) [Internet]. Stockholm: Public Health Agency of Sweden; 2024 [cited 2024-10-07]. Retrieved from: https://www.folkhalsomyndigheten.se/livsvillkor-levnadsvanor/mat-fysisk-aktivitet-overvikt-och-obesitas/overvikt-och-obesitas/#%20:~:text=%C3%96vervikt%20och%20fetma%20%C3%B6kar%20risken,den%20fysiska%20och%20psykiska%20h%C3%A4lsan.

36 Nilsson K, Fridhammar A, Wahlberg K, Carlsson Steen K. 'The economic burden of overweight and obesity in children – a lifetime perspective'. IHE; 2022.

37 World Health Organization. 'Food marketing exposure and power and their associations with food-related attitudes, beliefs, and behaviours: a narrative review'. World Health Organization; 2022.

38 Finlay A, Robinson E, Jones A, Maden M, Cerny C, Muc M, et al. 'A scoping review of outdoor food marketing: exposure, power and impacts on eating behaviour and health'. BMC Public Health. 2022;22:1431. doi:10.1186/s12889-022-13784-8

39 Fagerberg P, Langlet B, Oravsky A, Sandborg J, Löf M, Ioakimidis I. 'Ultra-processed food advertisements dominate the food advertising landscape in two Stockholm areas with low vs high socioeconomic status. Is it time for regulatory action?' BMC Public Health. 2019;19(1717).

40 Spires M, Berggreen-Clausen A, Kasujja FX, Delobelle P, Puoane T, Sanders D, et al. 'Snapshots of urban and rural food environments: EPOCH-based mapping in a high-, middle-, and low-income country from a non-communicable disease perspective'. Nutrients. 2020;12(2):484.

41 Swedish Food Agency, Quetel A-K, Grausne J. 'Matutbudet i ungdomars vardag' (The food supply in young people's everyday lives). Uppsala: Swedish Food Agency; 2021.

42 Fagerberg P, Ioakimidis I, Löf M, Spolander S. 'In your face – about children's food environment and exposure to food advertisements'. Stockholm: Swedish Heart Lung Foundation, Karolinska Institutet, UNICEF; 2022.

43 Hjerteforeningen. 'Digitalt influeret' (Digitally influenced). Copenhagen: Hjerteforeningen; 2023.

44 Questionmark Foundation. 'Swedish supermarkets and the promotion of unhealthy food'. Superlist Sweden health 2022. Questionmark Foundation; 2022.

45 Public Health England. 'An analysis of the role of price promotions on the household purchases of food and drinks high in sugar, and purchases of food and drinks for out of home consumption: A research project for Public Health England conducted by Kantar Worldpanel UK'. Public Health England; 2020.

46 World Health Organization. 'Restricting digital marketing in the context of tobacco, alcohol, food and beverages, and breast-milk substitutes: Existing approaches and policy options'. World Health Organization; 2023. ISBN: 978-92-4-007724-9

47 Swedish Internet Foundation. 'The Swedes and the Internet'. Swedish Internet Foundation, 2024.

48 Kelly B, Vandevijvere S, NG S, Adams J, Allemandi L, Bahena-Espina L, et al. 'Global benchmarking of children's exposure to television advertising of unhealthy foods and beverages across 22 countries'. Obes Rev. 2019;20(Suppl 2):116-28.

49 Matos JP, Rodrigues MB, Duarte CK, Horta PM. 'A scoping review of observational studies on food and beverage advertising on social media: A public health perspective'. Int J Environ Res Public Health. 2023;20(4). doi:10.3390/ijerph20043321

50 World Health Organization. 'Set of recommendations on the marketing of foods and non-alcoholic beverages to children.' World Health Organization; 2010.

51 Cairns G, Angus K, Hastings G, World Health Organization. 'The extent, nature and effects of food promotion to children: a review of the evidence to December 2008'. Geneva: World Health Organization; 2009. ISBN: 9789241598835.

52 Nordic Council of Ministers. 'Monitoring food marketing to children'. Copenhagen: Nordic Council of Ministers; 2018.

53 American Psychological Association. The impact of food advertising on childhood obesity. Washington, DC: American Psychological Association; 2010.

54 Public Health England. 'Sugar reduction: The evidence for action'. Public Health England; 2015.

55 Boyland E, McGale L, Maden M, Hounsome J, Boland A, Angus K, et al. 'Association of food and nonalcoholic beverage marketing with children and adolescents' eating behaviours and health: A Systematic Review and Meta-analysis'. JAMA Pediatr. 2022;176(7):221037. doi:10.1001/jamapediatrics.2022.1037

56 Boyland EJ, Nolan S, Kelly B, Tudur-Smith C, Jones A, Halford JC, et al. 'Advertising as a cue to consume: A systematic review and meta-analysis of the effects of acute exposure to unhealthy food and nonalcoholic beverage advertising on intake in children and adults'. Am J Clin Nutr. 2016;103(2):519-33. doi:10.3945/ajcn.115.120022

57 Sadeghirad B, Duhaney T, Motaghipisheh S, Campbell NR, Johnston BC. 'Influence of unhealthy food and beverage marketing on children's dietary intake and preference: A systematic review and meta-analysis of randomized trials'. Obes Rev. 2016;17(10):945-59. doi:10.1111/obr.12445

58 Russell SJ, Croker H, Viner RM. 'The effect of screen advertising on children's dietary intake: A Systematic Review and Meta-analysis'. Obes Rev. 2019;20(4):554-68. doi:10.1111/obr.12812

59 Villegas-Navas V, Montero-Simo MJ, Araque-Padilla RA. 'The effects of foods embedded in entertainment media on children's food choices and food intake: A systematic review and meta-analyses'. Nutrients. 2020;12(4). doi:10.3390/nu12040964

60 Kucharczuk AJ, Oliver TL, Dowdell EB. 'Social media's influence on adolescents' food choices: A mixed studies systematic literature review'. Appetite. 2022;168:105765. doi:10.1016/j.appet.2021.105765

61 McCarthy CM, de Vries R, Mackenbach JD. 'The influence of unhealthy food and beverage marketing through social media and advergaming on diet-related outcomes in children – A systematic review'. Obes Rev. 2022;23(6):13441. doi:10.1111/obr.13441

62 Arraztio-Cordoba A, Araque-Padilla R, Montero-Simo MJ, Olarte-Sanchez CM. 'The effect of food packaging elements on children's food choices and intake: A systematic review.' Front Nutr. 2022;9:998285. doi:10.3389/fnut.2022.998285

63 Packer J, Russell SJ, Siovolgyi G, McLaren K, Stansfield C, Viner RM, et al. 'The impact on dietary outcomes of celebrities and influencers in marketing unhealthy foods to children: A Systematic Review and Meta-analysis'. Nutrients. 2022;14(3). doi:10.3390/nu14030434

64 Kraak VI, Story M. 'Influence of food companies' brand mascots and entertainment companies' cartoon media characters on children's diet and health: a systematic review and research needs'. Obes Rev. 2015;16(2):107-26. doi:10.1111/obr.12237

65 Yeung AWK. 'Brain responses to watching food commercials compared with nonfood commercials: a meta-analysis on neuro-imaging studies'. Public Health Nutr. 2021 Jun;24(8):2153-60. doi:10.1017/S1368980020003122

66 Boyland E, Maden M, Coates E, Masterson TD, Alblas MC, Bruce AS, et al. 'Food and non-alcoholic beverage marketing in children and adults: A systematic review and activation likelihood estimation meta-analysis of functional magnetic resonance imaging studies'. Obes Rev. 2023. doi:10.1111/obr.13643

67 Swedish Heart Lung Foundation and UNICEF. Report on the dialogue. 'Dags att ta plats vid bordet- ungdomar och beslutsfattare möttes om hälsosamma matmiljöer' (Time to take a seat at the table – young people and policymakers meet on healthy food environments). Swedish Heart Lung Foundation and UNICEF, 2024.

68Public Health Agency of Sweden. 'Nationella folkhälsomål och målområden' (National public health objectives and target areas) [Internet]. Stockholm: Public Health Agency of Sweden; 2024 [cited 2024-05-13]. Retrieved from: https://www.folkhalsomyndigheten.se/om-folkhalsa-och-folkhalsoarbete/tema-folkhalsa/vad-styr-folkhalsopolitiken/nationella-mal-och-malomraden/

69 Public Health Agency of Sweden. 'Samhället behöver främja en hälsosam livsmedelskonsumtion hos barn och unga' (Society needs to promote healthy food consumption among children and young people). Reporting back on government mission. Stockholm: Public Health Agency of Sweden; 2025.

70 Swedish Government. 'Sveriges genomförande av Agenda 2030' (Sweden's implementation of the 2030 Agenda) [Internet]. Stockholm: Swedish Government; 2022 [cited 2024-05-13]. Retrieved from: https://www.regeringen.se/rattsliga-dokument/skrivelse/2022/05/skr.-202122247/

71 Swedish Government. 'Agenda 2030. Goal 2. Zero hunger' [Internet]. Stockholm: Swedish Government; [cited 2024-05-13]. Retrieved from: https://www.regeringen.se/regeringens-politik/globala-malen-och-agenda-2030/agenda-2030-mal-2-ingen-hunger/

72 Swedish Government. 'Agenda 2030. Goal 3. Good health and well-being' [Internet]. Stockholm: Swedish Government; [cited 2024-05-13]. Retrieved from: https://www.regeringen.se/regeringens-politik/globala-malen-och-agenda-2030/agenda-2030-mal-3-halsa-och-valbefinnande/

73 Swedish Agency for Public Management. 'En analys av några offentliga styrmedel för bättre matvanor' (An analysis of some public policies for better dietary habits). Stockholm: Swedish Agency for Public Management; 2019.

74 UN Committee on the Rights of the Child. Committee on the Rights of the Child General Comment No 15 (2013) on the right of the child to the enjoyment of the highest attainable standard of health (art. 24). UN Committee on the Rights of the Child; 2013.

75 UN Committee on the Rights of the Child. General Comment No 25 (2021) on the rights of the child in relation to the digital environment. UN Committee on the Rights of the Child; 2021.

76 World Health Organization. 'WHO Regional Office for Europe nutrient profile model'. Second edition. Geneva: World Health Organization; 2023.

77 Kelly B, King MPsy L, Chapman Mnd K, Boyland E, Bauman AE, Baur LA. 'A hierarchy of unhealthy food promotion effects: identifying methodological approaches and knowledge gaps'. Am J Public Health. 2015;105:e86–95. doi:10.2105/ajph.2014.302476

78 World Health Organization. 'Policies to protect children from the harmful impact of food marketing: WHO guideline. Geneva: World Health Organization; 2023.


CANCERFONDEN
GENERATION PEP! FOLKRÖRELSE
Hjärt Lungfonden