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Science and Technology
Committee

**Energy drinks and
children**

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*Report, together with formal minutes relating
to the report*

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Science and Technology Committee

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Summary

Energy drinks are typically non-alcoholic drinks which contain caffeine and other ingredients to create a stimulating physiological effect. We were prompted to look at the effects of energy drinks, especially the caffeine contained in them, following research which showed that young people in the UK are the biggest consumers of energy drinks in Europe for their age. We wanted to understand whether the caffeine in energy drinks had a negative health effect on young people, and explore whether the decision taken by some retailers to ban their sale to under 16s should be extended to all retailers through legislation. In this Report, we also examine labelling requirements and advertising restrictions.

During our inquiry, the Government published chapter 2 of its “plan for action” on childhood obesity. In that plan the Government undertook to consult on an intention to “introduce legislation to end the sale of energy drinks to children by all retailers”. On 30 August 2018, after we had concluded taking oral evidence, the Government launched this consultation. This Report is our contribution to that Government consultation.

In this Report we consider the effects of energy drink consumption on children. We conclude that drinking energy drinks is correlated with young people engaging in other risky behaviours such as drinking alcohol and smoking, but it is not possible to determine whether there is any causal link. In our view, there is insufficient evidence as to whether children’s consumption habits are significantly different for energy drinks compared with other caffeinated products such as tea and coffee. We recommend that in the next six months the Government should commission independent research to establish whether energy drinks have more harmful effects than other soft drinks containing caffeine in order to support evidence-based decision-making.

We acknowledge that energy drinks are consumed disproportionately by disadvantaged groups and there is evidence that consumption of energy drinks is associated with negative impacts on “executive functions” and may risk hyperactivity or lack of concentration. Any trend that undermines the educational attainment of disadvantaged groups needs to be tackled. Meanwhile, the pricing of some energy drinks means that it is easy for children to consume them in excess, beyond the suggested safe limits—and there is evidence that children are doing this. The current voluntary ban implemented by a number of retailers amplifies the message that energy drinks are associated with negative health, behavioural and dietary effects. We would support schools, local authorities and local communities working with businesses and vending machine providers on possible actions (e.g. exclusion zones) that could be used to reduce energy drink consumption among children, and in particular to reduce the extent to which they are consumed in excess.

On balance, we conclude that the current scientific evidence alone is not sufficient to justify a measure as prohibitive as a statutory ban on the sale of energy drinks to children. Single portions are within the European Food Safety Authority’s suggested limit for caffeine intake by children. This limit may be exceeded if other products containing caffeine are also consumed, or if energy drinks are consumed in excess, but the same can be said for many products available for sale to young people, including other drinks containing caffeine. However, we recognise that it might be legitimate

for the Government to go beyond the quantitative evidence available and implement a statutory ban on the basis of societal concerns and qualitative evidence, such as the experience of school teachers. If the Government decides to introduce a statutory ban it should set out the reasoning for its decision.

We believe that labelling of food and drinks should be designed to help the consumer make an informed choice. In the case of energy drinks, there are concerns that children and their parents do not fully understand what they are consuming. Despite statutory labelling on energy drinks that they are not recommended for children, a significant number of young people continue to consume these products, and some in excessive amounts. While there is a risk of glamorising the product in the minds of younger consumers from warning labels, increasing the prominence of the message could help parents to make informed choices about what they buy for their children. We believe that the evidence threshold for including more prominent advisory notices is lower than for prohibiting their sale. The Government should use the opportunity of leaving the EU to introduce, within 18 months of exit day, additional labelling requirements to ensure that advisory messages are more prominent on energy drinks packaging.

It is important that the sugar and caffeine content of energy drinks is clearly communicated to consumers. The Government should consult on whether introducing caffeine labelling requirements on all products containing caffeine (in milligrams per 100 millilitres) including average values per serving of tea and coffee in coffee shops, would help consumers make informed choices in relation to energy drinks as well.

Although there are codes of practice in place that limit the advertising of energy drinks to children (on the basis that they are usually high-sugar products), we are concerned that children may nevertheless be exposed to advertisements aimed at older target audiences. We recommend that the Committee of Advertising Practice consider whether to explicitly include high-caffeine products within the scope of its advertising approach to high-fat, sugar or salt content (HFSS) foods and drinks.

We are particularly worried by ‘advergaming’ and ‘gamification’ as a route through which young people will be encouraged to buy energy drinks, including purchases influencing progress in a game itself. Weak controls on age verification in gaming make this possible, and other games clearly produced by and associated with energy drinks companies are freely available for children to play. We recommend that the Advertising Standards Agency should hold an urgent review of age verification processes used in games to ensure that children are not exposed to advertisements and game features aimed at adults.

1 Introduction

1. Energy drinks are typically non-alcoholic drinks which contain caffeine and other ingredients to create a stimulating physiological effect. In this inquiry, we have focused on high-caffeine beverages containing more than 150mg of caffeine per litre, which reflects the threshold used by the British Soft Drinks Association in its 2015 code of practice on energy drinks.¹ It also matches the level used in EU labelling regulations for high-caffeine products, which require these products to be labelled as “not recommended for children”.² This regulation applies to several leading brands of energy drink in the UK such as Red Bull, Monster, Relentless and Rockstar, but other brands with lower levels of caffeine such as Lucozade Energy are also often referred to as energy drinks.³

Our inquiry

2. In March 2018 we launched an inquiry into energy drinks to consider the evidence relating to the effects of these drinks on children and to explore whether actions from the Government, industry and others were needed. We were prompted to look at these issues as young people in the UK are the biggest consumers of energy drinks in Europe for their age, and there has been considerable media attention on this issue.⁴ We wanted to understand whether the caffeine in energy drinks had a negative health effect on young people, and explore whether the decision taken by some retailers to ban their sale to under 16s should be extended to all retailers through legislation. We also sought to examine labelling requirements and advertising restrictions

3. We received over 40 written submissions for our inquiry, including from retailers, health professionals, academics, the Government, public bodies and others. We also held two oral evidence sessions, taking evidence from researchers, the soft drinks industry, advertising regulators, and the Parliamentary Under-Secretary of State for Public Health and Primary Care (Steve Brine MP).

4. Several major retailers have recently chosen not to sell high-caffeine energy drinks to children under 16, including Sainsbury’s, Asda, the Co-Op, and Waitrose.⁵ We wrote to these retailers to ask them for information on their decision to introduce a ban and their experience of enforcing it. All but one retailer (Lidl) responded to our request—responses received have been published as written evidence and are referred to in this Report.⁶

5. The Parliamentary Education Centre also polled a number of visiting school children on our behalf to enable us to hear about their experiences of energy drinks (see Annex). The oral and written evidence that we received can be found on our website.⁷ In May 2018

1 British Soft Drinks Association, [Code of Practice on energy drinks](#), April 2015

2 [Council Regulation \(EU\) No 1169/2011](#). See Chapter 4

3 Energy drinks cited in written submission from British Soft Drinks Association ([END0018](#)).

4 European Food Safety Authority, [External Scientific Report: Gathering consumption data on specific consumer groups of energy drinks](#), 2013

5 Earlier this year Aldi, Asda, Boots, Lidl, Morrisons, Sainsbury’s, Tesco, the Co-Op Group and Waitrose introduced voluntary bans on the sale of energy drinks to under 16s.

6 Tesco ([END0034](#)), Aldi ([END0036](#)), Waitrose ([END0037](#)), Morrisons ([END0038](#)), Asda ([END0039](#)), Sainsbury’s ([END0040](#)) and Boots ([END0042](#)).

7 House of Commons Science and Technology Committee, [Energy drinks inquiry—publications](#), accessed 1 November

we also visited Reading to talk to youth leaders, parents and teachers about their views on energy drinks, which was useful background ahead of taking oral evidence. We are grateful to all of those who contributed to our inquiry.

Levels of consumption

6. Concern about the possible health effects for young people consuming energy drinks is driven in part by the relatively high levels of consumption of these products in the UK. In 2013 a major study by the European Food Safety Authority (EFSA) found that UK adolescents (aged between 10 and 18) drank over 3 litres per month on average, compared with 2 litres per month on average across all the European countries participating.⁸ However, we heard criticism from the Association of Convenience Stores that the 2013 EFSA study was out-dated and not directly applicable, since “the EFSA study is now 5 years old, not UK-specific and focuses on consumption of energy drinks for adolescents that are under 18s rather than under 16s”.⁹

7. The Government’s consultation on restricting the sale of energy drinks stated that “more than two thirds of UK children aged 10–17, and nearly a quarter of those aged 6–9, are energy drink consumers”.¹⁰ The consultation document also noted that “a quarter of children who consume energy drinks will have three or more in one sitting”.

8. We also heard that consumption of energy drinks by children was associated with measures of educational disadvantage. In 2015 the Government commissioned Professor Fiona Brooks, Dr Elene Klemra, and Josefine Magnusson at the University of Hertfordshire to analyse survey results relating to the consumption of energy drinks from the WHO’s Health Behaviour in School-aged Children survey.¹¹ In their analysis they found that children in receipt of free school meals (FSM) disproportionately consumed energy drinks: among students who report that they drink at least one energy drink per day, 23% were in receipt of FSM, compared with 13% receiving FSM in the sample as a whole.¹²

9. In contrast, Energy Drinks Europe, downplayed the prevalence of energy drink consumption in the UK in the context of young people’s consumption of caffeine from other sources. They told us that “in the UK adolescent population (10–18-year-old), about 90 percent of all caffeine comes from sources other than energy drinks (39% from tea, 33% from colas, 10% from coffee and 8% from chocolate)”.¹³

Defining ‘children’

10. The focus for our inquiry was energy drinks and children, but there are differences in how ‘children’ are defined in different contexts. The Government has consulted on whether to introduce a statutory ban on the sale of energy drinks to young people under the age of

8 European Food Safety Authority, [External Scientific Report: Gathering consumption data on specific consumer groups of energy drinks](#), 2013, p93

9 Association of Convenience Stores ([END0017](#))

10 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018, p5

11 Department of Health and Social Care ([END0041](#))

12 Fiona M. Brooks, Ellen Klemra, Josefine Magnusson and Kayleigh Chester, “[Young People and Energy Drink Consumption in England](#)”—analysis commissioned by the Department of Health and Social Care.

13 Energy Drinks Europe ([END0011](#))

16, 18 or another age. The consultation noted that “the age of 18 is widely recognised as the age at which one becomes an adult, gaining full citizenship rights and responsibilities, and is also the age limit for purchasing other age-restricted substances, such as tobacco and alcohol”.¹⁴ However, 18 was not the age used by all our witnesses or in current codes to define a child. Advertising regulations in the UK define a child “as anyone under the age of 16” (see Chapter 5),¹⁵ and the voluntary action taken by retailers to restrict the sale of energy drinks has been applied to under 16s (see Chapter 3). Meanwhile, Monster Energy told us that they defined children as “those aged 12 and under”, with their primary target market being 18–34 year-olds (see Chapter 5).¹⁶

11. There is a lack of consistency in the age used to define a child when it comes to the marketing, sale, advertising and regulation of energy drinks. *In considering its responses to the consultation on restricting the sale of energy drinks, the Government should ensure that advertising restrictions and any restrictions on sale are aligned in order to give a consistent and clear message to young people and parents.*

The Government consultation

12. During our inquiry, the Government published chapter 2 of its “plan for action” on childhood obesity.¹⁷ In that plan the Government undertook to consult on an intention to “introduce legislation to end the sale of energy drinks to children by all retailers”.¹⁸ On 30 August 2018, after we had concluded taking oral evidence, the Government launched this consultation, which closed on 21 November 2018.¹⁹ The Government summarised that in its consultation it was:

- consulting on whether ending the sale of energy drinks to children by all retailers is the right approach to take to prevent children from consuming energy drinks, particularly in excessive quantities.
- [...] proposing that if a restriction on the sale of energy drinks to children is introduced, the drinks in scope would be any drink, other than tea or coffee, which contains over 150mg of caffeine per litre.
- [...] seeking views on whether if introduced, the age limit for a restriction on sales of energy drinks to children should be 16 or 18 years of age.
- [...] proposing that if introduced, any restriction should be implemented by all retailers in England, including on-site and online sales.
- [...] consulting on whether sales of energy drinks from vending machines should also be restricted.

14 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

15 The Advertising Standards Authority (ASA) is the UK’s independent regulator of advertising across all media. It applies the Advertising Codes, which are written by the Committees of Advertising Practice (CAP). ASA, [Children: Targeting](#), August 2018.

16 [Qq203–206](#)

17 HM Government, [Childhood obesity: a plan for action—chapter 2](#), June 2018

18 HM Government, [Childhood obesity: a plan for action—chapter 2](#), June 2018

19 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

Aims of this Report

13. This Report is our contribution to the Government consultation. Nonetheless, we expect that the Government will respond to our Report in the usual two-month response period. We focus on the caffeine element of energy drinks and their effects on children in this Report, and we do not examine in detail other caffeinated drinks. Further, as health and retail are devolved matters, this Report focuses on the treatment of energy drinks in England. Specifically, in this Report:

- Chapter two explores the effects on children of consuming energy drinks and how energy drinks differ from other caffeinated and/or sugary drinks;
- Chapter three, examines the arguments on whether the Government should introduce a statutory or voluntary ban on the sale of energy drinks to children, and what age group any such ban should apply;
- Chapter four examines the current labelling regulations relating to energy drinks and proposes areas for change; and
- finally, Chapter five looks at current regulations relating to advertising energy drinks and assesses whether these are appropriate.

2 Effects of consumption on children

14. In this Chapter we set out the evidence relating to the health and behavioural effects of children consuming energy drinks and explore whether the effects of these products differ between children and adults.

Health effects

15. Dr Amelia Lake, a researcher at the Centre for Translational Research in Public Health, told us that energy drinks were “strongly associated with negative results in the health of children”.²⁰ Other witnesses pointed to a range of effects:

- The British Dietetic Association (BDA) told us that consumption of energy drinks led to signs of “increased risk for fatal arrhythmias [abnormal heart beat]”;²¹
- The BDA also pointed to anorexia nervosa;²²
- Several witnesses highlighted an association between energy drink consumption and anxiety; and²³
- A number of witnesses, including the Jamie Oliver Food Foundation, told us that energy drink consumption was linked to increased sleeplessness and insomnia.²⁴

16. The Government consultation on banning the sale of energy drinks to children, stated that:

Research has found that adolescents (aged 12–18) who consume energy drinks several times a day are 4.5 times more likely to report experiencing headaches, 3.5 times more likely to report sleeping problems, and 3.4 times more likely to report experiencing tiredness than adolescents who do not consume energy drinks.²⁵

17. We also asked the pupils that we surveyed in the Parliamentary Education Centre whether they thought energy drinks had a negative effect on their health. Nearly 60% of respondents thought that consuming energy drinks could negatively affect their health compared to less than 20% who thought it would not.²⁶

18. We heard limited evidence that there were health-related benefits associated with energy drink consumption. Fuse, the Centre for Translational Research in Public Health, explained that there had been some evidence which suggested a positive effect on sport performance, however, they urged caution with this study as it was “based on small

20 [Q2](#)

21 [British Dietetic Association \(END0012\)](#)

22 [British Dietetic Association \(END0012\)](#)

23 See for example, [Jamie Oliver Food Foundation \(END0014\)](#), [British Dietetic Association \(END0026\)](#), [Qq8–9](#) and [Qq14–15](#).

24 See for example, [Jamie Oliver Food Foundation \(END0014\)](#) and [Q241](#).

25 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

26 15.4% of respondents did not know whether energy drink consumption would negatively affect their health and 6.9% did not want to say.

numbers of elite junior athletes”.²⁷ When we pressed Dr Ashley Roberts, a toxicologist and adviser to Monster Energy, about whether there were any health benefits associated with energy drink consumption he conceded that there were none that he knew of.²⁸

19. Monster Energy argued that energy drinks were unfairly associated with negative health effects, on the basis that “children and adolescents experience no particular or unique safety effects from caffeine”.²⁹ They told us that “the fear that energy drinks may have potential physical and mental health effects on children and adolescents is based on misconceptions”.³⁰ Energy Drinks Europe also noted that:

The safety of key [energy drink] ingredients has been assessed and confirmed by European risk assessment institutions, including the United Kingdom Food Standards Agency (FSA), and the European Food Safety Authority (EFSA), and by many other health authorities around the world.³¹

Dr Roberts told us that health effects, such as anxiety, due to consumption of energy drinks did not affect children differently to adults:

There was a study by Stein, and a placebo-controlled study by Bernstein, looking at signs of anxiety. [...] The only adverse effect from that study was that the children felt nervous and jittery. That is no different from what would be perceived in adults.³²

The British Soft Drinks Association (BSDA) and Monster Energy agreed with this assessment.³³

Behavioural effects

20. Darren Northcott, representing the NASUWT teaching union, told us that school teachers were concerned about the effects of energy drink consumption on pupil behaviour:

From their perspective of working with children in classrooms, teachers were increasingly drawing a link between what they saw as problematic behaviours—behaviours in classrooms, an inability to concentrate and, as we have heard, impacts on sleep—and increased consumption of energy drinks.³⁴

He told us that 13% of teachers responding to a survey by NASUWT had cited the use of caffeine and energy drinks as a driver of poor pupil behaviour”.³⁵

21. A number of witnesses, including NASUWT and the Jamie Oliver Food Foundation, linked the consumption of energy drinks to a lack of concentration and hyperactivity.³⁶

27 Fuse, The Centre for Translational Research in Public Health ([END0002](#))

28 [Q179](#)

29 Monster Energy Company ([END0020](#))

30 Monster Energy Company ([END0020](#))

31 Energy Drinks Europe ([END0011](#))

32 [Q163](#)

33 British Soft Drinks Association ([END0018](#)) and Monster Energy Company ([END0024](#))

34 [Q13](#)

35 NASUWT ([END0022](#))

36 NASUWT ([END0022](#)) and Jamie Oliver Food Foundation ([END0014](#)). See also for example Fuse, The Centre for Translational Research in Public Health ([END0002](#)).

Anisa Ashraf, a student who regularly consumed energy drinks, told us that: “A new study led by the Yale school of public health found that those students who consume energy drinks are 66% more likely to be at risk from hyperactivity and inattention symptoms”.³⁷ In its recent consultation on energy drinks the Government cited a 2015 study,³⁸ which found that “34% of adolescents who consumed energy drinks said that their ability to concentrate at school was affected by not getting enough sleep, compared to 18% for non-energy drink users”.³⁹ Further, the Royal College of Paediatrics and Child Health cited a longitudinal study in the Netherlands of 509 adolescents which found that the consumption of one or more energy drinks per day may have a negative impact on “daily life behaviours related to executive function (i.e. mental processes that enable us to plan, focus attention, remember instructions, and juggle multiple tasks successfully)”.⁴⁰

22. A 2015 scientific opinion from the European Food Safety Authority (EFSA) on safety of caffeine (not specifically energy drinks) found that single doses of caffeine did have some impact on children and adolescent’s behaviour, but argued that the effects of longer term habitual consumption were more uncertain:

Like for adults, caffeine doses of about 1.4 mg/kg bw may increase sleep latency and reduce sleep duration in some children and adolescents, particularly when consumed close to bedtime. [...]

As only limited studies are available on the longer-term effects of caffeine on anxiety and behaviour in children and adolescents, there is substantial uncertainty regarding longer-term effects of habitual caffeine consumption in this age group [...] but the limited studies available regarding the longer-term effects of caffeine on anxiety and behaviour in children and adolescents support the proposed caffeine intake level of no safety concern [3mg/kg bodyweight].⁴¹

23. Although many witnesses believed that energy drinks had a negative impact on an individual’s behaviour, including their concentration, NASUWT for example, conceded that this was exacerbating poor behaviour rather than causing it.⁴² NASUWT went on to explain that where energy drinks were prohibited from being consumed at school there were “positive implications for pupil behaviour and learning” observed by staff.⁴³ Similarly, when Steve Brine MP, Parliamentary Under-Secretary of State for Public Health and Primary Care, gave evidence to us he explained that he would expect to see a “step change in difference of behaviour” as a result of any restrictions on the consumption of these products in schools.⁴⁴

37 Miss Anisa Ashraf (END0004), Yale University, “[Energy drinks significantly increase hyperactivity in schoolchildren, study finds](#)” ScienceDaily, 9 February 2015, and NASUWT (END0022)

38 Fiona M. Brooks, Ellen Klemmer, Josefine Magnusson and Kayleigh Chester, “[Young People and Energy Drink Consumption in England](#)”—analysis commissioned by the Department of Health and Social Care.

39 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

40 Royal College of Paediatrics and Child Health (END0010)

41 European Food Safety Authority, [Scientific Opinion on the safety of Caffeine: EFSA Panel on Dietetic Products, Nutrition and Allergies](#), 2015

42 NASUWT (END0027)

43 NASUWT (END0027)

44 [Q263](#)

24. We also asked the pupils that we surveyed in the Parliamentary Education Centre about the effects of energy drinks on their concentration. Their perception of the effects of energy drink consumption on their concentration did not reflect these studies. Of those who consumed energy drinks, just 16% felt that they had a negative impact on their concentration.⁴⁵ Similarly we asked visiting pupils whether energy drink consumption made it difficult to sleep. The majority of those who drank energy drinks (60%) believed that there was no effect on their sleeping.⁴⁶

25. The British Soft Drinks Association argued that several pieces of research had shown that energy drinks had limited or no effect on mood and behaviour:

For children, the Scientific Committee on Food (SCF) considered seven publications reporting on intervention studies conducted in pre school and school children with caffeine doses up to 10 mg/kg bw (3, 5, or 10 mg/kg bw), either as a single dose or on a daily basis for periods up to two weeks. In these studies, either no effect or small, inconsistent effects were noted on mood, behavioural, cognitive and motor functions.⁴⁷

Increased 'energy'?

26. Professor Russell Viner, President of the Royal College of Paediatrics and Child Health, argued that these products should be referred to as “so-called energy drinks”, on the basis that caffeine did not itself provide the body with energy. He explained that “energy drinks result in fatigue and sleep deprivation. There is very little evidence that, with this excess caffeine, they give you extra energy. If they are full of sugar, that is an energy substrate”.⁴⁸

Diet

27. Fuse, the Centre for Translational Research in Public Health, highlighted a study that they had conducted in 2015⁴⁹ which found that energy drinks had been used by children as breakfast substitutes.⁵⁰ Similarly, the Jamie Oliver Food Foundation told us that: “These drinks, with their lack of nutritional value, are also becoming a replacement for meals. A 2013 study found that 1 in 20 children have an energy drink for breakfast”.⁵¹ More broadly, Annabel Gipp, Specialist Paediatric Eating Disorders Dietitian, British Dietetic Association (BDA), explained that consumption was correlated with eating disorders: “Research says that, mostly, the trend is that children who are either underweight or overweight are the ones who are consuming these beverages”.⁵²

28. The BDA explained that consumption of energy drinks was linked with diet-related medical conditions, such as diabetes, dental decay and increased Body Mass Index

45 11.5% said that they did not know whether it affected their concentration and 6.1% did not want to say.

46 9.5% said that they did not know whether it affected their sleep and 5.0% did not want to say.

47 British Soft Drinks Association ([END0018](#))

48 [Q37](#)

49 Fuse, “[The HYPER \(Hearing Young People’s Views on Energy Drinks: Research\) Study Final Report](#)”, September 2015

50 Fuse and Teesside University ([END0028](#)) and [Q17](#). See also British Dietetic Association ([END0012](#)).

51 Jamie Oliver Food Foundation ([END0014](#))

52 [Q55](#)

(BMI) in young people. There was also a “link between energy drink use and sedentary behaviour”.⁵³ The BDA went on to explain that dietary choices as children could affect future dietary choices as adults:

The use of energy drinks in adolescents may also be affecting future food and drinks choices in young people due to alterations in the developing reward and addiction centre of the brain and the addiction due to the high caffeine content.⁵⁴

Association with other risk-taking behaviours

29. A number of witnesses highlighted a correlation between consuming energy drinks and other risk-taking behaviour such as smoking, although they emphasised that the data did not establish a causal link.⁵⁵ For instance, the EFSA in 2013 found that 59% of 15–18 year-old energy drink consumers drank energy drinks with alcohol.⁵⁶

30. Monster Energy argued that this correlation had been overplayed in some of the evidence we had received, arguing that “many of the submissions ignore the basic scientific concept that correlation does not equal causation”.⁵⁷ Dr John Thompson, a member of the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT), emphasised that there was merely an association between these types of behaviours, which did not establish a causal link.⁵⁸ As Professor Viner, President, Royal College of Paediatrics and Child Health, put it, it is “unclear whether there is a common cause that leads children and young people either to smoke or to take energy drinks, or whether there are causal connections this way”.⁵⁹

Are energy drinks different to other soft drinks?

31. We focus here on the caffeine levels of energy drinks and not their sugar content. Nevertheless, energy drinks can contain substantial amounts of sugar; for instance, a 450ml can of Monster Energy contains 48g of sugar, substantially more than the Government Dietary Recommendations of less than 33g of sugar per day for 11–18 year old boys.⁶⁰ However there are similar concerns about the sugar content of many other soft drinks, and the amounts of sugar are comparable in some cases. For instance, Monster Energy and Red Bull both contain 11g of sugar per 100ml, compared with 10.8g per 100ml in Coca Cola (although zero-sugar versions are available, and portion sizes vary). Clearly energy drinks are not ‘healthy’ products, despite any positive associations with the word ‘energy.’ Sugar concerns relating to energy drinks would be covered by the Soft Drinks Industry Levy, rather than restrictions on sale, and are being addressed through the Government’s obesity strategy.⁶¹

53 British Dietetic Association ([END0012](#))

54 British Dietetic Association ([END0012](#))

55 See for example, Royal College of Paediatrics and Child Health ([END0010](#)), NASUWT ([END0022](#)) and British Dietetic Association ([END0026](#)).

56 European Food Safety Authority, [External Scientific Report: Gathering consumption data on specific consumer groups of energy drinks](#), 2013, p4

57 Monster Energy Company ([END0024](#))

58 [Q163](#)

59 [Q11](#)

60 Public Health England, [“Government Dietary Recommendations: Government recommendations for energy and nutrients for males and females aged 1 –18 years and 19+ years.”](#), August 2016

61 [“Soft Drinks Industry Levy comes into effect”](#), GOV.UK, 5 April 2018

32. Jenny Oldroyd, a Deputy Director at the Department of Health and Social Care, told us that concern about over-consumption of caffeine through energy drinks had been raised with the Government, but tea and coffee had not been highlighted as an issue:

the concern we are picking up, and which we can see in the evidence, is around real over-consumption of energy drinks among a particular group of the population. We have not had anyone come to us to suggest that there are the same kinds of issues with coffee and tea⁶²

33. We looked at a number of energy drinks (including Monster, Relentless, Red Bull, Bolt and Boost) to compare their caffeine content with an equivalent amount of coffee. In general, the energy drinks we looked at contained around 30–32mg of caffeine per 100ml. This means that smaller cans (250ml) contain around 80mg of caffeine, but larger serving sizes (up to 500ml in some cases) can contain around 160mg of caffeine. Information on coffee from Starbucks shows that the amount of caffeine in a “short” drink (c. 236ml) ranged from 75 to 150mg (equal to between 32 and 64 mg per 100ml),⁶³ and for a one-shot coffee from Costa caffeine levels varied from 92 to 277mg (the equivalent per 100ml figure cannot be calculated as the size of the drink is unknown).⁶⁴ It is clear from this that while energy drinks are referred to as being ‘high-caffeine’, in many cases coffee can be much stronger.

34. Annabel Gipp, representing the British Dietetic Association, acknowledged that “even though one portion, in a small can, may be okay in terms of food safety, people are not sticking to those allocated portions”.⁶⁵ Indeed, the Government’s consultation on restricting the sale of energy drinks noted that “a quarter of children who consume energy drinks will have three or more in one sitting”.⁶⁶

35. Energy Drinks Europe reported that the EFSA study found that “In the UK adolescent population (10–18 year old), about 90 percent of all caffeine comes from sources other than energy drinks (39% from tea, 33% from colas, 10% from coffee and 8% from chocolate)”.⁶⁷ The 2015 scientific opinion from EFSA on caffeine consumption explained that “The highest contribution to total caffeine intakes from “energy drinks” was found for adolescents in the UK (11%)”.⁶⁸

36. Steve Brine MP, Parliamentary Under-Secretary of State for Public Health and Primary Care, argued that the issue with energy drinks was that they were “more quaffable” than coffee meaning consumers drank more of them.⁶⁹ However, Monster challenged this view:

there remains a misconception that energy drinks are necessarily more quaffable than coffee, and that the effects of caffeine depend on the temperature of the beverage and how rapidly it is consumed. These statements have been shown to be false, and they cannot be reconciled with

62 [Q245](#)

63 Starbucks, “[Holiday FY19 Beverage Nutrition Information](#)”, accessed 1 November 2018

64 Caffeine Informer, “[Costa Coffee](#)”, accessed 1 November 2018

65 [Q22](#)

66 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

67 Energy Drinks Europe ([END0011](#))

68 European Food Safety Authority, [Scientific Opinion on the safety of Caffeine: EFSA Panel on Dietetic Products, Nutrition and Allergies](#), 2015

69 [Q245](#)

reports that indicate that cold drinks represent more than 50% of sales at Starbucks stores, most of which drinks are flavoured, such as Starbucks Frappuccinos.⁷⁰

Do the effects of energy drinks on children differ from the effects on adults?

37. We have alluded to earlier in this Report (see, for example, paragraph 19) that there is a debate between whether adults and children are affected differently by the consumption of energy drinks. Some witnesses, including Dr John Thompson, Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT), explained that there was not a lot of children-specific research on the effects of energy drinks to reach their conclusions, so they had to rely on recommendations for adult intakes. However, they noted that “If anything, children metabolise caffeine more quickly than adults”.⁷¹

38. Dr Amelia Lake, told us that there were ethical issues related to carrying out research on children: “it would be very unethical to give caffeine to children to see the effect”, which meant that the evidence available was necessarily limited.⁷² However, she also explained that evidence on the effects of energy drinks on adults was lacking as well: “We have little evidence about what they do to adults, and very little evidence about what they do to children”.⁷³ As we explained at paragraph 19 Dr Roberts, a Toxicologist and adviser to Monster Energy, told us that there had been studies which found that the effects on energy drinks were not distinct in children compared to adults.⁷⁴

39. We discussed at paragraph 26 that one effect of energy drinks was that they could make consumers more tired. Professor Viner from the Royal College of Paediatrics and Child Health told us that young people needed more sleep: “Teenagers need much more sleep than adults, and even young children”.⁷⁵ Thus he seemed to suggest that children were more affected by sleep loss compared to adults. However, Dr Roberts explained that the effect of energy drink consumption on sleeping patterns applied to both adults and children.⁷⁶

What is a safe level of caffeine?

40. Professor Viner told us that “There is clear evidence of harm [of caffeine] in excess”.⁷⁷ The European Food Safety Authority (EFSA) provides the most comprehensive guidance on a safe level of consumption of caffeine (not just that consumed via energy drinks) for children and adolescents. EFSA explained that:

For children and adolescents, the information available is insufficient to derive a safe caffeine intake. The Panel considers that caffeine intakes of no

70 Monster Energy Company ([END0032](#))

71 [Q131](#)

72 [Q16](#)

73 [Q57](#)

74 [Q163](#)

75 [Q9](#)

76 [Q164](#)

77 [Q11](#)

concern derived for acute caffeine consumption by adults (3 mg/kg bw per day) may serve as a basis to derive single doses of caffeine and daily caffeine intakes of no concern for these population subgroups.⁷⁸

If a child weighed 55kg this would mean that they could safely consume 165mg of caffeine per day. As outlined in paragraph 33, some drinks in larger cans reach this level in one portion, although smaller serving sizes do not. However, the aforementioned 2015 EFSA study (which covered a number of countries, including the UK), found that for adolescents (those aged 10–18 years) average consumption was between 0.4 and 1.4mg per a kilogram of body weight, therefore within the levels of safe consumption.⁷⁹ Dr Kevin Hargin, Head of Food Hygiene and Animal Health Policy Unit, Food Standards Agency, told us that they were “content that a level of no concern at 3 mg per kilogram of body weight is reasonable and appropriate” for children.⁸⁰ However, Dr Ashley Roberts suggested that the EFSA guideline was conservative: “I do not believe that the 3 mg per kilogram limit that was set by EFSA is an upper limit of safety. Even the EFSA opinion showed quite clearly that, on a day-to-day basis, those levels may be exceeded”.⁸¹

Is there enough evidence?

41. Professor Russell Viner, President, Royal College of Paediatrics and Child Health, for example, told us that there was a need for more research as the impact of caffeine was “an area in which we do not have a huge amount of research”.⁸² The Association of Convenience Stores also supported this call for more research.⁸³ The Minister, Steve Brine MP, agreed and explained that he “would be the first to say that more research is needed fully to understand their impact on children”.⁸⁴

Conclusions

42. **Many young people choose to consume energy drinks, and some consume them in significant volumes. Energy drink consumption is higher on average in the UK than in other countries in Europe. Nevertheless, young people consume caffeine from a variety of sources, including tea, coffee, cola and chocolate.**

43. **Drinking energy drinks is correlated with young people engaging in other risky behaviours such as drinking alcohol and smoking, but it is not possible to determine whether there is any causal link.**

44. **In our view, there is insufficient evidence as to whether children’s consumption habits are significantly different for energy drinks compared with other caffeinated products such as tea and coffee. We recommend that in the next six months the Government should commission independent research to establish whether energy drinks have more harmful effects than other soft drinks containing caffeine in order**

78 European Food Safety Authority, “[EFSA explains risk assessment: caffeine](#)”, 2015

79 European Food Safety Authority, “[EFSA explains risk assessment: caffeine](#)”, 2015

80 [Q159](#)

81 [Q136](#)

82 [Q10](#)

83 Association of Convenience Stores ([END0017](#))

84 [Q235](#)

to support evidence-based decision-making. There are ethical questions related to undertaking research on the effects of energy drink consumption on children, which would need to be borne in mind when designing further research.

3 A statutory or a voluntary ban?

45. In this Chapter we set out how children are able to purchase energy drinks and consider the evidence relating to whether a voluntary ban on the sale of energy drinks to children should continue, or whether the Government should take action and introduce legislation to prevent the sale of energy drinks to children. When reaching our recommendations on this matter we bear in mind the effects of energy drinks that we outlined in Chapter 2.

Can children currently purchase energy drinks?

46. In March 2018, a number of major retailers introduced a voluntary ban on the sale of energy drinks to under 16s (see footnote for a list of the retailers involved in this voluntary action).⁸⁵ There is currently no statutory restriction on the sale of energy drinks to children in the UK.⁸⁶ A number of witnesses noted that this was the case despite the products containing a warning that they were “not recommended for children”.⁸⁷ The Association of Convenience Stores, also provides the following information in its ‘Preventing underage sales’ advice, to its members:

you should be aware that all major UK manufacturers advise that these products are not suitable for children which they define as under 16 years old. You may decide to impose a restricted sale policy on your own initiative, or you may be asked to do so by the local school or parents group. You should listen to such requests constructively and accommodate them if you can.⁸⁸

47. A number of witnesses also argued that the low cost of energy drinks made them more accessible to children. Dr Amelia Lake, a researcher at the Centre for Translational Research in Public Health, provided evidence of deals on energy drinks that she had come across in her research: “in our work we have gone into shops and seen that you can buy four cans for £1, or even 10 cans for £1”.⁸⁹ NASUWT similarly explained that:

Energy drinks vary in price, but Red Bull costs on average about £3.50 for four 250ml cans. So at 75p per can this is affordable for both children and adolescents. Additionally, supermarket own brands and other brands are also much cheaper.⁹⁰

The Minister explained that the offers on energy drinks meant that “When there are four-for-£1 offers, children club together and buy those cans so they can share them out”.⁹¹

Statutory versus voluntary ban

48. In its *Consultation on proposal to end the sale of energy drinks to children*, the Government asked: “Should businesses be prohibited from selling high-caffeine energy

85 Earlier this year Aldi, Asda, Boots, Lidl, Morrisons, Sainsbury’s, Tesco, the Co-Op Group and Waitrose introduced voluntary bans on the sale of energy drinks to under 16s

86 See for example, British Dietetic Association ([END0012](#)).

87 See for example, Federation of Wholesale Distributors ([END0005](#)) and Jamie Oliver Food Foundation ([END0014](#)).

88 Association of Convenience Stores, “[Advice: Preventing Underage Sales](#)”, March 2018

89 [Q16](#)

90 NASUWT ([END0022](#))

91 [Q242](#)

drinks to children?”⁹² The Government explained that they were looking at this because it recognised “the efforts of retailers who have already acted, [but there were] still many retailers who continue to sell these drinks to children”, and that:

Legislating to end the sale of high-caffeine energy drinks to children would create a level playing field for businesses and create consistency, helping ensure that children do not have access to energy drinks in any shop.⁹³

49. Many witnesses provided us with their views on whether there should be a statutory or voluntary ban. A number of witnesses, including the Royal College of Paediatrics and Child Health and Dr Amelia Lake were in favour of a statutory ban as they thought it was “inevitable that children and young people will be able to purchase [energy drinks] with ease from alternative providers”.⁹⁴ James Bielby, Chief Executive of the Federation of Wholesale Distributors, explained how voluntary action put some independent stores at a competitive disadvantage and therefore supported a statutory ban.⁹⁵

50. NASUWT expressed support in the long-term for a statutory ban but noted that other action could be taken in the short-term:

the Government could look to reinforce such action by introducing an exclusion zone around schools within which retailers would be prohibited from selling energy drinks to children under the age of 16.⁹⁶

51. The British Soft Drinks Association was not in favour of a statutory ban and called for “more targeted intervention that looks at how you stop children being able to buy drinks that are unsuitable for them can work”.⁹⁷ James Lowman, Chief Executive, Association of Convenience Stores, however, viewed an exclusion zone by a school as a “very blunt instrument”.⁹⁸

52. James Lowman stressed the importance of the Government’s plans needing “to follow evidence” but stated that they would work with the Government to implement its preferred policy.⁹⁹ Dr Ashley Roberts, a toxicologist and adviser to Monster Energy, argued against a ban as “at this moment in time, it seems that there is no reason for banning, reducing or restricting energy drinks or caffeinated products for children”.¹⁰⁰ Monster Energy and Energy Drinks Europe also questioned whether there was an evidence base to treat energy drinks differently to other soft drinks.¹⁰¹

53. We also directly approached retailers who had implemented a voluntary ban to ask what their views were on whether the voluntary ban should continue, or whether a statutory ban should be introduced. Interestingly there were a range of views. Some

92 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

93 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

94 Royal College of Paediatrics and Child Health ([END0010](#)) and [Q31](#). See also British Retail Consortium ([END0006](#)), Miss Anisa Ashraf ([END0004](#)), Jamie Oliver Food Foundation ([END0014](#)) and [Q34](#).

95 [Qq90–91](#)

96 NASUWT ([END0022](#))

97 [Q89](#)

98 [Q124](#)

99 [Q86](#)

100 [Q146](#)

101 Monster Energy Company ([END0020](#)) and Energy Drinks Europe ([END0025](#))

did not feel that it was appropriate to comment on Government policy.¹⁰² Others did not express a strong view and indicated that they would implement the Government's preferred policy approach.¹⁰³ Three retailers were supportive of a statutory ban—Tesco believed that it “would create a level playing field across the industry” and Asda added that a ban would need to be “accompanied by clear labelling”.¹⁰⁴ One retailer, Aldi, supported the status quo of retaining a voluntary ban:

We believe the voluntary approach is the quickest and most effective way of implementing change, rather than resorting to legislation. We hope other retailers join the growing consensus that the sale of high-caffeinated drinks should be controlled.¹⁰⁵

A ban at 16 or 18?

54. Whether a voluntary ban should continue or whether the Government should legislate for a ban on the sale of energy drinks to children there needs to be an age at which such measures would apply. The current voluntary ban uses 16 as its thresholds. The Government consultation asked whether any ban should be at 16, 18 or another age.¹⁰⁶

55. We also discussed with our witnesses whether any ban, voluntary or statutory, should be for under 16s or under 18s. Of those who expressed a view on this matter the majority seemed to support a ban at 16:

- NASUWT teaching union and the British Dietetic Association argued that it “would be a good starting point”, with NASUWT explaining that 16 was “an obvious age [to start such a ban], because it is the compulsory school age in England”;¹⁰⁷
- Professor Russell Viner representing the Royal College of Paediatrics and Child Health argued that 16 was the “age of legal majority”. He explained that “for almost all health aspects—consent, confidentiality and so on—the courts have essentially produced 16 as the age at which we are able to make adult decisions about our lives”;¹⁰⁸ and
- The Jamie Oliver Food Foundation explained that 16 could be “evidence-based”.¹⁰⁹

56. Some, including NASUWT and the British Dietetic Association, were in favour of a ban at 18 being considered in the longer-term depending on how successful a ban at 16 was.¹¹⁰ We also heard that 18 was the age used for bans in other countries including Latvia (since 2016), Lithuania (since 2014) and Turkey (since 2018).¹¹¹ DHSC also explained that “In Sweden, some types of energy drinks are restricted to sale in pharmacies and are not

102 Waitrose ([END0037](#)) and Sainsbury's ([END0040](#))

103 The Co-op Group ([END0035](#)) and Boots ([END0042](#))

104 Tesco ([END0034](#)), Asda ([END0039](#)) and Morrisons ([END0038](#))

105 Aldi ([END0036](#))

106 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

107 [Q34](#)

108 [Q40](#)

109 Jamie Oliver Food Foundation ([END0029](#))

110 [Q34](#)

111 See, for example: British Dietetic Association ([END0012](#)), Jamie Oliver Food Foundation ([END0014](#)) and [Q253](#).

for sale to under-15s, so there is a partial restriction”.¹¹² How effective these bans have been was not discussed in our inquiry, but Dr Amelia Lake argued that the approach of these countries had “ensure[d] that a clear message is sent out that these drinks are harmful to children and young people”.¹¹³

57. Retailers currently implementing the voluntary ban on the sale of energy drinks to under 16s also shared their views. Again, just as with views on whether the ban should be statutory or voluntary, the retailers had diverging opinions. Some retailers did not express a strong view, or a view at all, on the age that any such ban should apply.¹¹⁴ Boots explained that they “would support a legal ban at 18, if that is the conclusion of the government’s ongoing consultation”.¹¹⁵ Two retailers, Tesco and Asda, were in favour of keeping the ban at 16. Asda explained that they had introduced the voluntary ban for under 16s as “the experts were asking us to implement an under-16 ban, presumably based on the evidence that they have”.¹¹⁶ Tesco was in favour of retaining the ban to under 16s for logistical and training reasons:

we would encourage the Government to keep the age restriction set at under 16 year olds, so that responsible retailers enforcing the ban on a voluntary basis are not penalised through needing to re-communicate to and retrain colleagues.¹¹⁷

58. The issue of identification for customers was drawn to our attention in submissions from retailers. The Co-Op and Asda suggested in evidence that schemes were readily available to check the age of customers regardless of whether a ban applied to under 16s or under 18s.¹¹⁸

59. We acknowledge that energy drinks are consumed disproportionately by disadvantaged groups and there is evidence that consumption of energy drinks is associated with negative impacts on “executive functions” and may risk hyperactivity or lack of concentration. Any trend that undermines the educational attainment of disadvantaged groups needs to be tackled. Meanwhile, the pricing of some energy drinks means that it is easy for children to consume them in excess, beyond the suggested safe limits—and there is evidence that children are doing this. The current voluntary ban implemented by a number of retailers amplifies the message that energy drinks are associated with negative health, behavioural and dietary effects. We would support schools, local authorities and local communities working with businesses and vending machine providers on possible actions (e.g. exclusion zones) that could be used to reduce energy drink consumption among children, and in particular to reduce the extent to which they are consumed in excess.

60. On balance, the current scientific evidence alone is not sufficient to justify a measure as prohibitive as a statutory ban on the sale of energy drinks to children. Single portions are within the European Food Safety Authority’s suggested limit for caffeine intake by children. This limit may be exceeded if other products containing

112 [Q257](#)

113 Fuse and Teesside University ([END0028](#))

114 Morrisons ([END0038](#)), Waitrose ([END0037](#)), Sainsbury’s ([END0040](#)), Aldi ([END0036](#)) and The Co-op Group ([END0035](#)).

115 Boots ([END0042](#))

116 Asda ([END0039](#))

117 Tesco ([END0034](#))

118 The Co-op Group ([END0035](#)) and Asda ([END0039](#))

caffeine are also consumed, or if energy drinks are consumed in excess, but the same can be said for many products available for sale to young people, including other drinks containing caffeine. However, we recognise that it might be legitimate for the Government to go beyond the quantitative evidence available and implement a statutory ban on the basis of societal concerns and qualitative evidence, such as the experience of school teachers. If the Government decides to introduce a statutory ban it should set out the reasoning for its decision.

4 Labelling and advertising

61. Our witnesses were concerned that the labelling of energy drinks was not clear enough for young consumers and their parents, both in terms of advisory notices about their suitability for children and information on their caffeine and sugar content. In this Chapter we look at the current rules and regulations relating to labelling and advertising of energy drinks and suggest areas for reform.

Advisory notices

62. EU Regulation 1169/2011 sets out requirements on the labelling of drinks with high caffeine content. From December 2014, drinks other than tea or coffee-related products containing more than 150 mg of caffeine per litre must be labelled with the words “High caffeine content. Not recommended for children or pregnant or breast-feeding women”.¹¹⁹ The label must appear “in the same field of vision as the name of the beverage”. The Jamie Oliver Food Foundation described these warning labels as being “in the small print” on energy drinks cans.¹²⁰ Examples of the labelling on a selection of energy drinks are given in Figures 1–4 below.

Figure 1: Relentless packaging (500ml)

PHOTO REDACTED DUE TO THIRD PARTY RIGHTS OR OTHER LEGAL ISSUES



119 [Council Regulation \(EU\) No 1169/2011](#), Annex 3

120 Jamie Oliver Food Foundation ([END0014](#)) para 1.1

Figure 2: Red Bull packaging (250ml)

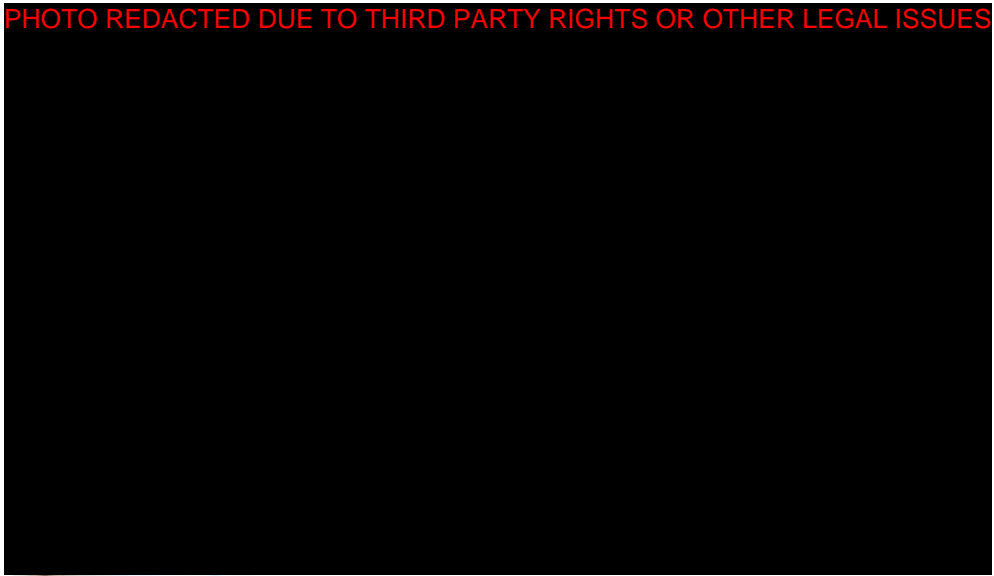


Figure 3: Monster Energy packaging (440ml)

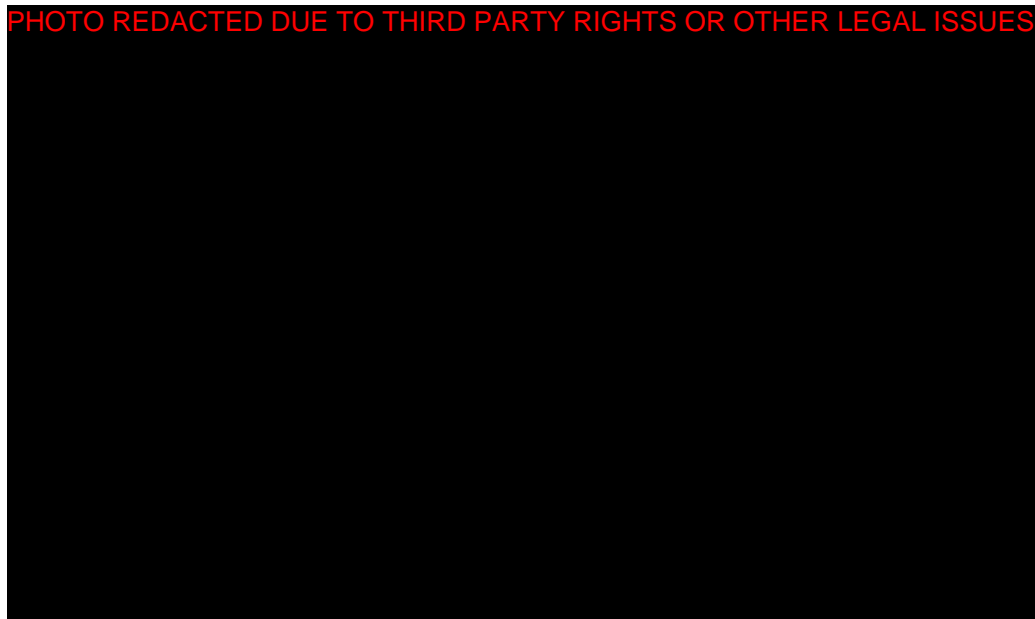
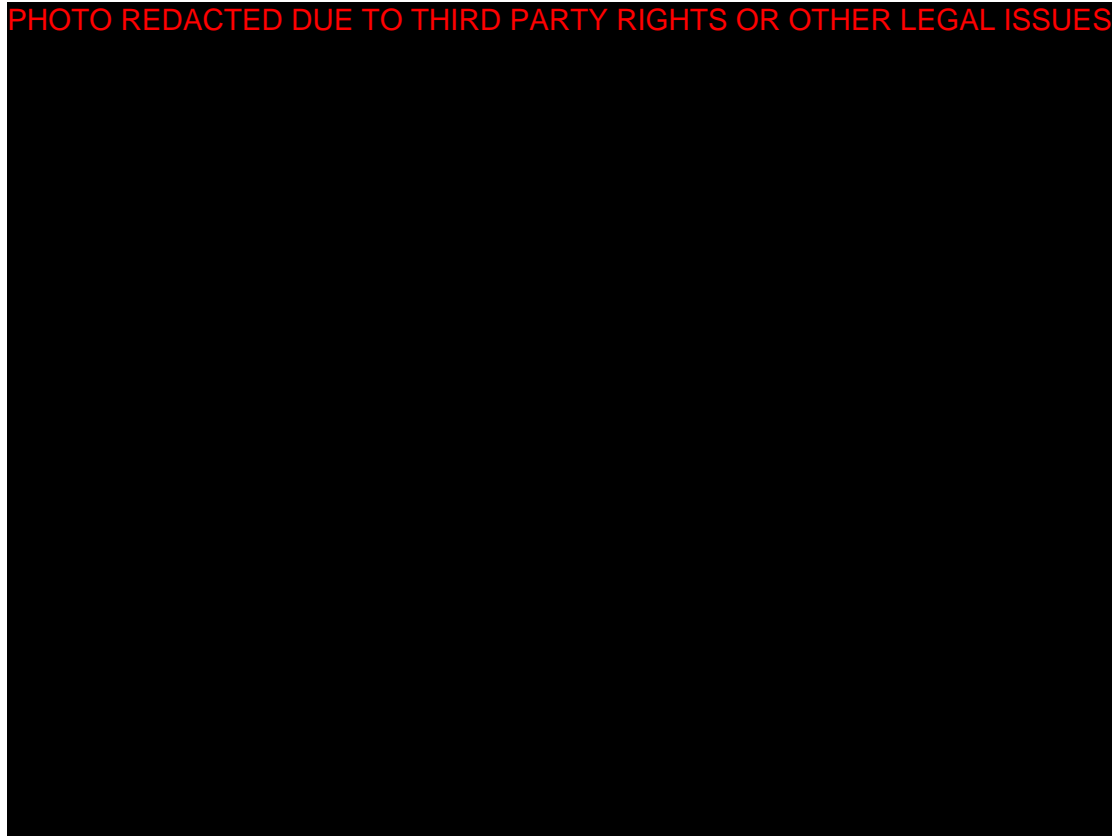


Figure 4: Bolt (sold by Sainsbury's) packaging (250ml)



As is clear from these labels the required warnings are often small and not “in the same field of vision as the name of the beverage”. Some of these warning messages stand out more than others—the ‘!’ symbol used on the Bolt can (Figure 4) appear, to us, to have a greater chance of drawing consumers to the warning, compared to the small print used on the other energy drink cans.

63. In addition to the standard EU labelling requirement, Energy Drinks Europe told us that their own code of practice for members also required that energy drinks included the statement “consume moderately” or a similar wording (such as “consume responsibly”) based on consumer understanding.¹²¹ This can be seen in Figures 1 to 3 on cans of Relentless, Monster Energy and Red Bull. However it is arguable that including the phrase “consume moderately” might weaken the message that these products are “not recommended for children”.

64. Despite the advice and warnings on energy drinks, a significant number of young people continue to consume these products. The Government’s 2018 Childhood Obesity Strategy, for example, notes that “research suggests that nearly 70% of UK adolescents (aged 10–17 years old) consume energy drinks, and that those who do so are drinking on average 50% more than the EU average for that age group”.¹²² Meanwhile, nearly a quarter of children aged 6–9 are energy drinks consumers.¹²³

121 Europe Energy Drinks Europe ([END0011](#)), para 12

122 HM Government, [Childhood obesity: a plan for action \(Chapter 2\)](#), p15

123 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

65. James Bielby, representing the Federation of Wholesale Distributors, argued that, since the products are “clearly labelled that they are not intended to be consumed by children”, the question of whether or not to consume them was simply “a decision to be made by their parents and the children themselves”.¹²⁴ He conceded, however, that the fact that some children do nevertheless consume energy drinks meant that the labelling “could perhaps be clearer”.¹²⁵

66. During our inquiry the Government launched its consultation on the sale of energy drinks to children, which included questions on whether changes to the labelling of energy drinks were needed.¹²⁶ Andrew Taylor from the Advertising Standards Agency told us that the evidence of efficacy of warning labels on other products was “not that strong, as people do not pay attention to them and do not really do anything”. He suggested that warning labels could even have a counterproductive effect, “as they may make the product [seem] a bit more dangerous and rebellious, which appeals to certain strands of young people”.¹²⁷ Anisa Ashraf, a student who told us that she regularly consumed energy drinks, summarised that “quite frankly teenagers do not care about the contents of energy drinks”, and that “children and teenagers are more fuelled to buy and consume something that they have been told not to”.¹²⁸ Dr Lake, also acknowledged that banning energy drinks might “suddenly make energy drinks even more attractive, because people think, “This is banned. Let’s have it?””.¹²⁹

67. Annabel Gipp, representing the British Dietetic Association, argued that the energy drinks industry should take more responsibility for actively promoting the message that energy drinks were not suitable for children, in the same way that the gambling industry now promoted anti-gambling addiction messages:

I think of this when I see a gambling advert on the television, on a billboard or on social media platforms with the message “When the Fun Stops, Stop”. We do not seem to get that warning with any kind of energy drink. Yes, it says on the can that they are not suitable for children, but that message is not promoted. If it were made more prevalent and more obvious in advertising campaigns, it might start to raise awareness that these drinks are not suitable for children. Then parents might start to question their consumption as well.¹³⁰

68. The British Soft Drinks Association told us that “we do not think that the best solution is necessarily simply to change a stipulated label on a can but to have a policy that would stop under-16s being able to buy [energy] drinks”.¹³¹ The pros and cons of banning the sale of energy drinks were discussed in Chapter 3.

69. Given that current labelling requirements arise from EU rules, we asked Steve Brine MP, the Parliamentary Under-Secretary of State for Public Health, whether leaving the European Union could provide an opportunity to change the UK’s approach in this area.

124 [Q96](#)

125 [Q97](#)

126 Department of Health and Social Care, [Consultation on proposal to end the sale of energy drinks to children](#), August 2018

127 [Q220](#)

128 Miss Anisa Ashraf ([END0004](#))

129 [Q31](#)

130 [Q52](#)

131 [Q99](#)

He told us that “if the consultation responses and other research suggest that making labelling clearer or more prominent would be beneficial, we will obviously look at the opportunities that taking back control would present for us to make labelling more effective”.¹³²

70. Labelling of food and drinks should be designed to help the consumer make an informed choice. In the case of energy drinks, there are concerns that children and their parents do not fully understand what they are consuming. Despite statutory labelling on energy drinks that they are not recommended for children, a significant number of young people continue to consume these products, and some in excessive amounts. While there is a risk of glamorising the product in the minds of younger consumers from warning labels, increasing the prominence of the message could help parents to make informed choices about what they buy for their children. We believe that the evidence threshold for including more prominent advisory notices is lower than for prohibiting their sale. We therefore recommend that the Government should use the opportunity of leaving the EU to introduce, within 18 months of exit day, additional labelling requirements to ensure that advisory messages are more prominent on energy drinks packaging and not merely in ‘the small print’.

Communicating caffeine and sugar content: spoonfuls and cupfuls?

71. EU Regulation 1169/2011 also specifies that high-caffeine products must be labelled with the caffeine content in milligrams per 100 millilitres.¹³³ Similar requirements exist for disclosure of sugar content as part of nutritional information.¹³⁴

72. The prospect of using teaspoons to help communicate the sugar content of energy drinks was raised by the Department of Health and Social Care, in the context of a potential update to the voluntary ‘red/amber/green’ front-of-pack food labelling scheme¹³⁵ introduced in 2013:

We want to [...] ensure we are using the most effective ways to communicate information to families. This might include clearer visual labelling, such as teaspoons of sugar, to show consumers about the sugar content in packaged food and drink.¹³⁶

73. Our witnesses agreed that there was a need for improved communication of the sugar and caffeine content of energy drinks, but they disagreed about how best this could be achieved. Dr Lake suggested that communicating sugar content in terms of spoonfuls of sugar, and caffeine with the equivalent number of cups of coffee, would be “really helpful”.¹³⁷ Similarly, Dr Kevin Hargin from the Food Standards Agency agreed that providing information in terms of spoonfuls and cups of coffee equivalents could “put things into perspective, particularly for comparative purposes [...] the average shopper would probably understand them better than milligrams”.¹³⁸

132 [Qq247–248](#)

133 [Council Regulation \(EU\) No 1169/2011](#)

134 [Council Regulation \(EU\) No 1169/2011](#)

135 Department of Health, [Guide to creating a front of pack \(FOP\) nutrition label for pre-packaged products sold through retail outlets](#), updated November 2016

136 Department of Health and Social Care ([END0007](#)), para 38.

137 [Q57](#)

138 [Qq228–229](#)

74. In contrast, Jerome Scott argued that “the word teaspoon has crept into the sugar debate but has no place in an intelligent inquiry”,¹³⁹ since it is “a historical cook’s measure for baking or cooking”.¹⁴⁰ He advocated instead that it would be more meaningful to young people if standard metric units were used. Similar points could be made in relation to ‘cups of coffee’ as a measure of caffeine content, given that the content and size of a cup of coffee varies, and an individual’s conceptualisation of a cup of coffee could therefore differ.

75. It could be argued that the need to describe caffeine content in more informal terms (such as its equivalent number of ‘cups of coffee’, rather than milligrams per 100 millilitres) was greater than for sugar. This is because the caffeine content of coffee itself was not routinely labelled for comparison.¹⁴¹ Indeed, regardless of the caffeine content, the EU labelling directive does not apply to “beverages based on coffee, tea, or coffee or tea extract where the name under which the product is sold includes the term ‘coffee’ or ‘tea’”.¹⁴²

76. Energy Drinks Europe argued that a lack of labelling of other products containing caffeine meant that it was difficult for consumers to keep track of their total caffeine intake per day. To address this, they recommended that all pre-packaged caffeine-containing foods should be required to disclose the caffeine content, and that coffee shops should provide menu board information on the approximate caffeine content per serving.¹⁴³ Meanwhile, the Government is currently consulting on introducing legislation to mandate calorie labelling for products sold in restaurants, cafes, and takeaways in England,¹⁴⁴ which could provide an opportunity to consider introducing requirements on caffeine content as well.

77. It is important that the sugar and caffeine content of energy drinks is clearly communicated to consumers. The Government should consult on whether introducing caffeine labelling requirements on all products containing caffeine (in milligrams per 100 millilitres) including average values per serving of tea and coffee in coffee shops, would help consumers make informed choices in relation to energy drinks as well.

139 Mr Jerome Scott (END0008), para 1.

140 Mr Jerome Scott (END0008), para 3.

141 See for example, Energy Drinks Europe (END0011).

142 Council Regulation (EU) No 1169/2011, Annex 2

143 Energy Drinks Europe (END0011) para 15

144 HM Government, *Childhood obesity: a plan for action (Chapter 2)*, p8; and Department of Health and Social Care, *Consultation on mandating calorie labelling in the out-of-home sector*, September 2018. The consultation was launched on 14 September and closes on 7 December 2018.

5 Marketing and advertising

78. In this Chapter we explore how energy drinks are marketed and advertised. Many of the submissions we received raised concerns about the way in which energy drinks were marketed and advertised, including through computer games, and brand association with sports events.¹⁴⁵ As the British Dietetic Association put it:

Advertising and brand loyalty play a large part in the desire to consume these products and young people report that they see these products being advertised on television, on the internet, through sports sponsorships, video games and in shops, despite pledges from advertisers to reduce this.¹⁴⁶

Marketing and the concept of ‘energy’ drinks

79. Witnesses pointed out that ‘energy drinks’ based on caffeine was a misnomer, as caffeine provided an illusion of energy. We were told that the use of the word ‘energy’ was associated with “positiveness”,¹⁴⁷ and some of our witnesses chose to refer to these products as “so-called energy drinks” (see Chapter 2).¹⁴⁸

80. We heard that children aged 10–14 had “strong brand awareness” of energy drinks.¹⁴⁹ We took evidence from the British Soft Drinks Association (BSDA), whose members include Monster, Rockstar, Red Bull and Relentless, to explore whether energy drinks were deliberately marketed at children. Oliver Strudwick at the BSDA, told us that:

there is no [energy drink] product out there that is designed or marketed in any way that is meant to appeal to children. Whether or not it does, I presume it comes down to the individual child, much as there is an appeal in any sort of food or drink product”.¹⁵⁰

We discuss later in this Chapter evidence from Monster Energy on their target audience. Similarly, James Lowman, representing the Association of Convenience Stores, told us that the attractiveness of energy drinks was “exactly the same equation as for every other set of products. It is a combination of appeal, brand and taste”.¹⁵¹

81. Nevertheless, Professor Viner, President, Royal College of Paediatrics and Child Health, was doubtful that marketing influence on children was merely “collateral damage”. He told us that:

[The industry] does not put in fluffy teddy bears or do that kind of advertising to children for energy drinks, but it is very much about young-adult, cool images. It is wrong to believe that that is not exceptionally attractive to children [...] The line by industry that it does not target children is true, but it is not relevant.¹⁵²

145 European Specialist Sports Drinks Association and European Specialist Sports Nutrition Alliance (ESSNA) ([END0009](#))

146 British Dietetic Association ([END0012](#))

147 [Q18](#) [Dr Lake]

148 [Q37](#) [Professor Viner]

149 Fuse and Teesside University ([END0028](#))

150 [Q85](#)

151 [Q83](#)

152 [Q47](#)

We heard that for children aged 10 or over, the “coolness and masculinity, or femininity” was attractive since “they are desperate to look at the adult world and want to be adults”.¹⁵³ Dr Lake told us that “for boys the bigger cans mimic cans of lager”,¹⁵⁴ and Annabel Gipp from the British Dietetic Association pointed to “anecdotal evidence of children who are 10 years old saying that they drink [energy drinks] because they are cool and because they want to fit in with their peers”.¹⁵⁵

Brand association

82. We also heard that several energy drinks companies associated themselves with sporting events through advertising and sponsorship. Dr Lake argued that “anything that is cool has a so-called energy drink. Music, extreme sports and car racing are all associated with these so-called energy drinks. It is not overt advertising, but it is there”.¹⁵⁶ We were told that Red Bull’s soapbox races¹⁵⁷ were “very appealing to children”, for instance.¹⁵⁸

83. Sam Pontrelli, representing Monster Energy, set out the company’s rationale for associating their product with racing as a way of reaching their target audience of adults:

Monster is a lifestyle brand—a motorsports brand, primarily. Most of our marketing dollars are centred around motorsports, such as Formula 1 and MotoGP. The followers of those sports are much older than the 18-year mark. The average MotoGP fan is in their 30s. [...] It is really a matter of our target market and what they like. What a 12-year-old likes is very different from what an 18 or 19-year-old likes. If we were to target our marketing at 12 or 13-year-olds, we would completely alienate our target market of 18 to 34.¹⁵⁹

84. Nevertheless, Monster Energy also had an athlete development programme aimed at 13 to 21-year-olds called Monster Army.¹⁶⁰ We asked Monster Energy about this apparent contradiction, and were offered the following explanation:

We pick the top amateurs in their sport and financially help them to become professionals [...] Most members of the Monster Army are in the motocross field. [...] The children supported by the programme] do not have any influence, because they are not being followed. Just imagine that your son or daughter is 12 years old and plays football. The only people going to that football game are the parents going to watch. It is very similar for the athletes in the Monster Army. There are no fans going to watch them play. It is strictly an athlete development programme.¹⁶¹

153 [Q48](#)

154 [Q63](#)

155 [Q47](#)

156 [Q45](#)

157 Red Bull, “[Soapbox Race](#)”, accessed 1 November 2018

158 [Q47](#) [Annabel Gipp]

159 [Q206](#)

160 Monster Energy, “[Monster Army](#)”, accessed 1 November 2018

161 [Q208](#)

Despite this, the Monster Army website states that athletes receive “exclusive access and deals to Monster Army apparel, hats, gear and of course drinks!”, and features a photograph of a young sportsman holding a trophy and a can of Monster Energy.¹⁶²

85. Darren Northcott, representing the NASUWT teaching union suggested that some parents might assume that a visible connection with sporting events meant that energy drinks were harmless, on the basis that advertising of other products was restricted:

Parents may think, “If a particular brand is advertising on an F1 car, that must be okay. They would not allow something bad to be used when advertising F1. They do not allow alcohol or tobacco in sports advertising, but they allow energy drinks, so that is fine”.¹⁶³

Gendered branding and marketing

86. We were told that “gendered branding and marketing” was “an influential factor in young people’s consumption of energy drinks”.¹⁶⁴ Annabel Gipp explained that:

when you look at the boy-specific advertising, it is all about sporting prowess, building muscle and power. Even the names of the drinks, such as Monster, Boost and Rockstar, are very emotive words young people will aspire to. There is a lot less female advertising. It has things like images of the Playboy bunny on the can, with very scantily clad women in the adverts.¹⁶⁵

87. Energy drinks companies claim that they do not directly advertise or promote their products to children, but several leading brands are nevertheless strongly associated with sporting events which children may find attractive. *The Government should keep under review whether it is appropriate for energy drinks to sponsor sporting events.*

88. We believe that some energy drinks company associations with sports could be construed as advertising to children and building brand awareness among those that their products are not suitable. We were not convinced by Monster Energy’s explanation of the contradiction between claiming that children are not the target audience for their brand and providing the Monster Army as an athlete development scheme for 13–21 year-olds. *While we have no wish to see the Monster Army programme discontinued, we recommend that the Advertising Standards Agency review the marketing and nature of this programme as a matter of urgency.*

Advertising

89. The Advertising Standards Agency (ASA) is the UK’s regulator of advertising. They told us that research “consistently shows that advertising has no more than a modest influence on children’s food preferences”.¹⁶⁶ Nevertheless, energy drinks that had a high sugar content must comply with the advertising restrictions on drinks that are high in fat, sugar or salt (HFSS products), which applied to broadcast media (such as television)

162 Monster Energy, “[Monster Army: About](#)”, accessed 1 November 2018

163 [Q52](#)

164 Fuse and Teesside University ([END0028](#))

165 [Q53](#)

166 Advertising Standards Authority ([END0013](#)), para 2.3.

and non-broadcast media (such as online).¹⁶⁷ The broadcast and non-broadcast codes of practice are maintained by the Broadcast Committee of Advertising Practice and the Committee of Advertising Practice, respectively, and are administered by the Advertising Standards Agency.

Broadcast media

90. Advertising of High in Fat, Salt or Sugar (HFSS) products is restricted in broadcast media in the following ways:

- HFSS products are banned in children’s TV programmes; and
- Advertising is banned around TV programmes that attract a “disproportionately high” child audience of 25%.

91. Beyond these requirements, the British Soft Drinks Association told us that they voluntarily did not market through any media where over 35% of the audience was under 16.¹⁶⁸ Energy Drinks Europe confirmed that its members abided by this rule.¹⁶⁹ When challenged in evidence by us whether 35% was too high and would rarely apply, Oliver Strudwick, representing the BSDA, told us that this was a “standardised industry mechanism that the regulators brought in”.¹⁷⁰ He undertook to look at what the effect would be of “dropping” the threshold. We have not received such an assessment at the time of writing our Report.

92. Andrew Taylor, representing the Committees of Advertising Practice, conceded that although the guidelines said one thing this did not always happen in practice: “if a product under the DH nutrient profiling model is classified as HFSS [...] it should not be directed at under-16s by the selection of media or the context in which it appears. In practice that is interpreted in different ways”.¹⁷¹

93. In 2015 the then House of Commons Health Committee called for greater controls on broadcast advertising of HFSS foods and drinks, including banning the advertising of such products before the 9pm ‘watershed’.¹⁷² In 2017 and 2018 the Health Committee and its successor Health and Social Care Committee made similar points.¹⁷³ The Government, in *Childhood obesity: a plan for action* (Chapter 2), undertook to consult before the end of this year “on introducing a 9pm watershed on TV advertising of HFSS products”. Such a consultation has not yet been launched.

94. We were told by the ASA that children’s exposure to energy drinks advertisements through broadcast media was decreasing quickly, with under-16 exposure to television adverts of this category of products now a third lower than in 2015.¹⁷⁴ This was driven in part by a decrease in the amount of time spent watching television in favour of non-broadcast media.

167 Advertising Standards Authority ([END0013](#)), para 2.2.

168 [Q105](#) and British Soft Drinks Association ([END0018](#)).

169 Energy Drinks Europe ([END0011](#))

170 [Q105](#)

171 [Q209](#)

172 Health Committee, First Report of Session 2015–16, *Childhood obesity - brave and bold action*, HC 465, para 53

173 Health Committee, Seventh Report of Session 2016–17, *Childhood obesity: follow-up*, HC 928 and Health and Social Care Committee, Eighth Report of Session 2017–19, *Childhood obesity: Time for action*, HC 882, para 41.

174 Advertising Standards Authority ([END0013](#)), para 2.6.

Non-broadcast media

95. Andrew Taylor, representing the Advertising Standards Agency, explained that there had been “a shift away” from television as the primary medium for children “towards the online space”.¹⁷⁵ As a result, in July 2017 rules were tightened to limit children’s exposure to advertising of HFSS products in non-broadcast media, including online spaces such as social media and computer games.¹⁷⁶ We were told that the restrictions fell under three headings:

- HFSS product advertising was banned on websites or pages aimed at children. Andrew Taylor explained that “for example, the content on a channel on YouTube that has fairy tales on it is inherently for children. It is inherently irresponsible to put an ad for an age-restricted product around that”.¹⁷⁷
- Individuals under 16 must not be targeted with HFSS adverts (such as through social media). Andrew Taylor explained that “in the same way as with a mailing list, if [advertisers] knowingly send an ad to someone who is under 16, it will breach the code. [...] They should do their [due] diligence to ensure [...] that anyone who is known to be under 16, or could reasonably be expected to be under 16, should be excluded from any dedicated targeting of individuals”.¹⁷⁸
- A third restriction related to adverts that were contextually targeted in media that was not explicitly aimed at children. In this case, Andrew Taylor explained, “there is a requirement under the code that the marketer takes reasonable steps to understand what the audience is. At best, it means using audience data, or other sources from which they can infer it, to ensure that they are not putting their ads in places where children make up a disproportionate part of the audience”.¹⁷⁹

96. The Committee of Advertising Practice (CAP) is currently reviewing the new non-broadcast rules, one year after they came into force, although it has not seen evidence of widespread or serious non-compliance so far and had received only “a handful of complaints”.¹⁸⁰ The CAP review is expected to be completed by the end of the year.

97. We recommend that the Committee of Advertising Practice consider whether to explicitly include high-caffeine products within the scope of its advertising approach to high-fat, sugar or salt content (HFSS) foods and drinks.

In computer games

98. Dr Lake told us about “gamification” with energy drinks, where the purchase of an energy drink in the real world could provide in-game benefits:

You are taking codes off the drink can to boost your character throughout the game. There is that gamification. It is built into the culture of those computer games.¹⁸¹

175 [Q190](#)

176 Advertising Standards Authority ([END0013](#)), para 2.7.

177 [Q209](#)

178 [Q209](#)

179 [Q209](#)

180 Advertising Standards Authority ([END0013](#)), para 2.8.

181 [Q45](#)

When we looked at the labelling on energy drinks in Chapter 4 we saw this with the Monster Energy can.

99. We were told that there was “clear gamification of energy drinks” in games that were labelled as being for over 18s, but that children as young as 10 years old were playing these games.¹⁸² The Advertising Standards Agency confirmed that, as far as it was concerned “If a marketer creates a game or has an agency create one for them [...] that is a marketing communication. It is exactly the same as an ad in a magazine, an ad on a poster and so forth. It would be covered by the same code”.¹⁸³

100. ‘Advergaming’, in contrast, refers to in-game advertising of products. Oliver Strudwick told us that BSDA members advertised in games that had age restrictions. In this case, the ASA explained that advertising within a game would be classified as “paid-for space” and would fall within the scope of the code, even if the game itself did not.¹⁸⁴

101. The British Dietetic Association provided us with some examples of prominent energy drink sponsorship or creation of video games:¹⁸⁵

- ‘Monster Energy Supercross’, a bike-racing game rated as suitable for ages three and above;¹⁸⁶
- ‘Red Bull Air Race: The game’ rated as suitable for age four and above;¹⁸⁷ and
- ‘Red Bull Snowboarding the Fourth Phase’ rated as suitable for ages 3 and above.¹⁸⁸

We were also told that Rockstar Energy Drink had provided power up codes for players of the game “Destiny 2”.¹⁸⁹

102. We asked Jenny Oldroyd, Deputy Director, Obesity, Food and Nutrition at the Department of Health and Social Care whether there should be further action to limit advertising in games or to stop children from accessing such games in the first place. She explained: “Many of the games mentioned are for the over-18s. Part of the issue we have is with enforcement of those restrictions”.¹⁹⁰

103. Although there are codes of practice in place that limit the advertising of energy drinks to children (on the basis that they are usually high-sugar products), we are concerned that children may nevertheless be exposed to advertisements aimed at older target audiences. We are particularly worried by ‘advergaming’ and ‘gamification’ as a route through which young people will be encouraged to buy energy drinks, including purchases influencing progress in a game itself. Weak controls on age verification in gaming make this possible, and other games clearly produced by and associated with energy drinks companies are freely available for children to play. We recommend that the Advertising Standards Agency hold an urgent review of age verification processes used in games to ensure that children are not exposed to advertisements and game

182 Fuse and Teesside University ([END0028](#))

183 [Q221](#)

184 [Q222](#)

185 British Dietetic Association ([END0026](#)) para 16

186 [Monster Energy Supercross](#), accessed 1 November 2018

187 [Red Bull Air Race](#), accessed 1 November 2018

188 Google Play, “[Snowboarding The Fourth Phase](#)”, accessed 1 November 2018

189 British Dietetic Association ([END0026](#)), para 16.

190 [Q269](#)

features aimed at adults. The ASA should report by the end of March 2019 specifically on the promotional games drawn to our attention (which are set out at paragraph 101 of our Report).

Conclusions and recommendations

Introduction

1. There is a lack of consistency in the age used to define a child when it comes to the marketing, sale, advertising and regulation of energy drinks. *In considering its responses to the consultation on restricting the sale of energy drinks, the Government should ensure that advertising restrictions and any restrictions on sale are aligned in order to give a consistent and clear message to young people and parents.* (Paragraph 11)

Effects of consumption on children

2. Many young people choose to consume energy drinks, and some consume them in significant volumes. Energy drink consumption is higher on average in the UK than in other countries in Europe. Nevertheless, young people consume caffeine from a variety of sources, including tea, coffee, cola and chocolate. (Paragraph 42)
3. Drinking energy drinks is correlated with young people engaging in other risky behaviours such as drinking alcohol and smoking, but it is not possible to determine whether there is any causal link. (Paragraph 43)
4. In our view, there is insufficient evidence as to whether children's consumption habits are significantly different for energy drinks compared with other caffeinated products such as tea and coffee. *We recommend that in the next six months the Government should commission independent research to establish whether energy drinks have more harmful effects than other soft drinks containing caffeine in order to support evidence-based decision-making. There are ethical questions related to undertaking research on the effects of energy drink consumption on children, which would need to be borne in mind when designing further research.* (Paragraph 44)

A statutory or a voluntary ban?

5. We acknowledge that energy drinks are consumed disproportionately by disadvantaged groups and there is evidence that consumption of energy drinks is associated with negative impacts on “executive functions” and may risk hyperactivity or lack of concentration. Any trend that undermines the educational attainment of disadvantaged groups needs to be tackled. Meanwhile, the pricing of some energy drinks means that it is easy for children to consume them in excess, beyond the suggested safe limits—and there is evidence that children are doing this. The current voluntary ban implemented by a number of retailers amplifies the message that energy drinks are associated with negative health, behavioural and dietary effects. We would support schools, local authorities and local communities working with businesses and vending machine providers on possible actions (e.g. exclusion zones) that could be used to reduce energy drink consumption among children, and in particular to reduce the extent to which they are consumed in excess. (Paragraph 59)
6. On balance, the current scientific evidence alone is not sufficient to justify a measure as prohibitive as a statutory ban on the sale of energy drinks to children. Single portions are within the European Food Safety Authority's suggested limit for

caffeine intake by children. This limit may be exceeded if other products containing caffeine are also consumed, or if energy drinks are consumed in excess, but the same can be said for many products available for sale to young people, including other drinks containing caffeine. However, we recognise that it might be legitimate for the Government to go beyond the quantitative evidence available and implement a statutory ban on the basis of societal concerns and qualitative evidence, such as the experience of school teachers. If the Government decides to introduce a statutory ban it should set out the reasoning for its decision. (Paragraph 60)

Labelling and advertising

7. Labelling of food and drinks should be designed to help the consumer make an informed choice. In the case of energy drinks, there are concerns that children and their parents do not fully understand what they are consuming. Despite statutory labelling on energy drinks that they are not recommended for children, a significant number of young people continue to consume these products, and some in excessive amounts. While there is a risk of glamorising the product in the minds of younger consumers from warning labels, increasing the prominence of the message could help parents to make informed choices about what they buy for their children. We believe that the evidence threshold for including more prominent advisory notices is lower than for prohibiting their sale. *We therefore recommend that the Government should use the opportunity of leaving the EU to introduce, within 18 months of exit day, additional labelling requirements to ensure that advisory messages are more prominent on energy drinks packaging and not merely in 'the small print'.* (Paragraph 70)
8. It is important that the sugar and caffeine content of energy drinks is clearly communicated to consumers. *The Government should consult on whether introducing caffeine labelling requirements on all products containing caffeine (in milligrams per 100 millilitres) including average values per serving of tea and coffee in coffee shops, would help consumers make informed choices in relation to energy drinks as well.* (Paragraph 77)

Marketing and advertising

9. Energy drinks companies claim that they do not directly advertise or promote their products to children, but several leading brands are nevertheless strongly associated with sporting events which children may find attractive. *The Government should keep under review whether it is appropriate for energy drinks to sponsor sporting events.* (Paragraph 87)
10. We believe that some energy drinks company associations with sports could be construed as advertising to children and building brand awareness among those that their products are not suitable. We were not convinced by Monster Energy's explanation of the contradiction between claiming that children are not the target audience for their brand and providing the Monster Army as an athlete development scheme for 13–21 year-olds. *While we have no wish to see the Monster*

Army programme discontinued, we recommend that the Advertising Standards Agency review the marketing and nature of this programme as a matter of urgency. (Paragraph 88)

11. *We recommend that the Committee of Advertising Practice consider whether to explicitly include high-caffeine products within the scope of its advertising approach to high-fat, sugar or salt content (HFSS) foods and drinks. (Paragraph 97)*
12. *Although there are codes of practice in place that limit the advertising of energy drinks to children (on the basis that they are usually high-sugar products), we are concerned that children may nevertheless be exposed to advertisements aimed at older target audiences. We are particularly worried by ‘advergaming’ and ‘gamification’ as a route through which young people will be encouraged to buy energy drinks, including purchases influencing progress in a game itself. Weak controls on age verification in gaming make this possible, and other games clearly produced by and associated with energy drinks companies are freely available for children to play. We recommend that the Advertising Standards Agency hold an urgent review of age verification processes used in games to ensure that children are not exposed to advertisements and game features aimed at adults. The ASA should report by the end of March 2019 specifically on the promotional games drawn to our attention (which are set out at paragraph 101 of our Report). (Paragraph 103)*

Annex: Education Centre survey

Q1: Which age group do you fit into?

| Answer | Number of respondents |
|--------------|-----------------------|
| 8–11 | 168 |
| 12–16 | 159 |
| Total | 327 |

Q2: Gender identity

| Answer | Number of respondents |
|-----------------------|-----------------------|
| Male | 148 |
| Female | 155 |
| Other gender identity | 11 |
| Prefer not to say | 19 |
| Total | 333 |

Q3: Do you think energy drinks can affect your health negatively?

| Answer | Number of respondents |
|-------------------|-----------------------|
| Yes | 222 |
| No | 72 |
| Don't know | 58 |
| Don't want to say | 26 |
| Total | 378 |

Q4: What is the main reason you drink energy drinks?

| Answer | Number of respondents |
|---------------------------------|-----------------------|
| Because of its taste | 98 |
| Because my friends do it | 14 |
| Because I need the extra energy | 70 |
| Because of its image | 3 |
| Other reason | 28 |
| I do not drink energy drinks | 162 |
| Total | 375 |

Q5: Have you ever experienced difficulty concentrating at school after having energy drinks in the morning?

| Answer | Number of respondents |
|--|-----------------------|
| Yes | 21 |
| No | 87 |
| I don't drink energy drinks in the morning | 246 |
| Don't know | 15 |
| Don't want to say | 8 |
| Total | 377 |

Q6: Have you ever experienced difficulty sleeping after having energy drinks in the evening?

| Answer | Number of respondents |
|--|-----------------------|
| Yes | 50 |
| No | 122 |
| I don't drink energy drinks in the evening | 174 |
| Don't know | 19 |
| Don't want to say | 10 |
| Total | 375 |

Q7: Do you think there is a difference between how much energy drinks affect adults compared to people your age?

| Answer | Number of respondents |
|-------------------|-----------------------|
| Yes | 207 |
| No | 85 |
| Don't know | 72 |
| Don't want to say | 6 |
| Total | 370 |

Q8: Of these alternatives, what main factor would make you more likely to drink energy drinks?

| Answer | Number of respondents |
|-----------------------------|-----------------------|
| Price | 47 |
| Availability in shops | 27 |
| Peer pressure | 16 |
| Taste | 135 |
| How it is promoted | 17 |
| I won't drink energy drinks | 129 |
| Total | 371 |

Formal minutes

Tuesday 27 November 2018

Members present:

Norman Lamb, in the Chair

Vicky Ford Stephen Metcalfe

Bill Grant Damien Moore

Darren Jones Martin Whitfield

Draft Report (*Energy drinks and children*), proposed by the Chair, brought up and read.

Ordered, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 103 read and agreed to.

Annex agreed to.

Summary agreed to.

Resolved, That the Report be the Thirteenth Report of the Committee to the House.

Ordered, That the Chair make the Report to the House.

Ordered, That embargoed copies of the Report be made available (Standing Order No. 134).

[Adjourned till Tuesday 4 December at 9.00am

Witnesses

The following witnesses gave evidence. Transcripts can be viewed on the [inquiry publications page](#) of the Committee's website.

Tuesday 12 June 2018

Question numbers

Darren Northcott, National Official (Education), NASUWT Teaching Union; **Dr Amelia Lake**, Associate Director, Fuse, The Centre for Translational Research in Public Health, and Reader in Public Health Nutrition, Teesside University; **Annabel Gipp**, Specialist Paediatric Eating Disorders Dietitian, British Dietetic Association; and **Professor Russell Viner**, President, Royal College of Paediatrics and Child Health.

[Q1–71](#)

Oliver Strudwick, Public Affairs Manager, British Soft Drinks Association; **James Lowman**, Chief Executive, Association of Convenience Stores; and **James Bielby**, Chief Executive, Federation of Wholesale Distributors.

[Q72–129](#)

Tuesday 10 July 2018

Andrew Taylor, Regulatory Policy Executive, Committees of Advertising Practice; **Dr John Thompson**, Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment; **Dr Kevin Hargin**, Head of Food Hygiene and Animal Health Policy Unit, Food Standards Agency; **Dr Ashley Roberts**, Senior Vice-President, Food and Nutrition Group, Intertek, and independent toxicologist and adviser to Monster Energy; and **Sam Pontrelli**, Senior Vice-President, Marketing, Monster Energy.

[Q130–233](#)

Steve Brine MP, Parliamentary Under-Secretary of State for Public Health and Primary Care, Department of Health and Social Care; and **Jenny Oldroyd**, Deputy Director, Obesity, Food and Nutrition, Department of Health and Social Care.

[Q234–272](#)

Published written evidence

The following written evidence was received and can be viewed on the [inquiry publications page](#) of the Committee's website.

END numbers are generated by the evidence processing system and so may not be complete.

- 1 Advertising Standards Authority ([END0013](#))
- 2 Aldi ([END0036](#))
- 3 Asda ([END0039](#))
- 4 Association of Convenience Stores ([END0017](#))
- 5 Benjamin Collins ([END0033](#))
- 6 Boots ([END0042](#))
- 7 British Dietetic Association ([END0012](#)), ([END0026](#))
- 8 British Retail Consortium ([END0006](#))
- 9 British Soft Drinks Association ([END0018](#))
- 10 Department of Health and Social Care ([END0007](#)), ([END0041](#))
- 11 Dr Ashley Roberts ([END0019](#))
- 12 Energy Drinks Europe ([END0011](#)), ([END0025](#))
- 13 European Specialist Sports Nutrition Alliance (ESSNA) ([END0009](#))
- 14 Federation of Wholesale Distributors ([END0005](#))
- 15 Fuse, The Centre for Translational Research in Public Health ([END0002](#)), ([END0028](#))
- 16 Institute of Alcohol Studies ([END0031](#))
- 17 Irish Beverage Council ([END0016](#))
- 18 Jamie Oliver Food Foundation ([END0014](#)), ([END0029](#))
- 19 Keele University ([END0001](#))
- 20 Miss Anisa Ashraf ([END0004](#))
- 21 Monster Energy Company ([END0020](#)), ([END0024](#)), ([END0032](#))
- 22 Morrisons ([END0038](#))
- 23 Mr Jerome Scott ([END0003](#)), ([END0008](#))
- 24 NASUWT ([END0022](#)), ([END0027](#))
- 25 NHS England ([END0030](#))
- 26 Paul Milton ([END0015](#))
- 27 Ross Carruthers ([END0023](#))
- 28 Royal College of Paediatrics and Child Health ([END0010](#))
- 29 Sainsbury's ([END0021](#)), ([END0040](#))
- 30 Tesco ([END0034](#))
- 31 The Co-op Group ([END0035](#))
- 32 Waitrose ([END0037](#))

List of Reports from the Committee during the current Parliament

All publications from the Committee are available on the [publications page](#) of the Committee's website. The reference number of the Government's response to each Report is printed in brackets after the HC printing number.

Session 2017–19

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|------------------------|---|---------|
| First Report | Pre-appointment hearing: chair of UK Research & Innovation and executive chair of the Medical Research Council | HC 747 |
| Second Report | Brexit, science and innovation | HC 705 |
| Third Report | Genomics and genome editing in the NHS | HC 349 |
| Fourth Report | Algorithms in decision-making | HC 351 |
| Fifth Report | Biometrics strategy and forensic services | HC 800 |
| Sixth Report | Research integrity | HC 350 |
| Seventh Report | E-cigarettes | HC 505 |
| Eighth Report | An immigration system that works for science and innovation | HC 1061 |
| Ninth Report | Flu vaccination programme in England | HC 853 |
| Tenth Report | Research integrity: clinical trials transparency | HC 1480 |
| Eleventh Report | Evidence-based early years intervention | HC 506 |
| First Special Report | Science communication and engagement: Government Response to the Committee's Eleventh Report of Session 2016–17 | HC 319 |
| Second Special Report | Managing intellectual property and technology transfer: Government Response to the Committee's Tenth Report of Session 2016–17 | HC 318 |
| Third Special Report | Industrial Strategy: science and STEM skills: Government Response to the Committee's Thirteenth Report of Session 2016–17 | HC 335 |
| Fourth Special Report | Science in emergencies: chemical, biological, radiological or nuclear incidents: Government Response to the Committee's Twelfth Report of Session 2016–17 | HC 561 |
| Fifth Special Report | Brexit, science and innovation: Government Response to the Committee's Second Report | HC 1008 |
| Sixth Special Report | Algorithms in decision-making: Government Response to the Committee's Fourth Report | HC 1544 |
| Seventh Special Report | Research integrity: Government and UK Research and Innovation Responses to the Committee's Sixth Report | HC 1562 |
| Eighth Special Report | Biometrics strategy and forensic services: Government's Response to the Committee's Fifth Report | HC 1613 |

Ninth Special Report

An immigration system that works for science
and innovation: Government's Response to the
Committee's Eighth Report

HC 1661