



# Digital marketing of health-harming products to children in Ireland – options for further protections

A report developed by the Institute of Public Health for the Online Health Taskforce

July 2025

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Report designed by Leah Friend.

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## Glossary

ASA	Advertising Standards Authority
AVMSD	Audiovisual Media Services Directive
CSO	Central Statistics Office
DSA	Digital Services Act
ESPAD	European School Survey Project on Alcohol and Other Drugs
EU	European Union
GRAI	Gambling Regulatory Authority of Ireland
HBSC	Health Behaviour in School-aged Children
HFSS	High fat, salt, and sugar
HSE	Health Service Executive
MCC	Merchant Category Codes
NACOS	National Advisory Council for Online Safety
NEHS	National Environmental Health Service
OSC	Online Safety Code
OSMR	Online Safety and Media Regulation
PEGI	Pan European Gaming Information
UN	United Nations
VLOPs	Very Large Online Platforms
VLOSEs	Very Large Online Search Engines
WHO	World Health Organization

# Executive Summary

## Context

Children in Ireland engage with a variety of digital marketing techniques promoting health harming products. Engagements focus on brand awareness and appeal, stimulate online purchases and harvest data to inform algorithms to drive further targeted marketing. Engagement with digital marketing in childhood is significant in shaping children's perception and use of health harming products, including those that cannot legally be sold to them.

## Scope of report

This report examined children's engagement with marketing of specific health harming products, namely:

- tobacco
- e-cigarettes
- alcohol
- sunbeds
- gambling
- high fat, salt, sugar (HFSS) foods and drinks

## What we do we know about children's engagement with digital marketing of health harming products?

Data on children's engagement with digital marketing of health harming products were severely limited. Questions on online purchases and marketing were not generally included in government-funded surveys of children.

Platform observability in relation to digital marketing to children is currently negligible.

For products that cannot legally be sold to children (tobacco, e-cigarettes, alcohol, gambling, and sunbeds), systems were not fully developed to effectively monitor compliance in respect of online sales.

Some data were available on engagement of children with digital marketing of e-cigarettes, gambling and HFSS. These all indicated high levels of exposure. The CLICKBITE study represents the most comprehensive data on digital marketing of HFSS served to children in Ireland.

## How is children's engagement with digital marketing of health harming products regulated in Ireland?

The EU Audio Visual Services Media Directive and Digital Services Act set the basis for regulation of online content in Ireland. Coimisiún na Meán oversees the legally binding Online Safety Code which mandates video-sharing platforms to implement age verification, parental controls, and reporting systems. The Online Media Safety Regulation Act empowers Coimisiún na Meán to enforce rules on marketing to children and require age verification.

The Advertising Standards Authority in Ireland, funded by the advertising industry, enforces the Code of Standards for Advertising and Marketing Communications. The Code sets non-statutory guidelines for commercial marketing communications across broadcast, print, digital, and sales promotions.

Department of Health legislation specific to tobacco, e-cigarettes, and sunbeds sets the minimum legal age of sale for these products and establishes some rules on allowable marketing. Legislation covers various marketing aspects including product packaging, point of sale display and signage. The HSE National Environmental Health Service oversees compliance and enforcement in physical premises and the online marketplace through market surveillance legislation. However, in practice there are enforcement challenges online.

There were no data available on age-gating operating on websites selling these products or how age verification was being applied.

The Public Health (Alcohol) Act 2018 restricts certain elements of youth-focussed marketing, but this does not extend to digital marketing.

Department of Justice legislation specific to alcohol and gambling sets the minimum legal age of sale for these products. The Gambling Regulation Act 2024, when fully commenced, will deliver significantly more protections for children but the timeline for introduction of the child-focussed measures has not been announced. The Gambling Regulatory Authority of Ireland has a defined role in developing protections for children from gambling sales and marketing.

There is very limited attention paid, or regulatory mechanisms in place, to address potential health harms for children who play video games (e.g. loot-boxes and other in-game purchases), as these are not currently recognised as gambling.

There is currently no legislation which restricts online sale or marketing of HFSS and drinks to children. The World Health Organization has urged countries to take further regulation of digital marketing of HFSS to children.

Digital platforms publish their own company codes in terms of 'inappropriate content'. A preliminary assessment of the codes used by YouTube, Snapchat, TikTok, Instagram, and Roblox showed that these were generally consistent in commitments to restrict marketing content and child targeting for tobacco, alcohol, and gambling but less consistent in relation to sunbeds, e-cigarettes, and HFSS. There were no data available on compliance.

### **What do government policies/strategies say about addressing digital marketing of health harming products to children?**

Departmental strategies establish a strategic direction and provide a mandate for application of resource to statutory systems of monitoring, evaluation, and reporting.

The 2025 Programme for Government states that this Government will support the work of Coimisiún na Meán on online safety, enhance age verification and implement the recommendations of the Online Health Taskforce. The Programme also commits to introduce measures to reduce the appeal of e-cigarettes to children, ban sale of energy drinks to children, and explore ways to ban commercial sunbed use.

We identified two departmental strategy documents (from a set of nine analysed) that had stated any actions to address children's engagement with digital marketing of health harming products – these were Young Ireland (Department of Children) and A Healthy Weight for Ireland (Department of Health).

### **What is needed to better protect children from digital marketing of health harming products?**

The evidence suggests that statutory systems of regulation, enforcement and monitoring are struggling to keep pace with digital marketing of health harming products. This can expose

children to risks to their health, both in terms of creating new channels for them to access age-restricted products and in terms of commercial content generating brand awareness and appeal.

We propose four cross-cutting priorities alongside specific actions for each product type.

**The four cross-cutting priorities are:**

*(1) Political and policy leadership*

A government-led strategic approach to protect children from digital marketing of health harming products is needed. Clear leadership and a formal policy mandate are needed. Specific policy targets to reduce online sales to children and to reduce child exposures to marketing online should feature within government department strategies in health, children, and communications. Policy indicators, evaluation frameworks, and formal reporting mechanisms must be established. The approach must recognise that a reliance on industry codes, and other forms of self-regulation, are insufficient.

*(2) Reform of legislative and enforcement mechanisms*

Existing regulatory mechanisms are evolving, but fragmented, and there is no unified regulatory goal. Statutory mechanisms to restrict online marketing to children will be more effective if integrated and consolidated. Relevant government departments must be supported by specialist legal expertise to inform policy officials on matters relating to jurisdictional scope to legislate, enforce and adjudicate and disclosure obligations. The government should commission expert advice on best options to restrict data harvesting and targeting in digital marketing of health harming products to children. A needs assessment should be conducted to evaluate the human and fiscal resources, training, technology, and collaborative working arrangements needed for agencies working on compliance and enforcement. Competent authorities for enforcement should be provided with adequate investigative powers and legal clarity on data usage relating to children's engagement with online sales and marketing.

*(3) Better age verification*

Current online age verification measures generally lack integrity. A step change is needed in the methods used by retailers and digital platforms to demonstrate sufficient proof that the purchaser is over the age of 18. The optimal government approach, and the pathway to achieve the changes necessary, is not clear at this time. This should be progressed as a priority with careful consideration of children's right to privacy, data protection and ethics.

*(4) Establishing systems of monitoring and observability.*

Children's experience with digital sales and marketing of health harming products should be measured within government surveys of children's health and wellbeing. In addition, children's experiences should be explored through qualitative research exploring how marketing affects their preferences, brand awareness, purchase choices, and understanding of risk. Minimum standards of platform observability relating to marketing of health harming products to children should be agreed by government and a digital observatory should be established to provide independent data using the best available technology and expertise.

Detailed recommendations are also provided in relation to each product type (tobacco, e-cigarettes, alcohol, gambling, sunbeds, and HFSS foods and drinks) in the tables at the end of this report.

# Introduction





# Introduction

Children in Ireland spend significant amounts of time on digital platforms (1, 2). Despite age restrictions, most children over the age of eight have 'social media' type accounts (1). This pattern of use results in children engaging with digital marketing of potentially health harming products, including those that cannot yet legally be sold to them. Children who are active on digital platforms are not merely passive recipients of marketing content. Data harvested online is used to inform algorithms for targeting of other products in terms of content, frequency, messaging, and cross-branding.

Digital marketing can be defined as *"promotional activity, delivered through a digital medium, which seeks to maximise impact through creative and/or analytical methods"* (3). Children are exposed to digital marketing through paid advertising like 'tappable buttons' directly linking through to point of sale, sponsored creator or influencer content, and creator or influencer content that includes or is about harmful products but is not sponsored or paid for.

Digital marketing can present health harming products to children in a way that is highly appealing, targeted to young people's interests and desires, growing brand awareness, amplifying peer influences, and shifting their perception of risk. Children who use health harming products experience direct harms to their health while they are still children and others are 'primed' towards use of products that will increase their risk of ill-health later in life. There are clear associations between early use of health harming products and damage to physical, mental, and emotional health.

This report examines evidence on digital marketing of a specific set of health harming products online to children. These products are tobacco, e-cigarettes, alcohol, gambling, sunbeds, and high fat/salt/sugar foods (HFSS).

Methods and results are presented below as three core questions addressed in our report:

## 1 What do we know about the nature of digital marketing of health harming products to children in Ireland?

- How we examined this question
- What we found

## 2 What is the government's approach to children's engagement with digital marketing of health harming products in Ireland?

- How we examined this question
- What we found

## 3 What is needed to better protect children from digital marketing of health harming products?

- **Priority 1** – Political and policy leadership
- **Priority 2** – Reform of legislative and enforcement mechanisms
- **Priority 3** – Better age verification
- **Priority 4** – Better systems of monitoring and observability
- Specific actions relating to tobacco, e-cigarettes, alcohol, sunbeds, gambling, and HFSS foods

## 1

**What do we know about the nature of digital marketing of health-harming products to children in Ireland?**





# 1. What do we know about the nature of digital marketing of health-harming products to children in Ireland?

## 1.1 How we examined this question

Historically, children's engagement with marketing has been assessed by surveys asking children about their awareness of marketing – for example, their recollection of TV, radio, or magazine adverts, their brand awareness and perception, and their identification of sponsorship. Applying traditional survey methods to children to measure their engagement with digital marketing has merit, but it is severely limited and is reliant on memory recall. Digital marketing is seamlessly integrated into digital feeds, where the paid content - even if disclosed - is not easily distinguishable from other kinds of content. Self-reported measures of exposure do not consider how the algorithmic models of digital platforms mediate exposure. The nature of digital marketing means that children, and younger children in particular, may not always be aware that content is commercially motivated.

Optimally, children's engagement with digital marketing should be assessed through the use of a digital tool which unobtrusively collects all the marketing presented to children on a range of platforms. The use of screen-capturing technology allows for data collection directly from the perspective of children and overcomes limitations with recall and social desirability bias seen in other studies that examine the online world (4, 5). However, there is no such system in operation in Ireland.

Government departments commission a number of surveys on children's health and wellbeing. We examined data from the following surveys of children and adolescents in Ireland:

### *Health Behaviour in School-aged Children (HBSC) study*

The Health Behaviour in School-aged Children (HBSC) survey is a WHO collaborative cross-national study that monitors the health behaviours, health outcomes, and social environments of school-aged children every four years. HBSC Ireland surveys school-going children aged 9-18 years. The study is conducted by the HBSC Ireland team, based at the Health Promotion Research Centre, University of Galway.



The 2022 HBSC study included 9,071 students from 191 primary and post-primary schools across Ireland.

### *European School Survey Project on Alcohol and Other Drugs (ESPAD)*

European School Survey Project on Alcohol and Other Drugs (ESPAD) is a collaborative effort of independent research teams in more than 40 European countries and the largest cross-national research project on adolescent substance use in the world. The overall aim of the project is to repeatedly collect comparable data on substance use among 15-16-year-old students.



The 2024 ESPAD study included 5,587 students aged 15-16 years old in 28 post-primary educational settings (6).

### *Growing Up in Ireland (GUI)*

Growing Up in Ireland (GUI) is the national longitudinal study of children and young people, a joint project of the Department of Children, Disability and Equality and the Central Statistics Office (CSO).



For over 17 years, the study has followed the progress of two groups of children: starting with over 8,000 9-year-olds (Cohort '98) and 10,000 9-month-olds (Cohort '08). The members of Cohort '98 were aged 25 at their last wave of data collection (currently 26 years old), and those of Cohort '08 will be aged 17/18 in their next wave of data collection (currently 16 years old). Recruitment of a new group of 9-month-olds, Cohort '24, started in September 2024. For this report, we used data from Cohort '08 Wave 5 @9 years (2017/2018), Cohort '08 Wave 6 @13 years (2021/2022), and Cohort '98 Wave 3 @17-18 years (2015/2016).

### *National Advisory Council for Online Safety*

In 2019, the National Advisory Council for Online Safety (NACOS) commissioned a national survey to provide baseline information regarding:



- Children, youth, and risks/safety in use of the internet
- Parents and online safety
- Adults and online safety

A nationally representative sample of 765 children, aged between 9 and 17 years, and one of their parents, were surveyed. In addition, a further representative sample of the adult population (387 adults) was interviewed regarding online safety matters. The research with children and parents was based primarily on the EU Kids Online questionnaire. The report was published in 2021 (2).

### *CyberSafeKids*

CyberSafeKids is an Irish charity solely committed to equipping children with the skills and knowledge to navigate the online world with confidence, resilience, and safety. Although not nationally representative, CyberSafeKids collected data in the 2023-24 academic year from over 7,000 8-14-year-olds across Ireland to determine how children spend their time online, levels of access, and children's experiences, and thus, is a rich source of data (1).



We engaged directly with parties involved in the design and delivery of these surveys to surface as much reliable and relevant data as possible to build a profile of data on children's engagement with digital marketing of health harming products in Ireland.

## 1.2 What we found

### *Children's online worlds and digital marketing*

Children in Ireland have near-universal internet access, with device ownership and screen time increasing significantly with age (1, 2). By age 13, over 90% have their own smartphone and spend over an hour online daily, often across multiple devices (1). The most common online activities include playing video games, watching videos, and chatting with friends (1). Screen time increases on weekends, and many children report conflicts, reduced offline activities, and even distress related to excessive online use. While parents set rules about content and screen time, 40% of children say these rules don't effectively limit their internet activity (2). A significant portion of children, especially those aged 12–14, report unrestricted access and minimal rules around online engagement (1, 2, 7). It is not known the degree to which parents are aware of, or concerned about, their children's engagement with digital marketing of health harming products online.

Social media platforms are popular with children, including with those below the platforms' minimum age requirements. By age 13, 90% report having their own 'social media profile' (7). Among 8–12-year-olds, 82% have social media or messaging type accounts, with YouTube, WhatsApp, Snapchat, and TikTok being the most popular platforms (1).

Digital marketing takes many forms and is delivered through many channels. These include gamification/advergaming, influencer marketing, sponsored content, data collection and personalised marketing, persuasive design, smart toys, and user-generated content. We could not locate any data that adequately characterised the digital marketing served to children by different marketing techniques.

### *Tobacco and children – online sales and digital marketing*

**The problem:** Although tobacco use among children in Ireland has declined significantly over the past 20 years, just under 5% of 10- to 17-year-olds report that they are current tobacco smokers (8). Two percent of 15-16-year-olds report smoking daily, and 13% first smoked at age 14 or 15 (6). Review-level evidence concludes that exposure to tobacco content on digital platforms is associated with an increased likelihood of youth smoking (9). Governments have succeeded in reducing the visibility and brand awareness of tobacco among children. This was achieved by progressive regulation of the product packaging and marketing and its retail to make the product less accessible and appealing to children.

However, the tobacco industry still target youth through product placement. A study carried out in the US in 2019 found that Netflix streaming programmes depicted more smoking imagery than broadcast shows (10). Images of tobacco use were prevalent in popular programmes, such as "Stranger Things", targeted at teens and young adults on global streaming platforms (10).

### Case Study



The tobacco industry also targets children through sports sponsorship. Formula One (F1) sponsorship enables tobacco companies to promote their messages and brands to the sport's increasingly younger global fanbase via race footage, social media, and other promotional activities linked to the sport (11). They also reach viewers of Netflix's reality series, "Formula 1: Drive to Survive," who may not watch the sport itself. Even F1 Kids, designed for the sport's youngest audience and featuring youth commentators and animated avatars, includes branding from British American Tobacco (12). A new collaboration between F1's rightsholder and LEGO could further strengthen young children's interest in the sport, as the iconic toy company plans to include some F1-themed sets in its Duplo line, which is aimed at preschoolers. Already, more than 4 million American and European children between the ages of 8 and 12 reportedly follow the sport (12).

**The data:** There were no data to estimate children's online purchases of tobacco. Websites selling tobacco online appeared, on preliminary inspection, to operate variable age-gating mechanisms for viewing the products for sale, and some presented branded tobacco packaging. However, this has not been formally assessed. There were no representative data available on children's engagement with digital marketing of tobacco products in Ireland.

### *E-cigarettes and children – online sales and digital marketing*

**The problem:** Vaping, or e-cigarette use, is more common smoking among children. Around one in five 12-17-year-olds report having ever used e-cigarettes, with 10% of boys and 16% of girls reporting that they have used e-cigarettes in the last 30 days (8). E-cigarette use is associated with an increased risk of subsequent tobacco use (13). E-cigarette use is associated with respiratory issues, mental ill health, and other substance use in children (13). There are growing concerns about the addition of new licit and illicit substances to vapes (14). Review-level evidence has concluded that the use of youth-targeted online advertising, including influencers, colourful packaging, and sweet flavours, can significantly influence uptake among children (9, 15).

The tobacco and vape industry uses online marketing techniques to appeal directly to young people (16, 17). Such techniques include using popular social media influencers, bright colours, youth-appealing themes, and products with sweet flavours (18-20). According to the Campaign for Tobacco-Free Kids' report #SponsoredByBigTobacco, content promoting e-cigarettes, nicotine pouches and heated tobacco products from British American Tobacco and Philip Morris International has been viewed more than 3.4 billion times on social media platforms (21). Additionally, the marketing content for three e-cigarette brands – Vuse, Velo, and IQOS – has reached over 150 million youth under the age of 25 years.

## Case Study



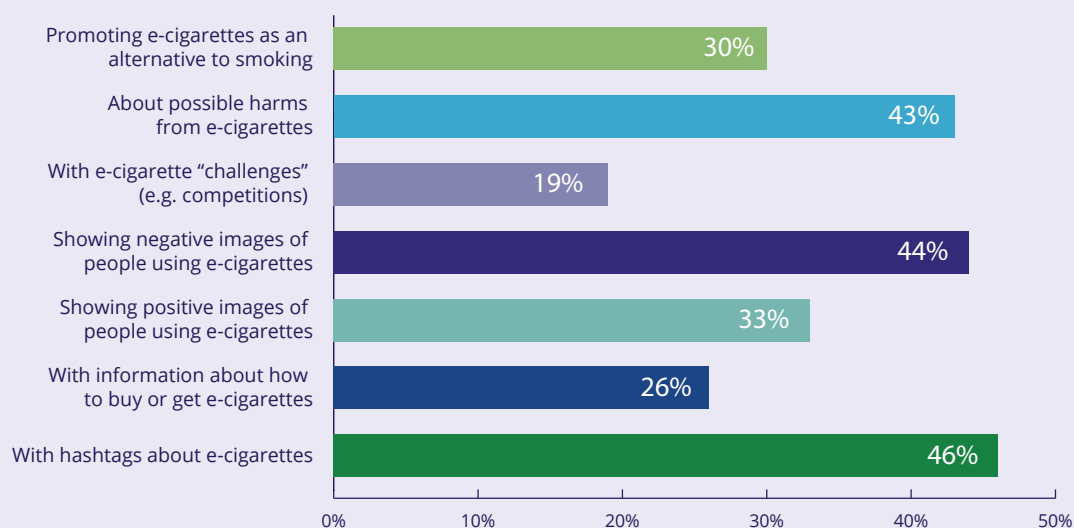
In 2019, researchers from Stanford University analysed JUUL's promotional efforts over its first three years on the market including its advertising in web, e-mail, and social media platforms (Instagram, Facebook, Twitter) (22). JUUL is an electronic vaping device which resembles a USB memory stick and at its peak popularity in late 2018 and early 2019, JUUL sales made up over 70% of the US e-cigarette market. The study findings showed that JUUL's advertising imagery in its first six months on the market was deliberately youth oriented. For the next 2.5 years it was more muted, but the company's advertising was widely distributed on social media platforms frequented by children, was amplified by hashtag extensions, and promoted by compensated influencers and affiliates.

In 2023, Juul agreed to pay \$462 million to settle lawsuits from six states for allegedly enticing children to buy its nicotine inhaling products through advertising. This followed an agreement by JUUL the previous year to pay \$438.5m to end a probe of its advertising to underage buyers.

JUUL is not the only e-cigarette company who have been accused of targeting children through their advertising practices. Vuse, the leading e-cigarette brand in the United States in 2023, use themes in their social media posts that are appealing to and likely promote youth use, including creativity and innovation, individuality or freedom, arts and music, nature, technology, and alcohol imagery (23).

**The data:** There were no data to estimate the extent of children's online purchase of e-cigarettes. There were some survey data available on children's self-reported awareness of e-cigarette content online in the 2024 ESPAD study (6). Nearly half of 15- to 16-year-olds reported viewing e-cigarette-related content online on a daily basis (6). One in four were presented with information on purchasing e-cigarettes and one in five were presented with information on 'vaping challenges' (6). Overall, the messaging about e-cigarettes online served to teenagers was mixed, including both positive and negative representations of e-cigarette use. The extent to which the content was directly or indirectly commercially funded was not clear.

**Figure 1. ESPAD 2024: Social media posts seen on an average day, by 15-16-year-olds**



### *Alcohol and children - online sales and digital marketing*

**The problem:** Although alcohol use among children in Ireland is declining, over a third of 15–16-year-olds report drinking in the past month, and over one in ten have been drunk (6). There is consistent evidence to show that the greater the level of exposure to, or engagement with, digital alcohol marketing, the more likely young people are to drink alcohol (24). A study of 686 13-17-year-olds was conducted by NUI Galway in 2015 (25). Researchers found that 77% of the children reported exposure to alcohol marketing online and very large minorities seem to have been specifically invited to engage with alcohol marketers on social media, with 35% reporting that they were invited to “like” an alcohol brand, 30% invited to like an event sponsored by an alcohol brand, and 21% invited to attend such an event. The majority of children were exposed to more than four types of marketing within the past week. This level of exposure was associated with an almost three-fold increase in the likelihood of drinking and an almost four-fold increase in the self-reported intention to drink within the next year. The average child was exposed to seven types of alcohol marketing, and this level of exposure was associated with heightened risks of dangerous drinking behaviours, including a more than 400% increase in the risk of binge drinking and drunkenness.

**The data:** There were no recent data to estimate the extent of online purchases of alcohol by children in Ireland. In 2018, HBSC included one question on the sourcing of alcohol. The question related to the child’s last drinking occasion only and included 11 response items, one of which was ‘order it online or by phone and delivered’. The survey found that 0% of 10-17-year-olds ordered it online or by phone and delivered. There were no representative survey data on children’s experience with digital alcohol marketing in Ireland.

### *Gambling and children – online sales and digital marketing*

**The problem:** Gambling among children in Ireland is becoming a more recognised issue. Nearly a third of 15–16-year-olds reported gambling for money in the past year (6). Online gambling, particularly linked to sports betting, is associated with excessive and problem gambling behaviours in child populations (6). Gambling is heavily marketed across multiple media including influencer content, brand placements, and sponsorship.

Playing video games in childhood is associated with both online gaming and gambling frequency at age 20 – an association demonstrated through analysis of longitudinal data on children in Ireland (26). Online gaming is popular among youth in Ireland, with over a quarter of 15-16-year-olds reporting that they spend too much time gaming (6). Loot boxes are a feature of online games – the term loot box refers to a diverse set of randomised virtual items bought with real world money. They are promoted by the games industry as a ‘surprise and delight’ game feature. However, research suggests that games containing loot boxes may be exploitative, lack transparency, create unfair in-game advantages, and introduce children to engage with gambling-like mechanisms.

#### **Case Study**

In the UK, ads for the gambling firm Ladbrokes were banned by the Advertising Standards Authority for being likely to be of strong appeal to under-18s. The ads were broadcast in December 2024 and marketed a new reward system called “Ladbucks”, which offered free bets, spins, and arcade game plays. The ASA said it considered the term “Ladbucks” had strong similarities to the in-game currencies of several online games popular with under-18s, such as Robux in Roblox and V-bucks in Fortnite. It also said the imagery and the application of the coin in the ads, was “depicted in a manner which was similar to features in video games popular with children”.





**The data:** ESPAD 2024 found that betting on sports or animals (horses, dogs etc.) was the most frequently reported betting activity (10.5%), followed by lotteries (7.2%), card/dice playing (5.1%), and slot machines (3.7%) among 15-16-year-olds who gambled online for money in the previous 12 months.. Male students were more likely than female students to report gambling online for money at least once in the previous 12 months (slot machines 5.1% vs 2%; card/dice 6.5% vs 3.2%; betting on sports and animals 13.2% vs 7.6%, all  $p < 0.001$ ) (6). There were no data to estimate the numbers of children holding betting accounts or on the spend by children on gambling online. There were no data available on children's use of loot boxes or other in-game monetised games of chance.

There were no representative estimates of children's engagement with digital marketing of gambling products in Ireland. However, a study on children's exposure to gambling marketing through live sports on TV and social media in Ireland concluded that children aged 14–24 encounter gambling promotions via mobile devices, often through influencers and celebrities (27). Analysis of the marketing content concluded it may glamorise gambling, downplaying risks, and fostering a natural link between gambling and sport. Most young people were unaware of gambling-related harms and underage gambling was reported. Product placement was common and information on age restrictions and risks were presented inconsistently (27).

### *Sunbeds and children – online sales and digital marketing*

**The problem:** One in 20 10-17-year-olds in Ireland have ever used a sunbed, and 4% used one in the past year (8). Sunbed use, especially during the period of childhood, is associated with increased skin cancer risk later in life. Independent research shows that sunbed operators promote sunbed use through social media, websites, and in-store advertisements, often emphasising aesthetics and self-esteem benefits, and making a diverse range of health claims. A survey of teenagers in Ireland has suggested that use of sunbeds by children did not reduce significantly after the introduction of new legislation in 2015. Teens who used sunbeds were more likely to agree with the statements that 'sunbeds are a good way to create a base tan,' 'a tan makes you look healthy,' and that sunbeds are a 'good treatment for spots.'

There is a high prevalence of skin cancers in Ireland and incidence is projected to more than double in the period between 2015 and 2045 (28). Systematic reviews and meta-analyses conclude that there is a significant relationship between skin cancer and sunbed use (29, 30). All sunbed use carries risk, with the highest risk associated with use in childhood and adolescence, and with frequent use.

Certain skin types can also increase the risk of skin cancer. Fitzpatrick Skin Type Classification Scale considers skin colour and how the skin reacts to sunlight, with a range from 1 (lightest skin colour, high risk of burning) to 6 (darkest skin colour, low risk of burning). Most people living in Ireland have Fitzpatrick skin type 1 or 2, making them particularly vulnerable to UV damage and skin cancer (28).

**The data:** No suitable data were available to estimate children's online purchase of sunbed minutes. No suitable data were available to estimate children's online purchase of accessory tanning products promoted by sunbed operators. No suitable data were available to estimate children's online purchase of illicit tanning products.

### *High Fat/Salt or Sugar (HFSS) foods and drink – online sales and digital marketing*

**The problem:** 18% of children in Ireland are living with overweight or obesity (31). Almost 25% of all meals now include HFSS foods and drinks (32). The foods and drinks consumed by children from birth to adolescence are influenced by many factors, including exposures to digital marketing. Childhood obesity is strongly influenced by marketing of HFSS foods and beverages, and review-level evidence concludes that marketing increases children's food intake and affects their choices and food preferences (3, 16, 33).

It has been estimated that viewing found that seeing just one extra broadcast advert per week predicted an increase of around 60 HFSS food and drink items consumed per year (34). They estimated this at almost 350 extra calories per week or 18,000 a year. Any attempt to tackle childhood obesity should, therefore, include measures to reduce exposure of children to marketing of HFSS foods.

**The data:** No suitable data were available to estimate children's online purchase of HFSS foods and drinks. However, most household food and drink purchases are not made by children.

One study estimated children's exposure to digital marketing of HFSS food and drinks in Ireland. The CLICKBITE study found that children aged 13-17 years were exposed to significant HFSS advertising on digital platforms, especially their preferred platforms of TikTok and Instagram. Children were served an average of 19 posts per hour featuring HFSS foods, one every 3 minutes (compared to one healthier food post every 25 minutes). Eighty-nine percent of food marketing posts were 'not permitted' to be marketed to children according to the WHO nutrient profile model. Younger children also reported substantial influencer marketing on YouTube. Influencer marketing, including by nano-influencers (those with under 10,000 followers), significantly affected children's engagement, with children spending five times as long viewing influencer posts for HFSS foods compared to traditional food ads. Children did not always categorise this content as commercial marketing, despite recognising its persuasive intent.

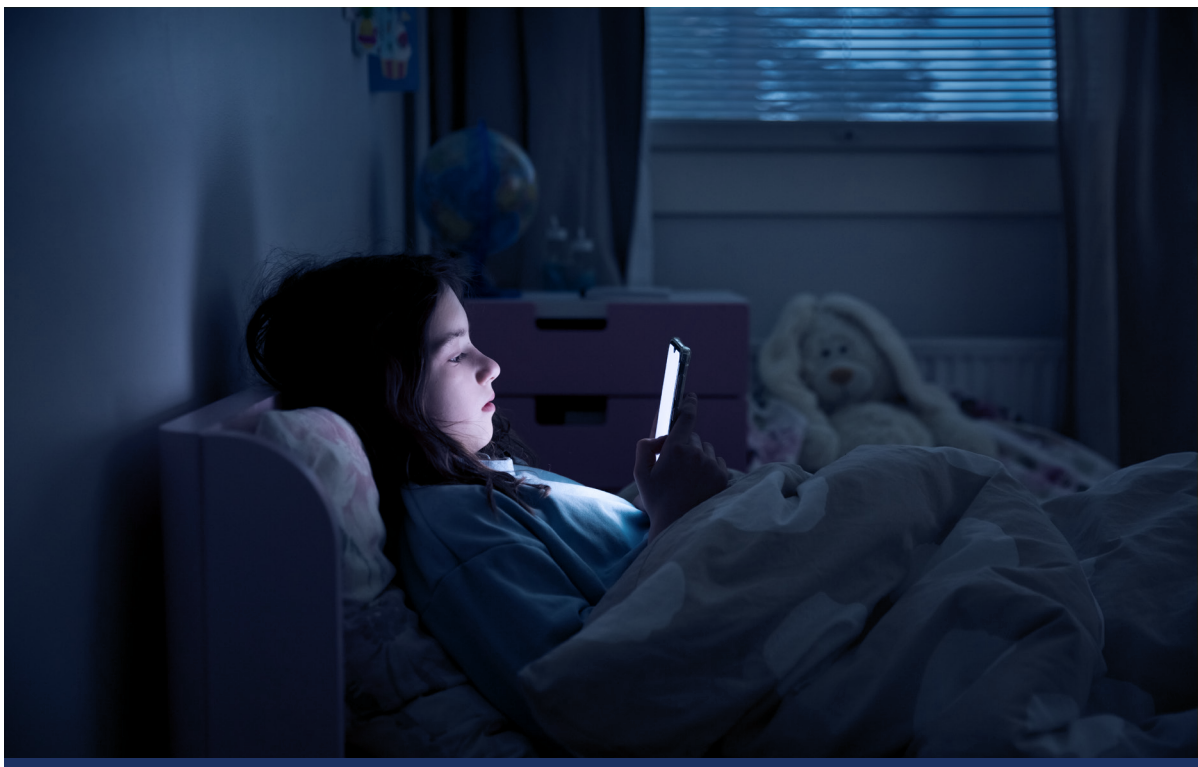




Table 1 below summarises Irish data sources available in terms of the use, online purchases and exposure to digital marketing of health harming products.

**Table 1. Summary of data findings**

		HBSC	ESPAD	GUI	NACOS report	CyberSafeKids
<b>Online activity</b>		X	✓	✓	✓	✓
<b>Tobacco</b>	<b>Use</b>	✓	✓	✓	X	X
	<b>Online purchases</b>	X	X	X	X	X
	<b>Exposure to digital marketing</b>	X	X	X	X	X
<b>Nicotine inhaling products</b>	<b>Use</b>	✓	✓	✓	X	X
	<b>Online purchases</b>	X	X	X	X	X
	<b>Exposure to digital marketing</b>	X	✓	X	X	X
<b>Alcohol</b>	<b>Use</b>	✓	✓	✓	X	X
	<b>Online purchases</b>	✓	X	X	X	X
	<b>Exposure to digital marketing</b>	X	X	X	X	X
<b>Gambling</b>	<b>Online purchases/use</b>	X	✓	X	X	X
	<b>Exposure to digital marketing*</b>	X	X	X	X	X
<b>Sunbeds</b>	<b>Use</b>	✓	X	X	X	X
	<b>Online purchases</b>	X	X	X	X	X
	<b>Exposure to digital marketing</b>	X	X	X	X	X
<b>HFSS foods and beverages</b>	<b>Consumption</b>	✓	X	✓	X	X
	<b>Exposure to digital marketing*</b>	X	X	X	X	X

\* Although not included in government surveys, children's exposure to online marketing has been explored in separate studies.

# 2

## What is the government's approach to children's engagement with digital marketing of health harming products in Ireland?



## 2. What is the government's approach to children's engagement with digital marketing of health harming products in Ireland?

### 2.1 How we examined this question

We examined the current approach to protecting children from marketing of health harming products in Ireland by exploring

- Government laws and regulations
- Government policies and strategies
- Advertising industry self-regulation
- Video game industry self-regulation
- Policies used by specific digital platforms.

We also sought the expert views of key people in government with responsibility for relevant legislation and policy, and the agencies tasked with enforcement of laws and regulations. These engagements including meetings and other communications with experts in the Tobacco and Alcohol Control Unit of the Department of Health, Cybersafe Kids, Coimisiún na Meán, the Gambling Regulatory Authority of Ireland (GRAI), and the Health Service Executive National Environmental Health Service (HSE NEHS).

The assessment of laws and regulations examined:

- Commercial communications relating to the European Union (EU)'s Audio Visual Media Services Directive (AVMSD), the Online Safety and Media Regulation (OSMR) Act, and the Digital Services Act (DSA)
- Existing Department of Health legislation, as it relates to the regulation of tobacco, e-cigarettes, alcohol, sunbeds, and HFSS foods
- The Gambling Regulation Act (2025)
- The Data Protection Act (2018), which implements the General Data Protection Regulation (GDPR) into Irish national law

The assessment of government policies/ strategies examined relevant documents to surface what policy statements, goals, or commitments were made to reduce children's engagement with digital marketing of health harming products. Current strategy and policy documents from the following government departments were reviewed:

- Department of Health
- Department of Education
- Department of Justice
- Department of Children, Disability and Equality
- Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media
- Department of Enterprise, Trade and Employment

We also reviewed the policies published on specific digital platforms in Ireland, in relation to health harming products. These platforms were selected on the basis that they were most popular with children.

## 2.2 What we found

### *Government regulations on online sales and digital marketing to children*

The AVMSD governs audiovisual media services across EU Member States, including both traditional broadcasting and on-demand platforms. One of its stated objectives is to protect children. Under the Directive, EU countries must take action to ensure that programmes which could ‘impair the physical, mental or moral development of children’ are only made available in such a way that children will not normally hear or see them, through selecting an appropriate time for broadcast, age verification tools, or other technical measures proportionate to the potential harm. Video-sharing platforms must put in place measures to protect children from harmful content.

Banned audiovisual advertising includes:

- Cigarette and tobacco advertising, including for electronic cigarettes and refill containers;
- Alcohol advertising aimed specifically at children or encouraging immoderate consumption, among a range of restrictions

The AVMSD prohibits product placement in children’s programming. EU countries are encouraged to apply the use of self- and co-regulation through codes of conduct regarding inappropriate advertising in children’s programmes.

In Ireland, the OSMR Act 2022 transposes the AVMSD into national law. This Act established Coimisiún na Meán as Ireland’s online safety and media regulator. Coimisiún na Meán also has enforcement powers, including the ability to impose fines for non-compliance.

The OSMR Act 2022 empowers Coimisiún na Meán to enforce rules that prevent advertising targeting children or vulnerable groups and require age-verification for age-restricted content.

The EU DSA complements the AVMSD by regulating online platforms, focusing on illegal content, and the protection of children from harmful exposure. It requires Very Large Online Platforms<sup>1</sup> (VLOPs) and Very Large Online Search Engines<sup>2</sup> (VLOSEs) to conduct risk assessments and mitigate potential harms, such as exposure to illegal content, through measures like age verification. VLOPs also have to maintain and provide access to ad repositories, allowing researchers, civil society, and authorities to inspect how ads were displayed and how they were targeted.

In July 2025, the European Commission published its guidelines on the protection of minors under the DSA to ensure a safe online experience for children and young people. The guidelines recommend modifying the platforms’ recommender systems to lower the risk of children encountering harmful content or an overexposure to specific content, including by advising platforms to prioritise explicit signals from children over behavioural signals as well as empowering children to be more in control of their feeds. The guidelines also recommend the use of effective age assurance methods provided that they are accurate, reliable, robust,

<sup>1</sup> Platforms that have more than 45 million monthly active users in the EU. Examples include YouTube and TikTok

<sup>2</sup> Search engines that have more than 45 million monthly active users in the EU. Examples include Google Search and Bing.



non-intrusive, and non-discriminatory. In particular, the guidelines recommend age verification methods to restrict access to adult content, or when national rules set a minimum age to access certain services such as defined categories of online social media services.

Coimisiún na Meán is the Digital Services Coordinator and is responsible for overseeing and enforcing the DSA in Ireland. Complaints about breaches of the Online Safety Code or the DSA are handled by Coimisiún na Meán, which can impose penalties or refer cases for further action.

**Table 2. Legislation to protect children from online harms**

Title	Government Department
<b>EU Audiovisual Media Services Directive</b>	Implemented in Ireland by Coimisiún na Meán. The Department of Tourism, Culture, Arts, Gaeltacht, Sport, and Media is the government department responsible for Coimisiún na Meán.
<b>Online Safety and Media Regulation Act, 2022</b>	Department for Tourism, Culture, Arts, Gaeltacht, Sport, and Media
<b>EU Digital Services Act</b>	Implemented in Ireland by Coimisiún na Meán. The Department of Tourism, Culture, Arts, Gaeltacht, Sport, and Media is responsible for Coimisiún na Meán.

### *Non-governmental regulation mechanisms*

The Advertising Standards Authority (ASA) in Ireland, funded by the advertising industry, enforces the voluntary Code of Standards for Advertising and Marketing Communications. The Code sets guidelines that apply to all commercial marketing communications across broadcast, print, digital, and sales promotions. Advertisers are required to withdraw or amend any communication found in breach of these standards.

### *How are online sales and digital marketing of tobacco products to children regulated?*

The minimum legal age of sale of tobacco in Ireland is 18 years. This will change to 21 years in 2028. The sale of a tobacco product is deemed to take place at the premises from which the tobacco product is despatched. Online retailers based outside the state are required to notify the HSE for cross-border distance sales (CBDS).

Age verification is stipulated as the Garda National Age Card, current passport, or photo driving licence (35). However, data privacy laws negate against the digital storage of information provided on age verification online and this creates a challenge for prosecution of potential underage sales.

Under the Public Health (Tobacco) Act 2002 (as amended), tobacco advertising, promotion, and sponsorship are banned on all digital platforms, including streaming services. Tobacco companies cannot sponsor events, including those popular with youth, and this is understood to apply to online events.

Standardised packaging of tobacco products, with specified health warnings, is mandated since 2016 with the purpose of making tobacco less appealing and disrupting branding as a marketing tool. Tobacco must be stored in a non-branded closed container behind the counter and all

point-of-sale marketing is prohibited since 2009. The point-of-sale and packaging provisions in Irish law are understood to apply equally to the 'online shop,' so that a person seeking to purchase tobacco can be shown a pictorial list with visual images of standardised packages of tobacco. This could be interpreted to mean that any visual of a tobacco packet, or any associated branding or marketing displayed on any website or digital retail platform, should mimic the list used in brick-and-mortar stores.

There has been no comprehensive assessment of:

- Age-gating mechanisms operating on accessing content on websites selling tobacco
- Age verification mechanisms operated by online retailers at point of purchase
- Compliance with minimum legal age of sale online
- Display of tobacco packaging and point of sale marketing online
- Influencer marketing and youth-oriented content online
- Sponsorship of online events that may appeal to children.

The HSE NEHS received one complaint in 2023 from a parent relating to their child purchasing tobacco online. The HSE NEHS operates a test purchasing scheme for tobacco in physical premises and is endeavouring to overcome challenges to undertake a similar proactive test-purchasing programme online.

Complaints about tobacco advertising violations can be filed with the non-statutory body, the ASA, which can remove ads, issue warnings, or impose fines.

#### *How are online sale and digital marketing of e-cigarettes to children regulated?*

In Ireland, the minimum legal age of sale of e-cigarettes is 18 years. This was introduced under the Public Health (Tobacco Products and Nicotine Inhaling Products) Act 2023 and applies to in-person and online sales. The EU (Manufacture, Presentation and Sale of Tobacco and Related Products) Regulations 2016 transpose the EU Tobacco Products Directive (2014/40/EU) into Irish law and further protects children by restricting e-cigarette advertising, including a ban on online advertising.

E-cigarette packaging must include a health warning in relation to the addictive nature of nicotine. However, e-cigarette packaging and casing can feature cartoon characters, novel designs, branding, and flavour descriptors. Retailers in physical premises and online are permitted to use 'point of sale' display and marketing of e-cigarette products.

In 2023, the HSE NEHS reviewed 20 websites of the 64 registered with the HSE for CBDS, to assess the means of age verification method used. These sites were retailing e-cigarettes and refill containers containing nicotine. The key findings were:

- 11 of the 20 reviewed websites (55%) requested age verification
- The primary method of verification was a simple Yes/No question asking if the user is over 18
- Nine of the 20 websites (45%) did not request any form of age verification.

The HSE NEHS has not received any complaints in relation to a child purchasing e-cigarettes online. The HSE NEHS operates a test purchasing scheme for e-cigarettes in physical premises and has certain powers in terms of market surveillance.

The non-statutory ASA Code of Standards for Advertising and Marketing Communications states that adverts must not target individuals under 18, and no medium should advertise e-cigarettes to an audience with more than 25% under 18. Ads should avoid appealing to youth culture or depicting young or juvenile behaviour.

### **How are online sales and digital marketing of alcohol to children regulated?**

In Ireland, the minimum legal age of sale of alcohol is 18 years. An Garda Síochána are tasked with enforcement on the legal age of sale of alcohol.

Since the COVID-19 pandemic, consumers have been buying alcohol online in increasing numbers. Section 31 of the Intoxicating Liquor Act 1988, as amended, makes provision for offences relating to the sale and delivery of alcohol products to persons under the age of 18 years. The onus is on the licensee to ensure that appropriate controls are in place to ensure they comply with age verification. There is no clear legal requirement for age to be checked at the point of delivery. The laws relating to age verification for sale of alcohol and places of sale reside with the Department of Justice.

The Public Health (Alcohol) Act 2018 is the Department of Health legislation aiming to reduce alcohol harms in Ireland. It has a stated goal to delay the initiation of alcohol by children and young people and to reduce consumption and harms in broader society. The Public Health (Alcohol) Act 2018 includes provisions regulating alcohol marketing. It prohibits alcohol marketing targeting children, applies a broadcast watershed for alcohol advertisements on TV and radio, and restricts content that associates alcohol with youth culture. The Public Health (Alcohol) Act 2018 commenced to date does not extend these rules to online platforms.

The non-statutory ASA Code of Standards for Advertising and Marketing Communications states that advertisements must feature individuals over 25 and avoid elements appealing to children, such as youth culture. Digital media promoting alcohol brands must have secure age verification systems in place.

### **How are online sales and digital marketing of gambling to children regulated?**

The Gambling Regulation Act (2024) sets out the intended framework for government regulation of gambling operators. The Act intends to protect children from gambling marketing, use of gambling products, and gambling harms. The Act established the Gambling Regulatory Authority of Ireland (GRAI). The relevant measures in the Act include:

- Prohibition of gambling advertising targeted at children, including a watershed provision that restricts broadcasting gambling advertisements on TV, radio, and audiovisual media services between 5:30 a.m. and 9:00 p.m.
- Age verification and marketing controls: Online gambling platforms will be required to enforce age verification and implement marketing practices to prevent targeting of children.
- Enhanced online gambling regulation: Specific rules for advertising in digital environments, with a focus on preventing ads from reaching underage audiences on social media, websites, and mobile apps.

- Education and public awareness: The Act will support public campaigns aimed at educating both parents and children about the risks of gambling reinforcing that gambling is not suitable for children.
- Control on social media advertising: Gambling advertisements will be restricted on social media and on-demand platforms unless the recipient has a registered account with the platform, ensuring that gambling content does not reach younger users.

The measures included in the Act represent a significant development in the regulation of gambling products, but many measures, including those listed in the bullet points above, have not yet been commenced. The obligations pertained in Part 6 of the Act which focus on consumer protection apply to licensees. This means an operator will need to be licenced in the first instance for the obligations to apply.

At this time:

- Allowing a child to bet, to open a betting account or to enter a registered bookmaking premises is currently an offence under the Betting Act 1931. This also applies to remote betting intermediaries. The GRAI states on its website that if anyone is aware of a child gambling, either online or in person, this should be reported to An Garda Síochána.
- Restrictions on marketing of gambling are addressed solely through the non-statutory ASA Code of Standards for Advertising and Marketing Communications, which states that advertisements for gambling should not appeal to children or feature elements related to youth culture. They must not depict individuals under 25 in gambling-related contexts, and advertisements should not be directed at audiences under 18 or appear in media aimed at children.
- There is no independent test purchasing system in place to monitor age verification.

The Act will be commenced on a phased basis with licensing being the main priority in the first instance. The Act has a clear obligation on licensees to ensure children do not participate in gambling activities. The GRAI may introduce further codes of practice to support licenses to comply. The onus is on the licensee to ensure that appropriate controls are in place to ensure they comply with age verification. The GRAI's compliance function will seek to ensure that age verification is as robust and comprehensive as possible. This is covered in section 169 of the Act in terms of setting up account.

When the Act is fully commenced:

- Allowing a child to participate in a gambling activity will carry a potential penalty of 8 years' imprisonment.
- It will be illegal for a licensed gambling business to employ a child.
- The licensee/owner of a gambling website will not be allowed to sponsor:
  - » an event in which the majority of those attending or competing are children
  - » an event aimed at children
  - » an organisation, club or team in which children are members
  - » a premises that is used by that organisation, club, or team or
  - » a public activity that appeals to children.
- The licensee/owner of a gambling website will have to have a parental control programme displayed on their homepage and on each online platform where a gambling activity can be accessed.



- Advertising that promotes gambling will not be permitted on TV or radio between the hours of 5.30am and 9.00pm.
- Advertising that targets children and portrays gambling as attractive will be illegal.
- It will be an offence for gambling companies to target children with branded clothes and merchandise.
- When determining the suitability of a premises in which it is proposed to provide gambling activities, its vicinity to both schools and other premises that offer licenced in-person gambling activities will be considered.
- In terms of addressing gambling harm, the GRAI is currently working on the Social Impact Fund strategy which will be a fund to invest in research, education, training and gambling treatment and intervention and public awareness.

There are some forms of gambling that do not fall in the remit of the Gambling Regulation Act and GRAI. These include:

- » The national lottery (Lotto) which is governed by the Lottery Regulator and the National Lottery Act 2013
- » Loot boxes and other in-game monetised games of chance which are not clearly in the remit of any specific department or agency.

A Pan European Gaming Information (PEGI) rating is generally applied to games that can be played on a game console, a PC, or mobile device in Europe since 2003. PEGI is not a statutory instrument. The PEGI rating has two elements – the PEGI age label (for example PEGI 3 is considered suitable to all age groups) and the PEGI content descriptors which shows whether the game include elements such as violence, bad language, gambling, sex, or drugs.

Since 2020, the following PEGI content descriptor is applied to games that contain elements that encourage gambling. Any games that stimulate gambling typically played in casinos and betting halls receive an 18-age rating.

**Figure 2, PEGI content descriptor for gambling and PEGI Age Rating and content descriptors for in-game purchases**



There is a separate PEGI content descriptor relating to 'in-game purchases' which shows that players can purchase items with real-world currency, and this does not anchor to a minimum PEGI age rating. Loot boxes are one form of in-game purchases involving randomisation, and games with those would receive an additional, dedicated 'In-game Purchases (Includes Random Items)' descriptor. However, this label is not well understood by consumers (36).

Certain gaming platforms permit the setting of spend limits and notifications, and parental controls can limit in-app purchases or password protect to protect against inappropriate purchases, with the onus on the parent to set up the necessary controls.

#### *How are online sale and digital marketing of sunbeds to children regulated?*

The minimum legal age of sale for hire or purchase of a sunbed in Ireland is 18 years. The Public Health (Sunbeds) Act 2014 regulates the retail of sunbeds in Ireland. Protecting children from the risk of skin damage, that may increase their subsequent risk of skin cancer, is stated as a primary policy objective of the Act.

Since March 2015, the Public Health (Sunbeds) Act 2014 places a duty on the owner or manager of a sunbed business (including websites or social media sites) to display warning signs prescribed by the Minister for Health. Prescribed signs may include information on the adverse health effects of the use of sunbeds and the prohibition on the use of sunbeds by persons under 18 years of age.

**Figure 3. Signage displayed by sunbed operators in Ireland**



The Public Health (Sunbeds) Act 2014 also prohibits certain marketing practices (for example, early bird or "two for the price of one" offers), as may be prescribed by the Minister for Health for the purpose of protecting public health.

The Public Health (Sunbeds) Act 2014 prohibits the publication of any material that promotes a health or other benefit from sunbed use other than information prescribed by the Minister for Health and prohibits the owner or manager of a sunbed business (including websites or social media sites) from making available or displaying any material that promotes a health or other benefit from sunbed use other than information prescribed by the Minister for Health.

These prohibitions aim to prevent children from accessing sunbeds and to make sunbeds less appealing to young people and ensure that they are provided with reliable information on the real risks of sunbed use.

Enforcement is the remit of the HSE NEHS. There is evidence of consistent breaches of the law in relation to the minimum legal age of sale observed through the inspections and test purchasing systems operated by the HSE in physical sunbed premises. In 2023, there were 10 infringements observed across 47 test purchasing engagements. Nine of the 10 infringements related to age verification. Other recorded infringements included:

- 394 infringements observed across 368 inspections. Infringements were most commonly observed in respect of non-compliance with warning signs, record keeping, provision of eyewear, and health information.
- 30 infringements observed across 35 mystery shopper engagements. Infringements were most commonly observed in non-compliance with health information.

Independent research has highlighted new ‘marketplaces’ for private sunbeds through digital platforms like Facebook Marketplace and DoneDeal (37).

The 2014 legislation was progressive in its inclusion of marketing restrictions. However, the marketing model used by sunbed operators has evolved significantly, particularly in the digital space where it is increasingly challenging to capture activity and enforce a clear legal response. In addition, the promotion of tanning products has emerged as a standard form of price promotion packaged with sunbed use. There has been no formal assessment of the resources needed to apply surveillance and enforcement in the online environment.

The ASA Code of Standards for Advertising and Marketing Communications does not specifically refer to sunbeds but makes general statements on marketing to children for products unsuitable for them.

The 2025 Programme for Government commits to exploring options to progress legislation banning commercial sunbed use.

### *How are online sales and digital marketing of HFSS foods and beverages regulated?*

There is currently no legislation in Ireland which restricts online sale or marketing of HFSS foods and beverages to children. However, the following regulatory matters are relevant:

- A ban on the sale of energy drinks (which would include some high sugar drinks) has recently been discussed (38).
- A tax on sugar sweetened drinks was introduced in 2018 which increased the base price and stimulated industry reformulation to low/no sugar soft drinks (39).

There is a legislative provision in the OSMR Act allowing for an online safety code to prohibit or restrict the inclusion in programmes of commercial communications relating to foods or beverages considered by Coimisiún na Meán to be the subject of public concern in respect of the general public health interests of children, including HFSS foods or beverages.

In 2018, the Department of Health developed a set of voluntary Codes of Practice on marketing of HFSS foods (40). The Codes apply to non-broadcast media, including digital, out of home, print and cinema, as well as commercial sponsorship and retail product placement. The Codes

represented the first agreement in relation to food advertising, marketing and sponsorship in the non-broadcast media. The various agencies agreed 'variable rates' of reduction in advertising, marketing and sponsorship of HFSS. The Codes' stated aim was to deliver a significant reduction of exposure of children to HFSS in a variety of settings including out of home, print media, cinemas and the education sector. However, in respect of the Codes by the Department of Health, no monitoring body has been established and no guidance has been published for advertisers.

The Codes of Practice informed the voluntary rules applying to marketing communications for food set out in the ASA Code of Standards for Advertising and Marketing Communications in Ireland. The following rules apply to those marketing to children under 16 on a voluntary basis:

- Marketing communications for food and beverages addressed to children should not mislead children as to the potential benefits from consumption of the product, either physically, socially or psychologically.
- Except those for fresh fruit or fresh vegetables, marketing communications should not seem to encourage children to eat or drink a product only to take advantage of a promotional offer: the product should be offered on its merits, with the offer as an added incentive.
- Marketing communications featuring a promotional offer linked to a food product of interest to children should avoid creating a sense of urgency or encouraging the purchase of an excessive quantity for irresponsible consumption.
- Marketing communications should not encourage children to eat more than they otherwise would.
- Marketing communications for HFSS food by means of social media shall not target children under the age of 15.

The World Health Organization released updated guidelines on policies to protect children from the harmful impact of food marketing in 2023 (41). These guidelines recommend mandatory regulation of marketing of HFSS foods. The guidelines recommend using a government-led nutrient profile model to classify foods to be restricted from marketing; and applying sufficiently comprehensive laws to minimise the risk of migration of marketing to other age groups, other spaces within the same medium or to other media, including digital spaces. 'Restricting the power of food marketing to persuade' is also recommended, which involves limiting the use of cartoons or techniques that appeal to children, such as including toys with products, advertising with songs, and celebrity endorsements.

Currently, the Irish Government has not made any public statement of intention in relation to adopting the WHO guidelines. Clarity may emerge as part of a new government policy on reducing overweight and obesity that is under development to succeed the current Healthy Weight for Ireland policy. A Public Health Obesity Act was mentioned in the Healthy Ireland Strategic Action Plan, but the status of this legislation is unknown.



*What have government departments committed to do within their policies and strategies?*

Legislation and policies should act in tandem as tools for governments. Department policies/strategies are important as a statement of government intent. Departmental strategies are the mechanism to establish a clear strategic direction and to provide a mandate for application of resource to system change and to systems of monitoring, evaluation and reporting. In this section, we present whether government policies/strategies include any statements of intent or specified actions in relation to children's engagement with digital marketing of health harming products.

The 2025 Programme for Government has stated that this Government will:

- Support and fund Coimisiún na Meán in enforcing the Online Safety Code.
- Work with Coimisiún na Meán to inform children, young people, and their parents about their rights online under the new safety framework.
- Examine ways to enforce age verification obligations on online service providers and hold them to account for failure to do so.
- Work with stakeholders to tackle the use of recommended algorithms to protect children from harmful content.
- Ensure that children are safe online and implement the recommendations of the new Online Health Taskforce.
- Support and fund Online Safety Programmes for schools, giving them more flexibility in how to use it.
- Introduce wide ranging restrictions on vaping, including packaging, flavours, point of sale advertising, and a ban on disposable vapes.
- Explore restrictions on the sale of high-caffeine energy drinks, including a ban on their sale to children.
- Explore ways to ban commercial sunbed use.

We searched nine departmental strategies, policies, and implementation plans for the inclusion of actions to protect children from online exposures to health-harming products. The documents were analysed using the READ (Ready materials, Extract data, Analyse data, Distil) approach (42). The extraction tool used as part of the READ process can be found in Appendix 1.

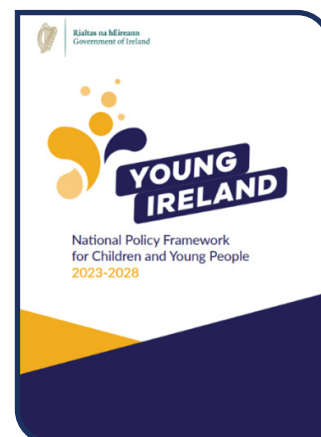
Title	Government department	Actions to protect children from online exposures to health-harming products
<b>Young Ireland - National Policy Framework for Children and Young People 2023-2028 (43)</b>	Department of Children, Disability and Equality	✓
<b>Digital Decade Policy Programme - Ireland's National Strategic Roadmap (44)</b>	Department of Enterprise, Trade and Employment	X
<b>Digital Strategy for Schools to 2027 and Implementation Plan 2024 (45)</b>	Department of Education	X
<b>Sharing the Vision: A Mental Health Policy for Everyone (46)</b>	Department of Health	X
<b>Healthy Ireland Framework 2019-2025 (47)</b>	Department of Health	X
<b>Reducing Harm, Supporting Recovery 2017-2025 (48)</b>	Department of Health	X
<b>National Skin Cancer Prevention Plan 2023-2026 (28)</b>	Department of Health	X
<b>A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016-2025 (49)</b>	Department of Health	✓
<b>HSE Tobacco Free Ireland Programme Implementation Plan 2022-2025 (50)</b>	Department of Health	X

The following were identified as relevant:

### **Young Ireland - National Policy Framework for Children and Young People 2023-2028**

The digital environment has been identified as a priority area in this policy framework. Actions include:

- Implement the Online Safety and Media Regulation Act, drawing from the United Nations Convention on the Rights of the Child recommendations on digital regulation. This will be led by the Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media.
- Work with An Coimisiún na Meán to develop codes and rules to restrict the advertising of foods and drinks deemed harmful to the health of children, promote healthy eating messaging, including through the SafeFood START campaign, and develop scientific guidelines for healthy eating for teenagers. This will be led by the Department of Health, and the Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media.



### **A Healthy Weight for Ireland: Obesity Policy and Action Plan**

One action includes:

- Develop, implement, and evaluate a code of practice for food and beverages promotion, marketing, and sponsorship. This will be led by the Department of Health.

Although the Digital Strategy for Schools to 2027 and Implementation Plan 2024 address online safety and the safe and ethical use of digital technologies, managing children's exposure to online marketing of health harming products is not included. Similarly, two key foci of the Tobacco Free Ireland Programme are to prioritise the protection of children and contribute to the denormalisation of tobacco use for the next generation. However, children's exposure to online marketing or sales of tobacco and nicotine inhaling products are not mentioned in the Implementation Plan.

No single government department has clear responsibility of monitoring and reporting on online exposures.





## What have digital platform companies committed to do in their policies and strategies?

The companies delivering digital platforms have produced company codes to restrict access of young people to inappropriate content and restrict exposure to specific advertisements. We did not perform a comprehensive assessment of all platforms but have listed below the main stated policies of some of the most popular platforms used by children in Ireland.

### *YouTube:*

- » YouTube prohibits personalised ads for users under 18.
- » Ads for alcohol, tobacco, drugs, and gambling are not allowed on content aimed at children.
- » Since 2020, food and beverage ads are prohibited on content marked "Made for Kids" to discourage unhealthy eating habits.
- » YouTube Kids App provides an ad-free, curated environment for children under 13, with parental controls.



### *Snapchat:*

- » Snapchat is for users 13 and above, and ads must not target children under 13.
- » Ads for gambling, alcohol, and tobacco are restricted, with specific rules regarding responsible consumption and age targeting.



### *TikTok:*

- » TikTok restricts personalised ads for users aged 13-17.
- » Ads for alcohol, gambling, and products that endanger children's safety are not permitted. TikTok also enforces transparency by labelling paid content.



### *Instagram:*

- » Instagram prohibits ads for tobacco products and requires pre-approval for alcohol ads.
- » Instagram automatically applies more protective settings for teen accounts (ages 13-17), limiting exposure to harmful content and interactions.



### *Roblox:*

- » Ads for tobacco products, alcohol, and gambling are prohibited.
- » Ads are hidden from users under 13 to prevent exposure to inappropriate content.
- » All ads must be clearly labelled, and content should be easily understandable for children.





# 3

**What is needed to better protect children from digital marketing of health harming products?**



### 3. What is needed to better protect children from digital marketing of health harming products?

Digital marketing is not one singular activity, but rather it is multiple activities interacting in a variety of ways, across a variety of platforms and utilising data to inform targeting and profiling of customers. The power differential between an individual child and the commercial companies involved in data driven digital marketing of health harming products is profound.

We have identified the following four priorities for change:

1. Political and policy leadership
2. Reform of legislative and enforcement mechanisms
3. Better age verification
4. Establishing of systems of monitoring and observability.

In addition, we have proposed specific actions relating to tobacco, e-cigarettes, alcohol, sunbeds, gambling, and HFSS foods.

#### Priority 1 - Political and policy leadership

- A government-led strategic approach to protecting children from digital marketing of health harming products is needed. This will represent a significant shift from the current dominant free market ideology.
- Clear leadership and a formal policy mandate are needed to adopt an authentic public health approach to regulation of health harming products. There are currently no specific policy targets to reduce online sales to children or to reduce child exposures to marketing online in any government department strategy. There are no policy indicators or formal reporting mechanisms in relation to online marketing of health harming products.
- A coherent strategy is needed, or at least an agreed strategic approach, with clear roles and responsibilities across different government departments and agencies, and to build on the work already underway. To be effective, the response must recognise that a reliance on industry codes, and other forms of self-regulation, is insufficient due to repeated demonstrations of its many failings (51).
- The response must be focussed on protecting the rights of the child and valuing child health and wellbeing. This will require mechanisms to manage conflicts of interest and the tactics of commercial entities seeking to shape public policy and minimise regulatory requirements.
- The focus should be on regulating digital marketing and commercial targeting of health harming products, rather than banning children from social media.
- The education system has an important role to play in developing children's skills in navigating digital marketing and in protecting their own data from being used for

commercial targeting. There is scope to enhance the educational resources within the SPHE curriculum and the work of Webwise - the Irish Internet Safety Awareness Centre.

- Protecting children from inappropriate access to health harming products and from marketing requires a public health approach. A public health approach applies 'proportional universalism' meaning that the population of children is the unit of change but that vulnerable subgroups of children require focussed attention. The following groups may require specific consideration and targeting within the government response.
  - » Children living in poverty or in socially disadvantaged communities
  - » Children with mental ill-health, learning disability or behavioural challenges including those who are neuroatypical
  - » Children who are themselves engaged in illicit online sale of health harming products to other children
  - » Boys, in terms of their higher propensity to engage in gambling and experience gambling-related harms.

## **Priority 2 – Reform of legislative and enforcement mechanisms**

- Some regulatory mechanisms are in place, but these are currently fragmented. A clearly defined unified regulatory goal has not been articulated. Consideration should be given to a clear mechanism to consolidate the existing efforts to regulate online marketing to children.
- Relevant government departments should be provided with specialist legal expertise to advise on jurisdictional scope digital sales and marketing of health harming products to children.
- A regulatory options paper should be developed for government that evaluates the best options to restrict data harvesting and use in digital marketing of health harming products to children.
- Compliance and enforcement infrastructure to address the sale of, and marketing of, health harming products online needs intensive development to keep pace. Resources, training, technology, and clear collaborative working arrangements are needed for agencies working to assess compliance in increasingly complex online settings. Competent authorities for enforcement must be provided with adequate investigative powers and legal clarity on data usage relating to children's engagement with online sales and marketing to fulfil their roles in investigation and enforcement activity.
- Industry codes that focus on content of advertisements and operate on a complaints model are not effective. The focus on content diverts attention from the modes of targeting that make digital advertising powerful.

### Priority 3 – Better age verification

- Current online age verification measures generally lack reliability. To ensure age verification checks are conducted appropriately, there needs to be a step change in the methods used by retailers to demonstrate sufficient proof that the purchaser is over the age of 18. Self-declaration of age is inadequate.
- Banking systems are currently configured with Merchant Category Codes (MCCs) that allow banks to identify the types of transactions that cards are used for (52). Expanding this system of using MCC codes could be an easy solution to protect under-18s. For example, merchants could be required to use a special 'alcohol' code when alcohol is included in a purchase. Banks could then prohibit cards belonging to under 18s from purchasing such transactions, without preventing non-alcoholic transactions. This would need to be introduced by new regulatory practice to ensure the technologies are implemented in a timely and appropriate manner.
- Other options can be considered to enhance age verification including use of biometric data but there must be careful consideration of children's right to privacy and data protection and ethics.

### Priority 4 – Better systems of monitoring and observability

- Children's experience with digital sales and marketing of health harming products should be included within government surveys of children's health and wellbeing. In addition, children's experiences should be explored through qualitative research exploring how marketing affects their preferences, brand awareness, purchase choices and understanding of risk.
- Platform observability refers to institutions, infrastructure and tools for making the content, social interactions and automated models observable to researchers, users, civil society and regulators. Minimum standards of platform observability relating to marketing of health harming products to children should be agreed by government.
- The DSA includes some observability but does not reveal targeting patterns over time and observe advertisement sequences. Platform observability is not fulfilled by digital platforms offering 'repositories' of marketing material. These do not provide sufficient information about who sees ads and how they are targeted.
- Systematic and independent observability can be supported by emerging automated models that enable classification and flagging of marketing.

## Specific actions relating to tobacco, e-cigarettes, alcohol, sunbeds, gambling, and HFSS foods

**Table 3. Options to reduce digital sales and marketing of tobacco to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Explore children's experience with tobacco sales through online markets (official and unofficial) and their understanding of, and exposures to, different forms of tobacco marketing online.	Research
	Develop an integrated monitoring system for online tobacco, e-cigarette, and other nicotine product marketing exposures in Ireland	Monitoring systems
	Develop official guidance for online retailers on how to comply with online sales and marketing of tobacco	Guidance
	Request data on whether any payments were received, by specified online platforms, from tobacco companies and their marketing affiliates, for content available in Ireland	Corporate responsibility
	Develop robust mechanisms to test age verification online	Systems
<b>Medium-term</b>	A prohibition on cross-border online sales of tobacco to ensure that children in Ireland receive the full benefit of Irish regulation of packaging, marketing and age of sale	Legislation
	Include measures to enhance safeguarding for children from online sales and marketing exposures within any new TobaccoFree Ireland strategy	Policy/Strategy
	Provide adequate powers for revocation of a tobacco licence, or refusal to grant a licence, based on evidence of online sales and marketing to children	Legislation and enforcement
<b>Long-term</b>	A prohibition on online sales of tobacco in Ireland	Legislation

**Table 4. Options to reduce digital sales and marketing of e-cigarettes to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Explore children's experience with e-cigarette sales through online markets (official and unofficial)	Research
	Retain and develop questions on children's exposure to online e-cigarette marketing through the Department of Health commissioning of the ESPAD study	Research
	Include survey questions on online e-cigarette sales and marketing within the Department of Health HBSC survey	Research
	Include survey questions on online e-cigarette sales and marketing within the Department of Children's GUI longitudinal study of children	Research
	Support children to understand the risks associated with e-cigarette use and to correctly interpret and navigate online marketing of nicotine products	Education
	Develop robust mechanisms to test age verification online	Systems
<b>Medium-term</b>	Regulate packaging and point of sale display of e-cigarettes to reduce their appeal and accessibility to children and young people in both 'brick and mortar' and online shops	Legislation
	Include measures to enhance safeguarding for children from online e-cigarette sales and marketing exposures within any new TobaccoFree Ireland strategy	Policy/Strategy
<b>Long-term</b>	Introduce regulations to ensure that flavours, and online promotional activity relating to those flavours, are limited in a way that reduces youth appeal and uptake	Legislation



**Table 5. Options to reduce digital sales and marketing of alcohol to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Explore children's experience with alcohol sales through online markets (official and unofficial) and their experience of online marketing	Research
	Include questions on children's exposure to online alcohol marketing through the Department of Health commissioning of the ESPAD study	Research
	Include survey questions on online alcohol sales and marketing within the Department of Health HBSC survey	Research
	Include survey questions on online alcohol sales and marketing to children within the Department of Children's GUI longitudinal study of children	Research
	Develop a business case for introduction of an integrated monitoring system for online alcohol marketing exposures in Ireland	Research
	Develop robust mechanisms to test age verification online	Systems
<b>Medium-term</b>	Assess the impact of the Public Health Alcohol Act, and the advertising components in particular, on reducing children's overall exposure to alcohol marketing	Legislation
	Commit to monitoring of children's online exposures to alcohol marketing within the forthcoming drug and alcohol strategy	Policy/Strategy
	Having established a baseline level of children's exposure to online alcohol marketing, commit to reducing exposure by setting targets.	Policy/Strategy
<b>Long-term</b>	Introduce regulations to limit digital alcohol marketing and sponsorship for all sporting events	Legislation

**Table 6. Options to reduce digital sales and marketing of gambling to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Establish leadership and clarity on roles, responsibility and reporting mechanisms in terms of reducing gambling-related harms for children within the Department of Health and Department of Children	Policy
	Develop a taskforce to report on options to reduce online gambling and marketing exposures for children to inform the work of the GRAI, Coimisiún na Meán, the Department of Health, and Department of Children	Research
	Provide a specified resource from the Social Impact Fund to support meaningful monitoring and research to reduce children's exposures to online marketing of gambling products	Regulatory/ Resource
	Retain and develop questions on gambling and gambling harms, and exposures to online sales and marketing within the Department of Health-commissioned ESPAD survey	Research
	Include questions on gambling and gambling harms, and exposures to online sales and marketing within the Department of Health-commissioned HBSC Survey	Research
	Include questions on gambling and gambling harms, and exposures to online sales and marketing within the Department of Children-commissioned GUI Survey	Research
	Expedite measures to protect children from online sales and marketing within the schedule of enactment/commencement of measures within the Gambling Regulation Act	Regulatory
	Develop robust mechanisms to test age verification online	Systems

	Ensure existing consumer law aimed at video game companies is enforced in relation to in-game purchases and loot boxes, such as the disclosure of (i) their presence; (ii) the price in euros, rather than in a fictional virtual currency; and (iii) the probabilities of obtaining different random rewards	Regulatory
	Commission an independent review of ASA activity in relation to protecting children from digital marketing of health harming products	Research
	Explore the feasibility of data sharing agreements with tech companies to provide data to aid public interest research applying open science principles and careful management of conflicts of interest	Research
<b>Medium-term</b>	Develop, deliver, and evaluate education and awareness programmes for children to support them to navigate online marketing and sales techniques by the gambling industry in school and sports settings	Education
	Ensure that interventions to deter children from gambling and to support children experiencing harm are designed and delivered independently and not operated or funded by the gambling industry or its affiliates	Education/Policy
	Consider the evidence in relation to further age-gating certain gambling products (to age 21 or 25) with a focus on protecting children and young people	Research
	Ensure the GRAI and the coroner have adequate powers to access data, if deemed appropriate by the coroner, on all betting accounts used by children who have died by suicide	Regulatory
	Commission a report on use and regulation of loot-boxes and other in-game purchases by children on digital gaming platforms	Research
	Advocate at the EU level for expanding the legal obligations set out in the DSA to require companies to provide even more data, including a full record of all ads shown to a particular user and an explanation as to why those ads were shown	Legislation

**Table 7. Options to reduce digital sales and marketing of sunbeds to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Explore children's experiences with purchasing of sunbed minutes and tanning enhancement products through online markets (official and unofficial)	Research
	Include survey questions on children's exposure to online sunbed marketing within the Department of Health HBSC survey	Research
	Include survey questions on online sunbed sales and marketing to children with the Department of Children's GUI longitudinal study of children	Research
	Support children to understand the harms of sunbed use and to navigate and interpret the information presented to them in online marketing	Health education
<b>Medium-term</b>	Introduce a ban on sunbeds, including marketing of sunbeds, in line with commitments in the Programme for Government	Legislation

**Table 8. Options to reduce digital sales and marketing of HFSS to children in Ireland**

Term	Action	Category
<b>Short-term</b>	Develop a business case for introduction of an integrated monitoring system for online HFSS food and drink marketing exposures in Ireland using WHO CLICK framework (see Appendix 2)	Research
	Prohibit the sales of energy drinks to children	Legislation
<b>Medium-term</b>	Include specific actions and targets to reduce the extent and appeal of marketing of HFSS foods and drinks to children within a new strategy on healthy weight	Policy/Strategy
	In keeping with legislation in the UK, ban online advertisements for HFSS foods and beverages, and extend this ban to also include brand marketing	Legislation
<b>Long-term</b>	Include strong child-focussed regulations on marketing of HFSS foods within any future Public Health Obesity Bill	Legislation

## Discussion





## Discussion

Children in Ireland are being exposed daily to online marketing of health harming products, yet the systems in place to protect them are fragmented and inadequate. Without urgent action, children's rights to a safe digital environment will continue to be compromised.

A review of government-funded surveys of children, government legislation, strategies, policies, and implementation plans in Ireland concluded that:

- No single government department has clear responsibility of monitoring and reporting on online exposures through legislation or a policy mandate.
- Existing data collection focuses on personal harm and peer interactions, rather than the influence of commercial entities targeting children.
- Self-report data from children often emphasise time spent online, not the nature of the content encountered. The true scale of commercial marketing, therefore, goes unrecognised.
- There are no reliable data on the effectiveness of age verification in relation to online platforms, exposures to marketing of, and purchases of, products with a minimum legal age of sale of 18.

These issues leave children vulnerable to aggressive and sophisticated digital marketing techniques designed to exploit their attention and shape their preferences early in life. Even in the absence of comprehensive data, clear steps in the following areas can and must be taken:

1. Political and policy leadership
2. Reform of legislative and enforcement mechanisms
3. Better age verification
4. Establishing systems of monitoring and observability

In today's hyper-connected world, failing to act means allowing commercial interests to shape the health and well-being of Ireland's children. Investing in children's digital safety is a public health imperative and a human rights obligation.



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## Appendices



# Appendices

## Appendix 1 Extraction tool for policy analysis

Document title	Date	Government department	Mention of children's online safety, exposure to online marketing
<b>Young Ireland - National Policy Framework for Children and Young People 2023-2028</b>	2024	Department of Children, Disability and Equality	Implement the Online Safety and Media Regulation Act, drawing from the United Nations Convention on the Rights of the Child recommendations on digital regulation. This will be led by the Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media.
<b>Digital Decade Policy Programme - Ireland's National Strategic Roadmap</b>	2023	Department of Enterprise, Trade and Employment	No
<b>Digital Strategy for Schools to 2027 and Implementation Plan 2024</b>	2022	Department of Education	<p>Promote the use of the Webwise.ie website as the key access point to resources and information for teachers, schools, parents, and learners. This will be led by Webwise.</p> <p>Raise awareness of online safety within schools via initiatives such as Safer Internet Day and engaging with all relevant stakeholders. This will be led by Webwise.</p> <p>Provide up to date training and CPD for teachers specifically on online safety and the safe and ethical use of the internet through Webwise and the wider Oide Digital Technology Division. This will be led by Webwise.</p> <p>Develop a guide for parents and parents' associations who wish to engage with their school community regarding internet safety and access to smartphones for primary school children. This will be led by the Department of Education.</p>



			<p>Facilitate a series of face-to-face events and webinars to support parents and teachers in keeping children safe online and informing them of the Keeping Childhood Smartphone Free Initiative. This will be led by the Department of Education and Webwise.</p> <p>Develop a primary school supports booklet - Helping Schools and Families Keep Children Safe Online. This will be led by Webwise.</p> <p>Continue targeted online safety and digital citizenship education awareness raising via engagement with education stakeholders and networks. This will be led by Webwise.</p> <p>Foster multi-stakeholder cooperation, information sharing of knowledge and expertise with national and international stakeholders. This will be led by Webwise.</p> <p>Continued membership of and contribution to the EU Digital Education in Teaching Learning and Assessment Working Group and EU Digital Citizenship and EU Digital Education Hub to ensure awareness and knowledge of what is happening at EU level and in other Member States. This will be led by the Department of Education.</p>
<b>Sharing the Vision: A Mental Health Policy for Everyone</b>	2020	Department of Health	No
<b>Healthy Ireland Framework 2019-2025</b>	2019	Department of Health	No
<b>Reducing Harm, Supporting Recovery 2017-2025</b>	2017	Department of Health	No

<b>National Skin Cancer Prevention Plan 2023-2026</b>	2023	Department of Health	No
<b>A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016-2025</b>	2016	Department of Health	Develop, implement, and evaluate a code of practice for food and beverages promotion, marketing, and sponsorship. This will be led by the Department of Health.
<b>HSE Tobacco Free Ireland Programme Implementation Plan 2022-2025</b>	2022	HSE	Two key focuses of the Tobacco Free Ireland Programme are to prioritise the protection of children and contribute to the denormalisation of tobacco use for the next generation. However, children's exposure to marketing of tobacco and nicotine inhaling products were not mentioned in the Implementation Plan.

## Appendix 2 WHO CLICK TOOL

The WHO CLICK framework to monitor children's exposure to unhealthy product advertising. It includes five steps:

1. Comprehend the Digital Ecosystem: Map digital marketing landscapes and children's app usage; use focus groups to gauge awareness of marketing tactics.
2. Landscape of Campaigns: Analyse national brand campaigns by collecting data from advertising agencies and social media.
3. Investigate Exposure: Monitor children's interaction with ads using a smartphone app that tracks time spent on platforms, ads clicked, and brand interactions\*.
4. Capture On-Screen: Use real-time screen capture to understand children's exposure to ads, including social media and product placement\*.
5. Knowledge Sharing: Develop accessible materials from data to raise awareness and influence policy with stakeholders like parents, policymakers, and civil society.

\* If screen capture is carried out on full screen recording in experimental settings, there are significant issues around ethics and scale to consider.

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