2. Children's Rights Impact Assessment

1. Policy objectives

The primary aim of the proposal is to reduce children's access to high-caffeine energy drinks by prohibiting the sale of high-caffeine energy drinks to persons under 16 years of age. The proposal would apply to drinks containing more than 150mg of caffeine per litre, excluding tea- and coffee-based drinks. The aim is to support improved health and wellbeing outcomes for children and young people.

The proposal would replace the current mixed system of voluntary retailer restrictions with a consistent statutory approach across Wales. It also supports wider preventative action under Healthy Weight: Healthy Wales and the aim of reducing avoidable health inequalities.

2. Gathering evidence and engaging with children and young people

What existing research and data on children and young people is available to inform your specific policy? Your policy objective may impact on other policy areas – discussions with other policy teams will be an important part of the impact assessment process ensuring you have gathered a range of information and evidence.

The proposal has been informed by a range of evidence on children and young people, including the Welsh Government's 2022 consultation on ending the sale of energy drinks to children under 16 and the 2024 call for evidence on energy drink consumption in children. Together, these exercises gathered views and evidence from children and young people, health organisations, academics, local authorities, businesses, trade associations and members of the public. They provided evidence on consumption patterns, health impacts, marketing practices, enforcement and implementation considerations.

The proposal has also been informed by data from the School Health Research Network (SHRN), which collects health and wellbeing information from children and young people across Wales, alongside published research examining the relationship between energy drink consumption and health, wellbeing, sleep, behavioural and educational outcomes. Evidence indicates that children and young people are more likely than adults to experience adverse effects from high caffeine consumption and that consumption tends to increase with age during adolescence. Evidence also suggests that children from more deprived communities are more likely to consume energy drinks regularly, indicating that the policy may contribute to reducing health inequalities.

Parents and teachers have expressed concerns about children's consumption of high-caffeine energy drinks. In the Department for Education's Omnibus survey (December 2024[1]), 82% of parents were concerned about potential negative effects, with 51% very concerned. Key concerns included impacts on oral health, sleep, behaviour,

[1] Department for Education (2025) Parent, pupil and learner voice: omnibus surveys for 2024 to 2025. Parent, pupil and learner voicer data tables: 2024 to 2025 academic year, December 2024 parent tables.

energy levels, concentration, mood and mental health, as well as, to a lesser extent, the potential for energy drinks to replace meals.

Of teachers surveyed, 61% agreed or strongly agreed that the consumption of high-caffeine energy drinks negatively impacts the health and wellbeing of pupils at their school. Almost 50% of teachers agreed or strongly agreed that the consumption of energy drinks negatively impacts pupil behaviour, and ability to learn.[2]

Children and young people's views have been considered through consultation responses, survey evidence and engagement undertaken by the Children's Commissioner for Wales. A 2024 survey found that 62% of participating children and young people supported restricting sales of energy drinks to under-16s. Participants highlighted concerns about the health effects of energy drinks, particularly their caffeine and sugar content, while some expressed concerns about restrictions or supported alternative age thresholds. Both supportive and opposing views have been considered as part of policy development.

The proposal would prohibit the sale of high-caffeine energy drinks to children under the age of 16. This age threshold reflects the outcome of consultation and engagement activity, evidence on consumption patterns, existing voluntary restrictions operated by many retailers and the proposed approach in England. The evidence suggests that consumption is generally higher among older children and young people and, as a result, the proposal is expected to provide particular benefits for older children within the under-16 age group who are more likely to consume high-caffeine energy drinks. Evidence from England indicates that 9% of children aged 11 to 15 years reported consuming high-caffeine energy drinks between two and four times per week in 2018,[3] demonstrating that regular consumption occurs among a notable proportion of young people.

The Food Standards Agency advises that children should consume caffeine in moderation, based on the European Food Safety Authority's scientific assessment of caffeine safety.

The European Food Safety Authority has not set a safe caffeine intake level for children and adolescents, citing insufficient information available to derive this.[4]

The threshold (3 milligrams of caffeine per kilogram of body weight per day) is the same as is used for the safety of single servings of caffeine in healthy adults.[5] However, the European Food Safety Authority indicates no safety concerns with adults consuming up to 400 milligrams of caffeine over the course of a day, which is almost

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[2] Department for Education (2025) School and college voice: omnibus surveys for 2024 to 2025. School and college voice data tables: 2024 to 2025 academic year, December 2024 teacher tables.

[3] Brooks F, Klemera E, Chester K, Magnusson J and Spencer N. Health behaviour in school-aged children (HBSC) national report: findings from the 2018 HBSC study for England. University of Hertfordshire 2020.

[4] European Food Safety Authority (EFSA) panel on dietetic products, nutrition and allergies. Scientific opinion on the safety of caffeine. EFSA Journal 2015: volume 13, issue 5, article number 4102

[5] European Food Safety Authority (EFSA) panel on dietetic products, nutrition and allergies. Scientific opinion on the safety of caffeine. EFSA Journal 2015: volume 13, issue 5, article number 4102

6 milligrams of caffeine per kilogram of body weight.[6] However, it indicates ‘no safety concern’ with children consuming up to 3 milligrams of caffeine per kilogram of body weight per day – double the level of ‘no safety concern’ for children.

The EFSA opinion concluded that caffeine intakes of up to 3 mg/kg body weight per day do not give rise to safety concerns for children and adolescents. However, evidence indicates that some children and young people consume caffeine at levels exceeding this threshold, particularly through high-caffeine energy drinks. The proposal has therefore been informed by the wider evidence base concerning children's consumption patterns and the potential adverse effects associated with higher levels of caffeine intake

The evidence has been considered alongside wider Welsh Government objectives relating to healthy weight, health improvement, prevention and reducing health inequalities**.** We do not expect further evidence on children to become available, due to ethical and feasibility issues that limit the ability to undertake causal research on this topic in children.

Using this research, how do you anticipate your policy will affect different groups of children and young people, both positively and negatively? Please remember policies focused on adults can impact children and young people too.

The proposal is expected to have an overall positive impact on children and young people by reducing access to products that may contribute to negative health and wellbeing outcomes. Potential benefits include:

- Improved sleep quality and duration.
- Reduced exposure to excessive caffeine consumption.
- Improvements in wellbeing, concentration and behaviour.
- Better support for healthy dietary habits.
- Longer-term health benefits through reduced consumption of high-sugar and high-caffeine products.

The policy is expected to benefit all children under 16,but may have particular benefits for groups currently more likely to consume energy drinks, including older teenagers approaching the age threshold and children living in more deprived areas.

Overall, the proposal is expected to have a positive impact on children's health and wellbeing through reducing access to high-caffeine energy drinks. However, some potential negative impacts have been identified in relation to implementation. In particular, age-verification requirements may present additional challenges for some groups, including disabled, neurodivergent and gender-diverse young people, if checks are not undertaken sensitively, consistently and accessibly. Some children and young people may also view the restriction as reducing personal choice, and there remains uncertainty about whether some individuals may switch to alternative caffeinated products that are not covered by the restriction. While these potential impacts are considered limited, they will need to be considered as part of the implementation and enforcement framework.

[6] European Food Safety Authority (EFSA) panel on dietetic products, nutrition and allergies. Scientific opinion on the safety of caffeine. EFSA Journal 2015: volume 13, issue 5, article number 4102

No specific adverse impacts have been identified for protected groups of children and young people. The proposal applies equally to all children under 16 regardless of their background or characteristics.

What participatory work with children and young people have you used to inform your policy? If you have not engaged with children and young people, please explain why.

Evidence gathered through engagement with children and young people, including work undertaken by the Children's Commissioner for Wales and responses to the Welsh Government's 2022 consultation, provided insight into children's awareness, experiences and perceptions of high-caffeine energy drinks. Many participants expressed concerns about the effects of energy drink consumption on health and wellbeing and supported action to reduce children's access to these products. This engagement helped ensure that the views and experiences of children and young people informed the development of the proposal.

3. Analysing the evidence and assessing the impact

Using the evidence you have gathered, what impact is your policy likely to have on children and young people? What steps will you take to mitigate and/or reduce any negative effects?

The proposal is expected to have a positive impact on children and young people by reducing their access to high-caffeine energy drinks. Evidence suggests that energy drink consumption among children and young people is associated with adverse health and wellbeing outcomes, including sleep disturbance, headaches, anxiety, irritability, and difficulties with concentration and behaviour. Reducing access to these products may support improved health, wellbeing and educational outcomes.

The proposal may be particularly beneficial for children and young people who consume energy drinks regularly and for those living in more deprived communities, where consumption rates are often higher. The Children's Commissioner for Wales survey also found that many children and young people recognise the potential harms associated with energy drinks and support measures to restrict sales to under-16s.

Potential negative impacts are expected to be limited. Some children and young people may view the restriction as reducing their choice, and there is some uncertainty about whether some may switch to other caffeinated products not covered by the restriction. However, the policy does not prevent access to essential goods or services and aims to protect children from products associated with potential health harms.

There are some uncertainties in the evidence base. Research consistently identifies associations between high-caffeine energy drink consumption and adverse outcomes, including poorer sleep, wellbeing, behaviour and educational engagement. However, it is not currently possible to conclude from the available evidence that energy drink consumption directly causes these outcomes, and there are ethical and practical barriers to undertaking the type of research that would be required to establish causality. There is also uncertainty about the extent to which restricting sales will influence longer-term consumption patterns and health outcomes. Nevertheless, the evidence is sufficiently consistent to indicate a potential risk of harm and supports

action to reduce children's access to high-caffeine energy drinks. The Welsh Government will continue to monitor the implementation and impacts of the policy, alongside any relevant emerging evidence, following implementation.

While no significant negative impacts on children and young people have been identified, there is a risk that some young people could experience difficulties with age-verification processes. To mitigate this, guidance will be provided to retailers on the implementation of the restriction and age-verification requirements. Communications materials will be developed to help children, young people, parents and carers understand the policy, and the impacts of the proposal will be kept under review following implementation to identify and address any unintended consequences.

How does your proposal enhance or challenge children's rights, as stipulated by the UNCRC articles and its Optional Protocols? Please identify each relevant article which applies to your policy and provide an explanation of how your proposal enhances or challenges that right. Where a potential negative impact has been identified, explain any mitigating actions that will be taken.

The information below assesses the principal UNCRC rights engaged by the proposal. The restriction would apply to sellers. It would not criminalise children or prohibit possession or consumption.

The proposal has been developed having regard to the UN Convention on the Rights of the Child, particularly Article 3 (best interests of the child), Article 12 (respect for the views of the child), Article 24 (the right to the highest attainable standard of health) and Article 29 (the goals of education). The proposal seeks to support children's health and wellbeing by reducing access to high-caffeine energy drinks and addressing evidence linking consumption to poorer sleep, wellbeing, behaviour and educational engagement. Children's views have informed the development of the policy through the 2022 public consultation and the 2024 call for evidence . In developing the proposal, the Welsh Government has considered the best interests of the child as a primary consideration and has sought to balance children's rights and freedoms with the aim of protecting and promoting their health and wellbeing.

It also reflects the UN Committee on the Rights of the Child's recommendations to improve children's health outcomes, address health inequalities, and ensure that children's views are taken into account in decisions that affect them. The proposal aims to support children's health and wellbeing by reducing access to high-caffeine energy drinks, while evidence gathered through engagement activities has helped ensure that children's views have informed policy development.

Children's views have informed policy development through consultation and engagement activities, and the proposal is intended to support children's health and wellbeing by reducing access to high-caffeine energy drinks among children under 16. Guidance, retailer training and monitoring arrangements will help support fair and consistent implementation and minimise the risk of unequal treatment.

Article 2: Non-discrimination

The proposal is expected to support the principle of non-discrimination by providing a clear and consistent age-of-sale restriction for high-caffeine energy drinks for all children under 16 across Wales. It may help reduce children's access to these products and contribute to improved health outcomes. Evidence indicates that

energy drink consumption is generally higher among older children and some socio-economically disadvantaged groups and, therefore, the proposal may also help to reduce health inequalities.

The proposal is consistent with UNCRC General Comment No. 4 on adolescent health, which supports action to protect young people from risks to their health; General Comment No. 14 on the best interests of the child, which requires children's best interests to be a primary consideration in decision-making. General Comment No. 15 emphasises the importance of protecting and promoting children's health and wellbeing, while also ensuring that children have access to appropriate information to support informed decision-making about their health. The proposal is intended to contribute to the realisation of Article 24 by reducing children's access to high-caffeine energy drinks, in light of evidence linking consumption with adverse health and wellbeing outcomes. The proposal sits alongside wider efforts to provide children and young people with information and education about healthy diets and lifestyles.

The proposal is also consistent with Article 2 of the UNCRC, as it would apply equally to all children under 16 and would not treat any group of children less favourably on the basis of a protected characteristic or other status. The available evidence suggests that some groups of children may experience poorer health outcomes associated with high-caffeine energy drink consumption. By reducing access to these products across the population, the proposal may help improve health outcomes for all children and contribute to reducing inequalities experienced by some groups. The Welsh Government has considered the impacts of the proposal on different groups of children through the Children's Rights Impact Assessment and Equality Impact Assessment and will continue to monitor its implementation and impacts following introduction.

The Welsh Government recognises that some children may experience difficulties with age-verification processes, particularly where proof of age is not readily available. To mitigate this risk, guidance will be provided to retailers to support consistent implementation of the restriction and age-verification requirements. The impacts of the policy will also be monitored following implementation to identify and address any unintended consequences. The restriction would apply only to children under the age of 16 and would not affect 16 and 17-year-olds.

Article 3: The best interests of the child

The proposal has been developed with this principle in mind and aims to protect children from the potential harms associated with the consumption of high-caffeine energy drinks. The available evidence suggests that reducing children's access to these products is likely to support their health and wellbeing and contribute to positive outcomes for children and young people. As such, the proposal is considered to be in the best interests of children and supports the Welsh Government's commitment to improving and protecting child health.

Article 6: The right to life, survival and development

The proposal supports this right by seeking to reduce children's and young people's access to high-caffeine energy drinks, which have been associated with poor sleep, headaches, anxiety, irritability and other adverse health outcomes. By helping to reduce consumption of these products, the proposal may contribute to improved physical and mental wellbeing. Better sleep, health and wellbeing may also support

children's learning, development and ability to reach their full potential, thereby contributing positively to the aims of Article 6.

Article 12: The right to express views and be heard

The development of this proposal has been informed by evidence gathered directly from children and young people, including a survey conducted by the Children's Commissioner for Wales, which captured the views of more than 600 children and young people on proposals to restrict the sale of energy drinks. These views have helped inform policy development and decision-making. In addition, the forthcoming consultation on the proposed enforcement and implementation arrangements will provide a further opportunity for children and young people and other stakeholders to provide views before final decisions are taken.

Article 13: Freedom of expression

The proposal does not restrict this right, as it regulates the sale of high-caffeine energy drinks rather than children's ability to express their views, opinions or experiences. Children and young people will continue to be able to share their perspectives on issues that affect them, including through the Welsh Government's consultation process. While the proposal limits access to a specific category of products for those under 16, any impact on personal choice is considered proportionate to the legitimate aim of protecting children's health and wellbeing and reducing exposure to potential harms associated with high-caffeine energy drink consumption.

Article 17: Access to information from the media

The proposal does not restrict children's access to information about energy drinks or related products. Instead, it provides an opportunity to improve the availability of clear, accurate and age-appropriate information about caffeine, sugar, the proposed restriction and healthier alternatives. The provision of accessible and child-friendly information can support children and young people to make informed choices about their health and wellbeing, consistent with the aims of Article 17.

Article 24: The right to health and health services

This is the article most directly engaged by the proposal. The policy aims to improve children's health and wellbeing by reducing their access to high-caffeine energy drinks, which have been associated with a range of adverse physical and mental health outcomes. By helping to reduce consumption of these products among children and young people, the proposal supports broader public health objectives, including improving diet, reducing health inequalities and creating healthier food environments. The proposal is therefore expected to make a positive contribution to the realisation of children's right to the highest attainable standard of health.

Article 27: Adequate standard of living

The proposal may contribute positively to this right by supporting healthier consumption habits and reducing children's exposure to products associated with adverse health outcomes. By helping to promote better health and wellbeing, the proposal has the potential to support children's overall development and contribute to conditions that enable them to achieve the highest possible standard of living and wellbeing.

Articles 28 and 29: The right to education and the aims of education

The proposal may contribute positively to these rights by helping to reduce excessive consumption of high-caffeine energy drinks among children and young people. Evidence suggests that high-caffeine energy drink consumption can adversely affect sleep, concentration and behaviour, all of which can influence readiness to learn and educational engagement. By reducing access to these products, the proposal may support improved wellbeing and create conditions that are more conducive to learning and educational attainment. Schools and public information campaigns may also play an important role in helping children and young people make informed choices about caffeine consumption and its potential effects on health and learning.

Article 31: The right to leisure, play and culture

The proposal may support this right by helping to promote better sleep and overall wellbeing through reducing children's access to high-caffeine energy drinks. Improved sleep and wellbeing can contribute positively to children's ability to engage in leisure, recreational and cultural activities. While some children and young people may view energy drinks as part of social or leisure activities, the proposal would only restrict the sale of high-caffeine energy drinks to those under 16 and would not prevent consumption, social interaction or participation in cultural activities. Any impact on individual choice is considered limited and proportionate to the aim of protecting children's health and wellbeing, and is outweighed by the potential health benefits associated with reduced consumption.

Article 36: Protection from other forms of exploitation

The proposal may contribute to this right by reducing children's exposure to commercial practices that encourage the purchase and consumption of high-caffeine energy drinks. By restricting the sale of these products to those under 16, the proposal seeks to limit children's access to products associated with adverse health outcomes and reduce the influence of their promotion and availability. Clear communication, retailer guidance and enforcement arrangements will help ensure that responsibility for complying with the restriction rests with retailers rather than children and young people. Any benefits are expected to arise from reducing children's exposure to the marketing, promotion and sale of high-caffeine energy drinks, thereby supporting their health and wellbeing.

Potential challenges and mitigation

The proposal may be perceived by some children and young people as limiting personal choice. However, any restriction on choice is considered proportionate to the objective of protecting children's health and wellbeing. The proposal does not restrict access to essential goods or services and applies equally to all children under the age of 16.

To mitigate any potential negative impacts, the Welsh Government will provide clear and accessible information on the reasons for the restriction and support consistent implementation through guidance for retailers. The impacts of the policy will be monitored following implementation to identify any unintended consequences and inform any future improvements that may be required.

Overall assessment: The proposal is expected to have a positive impact on children's rights and is particularly supportive of Articles 3, 6, 12, 24 and 27 of the UNCRC. Any potential negative impacts are limited and proportionate to the intended public health benefits.

4. Ministerial advice and decision

- *Once completed, your CRIA must be signed off by your Deputy Director.*
- *Your CRIA findings should be integrated into your ministerial advice to inform their decision.*

5. Publication of the CRIA

The draft Children's Rights Impact Assessment (CRIA) will be published alongside the consultation document to support consultation and engagement on the proposals. Stakeholders will have the opportunity to comment on the assessment as part of the consultation process. Any relevant evidence, views or issues raised will be considered and, where appropriate, reflected in the final CRIA.

- The Deputy Minister will be asked to sign-off the draft assessment before publication

This version will be sent to the *CRIA@gov.wales* mailbox before publication.

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6. Communicating with Children and Young People

Following publication of the consultation, the Welsh Government will publish a summary of responses explaining how the evidence and views received have informed policy development and final decisions. Child-friendly communications will be considered as part of this process. During implementation, the Welsh Government will work with relevant partners to ensure that children and young people have access to clear and accessible information about the restriction and what it means for them.

7. Monitoring and Review

The CRIA will be reviewed following the consultation to take account of any additional evidence, views or issues raised, including those from children and young people and organisations representing their interests. Any necessary changes to the assessment or policy proposals will be made before the final CRIA is published.

Following implementation, the Welsh Government will keep the impact of the policy under review through ongoing monitoring, stakeholder engagement and evaluation activity. At this stage, no revisions to the policy or its implementation are considered necessary. However, any evidence of unintended impacts on children's rights will be considered as part of future policy review and monitoring arrangements.