

How Junk Food Ads Are Making Children Unhealthy and Hurting Our Future

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Abstract: Childhood obesity has emerged as a significant health concern. It is a problem that goes beyond children eating too much and not exercising. Aggressive marketing techniques by food and beverage companies that target children through their ads promoting snacks and drinks rich in sugar, salt, and fat are considered one of the most significant contributors to this epidemic. These ads infiltrate every sphere of life—appearing on TV, social media, video games, and many other places—affecting children at a young, formative age. The inconvenience is that children develop their eating habits at a very young age, and the continuous exposure to unhealthy food marketing creates preferences that persist into adulthood, increasing the risk of developing conditions such as diabetes, heart disease, and cancer. The long-term effects of the increased rates of childhood obesity are dire, both for individuals and the entire healthcare system. The rising prevalence of obesity or overweight among more children increases their risk of developing health issues due to obesity in the future. This tendency significantly burdens the healthcare system, causing a surge in demand for medical services, greater expenditures on medical treatments, and further overloading healthcare specialists. The health costs associated with the diseases caused by obesity are already being experienced, with billions spent annually on treating preventable diseases due to eating habits and lifestyle choices. This paper examines the influence that marketing has on children's eating behaviors and its direct correlation with childhood obesity. It analyses the impact that food and drink adverts have on preference towards unhealthy food in children, thereby complicating healthy food choices among children. Moreover, the paper explores the broader implications of these unhealthy dietary habits, not only for personal health but also for public health and the economy in general. Lastly, the paper provides some recommendations and measures in the form of policy that can be implemented to prevent the spread of the growing obesity epidemic and help future generations by limiting how food is marketed to children and encouraging healthier food choices.

Keywords: Childhood Obesity, Food Marketing, Unhealthy Food, Advertising, Health Policy, Diabetes, Cardiovascular Disease, Cancer, Healthcare System, Policy Interventions

1. Introduction

Childhood obesity has become one of the most disturbing public health issues of the 21st century. In recent decades, the number of affected children and adolescents has increased exponentially. The World Health Organization (WHO) reported that in 2022, more than 390 million children and teens aged 5–19 were classified as overweight or obese globally. Over the past six years, this number has increased by almost 15 percent, from 340 million to 390 million, which is also quite worrying regarding growth tendency (World Health

Organization, 2021). The Centers for Disease Control and Prevention (CDC) in the United States reports that 21.1 percent of school-age children and adolescents in the country were obese, an apparent increase compared with earlier figures, which stood at 19.7 percent (CDC, 2022). Childhood obesity has become an epidemic, leading to a rise in a whole range of chronic illnesses such as heart disease, diabetes, and even cancer, to name a few, due to poor diet and lack of physical activity.

This epidemic of obesity cannot be caused by the prominence of only the individual lifestyle; it is inextricably connected with the environment in which the children grow and live. One of the primary motivators of this epidemic is the sheer power of food advertisement. Today's children are constantly exposed to ads for unhealthy foods such as fast food, sugary drinks, and snacks. Media channels like television, YouTube, TikTok, and even video games are saturated with these ads (Sadeghirad et al., 2016). According to a 2019 report conducted by the Rudd Center for Food Policy & Obesity, at \$1.8 billion per year, children in the U.S. are bombarded by over 14,000 food advertisements per year, most of which feature food that was high in sugar, fat, and sodium (Harris et al., 2019). The ads are especially successful because this is when a person shapes eating habits during childhood, which are frequently carried well into adulthood. Marketing tactics employed in these advertisements ensure they directly appeal to children, including attractive colors, catchy theme songs, and recommendations for favorite movies or content creators that children follow and are influenced by. Studies have revealed that such advertising affects children's food preferences and purchases, and in most cases, they tend to choose less healthy meals than much healthier ones (Sadeghirad et al., 2016).

This incessant exposure to advertisements is particularly harmful as it influences instant food decisions and future health. In cases of unhealthy food marketing, children tend to become fond of high-calorie, low-nutrient food and thus are at high risk of becoming overweight or obese (Harris et al., 2019). Such bad eating habits predispose chronic diseases, some of which are manifested during adulthood. Illnesses such as type 2 diabetes, cardiovascular trouble, and some cancers, all of which are directly tied to obesity, are now more widespread and reaching younger age groups than ever before. Research indicates that obese children have a significantly greater chance of having them later in life, which results in a short lifespan and reduced life quality (Lobstein et al., 2015).

The other issue of childhood obesity that is of great concern is that it creates a financial burden on society. Due to the increase in life expectancy, there are more years that one has to spend with obese health complications. This creates a substantial financial burden on individuals and the healthcare system. The CDC estimated that obesity-associated medical expenses in the U.S. outpaced \$147 billion in 2008, and chances are that this figure has further gone up since that time because of the ever-increasing obesity rates (CDC, 2024). These costs stem from direct medical expenses such as doctor visits, medications, and hospitalizations, as well as indirect costs, including lost productivity and reduced workforce participation. The burden on the healthcare system because of obesity in children will only increase as the number of obese children rises, and this can overwhelm the healthcare system, forcing everyone to shell out more money to pay higher health insurance premiums. Health is only one aspect of the increasing epidemic. The challenges to the future workforce will be even greater because more people will encounter obesity related health problems at a younger age. The way things are going now, society is looking at a potential that would see a substantial part of the population getting sick with chronic diseases that have been avoided by improving their diets and addressing them with specific treatments. Policy makers, public health experts, and society generally have to pay keen attention to the situation. The importance of defining the contribution of advertising to the caloric habits of children, defining interventions that can mitigate the effects of the

unhealthy marketing of food, and discussing policies that influence healthier choices on eating by future generations is of great importance.

This paper explores the extent to which food advertisements have affected children's eating habits, their relationship to the increased cases of obesity, and the broader implications they may have for population health in the future. By analyzing how well advertising techniques work, how they influence children's eating habits, and possible political solutions, our society may gradually become aware of solutions to overcome the childhood obesity epidemic and build a healthier future for our children.

2. Childhood Obesity and Long-Term Health Consequences

Data from the National Health and Nutrition Examination Survey (NHANES) makes it pretty clear: childhood obesity in the U.S. has been going up for more than 20 years. Back in 1999–2000, 13.9% of children aged 2–19 were obese. By 2021–2023, that number had jumped to 21.1%—more than a 50% increase. Severe obesity has more than doubled, from 3.6% to 7.0% over the same period. The rise has not been steady yearly, but the overall trend is up. By 2015–2016, obesity rates had already passed 18%, and they kept climbing, hitting nearly 20% before COVID-19. Severe obesity has stayed above 6% since 2013–2014. This shows just how serious the problem is. It is not just about children "needing more exercise"—it is about an environment that pushes cheap, unhealthy food and encourages sitting still over moving. If we do not start tackling things like the constant marketing of junk food, we will keep seeing these numbers climb, and the health consequences will follow us into adulthood.

Table 1. Prevalence of Obesity and Severe Obesity Among Persons Aged 2-19 Years - United States, 1000-2000 through 2021-2023

Survey Years	Sample Size	Obesity			Severity Obesity		
		Percentage	(95% CI)	SE	Percentage	(95%CI)	SE
1999-2000	4039	13.9	12.1, 15.9	0.86	3.6	2.6, 5.0	0.55
2001-2002	4261	15.4	13.4, 17.5	0.94	5.2	4.1, 6.4	0.52
2003-2004	3961	17.1	14.5, 20.0	1.26	5.1	3.8, 6.6	0.62
2005-2006	4207	15.4	12.6, 18.6	1.35	4.7	3.4, 6.3	0.64
2007-2008	3249	16.8	14.2, 19.8	1.29	4.9	3.7, 6.5	0.64
2009-2010	3408	16.9	15.4, 18.4	0.71	5.6	4.3, 7.1	0.63
2011-2012	3355	16.9	14.8, 19.2	1.01	5.6	4.2, 7.3	0.71
2013-2014	3523	17.2	14.9, 19.6	1.09	6	4.8, 7.3	0.57
2015-2016	3340	18.5	17.9, 21.6	1.26	5.6	4.0, 7.6	0.81
2017-March 2020	4749	19.7	17.9, 21.6	0.88	6.7	5.5, 8.1	0.60
August 2021-August 2023	2492	21.1	18.7, 23.6	1.13	7	5.8, 8.4	0.60

Source: National Center for Health Statistics (U.S.) (2024)

Children who are overweight have a significantly higher likelihood of remaining overweight into adulthood. A study in the *New England Journal of Medicine* found that five-year-old children with obesity are about four times more likely to become obese adults compared to children who are not. This issue extends beyond physical appearance and has serious health implications. Childhood obesity can lead to serious health conditions,

including Type 2 diabetes, high blood pressure, high cholesterol, fatty liver disease, bone and joint issues, sleep apnea, and even mental health struggles such as low self-esteem and depression. Moreover, these problems do not just disappear when one grows up; they usually worsen. As adults, obesity is linked to even bigger health risks like heart disease, stroke, certain cancers, and a lower quality of life. According to the CDC, chronic diseases pose a significant public health challenge in the U.S., causing a lot of preventable deaths and putting massive pressure on the healthcare system. Heart disease and stroke alone are responsible for over 944,000 deaths annually in the U.S., and that is more than one-third of all deaths. Cancer is another major cause of death, with about 1.7 million diagnosed each year and over 600,000 deaths. Diabetes affects more than 38 million individuals in the U.S., and another 98 million have prediabetes, which means they are at high risk of developing it. Diabetes can also cause serious complications such as heart disease, kidney failure, and blindness, underscoring the critical importance of prevention.

3. The Effects of Marketing in Shaping Children's Food Choices

Food companies know precisely how to get children's attention in stores. They slap cartoon characters or popular movie figures on packaging and put junk food on the lower shelves so children see it first. The whole point is to make children bug their parents into buying it. They do not stop there; they also show these products on TV and online, targeting children and teens. Studies show that the more children see these ads, the more likely they are to eat high-calorie, low-nutrient foods. One big review in *Obesity Reviews* (2016) even found that advertising shapes what children like, what they ask their parents to buy, and what they eat, all of which can lead to unhealthy weight gain.

The U.S. snack market has been booming. In 2020, savory snacks were worth about \$26.9 billion, up \$2 billion from the year before, and they are expected to hit \$32.7 billion by 2026. To keep the money rolling in, snack companies have been spending a ton on marketing—over \$627 million in the latest year, up more than 15% from 2022. Most of this money goes to advertising high-fat, high-sugar, high-salt foods, especially to children and teens through TV, social media, packaging, and in-store promotions. A 2017 study from the Rudd Center found that U.S. food, beverage, and restaurant companies spend around \$14 billion yearly on marketing. Most of this promotes fast food, sugary cereals, candy, and sugary drinks—stuff loaded with calories, sugar, salt, and fat. With YouTube, Instagram, TikTok, and other digital platforms, advertisers can reach children directly and even personally, often without parents realizing it.

Table 2. Savory Snacks Retail Value Sales by Subcategory in the U.S. in US\$ Billions

Category	2018	2022	CAGR (%) 2018-2022	2023	2027	CAGR (%) 2023-2027
Savory snacks	48.8	66.6	8.1	73.6	88.3	4.7
Salty snacks	24.0	33.3	8.6	37.4	45.8	5.2
Savory biscuits	6.8	8.6	6.2	9.4	10.7	3.2
Nuts, seeds, and trail mixes	6.8	8.6	6	9.3	10.6	3.3
Meat snacks	3.5	4.8	8.3	5.0	6.1	4.9
Popcorn	3.2	4.5	8.8	5.0	5.9	4.4
Other savory snacks	2.6	4.1	12	4.5	5.6	5.7
Pretzels	1.8	2.6	9.4	2.9	3.6	5.7

Source: Agriculture and Agri-Food Canada (n.d.)

Research shows that junk-food ads change how people eat, with effects that are fast and measurable. A 2022 review and meta-analysis found that high-fat, sugar, and salt (HFSS) food marketing makes children and adults eat more calories. Exposure led to a noticeable increase in consumption among children, with studies showing that just five minutes of ads could make a child consume around 130 extra calories. Brain scans suggest this happens because these ads light up areas of the brain that respond to visual food cues and cravings. Even if children do not see the food itself, just the brand, they still eat more. Moreover, the extra calories aren't balanced out later, so repeated exposure creates a constant surplus that can contribute to weight gain. The long-term effects are apparent in national data. According to NHANES, obesity among U.S. children and teens (ages 2–19) jumped from 13.9% in 1999–2000 to 21.1% in 2021–2023. Severe obesity more than doubled over that period, from 3.6% to 7%. Combining the rise in snack sales, higher marketing spending, and the strong research linking advertising to calorie intake paints a clear picture: constant exposure to junk-food marketing promotes poor eating habits, increases calories consumed, and fuels the growing obesity problem among children. They are especially vulnerable to these ads because of how their brains develop. Research shows that children under eight often do not understand that advertising is trying to persuade them. Even older children and teens can still be influenced by ads that appeal to emotions, trends, or peer pressure.

4. How This Connects to Major Causes of Death

Looking at the history of U.S. health makes it obvious why childhood nutrition matters so much. In 1900, most deaths were from infectious diseases like pneumonia, tuberculosis, and diphtheria. Those threats dropped dramatically thanks to vaccines, antibiotics, and better sanitation. By 2023, the biggest killers are chronic diseases tied to lifestyle: heart disease, cancer, stroke, chronic lung disease, and Alzheimer's. Many of these conditions are linked to poor diet, obesity, and sedentary behavior, all starting early in life. Poor eating habits shaped by marketing do not just affect children now—they set the stage for lifelong health problems. NHANES data show obesity in children and teens has climbed significantly, and studies confirm that even brief exposure to junk-food ads drives higher calorie intake. These early habits contribute to obesity, which increases the risk of heart disease, type 2 diabetes, certain cancers, and other chronic illnesses. In short, the same environmental factors—like constant junk-food advertising—that are causing the obesity epidemic today will likely lead to more chronic disease and early death in the future.

Table 3. Top 10 Causes of Death in the U.S. in 1900 and 2023 (per 100,000 population)

Cause of Death	1990	2023
Pneumonia or Influenza	202.2	
Tuberculosis	194.4	
Heart Disease	137.4	162.1
Cerebrovascular Disease	106.9	
Nephropathies	88.6	13.1
Accidents	72.3	62.3
Cancer	64	141.8
Senility	50.2	
Diphtheria	40.3	
Stroke		39
Chronic Lower Respiratory Disease		33.4
Alzheimer's Disease		27.7

Sources: Murphy et al. (2024), Tippet, R. (2014)

5. Economic Impact: Rising Healthcare Costs

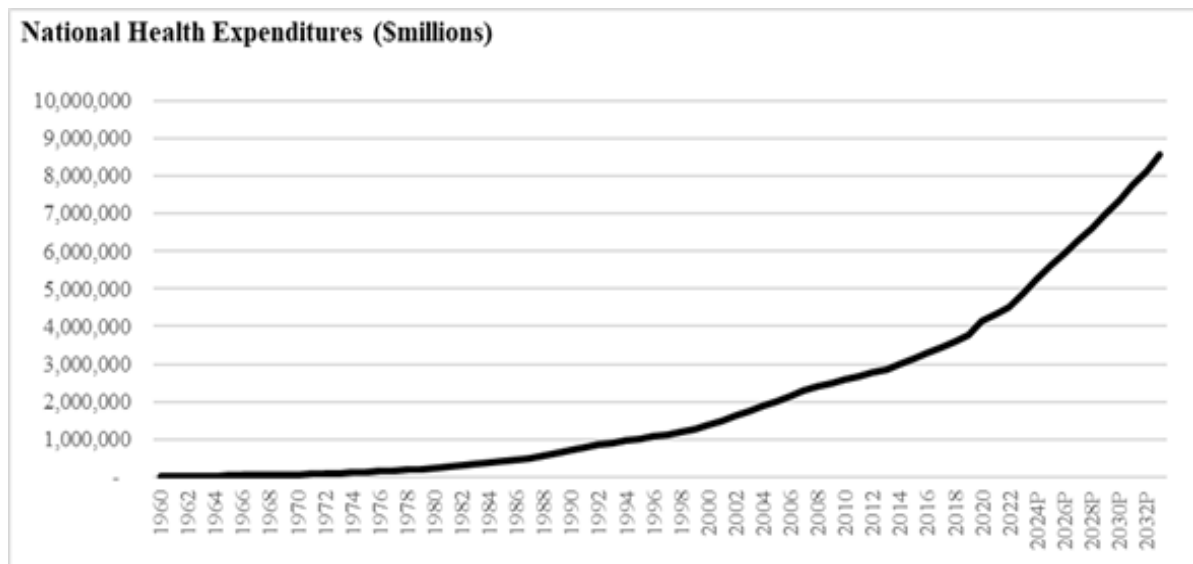


Figure 1. U.S. Health Expenditures, 1960–2032, (in Millions)

Source: Centers for Medicare & Medicaid Services (2025)

Health spending in the U.S. keeps increasing, and it is expected to keep rising in the coming years. Data from the Centers for Medicare & Medicaid Services (CMS) show that this is partly because more people are living longer and chronic diseases are becoming more common. This means we need smarter, more preventive, and better-coordinated ways to manage chronic health problems.

Obesity is a massive part of the problem. The CDC estimates that obesity-related healthcare costs over \$173 billion every year in the U.S. alone. A lot of these costs come from chronic diseases that start in childhood but get worse as people grow up. Living longer is great, but when those extra years are full of obesity-related health issues, it drives up medical costs and lowers quality of life and productivity.

Chronic diseases in general are crazy expensive. Heart disease costs about \$254 billion annually, plus another \$168 billion lost in workplace productivity. By 2050, the total cost of heart-related problems could hit nearly \$2 trillion. Cancer care is also getting more expensive and is expected to top \$240 billion by 2030, mainly because treatments are more advanced and more people are aging. Diabetes is another huge financial burden—the American Diabetes Association estimates it costs \$413 billion in 2022, including medical bills and lost productivity. These numbers show the importance of prevention and innovative public health policies to lower human and economic costs.

Some people drive up healthcare spending. Adults with five or more chronic conditions make up only 12% of the population, but they account for 41% of all healthcare costs. That is a massive imbalance and shows how much more expensive it is to manage multiple chronic illnesses compared to people with fewer or no chronic conditions.

6. Preventive Strategies for Childhood Obesity

Prevention is seen as the initial step in the fight against childhood obesity. As the Centers for Disease Control and Prevention (CDC) points out, since the 1970s, the obesity rates in children have more than 3 times in the U.S., and 1 out of every five children is currently obese (CDC, 2022). The fight against this epidemic should be combined with prevention at

the individual and policy levels. While educating children about healthy eating habits is essential, ensuring they have access to nutritious foods and are protected from the constant bombardment of unhealthy food marketing is just as crucial. Especially schools, where children spend much of the day and where eating habits are commonly influenced by the learning environment, represent a key intervention area.

6.1. Better School Meals

School meal improvement is one of the most essential strategies that can be used to fight obesity in children. Schools play a crucial role in shaping children's eating habits and have the potential to influence the future health of entire generations. The CDC also claimed that children consume about 35-40 percent of their daily calorie intake at school, which makes it a purposeful location in the context of dietary intervention (CDC, 2022). Healthier school environments can be established by replacing fried foods, sweet beverages, and hyper-processed snacks with whole grains, produce, and lean meat. Studies have shown that higher-quality school meals not only reduce the risk of obesity but also support academic performance by providing the nutrients needed for cognitive development (Lobstein et al., 2015). Also, the enhancement of school meals is a long-term gain because it can potentially reduce health expenditures in the future, which are raised by diet-based chronic illnesses (Bleich & Vercammen, 2018).

6.2. Lecture in Nutrition

There must be nutrition education in schools. Teaching children how different foods are produced, how to prepare a particular food, and the cultural importance of certain foods instills lifelong healthy choices. The association between nutrition education and the increasing power of food marketing, which often promotes unhealthy eating habits, is a possibility (Harris et al., 2019). Research indicates that children who receive education about food and nutrition are more likely to make healthier food choices and demonstrate better understanding of food's role in overall health (Sadeghirad et al., 2016). This education can be integrated into subjects such as health, science, or home economics. However, the early lessons do not just limit the possibility of future obesity but also enable children to comprehend the expanded environmental and social implications of their food choices, including the carbon footprint of food production and the moral considerations of food consumption.

6.3. Taxes on Unhealthy Foods

The next possible policy initiative that can be made to decrease obesity in children is a tax on unhealthy foods, which include sugary beverages and junk food. Much like tobacco and alcohol, increasing the price of unhealthy food through taxation is known to reduce consumption due to an impaired affordability (Sadeghirad et al., 2016). According to a recent study, a sugar beverage tax decreased consumption of such beverages, which lowered the prevalence of obesity among children (Bleich & Vercammen, 2018). The taxes raised on these may be returned to governments to fund health care programs aimed at fighting obesity and other conditions resulting from obesity, such as diabetes and heart disease. Soda taxes have already been introduced in some areas, and positive effects on public health have been recorded (Harris et al., 2019). Not only do these taxes reduce consumption, but they also create a noteworthy deterrence to normalizing unhealthy eating routines.

6.4. Establishment of a National Prevention Office

The U.S. is presently characterized by hundreds of programs encompassing diet dispersed within 21 federal agencies. Good as they might be, these programs are usually chaotic and not coordinated. Such a central obesity prevention office may formalize and coordinate these activities, concentrate resources, and ensure that evidence-based actions are used effectively (CDC, 2024). Concentrating federal efforts, such an office would concentrate on prevention-oriented programs that include clear guidelines for schools and communities and coordination with state and local governments, working to make changes at the grassroots level. Resource focus and centralization may turn around childhood obesity and redirect it toward a national health and prevention culture.

7. Conclusion

Conclusively, identifying childhood obesity involves more than teaching children to make better food decisions. It is not an individual, short-term problem; it is systemic and runs on a spectrum of social elements, including how pervasive commercial interest is in encouraging children to consume unhealthy foods. These forces shape children's eating habits and create a public health crisis affecting individuals and the healthcare system. The fast-growing rates of obesity among children point to the clear idea that our efforts and small-scale measures to combat the issue cannot be the single solution to the problem. We should understand that the environmental factors that condition the development of obesity are deeply rooted in an environment that incessantly promotes unhealthy nutritional patterns, including food advertising and low-cost, heavily processed foods. Increasingly, this climate disproportionately impacts children who are especially susceptible to the messages they see in the media, so we have to start looking at how to redress the problem socially and on a policy level. The medical complications of childhood obesity are drastic and far-reaching and comprise risks of type 2 diabetes, heart disease, heart attack, stroke, and some cancers. In addition, as the children become adults and develop health complications caused by obesity, it will further increase pressure on healthcare systems, resulting in an increased healthcare cost burden and pressure on public and private health providers. As noted by the Centers for Disease Control and Prevention (CDC), healthcare expenditures caused by obesity already amount to billions every year in the United States alone, with such costs expected to continue going up as the prevalence of obesity steadily grows (CDC, 2024). Since these are likely long-term health problems, the financial and social implications of inaction will be vast, not only at the individual level but also at the national level.

As one of the most effective measures to address childhood obesity, it is essential to note that a multifaceted and coordinated intervention is needed. To begin with, better restrictions on food marketing to children are required. This would include improved regulations related to the nature of food advertisements that appeal to the youth, particularly those that strengthen highly concentrated food products in sugar, salt, and fat. These regulations should be implemented online, including video games and social media networks, where children have a higher chance of being exposed to unhealthy marketing tactics. In addition to the limitations of marketing, better food labelling will be key in seeing that parents and caregivers make more informed decisions about the products they use. Labels with nutritional content written in easy-read text will give consumers, particularly parents, control over making better health choices for their children. Moreover, along with schools, schools play a critical role in the war on childhood obesity. Healthy habits cannot only be taught in school but should also be reinforced. Preparing healthy school food, reducing access. Inclusion of nutrition in the curriculum and the processing of snack foods and sweetened beverages helps to create an environment that encourages healthy paths.

Also, economic measures like a sugar-sweetened beverage tax and a junk food tax may deter eating unhealthy food and create funds that may be repaid to further public health initiatives. Investing in children's health now is not just the right thing to do; it is also a financially sound decision. By anticipating and acting to correct obesity among children and the factors of obesity, we will be able to minimize ill health in the future with low healthcare costs for future generations and a better life. The price of doing nothing is too great both humanly and financially. To ensure that obesity-related health problems are not the issues driving our healthcare system in the future, there is a need to act today and adopt wide-reaching evidence-based policies that will support healthier food environments, improve nutrition education, and increase food marketing safeguards.

Finally, child obesity is an issue that can only be tackled through the intervention of policymakers, the health system, the food industry, schools, and families. As a solution, it is necessary to turn the tide of childhood obesity through a concerted, united effort. Until then, the future is bleak indeed, and any future generation will be less healthy and less prosperous than the current one.

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