

ARFID (Avoidant Restrictive Food Intake Disorder)

Avoidant Restrictive Food Intake Disorder is a feeding and eating disorder. People with ARFID find it hard to eat enough for healthy growth, development and functioning.

Many children and young people have strong preferences and dislikes when it comes to food and eating. This is entirely normal and appropriate. Many children will be 'fussy' eaters and have particular habits when it comes to food and eating such as; not wanting food to touch, wanting to use certain crockery and cutlery, not liking certain foods, preferring certain brands, feeling anxious or reluctant to try new things, only wanting to eat a preferred food over and over again, getting bored of certain foods and refusing to eat them. Emotional responses to eating such as eating more or less often is also common and often resolves itself in time without intervention. ARFID however tends to be pervasive (across all settings and contexts) and the chronic difficulties cause a significant impact on an individual's physical and emotional health, development and functioning in everyday life.

ARFID can only be diagnosed by a health care professional.

Top tips

- If you are concerned a young person may have ARFID, seek advice and guidance from your GP in the first instance. If a young person is not eating or drinking sufficiently, making sure a young person is medically assessed to make sure they are physically safe is critical.
- Explain ARFID to family members, friends and other professionals so they can support your child with what they are eating. A useful video for parents and professional to learn more about ARFID can be found in the video section on Hampshire CAMHS website '*Eating disorders in children and young people- E-learning Part 6*' <https://youtu.be/V4bjxvGy2PU>
- No such thing as 'junk food' for a child/ young person with a very restrictive diet. Evidence suggests children and young people with ARFID are more at risk of losing weight than gaining weight. It can be beneficial to have high calorie per mouthful foods for individuals who eat slowly and have small amounts in one sitting. Often these foods are described as 'junk foods' and are 'preferred foods' for those with ARFID.
- Having regular eating routines, clear expectations and boundaries helps to develop mind and body feelings of hunger. That being said, try to keep as much variety and spontaneity in your family life. This is thought to reduce the development of rituals and routines which can be very restricting for your child's development and family life.
- Avoid force feeding, hiding food, rewards, withholding preferred foods or having long gaps between meals to try to evoke hunger; unless you have been directed to by a health care professional. These are more than likely to increase young person's anxiety and lead to refusal.
- Try using relaxation and distraction techniques to help support with reducing anxiety around mealtimes (leading up to mealtimes and post mealtimes). Please see the Hampshire CAMHS website for more resources and suggestions (www.hampshirecamhs.nhs.uk).
- Managing expectations. Readiness and willingness to try new food is affected by motivation and age. It can help to identify and set regular goals that a young person might like to achieve in order to enhance or sustain motivation.
- It can take repeated times of trying a new food to begin to tolerate it (approximately 20 times). Start with foods that either a young person has identified they would like to try or foods that are similar in sensory properties (taste, texture, look, smell) to those they already like/ tolerate. Regular, consistent and repetitive exposure for a prolonged period of time is required to successfully introduce a new food.

- Have fun with food. Messy play/ food experiment play outside of mealtimes. These experiences allow your child to use all of their senses and explore a range of textures through the medium of 'play'. It is important to keep food being 'tested' or 'tried' out of these experiences. The purpose of these would be to build up tolerance through exposing your child to a range of sensory experiences. It would be advised to never start with sticky or wetter textures as these are much harder to tolerate for a hypersensitive person. Always start with drier textures and using spoons or utensils before encouraging touch.

Resources

- Hampshire CAMHS website; www.hampshirecamhs.nhs.uk
- Beat Website; <https://www.beateatingdisorders.org.uk/types/arfid>
- Child Feeding Guide; <https://www.childfeedingguide.co.uk/>
- Food Refusal and Avoidant Eating in Children; A practical guide for parents and professionals by Gillian Harris and Elizabeth Shea
- Avoidant Restrictive Food Intake Disorder- A guide for parents and carers by Rachel Bryant-Waugh
- Helping Children Develop A Positive Relationship With Food by Jo Cormack



Scan this link to download the slides from this workshop.