Understanding ARFID

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ARFID is diagnosed when

An eating or feeding disturbance (e.g., apparent lack of interest in eating or food; avoidance based on the sensory characteristics of food; concern about aversive consequences of eating) as manifested by persistent failure to meet appropriate nutritional and/or energy needs associated with one (or more) of the following:

- Significant weight loss (or failure to achieve expected weight gain or faltering growth in children).
- Significant nutritional deficiency.
- Dependence on enteral feeding or oral nutritional supplements.
- Marked interference with psychosocial functioning.

The disturbance is not better explained by lack of available food or by an associated culturally sanctioned practice.

The eating disturbance does not occur exclusively during the course of anorexia nervosa or bulimia nervosa, and there is no evidence of a disturbance in the way in which one's body weight or shape is experienced.

The eating disturbance is not attributable to a concurrent medical condition or not better explained by another mental disorder. When the eating disturbance occurs in the context of another condition or disorder, the severity of the eating disturbance exceeds that routinely associated with the condition or disorder and warrants additional clinical attention

What does ARFID look like?

Your child may show some (but not necessarily all) of the following:

- Eating a very restricted range of foods (selective eating)
- Rarely appearing to be hungry or asking for food
- Avoiding / refusing to sit down for meals or needing distraction (e.g. TV) to eat
- Turning away, pushing the spoon away etc.
- Anxiety/disgust e.g. gagging or vomiting at the sight / smell / taste of food
- Eating very small amounts
- Refusing to self-feed
- Spitting out food
- Crying / screaming at mealtimes
- High anxiety over new foods
- Difficulty in eating in a range of settings e.g. will only eat at one particular restaurant, will not eat food on holiday, eats certain foods at home and others at school
- Negotiating and/or using distraction techniques to avoid eating

Picky Eater vs Problem Feeder

Picky Eater	Problem Feeder
• Decreased range or variety of foods but will eat 30+ foods • Foods that are lost due to burn out (eaten too often) will be regained after 2 weeks • They will tolerate, touch and taste new foods • Eats at least one food from each nutrition and texture group	• Eats less than 20 foods • If foods are lost due to burn out, will not be re- acquired • Will cry and have a melt down when a new food is introduced • Will refuse entire categories of food textures and nutrition groups

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ARFID
Awareness UK

STEPS TO EATING

EATING
- chews and swallows whole bolus independently
- chews, swallows whole bolus with drink
- chews, swallows some and spits some
- bites, chews "x" times & spits out
- bites pieces, holds in mouth for "x" seconds & spits out
- bites off piece & spits out immediately
- full tongue lick
- licks lips or teeth

TASTE
- tip of tongue, top of tongue
- teeth
- lips
- nose, underneath nose
- chin, cheek
- top of head
- chest, neck
- arm, shoulder
- whole hand
- fingertips, fingerpads
- one finger tip

TOUCH
- leans down or picks up to smell
- odor in child's forward space
- odor at table
- odor in room

SMELLS
- uses utensils or container to serve self onto own plate/space
- uses utensils or a container to stir or pour food/drink outside of own space
- uses utensils or a container to stir or pour food/drink for others
- assists in preparation/set up with food

INTERACTS WITH
- looks at food when directly in child's space
- being at the table with the food just outside of child's space
- being at the table with the food ½ way across the table
- being at the table with the food on the other side of the table
- being in the same room

TOLERATES

What is Neophobia?

Neophobia (fear of new foods) is a normal developmental stage so:

Try not to..

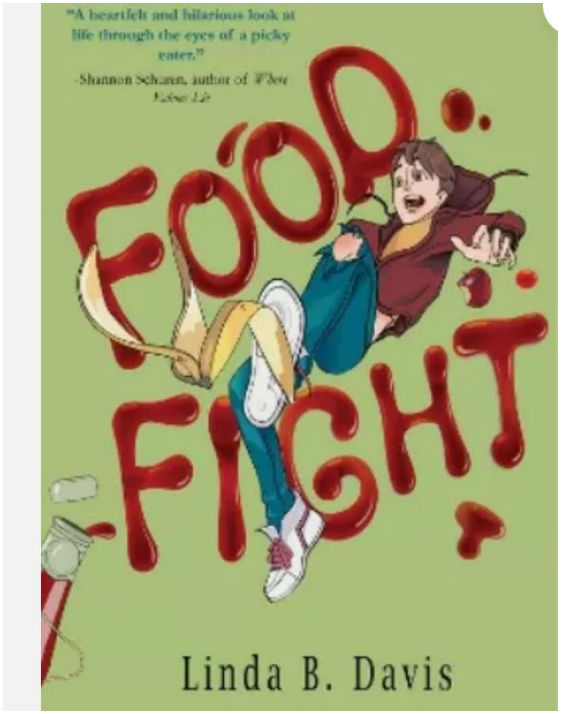
- Panic! Very few neophobic children have health problems because of their limited-range diet.
- Prompt. This makes children less likely to try a new food.
- Coerce. This will make children feel more anxious.
- Bribe. If they are fearful about eating it, a bribe won't help.
- Hide food. If they find the new food, they might never eat the 'safe' food again.

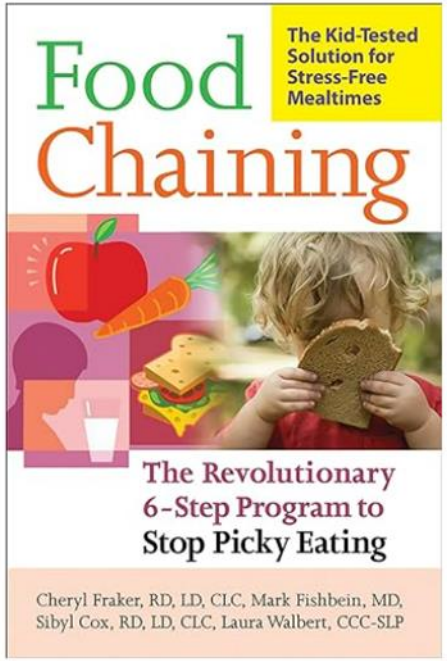
Do

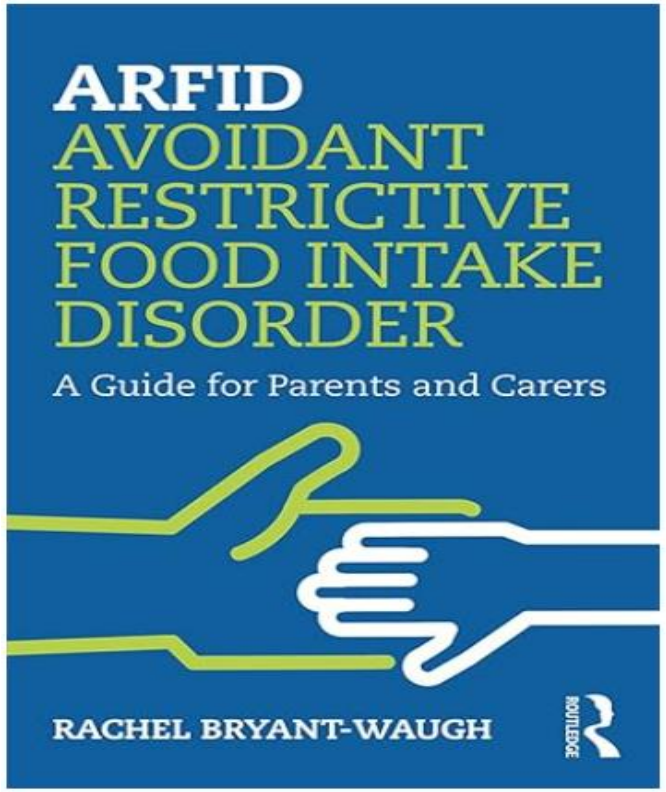
- Allow them to eat the foods that they like.
- Model eating new foods in front of the child.
- Play games with your child that:
  - Are fun
  - Involve them in touching, seeing and smelling new foods
  - Distract them from the foods with which they are playing

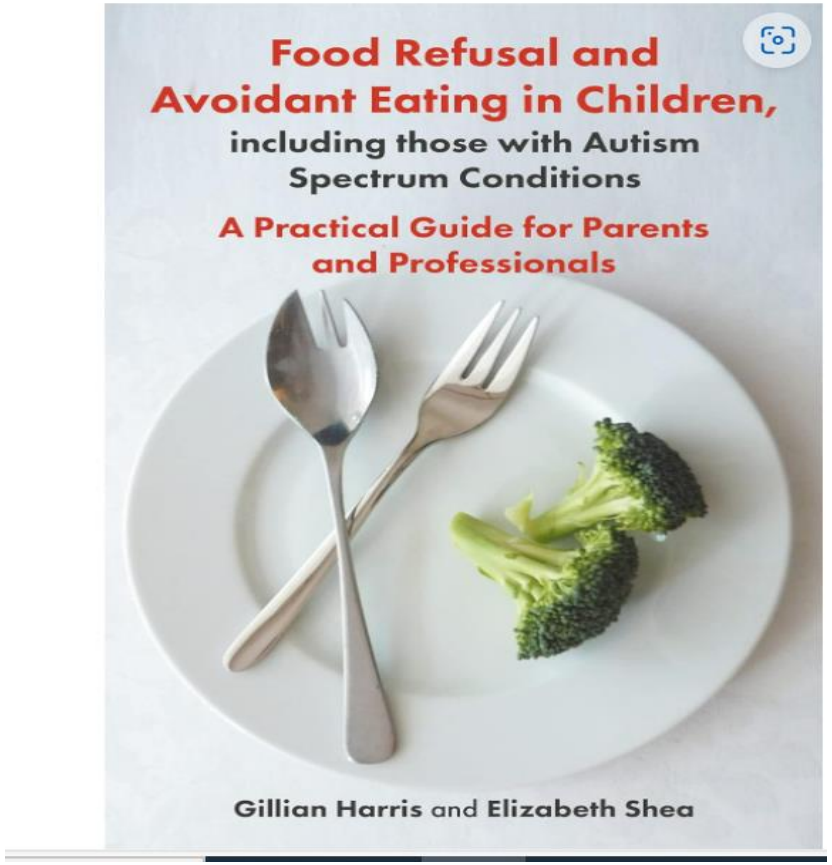
Disgust response

Some useful books






ARFID
AVOIDANT
RESTRICTIVE
FOOD INTAKE
DISORDER
A Guide for Parents and Carers
RACHEL BRYANT-WAUGH
ROUTLEDGE


Food Refusal and
Avoidant Eating in Children,
including those with Autism
Spectrum Conditions
A Practical Guide for Parents
and Professionals
Gillian Harris and Elizabeth Shea

Useful websites

ARFID Awareness UK

Overview – Eating disorders - NHS (www.nhs.uk)

ARFID in children & teens | Raising Children Network

ARFID - Beat (beateatingdisorders.org.uk)

Resources – YouTube videos about Sensory Processing (mosaicchildrenstherapy.co.uk)

We also have a YouTube channel with videos and webinars:

[SWLSTG Education Wellbeing Service -Parents/Carers/Children/YP/]

Children & Young People's Wellbeing Service - YouTube

Useful videos

Feeding difficulties in Children SOS approach

Avoidant restrictive food intake Disorder (ARFID)

What can schools do to help ?

- The primary/nursery school should know that:

- It is of primary importance that your child eats and drinks throughout the day.
- Reasonable accommodation should be made to allow them to do this.
- Your child will bring their own packed lunch, snacks and drinks into school where necessary.
- They cannot eat the fruit snack provided.
- Your child should not be encouraged to eat the fruit snack provided.
- Although their packed lunch and snack seems ‘unhealthy’, no-one should ever. comment on this (foods might be lost from their dietary range).
- Care should be taken when discussing ‘healthy and unhealthy’ foods as part of the curriculum.
- Your child might not be able to be near other children when they are eating.
- Reasonable accommodation should be made to allow them to do this.

- The secondary school should know that:

- It is of primary importance that your child eats and drinks throughout the day.
- Reasonable accommodation should be made to allow them to do this.
- Your child will bring their own packed lunch and snacks into school where necessary.
- Choosing food from a cafeteria style display is stressful.
- Your child might not be able to sit in the dining hall because of the smell.
- They might not eat their lunch because they are slow and want to get outside with their friends.
- Any food preparation courses that are on the curriculum might be difficult to handle

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Children & Young People's Wellbeing Service - YouTube

Thank you

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