

Avoidant Restrictive Food Intake Disorder (ARFID) Simple Suggestions Series – How can schools support a child with ARFID

1	Children with ARFID can present many challenges for schools. This is particularly true where you may have less understanding of the condition. Therefore, working closely with the families/carers and clinicians involved with the child can be of real benefit. They can help share their knowledge of what can help and offer you a wider support system. No one should face the difficulties of ARFID alone – not the young person, their family, or school.
2	It's important not to pressure or force children with ARFID to eat. This rarely, if ever, has the desired result of enabling them to eat more. Instead, it is more likely to result in further restricting food behaviours. Additionally, this pressure, is likely to increase school avoidance, or result in behaviours that you may find challenging to manage in your classroom.
3	As with all children, acting with kindness, compassion and acting without criticism has positive outcomes. Genuinely listening, and actively wanting to know about the difficulties they are facing is most helpful. This should be done in an open and non-judgemental way. Having a reassuring, and predictable approach with boundaries can help the young person feel safer in their school environment. This ultimately helps to support their eating, emotional wellbeing, and education.
4	Talking about their mealtime experience is a difficult thing for the young person. When you are broaching this subject, try to do so in a calm and private space, away from mealtimes, and with a kind and calm manner. It is also important that you accept if they are not ready to talk about it yet. If you feel it is important to know more information to support them in school, try talking with the young persons family about mealtimes, and about what could be helpful.
5	All aspects of school, including mealtimes can come with unpredictability. As much as possible, try and follow the menu rota and communicate with the young person (and their family if appropriate) about any changes. Children with ARFID often struggle with change and unpredictability. Having this trusted communication helps them to feel safe and heard. It also gives them extra time for processing and planning which is an important consideration to help them cope.
6	Schools often come with rules, boundaries and the learning of consequences for actions. These can be very important however, it is essential that you do not punish the young person for their food behaviour. Examples of this include not allowing playing, or other activities if lunch is not eaten. They are not avoiding eating from a behavioural defiance perspective. As such, acting punitively is more likely to escalate unhelpful arousal behaviours at school.

7	Children with ARFID respond better to consistent and predictable relationships. Having a nominated key person related to their difficulties can help. It is also likely to help staff to better understand both the young person and their challenges. Additionally, the young person and their family are more likely to feel supported and heard.
8	Lots of overt and direct observation at mealtimes is unlikely to be beneficial and more likely to add unhelpful pressure. Any observations should be subtle and supportive. However, do try to notice if there are any sudden changes in food behaviour (such as suddenly stopping a preferred food). If observed, you should share your concerns with their key person and consider discussing discretely with the young person and their family (if appropriate). These conversations should take place away from mealtimes and in private and should be supportive.
9	School food policy is an important public health initiative and different rules for different children can bring unwelcome challenges. However, for children with ARFID there is a diagnosable reason why they have such specific and limited food intakes. It is therefore very important that you support children with ARFID in bringing their preferred (safe) foods into school. Otherwise, they might stay the whole day without eating or drinking. This would negatively impact their health, behaviour, and education. Where this may pose difficulty with other children, or draw unwelcome attention to the young person, consider how you can accommodate it discretely. This may include a separate and quiet place to eat lunch, for example.
10	A safe and welcoming meal environment is very important for a child with ARFID. A conversation with the young person and their family about what works best for them is very important. This may mean finding a quiet space for them to eat or considering a range of alternatives to create solutions according to their needs.
11	When and wherever possible, providing a nominated person to go to during mealtimes can feel very supportive. This may be their key person, or someone else consistent. This helps the young person to know what to do in a difficult moment. As such, it prevents escalations and them having to explain their distress and challenges to lots of different people.
12	Food education is an important part of the curriculum and food treats can be a usual occurrence and enjoyed by many. Examples might include handing out chocolates during a lesson at the end of term. However, for a child with ARFID, these spontaneous food moments can be very upsetting. Therefore, if a teacher is planning any food education or anything food related, it is strongly advised that you talk to the young person and family in advance. This helps you to collaboratively consider alternatives. Allowing preparation time so that it is not a 'surprise' goes a long way in supporting a young person with ARFID.