frontiers | Frontiers for Young Minds

NEUROSCIENCE AND PSYCHOLOGY
Published: 28 November 2025
doi: 10.3389/frym.2025.1494899

MORE THAN PICKY EATERS: WHAT IS AVOIDANT/RESTRICTIVE FOOD INTAKE DISORDER?

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YOUNG REVIEWERS:

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AGE: 12

Eating a variety of foods is important to keep our bodies properly nourished and allow us to grow. If a person does not eat enough variety or enough food to fuel their body's needs, they may develop serious health problems. Avoidant/restrictive food intake disorder (ARFID) can occur when a person is not eating enough food to nourish their body because they are afraid of trying new foods, do not feel hungry, and/or are afraid of something bad happening after eating. A person with ARFID may have low weight or vitamin deficiencies. Fortunately, medical and mental health providers can help people with ARFID. Therapy can help establish an eating schedule and encourage people to try new foods without fear. In this article, we explain what ARFID is and how it can be treated if you, or someone you know, develops it.

EATING A VARIETY OF FOODS IS IMPORTANT

Eating a variety of foods is important for our bodies to grow properly. When a person does not eat enough food, or enough different kinds of food, it may stunt their growth or make them feel sick. Most people eat enough food to sustain their growth and keep their bodies properly nourished, but some people cannot. Doctors may say that people who cannot keep themselves properly nourished have an **eating disorder**. An eating disorder is a medical condition in which a person has difficulty eating for a number of reasons. Some eating disorders develop because a person does not like the way their body looks or how much they weigh. Other eating disorders develop for other reasons. If a person is not eating enough (or not eating enough variety) for reasons other than wanting to change how their body looks or how much they weigh, they may have **avoidant/restrictive food intake disorder** (ARFID).

EATING DISORDER

When someone struggles with eating for many reasons, including wanting to lose weight, being afraid to try new foods, not feeling hungry, or being afraid of pain or discomfort.

AVOIDANT/ RESTRICTIVE FOOD INTAKE DISORDER (ARFID)

A condition where someone avoids eating certain kinds of food or eats only small amounts, which results in low weight, weight loss, poor nutrition, or negative impacts on their life.

WHAT IS ARFID?

ARFID is a psychological condition in which a person eats less than what their body needs [1]. ARFID can develop for a lot of reasons, but it is *not* because the person does not like the way their body looks or how much they weigh (Figure 1). Some people with ARFID may not eat enough because they dislike certain smells, tastes, or textures. Some people with ARFID may not feel hungry and may get full very easily, while others may be afraid of something bad happening when they

Figure 1

ARFID is an eating disorder in which people avoid eating certain amounts or kinds of foods, leading to low weight, weight loss, nutritional deficiencies, or other negative impacts. These food choices occur for three main reasons. First, people may be extra sensitive to how foods look, smell, taste, or feel, making new foods scary. Second, people may not be interested in eating and/or get full easily. Third, people may fear unpleasant or painful effects of eating certain foods, such as choking or throwing up (Figure created from information in Ref. [1]). Information derived from diagnostic criteria outlined in Diagnostic and Statistical Manual of Mental Disorders, Fifth edition, Text Revision (*DSM-5-TR*) (American Psychiatric Association, 2022).

NUTRITIONAL DEFICIENCY

A condition that occurs when someone has lower amounts of vitamins, minerals, and/or fiber in their body than they need to grow and stay healthy.

FEEDING TUBE

A medical device used to help feed and provide nutrients to someone who cannot eat or drink by mouth.

SUPERTASTER

Someone who may be more sensitive to certain tastes, textures, or smells because of certain genes or biological features of their body.

eat (e.g., choking). Some people with ARFID may experience all (or a combination) of these feelings and concerns, not just one.

Many people with ARFID avoid certain types of foods, like fruits and vegetables. When a person does not eat enough of the foods their body needs, they may develop a **nutritional deficiency**, which means their body is missing important vitamins or minerals, like iron or potassium. As a result, this person may not grow as quickly as they would otherwise, or they may lose weight. If problems with growth or weight loss happens, a doctor may help the person get the nutrients they need by using a **feeding tube**, or by sending them home with daily vitamins. ARFID also impacts people's thoughts and emotions. Some people may avoid eating because they find eating to be upsetting or scary. They may also feel frustrated or disappointed in themselves for not being able to eat and that may cause them to act out during meals. So, ARFID not only makes people feel sick, but it may also make them feel strong emotions like sadness, anger, or fear.

WHY DO PEOPLE WITH ARFID AVOID EATING CERTAIN FOODS?

There are three main reasons why people with ARFID avoid eating certain foods. Here, we briefly describe each reason.

New foods can be scary

Some people with ARFID are afraid of trying new foods, either because they have never tried them before or because they are unsure about the taste, smell, or texture. These individuals used to be called "picky eaters", but doctors now know that ARFID is not just being "picky". People with ARFID are different because their eating is so selective it can lead to physical and mental health concerns. These individuals are sometimes known as **supertasters** because they are extremely sensitive to specific or new strong tastes [2]. These individuals may be nervous about trying new foods for fear that the foods will taste bad.

Not hungry

You may be able to think of a time when you were so hungry that your stomach was begging you to eat something. Some people with ARFID do not feel those same body signals telling them they are hungry, like a rumbling stomach. Some people with ARFID may not feel motivated to eat at all, even if offered their favorite food. For people with ARFID, even if their brain is sending them messages saying that they are hungry, their bodies may not recognize those messages [2]. If their bodies do not remind them to eat, it makes sense that they would not want to do so.

Fear of feeling pain or getting sick

Other times, people with ARFID have had bad experiences with food or watched someone else have a bad experience. This may make them afraid to eat similar foods in the future. For example, maybe they choked on a certain type of food in the past, and now they are afraid of foods similar to the one they choked on. Some people with ARFID may limit the food they eat in hopes that it will be less painful in their belly or when using the bathroom. Research has shown that stomach or digestive issues are common for people with ARFID, and people with stomach or digestive issues may develop ARFID if their symptoms go untreated [3]. Our brains are programmed to help us avoid painful or scary experiences, and people with ARFID may be more sensitive to these signals, which may play a role in avoiding feared foods [2].

Not eating certain foods (or eating only specific foods) may make a person with ARFID feel better for a little while, but by continuing to avoid eating certain foods, it becomes *even harder* for the person to try those foods in the future. In contrast, when someone eats foods they are afraid of and nothing bad happens, they learn that eating that food is not as scary as they thought it was—making it easier to eat that food in the future. Parents or loved ones may feel frustrated when a person with ARFID does not want to eat and may feel like giving up. It is important to remember that eating helps to reduce the person's fear over time. Also, people with ARFID may not grow out of these behaviors on their own—they may need help to change [4]. If parents watch for food-avoiding behaviors, they can recognize when they are just a normal stage and when they may be signs of ARFID.

HOW DO WE KNOW IF SOMEONE HAS ARFID?

If you think you or someone you know is struggling with ARFID, a doctor, psychologist, or other health care provider may be able to help. Medical providers will see if ARFID symptoms are causing distress (meaning the person is really bothered by their ARFID symptoms) and/or impairment (meaning the symptoms are causing health problems or making it difficult to participate in school, friendships, etc.). Medical providers can be a great resource in determining if a person's eating patterns are causing physical health issues, like low weight or vitamin deficiencies. Mental health issues due to ARFID symptoms, like anxiety around food, may be better addressed by a mental health professional. To find someone who is trained in ARFID treatment near you, you can visit the treatment directory for the Association for Anorexia Nervosa and Associated Diseases.

WHAT CAN YOU DO TO HELP SOMEONE WITH ARFID?

Sometimes it takes physical and mental health professionals working together to treat ARFID. A medical doctor can monitor the physical effects of ARFID by tracking weight and levels of vitamins and minerals in the blood. A nutritionist or dietician can help find specific foods to work into a healthy meal plan. A mental health professional (psychiatrist, psychologist, or mental health counselor) can help improve the thought patterns that lead the person to avoid eating at all or eating certain foods.

COGNITIVE-BEHAVIORAL THERAPY

A type of therapy where a patient works with a mental health provider to better understand and/or change their thoughts, feelings, and behaviors.

Mental health professionals often use a treatment called **cognitive-behavioral therapy** for ARFID (CBT-AR) [4] (Figure 2). CBT-AR begins by having the person with ARFID establish a regular eating schedule, by tracking how much food they eat and at what times. At the beginning of treatment, the person is encouraged to eat foods they like. As they move further into treatment, the therapist helps them challenge their fears by trying new or feared foods and/or increasing how much they are eating. During this process, people find new foods they are willing to eat at home, and these once-scary foods or body sensations become a lot easier to cope with. Additionally, the therapist helps explain why eating a wide range of foods is important for physical and mental health. CBT-AR also involves planning, in case the person starts to fall back into unhelpful eating behaviors after treatment. This might mean that the person needs additional support. Therapists can also

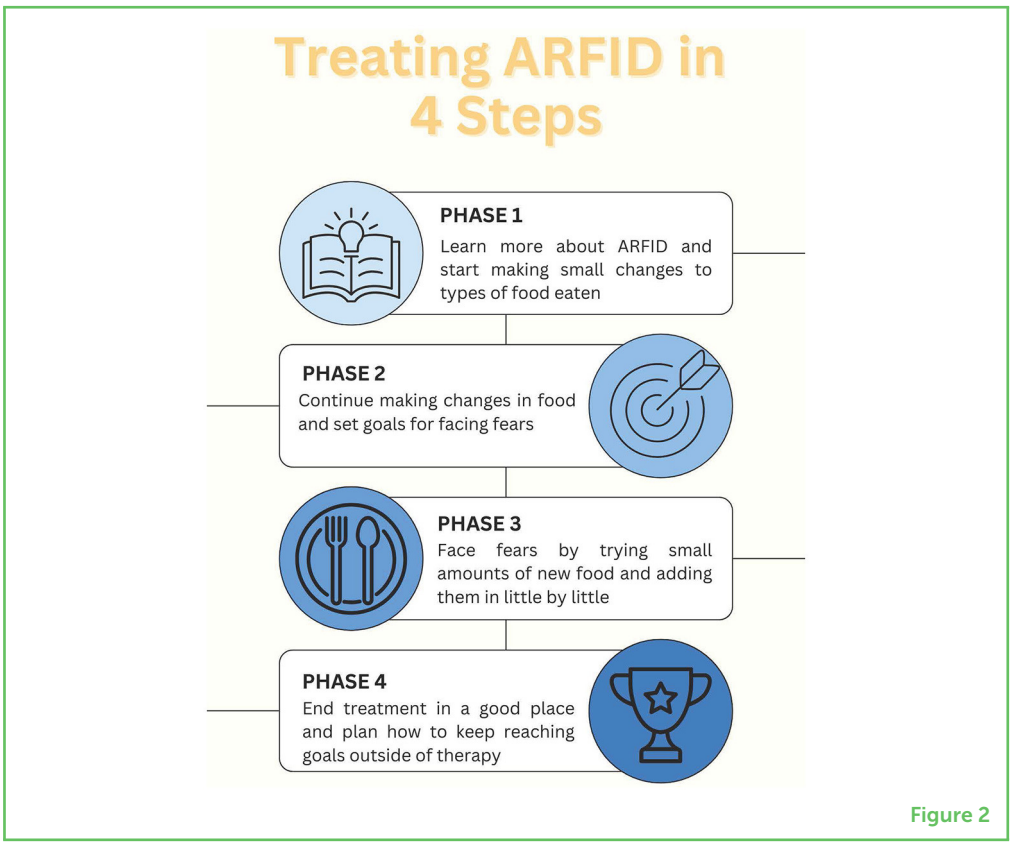

Figure 2

There are four main steps to treating ARFID. Phase 1: people are encouraged to learn more about ARFID and to make small changes in the type of foods they eat. Phase 2: people continue making changes in what they eat and set goals for facing their fears. Phase 3: people face their fears by trying small amounts of new foods and adding them little by little. Phase 4: people end treatment when they are healthy and plan how to keep reaching their goals outside of therapy.

help the person with ARFID to view body sensations like hunger pains, jitters, and stomach aches as clues to what their body is trying to tell them. Approaching these behaviors with curiosity, rather than fear, can help a person with ARFID feel safer in their body [5].

ARFID is challenging for both the person who has it and for their loved ones. When a person has trouble eating it can be frustrating, and it is important for loved ones to be supportive. Even after treatment, people with ARFID may not enjoy eating or may never find it easy to try new foods. Research has shown that treatment can help to improve stress around eating and help individuals eat in a way that maintains their health and wellbeing [4], although they may never enjoy eating like some people without ARFID do. Proper treatment (especially early on) can improve symptoms, and we strongly encourage anyone struggling with ARFID symptoms to reach out for help.

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SUBMITTED: 11 September 2024; **ACCEPTED:** 17 October 2025; ;
PUBLISHED ONLINE: 28 November 2025.

EDITOR: Dietsje Jolles, Leiden University, Netherlands

SCIENCE MENTORS: Nicole Rust

CITATION: Billman Miller MG, Clancy OM, Lusich R, Smith AR and Brown TA (2025) More than picky eaters: what is avoidant/restrictive food intake disorder? Front. Young Minds 13:1494899. doi: 10.3389/frym.2025.1494899

CONFLICT OF INTEREST: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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