

Fear Conditioning and Food Avoidance



After choking, vomiting, pain, allergy, sensory overload or another frightening experience, food can become paired with danger.

How the association forms

A food, texture, smell, place or body sensation becomes a warning cue. Avoidance then brings relief and may strengthen the association.

ARFID is broader than fear

Avoidant/restrictive food intake disorder can also involve sensory sensitivity or low interest in eating. It is not simply “fussy eating” or a choice.

Support must be safe

Allergies, intolerances, swallowing problems, gastrointestinal symptoms and nutritional needs require proper assessment. Never expose someone to a medically unsafe food.

A compassionate pathway

Protect reliable safe foods, reduce shame, identify the exact fear, build predictability, and work with appropriately trained eating-disorder and dietetic professionals.

A quiet space to reflect

Food or situation linked with fear:

What happened or what I predict:

Known medical / sensory needs:

Current reliable safe food:

Professional support to seek:

Use this resource at your own pace. Exposure work should never involve genuine danger or ignore medical, sensory or accessibility needs. Seek qualified support if fear is significantly restricting daily life.