

Neurodivergence & Eating

About this resource:

This resource can provide Neurodivergent people with ideas on how to align their eating habits with their unique needs, preferences, capabilities and choices, to live happy and healthy lives.

The connection between Neurodivergence and disordered eating:

It's important to consider that eating behaviours are unique to each person. Sometimes, people may feel pressured by societal norms to eat a certain way. These norms may force Neurodivergent people to be expected to eat certain foods or behave a certain way at mealtimes. The impact of this can be significant. Research shows that disordered eating is common in neurodivergent people, including in autism, ADHD, intellectual disability, giftedness and Tourette's disorder.

It's important that we (i.e. society) validate this over-representation of disordered eating in neurodivergent people, to help bring awareness and normalise that differences in eating habits are just that; different. Not bad or wrong, just different.

Why can eating behaviours be different for neurodivergent people?

Neurodivergent people may have different experiences of the below;

Exteroception: Food aversion or cravings, eating in a particular sensory environment, eating in a particular sitting or standing position, separating foods on a plate.

Interoception: Difficulty recognising internal cues such as hunger, fullness, thirst, need for urination or bowel movements.

Food psychological safety: Including the prediction of sameness and predictability in food— e.g. eating an apple can have a different texture from time to time, whereas processed /packaged biscuits are uniform in taste and texture.

Demand avoidance: Choosing what to eat and starting eating are internal demands that can be challenging to elicit.

Executive functioning: Difficulty in meal planning, grocery shopping, meal preparation.

Medications: Some medications (e.g. Ritalin and Vyvanse) often prescribed to assist with functioning can have side effects including a decreased appetite and dry mouth.



Signs you may need support with eating & food choices

- Food planning or feeding yourself becomes **stressful** and **overwhelming**.
- Noticing signs of **disordered eating** such as constantly thinking about food, binge eating, restrictive eating and/or fear of weight or shape changes.
- You have heightened **nutrition requirements** – such as medical conditions, nutrient deficiencies, sport/exercise demands.
- You observe side effects such as **decreased appetite/ hunger cues** because of starting or changing **medications**.



Examples of supports for navigating eating struggles:

Professional support:

- **Doctor/GP** - Helps identify and treat your health needs and refer to specialist.
- **Dietitian** - Taking the stress out of meal planning, optimise nutritional adequacy of your diet and improve relationship with food.
- **Psychologist** - Understand individualised emotional needs and body image distress.
- **Occupational Therapist** - Assist with daily tasks and planning.

Community support:

Surround yourself (online and in person) with people who role-model healthy eating behaviours (this includes the words they use when talking about foods & body image.)

Internal support:

Challenge yourself to prioritise your own unique needs and eating differences. You may also find that staying compassionate and bringing an understanding positive mindset can help remove guilt and shame from eating differences.



Tips from a Dietitian!

Keep cooking simple

Short cuts = Superpowers.

Buy pre-cut fruit and vegetables, canned foods that require no cooking, or stock up on microwave meals.

Start small

Change can be challenging, but small steps towards nourishing choices can make a huge difference.

Make cooking & eating fun

Nourishing your body can be a chore – but make it interesting by involving your interests like cooking with your besties, eating whilst doing your favourite hobby (if safe to do so)

Outsource the brain power

Use apps, meal planning guides, professional support like a dietitian, ask friends for some meal ideas.

Create safe eating environments

If you have the means, set the light, noise and temperature to a safe space. This can help regulate your nervous system to allow a healthy appetite to welcome eating.

Break down cooking tasks

There can be LOTS of steps to get food into your body. Do one task at a time and think about what support you need to get through each task.

If you notice reduced appetite from your medications, you may find benefits from:

- Eating smaller meals more frequently across the day (rather than 1 or 2 big meals)
- Creating nutrient dense / high calorie snacks to increase energy intake at times when appetite is at its worst.
- Consume textures that are most palatable – for example, liquids (such as milk or smoothies) can sometimes be easier than chewing foods.

Where to find more information & support

**Eating Disorder
Neurodiversity
Australia**



**RDs For Neurodiversity blog:
Adapting Intuitive Eating for
Neurodivergent People**



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References:

Eating disorders neurodiversity australia (no date) ED NEURODIVERSITY AU. Available at: <https://www.edneuroaus.com> (Accessed: 31 January 2025).

Acknowledgements:

We acknowledge the individual and collective expertise of those with a lived and living experience of mental ill-health, neurodiversity and eating disorders.

Each person's journey is unique, we value the contribution of those that share our perspective for the purpose of learning and growing together to achieve better outcomes for all.

This resource was written by Amelia Weddell, Accredited Practicing Dietitian and Credentialed Eating Disorder Clinician.



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Amelia aims to create a supportive environment when discussing food and body image, coming from a place of compassion and acceptance. Amelia takes into account the young person's whole lifestyle to make personalised dietary recommendations to boost mood, optimise wellbeing and help create sustainable habits.



Amelia's specialty areas:

- Gut health: IBS, IBD, Coeliac disease
- Eating disorders/ disordered eating:
- Weight neutral dietary advice

Dietetic sessions work through:

- Eating difficulties - Loss of appetite, binge eating, textural sensitivities, symptoms of starvation.
- Abdominal pain, bloating, constipation/ diarrhoea, nausea, reflux
- Weight changes
- Nutrient deficiencies
- Fatigue, lethargy, poor sleep
- Body image & dissatisfaction
- Nutrition education
- Meal planning, budgeting and cooking skills



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This is a low- no cost billing service:

Please provide referrals for GPMP/TCA or EDMP for bulk billed consults.

Clients must be medically stable, low to moderate health risk and engaged with regular GP visits (as indicated).

Client goals driven

Nutrition Education

Manageable changes

HAES aligned/ weight neutral care.

