# BUST A MYTH AROUND FOOD

**MYTH: "If you are hungry enough, you will eat."**

## BUSTED: Hunger is only one part of eating.

A person can be physically hungry and still be unable to eat. Fear of choking or vomiting, sensory distress, nausea, anxiety, a lack of interest in food, painful past experiences, executive-function difficulties and eating-disorder thoughts can all become stronger than the body's hunger signal. This is particularly important when understanding ARFID, but it can also occur across other eating difficulties and eating disorders.

## Why this myth can be harmful

Telling someone to "just eat" or assuming that hunger will eventually make them eat can turn food into a battle. Pressure, bargaining, criticism, removing safe foods or deliberately waiting for someone to become very hungry may increase distress rather than solve it. When the nervous system experiences food as threatening, more pressure can make the threat feel bigger.

## ARFID and sensory eating difficulties

With Avoidant/Restrictive Food Intake Disorder (ARFID), eating can be restricted for different reasons: strong sensory sensitivities, fear of an unwanted consequence such as choking or sickness, or very low interest in eating. Someone may want to eat, know that they need to eat and even feel hunger, yet still find the act of eating extremely difficult. This is not stubbornness, attention-seeking or a simple preference.

## What helps instead?

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| **Instead of:** "You must be hungry by now." | **Try:** "What would feel manageable or safe right now?" |
| **Instead of:** taking safe foods away. | **Try:** keeping reliable foods available while change is approached gradually. |
| **Instead of:** focusing only on how much was eaten. | **Try:** noticing effort, distress, sensory needs and small steps. |

## Message from Maggie

Food is never 'just food' for everybody. I know how frustrating it can be when other people assume hunger should be enough to make eating possible. Sometimes the most supportive thing we can do is stop asking, 'Why won't you eat?' and start asking, 'What is making eating difficult, and how can I make this feel safer?' Progress does not have to begin with a bigger plate. It can begin with being believed.

**Remember:** If eating is becoming very restricted, weight or physical health is changing, or there are concerns about dehydration, fainting or medical stability, seek appropriate medical assessment. This resource is educational and is not a substitute for individual medical or dietetic advice.