HEALING MY RELATIONSHIP WITH FOOD

When Food Becomes About More Than Hunger | Space to Breathe Therapy

Food is never only fuel. It can carry memories, bring comfort, offer predictability, express care, help us connect with others or become part of how we manage difficult feelings. None of those roles makes a person weak or their eating automatically problematic. The important question is whether the relationship with food feels flexible, nourishing and supportive—or increasingly frightening, exhausting or restrictive.

This article invites curiosity rather than correction. It is for people who want to better understand their experiences with food, including those living with neurodivergence, sensory differences, emotional eating, anxiety or disordered eating. You do not have to change anything today to begin learning about yourself.

1 | Why food can mean more than hunger

Eating happens in a real life, not a laboratory. We may eat because we are hungry, because it is the only familiar option, because someone has prepared a meal, because a routine helps us remember, or because food is woven into comfort and celebration. Equally, we may struggle to eat when overwhelmed, upset, physically unwell or frightened. Hunger signals can be inconsistent, particularly when stress, sensory needs or eating disorders are involved.

Rather than asking, “Why am I eating this?” as an accusation, try “What is happening for me right now?” More than one answer may be true at once.

2 | Comfort, emotions and regulation

Food can provide a brief pause, a familiar sensory experience or a feeling of reassurance. Emotional eating does not automatically need fixing. Concern may arise when it becomes the only available way to cope, leaves you distressed, or sits alongside binge eating, guilt, secrecy or attempts to compensate through restriction or exercise.

A compassionate approach looks for the underlying need: rest, company, predictability, relief, enjoyment or perhaps enough food after a long period of not eating. Before assuming an experience is “emotional eating”, consider whether your body has been adequately nourished. Restriction can itself intensify thoughts about food and episodes of eating.

3 | Control, restriction and certainty

Rules around food can create an impression of control when other parts of life feel uncertain. Some rules begin as practical routines and become increasingly rigid. You may notice anxiety when a meal time changes, a “safe” ingredient is unavailable or an unplanned eating opportunity appears. A rule may be offering predictability while also making life smaller.

Try asking what the rule protects you from, and what it costs you. Do not abruptly challenge rigid patterns on your own if you are living with an eating disorder, significant restriction or medical risk. Appropriate professional support can help make change safer and more sustainable.

4 | Sensory safety and neurodivergence

For some autistic people, people with ADHD, and others with sensory sensitivities, predictability in texture, temperature, smell, appearance and preparation can determine whether a food is manageable. Familiar foods may be a genuine form of sensory safety. Difficulty tolerating food is not necessarily about body image, and it is not simply a matter of willpower.

If you experience ARFID or other feeding difficulties, nutritional adequacy and safety matter alongside choice and dignity. Using familiar foods while accessing individualised support is not a failure. Helpful adjustments might include predictable brands, reduced sensory demands, meal reminders, accepted utensils or support with shopping and preparation.

5 | Connection, reward, loneliness and memory

Food can be linked to people we miss, family traditions, celebrations and places where we once felt safe. Cooking for another person might express care; choosing a familiar meal might bring back a comforting memory. Conversely, eating alone, being watched or feeling excluded from social food situations can carry sadness or anxiety.

Notice whether the need is for food, connection, both or something else. You are allowed to enjoy food for pleasure and to seek companionship without having to “earn” either.

6 | Reflective exercise: What is food doing for me?

Choose one recent food-related moment, without judging it. You can write your answers, think them through, or explore them with someone you trust.

- What happened immediately before the moment? Consider events, emotions, body sensations and sensory demands.
- What was I hoping food—or avoiding food—might help me feel?
- Did the experience bring comfort, predictability, relief, connection, distraction or something else?
- What did I notice afterwards? Was anything different from what I expected?
- If I needed additional support, what could sit alongside food rather than replacing it?

There may be no obvious answer. “I do not know yet” is a useful observation.

7 | Before, during and after eating: a gentle check-in

Before: What am I noticing in my body? What is my energy level? Am I anxious, distracted or overloaded? Is this food predictable and accessible? Have I eaten enough earlier?

During: What feels manageable? Would a quieter environment, a familiar utensil, company or privacy help? Am I able to respond to my needs without monitoring or criticising myself?

After: How am I feeling physically and emotionally? Is there anything I want to remember for next time? What response would be kind rather than punishing?

This exercise is optional. If checking bodily sensations or documenting eating increases obsession or anxiety, skip it and discuss alternatives with a qualified professional.

8 | Four composite perspectives

Alex — predictability: After a demanding day, Alex chooses the same meal. Familiarity reduces uncertainty and sensory effort. The helpful question is not “Why can’t Alex vary their diet?” but “What makes this meal manageable, and are their nutritional needs being supported?”

Sam — comfort: Sam sometimes eats while feeling lonely. A familiar snack brings a short sense of comfort. Rather than removing the snack, Sam considers whether calling a friend or planning a restful evening could offer additional connection.

Jordan — control: Jordan feels increasingly distressed when food routines change. What once felt reassuring now limits outings and relationships. Jordan begins exploring these patterns with professional support rather than trying to force sudden change.

Riley — disconnection: Riley is busy, struggles to notice hunger and often remembers food only when exhausted. Practical reminders and readily available familiar meals help make nourishment more accessible.

These are fictional composites illustrating different mechanisms, not diagnostic examples.

9 | Finding additional forms of support

The aim is not to take comfort away from food. It is to widen the range of ways you can feel supported. Depending on your needs, that might mean rest, a regular eating routine agreed with a clinician, a sensory-friendly environment, a gentle conversation, company, creative activity, help with shopping or time away from demands.

Think in terms of “as well as” rather than “instead of”. Food does not need to carry every task alone, and support strategies should never be used to replace necessary nourishment.

10 | When to ask for professional help

Consider speaking with your GP or an eating-disorder specialist if eating is causing substantial distress, your food range is narrowing, you are frequently restricting or binge eating, you use purging or compensatory behaviours, or you experience weight changes, faintness, weakness or signs of nutritional deficiency. Eating disorders can be serious at any body size. Persistent sensory restriction, choking fears or limited interest in eating also warrant assessment when nutrition or daily life is affected.

In the UK, Beat offers eating-disorder information and support at beateatingdisorders.org.uk. The NHS provides information on eating disorders and routes into assessment via nhs.uk. For urgent medical advice use NHS 111; call 999 in an emergency. Resources and service details may change.

11 | A realistic next step

- One thing I understand better about my relationship with food is…
- One assumption I could replace with curiosity is…
- One kind, practical support I could explore is…
- Someone I could speak to if I need more support is…

You may return to these questions when you feel ready. Progress does not need to happen in a straight line.

A personal message from Maggie

Your relationship with food has a history. It may have helped you feel safe, cope, connect or simply get through difficult days. Before you ask yourself to change, give yourself permission to understand what has been happening. Curiosity makes space for compassion, and compassion can make room for meaningful support.

Progress isn’t perfection. It’s understanding yourself a little more and learning to respond with a little more kindness.

Until next time, give yourself Space to Breathe.

With love, Maggie
Space to Breathe Therapy

This resource is educational and reflective, not an individual treatment plan. If you are receiving eating-disorder care, follow your clinician’s guidance.