My ADHD Kid Keeps Overeating

Here's What to Do — a free Behavior GPS parent guide

Why it may be happening

- **Quiet body cues.** Many ADHD kids don't feel "full" the way other kids do.
- **Dopamine seeking.** Crunchy, salty, sweet foods give the ADHD brain a quick reward.
- **Impulse control.** The pause between "I see it" and "I eat it" is shorter.
- **Medication effects.** Stimulant crashes in the evening trigger big hunger.
- **Emotional regulation.** Food can soothe big feelings like a fidget would.
- **Sensory needs.** The mouth craves input — chewing, crunching, sucking.

What to SAY

- "Let's check your tummy. Is it a 1, 3, or 5?"
- "Water first. We'll see how your body feels in 10 minutes."
- "Snack is at 3:30. I'll set the timer with you."
- "Your body is asking for something. Let's figure out what."

What NOT to say

- "You just ate — you can't be hungry." (They feel it. Believe them.)
- "Stop being greedy." (Shame makes hiding food worse.)
- "No more snacks today." (Restriction increases food-seeking.)
- "You're going to get fat." (Plants lifelong food shame.)

What to DO next (this week)

- **Step 1.** Set 5 fixed eating times: breakfast, snack, lunch, snack, dinner. Post on the fridge.
- **Step 2.** Offer water first when they ask between meals. Wait 10 minutes.
- **Step 3.** Pre-plate meals on a divided plate. When it's empty, the meal is done.
- **Step 4.** Teach the 1–5 hunger scale. Ask before, during, and after meals.
- **Step 5.** Add oral sensory tools — crunchy carrots, chewy tubes, chewable necklace.
- **Step 6.** Make pantry food invisible at night. Not punishment — removing temptation.
- **Step 7.** Log it for 7 days. What, when, how much, feeling before. Bring to the doctor.

I Do · We Do · You Do

I Do: You model. "My tummy is at a 3. I'll drink water and check again."

We Do: Together. "Let's both point to a number on the chart."

You Do: Solo. "Before you grab a snack, check your tummy and get water first."

When to seek additional support

- Sudden weight change up or down
- Hiding or hoarding food
- Eating non-food items (pica)
- Eating until physically sick
- Food obsession that disrupts daily life
- Any concern about Prader-Willi or other syndromes

Ask the doctor: Could medications be increasing appetite? Should we check thyroid or blood sugar? Can we get a pediatric dietitian referral? Would feeding therapy help?

Next step → Open Behavior GPS at behaviorgps.org/ai and speak what happened today. You'll get a personalized plan in seconds.