

## THESE QUESTIONS COULD INDICATE THE PRESENCE OF AN EATING DISORDER:

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- Do you eat in secret?
- Does your weight affect the way you feel about yourself?
- Are you satisfied with your eating patterns?
- Are you distressed about your eating or your body?
- Do you feel embarrassed or disgusted with yourself after eating?
- Do you eat large amounts of food until you are uncomfortably full?

If you have questions about eating disorders or are interested in receiving services please speak with your primary care provider, mental health provider, or the Hines Eating Disorder Team.

## THERE IS HOPE FOR RECOVERY, TREATMENT IS AVAILABLE!

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*“Treatment is not scary and you’re not being judged. Going through recovery is not about how others treated you, it’s about how you are treating yourself.”*

- Air Force Veteran, Female

*“I want other male Veterans to know it’s okay to speak out about eating disorders and it’s not just a female issue. You aren’t less of a man and it’s important to get help. Treatment has improved my quality of life. I can now do what I love—music, spending time with my wife and sons, and going on walks.”*

- Army Veteran, Male

### HINES EATING DISORDER TEAM

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## WHAT PUTS VETERANS AT RISK FOR EATING DISORDERS?

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It is estimated that **30 million** Americans suffer from eating disorders, and data suggests that **rates of eating disorders in Veterans are comparable to or higher than those in civilians.**

Eating Disorders **don’t discriminate**, they can affect men or women regardless of age, race, gender, sexual orientation, or body size.

**Veterans have unique factors that put them at risk for developing eating disorders:**

- Trauma
- Military Risk Factors
- Eating for Duty, Not Hunger

## TRAUMA

- Trauma exposure is often reported in those with eating disorders, where studies indicate that **up to 66% of individuals with an eating disorder have concurrent PTSD symptoms**
- **Women who report Military Sexual Trauma (MST) are twice as likely to have a diagnosed eating disorder** compared to those who do not report MST

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*"I felt like I had let down my fellow Marines and was overwhelmed by guilt following my deployment. I began binge eating and purging because it was one area I thought I could control, but it quickly began to control me."*

- Marine Veteran, male

## MILITARY RISK FACTORS

- **Strict physical fitness standards** can lead active duty service members to use unhealthy methods to attempt to control their shape including vomiting, laxatives, diet pills, fasting, excessive exercise, or diuretics
- Veterans who engaged in efforts to **"make weight"** while in the military are at a **higher risk of engaging in disordered eating behaviors** after their service has ended.

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*"When you sat down to eat you felt like people were watching what you were eating or would comment on what you were eating. I would choose not to eat as much or bring something that other people thought I should be eating, but then would do secret eating when people weren't around because I could eat what I wanted and no one was there to shame me."*

-Air Force Veteran, female

## EATING FOR DUTY, NOT HUNGER

- Service members may be required to eat **large amounts** of food in a **short amount of time** or have **uncertain/irregular** eating schedules due to combat or training settings (Training, Deployment, etc.)
- Food may be used as a **reward/comfort** in stressful situations OR **lose its normal pleasure** due to being unpalatable or overly structured meal times

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*"During boot camp my drill instructor would say that I had to be somewhere at a certain time so I had to eat everything in 5-10 minutes and didn't taste my food. This pattern of eating carried over after boot camp and I got used to only eating twice a day for the rest of my military career, which later set me up to binge eat."*

-Army Veteran, Male