

Hello Everyone!

We held a General Service Board meeting on 02/13/2013.

**Attendees:**

- Louise, Denver, CO
- Roger, MA
- Rachel, Tempe, AZ
- Vanessa S, Longwood, FL
- Annette H, Phoenix, AZ

**Notes:**

- We reviewed and approved the minutes from our 01/09/12 GSB meeting
- We discussed help needed in maintaining meeting information on web site
  - Webmaster Vanessa has done a terrific job with the website and we would like her to be able to focus on improvements that will make the website more effective
  - Annette asked if there were any volunteers
    - The effort takes about an hour a week
    - The role requires relatively little experience with html
    - Maintenance can be done with a simple text editor and Filezilla ftp client
    - Do you have an hour a week and a little html experience? We urgently need your help!
- We discussed telephone meeting support
  - The phone meetings are very helpful
  - Phone meetings could be improved if moderators were on time and had backups
- We reviewed suggested literature updates
  - Work on a "Balance" brochure will start once "Guidance for Professionals" is complete
  - After work on a "Balance" brochure, we hope to work on a "Working the steps with Others" booklet
  - Some EDA literature encourages people to attend other 12-step meetings. There has been a suggestion to remove such references. The General Service Board voted to retain the existing language in section 7 of the Suggested Meeting Format.
  - We have had a request to update "More on Eating Disorders" to remove a statement, "brought us to ruin." This type of hyperbole is not conducive to recovery. The General Service Board considered and approved replacement language, "made us miserable." Please see the attached .pdf for the results.
  - There was a suggestion to update the "EDA Reminder" section of the Suggested Meeting Format. The General Service Board discussed and considered several alternatives, and ultimately approved the following:
    - **EDA Reminder:** Remember, recovery is not about food or weight. Please refrain from mentioning numbers and plans that might trigger others. Recovery is about using the Steps of the Program to live life fully: happy, joyous and free.
- We discussed the status of our 501(c)(3) reapplication
  - Application submission has been received
  - Annette was told that the submission is "in progress"
  - It can take 6-8 months for the application to be processed to closure
- Work on "Guidance for Professionals" draft flyer was suspended until March 2013

**Draft of “Guidance for Professionals”**

- **Why should I refer my clients to EDA?**
  - EDA provides group support for people seeking recovery from an eating disorder, providing examples of recovery and conveying the hope of recovery to those in need.
  - 12-step recovery programs have a solid record of helping people recover from addictions from which they can completely abstain; EDA is a 12-step recovery program with a difference.
  - Having realistic, healthy goals enables people to build the essential relationships of trust with themselves and others that support recovery.
  - In EDA, we focus on balance rather than abstinence. We reject absolute, black-and-white thinking about recovery. Balance is particularly important in recovery from eating disorders because it offers a position between rigidity and being out-of-control that is both achievable and healthy.
  - The only requirement for EDA membership is a desire to recover from an eating disorder. There are no dues or fees for EDA membership.
- **What is the relationship between EDA and AA?**
  - EDA is founded on the principles (12 Steps and 12 Traditions) of AA and offers support for those seeking recovery from an eating disorder that is similar to the type of support offered people seeking recovery from alcoholism in AA
  - A key distinction between EDA and AA is that EDA focuses on moderation and balance rather than absolute abstinence
  - Another distinction is that EDA does not embrace the disease model of addiction as does AA; people can and often do recover from eating disorders
  - Like AA, EDA encourages its members to focus on the solution, not the problem
  - EDA members work the steps, as do other 12-step program members, to achieve the balance and calm perspective that makes a happy and purposeful life possible

**We left off our review here (1/9/2013) and will continue with the remainder (below) at our February meeting.**

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- **Are there "sponsors" in EDA to guide those new to the program?**
  - Some groups have volunteers with time and energy to help others work the steps, however, not all groups are so lucky
  - EDA encourages everyone to reach out and work with others, both within and outside of meetings, to build a solid recovery. We call partners in recovery “buddies” and people are encouraged to find a buddy with whom to work the steps
- **What is EDA's position on the disease model of addiction?**
  - EDA rejects the disease model of addiction; people can and often do recover fully from their eating disorders
  - In EDA, we recognize that our responses to the provocations and delights of life are conditioned by how we have and continue to respond; life-long, seemingly immutable patterns can be re-imagined and rebuilt. EDA recognizes that recovery is hard work and requires a great deal of support; recovery is a process, not an event.
- **What is the relationship between EDA and OA?**
  - Although both are 12-step groups led by members seeking solutions to the same problems, EDA and OA provide very different answers

- In OA, members are expected to abstain from specific foods of concern and to adopt specific disciplines around eating as a precondition of recovery
- In EDA, members are devoted to helping each other develop more resilient relationships with themselves, others and food. Diets and weight management techniques do not solve our problems coping with ourselves and our lives.
- EDA members discuss disordered thinking so that we can talk about solutions. This generally involves recognizing life choices, trying to make them responsibly, and learning from mistakes as we go.
- **Does EDA endorse any specific food plan or program?**
  - EDA endorses sound nutrition and discourages any form of rigidity around food.
  - Food is nourishment for mind, body and soul. Balance, not abstinence, is our goal.
  - Food issues often surface as coping mechanisms for living the lives we have been dealt or have chosen. Members work to identify, establish and reinforce adequate and appropriate ways of responding to life. In time and with practice, new methods of dealing with life issues gradually replace the self-limiting rigidity and self-destructive behaviors that are hallmarks of an eating disorder.
- **I would like to audit a meeting before referring clients. How do I arrange this?**
  - Some EDA meetings are “open” and may be visited by the occasional friend, family member, student or interested professional who contacts the meeting ahead of time and requests to sit in on a meeting
  - Other EDA groups are “closed” except to people seeking recovery from an eating disorder
  - Please visit the meetings page of the EDA website, [www.4EDA.org](http://www.4EDA.org) to find contact information for meetings by geographic location, and be sure to call or write before attending
- **May I facilitate meetings held at my office or clinic?**
  - By definition, an EDA meeting is run by and for people seeking recovery from an eating disorder
  - Unless you are in recovery from an eating disorder, facilitating a meeting means it is not an EDA meeting
  - Therapists and other professionals have kick-started some very successful EDA meetings by facilitating ED recovery support groups using EDA literature then turning the meeting over to attendees. At the point EDA members start running a meeting, it is an EDA meeting.
- **How does EDA work with professionals who work with eating disordered clients?**
  - EDA provides group support for people committed to recovery, providing examples of recovery and conveying the hope of recovery to those in need
  - EDA does not refer its members to specific professionals, but we do refer people to [www.edreferral.com](http://www.edreferral.com) and similar organizations that our members have found helpful
  - Early recovery typically requires a great deal of support, and often necessitates the involvement of a team of professionals -- physician, psychiatrist, psychologist, dietician – to help establish new patterns and ways of thinking
  - EDA does not provide a substitute for or alternative to professional care, and EDA members work easily with members of the professional community: we recognize your importance to recovery and greatly appreciate your help.

**Action Items**

- Annette to update all four Suggested Meeting Formats as well as “More on EDA”
- Annette to post the new material to the “EDA Meeting Starter Kit” (and replace the physical hard copies)
- Annette to post the changed files to the website and update information about the next meeting

**We adjourned at 8:02 PM MST.**

Please send these minutes to members of your group if your group maintains an email contact list!

Thank you to all who attended and to all who serve EDA!

Best regards,  
Annette (aka Michelle)