# POSITION DESCRIPTION

<table>
<thead>
<tr>
<th>TITLE:</th>
<th>Stories of Recovery Volunteer</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMPLOYMENT STATUS:</td>
<td>Volunteer, ad hoc as requested</td>
</tr>
<tr>
<td>REMUNERATION:</td>
<td>Variable, dependant per speaking opportunity</td>
</tr>
<tr>
<td>REPORTS TO:</td>
<td>Volunteer Services Coordinator</td>
</tr>
<tr>
<td>LIAISES WITH:</td>
<td>EDV staff, volunteers and service users</td>
</tr>
<tr>
<td>LAST UPDATED:</td>
<td>July 2017</td>
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</tbody>
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## ABOUT EDV

Our Vision
A future where the incidence, duration and impacts of all eating disorders are reduced and ultimately eradicated.

Our Mission
The Eating Disorders Foundation of Victoria is the primary source of support, information, community education and advocacy for people with eating disorders and their families in Victoria. We connect those whose lives are affected by eating disorders with the people, services and hope they need for recovery.

Our Values
We embrace the following values to underpin our vision and mission:
- Respect
- Acceptance
- Hope

Eating Disorders Victoria (EDV) is a non-profit organisation, which supports those affected by eating disorders, and their families. Eating Disorders Victoria also provides information, education and advocacy about eating disorders to the wider community. The organisational values are Respect, Acceptance and Hope, and these values underpin a philosophy of recovery. The organisation is led by a Board of Management, and is funded by state government, philanthropic funds, fee for service activities and donations. Much of EDVs work is based on the principles of Mutual Support and Self Help. Volunteers are critical members of the team, often bringing their lived experience of eating disorders to their role, and enhance the organisation’s activities in a variety of ways including assisting EDV staff to respond to requests for information, referral and support, and in the provision of support groups and community education activities.

## ROLE STATEMENT

Stories of Recovery volunteers share their personal stories about recovery from an eating disorder. Speaking publicly about their experience provides the opportunity to raise awareness of eating disorders and to offer hope that recovery is possible.
KEY ACCOUNTABILITIES

- Sharing of your personal story to a wide variety of settings including:
  - Hospital visits (inpatient, day patient, outpatient settings)
  - Health practitioners (e.g. Psychologists, Counsellors, Doctors, Dentists)
  - Workshops, conferences or events
- Act as a media representative for EDV, including but not limited to providing quotes, attending interviews and assisting with articles.
- Other presentations as requested in consultation with the Volunteer Coordinator.

KEY SELECTION CRITERIA

Essential:
- Personal lived experience and willingness to share.
- A moderate understanding of eating disorders.
- Well-developed written and verbal communication skills.
- Strong interpersonal skills.
- Ability to establish meaningful contact (empower & build rapport) with service users.
- Ability to take responsibility for own learning.
- Ability to take direction and use feedback to develop own capabilities.

Desirable:
- Counselling experience/knowledge.
- Experience working in a voluntary capacity.

CONDITIONS OF CONTRACT

- Voluntary role, minimum 12-month commitment preferred.
- Background checks & reference checks apply.
- Completion of the internal training program is compulsory, including a practice presentation.
- Presentations can occur in a variety of locations and times or the day and week. All volunteers to provide details of availability to the Volunteer Coordinator.
- Normal speaking presentations run for one hour plus travel time.
- Volunteers who have had a personal experience with an eating disorder &/or other mental health issues need to be recovered for a minimum period of two (2) years and well enough to participate as a volunteer.
- All volunteers are required to adhere to the EDV code of ethics, code of conduct, core values and guiding principles and any other agency policies, practices and guidelines. Signatures: By signing this position description the Volunteer confirms that it has been read, understood.

Signatures:
By signing this position description, the Volunteer confirms that it has been read, understood and accepted.

Volunteer
Name: ...............................................
Signature..........................................  
Date...................................................

Volunteer Services Coordinator
Ruth Green
Name: ...............................................
Signature..........................................  
Date...................................................

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