

Sponsor Training

CTIG Workshop 6/12/22

Charts for Screen Sharing

PART 1:

- Quotes and Commandments
- Sponsor's Toolbox
- Getting Newcomers Started and through Steps 1-3
- *Where Do I Start* Pamphlet
- *Temporary Sponsors: Newcomers First Twelve Days*

PART 2

- *A Guide for Sponsors*
- Sponsoring in General

PART 3

- Helping Sponsees Stay Abstinent

Objective: more sponsors, improved retention, more recovery

The Ten Commandments of Being a Sponsor

1. A sponsor's job is to stay abstinent and help others get and stay abstinent.
2. In the beginning, set goals and expectations with your sponsee
3. Keep your conversation focused on recovery and living in the solution
4. Share your experience, don't give advice. (ask questions instead)
5. Don't tell sponsees to do something you haven't done or aren't willing to do.
6. Encourage sponsees to seek input from other abstinent OA's with the experience they want or need. Always emphasize widening our safety net.
7. Good sponsors are compassionate, exercise patience, and listen well. (Honesty without kindness is cruelty)
8. Prepare sponsees to start doing service as early in recovery as possible
9. Never underestimate a sponsee's ability to get well.
10. Carry the message, don't carry the sponsee.

The Ten Commandments of Being a Sponsee

1. Getting abstinent is probably the hardest thing you'll ever do. Be prepared to talk about new ideas, behaviors & attitudes.
2. A good sponsor may be more interested in your welfare than your friendship. Don't take it personally. They have your best interests at heart.
3. When in doubt, try to remember why you asked your sponsor to work with you in the first place.
4. Not taking a suggestion because it's time-consuming or inconvenient is a lousy reason not to get well. It's the resistance to change that hurts.
5. Experience is the best teacher. In the beginning, it comes from someone who's been there. In time, you'll accumulate your own.
6. Being expected to be punctual and consistent is not unreasonable. Discipline and structure are compatible with strong recovery.
7. Trust in traditional solutions to common OA problems.
8. If you're willing to ask the question, be willing to apply the answer.
9. If you can base your relationship with your sponsor on trust & honesty, you will recover.
10. A good sponsor asks hard questions. When you're tempted to get mad at them, consider where you were before you started working with them. What type of results were you getting with your eating, then, and now?

A Sponsor's Toolbox – Getting a Newcomer Started and Through Steps 1-3

1. *A Guide for Sponsors* pamphlet (includes 30 questions for Steps 1-3)
2. *Temporary Sponsors: Newcomers First Twelve Days*. (OA.ORG)
3. *Where Do I Start?* pamphlet.
4. *A New Plan of Eating* pamphlet
5. *Sponsoring Through the Steps* pamphlet (includes questions for all the Steps)
6. *Welcome Back* pamphlet
7. *A Lifetime of Abstinence* (incorporates old *Before You Take That First Bite* pamphlet)
8. *AA Big Book*
9. *OA 12&12*
10. *OA 12&12 Workbook* (questions for all the Steps)
11. *OA 12 Step Workshop and Study Guide* (questions for all the Steps)
12. 8 Cards: Carrying the Message, Think First, Just for Today, Twelve Stepping a Problem, Many Symptoms-One Solutions; Recovery Checklist; About OA; Fifteen Questions.
13. *OA.ORG: Sponsor Toolbox – 9-page document*
14. *OA.ORG: Strong Abstinence Checklist*
15. OA.ORG: From Slip or Relapse to Recovery
16. OA.ORG: What a sponsor does (10 points) and what a sponsee does (10 points)
17. OA.ORG: 12 Steps to a Slip Workshop Guide
18. OA.ORG: Podcasts on Planning a Sponsor Workshop
19. OA.ORG: Relapse Prevention
20. OA.ORG: Been Slipping and Sliding
21. OA.ORG: From Slip or Relapse to Recovery
22. OA.ORG: Fun and Fellowship
23. OA.ORG: Constructing a Sponsorship Success Online Workshop.
24. OA.ORG: Relapse Prevention Support Group (RPSG) Workshop (16 pages)
25. OA.ORG: A 12th Step Within Guide: Reflections on Relapse and Recovery
26. OA.ORG: Podcast: The Importance of Working all 12 Steps Series
27. OA.ORG: Podcast: Relapse Survivor and 90 Day Program Forum series
28. OA.ORG: Video: Breaking out of Relapse Video
29. OA.ORG: Virtual Workshop Recording: Sponsorship Success
30. OA.ORG: Sponsor Training Podcasts
What is a sponsor; Why should you get a sponsor, and how can you get a sponsor; Why be a sponsor; When can you start sponsoring – when can you start being sponsored; Why be a sponsor – why be a sponsee; What are the sponsorship job descriptions – from sponsor to sponsee and back; How can you break down the barriers for both parties; What are some different sponsor styles; How do you work the 12 Steps with a sponsee; Sponsoring through the 12 Steps; How do you work the 12 traditions with a sponsee.
31. Newcomer's Orientation Video on <http://oahelps.org>
32. 3 Column Food Exercise – Don C.

First Things First: Before doing anything, a new sponsor needs to study the OA pamphlets: *Where Do I Start*, *A Guide for Sponsors*, *A New Plan of Eating*, and *Sponsoring Through the Twelve Steps*

Where Do I Start Pamphlet

1. 15 Questions
2. You Are Not Alone
3. Many Symptoms, One Solution
4. Abstinence — Our Primary Purpose
5. The Tools of Recovery
 - A Plan of Eating
 - Sponsorship
 - Meetings
 - Telephone
 - Writing
 - Literature
 - Action Plan
 - Anonymity
 - Service
6. Further Information: A Plan of Eating
7. Defining a New Way of Eating Is Important
8. Developing a Plan of Eating
9. The Dignity of Choice
10. Choosing Specific Foods to Refrain from —Our "Trigger" or "Binge" Foods
11. Choosing Eating Behaviors to Refrain from
12. Creating a Plan
13. Dealing with Quantities
14. Please Note
15. Plans of Eating
 - 3-0-1 Plan
 - Basic Plan #1
 - Basic Plan #2
 - High-Carbohydrate Plan
 - Very Low Carbohydrate Plan
16. What Is a Serving?

17. Measurements

- Protein
- Starches/Grains
- Fruit
- Vegetables
- Milk/Milk Substitutes
- Fats Protein

18. Note on reading labels

19. Structure and Tolerance

20. Conclusion

21. Frequently Asked Questions— and Answers

- What is compulsive eating?
- How can I tell if I am a compulsive overeater?
- I've failed at every diet. How can OA prevent these "slips"?
- Can OA help me if I am bulimic or anorexic?
- Can't a compulsive overeater just use willpower to stop excessive eating?
- What is meant by "a power greater than ourselves"?
- Is OA a religious society?
- Can I stop eating compulsively on my own just through reading OA literature?
- What are the requirements for OA membership?
- How much does OA membership cost?
- How does OA support itself?
- Who runs OA?
- What is the Twelve Step recovery program?
- What is meant by "sanity" as used in the Twelve Steps?
- What are the Twelve Traditions?
- Why does OA place such emphasis upon "anonymity"?
- To the Family of the Compulsive Eater

22. Opening and Closing Prayers and Readings

- Serenity Prayer
- Third Step Prayer
- Seventh Step Prayer
- The OA Promise

23. A Final Welcome

24. WELCOME HOME!



Temporary Sponsors: Newcomers' First Twelve Days

What is the purpose of the *First Twelve Days* in OA?

- To help newcomers, returning OA members, and other members learn about the OA Twelve Step recovery program by using this personal, short-term introduction to Overeaters Anonymous.
- To help sponsees learn how the OA recovery program might help them to stop hurting themselves with food.
- To help members who may be ready to sponsor but are reluctant to do so. This is an opportunity for a member to help a newcomer in a very structured way and to experience what it might be like to be a regular sponsor.

This program takes place during twelve sessions, which may or may not occur in twelve consecutive days. For instance, you may want to schedule calls on weekdays only. You also may want to look ahead at the sessions, and if you are uncertain about how to discuss any of the topics with the sponsee, you may want to ask your sponsor or another OA member for ideas.

During your calls, share the experience, strength, and hope you have because of the solution offered by working the Twelve Steps of OA. Without dominating the conversation and without judging the sponsee, share just enough to draw them out, answer their questions, and encourage their unique process of discovery and recovery.

Books that are not OA-approved, as well as diets and other programs, are outside issues.

Remember, it is not your responsibility to force someone to be abstinent (nor is it possible). The journey of the sponsee is between that person and their Higher Power. A sponsor is there for support.

First Twelve Days Instructions

The readings for this program are from the pamphlet *Where Do I Start? Everything a Newcomer Needs to Know*. Both the sponsor and the sponsee should have a copy of this pamphlet.

Day	Subject and Reading for Sponsee	Discussion Question(s)
1	Fifteen Questions: Read “Dear Newcomer” through “You Are Not Alone,” on pages 1–3.	Ask and Discuss: Review the Fifteen Questions on pages 1–2. Ask your sponsee to circle the questions they relate to. Discuss their responses. Stress to your sponsee the importance of working the Steps as a vital part of a lasting recovery.
2	Requirements: Read “What are the requirements for OA membership?” on page 22. Next, read pages 23–24, starting with “Who runs OA?” through “What are the Twelve Traditions?”	Ask and Discuss: What led your sponsee to OA? What does/do “eating compulsively” and/or “compulsive food behaviors” mean to the sponsee? Does your sponsee have a desire to stop? Discuss. Listen to your sponsee’s concerns about OA. Discuss.
3	Symptoms: Read “Many Symptoms, One Solution” on pages 4–5, then “Welcome Home” on pages 27–29.	Ask and Discuss: Ask your sponsee to write about symptoms they have experienced. How early did these symptoms start? Discuss.
4	Abstinence: Read “Abstinence—Our Primary Purpose,” ^{1, 2} “The Tools of Recovery,” and “A Plan of Eating” on page 5.	Ask and Discuss: Ask your sponsee to write about which compulsive eating or compulsive food behaviors concern them the most. Discuss.

¹ Overeaters Anonymous accepts the following definitions of “abstinence” and “recovery”:

1. Abstinence: The act of refraining from compulsive eating and compulsive food behaviors while working towards or maintaining a healthy body weight.
2. Recovery: Removal of the need to engage in compulsive eating behaviors.

Spiritual, emotional, and physical recovery is achieved through working and living the Overeaters Anonymous Twelve Step program.

² In the context of OA members’ individual abstinences, “Our Primary Purpose” references the primary purpose of each OA member, which is found in the OA Preamble: “Our primary purpose is to abstain from compulsive eating and compulsive food behaviors and to carry the message of recovery through the Twelve Steps of OA to those who still suffer.”

In contrast, Tradition Five is about an OA group’s primary purpose and states: “Each group has but one primary purpose—to carry its message to the compulsive overeater who still suffers.”

Day	Subject and Reading for Sponsee	Discussion Question(s)
5	Meetings: Read “Meetings” on page 5, then “How much does OA membership cost?” and “How does OA support itself?” on page 22.	Ask and Discuss: Suggest that your sponsee make a plan to attend six meetings. This can include face-to-face, phone, online, or videoconferencing meetings.

6	<p>OA Fellowship: Read “Can I stop eating compulsively on my own just through reading OA literature?” on pages 21–22.</p>	<p>Ask and Discuss: Ask your sponsee to write about their feelings concerning receiving help from other members in OA. Discuss. Suggest that they start contacting members listed on the <i>Where Do I Start?</i> pamphlet provided or their meeting’s contact list.</p>
7	<p>Action Plan and Other Tools: Read “Telephone,” “Writing,” “Literature,” and “Action Plan” on page 6.</p>	<p>Ask and Discuss: Help your sponsee draft an action plan for the next several days that will help support their recovery. Discuss.</p>
8	<p>Draft a Food Plan: Read “Disclaimer” on pages 29–30, then pages 7–17, starting with “Further Information: A Plan of Eating” through “Structure and Tolerance.”</p>	<p>Ask and Discuss: Suggest to your sponsee that, together, you draft an initial food plan that will support them. Discuss, and be sure to tell your sponsee that no sponsor is acting in the capacity of a health care professional.</p>
9	<p>Anonymity: Read “Anonymity” on page 6, then “Why does OA place such emphasis upon ‘anonymity?’” on page 25.</p>	<p>Ask and Discuss: Discuss the concept of “anonymity.” Discuss the meaning of “humility.”</p>
10	<p>Are You Convinced? Read “What is compulsive eating?” through “Can’t a compulsive overeater just use willpower to stop excessive eating?” on pages 18–20.</p>	<p>Ask and Discuss: Now that your sponsee has been introduced to the OA program and has taken some actions, does your sponsee now consider themselves to be a compulsive eater? Ask them to write their thoughts and feelings on this subject. Discuss.</p>
11	<p>Higher Power: Read “What is meant by ‘a Power greater than ourselves?’” through “Is OA a religious society?” on pages 20–21. Then, read “Structure and Tolerance” on pages 16–17.</p>	<p>Ask and Discuss: Ask your sponsee to write about their understanding of a Higher Power. If they struggle with the concept of a Higher Power, are they open to the idea that a Higher Power can simply be the OA meeting group? Has their food history been characterized by their own willpower going out of control? Might the concept of connecting with a Power greater than oneself help their recovery? Discuss.</p>

Day	Subject and Reading for Sponsee	Discussion Question(s)
12	What's Next? Read "Service" on pages 6–7, then "Sponsorship" on page 5. Lastly, read "Conclusion" on page 17.	Ask and Discuss: Ask your sponsee to write about their experience of their first twelve days in OA and discuss. Review their action plan for how they will move forward. ³

Remember: In Overeaters Anonymous, there is hope and help. Together we can recover! If you have questions, comments, or suggestions, please email info@oa.org.

Find and download *Temporary Sponsors: Newcomers' First Twelve Days* at oa.org/sitemap/ under "Group Resources."

OA Promise

I put my hand in yours . . . and together we can do what we could never do alone! No longer is there a sense of hopelessness, no longer must we each depend upon our own unsteady willpower. We are all together now, reaching out our hands for power and strength greater than ours, and as we join hands, we find love and understanding beyond our wildest dreams.



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³ Upon the conclusion of the twelfth session, you will want to offer either to continue as the individual's regular sponsor or assist this person in finding such a sponsor.

Excerpts from Where Do I Start

You Are Not Alone; Many Symptoms, One Solution

Fundamental concepts are introduced here:

- food is hurting our life in many ways
- we are ashamed of our behavior with food
- we are not like normal people when it comes to eating in that our bodies and minds send us signals about food quite different from normal eaters
- many of us can't stop after starting to eat certain foods and even when we eventually stop, we can't stop ourselves from starting again
- we have a condition of body and mind – an illness – for which OA offers a solution
- we have found a way to abstain from our compulsive behaviors related to food, diets, weight, exercise, and/or body image.

Plan of Eating Tool

Key concepts covered:

- a plan of eating is not a diet
- it is a new way of eating according to our physical needs rather than our emotional cravings
- we are not like normal eaters who stop when they're full, and do not hide food, nor do they feel guilt and shame about their eating
- our problem is not weakness or lack of will power – we have a disease over which willpower, good intentions and resolutions are useless.

Developing a Plan of Eating

The beginning of concrete actions by the newcomer.

Key concepts covered:

- we must develop a sensible plan of eating in advance – we cannot make up our minds as we go
- this plan separates (divorces) our eating from our emotions
- the plan needs to state what, when, where, and how much
- we are more likely to stick to our plan if we commit it daily to a sponsor
- this is a one day at a time – do not think about doing it forever

Choosing Foods and Behaviors to Refrain From

- Trigger food examples:

- chocolate
- fast foods
- cookies
- chips
- sugar
- desserts
- sweetened drinks and cereals
- processed meats
- high fat products
- deep-fried foods
- snacks
- flour or refined carb products
- pastries
- pastas
- bread
- mixtures of sugar and flour and fat

- Behavior examples

- eating until completely stuffed
- rigidly restricting calories
- having to finish whatever is on the plate
- devouring our food at high speed
- hiding or hoarding our food
- eating because it's free
- eating to celebrate
- needing to keep our mouths busy

- purging excess food

Getting Honest About Your Food and Weight

Without a precise and honest *plan of eating* we waste endless hours arguing with ourselves and, ultimately, give in to our own lie that we can have just one bite and stop. Likewise, unless we consider quantity, we may not reach a healthy body weight, which is part of the definition of abstinence in OA.

One way to begin is by looking at everything you consume. Construct a three column list of all the foods you commonly eat. Be very specific. Don't say vegetable – name the specific vegetable and how it's prepared. Don't say protein – name the specific protein such as steak or chicken or fish and how they are commonly prepared. Don't say sugar or candy – say the specific candy bar, ice cream, donut, cake or junk food. Include condiments, table sugar, sugar substitutes, salt. Leave nothing out that you eat or drink.

Column A

Column B

Column C

Foods that you know in your heart of hearts are triggers for you; foods that you often eat too much of; foods that you NEVER have just one of; foods that you consciously or unconsciously turn to when your feelings are particularly unpleasant OR pleasant; foods that call to you. Comfort foods.

Foods that may not be, but sometimes might be a problem.

Foods that clearly are not a problem for you; foods that you can take or leave; clearly not comfort foods; more often than not you don't overeat them.

Creating a Plan

Introduces the idea of simple plans - simply eliminating trigger foods - versus the need some of us have for much more structure, e.g., weighing and measuring, counting calories, committing our food, defining exactly what, where, when and how much we will eat.

Agree and begin new plan of eating

Commit; weigh and measure. This begins the “detox” period.

Begin Steps after two weeks of following plan of eating

Options for questions for writing on the first three Steps

- 48 Questions in *OA Workbook* (OA 12&12)
- 30 Questions in *A Guide for Sponsors* pamphlet (BB, OA 12&12, POE & Tools pamphlets)
- 25 Questions in *12 Step Workshop and Study Guide* (BB, both 12 & 12's, For Today, Voices of Recovery)
- 42 Questions in *Sponsoring Through the Twelve Steps* pamphlet (BB, both 12&12's)

Food Slip Inventory

1. The food is always the last to go, so inventory it first. Write down exactly what happened as if there was a video camera rolling.
2. Remember that food is the symptom, not the problem. Before we make the decision to eat something that was not on our plan there was emotional distress of some sort. Go back several hours or the previous 24 hours or a few days and come forward.
 - a. What feelings were you experiencing before the slip?
 - b. Were you avoiding facing something?
 - c. What lies did your disease tell you that you decided to believe? How did you decide that it was okay to eat and drink?
3. Was the problem physical, emotional or spiritual?
 - a. Did you decide, for example that some binge food was no longer a binge food?
 - b. Was there a spiritual problem? Was your Higher power anywhere? Did you do your morning reading or prayer?
4. Moving forward, what can you learn from this slip?
 - a. Are there adjustments you need to make to your plan of eating?
 - b. If the situation precipitating the slip happens again, how will you handle it without picking up the food for comfort?
 - c. Are there spiritual actions you may take to strengthen your abstinence or help this situation if it comes up again?

A GUIDE FOR SPONSORS

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Highlights of Q&A (18)

1. **What is a sponsor?** (p.3)

- an abstinent OA member who is committed to refraining from compulsive eating and compulsive food behaviors, while working toward or maintaining a healthy body weight
- shares his own program of recovery on an ongoing, individual basis with another member
- works and lives the 12 Steps and 12 traditions
- guides a sponsee through the Steps
- role is not one of therapist, doctor, lawyer, or other professional.

2. **Why should I sponsor?** (p.3)

- helps reinforce our own recovery
- provides opportunity to strength our relationship skills
- keeps us from isolating
- teaches us how to support another human being
- as we give back, we strengthen our group and the fellowship
- OA needs sponsors
- this program is not meant to be worked alone...

3. **When and how do I become a sponsor?** (p.4)

- anytime
- simply sponsor up through the level of your experience
- don't need to have worked all the Steps

- learn from own sponsor
- working with sponsee helps our own growth
- the perfect sponsor does not exist.

4. **Should I be abstinent before I sponsor?** (p.5)

- Yes. We can't give away what we don't have.

5. **How do I learn to sponsor?** (p.5)

- learn by example from own sponsor
- we also learn by doing
- reading and discussing our literature with sponsee fortifies our own program
- learn as others share about sponsorship
- discuss problems in sponsoring with our own sponsor
- workshops.

6. **What are the different styles of sponsorship?** (p.6)

- varies based on our own experience
- from highly structured to easygoing and flexible
- most effective covers physical, emotional and spiritual, not just one of these
- no matter what approach, our role is to help the sponsee discover a new way of living.

7. **What about two people sponsoring each other?** (p.7)

- If no sponsors are available, working with each other is preferable to trying to go it alone.

8. **How much contact should I have with my sponsee?** (p.8)

- mutually agreed on
- more contact provides deeper help, including learning more about ourselves
- face to face is best
- consistent phone conversations
- but don't let others impose on your own program
- encourage sponsee to use the tools and to contact others.

9. How do I take a sponsee through the Steps? (p.8)

- no perfect answer
- 1 to 12 in order
- pace up to sponsee
- stress that the Steps are the heart of the OA program and that working them enables members to stay abstinent and find recovery
- refer to 12 and 12, 12 step workbook, Sponsoring Through the Twelve Steps, Big Book, 12 Step Workshop and Study Guide
- **remember the Steps always work if they are thoroughly followed**
- encourage sponsee to do service and pass on what he/she has learned.

10. How many people should I sponsor? (p.10)

- a sponsee is a commitment
- don't say yes unless you mean it
- be realistic about your time.

11. When and how should I decline sponsorship? (p.10)

- no friends or potential romances
- we're at our limit
- shaky program or in relapse

- personal program comes first
- be honest with ourselves
- we can't give away what we don't have.

12. What if my sponsee wants to have more than one sponsor or change sponsors? (p.11)

- fine
- don't take it personally
- sponsees may want to change as they progress in recovery or want to focus on specific issues
- good sponsors encourage other relationships in the fellowship.

13. What should I do if my sponsee has a slip or a relapse? (p.12)

- treat as learning experience
- assure sponsee you're there and care
- do not judge
- encourage
- remind him we have a disease
- do a slip inventory...

14. What should I do if I slip or relapse? (p.12)

- discuss with your own sponsor and be honest with sponsee
- remind them they are free to choose a new sponsor
- if you feel the need to stop sponsoring to focus on your own recovery, explain this to your sponsee
- perhaps offer to help him find a new sponsor
- don't just drop a sponsee – can be devastating for the sponsee.

15. What do I do if I feel that my sponsee is not making progress? (12)

- examine our own expectations
- everyone progresses at their own pace
- remember the sponsee is responsible for his recovery not you
- do an inventory, e.g., has he stopped using the tools
- are you less available
- has communication broken down
- perhaps a different sponsor is needed
- perhaps some sponsee issues need professional help
- discuss concerns with sponsee and your sponsor
- ultimately, if he's not willing, you may have to let this sponsee go.

16. What do I do if my sponsee stops calling? (p.13)

- follow up
- express your concern
- is something wrong?
- you are the best judge of how much follow-through to do.

17. What if my sponsee wants to leave OA? (p.13)

- it's not a reflection on us
- we're not in charge of recovery
- has he decided he's not a compulsive overeater
- doesn't like the 12 step approach
- suggest he try a different OA sponsor and/or group before leaving
- do not judge
- let go with love and acceptance

- let him know we'll always be here.

18. When and how should I end a relationship with a sponsee?(p.14)

- when it interferes with your program, abstinence or recovery
- discuss with your own sponsor first
- let go with love, compassion, and honesty.

Conclusion (p.14)

- a sponsor is simply someone committed to helping another member on the road to recovery
- it enriches our programs
- don't let the fear of being imperfect stop us
- we don't have to be perfect, just willing
- trust HP to help.

Appendix A: Questions to Ask Newcomers [Steps 1-3] (p.15)

General Suggestions for New Sponsors (Not OA literature)

1. Sponsors are guides on how to get abstinent and how to work the Steps.
Without sponsors, people end up trying to do it themselves. It doesn't work.
2. Remember, you're helping them find what works best for them, not just trying to impose on them what works best for you.
3. Your experience is your foundation for sponsoring. Share your experience up to where you are in the program. But remember, that's your experience, theirs may be different.
4. Explain to a new sponsee what their responsibilities are. Agree on exactly what you will do and what they will do on things such as food plans, calling, writing, etc. Whichever path you choose, agreement between the two of you as to how to approach recovery is essential.
5. Sponsor your experience: as a binger I cannot sponsor an anorexic or restrictor.
6. Beware expectations. Don't predict who will make it, and who will not. Don't expect success, and don't fear failure. Sponsee success is up to them. We know the program works if people have the willingness to take the actions. Not everyone does. That's not our fault.
7. Keep the time on the phone program oriented. Don't allow social conversations to override our need to carry the message.

8. Don't give professional advice. We're not doctors, therapists, clergymen or family counselors. When people ask for such advice, you may want to help them apply 12-step principles or slogans such as *one-day-at-a-time* or *first things first* or *let go and let God* or *live and let live* to the situation, or you may need to guide them to professionals.

9. For the atheists and doubters, remember Appendix 2 of the Big Book describes spiritual awakening as personality change sufficient to bring about recovery. Emphasize that the problem and the solution are physical, emotional and spiritual.

10. Don't forget that sometimes the initial abstinence from the numbing and comforting effect of compulsive overeating may mean feeling more pain. But as long as they are working the program completely, they can remain abstinent and serene in spite of problems.

11. Live the Steps and use the tools yourself. You can't give what you don't have. Be honest and open about your own program with your sponsees. Share your successes and hard times.

12. If you struggle, share your struggle. Don't allow yourself to be put on a pedestal. Let your sponsee know that the disease is arrested, not cured and that you are only one bite away. Let them know where you are in your own recovery. Honesty is always best.

13. Don't sponsor too many people. One may be enough for some; three or four may be okay for others. Sponsor only the number to whom you can give you full attention.
14. Realize the answers to questions and the suggestions for recovery are in the OA literature and the Big Book. You don't have to know all the answers, only where to find them.
15. Listen, accept and support. There is no good or bad recovery. We all do the best we can.

A Sponsee Wish List
Top Characteristics of Effective Sponsors
Developed at a 1999 Workshop, Later Published in Lifeline

1. **Abstinent:** The sponsor is abstinent, and abstinence is the most important thing in their life.
2. **Available:** A good sponsor has the time to spend talking with the sponsee. They are available when needed for an emergency. They are available for personal contact in addition to the telephone.
3. **Committed:** The most effective sponsors are committed to the program, to sponsoring, and trying to pass on the message of recovery to others.
4. **In recovery:** The sponsor lives in recovery on all three levels – physical, emotional, and spiritual. They walk the walk as well as talk the talk.
5. **Program foundation:** They have a strong foundation in program principles, the Steps, traditions, tools and particularly the Big Book.
6. **12-Step based:** The sponsor has knowledge and experience in working the Steps. They try to apply the Steps to everyday living.
7. **Focused:** The sponsor keeps the daily phone call with the sponsee focused on the Steps and the program rather than social things.
8. **Good listener:** Effective sponsors are good listeners.
9. **Clear expectations:** From the beginning, the best sponsors set out clear expectations, limits and goals for the sponsor/sponsee relationship.

10. **Shares experience only:** Truly effective sponsors know their limits. They do not play God, therapist, counselor or social worker. They share their program experience only.
11. **Humility:** Good sponsors know when to say, “I don’t know,” or “I have no experience,” or “Perhaps this is a situation where you might need some help outside the 12-step rooms.” They don’t allow themselves to be put on a pedestal.
12. **Honesty:** The best sponsors are rigorously honest – both about themselves and with the sponsee. They do not enable. Their approach tends to be compassionate tough-love.
13. **Supports and encourages:** Effective sponsors help sponsees grow, learn to do new things, take risks, and learn from their mistakes.
14. **Attitude:** Good sponsors demonstrate compassion, empathy, patience, a sense of humor, and a positive attitude about life.
15. **Know when to let go:** Good sponsors know when and how to detach with love and “let go” of sponsees when it becomes appropriate.

Part III

Helping Sponsees Stay Abstinent

The phone call comes in. They want to eat or are already eating and calling for help. Remember the addiction cycle: thinking leads to the feelings, which lead to the obsession which leads to the first bite which leads to the compulsion which leads to the binge, which eventually leads to remorse which leads to resolutions to never do it again. The idea is to intervene in that cycle before they get to the first bite or to help them stop if they're already started. Here are some ideas from our literature, various sponsoring workshops, or simply my own experience.

Some ideas developed at a Workshop on the "I Want to Eat" Call

1. Compliment them on picking up the phone before taking a bite.
2. Ask them what happened just before the food thoughts. What exact feeling triggered the obsession? What can they do with the feeling? Will eating fix it?
3. Ask them what's a better way of dealing with the feelings they're feeling? How can the situation be reframed? What is the opposite of this feeling?
4. Can you try to focus on the solution rather than the problem?
5. Talk to them about the tools. They made a call. That's one of the nine tools. What else would be helpful. What about writing about what's going on, reading the 12&12 or BB or other literature, getting to a meeting?
6. Ask them what they like best about their abstinence.
7. Ask them about their goals.
8. Ask them to do a gratitude list.

9. Read some OA literature together.
10. Share your own strength, experience and hope on handling urges to eat.
11. Say the Serenity Prayer. Together. Separately.
12. Suggest they ask for help from their Higher Power.
13. What other action, other than eating, might they take? Walking, exercise?
Distraction can often stop the obsession within minutes.
14. If they've started already, ask: "Can you put down the food just for now?"
15. Tell them to get out of the kitchen. Move away from the food. Can they get
rid of the trigger foods while you're on the phone?
16. Get them to a meeting. Ask them to commit to a meeting.
17. Remind them the goal is to abstain from the *first bite* – no matter what.
18. How are you going to feel later - when you finally stop?

Some Ideas from OA's *Before You Take That First Compulsive Bite* (now part of *A Lifetime of Abstinence*)

1. Remember you cannot treat food like a normal eater because you have a progressive disease.
2. Don't think about any real or imagined pleasure you once got from certain foods. Change the channel.
3. Remember that food is not going to make a bad situation better. It will only create more problems and regrets.
4. Remember that if you have that first bite, you run the risk of losing control. The disease tells us one will be okay. I'll just have one. This is a lie.
5. Remember how abstinence has made you feel in the past. Wasn't it good?
6. What step are you working on?

Some ideas from OA's *Think First*

Alternatives to eating:

1. **Use the tools** – meeting, make calls, read literature, write about your feelings, do service..
2. Feelings may bring food thoughts, no matter how long we're here. **Feelings will pass.**
3. **Remember we get stronger every time we face a situation** without eating compulsively.
4. **What is your plan of eating for the day?** Any other action plans for the day?
5. Accept that a bite or two will not make a bad situation better.
6. Remember what you **lost** when you got abstinent: guilt, remorse and self-condemnation.
7. **What step are you working on?**
8. **For experienced people, what step or tool or slogan applies to this situation you're trying to escape from with food?**

Some ideas from OA's *Strong Abstinence Checklist*

1. Did you rely on your HP to help you stay abstinent today?
2. Why do you think abstinence is so important?
3. Did you plan your food today? Was this thing you want to eat on that plan?
4. Isn't this thing you want to eat on your trigger food list? What happens when you eat trigger foods?
5. What tools did you use today?
6. Did you begin your day with reading and prayer?
7. How have you managed not to give in to the obsession in the past?

Other ideas

1. Do you truly accept you have a disease for life that means you can't treat food like normal eaters?
2. Do you accept that you can't handle this disease all by yourself?
3. Have you identified the flaws in your thinking that lead to the food obsession?
4. Have you forgiven those who have hurt you?
5. Have you made amends to those you have hurt?
6. Do you read and reflect on OA literature every day?
7. Do you accept that you have a disease, not simply a shortage of willpower?
8. Are you rebelling against our program for some reason?
9. Are you trying to work the program alone?
10. What are the alternatives to handling the feelings that you want to eat over?
11. Are any of our slogans applicable in your situation, e.g., ODAAT, FTF, LLL, LGLG?
12. Are you trying to control things that are not controllable, or putting unreasonable expectations on others?
13. Will you respect yourself later if you eat now? Do you like the feeling of self-respect?
14. What are the troublesome things in your life that you in fact cannot change? What can you change?
15. What were the things in yourself that you asked your HP to remove in Steps 6-7? Are they gone or are they still causing you trouble?
16. Move. Out of the kitchen. Out of the house. Walk around the block.
Exercise. Move a muscle, change a thought.

For longer-term members

1. What step principle applies to this situation?
2. Remember, you have a permanent but arrestable disease which means that you cannot deal with food like a normal eater.
3. Are you working 10,11,12 every day?
4. Are you giving service?
5. Are you sponsoring? Do you have a sponsor?
6. What were the key defects you identified in Steps 4-5? Are they gone now?
7. How many of the 9 tools are you working?
8. How many meetings a week do you attend?
9. Have you become complacent about your disease?
10. Do you do a gratitude list every day?
11. Are you suffering from HALT? (Don't get too hungry, angry, lonely, tired.)
12. Are you suffering from depression? What can you do about it?
13. Have you started eating some of the foods you had previously given up?
14. Do you remember that freedom isn't free?

In summary,

• *Our most basic truth is that working the 12 steps -using the 9 tools to assist us starting with the plan of eating - restores us to sanity. Period. There's nothing else to be said. Everything is about that process. Sponsors pass on that message.*

• Don't forget, no matter how far along in recovery you are, if you're abstinent and working the Steps and the program, you're in a position to help someone who just arrived, or is just returning. Hopefully, the process and tools I've talked about here will give you the confidence to do that.

Remember, sponsors are not God's or Goddesses. They're just members working the program sharing their experience with others.