Aim: To increase the Fellowship’s focus on actions required for abstinence, because our primary purpose is both 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.

Workshop objectives include OA members:

- Understanding the difference between “abstinence” and “a plan of eating.”
- Having a clear vision of their abstinence.
- Writing the actions they need to take to make abstinence first in their life.
- Understanding what a plan of eating is and is not.
- Knowing about relevant OA resources.

Why is the difference between “abstinence” and “a plan of eating” important?

The definition of abstinence is the same for all members, but the details of a plan of eating for each member may differ depending on what compulsive food behaviors we engaged in while practicing our disease, whether overeating, under-eating, and/or purging. A plan of eating is a Tool to help OA members maintain abstinence, i.e. the act of refraining from compulsive eating and compulsive food behaviors while working towards or maintaining a healthy body weight. There are as many “plans of eating” in OA as there are members, and a plan may change over time for each member. A New Plan of Eating has samples of some of the many plans of eating OA member’s use.

Background

In 1961, abstinence was first mentioned as a Tool.

In 1973, the World Service Business Conference (WSBC) delegates approved The Tools of Recovery pamphlet, which included abstinence as one of the Tools of OA.

By 1995, the collective OA understanding of the importance of abstinence meant that the delegates at WSBC removed abstinence as a Tool and replaced it with “a plan of eating,” leaving abstinence as OA’s primary purpose.

Delegates to the 2011 WSBC approved changes to the Statement on Abstinence and Recovery, which read at the time: “Abstinence in Overeaters Anonymous is the action of refraining from compulsive eating and compulsive food behaviors while working towards or maintaining a healthy body weight. Spiritual, emotional, and physical recovery is the result of living the Overeaters Anonymous Twelve-Step program.”

In 2013 at WSBC, our primary purpose was modified to say, “Our primary purpose is to abstain from compulsive eating and to carry the message of recovery through the Twelve Steps of OA to those who still suffer.”

The results of a survey of the membership in 2013 showed that there was a lack of abstinence and of working all Twelve Steps. The strategic plan theme for World Service for 2014-2016 was “Our Primary Purpose.” The goals for each of the three years following were: 2014—Increase Awareness of the Importance of Abstinence; 2015—Increase Awareness of the Necessity of Working All Twelve Steps; 2016—Increase Awareness of the Importance of Carrying the Message. This workshop was created as part of the 2014 goal.
In 2015 at WSBC, our primary purpose was modified to say, “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 2021, the WSBC 2021 accepted the following:

“Abstinence is the action of refraining from compulsive eating and compulsive food behaviors while working towards or maintaining a healthy body weight.

Spiritual, emotional, and physical recovery is the result of living and working the Overeaters Anonymous Twelve Step program on a daily basis.” (Business Conference Policy Manual, 1988b [amended 2019, 2021])

PAGE TWO: Formulate your own abstinence vision/affirmation
Reflect on and create your own abstinence vision/affirmation.

- E.g. I am freely choosing foods and food behaviors that are non-compulsive, eating with gratitude, dignity, and grace, which results in my maintaining a healthy body weight using God's wisdom and guidance and the Twelve Steps of OA as a path for my life.
PAGE THREE: Is my abstinence strong enough?
The disease of compulsive eating is threefold: physical, emotional, and spiritual. Abstinence actions address all three aspects of the disease, so that peaceful long-term recovery is possible. The result of working all Twelve Steps of Overeaters Anonymous is a spiritual awakening which changes us physically, emotionally, and spiritually.

Reflect on your recovery using the following questions.

1) Am I working the Steps?
2) Do I pray and meditate?
3) Did I plan my food today?
4) Am I maintaining or working toward a healthy body weight?
5) Did I rely on my Higher Power to get or stay abstinent?
6) Do I ask for help?
7) Do I make OA phone calls?
8) Do I have an attitude of gratitude?
9) Do I help others?
10) Do I have an action plan to stay abstinent?
11) Do I have a sponsor? Do I sponsor?
12) Is what I am currently doing working for me to remain abstinent?
13) What activities will I NOT participate in to maintain my abstinence?
PAGE FOUR: What actions do I take to “make abstinence first without exception”?

What are my daily prayer and meditation actions?

- E.g. Have at least one period of prayer and meditation every day.
- E.g. Talk to God about specific food items and/or personal food behaviors.

What actions do I take to live Step Ten?

- E.g. Daily commit to list personal “did well”/positive attributes.
- E.g. Daily examine where have I been resentful, selfish, dishonest, or frightened.

What actions underlie my plan of eating?

- E.g. Get input from a health care professional to establish my SPECIFIC written plan of eating.
- E.g. Specify what foods will I eat and when will I eat them.

What are my TRIGGER FOODS that if I eat a little, I will crave more?

- E.g. Maintain a written list of trigger foods.
- E.g. Do not keep trigger foods near/visible

Do I maintain a specific written list of eating behaviors that I will participate in?

- E.g. Will have at least ______ hours between meals.
- E.g. Will always communicate with sponsor before making changes in my food plan.

Do I maintain a specific written list of eating behaviors that I will NOT participate in?

- E.g. Will not eat in car.
- E.g. Will not eat/taste/sample anything while in the cooking process.
PAGE FIVE: A plan of eating—what it is and is not

An effective plan of eating helps the member stop eating compulsively and move toward or maintain a healthy body weight. For a member to stay stopped requires more than just a plan of eating. Working the Twelve Steps and using the Tools of Recovery brings a return to sanity around food and a fuller recovery experience spiritually and emotionally.

Think back to some of the items we discussed earlier during our brainstorming activity and, from your own experience, write briefly about what a plan of eating is or does for you.

Examples include:
- Developed by an honest look at eating behaviors.
- Eliminates personal binge/trigger foods.
- Defines what, when, how, where, and why we eat.

Think back to some of the items we discussed earlier during our brainstorming activity and, from your own experience, write briefly about what a plan of eating IS NOT or DOES NOT DO for you.

Examples include:
- A fast weight loss gimmick
- Doing what I can get away with
- A substitute for working the Twelve Steps
PAGE SIX: Resources

OA-approved resources to assist members to be abstinent and live free of compulsive food behaviors include:

Pamphlets:
- *A Lifetime of Abstinence: One Day at a Time*
- *A New Plan of Eating*
- *Is Food a Problem for You?*
- *Many Symptoms, One Solution*
- *In OA, Recovery Is Possible*
- *Recovery Checklist*
- *The Tools of Recovery*
- *Think First*
- *Welcome Back: Suggestions for Members in Relapse and for Those Who Care*

Books:
- *The Twelve Steps and Twelve Traditions of Overeaters Anonymous, Second Edition*
- *Abstinence, Second Edition*
- “The Doctor’s Opinion” from *Alcoholics Anonymous, Fourth Edition*

Free downloads at oa.org:
- *Abstinence PowerPoint workshop*
- *Strong Abstinence Checklist*
- *Abstinence Literature Resource Guide*

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