

Exploring Abstinence through Writing: A Draft Workbook to Try Out

Note: This draft workbook has been developed by some members of Overeaters Anonymous in Northern Virginia. The content reflects our experience, strength, and hope. It is not OA Conference- or Board-approved and does not represent OA as a whole. It is being used for the first time in a workshop called “What Does Writing Have to Do With Abstinence” presented by the Northern Virginia Intergroup (NoVAIG) Sponsorship Committee on March 13, 2021, but has not been approved by NoVAIG.. Please send any comments to sponsorship@oanova.org .

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Introduction:

This workbook has been written to support you in getting abstinent and working the Twelve Steps of Overeaters Anonymous. Some of us who have been in OA a while wanted to share some things we have learned. We hope it helps. Please send any feedback to sponsorship@oanova.org.

Whether one gets abstinent quickly or over time, it is essential to work the Steps in order to maintain long-term abstinence and to recover on all three levels – physically, emotionally and spiritually. For help on working the Steps, we refer you to other OA literature, such as *The Twelve Steps and Twelve Traditions of Overeaters Anonymous*. Like OA's tools and slogans, the ideas in this workbook can be interwoven with the Steps to support your abstinence.

As you go through this workbook, we encourage you to pay attention to how the topics and your writing relate to the Steps, or to the Step you are working on.

The workbook has 12 sections. Each section has some ideas and discussion, and then some questions you can write on. You can discuss these ideas and questions with other people, like a sponsor or program buddy, or perhaps even form a group and go through the workbook together.

P.S. You can go through the workbook more than once. Each time, you will learn something new. 😊

Table of Contents:

1. Some ideas that have helped us	page 4
2. Food, a plan of eating, and abstinence	page 6
3. Dealing with food thoughts	page 8
4. Getting support (help) from other OA members – sponsors	page 10
5. Getting support (help) from other OA members – phone calls	page 12
6. Getting support (help) from other OA members – more ideas	page 14
7. Thinking – disease thoughts	page 16
8. Feelings and physical withdrawal	page 18
9. Learning from slips and binges	page 20
10. Building good habits	page 22
11. Meditation or sitting quietly	page 24
12. Planning and practicing	page 26

1. Some Ideas that Have Helped Us

When we came to OA, we knew there was something we wanted to change. We didn't always know what to do, but we hoped that OA might help. We eventually figured some things out, but it was sometimes difficult or challenging.

We have found that a few ideas have been really helpful to us.

- ***Just for today. One day at a time.*** I am just doing this today. I don't need to think about tomorrow or the rest of my life. I can focus on doing this today.
- ***Willingness.*** I can be willing to try something that has worked for other people, even if I don't understand it.
- ***Listen to what has helped other people.*** Regardless of whether someone looks like me or not, if something has helped them, it might help me. If someone else has discovered a solution to my problem, maybe it will work for me, and I can at least give it a chance.
- ***Take what you like and leave the rest.*** Many of us liked some of what we heard, but felt uncomfortable with some other words or ideas. For example, many of us didn't like hearing talk about "God." That's ok. I can focus my attention on what makes sense to me and not worry about the rest of it.
- ***Baby steps and small successes.*** This can be a slow learning process. When we have small goals and small successes, we feel good and keep going.
- ***Gratitude.*** What is good today? What am I grateful for? Focusing on this helps me feel ok. Maybe I am just grateful for the sun, or a smile, or that I have found OA.
- ***I am worth taking care of. This is a disease. I am not a bad person.*** Many of us felt worthless when we came to OA. Why even bother? We learned that we are *worth* taking care of. In fact, we have learned that we are good and lovable. It just takes time.
- ***I am learning to take care of myself.*** Even when we wanted to take care of ourselves, many of us discovered that we didn't know how. Not really. So we learned new tools for living. We didn't learn everything in a day, but we kept learning.

Writing:

What does each of these ideas mean to me today? How can I use it today?

- *Just for today. One day at a time.*
- *Willingness.*
- *Listen to what has helped other people.*
- *Take what you like and leave the rest.*
- *Baby steps and small successes.*
- *Gratitude.*
- *I am worth taking care of. This is a disease. I am not a bad person.*
- *I am learning to take care of myself.*

2. Food, a plan of eating, and abstinence

We have found that there are a few key questions we needed to figure out. Figuring this out can take time, so we should just start where we are. The OA pamphlet *Where Do I Start? Everything a Newcomer Needs to Know* has some good information and ideas.

Some questions are listed on this page with some discussion. On the next page, there is room to write. Some people use “food plan” and “plan of eating” to mean the same thing; other people may use one or the other. The OA tool is a “plan of eating.”

- ***What are foods I eat -- and behaviors I do -- that I want to STOP?*** To put it differently, why did I come to OA? What do I want to change?
- ***What does healthy eating look like for me? Do I have a plan of eating that is right for me?*** In OA, a plan of eating is a tool that helps guide our food choices, amounts and eating times to support our health. It may include how and why we eat. It can be very general (for example, three meals a day with nothing in between) or quite specific.
- ***Would seeing a nutritionist help me? If yes, am I willing to see a nutritionist?*** A nutritionist can help us figure out what is a good plan of eating for each of us individually. Even if a nutritionist costs money, seeing one can be very helpful. Some of us didn't want to see a nutritionist because we were ashamed of how we ate, or we didn't think that we were worth spending money on, or we were scared. We had to figure out our fears and maybe do it anyway. Even figuring out why we didn't want to see a nutritionist was a good step forward.
- ***What is the difference between “abstinence” and “sticking to my plan of eating (or food plan)?”*** We learned that there is a difference for most of us.
 - “Abstinence” is *refraining from* compulsive eating (or another harmful behavior). If is about *how* we eat – are we eating compulsively, or not? Is our eating mindless, driven, numbing, or so fast that we don't even taste the food? Are we eating to avoid a feeling or situation? Or not?
 - “Sticking to a food plan” or our “plan of eating” is eating according to the plan. Am I eating according to my plan, or not?
 - We can stick to our plan of eating (or food plan) and eat in a relaxed, non-compulsive manner, or we can eat the same food in a crazy, compulsive manner. Should we slow down?
 - A red flag: If we eat something not on our plan of eating, we may be eating compulsively. We may want to ask ourselves: How am I eating? Why am I eating? Is this ok?

Writing:

- What are foods I eat -- and behaviors I do -- that I want to STOP? To put it differently, why did I come to OA? What do I want to change?

Foods that would be better for me not to eat (if any)? Do I have "red light" foods to avoid? Do I have "orange light" foods to be careful of?

Food behaviors I would like to stop (if any):

Anything else I want to change?

- What does healthy eating look like for me? Do I have a plan of eating that is right for me? If yes, what is that plan of eating? Do I like it?
- Would seeing a nutritionist help me? If yes, am I willing to see a nutritionist?
- For me, is there a difference between "abstinence" and "sticking to my plan of eating (or food plan)"? If so, what is the difference?

3. Dealing with food thoughts

If we are thinking about food – “having food thoughts” – or having physical cravings, we need a commitment to being abstinent, no matter what. It helps to focus our minds and bodies on something else. Here are some ideas on what to do instead.

- 1) Use a tool – make a phone call, write, read literature, go to a meeting.
- 2) Delay – “I can eat this in 5 minutes, in an hour, later today, tomorrow. We know that a craving will pass in a couple of minutes, if we don’t give in to it.”
- 3) Distract – besides using the tools, I can do anything else. Work. Watch TV. Exercise. Paint. Play. Help someone else.
- 4) Pray – ask for help from my Higher Power in this moment, right now. If I don’t have a clear concept of a Higher Power, I can just ask for help from whatever is out there.
- 5) Use slogans.¹ Repeat them. Some examples: “Just for today.” “This too will pass.” “Let Go and Let God.” “That’s not my food.” “Don’t eat, no matter what.”
- 6) Focus my mind on something else positive. Maybe repeat a memorized prayer or song.
- 7) Breathe slowly.
- 8) Recognize disease thoughts and change my thinking. (See Section 7 on page 16.)
- 9) Allow myself to sit still and see what I feeling. Allow myself to have strong feelings. (See the Section 8 on page 18.) We may need to go somewhere to cry in private, or swear loudly, or whatever. We can write or call someone for help with our feelings.
- 10) Drink – water or tea. Something with no sweetener or sugar.

The Tools are described in the OA pamphlet, *Where Do I Start? Everything a Newcomer Needs to Know* starting on page 5. They are:

- A Plan of Eating
- Sponsorship
- Meetings
- Telephone
- Writing
- Literature
- Action Plan
- Anonymity
- Service

¹ Overeaters Anonymous Northern Virginia Intergroup has produced a two-pager called “Slogans That Have Helped Us.” It is available at https://oanova.org/manage/assets/uploads/2020/02/Slogans-That-Have-Helped-Us_trifold-v9-112419.pdf and is also available from literature@oanova.org.

Writing

- What tools do I use when I have food thoughts?

- What slogans can I use when I have food thoughts?

- What tools do I not use much? Would it help me to use them more often? Why don't I use them? What do I need to change, so I can use them?

- What other ideas and activities might be helpful?

- What are five (5) prayers, or songs, or texts, that I have memorized? If I am having food thoughts, I can repeat these instead.

4. Getting support (help) from other OA members – sponsors

One of the great things about OA is that other OA members will help us. We usually have to ask, but other OA members want to pass on the help they have received. Several of the tools involve other OA members – the telephone, meetings, sponsorship, and service.

As stated in the pamphlet, “Where Do I Start,” “We ask a sponsor to help us through our program of recovery on all three levels: physical, emotional, and spiritual. Find a sponsor who has what you want and ask that person how he or she is achieving it.”

To explain a bit more... A sponsor is an abstinent OA member who helps us by listening and talking to us on a regular basis. Most importantly, we have gotten help from sponsors around how to deal with food and how to work the steps. An OA member can sponsor someone up to the level of her or his experience. One sponsor can help with everything, or focus on just the steps or just the food.

We can commit our food to a food sponsor, discuss concerns, call about changes... It helps us know that someone else cares and helps us be honest with ourselves about our food

So how does one get a sponsor? We find someone who has recovery – something we want -- ask them to be our sponsor. It’s that simple. But it can be hard to find someone who is available, and who is a good fit. We might find that we have to:

- Write down names and phone numbers of people and call them;
- Go to meetings that are not our regular meetings (including meetings in other areas or phone meetings or zoom meetings);
- Ask people we admire to let us know if they become available;
- Talk to people to get to know them before asking them about being a sponsor;
- Find out if your Intergroup or Region has a sponsor matching service;
- Be patient;
- Pray for the right person;
- Be willing to ask someone who is not our “first choice;”
- Be flexible on our schedule;
- Try working with someone for a bit and discover it is not a good fit in terms of personality. (This is ok.)
- Explore alternatives, such as a buddy, co-sponsor or workbook group. (See section 6 on page 14).

You can ask to talk about a potential sponsor’s expectations and time availability before working with them, and you can suggest doing it on a trial basis. (That way, if it doesn’t work out so well, it is easy to say good-bye and with the other person well.)

Writing...

- If I have a sponsor – how did I get my sponsor? How is it working out for me?

- If I “don’t know how to ask” for a sponsor, or “don’t know what to look for” in a sponsor, remember the OA suggestion: “Find someone who has what you want, and ask how they got it.” Maybe ask someone on a “trial basis” and see how it goes.
 - What do I want?

 - Who has what I want?

- If I don’t have a sponsor...
 - Why not?

 - Am I afraid of something? If yes, how can I deal with the fear?

 - Am I being picky or inflexible – trying to find the perfect sponsor?

 - If no one is available to be a sponsor at meetings I have gone to, are there other meetings I could check out or options I could explore?

 - If I can’t find a sponsor, can I find some people to talk to regularly, maybe an OA buddy, co-sponsor or workbook group?

5. Getting support (help) from other OA members – phone calls

One of the tools of the program is making phone calls.

We have found phone-calls super-helpful. We can call when we need help, or we can just find people we like to talk to. Sometimes we just pick up the phone, and sometimes we schedule calls. Some of us have found that calling and leaving a message is helpful even if we don't reach the person we are calling. Texting can be good, too.

Many of us found it hard to make phone calls. We were afraid we'd have nothing to say, or we'd be interrupting, or something like that. It can help to do a little planning to have something to say. It also helps to know that people want to hear from us.

Just a p.s.: We had to learn to let go of expecting someone to call us back. Maybe they will; maybe they won't. What they do is about them, not about us.

Here are some ideas for questions we could ask:

- What meetings do you go to?
- How has program helped you?
- Do you make phone calls? What do you like? What is hard?
- What are you working on in program?
- Do you have a sponsor? How did you get a sponsor?

Here are some ideas for sharing about ourselves and our programs:

- I am feeling really crazy/sad/happy/angry/upset/afraid/pleased right now.
- I want to commit [to do or not do something].
- I have been reading step...
- I have been reading stories in (some book) and I really like this one...
- I heard something in a meeting that has really helped me...
- I heard something in a meeting that I didn't understand. Can you tell me what this means?
- I've been going through this workbook on getting abstinent. It says [this] but I don't understand it. Can you help me understand this?

Texting or emailing can be good, too, in addition to some phone calls.

Writing:

- Who are five (5) people I would like to talk to regularly. What are their names and phone numbers?

- Have I tried calling any of them?
 - If yes, what was it like? What did I learn?

 - If no, why not? What am I afraid of?

- If I am afraid of calling people,
 - What are some questions I can ask?

 - What can I share about myself and my program?

6. Getting support (help) from other OA members – more ideas

As mentioned earlier, one of the great things about OA is that other OA members will help us. We usually have to ask, but other OA members want to pass on the help they have received. Several of the tools involve other OA members –telephone, meetings, sponsorship, and service.

What is “support” anyway? What help am I asking for? Here are some ideas:

- Ask someone to be a sponsor (Section 4), or co-sponsor or program buddy (below.)
- Ask someone to listen to us talk about something we are concerned about.
- Ask what someone’s experience is with a particular challenge or problem.
- “Commit my food” -- Tell someone what I am going to eat – by calling someone, text, email, writing out my food and sending a photo, or any other system that works.
- Build a “support team,” a handful of people I speak to regularly.
- Before I do something difficult or go to a difficult situation, call someone and talk through how I am going to deal with it.
- Commit to someone ahead of time to make a phone call during a difficult event.
- “Bookend” something – call in advance to talk about something challenging, and call afterwards to share how it went.
- Call someone before changing what I eat (to make sure it’s a good choice).
- Get together for coffee or tea or a meal.
- Go to events or do service together. Company makes this more fun.

Who to ask for help:

- ***Other OA members.*** We’re part of a community of people who have the same problem that we do, and would like to help. It helps to have a few people we talk to regularly.
- ***Buddy -- program buddy, accountability partner, etc.*** We all benefit from having other people we talk to regularly. Some of us have an OA buddy – someone we are “doing program with” that we talk to regularly, but who is not a sponsor.
- ***Co-sponsor.*** Some of us like to work the steps with another person where we each sponsor the other. We are co-sponsors.
- ***Workbook group.*** Some of us have found it helpful to participate in a group that goes through an OA workbook or the “Twelve Step Workshop and Study Guide.” An inter-group, meeting or individual OA members can organize a group. Group members meet regularly and can be in touch between meetings as well.
- ***Relapse prevention group.*** Some of us have found it helpful to participate in a small group focused on relapse prevention. For information, see the *Relapse Prevention* tab at <https://oanova.org/resources/recovery-materials/>.

Writing...

- What support do I have?

- Is it enough? (If I am not abstinent, there is a good chance I am not getting the support I need, or not asking for it when I need it.)

- If it is not enough, what would help?

- Am I willing to ask for this support? If not, why not? What am I afraid of?

7. Thinking – disease thoughts

We have found that our thinking is part of the problem. Often we have thoughts that lead us to eat in an unhealthy way. This is “disease thinking” or the “voice of the disease” or “crazy thinking.” It gives us permission to eat in a way that, deep inside, we know is not good for us.

Here are some common disease thoughts. We have to learn to recognize them and ignore them, or replace them with a more honest recovery thought. Here are some examples:

Disease thought

Honest/recovery thought

I’ll eat just one.

I can’t eat just one.
Just for today/right now, I won’t eat any.

I deserve to have this.

I may “deserve” this, but it’s not healthy for me. I’ll let it go.

I need to eat this to make someone happy.

I need to eat what’s right for me. I can say “No, thanks.” I don’t need to take care of how that person feels.

I’ve already ruined the day. I can keep eating.

I can start fresh right now.
I don’t have to make a bad situation worse.

I’ll never get this. I’m just a failure.

I have a disease. One day at a time, I am learning to take care of myself.

This is hard. I can be patient with myself while I learn something new.

I might as well just give up.

I am disappointed in myself, but if I give up, I’ll never get better.

I can just stop judging and criticizing myself, and rest for now. I can try again and keep learning.

I should be able to do this by myself.

We are all in this program because we need help. It’s normal to need help, especially with a tough disease like this! It’s ok to need help.

8. Feelings and physical withdrawal

When we use the tools and ideas above, and stop eating compulsively, we may discover that being abstinent is not what we expected. Instead, it can be kind of hard. We aren't automatically happy, and we don't automatically reach our ideal weight. In fact, some things in our lives feel pretty bad, and we have all sorts of feelings. *That's ok.* We just have to learn to feel feelings, not to cover them up and try to make them go away.

We felt all sorts of things, such as:

- Impatient
- Bored
- Scared
- Anxious
- Angry
- Uncertain
- Deprived
- Resentful
- Confused
- Happy
- Eager
- Content
- Lonely
- Ashamed
- Hopeful
- Grateful

We learn that if we allow a feeling to exist, it eventually changes and flows through us. We just have to learn that feelings are ok. But this takes time.

When we have strong feelings, using the tools helps us express the feelings, so we don't need to try to stuff them down or make them go away by eating. Some of us experience a physical withdrawal when we stop eating certain types of foods (such as sugar).

We learn that it's really important to be kind to ourselves. Not "You are a bad person," but "I understand that I feel bad. It's ok. I'm learning to have feelings and not to eat over them. I can feel bad, and not cover that feeling up. I can write about my feelings, and talk to someone who is safe."

Here's some program wisdom that has helped some of us:

"This too will pass."

"Feelings are just feelings, not facts."

"First it gets worse, then it gets better, then it gets different."

Writing:

- How do I feel, when I don't eat in a difficult situation?
- Am I experiencing any sort of physical withdrawal from cutting out particular foods?
- What tools have been helpful?
- What other activities have been helpful?
- How can I comfort myself without food, when I am upset, anxious or afraid?
- Do I speak to myself kindly, or am I critical of myself? How can I be kind to myself?
- Am I experiencing being happy, grateful, pleased, and content?

9. Learning from slips and binges

Most of us have joined OA and then had experience with slips and binges.

We have found it helpful to remember a couple of things:

- I am not a bad person because I slipped or binged. I have a disease that is cunning, baffling and powerful.
- Having a slip or a binge really just means that I need help with something. I need to learn a better way to deal with a situation that is difficult for me.

And we have found it helpful to focus on three things:

- (1) **Learning.** What did I learn from the slip or binge? What can I do differently next time? Can I imagine or visualize myself doing this differently the next time?
- (2) **Support from myself and others.** How do I be kind and support myself in this difficult moment? Who can I talk to that will support me? Can I talk to myself kindly and patiently?
 - For example, it doesn't help to say, "How could I mess up? I'll never get this."
 - It's better to say, "It's really hard. I'm really disappointed, but I can be patient and try again. I am worth trying again."
 - We have found that it is better to tell an understanding person what happened than to keep it a secret.
- (3) **Keep doing what is working.** When we slip or binge, we can be tempted to give up on everything. But that doesn't help! It helps to get back on track as soon as possible.

Writing:

- What happened? What was difficult for me?

- **Learning.** What did I learn from the slip or binge? What can I do differently next time? Can I imagine or visualize myself doing this differently the next time?

- **Support from myself and others.** Can I talk to myself kindly and patiently? How do I support myself in this difficult moment? Who can I talk to that will support me?

- **Keep doing what is working.** Am I back on track? What do I need to do, to stay in recovery?

- **If I keep having problems in similar situations...** What is the problem? Do I have unrealistic expectations of myself and others? Is there an underlying “should” or fear that I need to look at? Can I write about this, or talk to someone about this?

10. Building good habits

We have found that a lot of recovery from the disease of compulsive eating has to do with practicing good habits that replace bad habits. Many of us find that doing some basic things on a daily or weekly basis helps us a lot.

Taking care of ourselves physically, emotionally and spiritually on a daily basis helps us stay abstinent and in recovery.

Here is a list of some things that some or all of us do regularly, as a routine or habit.

- Calling a sponsor
- Calling other people at scheduled times – or whenever – during the day
- Going to meetings
- Doing service
- Planning meals in advance
- “Turning over” our food to someone in advance (or when we change our food or after a meal or day)
- Doing program reading daily (at a fixed time or whenever we wish to)
- Writing daily (at a fixed time or whenever we wish to)
- Meditating/sitting still
- Praying (talking to whatever our conception of Higher Power is – or not)
 - Asking for help in the morning or throughout the day
 - Saying thank you in the evening or throughout the day
- Planning and doing grocery shopping and meal preparation
- Exercising/physical activity

Writing:

- What do I already do on a daily basis that is helpful for me?

- What would I like to try?

- What might be useful?
 - Am I willing to try it? Why or why not?

 - If I am not willing, what am I afraid of? How can I ask someone to help me?

11. Meditation or sitting quietly

We have found that learning to meditate or to sit quietly and calmly with ourselves is very useful. It helps us be calmer in the rest of our lives. It makes it easier to let go of food thoughts, and to manage our feelings. It helps us be more patient and less impulsive. It helps us not pick up food we don't want to eat.

It can be difficult to have a meditation or sitting practice, especially when we have ideas about what meditation "should" be like. We suggest finding some basic meditation instruction from outside OA and giving it a try. We also found it helpful to ask other OAs what they do and how they learned.

Here is a really basic approach:

1. Move around a bit and shake out your arms and legs before sitting down.
2. Sit on a meditation cushion or chair with your back straight (not leaning on something).
3. Focus on breathing out and in on a count of four or five. Start with an exhale, and then inhale. See what happens. Let your breath ebb and flow.
4. Do this for just a minute or two the first time. Then stop. One minute is enough to start. Feel free to wiggle and move around a bit if that helps.

Some tips:

- There is no right or wrong experience. Just observe what it is like.
- Observe any thoughts and feelings. Don't worry about them. They will come and go.
- Do not expect to be calm inside your head or body. Learning to meditate or be still takes a long time. You are just beginning. Just hang out and see what happens.
- You might have really strong feelings bubble up. That's ok. The quiet might allow something important to come to your attention. You can talk to people about what comes up in your quiet time.
- Figure out a time of day that you can do this regularly.
- Increasing the time by a minute every week, to some time you are comfortable with for now (maybe 3, 5, 10, 15 or 20 minutes). Just 3 minutes is a good start. You can increase it over time. The first step is to get in the habit of doing this. Don't make it something you dislike. You want it to be something you are willing to do again next day.

Writing:

- Would meditating or sitting quietly every day help me?
- If I do this already, how is it helpful? How is it challenging?
- If I don't do any sitting or meditation at all, what would help me start?
- If I do this sometimes but not daily, what would help me make it a daily habit?
- Whether I meditate/sit quietly or not, do I have a lot of "shoulds" and expectations? Can I let go of the "shoulds" and expectations?
- Would it help me to have additional support or accountability? What would help?

12. Planning and Practicing

We have found that planning ahead for challenging situations really helps us stay abstinent. There's a slogan that says, "Failing to plan is planning to fail." There's some truth to that.

We have also found that part of how we grow in recovery is practicing new thoughts and new behaviors. It's just like practicing anything else – at the beginning, we really have to focus on something, but if we do it over and over again, it becomes easier, and we can move on to something else. So we can practice new actions and attitudes to food, and new thoughts and behaviors, and they will become easier.

Putting these ideas together, when we know we are headed for something difficult, we plan ahead. Sometimes it is a particular person who always says things that make us uncomfortable. Sometimes it is a situation, like being alone, or something we don't like going on in our lives. Sometimes it is an event. All sorts of possibilities. In these cases, we do our best to take a look at what's going on, and do some planning to take care of ourselves.

The next page has some questions that might be useful for any type of abstinence challenge. Or you can make up your own.

Writing – worksheet for difficult people, situations and events (feel free to make copies of this page):

ALSO: OA's writing exercise, "Twelve Stepping a Problem" is downloadable at:

https://oa.org/app/uploads/2019/12/twelve_stepping_a_problem.pdf . .

- Person, situation or event: _____
- What is difficult about this person, situation, or event for me?

- What am I afraid of? How can I deal with that fear?

- What can I plan ahead? (Examples: food, conversation topics, answers to difficult questions, self-care actions and strategies, asking for what I need.)

- What do I need to take with me? (Examples: food, phone, literature, meeting lists and directions, my own transportation, extra money in case needed.)

- What support do I need? Who can I call?

- What program attitudes and slogans can help me stay at peace, or help me with the challenges? What new way of thinking and acting can I practice?

Keep coming back!

We love feedback. Please send feedback to: sponsorship@oanova.org. 😊