

## Gratitude in Action (GIA)

1<sup>st</sup> edition - 2019

### What is GIA?

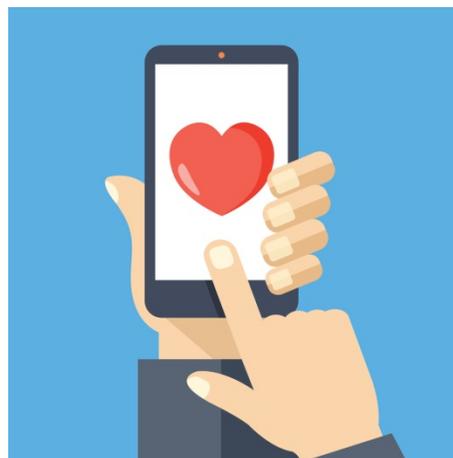
GIA is a quarterly email publication of the WSI 12th Step Committee. Its purpose is to inspire FA members to engage in service and to carry the message of FA recovery to those who still suffer from food addiction.

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### Personal Reflections... Why Do Service?

#### Re-direction

Doing service leaves the doorway open for God to find me, even when I feel lost. Two years ago, my family relocated after the birth of our second child. We found a beautiful, right-sized home, in a lovely suburban town. Weeks after moving in, we were faced with major, major expenses we couldn't have imagined. In essence, we had bought a money pit. Now, two years later, we are still struggling (at times) with the house. Yesterday, we found out we had water leaking in the walls. We were told that we would have to re-side the wall, replace the windows, hire an electrician and a painter, and, on top of that, we might have mold!!! I cried, felt anger and sadness for the situation, and called my sponsor.



But what's really going to get me through this hurdle??? Service. Why? Because when I do service, I forget about myself and my issues. I get busy focusing on a world that exists outside of my bubble. Maybe we'll move, maybe we'll stay. But, either way, if I do service, I will stay close to my Higher Power. This morning, it was in a small way. I called a newcomer back *before* calling an old timer to share all of my woes. Service doesn't always have to be in huge ways. I just have to be open to it and ask God how I can be useful today!

Galit H.

## Happy Usefulness

In the early days of recovery, I did service because my sponsor told me to—which was the same reason I did *everything* in those first few years. It started with staying abstinent, which definitely wasn't intended to help anyone except me (but apparently, according to my sponsor, it did). Then, I put away a few chairs and read a short tool at a meeting. Strangely, at about that time, my life started getting a bit better. I thought it was because my pants were getting looser and the compliments were starting to roll in for looking more svelte. That was *part* of it, but there was more. It felt different from the other diets I had done. What was different? Still not sure, I read one of those long parts in the format and even the tool of Anonymity, which was quite a challenge. Then I got to share at a meeting and even qualify and tell my story. I was terrified to do all of these things, but I was told that these were the appropriate next steps in the FA service continuum, so I conceded.

Turns out, none of these things were too painful, and I survived. Actually, I have to admit, I secretly started to thrive. Soon, I stood up to sponsor, and a woman older than my grandmother snapped me up that first night. Then there were my other poor initial sponsees—God bless all of them! Now I was on a roll with this service thing and still feeling good. But it had to be a coincidence, right? Even if the promises *did* say that things would start getting better.

Now at a normal weight, I took on the Secretary position at one meeting, Speaker Seeker at another, and, strangely, my winter blues—well, they just didn't happen that winter. Maybe it was because it was warmer that year? In time, I helped start a meeting, joined a WSI committee, and then another. I added another sponsee and then a board role. And, hey wait! I'm married, I have a kid, now two, and a job, and a promotion, and a fellowship is growing around me. What's going on here? You see, this was not my plan at all, I just wanted to be thin. I'm not really a "generous" person; basically, I'm lazy and defiantly self-centered. But somehow, along the way, my sponsor (and eventually God) took over, and I was doing a lot of service. And I started to like it! I met great people from all over the world, and it made me feel really good, and I got to stay thin and I got to watch my life turn from kind of crappy to kind of awesome. In retrospect, I guess that's why I do service...

Anonymous



## Spotlight on Service: Personal Outreach to Healthcare Providers

Many healthcare providers find themselves strongly suggesting—to no avail—that patients maintain a healthy weight and diet. We provide information about FA to professionals and groups (doctors, clergy, health-class teachers, health-fair organizations, health-support groups, and professional associations, to name a few) who are in a unique position to advise the suffering food addicts around them. Professionals have been recommending AA to alcoholics since before “The Doctor’s Opinion” was written in the 1930s. FA cannot be recommended to clients and patients if professionals haven’t even heard of FA. Our goal is to educate professionals, so they can help their clients and patients. We contact a variety of professionals, with an emphasis on *healthcare* professionals, because the side effects of food addiction can be life-threatening.

### Reaching Out to Your Own Healthcare Providers

Start with the professionals in your own life. These may include physicians, nurses, dentists, and Employee Assistance Providers (EAPs). Experience shows that personal, one-on-one contact is most effective in connecting with professionals. The next time you visit with a healthcare provider, take along a copy of the Healthcare brochure and tell them how FA has helped you. If you have



friends in these professions, talk about FA as a way to help their clients and patients. Give them the brochure and some literature to reinforce your discussion. This gives them something to refer to when talking with their clients. It also gives them something to hand to patients. **(We have found that *not* inserting the literature in an envelope makes the information more accessible.)** When medical appointments are conducted via phone or Internet, members can refer their providers to a dedicated page on the FA website (<http://www.foodaddicts.org/for-the-health-care-professional>).

Many people have asked how to approach their health care provider. Here are a few useful tips:

1. If Health Care Providers already know your story and have seen the results, you can follow up with something like: “This is the program that helped me get the results you’ve seen.”
2. If it is a newer relationship, you might share a bit of your story, with something like, “I found I couldn’t get a handle on this (weight or health problem) on my own. I’m like an alcoholic with food, and I found a Twelve Step Program that has helped me tremendously.”
3. Or this: “In case you have patients dealing with (weight, diabetes, foot problems, heart problems, etc.), this has been a solution for me and for many others. Let me know if you are interested in more information.”

It is always helpful to encourage follow-up with something like, “Let me know if you have any questions.”

## Personal Reflections...Personal Outreach to Healthcare Providers

### Persistence Pays Off

Although I work in public health, I can still feel intimidated by doctors and other medical providers. One day, in a work-training setting involving medical staff of many levels, I got up the nerve during a bio-break to approach the “Endocrinology table” next to our table and introduce myself. I asked if they worked with patients with diabetes. “Definitely.” I followed with, “In my life outside of work, I am part of a program that focuses on food addiction. FA is modeled on A.A., and it’s free. In the program, I lost 63 pounds and have kept it off for almost 12 years. Is this something providers in your department would like to learn more about?” I offered a trifold (which I had remembered to bring with me) and my email address and phone number. It took several emails and a few weeks, but eventually I met with the team that runs the Friday afternoon Obesity Clinic, comprised of the endocrinologist, nurses, psychologist, nutritionist, etc. A few months later, we were invited to do a full FA panel presentation to the team of about 10-12 field nutritionists working in community clinics. It all started with, “Hi, do you work with diabetes patients?” Several months later, through these connections, we managed to get time in front of a room of about 50 primary care providers for the county. With patience and the guidance of our Higher Power, one step at a time, we get the word out.

Diane P., California

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### Overcoming Fear

My regular eye doctor was on maternity leave, so I made an appointment for a routine eye exam with another doctor in the practice. Since I’d never met Dr. P, I thought it would be a good idea to bring a Packet to the Healthcare Professional to him (this was before we had the Healthcare Brochure).

When I arrived at the office, there was a sign on the receptionist’s area that said, “Dr. P. is running late.”

Oh no, I thought. The poor guy is already covering for his colleague while she’s out and now he’s running late. I don’t think he’s going to want to spend time talking to me about FA!



I checked in and went to sit in the waiting room, which had several people there already. Eventually I was called to do the preliminary exams, and when those were completed I was left alone in the exam room waiting for Dr. P. A lot of reasons went through my head for not talking to him about FA. But I’d already committed to myself that I would, and I’d gone to the trouble to get the Healthcare Professional Packet from one of my meetings, and I’d remembered to bring it with me to the appointment, so I took the information out of my bag and rested it on my knee to strengthen my resolve to follow through on what I had decided to do.

When Dr. P. came into the office he was friendly but brusque. As the eye exam came to an end, I said to him, “I brought this packet for you. It’s about a twelve-step program for food addiction that

has changed my life.” I asked him if he knew about AA, which he did, and I told him FA was based on AA. I said I used to binge on food uncontrollably all the time and that since coming into FA I had been sober around the food for many years.

He said, “May I keep this?” referring to the packet.

“Yes,” I said. “I brought it for you.”

“I volunteer at an eye clinic at X,” he said, naming a large local university. “There are a lot of students who might benefit from this program. I’d like to give this packet to the office manager at the clinic.” I smiled at Dr. P, we wrapped up the appointment, and he left with the Healthcare Packet in his hand. The entire conversation about FA had taken about 90 seconds.

As I walked out of the office I wanted to jump for joy. That was probably the best doctor’s visit of my life!

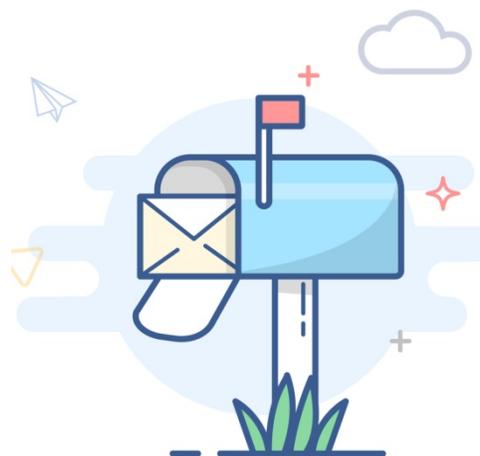
Sarah C., California

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## Traditions Corner - Direct Mailing to Healthcare Providers

The Traditions Review Committee (TRC) was asked to consider if it is appropriate to use 7th Tradition funds to pay for mailing FA Healthcare Professional letters and other FA information to health care providers (therapists, doctors, physiotherapist, chiropractors, etc.).

A possible concern would be with Tradition 11, which indicates that “our public relations policy is based on attraction rather than promotion...” The TRC does not find that a mailout to medical professionals would infringe on this tradition. The intent of the mailout is not to promote FA. Rather, it is meant to inform professionals, so that they can provide information and help their clients and patients.



To expand upon this thought, the TRC thought that 7th tradition funds may be used to provide mailouts to health care professionals because the recipients are known to have a professional interest in helping people who deal with food, diet, and weight issues in many forms which we consider to be “food addiction.” A mailout to the general public does not fit these parameters, because it would not specifically be targeting people who are interested in helping others with food addiction.

However, although the TRC believes that a targeted mailout would be in line with the Traditions, this does not necessarily mean that it would be effective. In fact, the Public Information (PI)

Committee has found that mailouts by themselves are not likely to produce results, as healthcare providers receive lots of unsolicited mail that does not warrant their attention. Instead, the PI Committee recommends that members conduct the personal outreach to their healthcare providers described in this edition of GIA. If FA groups still wish to conduct targeted mailouts, they should consider ways to connect with meaningful, personal outreach and discuss plans, commitments, and expenses in their business meetings.

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### **Highlight: *Distributing the FA Healthcare Brochure at FA Meetings***

The PI Committee suggests that, at every monthly business meeting, the PI representative ask who will be seeing a healthcare professional this month and hand the brochure to each one of these people. This has proven to be more effective than just leaving the brochures on the literature table. The committee also suggests that PI representatives insert a few local meeting trifolds or *20 Questions* cards in the brochure before distributing it.

For meetings without PI representatives, the PI Committee asks that WSI Contacts take responsibility for making the brochure available. The brochure can be ordered through a link on the FA website (<http://www.foodaddicts.org/order/health-care-brochure>) or be purchased at Intergroup and Chapter meetings. The PI Committee suggests that meetings cover the cost of the brochures and provide them free to members who are reaching out to health care professionals. More information on using the brochure is available under Instructions for the Health Care Brochure (<https://www.foodaddicts.org/downloads/hcb%20orientation%202019-02-11-final.pdf>) on the FA website.

By taking these actions, the PI representative and the WSI Contact will increase the likelihood that the FA Healthcare Brochure will reach its intended audience and get the word out about FA to more suffering food addicts.

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### **Words to Live By**

“[E]ven faith is not the whole story. There must be service. We must give this thing away if we want to keep it... To be of service to other people makes our lives worth living.”

*Twenty-Four Hours A Day*, June 16

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## Subscribe to *Gratitude in Action*

- Go to the FA homepage at [www.foodaddicts.org](http://www.foodaddicts.org)
- Click "login" at the top of the right page
- Type in your email address and password
- Click on "Manage my email list preferences"
- Ensure Gratitude in Action is clicked as "Subscribe"



## Share your experience!

Sharing experience, strength, and hope is essential to our recovery—and to Gratitude in Action (GIA). Your submissions can help inspire all of us to do service. In particular, we're looking for brief paragraphs on:



- How service in FA has enriched your life and strengthened your recovery
- Examples of experience with our highlighted position:
  - Public Information Representative – outreach through health fairs

Please email your stories of experience providing outreach on FA through health fairs to [GIA@foodaddicts.org](mailto:GIA@foodaddicts.org) by **April 1**. Other submissions are welcome on a rolling basis. We are also looking for artists who would like to produce line drawings for future editions. Please contact us at the email above to let us know your interest.