

Script for “Carrying the Message” workshop

Sponsored by Overeaters Anonymous South Sound Intergroup¹
October 23, 2022, 1:00–3:00 p.m.

[Mary — Opening the workshop] 10 min

Welcome to the workshop on Carrying the Message, presented by the South Sound Intergroup of Overeaters Anonymous. My name is Mary, I am a compulsive overeater and I am going to start us off today. We are glad that you are all here!

As with all OA events, OA members are volunteering our time to make this workshop happen. On occasion, there are glitches in online meetings that cannot be anticipated. Please bear in mind that we are doing our best. Thank you for your patience and support.

[Serenity Prayer, Unity with Diversity Policy, Preamble, Steps and Traditions]

Will those who wish, please join me in the “we” version of the Serenity Prayer:

“God, grant us the serenity to accept the things we cannot change, courage to change the things we can, and wisdom to know the difference.”

I would also like to read OA’s Unity with Diversity Policy:

As we extend the heart and hand of the OA Fellowship to those who still suffer, let us be mindful of OA’s Unity with Diversity Policy, which respects our differences, yet unites us in the solution to our common problem. Whatever problem you may have with food, you are welcome at this meeting.

_____, will you please read the OA Preamble?

Overeaters Anonymous is a Fellowship of individuals who, through shared experience, strength, and hope, are recovering from compulsive overeating. We welcome everyone who wants to stop eating compulsively. There are no dues or fees for members; we are self-supporting through our own contributions, neither soliciting nor accepting outside donations. OA is not affiliated with any public or private organization, political movement, ideology, or religious doctrine; we take no position on outside issues. 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.

¹ Used with permission of Region 1, Public Information and Professional Outreach Committee. Their committee created the script for a workshop in June of 2021. We were given permission to adapt it as needed.

_____, please read the 12 Steps of Overeaters Anonymous.

_____, please read the 12 Traditions of Overeaters Anonymous.

[Technical info]

Here are a few tips for participating in this Zoom Meeting:

1. You can change your name as it appears below your image. To maintain anonymity, we suggest using only your first name and last initial. One way to do that is by clicking on the “Participants” tab on your toolbar where you will see a list of all the attendees at this meeting. Please select your own name (it should be near the top of the list), and click on the 3 dots (or the tab that says “more”) next to your name. Choose “rename.” If you are willing, you might also add your location so we can see where everyone is from.
2. We will take a brief break at about the one-hour mark. Other than that, if you need to move around, or to talk to someone who is in the room with you, please turn off your video feed. You will still be able to hear the meeting, but your actions will not be distracting to others. If necessary, we may turn off your video feed. If this happens, use the chat feature to let any co-host know when you are ready, and we will enable your video again.
3. At this time, all attendees are muted. Later in the workshop, we will have times for open sharing. In the meantime, if you have a question, please submit it by Chat and one of us will answer it or read it for you.

[Seventh Tradition]

According to our Seventh Tradition, we are self-supporting through our own contributions. To donate to South Sound Intergroup, you can mail a check to treasurer Anne Kunkle. Will someone please add Anne’s mailing address to the Chat?

Intergroups provide information, resources, and support to help meetings and members within their geographic area thrive. Please give as if your life depended on it.

Are there any questions? And now, Carrie will speak to you.

[Carrie—laying groundwork for workshop]6 min

Welcome and thank you for joining us for today’s workshop on “Carrying the Message.” My name is Carrie A. and I live in Centralia, WA. I’m a recovering compulsive eater and exercise bulimic, and I’ve been practicing OA for over 36 years. I am so grateful to have found out that there was and is a solution to my physical, emotional, and spiritual troubles I found the solution beginning 36 years ago in the rooms of OA. I wouldn’t trade the 12 Step way for anything, and I’m often overwhelmed these days by “life beyond my wildest dreams.”

I’m here today with Mary S. and Barbara D. to talk to you about sharing OA with those who still suffer from compulsive eating. Our hope for today is that you will leave this workshop feeling enthusiastic and confident about carrying the OA message in your personal world and with your health care and mental-health providers.

Today’s workshop is organized around the following six themes:

1. Why carrying the message is important.
2. How we carry the message while respecting our tradition of anonymity.
3. The difference between attraction and promotion.
4. Possible barriers we have in sharing our OA experience—and how to deal with them.
5. How you can share your OA experience with health care professionals.
6. How to create an “elevator speech.” You will have a chance to write your own speech in a small group with an opportunity to practice what you create.

[Carrie, cont.— 1. Why carrying the message is important]

We’re here today because carrying the message is a key part of recovery. Any willing and active OA member with a basic understanding of the Twelve Steps and Twelve Traditions is qualified to do so. If OA groups or members don’t let the public know we exist, we block ourselves off from those in need of this twelve-step program.

According to OA’s [2017 Membership Survey](#), 23% of members were introduced to OA by a friend, family member, or coworker; 18% through another Twelve Step program; 16% from health care or mental health professionals, and 15% by current OA members.

Our responsibility for carrying the message is part and parcel of OA’s steps and traditions, which form the core of our program. Specifically:

The 12th Step — “Having had a spiritual awakening as the result of these steps, we tried to carry this message to others, and to practice these principles in all our affairs” — has as its purpose public outreach.

This Step encourages us to work and practice the Twelve Steps and, specifically, to share the OA message of recovery with others.

One of my favorite quotes about the 12th step from the OA Twelve and Twelve is: “Those of us who live this program don’t simply carry the message; we are the message.” These powerful words highlight the impact our sharing has on the lives of others. Some add, “You can’t keep your OA recovery unless you give it away.”

We are also guided by Tradition Five. “Each group has but one primary purpose – to carry its message to the compulsive overeater who still suffers.” Carrying the message to others simply means to unselfishly share our experience, our strength and our hope with them. We look for opportunities in our daily lives to be of service, personally revealing to others how the OA program has liberated us, how we’ve worked the Steps, how we’ve faced long-standing problems and how we’ve gained a new understanding about ourselves.

Carrying the message, or outreach, is reiterated 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.”

Finally, carrying the message is the core of the OA Responsibility Pledge which reads: “Always to extend the hand and heart of OA to all who share my compulsion, for this I am responsible.” This pledge was recently approved to take a more prominent role in the formats and literature produced by the World Service Office.

Now, here’s Mary to talk about how we can carry the message while respecting our other traditions.

[Mary — 2. Carrying the message while maintaining anonymity]4 min

Hello, my name is Mary; I am a compulsive overeater and sugar addict living in Tumwater, Washington. I've been in Program since 2010. Since joining the OA program, I have experienced emotional and spiritual healing. I have a much closer and healthier relationship with my family and friends and a much richer connection with my Higher Power. I continue to work toward a healthy body weight without desperation, dieting, or despair. I'm very grateful for this loving and accepting fellowship.

I’m excited to be here today with Carrie and Barbara to share our enthusiasm for carrying the message. We hope that our fellowship remains vibrant and strong — a welcoming place for those who share my compulsion.

As Carrie said, Step 12, Tradition 5, and the OA preamble all mention the importance of carrying the message — it is a key part of our recovery. However, we also need to remember to practice anonymity when carrying the message.

We want to attract those who are ready to take advantage of what we have to offer. We do this by telling people what OA is and how to find our meetings. We publicize OA without promoting it. OA does this in a variety of ways — through websites, tv, radio, print, videos, social media, displays at health fairs, etc.

If we are speaking in a public medium of communication such as tv, radio, social media, exhibiting at health fairs, however, as an OA member, Tradition 11 requires that we maintain our personal anonymity. This means we do not divulge our last name or anything else that may identify us personally. We may need to hide our face on media such as television.

It can be confusing to carry the message while at the same time practicing anonymity. It’s helpful to remember that OA members are anonymous — but our Fellowship is not.

In the pamphlet “In OA, Recovery is Possible,” it says that we as individuals have the right to make our own membership known and, in fact, must do this if we are to carry the message to other compulsive overeaters. We don’t use anonymity to limit our effectiveness within the fellowship.

Now, Barbara will go deeper into the difference between attraction and promotion.

[Barbara — 3. Difference between attraction and promotion] 3.5 min

I’m Barbara, a compulsive eater from Olympia. I first came into OA more than 25 years ago, and I have been in the program about half the time since then. I came back in January of 2021, and I’m deeply grateful because I can feel myself recovering in deeper ways than in the past.

I owe a lot to two people who helped me discover OA: a mental-health counselor who encouraged me to go to Al-Anon, and a close friend who honestly shared his experience with alcohol and AA. Initially, I was attracted to the 12 steps because of the changes I saw in my friend, and then once I began attending OA meetings, I saw recovery in the people around me.

I want to attract others to OA in the same way. The question is, how best to do that?

Tradition 11 states: “Our public relations policy is based on attraction rather than promotion.”

But what does that actually mean? Simply put, it means that nobody “sells” OA. Instead, others are attracted to OA by the recovery they see in OA members.

Having said that none of us “sell” OA, we do want to attract those who are ready to take advantage of what we have to offer. We do this by telling people what OA is and how to find our meetings. We publicize OA without promoting it. As Mary mentioned, OA is publicized in a variety of ways — through websites, tv, radio, print, videos, social media, displays at health fairs, etc.

As individual members, we can help spread the word about OA by sharing information with our friends and family, but also with our health care providers and other professionals such as members of the clergy, social workers, employee assistance program coordinators, human resource officers, and the general public.

When speaking to professionals, we give them factual information about OA and we tell them briefly about our own experience. We will learn how to do this later in the workshop when we create our elevator speeches.

OA’s Public Relations policy says we do everything we can to tell people what OA is, how it works, and where we meet. But we don’t publish “before and after” pictures of our members in the media. We don’t promise quick weight loss or guarantee results. We don’t have celebrities appearing in front of the public to talk about their success with our program and to invite others to join.

Perhaps you can already think of a situation where you might want to tell someone about OA but feel a little nervous to actually do it.

Next, Carrie and Mary are going to talk about some of the barriers you might face in sharing the message and how to overcome them.

[Carrie leads off the following section — 4. Barriers and solutions]6 min

Hello, Carrie here again. I am a compulsive eater whose life has been changed—saved, actually—by OA. Even after 30 years of abstinence, I know I’m just one bite away from a slip. I want a robust OA to be here for myself as well as for all who need it. I know that our program is a true way out of food addiction. I Love OA and I want to share it with the world because I know there are many COE’s out there who need this solution. Especially now after COVID, I would like us to reach the many people who coped with pandemic isolation by turning to compulsive eating. But it’s not always easy to be an ambassador!

Most everyone is here today because we want to make OA more widely known. Could I see thumbs up for everyone who wants to learn strategies to best push through our hesitation and fears about carrying the message?

Next up, let’s spend a few minutes looking at common fears and roadblocks we experience when talking about OA, and possible solutions. In the following dialogue, the first speaker, Barbara, will present a fear, and the second speaker will respond with a possible solution. Think about your own fears and possible solutions and see if these fit for you. This will be good awareness building for the section coming up — on writing our own on elevator speeches.

(Barbara) Fears / Roadblocks	(Carrie) Possible Solutions
Sometimes I hear people mention their food issues in a public setting. What can I say?	You might say, “I’d like to share what I’ve found to help me with compulsive eating. It’s a little awkward to talk here in public. Would you like to go for a coffee and talk, or can I give you my phone number?”
I’m afraid I will offend the person. One time, my supervisor asked how I maintained my weight, and I said something about eating disorders and she threw me out of her office.	“When sharing the message doesn’t go as well as we hoped, we accept it and look for other opportunities to carry the message.”
I don’t look like a success. I haven’t lost weight.	I remind myself that compulsive eating is a three-pronged illness, spiritual, emotional, and physical. We can still share our successes with spiritual and emotional recovery even if we haven’t noticeably lost weight.
I don’t know what’s appropriate to share. I feel afraid to say too much.	Well, the OA bookstore has a great little wallet-sized handout called “ Carrying the Message .” It has some great ideas about what to share and how much to say.
What should I do when someone keeps trying to give me food or wants me to eat something?	Yikes, this happens for me too. Someone who is over-focused on food that way may have a food problem themselves. This can be an opportunity to talk about your OA experience.
What if I just do it wrong and set the other person against OA?	Well, it’s not us that do the convincing—a loving higher power is the one who changes hearts, we might just be the initial catalyst.

[Carrie, cont.]

Before we move on to elevator speeches, let’s hear from you, our participants. What fears or other roadblocks that might be keeping you from sharing the OA message? If you would like to speak, please raise your hand.

(It may or may not be necessary to say the following.) There are quite a few of us here. If I don’t see you, you can also raise your hand using Zoom. Does everyone know how to do that?

[Note to Zoom host] *If someone doesn't know how to raise the automated hand, read the following:*

1. Older versions of Zoom: At the bottom of your screen is the “Participants” tab. Click on this tab and it will open up a list of names. At the bottom of this list, you will see the “raise your hand” button.
2. Updated versions of Zoom: At the bottom of your screen is the “Reactions” tab. Click on this tab and you will see the “raise hand” button at the bottom of the window.

Group sharing **10 min**

[Carrie, cont.]

Thank you for your shares. Now we're going to take a break for 7 minutes. So, be back here at _____. If you don't have a paper and pencil handy, now's a good time to grab them.

[Break] **7 min**

[After the break, Carrie, cont.]

Welcome back everyone. Next, Barbara will talk about how we can share the OA message with professionals.

[5. Barbara — sharing With health-care professionals] **5 min**

Wouldn't it be wonderful if OA were as available as AA? However, few health organizations include OA as an option when they consider approaches to weight and food issues. Health-care providers can include physicians, dentists, psychologists, physiotherapists, chiropractors, massage therapists, eating disorder clinic staff, and so many others. These providers may know of someone (a patient, a friend, a family member, even themselves) who may one day want to explore OA further.

The average primary-care provider has about 2,000 patients in their practice. Imagine how many people they could reach.

[Mary]

Hello, it's Mary again. I would like to share a personal experience I had with my primary care provider who is a nurse practitioner in Olympia. I see her once or twice a year, and we have been working together for the last three years. At our first meeting, she commented that I was overweight and according to the BMI, I was considered obese and she asked if I would want a referral to a dietician for a weight reduction diet.

I immediately become defensive and responded that I knew I was fat and no, I would not benefit from a diet. Needless to say, the subject of my weight was not discussed for the past two plus years. This year's visit was very different, however. I was working on this workshop, and I was determined to let her know about the OA program and how it was helping me work toward a healthy body weight. I had an OA business card with me like the one I'm showing you now — which has information about OA's World Service Office, including their website.

Barbara will act the role of my nurse practitioner during the following discussion. The conversation is not verbatim, but it is accurate in the content of our interaction.

Nurse Practitioner (Barbara): "Do you have any health concerns or questions that you want to discuss this visit?"

Mary: I took a deep breath and said: "I was pleased that my weight today is over 10 pounds lighter than this time last year. I am a compulsive overeater and dieting has not been successful for me over the years. I may lose weight when on a diet but I regain that weight and add some more when the food restriction ends."

Nurse Practitioner: "What made a difference for you this past year?"

Mary: "I'm an active member of the Overeaters Anonymous program. It's like Alcoholics Anonymous, but instead of a booze addiction, I'm addicted to sugar and white flour . . . I can't just eat a little, I'm compelled to eat it all."

Nurse Practitioner: "I've heard of AA, but I've never heard of this organization."

Mary: "Here is a card with contact information about OA including their website. I put my first name and phone number on the back. If you have other people that eat the way I do or have other eating disorders, they can call me; or they can go to the website for information about the program and meetings in our area."

Nurse Practitioner: "Is it OK to share your phone number with other people?"

Mary: "Yes, they are welcome to call me. I hope this information was helpful."

Nurse Practitioner: "Thanks for bringing this up. I will check out the website myself. Do you have any extra cards?"

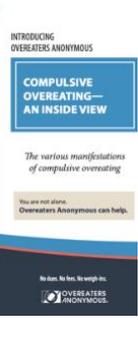
Mary: WOW, I didn't expect that response. I'm so glad I jumped in and spoke up! OA is an important part of my life. It provides me with not only physical healing but emotional and spiritual growth as well.

[Barbara, cont.]

We hope Mary's experience shows that you can speak in a simple and straightforward way to your health-care provider. You don't have to say a lot. You're just getting the conversation going.

As you work up to doing this, think about what materials you might take along to your appointment.

[Note to Zoom host] Please share image of each product as Barbara mentions it.

<p>Mary took the new prospect card, available on the OA site.</p>	
<p>You might also share the Professional Community Courier, a newsletter that OA created to be shared with clinicians.</p>	
<p>A third option for information to share with a provider is "Compulsive Overeating - An Inside View" which provides an introduction to OA.</p>	

You can provide the doctor with a link to these materials on oa.org, or print the material and give it to them. By the way, the World Service office sends a packet of materials to any health-care professional who enquires about OA.

Now, Mary is going to lead us into creating your own short speech or speeches about your experiences with OA.

[6. Mary—Preparing for elevator speeches]5 min

What is an elevator speech? An elevator speech is a way to prepare for an unexpected opportunity to carry the message. These opportunities happen all the time, but they are hard to act on unless we are prepared and comfortable with what we want to say. The idea today is to write and practice a short speech ahead of time, so that you are ready when the opportunity arises. This probably won’t happen in an elevator – but we want to be as brief as though that’s all the time we have.

Before we work on our individual speeches, I want to do a short warm-up exercise. I’ll read a series of suggestions from OA about what to say or what not to say when speaking to someone about our fellowship, and I want you to give me a thumbs up or thumbs down.

1. “I mention how much my weight has changed, and I may show my pre-OA photo.”	Is that a do, or a don’t?	Do
2. “I say that our program is modeled on Alcoholics Anonymous and that my problem is similar to alcoholism, that OA is for people who use food like alcoholics use alcohol.”	Do or don’t?	Do
3. “I tell people that OA is the only way.”	Do or don’t?	Don’t
4. “I carry the message as part of my action plan.”	Do or don’t?	Do
5. “I talk about another’s shape or weight, as I do my own.”	Do or don’t?	Don’t
6. “I speak about OA even if no interest is shown.”	Do or don’t?	Don’t
7. “I explain some of the program’s tools and the concept of ‘Just for Today.’”	Do or don’t?	Do

Now, back to our personalized elevator speeches. Here are the elements of your speech, not necessarily in this order:

1. Explain what OA is.
2. Describe what you were like, how you ended up at OA’s doorstep, and what you are like now.
3. Ask if the person wants to know more.

[Note to Zoom host] *Please paste the following examples into the chat.*

Here’s one example of an elevator speech: *For many years, I struggled with my eating. I tried every kind of diet and exercise. Sometimes I succeeded, for a while, but I always went back to*

my old ways. I was miserable until I found Overeaters Anonymous, which is like AA but for people who struggle with food and body image. OA has helped me find balance with my eating and my life. If you're interested, I'd love to tell you more.

Here's another example: Overeaters Anonymous has given me a precious gift — freedom from food obsession. This old dog can learn new ways to live life and enjoy it without using food to stuff my feelings. I learned that in the OA meeting rooms.”

At this time, we'll break into groups for 15 minutes to give you a chance to develop your own elevator speech. All of have our stories. What you share might be very different based on what form your disease takes. And you might end up with shorter AND longer versions

For today, in your groups, spend a few minutes writing, or, at least, jot down a few bullet points. Then you'll have a chance to say your words out loud as though you are talking to someone who might not know about OA.

After fifteen minutes, we'll come back together to share what we have created.

[Note to Zoom host] *Depending on number of participants, break them into rooms with a moderator in each one. Max five participants + one moderator.*

[Breakout groups] **15 min**

[Note to moderators] *Provide a few instructions to participants:*

1. First, take a moment to reflect about your experience – what you were like, how you ended up at OA's doorstep, and what you are like now. Think about how you might say this very briefly. And then, start drafting. Just write, don't edit yourself now.
2. Remember these suggestions for a pattern:
 - Explain what OA is.
 - Briefly describe your experience.
 - Ask if the person wants to know more.
3. **[When time's up]** Will anyone volunteer to read your draft? It's fine if it's rough.
4. Thank you, that was great. Did _____'s draft make any of you think about something you could add to your own speech?
5. Anyone else?
6. We're going to be pulled back together in a moment. You've made a start here. I suggest that that you practice again later, adjusting your words until they are what you want your speech to be.

[Note to Zoom host] *Check in at 13-14 minutes. If people need more time, give five more minutes.*

[Mary, cont.]

Hello, again, everyone. Time to get back together. I hope that you all found that interesting. We have some time to share our messages. Volunteers?

[Large-group sharing of elevator speeches] 5–10 min

[Mary, cont.]

Thank you all for your shares. Now Carrie will move us into our closing.

[Carrie—Workshop closing]..... 6 min

In closing, I want to thank OA Region One’s Public Information and Professional Outreach Committee for allowing us to use and adapt this workshop. The committee originally created it for a workshop in June of 2021.

If you want to refer back to this workshop, get document links, or adapt it for your own use, the script is available on the South Sound Intergroup site. A link is available in the chat screen.

[Note to Zoom host] *Please paste the link into Chat.*

Next, I want to highlight a few of the many resources on Carrying the Message that are available at OA’s main website, oa.org, either as pamphlets to purchase or downloads.

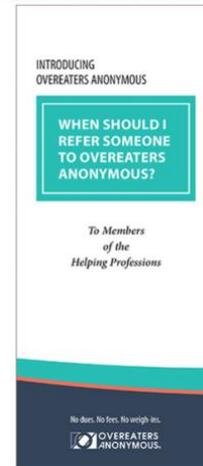
[Note to Zoom host] *Please share image of each product as Carrie mentions it.*

[Carrie continues]

<p>The first is a pad of 25 Bulletin Board Attraction Sticky Notes. These cost \$3.00, plus OA’s minimum \$5.00 postage.</p>	 <p>The image shows a small rectangular card with a red circle and slash over the text: "Overeaters Under-Balanced Food Addiction Compulsive Overeating Weight Fluctuating Bulimia". To the right, it says "Is Food A Problem For You?" and "Contact Overeaters Anonymous. You are not alone anymore." Below that is the OA logo and website "www.oa.org". At the bottom, it lists "NO dues • NO fees • NO weigh-ins • NO diets".</p>
<p>The second is a pack of 30 New Prospect cards. They are business-card size and have room to write in local OA information. As Mary shared, she carried one of these to her doctor recently and the response was positive. The pack costs \$2.50 from oa.org along with the \$5.00 postage.</p>	 <p>The image shows a business-card sized card. On the left is the OA logo. To the right, it says "OA. It Works!" in a large, blue, serif font. Below that, in smaller text, it says "Overeaters Anonymous World Service Office PO Box 44727, Rio Rancho, NM 87174-4727 USA", "Phone: 1-505-891-2664", "Email: info@oa.org", and "www.oa.org".</p>

Finally, OA has a pamphlet called [*When should I refer someone to Overeaters Anonymous?*](#) for anyone in a helping profession. This could be church workers, teachers, mentors, or anyone who might think a person needs help with their eating habits.

I recently took this pamphlet to my dental hygienist and talked about the fact that a high percentage of bulimics have brittle teeth. She was glad for the information and said she'd pass it along to the dentist.



No matter how long we’ve been in OA—days, weeks, or years—we can extend a helpful hand to someone in need. Opportunities to carry the message happen all the time, and they are easier to act on if we are prepared and comfortable with what we want to say.

Thank you for attending our workshop today, and we hope you have enjoyed it as much as we have enjoyed leading it. Those of us involved in this workshop hope that you go away feeling more enthusiastic and confident about carrying the OA message to those who still suffer from compulsive eating. What is at stake is no less than the OA fellowship which many of us, including me, credit with saving our lives.

Please keep in mind that the opinions expressed here today are those of individual OA members and do not represent OA as a whole. Take what you like and leave the rest.

We will close with the Responsibility pledge. Please unmute yourselves if you like and we can join all of our voices together: “Always to extend the hand and heart of OA to all who share my compulsion, for this I am responsible.”