

Food Plan Survey

In planning for our Plan of Eating Workshop, the 12th Step Within Committee of the Edison Sunday Eve. Meeting of Overeaters Anonymous thought it would be good to take a look at what people who were successful at being abstinent were doing and those who are currently not, to see if there were any commonalities.

The first thing we had to do was to determine a definition for “successful” in OA. We wanted it to be as inclusive as possible and yet still meaningful. We wanted to be able to distinguish between being abstinent and being on a diet. We want to know what others are eating.

Our food plan survey questions were based upon our OA literature which defines abstinence and recovery and describes a food plan as a tool, although as varied as our members, most OA’ers agree it is necessary to have one.

In OA, abstinence is the action of refraining from compulsive eating and compulsive food behaviors. Spiritual, emotional and physical recovery is the result of living the Overeaters Anonymous Twelve-Step program.

The OA tools of recovery help us work the Steps and refrain from compulsive eating. A food plan is one of the 9 tools of recovery.

Most OA members agree that some plan--no matter how flexible or structured—is necessary.

Excerpts from suggested meeting format document and the tool A Plan of Eating

Next we developed a survey and our committee members and several volunteers interviewed OA members via e-mail, through the Central Jersey website (www.oa-centraljersey.org) the telephone, at meetings, and at OA events over a 3 month time period.

Food Plan Survey

Results will be available Sun. Jan. 9th 7-9pm at our Food Plan Workshop in Edison

1. How would you identify yourself? (Can pick more than one)

- a. Anorexic
- b. Bulimic
- c. Compulsive overeater
- d. Food addict
- e. Powerless over food
- f. Compulsive exerciser
- g. Other

2. Length of time in program?

3. Are you currently abstinent?

If so, how long.

4. If not, what is your past history with abstinence?

5. Steps completed?

6. What Step are you currently working?

7. Have you experienced a weight change and/or freedom from the obsession?

8. Have you identified certain binge or trigger foods that you abstain from?

- a. Yes
- b. No

9. Are there any specific eating behaviors you are refraining from? (eating in front of the TV or while driving, standing up, eating alone, hoarding food, devouring food quickly)

10. What foods, if any, do you abstain from? (Can pick any that applied)

- a. Sugar
- b. Other sweeteners, i.e. honey, stevia, truvia
- c. Artificial sweeteners
- d. White flour
- e. Wheat
- f. Other flours
 - Any exceptions?
 - Do you use whole grain pastas/wraps?
 - Do you provide your own starch at social functions, restaurants?
- g. Nuts
- h. Peanut butter and other nut butters
- i. Dairy/eggs
- j. Alcohol
- k. Ice Cream
- l. Cheese
- m. Meat
- n. Puffed products, i.e. rice cakes and cereals, popcorn
- o. Fried foods, do you eat french fries or french fried onion rings?
- p. Salty snacks
- q. Crunchy snacks, i.e. pretzels of any type
- r. Diet Soda
- s. Coffee
- t. Flavored coffees
- u. High fat foods, i.e. Mayonnaise, butter, cream, half & half, cream cheese
- v. Pizza
- w. Do you limit any foods, i.e. potatoes, certain fruits?
- x. Diet foods, look alike
- y. Juice
- z. Specific condiments
- Other

11. Where did you get your food plan? (Could pick all that applied)

- a. I don't have a food plan
- b. My sponsor
- c. Another OA member
- d. Dignity of Choice
- e. Grey Sheet
- f. ACORN
- g. My physician
- h. My nutritionist/dietician
- i. Commercial weight loss program
- j. I made it up myself
- k. A rehab
- l. I found it on line
- m. Other

12. Do you weigh and measure your food? (check any that apply)

- a. All the time
- b. Only at home
- c. Only certain foods
- d. Sometimes
- e. Rarely
- f. Never
- g. Other

13. Do you weigh yourself? If so, how often? Do you report your weight to your sponsor?

14. How often do you eat?

- a. 3 meals a day with nothing in between
- b. 4 meals a day with nothing in between
- c. 5 meals a day with nothing in between
- d. 6 meals a day with nothing in between
- e. 3 meals a day with a metabolic adjustment in the afternoon or evening
- f. 3 meals a day with a snack in between if needed
- g. Whenever I am hungry
- h. Other

15. Do you record and/or commit your food? (Could pick all that apply)

- a. I don't plan out my food
- b. I plan out everything I will eat for the day
- c. I plan and commit my food plan to someone each day
- d. I commit my food plan to someone only when I feel I need that extra bit of accountability
- e. I record everything I eat
- f. Other

16. If you commit your food, are you 100% honest?

Do you call in or report changes you've made?

17. Who and what determines if you've had an abstinent food day?

- a. Me
- b. My sponsor
- c. Other

18. How do you know when your meal is done? (Could pick all that apply)

- a. My moderate plate of food is empty
- b. My weighed and measured plate of food is empty
- c. I am no longer hungry
- d. I start to feel to full
- e. Other

19. What do you consider a slip?

20. What would you consider a break in your abstinence?

- a. Eating something that wasn't on my food plan
- b. Eating more food than I am allotted for a meal
- c. Not eating all of the food allotted for a meal
- d. Eating in between planned meals
- e. Restricting food
- f. Purging
- g. Indulging in a food binge
- h. Not calling a sponsor to change a food previously committed.
- i. Other

21. How many face-to-face meetings do you average each week?

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4

How many telephone/on line meetings do you average each week?

22. What advice in regards to food plans do you have for newcomers?

Send your survey results to M39Avenel@comcast.net or call to complete the survey on the telephone 732-326-1934. Thank you