

Journey To



LIFE

"You have shown me the path of life."
Psalms 16:11

ADVENTIST
recovery
MINISTRIES
NORTH AMERICAN DIVISION

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Editorial Perspective

Home for the Holidays

The holiday months of November and December usually are filled with meals and parties. The foods and beverages high in sugar, fat and salt content which fill many tables with an over-abundance of food, contribute to the food addict's challenge to lose or maintain a healthy weight.

Memories of warm kitchens, hot ovens, an abundance of food, family, friends and guests gathered to enjoy their time together may flood the mind during this season. I hope you are having many of these pleasant thoughts of "home" as this year comes to an end.

However, for many, their memories are of loss, loneliness, frustration, stress, anger and bitterness. These memories and associated flashbacks may cloud the thoughts and lead to "self-medicating" with excess food (particularly of the high calorie – low nutrition variety).

While overeating is a problem for multiplied millions who use food and beverages to escape negative emotions or enhance positive feelings, quite the opposite is true of many adolescent and young women

as well as young men who suffer from eating disorders such as Anorexia Nervosa and Bulimia Nervosa (see the feature article in this issue of the *Journey to Life*).

With this in mind, may I suggest that you be aware of your memories (whether "bad" or "good") that lead to obsessive thinking, compulsive and addictive behaviors. With that awareness, I encourage you to find recovery help and/or continue recovery from the addictive, harmful habits that keep you "hooked."

Whatever your situation, joys, sorrows and challenges might be – whether you celebrate with others or isolate and attempt through "comfort" food to forget some past memories, I hope you won't forget that the "Reason for the Season is Jesus Christ" and His intention is for you to experience love, joy and peace.

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ARMin Mission and Vision

Our Mission:

Promote healing and freedom from harmful practices by providing resources and training to facilitate recovery.

Our Vision:

Healthy people growing in a relationship with Christ by using principles of God's Word and choosing healthful practices aimed at finding freedom from harmful habits and addictive behaviors.

Potential Objectives/Goals:

- Promote healing (individually and corporately) utilizing the healthy, balanced principles of God's Word
- Provide resources to churches and individuals in order to raise awareness and educate regarding the root of dysfunctions that create disunity within individuals, families, churches and communities through unresolved trials, troubles and tragedies
- Train individuals to facilitate ongoing support groups and mentoring in a safe, nurturing environment

We believe that as we heal from life's trials, troubles and tragedies, we become inspired and committed to reach out to others as a result of gratitude for our personal healing; to care for others because our lives are so enriched by Christ's forgiveness; and the blessing of the freedom we have experienced due to His unending grace and mercy.

The Healing Value of the 12 STEPS

Step 5—

“Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.”

Biblical Comparison

“Confess your faults one to another, and pray for one another that you may be healed.”

—James 5:16

Upcoming Events

Great American Smokeout - November 20, 2014

American Cancer Society
(800) ACS-2345 (227-2345)

<http://www.cancer.org> - Materials available

ARMin training Schedule: SAVE THE DATE

- Southern Union (SUC), Atlanta, GA
(February 6-8, 2015)
- Pacific Union (PUC), Glendale, CA
(February 27-28, 2015)
- Atlantic Union (AUC), New York, NY
(June 19-20, 2015)
- Trans-European Division (TED), Newbold, UK
(July 31-Aug 2, 2015)
- Southwestern Union (SWUC), Dallas, TX
(October 2-3, 2015)

For more information about the above trainings go to www.adventistrecovery.org or call 301-680-6733.

Summer Institute of Recovery Studies
(July 20-24, 2015)

Sponsored by the National Association of Christian Recovery (NACR)
Fuller Theological Seminary, Pasadena, California

For more information and to register: <http://www.nacr.org/5224-2>



12 STEPS to Recovery STEP #5

Some might look at Step Five and wonder if it is necessary. Couldn't we just take what we learned about ourselves through Step Four's moral inventory, and then jump right to Step Six or Seven where we're willing to then ask God to remove our shortcomings? For me, Step Five has a special healing: an honesty-building role in maintaining sobriety. It is a freeing foundation of the proven 12-step methodology.

Perhaps some of you can relate to one of my quick childhood prayers: “Jesus please forgive me for all my sins ... Amen.” That quip of a prayer shows no reflection of my day's behavior, those who may have been impacted, let alone what was at the core of my “sin” – was it selfishness, pride, jealousy, etc.? In contrast, the prayers said from a Step Five perspective are richer, deeply healing, and relationship-building with our Heavenly Father.

So why tell such personal secrets and character flaws we discovered in Step Four to another human being? There is power in sharing aloud our shortcomings and their origins with the right confidential true listener. Our shame begins to dissipate and we begin to find relief from our inner loneliness and isolation. James 5:16 describes the importance of preparing for and then having rich, relationship-deepening prayers – “Confess your trespasses to one another, and pray for one another, that you may be healed. The effective, fervent prayer of the righteous avails much.”

It is worth noting that in Step Five we are not yet asking either for forgiveness or solace...that will come. We are simply exorcising long-held secrets and ugliness. Of course God is fully aware of our every flaw right down to our “hidden” thoughts, yet Step Five affords us the opportunity to share with Him and another human

being what we are now willing to admit and learn about our addiction and the suffocating, painful hold it has had on our life's journey.

“He who covers his sins will not prosper, but whoever confesses and forsakes them will have mercy.” (Proverbs 28:13). It is God's love and mercy we want to claim and experience – one day at a time.

Angela K

Testimony

After studying for pastoral ministry, I began a year of residency, as a hospital chaplain, at a health care facility in North America. During this year of ministry, I began to experience intense chest pains that led me to the Emergency department on several occasions. I initially thought that these pains might be heart-related issues; but as the doctor's results proved un-alarming and the pains continued to happen regularly, I soon recognized, through helpful support, that I was dealing with an unrealistic compulsion of mine to be perfect.

This obsession largely affected my personhood and my pastoral ministry. My body had finally come to a point where it could no longer take these unrealistic goals of mine, causing the anxiety and panic attacks I had. After these distinct occurrences, I came to the end of myself and recognized that it was impossible to be perfect, whatever that meant. I was powerless to be perfect but Jesus' perfection was enough to guarantee me a reconciled relationship with God. Recognizing this, a burden lifted over my shoulders as I experienced grace at a deeper dimension. I then trusted Jesus to be what I could never be before God. Though I may stumble in the future in my walk with Him I know that my salvation remains secure because Jesus has thankfully lived the life I could never live. Praise Him!

Kevin Lake



Eating Disorders: Facts and Treatment Options

According to the National Association of Anorexia and Associated Disorders (ANAD), an eating disorder is defined as an unhealthy relationship or preoccupation with food or weight that interferes with several facets of an individual's life. Although eating disorders may begin as a result of body dissatisfaction or low self-esteem, individuals who suffer from eating disorders often use behaviors involving food as a means to cope with uncomfortable emotions, or to provide a sense of control when life circumstances become overwhelming.

The most commonly diagnosed eating disorders are Anorexia Nervosa and Bulimia Nervosa. The primary characteristics of Anorexia include fear of weight gain and an inability to maintain a healthy body weight. Some who suffer from Anorexia achieve weight loss through food restriction, but others may frequently binge and purge while sustaining a below average body weight. Individuals who suffer from Bulimia Nervosa also battle binge-purge behaviors and often report a fear of gaining weight, but may preserve an average body weight despite engaging in eating disorder behaviors. Although the term purge is often used in reference to self-induced vomiting, the act of purging as it relates to eating disorders is considered to be any behavior used as a compensatory strategy for food intake. Individuals who suffer from an eating disorder may utilize laxatives, diuretics, excessive exercise, and diet supplements to control hunger or void food consumption to achieve weight loss (American Psychiatric Association 2000).

Research suggests that an estimated 15% of adolescent and young adult females qualify for a clinical or sub-clinical diagnosis of anorexia nervosa. Further research has established that approximately one-third of individuals who receive eating disorder treatment will continue exhibiting symptoms of an eating disorder up to five years post-intervention (Polivy & Herman, 2002). Perhaps most alarming is the fact that 10% of individuals diagnosed with anorexia nervosa will die within 10 years from the onset of the disorder (Arcelus,

Mitchell, Wales, & Nielsen, 2011). Among the list of potentially fatal health hazards associated specifically with Anorexia are increased risk of heart disease/failure, osteoporosis, muscle loss, dehydration, and kidney or liver damage. Similarly, Bulimia is associated with electrolyte imbalance, dehydration, and tooth decay, inflammation of the esophagus /possible ruptured esophagus, and a damaged digestive system (National Eating Disorder Association, n.d., McCormick, 2014)

While eating disorders are most commonly linked to women, specifically between the ages of 10 and 25-years-old, studies suggest that as many as 10 million men in the United States will suffer from a clinically significant eating disorder within their lifetime. In addition, 37% of young men may silently use unhealthy weight control measures as a means to cope with difficult feelings and body dissatisfaction (National Eating Disorder Association, n.d.; McCormick, 2014).

Needless to say, these findings highlight the severity of eating disorders and overall body dissatisfaction. In fact, anorexia nervosa continues to be the most lethal of all mental health conditions. Therefore, heightened awareness of the signs and symptoms associated with disordered eating is imperative for increasing early eating disorder intervention and diminishing the overall prevalence of this deadly illness.

Due to heightened media coverage of thinness and shame associated with weight gain or obesity, a large percentage of Americans are constantly trying to shed pounds. Although it is not uncommon to know someone who is frequently dieting or trying to lose weight, there are several signs that may indicate susceptibility to the development of an eating disorder, specifically in young females. Some such warnings may include remarkably low self-esteem, preoccupation with food/weight, changes in eating habits/atypical eating rituals (i.e. taking exceptionally small bites), spending an increased amount of time in front of mirrors, social isolation or avoidance, rapid weight loss, excessive exercise, and frequent bathroom visits following meals. It is also

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Resources

Journey to Wholeness:



A series that can be used in support groups or small groups as a resource to facilitate recovery

of breaking away from harmful practices and strengthening an intimate relationship with God in the Journey to an abundant life. Facilitator guides and participant guides can be purchased in our online store at www.AdventistRecovery.org

Journey to Life Newsletter:



This bi-monthly newsletter is available in English, Spanish, and soon in French as well. Print a free

pdf copy, download, or register to subscribe and receive it via email at www.AdventistRecovery.org

Choose Full Life Resources:



These are posters, calendars/bookmarks, booklets that can be used to share with others 10

Ways to Choose a

Full Life embarking on a Journey to Recovery. For more information and to place an order please go to www.NADHealthMinistries.org and check out the online store. The Choose Full Life theme song is also available for download.

Unhooked:



This is a 28 part series produced by ARMin and Hope Channel,

highlighting different type of addictive behaviors, real stories, and experts comments on effective treatment. The ultimate goal is to bring hope for recovery in Christ. You can watch the series weekly Hope Channel or direct TV channel 368. The complete DVD with all episodes will be available for purchase in October. For previous episodes and more information go to: www.hopetv.org/unhooked or www.adventistrecovery.org

NEWS

Southern Union

Orange Cove SDA Church, Fleming Island, FL



Pastor André Van Heerden and his wife, Juliet

In October, 2013, Pastor André Van Heerden and his wife, Juliet, proposed to the Church Board that they begin a 12 Step Sabbath School Class in order to meet the various recovery needs of their eclectic congregation. The group used the Journey To Wholeness materials over the course of one year, and are beginning again with a new set

of participants. Below is the testimony of one group member: "This has been the most amazing and soul-searching journey I have been on. I view my faith in Christ differently. Before, I was afraid to fully trust God with every aspect of my time and life. Not anymore. I am not saying it's easy taking responsibility and holding yourself accountable for your past. Learning to really let it go and let God work it out is a daily process. The rewards of this program are a deeper connection with Christ and learning to accept the freedom that He offers." Currently, Pr Van Heerden is doing a Sabbath sermon series on the 12-step recovery in Christ.

North Pacific Union (NPUC)

On October 3-5 the NPUC, NAD ARMin and Adventist Health co-sponsored an ARMin training in Portland, Oregon. Nearly 100 people attended the training held at the Portland Adventist Medical Center, representing Alaska, Washington, Portland, and Upper Columbia Conferences. NPUC ARMin Director, John Loo, was delighted to see more than 10 pastors attending and many other committed to initiate ARMin 12 step groups in churches and communities.



Participants attending the NPUC conference

Lake Union

Andrews University

The Journey to Wholeness Christ-centered 12-Step Group meet on Fridays, 10:00 – 11:00 a.m. in the Seminary Building, Room N-108 and Sabbath (Saturdays) 10:15 – 11:15 a.m. in Nethery Hall, Room 134. All are welcome.

SEND US YOUR NEWS

Recovery related news, pictures (protect anonymity of individuals in meetings) and upcoming recovery and awareness events can be sent for future newsletters. Please send these to Ray Nelson, Journey to Life Editor – adventistrecovery@gmail.com and/or Katia Reinert, Adventist Recovery Ministries Director – recovery@nad.adventist.org.

Featured Article *continued from page 3*

important to note that lack of proper nutrition may lead to difficulty with sustained attention and concentration. A combination of any of the above listed changes in behavior or appearance and significantly increased irritability or mood swings is cause for further investigation (National Eating Disorder Association, n.d.; McCormick, 2014).

If you or someone you know is struggling with disordered eating, there are options for help. First and foremost, it is important to receive a thorough evaluation by a medical professional to rule out any life threatening medical conditions that may have been triggered by poor nutrition. Next, it is important to develop a comprehensive treatment team with the ability to treat both the physical and emotional aspects of disordered eating. Registered dietitians, psychotherapists, and psychiatrists are all integral parts of eating disorder treatment.

Perhaps you are one who does not particularly struggle with disordered eating, but often find yourself consumed with poor body image (as so many do). Here are a few tips for increasing self-esteem and decreasing focus on appearance:

1. Identify your inner strengths and values. Are you a loyal friend, caring, or intelligent?
2. Make note of the internal assets of others. Rather than complimenting outfits or smiles, practice praising character.
3. Practice accepting your natural shape and size without judgment. What would your body look like if you weren't dieting? Can you accept that size even if it's not your current ideal?
4. Remember that physical appearance is only one, small part of who we are. There are many other aspects of ourselves that we can be confident about! Take a minute to think about what yours might be and choose to focus on those specific attributes when you are feeling particularly consumed with poor body image.

Arceus, J., Mitchell, A. J., Wales, J., & Nielsen, S. (2011). Mortality rates in patients with Anorexia Nervosa and other eating disorders. *Archives of General Psychiatry*, 68(7), 724-731.

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Aimee Foster, PsyD is Treatment Coordinator - Adult PHP at Loma Linda Behavioral Medicine Center, Loma Linda, California

Director's Message

The Question of Spiritualism

Ever since we launched ARMin and the Journey to Wholeness resource we have come in contact with a few people who are concerned with possible "hidden spiritualism" in the 12 steps programs. They might have read that one of the founders of 12 steps might have been involved in spiritualistic activities in his private life and that, although not explicitly seen anywhere in the 12-step program, perhaps some influence would creep in.

We certainly would not want any spiritualistic influence among our health or recovery materials, and should be very careful to analyze the written content on anything we use to avoid that. We want to assure all involved that we have done this here.

Adventists for along time have embraced health principles taught by others with different perspectives than ours, as long as the specific teachings are in line with Scripture and inspiration. Many times we may not subscribe to someone else's values or beliefs in every issue. But does not mean we reject ALL they write or teach, as some may be sound.

EG White herself learned a lot from physicians of her time who were not Christian, or who had other questionable philosophies, but she was able to sort it through and keep what was sound. In her writings she says that often times the light of knowledge shines through those who do not know God, and we should be able to embrace what is truth and good and discard what is not. So it is in this case.

The 12 traditions and 12 steps have wonderful principles that are in line with Christian principles and the journey of sanctification in our lives. This is what we have used to develop ARMin and the Journey to Wholeness materials. All the quotes we use are in line with Scripture and inspiration.

Let's not allow the enemy of God to bring doubt or distraction from our mission to "Reach North America and the world with the distinctive Adventist message of hope and wholeness." ARMin is here to help accomplish that, bringing Christ to the center as the agent for recovery and wholeness in our lives.



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