CPA Guidelines for Speaking to Non-CPA Audiences

Members may find opportunities to speak about Chronic Pain Anonymous (CPA) to professional organizations, civic gatherings, or family, friends, and acquaintances. This brochure provides suggested guidelines that honor our Traditions regarding what to say and how to say it. Its intention is to ease any concerns about speaking and to assist with your preparations.

Is it okay to speak to non-CPA groups?

Speaking is in alignment with our Traditions and is an excellent way of working Step Twelve, as long as a few simple precautions are observed. Groups and members make their own decisions about speaking to non-CPA groups.

Who is qualified?

Any member who is moved to present is qualified. Speaking to non-CPA members does not require any specific time in the program or professional speaking experience. There is an inherent responsibility for all members to share CPA information with interested parties. If you need assistance, please reach out to the General Service Virtual Office (GSVO): inquiry@chronicpainanonymous.org

We are not professionals

Our Traditions emphasize the importance of understanding our role in the community. We are not medical professionals, legislative experts, activists, or spiritual guides. We are lay people who have found a common solution to the emotional and spiritual debilitation of living with chronic pain and chronic illness.

Depending on the audience, a speaker may be asked specific questions about medical conditions, legislative policies, or spiritual beliefs. We may wish to reiterate that CPA does not focus on or attempt to answer these questions. Although a CPA member may be a professional or have experience in these areas, Tradition Eight reminds each of us to remove our professional hats when speaking on behalf of CPA.

If controversial topics arise, we only share our personal experience as it relates to our CPA Twelve Step journeys. CPA has no opinion on outside issues (Tradition Ten). Be mindful that first impressions matter, please maintain an atmosphere of acceptance and attraction.

Who is my audience?

The specifics of your presentation will depend on the audience. For example, the focus of a medical organization may differ from that of a religious organization. Below are things you may wish to know about your audience. The event host can provide details.

· What is their mission statement? (This is often found on their website.)

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What is the typical format of their meeting/event?
Why are they requesting a CPA speaker?
Is there a specific topic(s) they want included?
What is the desired length of your presentation?

Non-CPA audiences are likely to be interested in what CPA is and does. Most speaking opportunities can benefit from an orderly outline listing specific topics to address. Be sure to consider time limitations.

**Precautions when telling your story to non-CPA members**

Remember to let the audience know you are speaking on behalf of yourself and from your own experience, strength, and hope. You are not present as a representative of CPA, nor are you speaking on behalf of CPA. No one can do that.

If there is publicity for the speaking engagement, make sure it does not affiliate CPA with any outside organization or institution. You are a guest and are not endorsing or taking any position on any outside issue. Please remember to honor your anonymity by requesting that your face and full name not be included in any way.

If a member or meeting has any concerns about the speaking engagement, reach out to another service body, such as the GSVO or the CPA Service Board, to discuss the opportunity and whether it makes sense to accept the invitation (Tradition Four).

**What to avoid**

Avoid boasting. Despite the benefits we have found in CPA, we are not greater than or less than anyone else.

Avoid disparaging other groups, either by name or insinuation. Though they may not have benefited you personally, they may have benefited some people. Our primary purpose is to help the person suffering with chronic pain and/or chronic illness. Passing our own judgments of an alternative program that may help even one person is contrary to this purpose.

Avoid controversial topics that fall in the realm of religion, politics, or legislative policies. Although questions may lead us in this direction, remember that we are speaking solely as individuals in CPA. Our lives and beliefs outside of CPA are a different topic for a different time.

Avoid speaking about or referring to any topic that is outside the purview of CPA, including specific doctors, medications, treatments, institutions, economic issues, employer-employee relations, etc. Your own story may touch on these topics, but your focus should be limited solely to CPA subject matters. For example, we may say we used the Twelve Steps to address our perceptions and actions as they related to our relationship to work—such as gaining the self-acceptance and courage to request certain accommodations. But we would avoid making workplace recommendations (e.g., stating that all businesses should have these accommodations).

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**What supplies to bring**

Sometimes when we speak, people ask specific questions about our literature. The following items may be helpful to have on display. Having additional copies to pass out is also helpful but not mandatory. We do not make literature available for purchase; simply direct people to the CPA website. (For more information regarding display options, please refer to the CPA Public Information Workbook.)

- CPA Fact Sheet

- CPA Rack Card: Chronic Pain Anonymous in Brief

- Brochures:
  - CPA for the Healthcare Professional (if applicable)
  - What is CPA?
  - One Day At A Time Explained

- Books:
  - *Recipe for Recovery*
  - *Stories of Hope*
  - *Our Common Welfare*

- Personalized CPA business cards

- One Day at a Time and One Night at a Time bookmarks as giveaways (optional)

**Below is a suggested outline:**

1. Introduce and identify yourself as a member of CPA (first name only is recommended).

2. Specify that you will be speaking based on your personal experience, not as a representative of CPA.

3. “We can request personal anonymity or ask that a pseudonym be used when interacting with outside organizations. We are responsible for informing them about the need for our anonymity. If there is any media involvement, our personal anonymity, as well as that of other members, needs to be protected.” (*Our Common Welfare*, p. 212)

4. CPA overview (including what CPA is and is not)
Useful materials may include:

- CPA Fact Sheet
- The CPA Preamble
- What is Chronic Pain Anonymous? (brochure)
- Chronic Pain Anonymous in Brief (rack card)
- For the Professional (brochure)
- Chronic Pain Anonymous Membership Survey

5. Personal story of hope

Suggested points to guide your sharing:

- What your life was like before CPA or what brought you to CPA (best done briefly)
- Patterns of behaviors and obsessions
- Impact on work, relationships, and other key aspects of life
- How CPA and the Twelve Steps helped you
- What your life is like today

6. How the audience and CPA can work together - update Workbook

- Literature, meetings, and information on starting a meeting can be found on our website: www.chronicpainanonymous.org
- CPA is happy to provide speakers and literature for conferences, workshops, meetings, schools, colleges, institutions, and facilities. CPA speakers are available to provide an international, national, or local perspective, depending on the audiences’ needs.
- CPA welcomes professionals to attend “open” meetings to experience CPA for themselves. Questions from non-members are welcomed after the meeting has ended. Attendance at “closed” meetings is limited to those who experience chronic pain and chronic illness.

See the Public Information Workbook for more information.
7. CPA does not:

- convince someone to join CPA (We invite all who wish to try our program, but we do not force anyone to attend meetings or to work the Twelve Steps of CPA.)
- engage in research activities as an organization
- disclose personal/medical information regarding our members
- make medical or psychological diagnoses or prognoses of any kind
- provide medical care or services of any kind
- provide education materials about diagnoses or pain management
- provide housing, food, clothing, jobs, financial support, or any other welfare, social, or religious services
- provide domestic or vocational counseling
- accept contributions from non-CPA members
- provide letters or be a witness regarding any health condition to attorneys, courts, employers, social or governmental agencies

8. How to contact CPA:

www.chronicpainanonymous.org

Chronic Pain Anonymous Service Board

13802 N. Scottsdale Rd.

Suite 151-102

Scottsdale, AZ 85254-3403

Email: inquiry@chronicpainanonymous.org

Possible Questions

It is good to remind the audience that, as a CPA member, our answers to these questions reflect our own personal experience and interpretation and are not necessarily those of CPA. We are simply individual members sharing our experience, strength, and hope. If someone asks a question you cannot answer, it is okay to say "I don't know but I will find out and get back to you." Then request or exchange contact information for a follow-up response.

Reviewing these questions may be helpful before speaking.

Q: What is CPA? How does CPA work?

A: The CPA Preamble provides a good definition.
Q: How did CPA get started?

A: CPA was co-founded in 2004 by an Alcoholics Anonymous (AA) member named Dale L. who underwent surgery that left him with neurological pain, for which there was no cure and few options. Dale L. decided to apply his understanding of the Twelve Steps from AA to his chronic pain. After speaking at an AA meeting about how the Steps addressed not only his alcoholism but his chronic pain as well, he met a person who was also using the Twelve Steps to address his pain. They met for coffee and held the first CPA meeting. From there, they began to hold weekly meetings, developed a website, and received approval from AA to adapt the Twelve Steps and Twelve Traditions to chronic pain. Over the course of several years, CPA found many members’ primary issue was chronic illness, with or without pain, and the Steps and Fellowship were working for them as well. Therefore “illness” was added to our Steps, Traditions, and literature.

Q: What are the Twelve Steps?

A: The Twelve Steps were first published by AA as a program to recover from alcoholism. In CPA, they are used in much the same way. However, members, by definition, cannot “abstain” from chronic pain or chronic illness. We seek freedom from our obsession with our physical conditions. In CPA, the Steps help members learn to live in harmony with chronic pain and chronic illness.

Q: What kind of CPA meetings are available?

A: CPA meetings range in style, venue, and type. There are meetings for topics, literature, Step studies, speakers, and special interests, to name just a few. Members may choose any venue that can support a meeting. This includes face-to-face, phone, chat room, videoconference, virtual world venues, and more. Some meetings are “open,” meaning non-CPA members can attend. “Closed” meetings are reserved for only those identifying as members of CPA. The CPA website clearly indicates which meetings are “closed.”

Q: How is CPA organized?

A: CPA is organized by its members. Each individual meeting has full autonomy over its focus and business affairs. CPA also has a Service Board of Trustees that oversees the organization’s 501(c)(3), website, literature, and global outreach.

Q: What are the Twelve Traditions of CPA?

A: While the Twelve Steps assist us in individual recovery, the Twelve Traditions assist us in member-to-member, group, and organizational relations. “In a world that is always changing, our fellowship needs to be flexible, adaptable, and inclusive as we offer meetings on different technology platforms and across different cultures. The Traditions help us practice cooperation; they create safety, clarity, and unity for everyone, teaching us how to treat each other with kindness and respect, reminding us to ‘place principles before personalities.’” (Our Common Welfare, p. xiii)
Q: How can someone join CPA?

A: Anyone experiencing chronic pain and/or chronic illness may become a member by simply attending CPA meetings. The only requirement for membership is a desire to recover from the emotional and spiritual debilitation of chronic pain and chronic illness.

Q: What does membership cost?

A: There are no dues or fees for membership. It is free.

Q: How is CPA financially supported?

A: CPA is self-supported through the voluntary contributions of our members.

Q: Is CPA affiliated with any other organizations?

A: No. CPA is not affiliated with any organizations. We do, however, cooperate with other organizations through our speaker program. Please contact the GSOV at inquiry@chronicpainanonymous.org for more information on the CPA speaker program and other services.

Q: Is CPA affiliated with Alcoholics Anonymous?

A: No. CPA received permission from AA to adapt the Twelve Steps and Twelve Traditions for use with chronic pain and chronic illness. However, we are not affiliated with, governed by, or a part of Alcoholics Anonymous.

Q: Is CPA a religious society?

A: No. Although CPA is a spiritual program, we have no affiliation with any specific religion. Our members are free to engage, or not engage, in any religious activities outside of CPA.

Q: How does CPA define chronic pain and chronic illness?

A: Each member defines chronic pain and chronic illness for themselves.

Q: Why does CPA not concern itself with specific conditions or treatments?

A: Conditions can vary widely as can their treatments. Despite this, most of us find similarities in the emotional and spiritual impacts of living with chronic pain and chronic illness. We focus on these impacts rather than on the specifics of our diagnoses.

Q: What are some signs a person may be emotionally or spiritually debilitated by their chronic pain and/or chronic illness?

A: It is best for the individual to come to this awareness themselves. Our members provide the following emotional and spiritual symptoms based on their own experience:

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· feeling obsessed with our pain, illness, and/or treatments
· working incessantly to “fix” or “cure” our health conditions despite prognoses
· believing we are responsible for our health conditions
· feeling there must be a better way to deal with our pain or illnesses
· feeling guilt/shame about our health conditions
· believing doctors are not doing enough, don’t know enough, or don’t care
· feeling overwhelmed and no longer in control of our lives
· feeling frustrated, anxious, angry, resentful, depressed, and/or suicidal
· losing the ability to engage with or listen to others
· feeling people don’t or won’t understand our medical conditions, situations, and limitations
· feeling a need to withdraw from family and friends
· choosing to isolate even when our health conditions would allow social interaction
· lying and making excuses for behaviors that deny, minimize, or exaggerate our health conditions
· becoming short-tempered, irritable, and disagreeable sometimes without knowing it
· fear of losing the ability to care for ourselves physically, emotionally, and financially
· experiencing a decreased desire to engage in personal care
· feeling that asking for help is a sign of weakness or that we are “less than”
· feeling as if we have lost everything we ever cared about
· fearing that we have lost purpose in life; feeling that life has no meaning
· feeling as long as the pain or illness exists, we can never be happy and life is over

Q: What can a person without chronic pain or chronic illness do to help?
A: It depends on the audience you are addressing. Simply being aware that CPA exists can be helpful. Many resources are available on the CPA website: www.ChronicPainAnonymous.org

· When speaking to another Twelve Step audience, we state that CPA focuses on the obsession with our health conditions. We have found great relief applying the same shared recovery...
program tools and principles. One may mention freedom from the obsession with chronic pain and chronic illness as part of their story.

• Healthcare professionals dealing with patients and their loved ones may include CPA in treatment plans and place CPA brochures in their offices as a resource.

• Groups and individuals outside the healthcare industry may wish to support a family member or friend by ordering CPA literature and attending an "open" meeting with them. Most importantly, they can offer hope and support by listening to these suffering individuals with compassion and understanding.