

About AA

A.A. in the Nineties: Same Aim But Broader Outreach Efforts

Defining the Purpose . . .

The more things change, the more A.A. stays the same. While cooperating ever more fully with our professional friends in reaching out to alcoholics everywhere, with particular concern for minorities and other special groups, A.A. is mindful of the Twelve Traditions that for decades have served its membership well. In the 1990s and beyond, the Fellowship's effectiveness depends on our continuing to do right, both by our friends *and* our Traditions.

In recent years, an ever-growing number of people have been referred to A.A. by treatment centers, court programs and other agencies, resulting in some confusion about what A.A. is and is not. In an effort to clear the air, the trustees' Treatment Facilities Committee mailed many treatment facilities in the U.S. and Canada a letter of clarification. Some excerpts:

"Our primary purpose—A.A.'s primary purpose is to stay sober and help other alcoholics achieve sobriety. Anyone is welcome to attend 'open' A.A. meetings, but the 'closed' meetings and membership in A.A. are for alcoholics only—including alcoholics with drug or other problems. Drug addicts are not eligible for membership unless they fulfill the one requirement as stated in A.A.'s Third Tradition: "The only requirement for membership is a desire to stop drinking."

"A.A. does not wish to be exclusive, but experience indicates that we cannot remain effective if we attempt multiple-purpose activities. Experience also indicates that nonalcoholic persons, including drug addicts, do not get the long-term help or support they need from Alcoholics Anonymous. Other twelve-step programs appropriate to their needs are available.

"Nonaffiliation—'An A.A. group ought never endorse, finance or lend the A.A. name to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.' Experience has given us a simple guiding principle: *We cooperate, but we do not affiliate.*

"We wish to work with treatment facilities programs, administrators and staff, but we do not wish to be merged with them in the minds of administrators, clients, staff or the public. A.A. is available to treatment facilities, but public linking of the A.A. name can give the impression of affiliation. Therefore, an A.A. meeting or group that meets in a treatment facility should not bear the name of the facility. Nor should the facility imply affiliation with Alcoholics Anonymous.

"Anonymity—We ask your help in maintaining our Tradition

of personal anonymity by not identifying members by name or by recognizable photos as 'members of Alcoholics Anonymous.' Potential newcomers to A.A. may avoid any help that might reveal their identity. 'Anonymous' is a word so important that it's 50 percent of our name."

. . . Extending the Reach

Finding more and better ways to reach out to minority-group members has been a priority of A.A.'s General Service Conference and its committees. In tandem with this objective, the trustees' Committee on Cooperation With the Professional Community has sought to connect with minority professionals and, indeed, all professionals who work with minorities.

Reaffirming Advisory Actions of the 1989 General Service



From "Is A.A. for Me?"

Conference, the C.P.C. Committee has further implemented several constructive courses of action: (a) provide A.A. literature through individual and area committee efforts; (b) make this newsletter, *About A.A.*, available to as many professionals as possible; (c) carry the message more effectively through publications and radio/TV programs that focus on minority interests; (d) make area public information committees aware of the need to approach schools with high minority populations; and (e) step up efforts to hold A.A. exhibits and presentations wherever professionals gather.

Some years ago, a letter was sent to A.A. members serving on area C.P.C. and public information committees, asking them to share their experience, feelings and suggestions on how communication with minority members might be improved. Again and again, respondents emphasized the power of the A.A. principles of acceptance, sharing and caring. One respondent, himself a minority-group member, perhaps put it best: "Don't be snowed by the alcoholic who says, 'I'm black . . . or red or young or old or handicapped, and I'm different.' We're all different. Our illness is our likeness. It gives us a common bond."

Serving Special Needs

Countless professionals are familiar with *Alcoholics Anonymous*, or the Big Book, which is A.A.'s basic text. And many are aware of the extensive selection of other A.A. books, pamphlets and audiovisual materials available from the General Service Office. But what appears to be a well-kept *nonsecret* is the storehouse of materials that have been developed additionally for minorities and other special populations.

Pamphlets for minorities include "Do You Think You're Different?" and "A.A. for the Native North American." Most A.A. literature has been translated into other languages such as Chinese, Korean and Vietnamese. The Big Book is presently available in 18 languages: Afrikaans, Arabic, Czech, Dutch, Finnish, Flemish, French, German, Hungarian, Icelandic, Italian, Japanese, Korean, Norwegian, Portuguese, Russian, Spanish and Swedish.

Of special interest to many professionals who work with alcoholics are the pamphlets "A.A. in Treatment Facilities," which shares the experience of administrators and of A.A.s who have carried the message into these facilities; and "A.A. in Correctional Facilities," which offers experience based on the functioning of A.A. groups in prisons. Other pamphlets for professionals include "A.A. as a Resource for the Medical Profession," "A Message to Correctional Facilities Administrators," "The Clergy Ask About Alcoholics Anonymous," "If You Are a Professional . . .," and "Alcoholics Anonymous and Employee Assistance Programs."

For alcoholics with special needs—from the visually and hearing-impaired to Loners, shut-ins and the physically disabled—there is a plethora of materials, including A.A. Guidelines Carrying the Message to the Hearing-Impaired

Alcoholic, and Braille versions of the Big Book and *Twelve Steps and Twelve Traditions*.

Also available are a wide variety of audio cassettes from A.A.W.S. and the Grapevine, including the Big Book and the Twelve and Twelve. Chapter 5 of the Big Book is available on video cassette in American Sign Language. Other videos are "It Sure Beats Sitting in a Cell," "Young People and A.A.," and "Hope: Alcoholics Anonymous," all suitable for institutions or P.I. work.

The Big Book is available in a large-print edition, as is the pamphlet for older alcoholics, "Time to Start Living." "Is A.A. for Me?" is a simplified, easy-to-read pamphlet which asks the basic questions to determine if one is an alcoholic. Soon "The Twelve Steps Illustrated" pamphlet will also be in easy-to-read format.

A comprehensive listing is published in the catalog on "Conference-Approved Literature & Other Service Material." To obtain a catalog free of charge, write: General Service Office, Box 459, Grand Central Station, New York, NY 10163.

Meeting You Where You Are

Each year, A.A. is invited to exhibit at numerous meetings and symposiums attended by U.S.-Canadian professionals who are in daily contact with alcoholics and their special needs. In some instances, the exhibits are handled by the trustees' C.P.C. and P.I. Committees; in others, by local C.P.C./P.I. committees.

Last year, A.A. participated in a number of meetings devoted to the problems of minority populations. These were held by the American Correctional Association, the National Black Alcoholism Council, the American Association of Retired Persons and Feriamundial Hispana, Inc. (Hispanic World's Fair), to name a few. In 1991, A.A. will carry its message to conferences of the International Self-Help Association for Hard of Hearing People, Inc., the Exhibition of the President's Committee on Employment of People with Disabilities, the National Council on Aging, Inc., and Families 2000 Symposium.

The A.A. exhibits never fail to elicit a heartwarming response. Yet, as one area C.P.C. committee chairperson commented, "We have come a long way in connecting with our professional friends, but there still is much to be done and many suffering alcoholics to reach."

What Can A.A. Do for You?

Are you interested in an A.A. exhibit, video presentation or open meeting at one of your professional meetings? Or would you like information about a specific aspect of recovery in the Fellowship? A.A. wants to work with you. We welcome your questions, comments and suggestions—so let us hear from you!