

Alcoholics Anonymous Australia Newsletter for Professionals

AA in Treatment Settings

From 1945 in Australia, A.A. has worked closely with hospitals and treatment settings to help the alcoholic client get and stay sober. In carrying the message of sobriety into treatment settings, A.A. always has done so in the spirit of our Sixth Tradition, which states, "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." Thus, we cooperate but do not affiliate. A.A. is always at the ready to help alcoholics in 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.

Treatment facilities treat clients with a wide range of problems. A.A., on the other hand, is true to its single goal. A.A.'s Tradition Five spells out the aim of A.A.: "Each group has but one primary purpose—to carry its message to the alcoholic who still suffers." Within this context, there is probably no better place for an A.A. member to reach out to alcoholics than in a treatment setting.

"A nice handshake between two parties."

Two types of meetings are held regularly in treatment settings: (1) A regular A.A. group meeting. A significant number of A.A. groups rent space in treatment facilities and function in the same way as outside groups that meet in churches, schools, and other venues. Coming together on the premises of a treatment centre or hospital has the advantage of making the meeting more accessible to clients in the facility. As the long form of A.A.'s Third Tradition clearly states, "Our membership ought to include all who suffer from alcoholism. Hence, we may refuse none who wish to recover. Nor ought A.A. membership ever depend upon money or conformity. Any two or three alcoholics gathered for sobriety may call themselves an A.A. group, provided that, as a group, they have no other affiliation." (2) A treatment facility A.A. meeting. This differs from regular A.A. group meetings in that attendance often is limited to clients in the facility and outside A.A.s on a Treatment Committee who may be asked to chair the meeting and arrange for members to attend as speakers or discussion leaders. In some facilities, members of the staff are present as observers.

Welcoming Newcomers from Treatment Centres

If a hospital or rehab provides long-term treatment, patients may be allowed to go to "outside" meetings, and

so fewer in-house meetings are needed. Outside meetings provide important opportunities for both A.A. members outside and treatment facility patients inside. For the regular A.A. it is an opportunity to do the essential Twelfth Step work of "helping another alcoholic to achieve sobriety." For the resident of the treatment centre, it is a chance to see the A.A. fellowship in action in a community setting to which the client will, after all, eventually return.

One Drunk Talking to Another

Finally, there is the individual contact so important for bridging the gap between treatment and outside A.A. In these situations, temporary A.A. contacts accompany newly discharged alcoholics to their first outside meetings, introducing them to potential sponsors and sharing their personal experience in recovery. Most temporary contact programs, coordinated by treatment, bridging the gap, or (H&I) hospitals and institution committees, use the local A.A. office as a contact point. Almost every AA Office or District maintains lists of A.A. members willing to be temporary contacts.

A.A. temporary contacts may make direct personal contact with treatment clients while they are still at the facility, either via phone or in person. They try to attend at least one meeting together the first day of the client's discharge from treatment. For at least two weeks following, the temporary contacts take the newcomers to a variety of meetings, helping them get accustomed to the program and find which meetings suit them best. Contacts also familiarize newcomers with A.A.'s meeting schedules and literature, which would include Alcoholics Anonymous, the famous Big Book, which, on page 89, contains words at the heart of A.A.'s continued mission:

"Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics. It works when other activities fail."

In other words, one drunk talking to another, which is the way A.A. has worked ever since the program began.

How Can A.A. Help You?

Would you be interested in having an A.A. presentation at one of your professional gatherings? Or would you like information about recovery from alcoholism in A.A.? If so, please contact the C.P.C. desk at the General Service Office, P.O. Box 459, Grand Central Station, New York, NY 10163, or cpc@aa.org. We welcome your questions, comments and requests.

Meet Class A Trustee Narelle Buchanan

What is your current professional role? **Prison Officer at Casuarina Prison, which is a maximum security men's prison in WA.**

How did you first come into contact with AA?

In 2010 I was seconded to the Security Section, which is where I was first introduced to AA. My role was to coordinate the security clearances and orientation of the members as well as the vetting of lists for the weekend meetings and collation of attendance data.

What was your first impression?

I had no previous experience or knowledge of AA and like many others thought that it was just a bunch of alcoholics sitting around swapping stories of getting drunk, but I was wrong.

One day I was supervising a meeting and I listened to what was being said and I realised that there was something to this. I was impressed with this group of people who were willing to give up their Saturday afternoon to visit and share their experience with others, however I felt that our staff had a lack understanding of what AA was all about. I decided that I would try and be more helpful to the members coming in.

From the clients that you saw come in contact with the program, did you notice any changes in them? I saw many prisoners continue to come each weekend and over time I saw

positive changes in their general demeanour and a more positive body language.

Did you have much contact with the actual AA members as well?

I had a lot of contact with the AA members, once they realised that I was willing to help them they came to me with any issues or ideas they had, and I was happy to help.

I then started being invited to AA events external to the prison, which eventually led to me joining the board.

How did you find AA as an organisation to get along with? Everyone has always been very helpful and willing to engage.

What do you see are the benefits of the AA program? AA is easily accessible and affordable for everyone, and it offers a loving and supportive social network for people.

And because it's not part of an inpatient treatment program, often times people will have misunderstandings about what AA is, what it does and what it doesn't do. Do you ever come across any of those?

I often come across misunderstandings about AA and how it is structured as an organisation.

What was one of your misunderstandings about AA that perhaps your perception has changed?

Its not just a bunch of drunks swapping drinking stories.

Now that you've been appointed to the board, what's your motivation for giving your time and energy to AA? My main passion is obviously AA in prisons, but I also enjoy speaking with people about AA and hopefully giving them more of an understanding about what it is and how it works.

How do you anticipate that AA can help your organisation achieve its goals?

One of our main goals in corrections is rehabilitation and reintegration and I think that we should be promoting AA more. I think it is important for the suffering alcoholic to have the opportunity to experience AA while they are in prison. Building that relationship with AA during their sentence can assist with their integration back into society once they are released from Prison. Many of them don't have good role models or positive support from family or friends and AA can give them this. If they have the opportunity while in prison hopefully this will lead to them engaging with AA once they are released.

Have you found any career risk making decisions to having AA in facilities in your jurisdiction? No, I have always found that management have been supportive of me in this role.

Have you found any difficulties engaging with AA given that it's not an hierarchical organisation

I have found AA easy to engage with, everyone has been very supportive with the work in prisons and with my role on the board.

> So, you've engaged with AA in a professional capacity, but in a personal capacity is there any feel good side for you? I feel that I have still got something out of my involvement with AA. The experience has been one of personal growth. I think that it came into my life at a time when I needed it. It's a nice feeling to be able to do something good without having to get something in return.

> Is there anything in particular in your time on the Board of AA that you hope to achieve? I would like to see AA more active within our prisons again. We have the verbal support, but this is not translating into successful meetings, sponsorship ect like we had pre covid.

Some professional believe we are a religious organisation. What's you're experience?

I have not found it to be overly religious, however this is one of the questions that I get asked frequently.

If you were contacted by professionals that might read this newsletter, what advice would you give them in dealing with AA Get in touch with AA, we are always happy to deal with the professional community.

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their time on the General Service Board