

Information on Alcoholics Anonymous

For Anyone New Coming to A.A. For Anyone Referring People to A.A.

This information is both for people who may have a drinking problem and for those in contact with people who have, or are suspected of having, a problem. Most of the information is available in more detail in literature published by A.A. World Services, Inc. This sheet tells what to expect from Alcoholics Anonymous. It describes what A.A. is, what A.A. does, and what A.A. does *not* do.

What Is A.A.?

Alcoholics Anonymous is an international fellowship of men and women who have had a drinking problem. It is nonprofessional, self-supporting, multiracial, apolitical, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to do something about his or her drinking problem.

Singleness of Purpose and Problems Other Than Alcohol

Some professionals refer to alcoholism and drug addiction as “substance abuse” or “chemical dependency.” Nonalcoholics are, therefore, sometimes introduced to A.A. and encouraged to attend A.A. meetings. Nonalcoholics may attend open A.A. meetings as observers, but only those with a *drinking* problem may attend closed A.A. meetings.

What Does A.A. Do?

1. A.A. members share their experience with anyone seeking help with a drinking problem; they give person-to-person service or “sponsorship” to the alcoholic coming to A.A. from any source.
2. The A.A. program, set forth in our Twelve Steps, offers the alcoholic a way to develop a satisfying life without alcohol.
3. This program is discussed at A.A. group meetings.
 - a. Open *speaker* meetings — open to alcoholics and nonalcoholics. (Attendance at an open A.A. meeting is the best way to learn what A.A. is, what it does, and what it does not do.) At speaker meetings, A.A. members “tell their stories.” They describe their experiences with alcohol, how they came to A.A., and how their lives have changed as a result of Alcoholics Anonymous.
 - b. Open *discussion* meetings — one member speaks briefly about his or her drinking experience, and then leads a discussion on A.A. recovery or any drinking-related problem anyone brings up. (*Closed meetings are for A.A.s or anyone who may have a drinking problem.*)
 - c. Closed discussion meetings — conducted just as open discussions are, but for alcoholics or prospective A.A.s only.
 - d. Step meetings (usually closed) — discussion of one of the Twelve Steps.
 - e. A.A. members also take meetings into correctional facilities and treatment settings.
 - f. A.A. members may be asked to conduct the informational meetings about A.A. as a part of A.S.A.P. (Alcohol Safety Action Project) and D.W.I. (Driving While Intoxicated) programs. These meetings *about A.A.* are *not* regular A.A. group meetings.

What A.A. Does Not Do

A.A. does not:

1. Furnish initial motivation for alcoholics to recover.
2. Solicit members.
3. Engage in or sponsor research.
4. Keep attendance records or case histories.
5. Join “councils” of social agencies (although A.A. members, groups and service offices frequently cooperate with them).
6. Follow up or try to control its members.
7. Make medical or psychological diagnoses or prognoses.
8. Provide detox or nursing services, hospitalization, drugs, or any medical or psychiatric treatment.
9. Offer religious services or host/sponsor retreats.
10. Engage in education about alcohol.
11. Provide housing, food, clothing, jobs, money, or any other welfare or social services.
12. Provide domestic or vocational counseling.
13. Accept any money for its services, or any contributions from non-A.A. sources.
14. Provide letters of reference to parole boards, lawyers, court officials, social agencies, employers, etc.

Members From Court Programs and Treatment Facilities

In recent years, A.A. groups have welcomed many new members from court programs and treatment settings. Some have come to A.A. voluntarily; others, under a degree of pressure. In our pamphlet “How A.A. Members Cooperate,” the following appears:

We cannot discriminate against any prospective A.A. member, even if he or she comes to us under pressure from a court, an employer, or any other agency.

Although the strength of our program lies in the voluntary nature of membership in A.A., many of us first attended meetings because we were forced to, either by someone else or by inner discomfort. But continual exposure to A.A. educated us to the true nature of the illness... Who made the referral to A.A. is not what A.A. is interested in. It is the problem drinker who is our concern... We cannot predict who will recover, nor have we the authority to decide how recovery should be sought by any other alcoholic.

Proof of Attendance at Meetings

Sometimes a referral source asks for proof of attendance at A.A. meetings.

Groups cooperate in different ways. There is no set procedure. The nature and extent of any group’s involvement in this process is entirely up to the individual group.

Some groups, with the consent of the prospective member, have an A.A. member acknowledge attendance on a slip that has been furnished by the referral source. The referred person is responsible for returning the proof of attendance.

This proof of attendance at meetings is *not* part of A.A.’s procedure. Each group is autonomous and has the right to choose whether or not to sign court slips. In some areas the attendees report on themselves, at the request of the referring agency, and thus alleviate breaking A.A. members’ anonymity.

Literature

A.A. Conference-approved literature is available in French and Spanish. For additional copies of this paper, or for a literature catalog please write or call the General Service Office.

The A.A. Grapevine, a monthly international journal — also known as “our meeting in print” — features many interesting stories about recovery from alcoholism written primarily by members of A.A. It is a useful introduction and ongoing link to A.A.’s diverse fellowship and wealth of recovery experience. The Spanish-language magazine La Viña, is published bimonthly.

For Grapevine information or to order a subscription to either the AA Grapevine or La Viña: (212) 870-3404; fax (212) 870-3301; website: www.aagrapevine.org.

Conclusion

The primary purpose of A.A. is to carry its message of recovery to the alcoholic seeking help. Almost every alcoholism treatment tries to help the alcoholic maintain sobriety. Regardless of the road we follow, we all head for the same destination, recovery of the alcoholic person. Together, we can do what none of us could accomplish alone. We can serve as a source of personal experience and be an ongoing support system for recovering alcoholics.

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