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THE NONALCOHOLIC ADDICT

Many treatment centers today combine alcoholism and drug addiction under "substance abuse" or "chemical dependence." Patients (both alcoholic and nonalcoholic) are introduced to A.A. and encouraged to attend A.A. meetings when they leave. As stated earlier, *anyone* may attend *open* A.A. meetings. But only those with a *drinking* problem may attend *closed* meetings or become A.A. *members*. People with problems other than alcoholism are eligible for A.A. membership *only* if they have a drinking problem.

Dr. Vincent Dole, a pioneer in methadone treatment for heroin addicts and for several years a trustee on the General Service Board of A.A., made the following statement: "The source of strength in A.A. is its single-mindedness. The mission of A.A. is to help alcoholics. A.A. limits what it is demanding of itself and its associates, and its success lies in its limited target. To believe that the process that is successful in one line guarantees success for another would be a very serious mistake." Consequently, we welcome the opportunity to share A.A. experience with those who would like to develop self-help programs for the nonalcoholic addict using A.A. methods, but using the *experience* of the nonalcoholic addict during drug addiction and recovery.

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
6. Follow up or try to control its members
7. Make medical or psychological diagnoses or prognoses
8. Provide drying-out or nursing services, hospitalization, drugs, or any medical or psychiatric treatment
9. Offer religious services
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

CONCLUSION

The primary purpose of A.A. is to carry our 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.

RECOMMENDED MATERIAL AVAILABLE FROM A.A. WORLD SERVICES, INC.

Pamphlets:

"A Member's-Eye View of Alcoholics Anonymous"	"Let's Be Friendly With Our Friends"
"How A.A. Members Cooperate With Other Community Efforts to Help Alcoholics"	"Is A.A. For You?"
"If You Are a Professional, A.A. Wants to Work With You"	"A.A. in Treatment Facilities"
"Problems Other Than Alcohol"	"A.A. and Occupational Alcoholism Programs"
"Understanding Anonymity"	"A.A. As a Resource For The Medical Profession"

Guidelines:

For A.A. Members Employed in the Alcoholism Field
Forming Local Committees on Cooperation With the
Professional Community

Public Information

Cooperating With Court, A.S.A.P., and Similar Programs

For copies of this page, or a catalog of our literature write to:

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