

About AA

Three New Class A (Nonalcoholic) Trustees Join A.A. General Service Board

For many, the words Alcoholics Anonymous conjure scenes that begin and end in a smoke-filled church basement where the sounds of chug-a-lugging coffee pots and squeaky folding chairs mingle with the warm laughter of a group of drunks who all managed to land in the same place at the same time. Such a notion is understandable from the outside looking in; and even perhaps from the insider's point of view, because the average A.A. member may never participate in service beyond the level of the group.

The reality of how Alcoholics Anonymous functions is, however, far indeed from the perception many people have. The infrastructure of the Fellowship is based upon innovative, advanced management techniques that might turn the head of many a corporate management analyst. A.A. operates as an inverted equilateral triangle, with the groups at the "top" (which is the base in this case), and the General Service Board at the "bottom" (the apex). A simple and effective system, once understood.

The General Service Board was formally established in 1938. There were five original trustees, three nonalcoholics and two alcoholics. The first board was created to safeguard A.A.'s funds and to insure the prudent use of all contributions. Over the years many distinguished names filled the trustee's roster: Frank Amos, John D. Rockefeller Jr., A. LeRoy Chipman, Jack Alexander, Bernard Smith, Frank Gulden and Dr. Harry Tiebout.

The function of today's 21-member General Service Board is essentially custodial in nature. It has legal and routine responsibility for the operations of the two service corporations through which it works, A.A. World Services, Inc. and The A.A. Grapevine, Inc. Questions of policy, finance, group relations and leadership are the domain of the trustees, who plan, manage, and implement activities relating to these matters. The board is also responsible for A.A.'s public information activities, which include carrying the A.A.

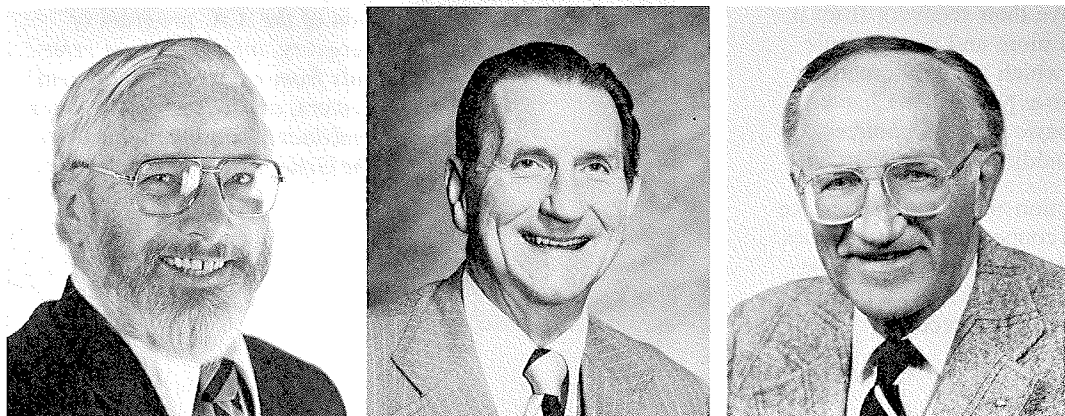
message throughout the world. World service is a substantial business operation and the trustees oversee a multi-million dollar annual cash flow budget.

Six new trustees were elected in 1986; three of these are Class A (nonalcoholic). Each brings with him an impressive record of service and experience in the field of health care, corrections, or social work. They are Dr. John Hartley Smith, Amos Reed and John Eugene King.

Dr. John Hartley Smith is assistant deputy minister at the British Columbia Ministry of Health, Vancouver, and is a consultant to industry in developing public health programs. John was born in County Tyrone, Northern Ireland, and graduated from Queens University, Belfast Medical School. He has pursued a career in public health over the past 30 years, first in Northern Ireland and now in British Columbia. He looks forward to working closely with the trustees' committees on Treatment Facilities and Cooperation With the Professional Community.

Amos Reed has held top administrative posts in the North Carolina, Florida, Oregon and Washington departments of correction. He retired in July 1986 as secretary of the Washington Department of Corrections at Olympia. Amos cites his interest in corrections work and his love for the Northwest as deeply important to him. He is past president of several youth agencies, including the National Association of Training Schools and Juvenile Agencies, and has been honored by the Portland Oregon Commission On Human Rights as well as by the Boy Scouts of America.

John Eugene King was originally an ordained priest. In 1970 he resigned from the active ministry to earn his M.S.W. from Tulane University. He is currently an associate with the Social Work Program of the University of Arkansas. Since 1972 he has been a social work consultant to numerous programs and agencies in Arkansas, and the Cherokee Indian Nation in Oklahoma. John feels that nonalcoholic trustees are "first



Left to right:
John E. King
Amos E. Reed
John Hartley Smith, M.D.

cousins, or closer," of A.A.'s immediate family.

A.A.'s co-founder Bill Wilson wrote in *Alcoholics Anonymous Comes of Age*, "To our world-wide fellowship its devoted Board of Trustees was scarcely known at all. Not one A.A. in a thousand could name even half of them." A gifted statesman who crafted a multitude of memorable adages, Bill here penned perhaps another of his many once-and-future truths. Regardless of whether they are "known" or not, A.A. is proud to welcome Dr. John Hartley Smith, Amos Reed and John Eugene King to the General Service Board of Trustees. May you serve us well. And may we not forget to express our gratitude.

Concerns of A.A.s Cooperating With the Professional Community

Since the earliest days of the Fellowship, Alcoholics Anonymous has made an ongoing and dedicated effort to cooperate with the professional community. The arms of this endeavor are many: two committees, on Public Information and on Cooperation with the Professional Community; service meetings and workshops that help A.A. members learn how they can be the most helpful to professionals; and the distribution of A.A. literature to schools, hospitals, senior citizen centers, doctors' offices, correctional and treatment facilities, churches, employee assistance programs and libraries. Many groups work with medical and nursing schools. In several areas groups receive referrals from the courts for persons who have been arrested for D.W.I. and who are offered, as an alternative "sentence," attendance at A.A. meetings.

In an effort to evaluate A.A.'s role in an overwhelmingly complex society, the 1986 General Service Conference included a workshop entitled "Are We Being Friendly With Our Friends?" Resoundingly, the answer seemed to be "Yes." However, some A.A. members expressed concern over finding a balance between serving the professional community and abiding by our Traditions. Two areas of concern were highlighted. First, is A.A. for people whose only addiction is alcohol, and second, how can the A.A. program remain intact amidst growing numbers of newcomers fresh out of non-A.A.-oriented treatment programs?

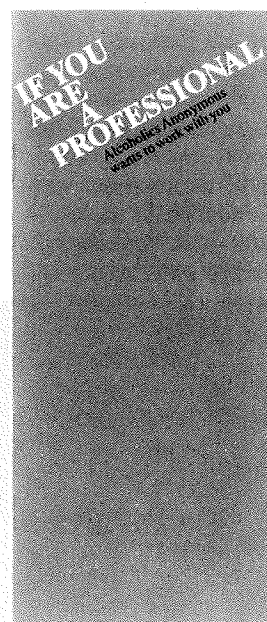
One veteran A.A. member was distressed over meetings that seemed to "be group therapy . . . that smacked of aftercare." He heard seasoned A.A.s suddenly identify themselves as "alcoholic addicts," and wondered if this was the new "in" thing to be, and bemoaned the newcomers' concerns with the disease of alcoholism over and above their recovery from it. Concern was also expressed that as more and more people poured in from treatment facilities which stress alternative recovery programs, the A.A. program as put forth in Chapter Five, "How it Works," of A.A.'s basic text, *Alcoholics Anonymous*, would somehow be muddled or even usurped.

Part of a 1973 clarifying Advisory Action of the General Service Conference recommended that when cooperating with agencies dealing with alcoholism, G.S.O. and the members of A.A. be guided by A.A. Tradition and keep in mind A.A.'s primary purpose: the welfare of alcoholics and their recovery.

A.A.'s posture regarding its singleness of purpose remains clear. We do not diagnose anyone's alcoholism. That is left to the individual. This issue was again addressed by the 1985 Conference, where it was recommended that a statement be inserted in the pamphlets "If You Are A Professional," and "How A.A. Members Cooperate." "The only requirement for membership in A.A. is a desire to stop drinking. If the person is not sure about this point, then he or she is most welcome to attend an open A.A. meeting. If the person is sure that drinking is not his or her problem, then he or she may wish to seek help elsewhere."

Regarding the issue of keeping the A.A. program of recovery intact, there are several built-in safeguards to insure continuity. The membership is composed of alcoholics, and this common denominator reinforces exclusive attention to ongoing recovery. At every A.A. meeting the Preamble is read aloud, clearly stating that "Our primary purpose is to stay sober and help other alcoholics to achieve sobriety." The Big Book, *Alcoholics Anonymous*, presents a well-ordered program of recovery. It is simple and it works. The principle of anonymity assures newcomers of confidentiality, and reminds all recovering alcoholics that ego involvement may prove fatal. And finally, the Traditions stress placing "principles before personalities," in order to fulfill A.A.'s primary purpose.

All the issues outlined above are ongoing and offer us an opportunity to think about and talk over the direction A.A. will take in the future. It is clear that the benefits of A.A.'s efforts to reach the professional still far outweigh the potential causes for concern. Whatever waves are stirred will serve to encourage A.A.s to examine the Fellowship's role within the greater society and to marvel at the effectiveness of the A.A. program. As co-founder Bill W. pointed out in a 1965 article written for the *A.A. Grapevine*: "No alcoholic should go mad or die merely because he did not come straight to A.A. at the beginning."



"If You Are a Professional . . . A.A. Wants to Work With You" is an A.A. Conference-approved pamphlet slanted to the professional. Recently revised, this pamphlet contains an explanation of the A.A. program of recovery, information on referrals from courts and treatment centers, and tells what A.A. does and does not do. Available from the General Service Office, 15¢.