

About AA

Alcoholism Training Program for Doctors Pairs First-Year Residents with A.A. Members

One week a month, a new group of about a dozen primary care resident physicians in New York City takes a course on alcoholism and substance abuse, which includes meeting with A.A. members to hear first-hand about Alcoholics Anonymous.

Called the Physician Alcoholism and Addiction Training Program (PAAT), it takes place over four evenings and pairs A.A. members with the physicians, who are from major teaching hospitals.

The PAAT program evolved from an original 50-hour program, which was the brainchild of its directors Dr. Nicholas Pace and Dr. Ed Rabinowitz. The current 12-hour program was developed over the last five years by Dr. Pace and program faculty.

Experience has shown Dr. Pace that “doctors don’t believe you can do anything about alcoholism,” which, he says, makes PAAT all the more important.

“Those participating are first-year residents, rather than the third-year residents that used to participate. This is preferable. Young doctors are the easiest to train, especially when they see people with long-term recovery from A.A.,” says Dr. Pace, associate professor of medicine at New York University’s School of Medicine and a former chairman of the New York State Governor’s Advisory Committee on Alcoholism.

The program aims to help primary care internal medicine physicians diagnose, treat, and case manage alcoholic and other addicted patients. PAAT operates under the auspices of the Alcoholism Council of New York on a grant from the Smithers Foundation.

“What we hope to put across to the doctors is that people can recover from this treatable disease, that the doctor can make a difference, that they can treat more than the liver or the body, and that they can help the patient spiritually,” says Dr. Pace. “With this program, treating alcoholism can become part of the general medical dialogue.”

Program Head Contacts A.A.

Pace contacted A.A.’s General Service Office in 2003 to ask for help lining up recovering alcoholics for PAAT. G.S.O. put him in touch with a couple of A.A. members, including Dorothy D., who assumed the job of finding A.A. members willing to act as “buddies” to the physicians. The A.A. members tell their recovery stories to the doctors, take them to an A.A. meeting, and answer whatever questions they have.

“The goal of the time together is that the physician will be able to speak at length with an A.A. member and learn what A.A. is and how people find A.A. meetings,” says Dorothy.

Early in the three-year-old program, says Dr. Pace, “we had as buddies people who were fresh to recovery, thinking that these were people who were close to their bottoms and could make the best case for A.A. Then we saw the value in having people with longer-term sobriety. Rather than seeing chronically relapsing patients in their clinics, the doctors are able to see people with long-term sobriety who have put their lives together with the help of A.A.”

The program runs for about four hours an evening for four evenings, and the buddies are there for two of those evenings. On day one, the doctors and A.A. members meet on the premises of the PAAT program and are paired up at random. The doctor and the A.A. member get to know each other over dinner, and then go to an open A.A. meeting [Anyone interested in Alcoholics Anonymous is welcome as an observer at open A.A. meetings, as opposed to closed meetings, which are intended only for those who think they might have a problem with alcohol.]

“The strength of the PAAT program is the A.A. connection, and the A.A. meeting is usually an eye-opener for the residents,” says Dr. Pace.

The second evening together the physicians interview their buddies for a case study the doctors will write up by the end of the week. There is a group meeting of all the physicians and buddies, where the A.A.s share their experience getting and staying sober, and answer physicians’ questions.

The program, which is a part of the training for the residents at a number of teaching hospitals in New York City, including Lenox Hill Hospital, Montefiore, New York University, and New York-Presbyterian Hospital/Columbia-Cornell, adds to their already heavy schedules.

Heavy Schedule Made Heavier

“Feeling overburdened, doctors may at first not be crazy about attending this program,” says Dr. Pace. “As far as they are concerned, they already know about alcoholism and alcoholics – they see them in the emergency rooms as unsolved problems.”

As Bill Ciccaroni, clinical training director for PAAT, notes, “most of our physicians have heard of A.A., but the experience of participating in this program is often compelling.”

Dr. Joseph P. Mele, an attending physician at New York Presbyterian Hospital who participated in the PAAT program, says “alcohol abuse is a significant cause of much of the medical problems I treat in my practice, but my training in this area had been limited almost exclusively to treating alcohol withdrawal in the hospital setting.”

According to Dr. Mele, “the PAAT course was enlightening.”

adding, “the close interactions with recovering alcoholics before and after the A.A. meeting were the highlight of the course for me.” The result, he says, is that he is better prepared for the patient who may be abusing alcohol.

“Patients in denial seem to take notice when I highlight that their liver is showing signs of alcohol abuse. Also, armed with a series of nonjudgmental, matter-of-fact questions about alcohol consumption, I’ve been able to obtain much more accurate alcohol histories,” he says.

“I knew very little about A.A., but now I’ve been encouraging patients to attend A.A. meetings and I make a point of asking my patients in recovery if they are attending meetings.”

According to Zuben O., an A.A. member who has twice participated in the program, “my definite impression is that though the doctors were ignorant of alcoholism and of A.A., they were very interested in learning about the subject.” After the A.A. meeting, especially, the doctors opened up and started asking questions, he says.

Residents Respond to A.A. Meeting

According to Zuben, there were a couple of men at the meeting who obviously had been drinking, and the doctors wanted to know if that was usual. They also were curious about the number of young people they saw, people already in A.A. in their early 20s. The doctor who Zuben accompanied to the meeting also asked about the relationship between A.A. and religion.

“The doctors seem to finish the week convinced they could do more for their patients suffering from alcoholism,” says Zuben.

Dr. Pace says, “it is the intention of the PAAT team to expand the program nationally. It is our hope that local A.A.s in the communities where we establish programs will also offer their services as buddies.

“We want to show that alcoholism is a medical and not a moral issue,” says Dr. Pace. “It’s important these young doctors understand that relapses can be part of the disease. If a person has a second heart attack, does the doctor refuse to treat him?” asks Dr. Pace.

A.A. Elects Judge as Board Trustee

The General Service Board of Alcoholics Anonymous recently elected a Superior Court judge from Santa Barbara, California, to serve as one of its seven Class A (nonalcoholic) trustees.



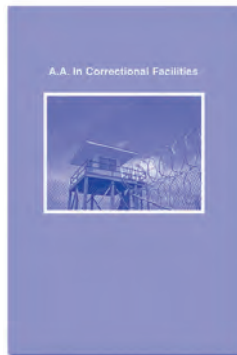
The Honorable Rogelio R. Flores, L.L.D., J.D., is assigned to various specialty courts, including the Substance Abuse Treatment Court in Santa Maria, and is a facilitator for the National Drug Court Institute.

“Some estimate that more than 80 percent of the 2 million prisoners in the United States are either alcoholics or were raised by alcoholic families,” says Judge Flores, who received his law degree from the University of California at Los Angeles.

Rogelio R. Flores, L.L.D., J.D. “Courts throughout the country have relied on a unique collaboration with A.A. to help individuals free themselves from the chains of the fatal disease of alcoholism,” he says.

A.A.’s General Service Board is made up of 14 alcoholic (Class B) trustees and seven nonalcoholic (Class A) trustees. These nonalcoholic trustees bring experience in legal affairs, financial matters, medicine, and social issues. Also, since the nonalcoholic trustees do not need to maintain anonymity, they are able to appear in public on behalf of Alcoholics Anonymous.

Class A trustees usually have had some association professionally with alcoholics. Sometimes there is a personal connection. “Shake any family tree, including mine, and I think you’ll find an alcoholic or two,” says Judge Flores. “The more involved I became with alcoholics and other substance abusers in my work, the more interested and concerned I became.”



A.A. has been a presence in the prison system for decades and is credited with helping inmates get sober and remain sober once they are released. According to many reports, a huge portion of the country’s prison population can trace its trouble with the law to the abuse of alcohol and drugs. To explain to prison authorities how A.A. can be a resource, a video presentation on DVD has been produced by A.A.’s General Service Office. Entitled “A.A. in Correctional Facilities,” it features several professionals in the

corrections field (non-A.A. members) discussing the value of A.A. meetings in correctional facilities and sharing their experience with Alcoholics Anonymous. The DVD is designed for use in training programs for corrections personnel at all levels. It can also be of use to probation officers, lawyers, judges, and others interested in how A.A. can help in the prison system. The DVD is available from A.A. World Services Inc. for \$8 (item # DV-02).

Pamphlets that Answer the Question: ‘Are There Others Like Me in A.A.?’

In addition to the main texts of Alcoholics Anonymous that include the Big Book and *Twelve Steps and Twelve Traditions*, the Fellowship publishes many pamphlets describing A.A. and its program of recovery. Some of these are aimed at specific groups as a way of explaining that A.A. can work for all types of problem drinkers.

Getting sober can be a scary prospect for active alcoholics, who often suffer under the misapprehension that their problem is unique. These pamphlets are designed to anticipate their questions and allay their concerns.

There A.A. pamphlets for the older alcoholic, for gays and lesbians, for African-Americans, for Native-American Indians, for women, and for young people.

There is a pamphlet entitled “Do You Think You’re Different?” which covers others who may wonder if they would fit into A.A., including atheists, agnostics, those who are Jewish, and those whose drinking had not yet robbed them of everything (so-called high bottoms). A.A. also publishes easy-read material in comic book form.

The Fellowship has demonstrated its effectiveness across social and economic boundaries around the globe. The aim of these pamphlets is to bring that point home to anyone wondering if A.A. could work for them.