This booklet is for all A.A.s. Although it is written mainly to help the group holding beginners meetings, or the member leading them, any other A.A. will find it worthwhile reading.

By receiving and giving A.A. help, every one of us becomes a link in a chain around the world. All of us cling to the chain to save our lives, and yet each of us is part of it—depending on all the others to help keep the chain unbroken.

So this booklet explores ways to strengthen the links—ways through which we can stay sober by helping other alcoholics stay away from one drink, one day at a time. It is a collection, from A.A. groups everywhere, of suggestions for helping A.A. newcomers gain sobriety and grow in the program.
**WHAT KINDS OF BEGINNERS MEETINGS WORK BEST?**

Many kinds have worked well. They range from small, unplanned, informal discussions, with newcomers doing most of the talking and a different leader each time, to large sessions, prearranged in a series, with one continuing leader giving prepared talks on specific A.A. subjects.

A combination of these two types seems to work best. Groups have found that newcomers’ chances of recovery are higher if they can actively take part in A.A. discussions as soon as possible—and that they also need someone with A.A. experience to tell them the essential facts about alcoholism and our program of recovery.

Therefore, many beginners meetings include both (1) a brief talk by the leader, for not more than twenty or thirty minutes in an hour meeting, and (2) discussion by all present.

**WHAT IS A GOOD GENERAL OUTLINE FOR THE LEADER?**

Many experienced leaders of beginners meetings say that their opening remarks generally cover these points:

1. Welcome to newcomers. (Newcomers are essential to A.A.’s health and growth. In the first few weeks, they will discover that their fresh experiences make them vital links in reaching other suffering alcoholics.)

2. Assurance that newcomers’ anonymity will be respected.

3. Explanation that everything the leader or any other member says is only the individual’s opinion, that no one can speak on behalf of the entire worldwide Fellowship (or, indeed, of any group).

4. Brief statement of the Fellowship’s size and scope.

5. Brief sharing of the leader’s own experience, including in condensed form the usual elements of an A.A. talk: identification as an alcoholic (not necessarily events while drinking, but feelings); how the leader came to A.A.; recovery in the program; knowledge gained from A.A.

6. Comments on any particular topic that, in the leader’s opinion, newcomers need or want to know about. (There are suggestions on the following pages.)

7. Information about other local meetings.

8. Recommendation of the A.A. message in print—so that newcomers may take it with them after the meeting in the form of A.A. books, pamphlets, or the Grapevine.
CAN A LEADER PREPARE FOR BEGINNERS MEETINGS?

Most say they can if they keep their minds open to suggestions from the experience of others. This guide both summarizes such experience and points out Conference-approved literature in which generally accepted A.A. thinking on many important topics is given in greater detail. For instance, the booklet *Living Sober*—specifically designed for newcomers—provides possible answers to questions often asked at beginners meetings.

When a leader is “willing to go to any length” to help newcomers, preparation for a meeting can be an exciting and rewarding venture, not a chore.

As one leader wrote, “After all, I am responsible.” Experience of more than seventy years throughout the Fellowship does indeed suggest strongly that anyone who sets out to lead a newcomers meeting should take this privilege as a serious responsibility—and work at it.

SUGGESTED TOPICS FOR BEGINNERS MEETINGS

# 1—How to Stay Away From One Drink One Day at a Time

(In any series of beginners meetings there are usually new faces at each session. Therefore, leaders have found that this topic should always be included in every meeting.)

When we first came to A.A., many of us did not realize that the *first* drink triggered the compulsion to drink more and more; that it deluded us into thinking we could drink another safely, then another and another.

The danger seems obvious now, but many of today’s newcomers are just as baffled as we once were. So the leader usually explains the significance of the first drink—and how to avoid just that one, for at least one day or one hour.

Almost every A.A. has a favorite means of doing this, and other members attending a meeting can make suggestions for additions to the following:

1. The twenty-four hour (or one-minute, if necessary) plan.
2. The *halt* reminder—never getting too Hungry, Angry, Lonely, or Tired.
3. Sticking close to your sponsor and discussing personal problems with him or her.
4. *Postponing* the drink.
5. Going to lots of A.A. meetings.
7. Prayer—in whatever form the new member prefers it.

8. Changing routines—especially at drinking hours—to break up the old habit patterns.

9. Spending time with other members individually—either in person or on the telephone (and especially during old drinking hours).

10. Spending time in meeting rooms or central offices where A.A.s gather outside of regular meeting hours.

11. Starting work on the Twelve Steps, to fight such threats to sobriety as resentments, self-pity, and the tendency to dwell on the past or the future.

# 2—Alcoholism, the Disease

Information on successful Twelfth Step work can be found throughout the book Alcoholics Anonymous. Also check A.A. Comes of Age.

Alcoholics usually have to face the medical facts of the disease, as well as the present unmanageability of their own lives, before they can accept help. This seems to be true even for newcomers who are forced by pressure from others to come to A.A. for the first time.

The medical viewpoint on alcoholism that helped to bring about the birth of A.A. is outlined in the chapter “The Doctor’s Opinion” in Alcoholics Anonymous. It is explained in further detail in the first three chapters of the Big Book, and in the A.A. pamphlets “Three Talks to Medical Societies by Bill W.” and “A.A. as a Resource for the Health Care Professional.”

Many good descriptions of the disease are used by A.A. members, such as: “threefold illness,” “progressive disease,” “compulsion plus obsession,” etc. (See the pamphlet “Frequently Asked Questions About A. A.,” included in this packet.)

Many newcomers have also been helped by discussion of various definitions of alcoholism, of the symptoms of the disease, of the uselessness of misdirected willpower in combating alcoholism, of the futility in insisting on an intellectual understanding of the condition before becoming willing to practice the A.A. program.
#3—How It Works:
The Twelve Steps Suggested as a Program of Recovery

Many of us wonder when we first approach A.A. just how it works.

That’s the title of Chapter V in Alcoholics Anonymous, of course. It is the heart of the A.A. message and is enclosed in this packet.

Because the newcomer may have been told that “there are no musts in A.A.,” it seems wise to explain that these suggested Steps are a summary of actual past experience in recovery.

The men and women responsible for the Steps realized that they could never reach in person many alcoholics who wanted their help. So they knew they had to be especially careful to use the words that would describe most honestly and completely the road they had taken.

Leaders of beginners meetings generally agree that newcomers are rarely helped by ponderous sermonizing about the Twelve Steps, or by complicated interpretations. The Steps speak plainly for themselves, and all newcomers are, of course, free to interpret and use them as they individually choose.

It is the leader’s job to be sure that their exact wording is made available to the newcomer. While newcomers may not be in the mood for serious reading, the sooner they can read Alcoholics Anonymous the better. Some groups give it away, others sell it, many keep a “lending library” of A.A. books; some award the Big Book or Twelve Steps and Twelve Traditions as a “door prize.”

4—The Twelve Traditions:
What We Learn from A.A. Mistakes

The Traditions explain much of the seemingly contradictory behavior that confuses newcomers when they first encounter a fellowship that functions with so little obvious organization: “anonymity”—and yet the occasional use of full names at meetings; “no dues or fees”—and then the basket is passed.

A discussion of the origin of the Traditions, in relation to our earlier mistakes, can answer many questions and allay many anxieties for newcomers.

By relating their own experiences in using the Traditions, leaders can help newcomers understand the importance of principles before personalities, of anonymity at the public, print or broadcast level, of the group conscience, self-support, and A.A.’s nonaffiliation with other organizations.

Knowing what A.A. does not do is as important for many of us as knowing what it does do, so that we will not expect more than A.A. can deliver. A list of services A.A. does not provide is given in the pamphlet “A.A. in Your Community,” included in this packet.
If leaders want to feel secure in their own understanding of the Traditions, it is recommended that they study carefully *Twelve Steps and Twelve Traditions* and *A.A. Comes of Age*, plus the pamphlet “The Twelve Traditions Illustrated,” also enclosed.

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### # 5—A.A. in Print—Service to Others

Most A.A.s agree that newcomers are entitled to know about *all* the A.A. help available to them.

This includes A.A. literature published by A.A. World Services, Inc., which offers a large range of various kinds of A.A. help. It carefully reflects the broadest possible consensus of the entire movement, worldwide—not just some individual’s personal interpretation or some unique local view.

Pointing out what these publications are, and what they contain, may be one of the finest services we can give to newcomers, because we are thereby encouraging them to dig out the answers for themselves.

Another gift of knowledge we can pass on to newcomers is information about our Third Legacy of Service, helping them to understand their own role as new links in our worldwide chain of love and service.

It is easy to explain just how A.A. is geared to serve alcoholics after reading about it in the enclosed pamphlet “The A.A. Group.” In addition, information about the general service structure appears in brief form in the pamphlet “Inside A.A.,” also enclosed.

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### # 6—Other Factors in A.A. Recovery

In addition to the five suggestions above, many groups report that their beginners meetings include discussions of these topics:

a) The original A.A. experience, as described in *Alcoholics Anonymous* and *A.A. Comes of Age*.

b) The desire to be sober for oneself.

c) Release from the compulsion and removal of the obsession.

d) Who can be a member of A.A. and how to join. Many newcomers are greatly relieved at the absence of any official ritual, “signing up,” or other procedure for becoming an A.A. member. Anyone may attend *open* A.A. meetings. Membership in A.A. is open to anyone with a drinking problem. Dually-addicted people are also eligible for A.A. membership, *if they have a drinking problem*.
e) Acceptance of facts about ourselves; self-honesty as the basis of the program.

f) The Serenity Prayer.

g) The A.A. Slogans.

h) Sponsorship; how to get a sponsor, how to change sponsors, if necessary. (See the enclosed pamphlet “Questions and Answers on Sponsorship.”)

i) The family (see Chapters 8 and 9, “To Wives” and “The Family Afterward,” in Alcoholics Anonymous) and ways in which nonalcoholic relatives can get guidance in understanding alcoholism and thus helping the alcoholic (the Al-Anon Family Groups and Alateen).

j) The A.A. language. Most leaders of beginners meetings agree that it is very important to explain any specialized A.A. jargon to newcomers. Indeed, it is essential to make all discussions at these meetings as simple and understandable as we can. Many newcomers arrive with no prior knowledge of A.A., and (as most of us recall from our own histories) few newcomers are mentally in the best shape for rapidly absorbing complex information or ideas.

k) Spiritual awakening. Ever since Ebby T. first successfully twelfth-stepped Bill W., A.A.s have been encouraged to arrive at their own conception of A.A. recovery tools. For a discussion of the role of a spiritual awakening in recovery, see in Alcoholics Anonymous the chapters “We Agnostics,” “Working with Others,” “A Vision for You,” and “Spiritual Experience.” Also refer to Step Twelve in Twelve Steps and Twelve Traditions and in A.A. Comes of Age; plus the pamphlets “Frequently Asked Questions About A.A.” and “Questions and Answers on Sponsorship.”

l) Are sedatives dangerous for alcoholics? (Refer to “The A.A. Member—Medications and Other Drugs.”)

SUGGESTIONS ON ARRANGEMENTS FOR BEGINNERS MEETINGS

Rotation of jobs in the group is considered highly valuable in A.A. (see “The A.A. Group” pamphlet). After one member has led a series of beginners meetings (anywhere from four to twelve—but six seems to be the favorite number), another leader rotates into the job for the next series. Many groups like to alternate between men and women as leaders, with a man leading one series, a woman the next. Other groups prefer that each beginners meeting be led by a different member.

In those areas where A.A.s are most enthusiastic about the results of beginners meetings, there seems to be general agreement on these ideas:

1) The meeting should be separate and apart from the regular open or closed meeting. In some localities, it is scheduled for one hour preceding a regular meeting. In others, the beginners meeting is held at the regular meeting hour, either in a different room (where space permits) or on a different evening.
2) An intimate, informal atmosphere seems friendliest and encourages participation by the newcomer. With that aim in mind, the favorite arrangement has members seated around a large table.

3) Neither the leader nor any of the “older in sobriety” members present should dominate the meeting. It is up to the leader to see that this does not turn into an ordinary discussion, with the more experienced talkers crowding the newcomer out.

4) The newcomer should feel welcome to participate, but never made to feel “on the spot” or on the defensive by being asked questions.

5) Any A.A. member should feel free to attend the meeting and meet and help newcomers there.

6) Presenting the newcomer with a packet of basic recovery pamphlets and a current meeting list is always helpful.

This is A.A. General Service
Conference-approved literature

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