

# About AA

## The Law-Enforcement Professional Can Be a Lifeline to the Alcoholic

### A Lawyer's Suggestion Leads to A.A. and Sobriety

Midwesterner John descends from a long line of alcoholics to which he has proved no exception. After years of uncontrollable drinking, he "lost everything—my marriage, job, family and friends. Each day was a torment, like trying to navigate a room full of loose boards. I was a menace on the roads and the only way I could stay out of trouble was to stay home."

When John finally arrived sick and broke on the doorstep of A.A., there was no lack of recovering alcoholics eager to help. That he arrived at all, however, was through the efforts of some perceptive professionals at court. "Without their understanding and tough love," he says, "I'd be incarcerated or dead today. Instead, I'm ten years sober in A.A. and living a full, productive life."

Recently John wrote a letter of thanks to one of the chief professional players in his recovery—the judge who directed him to A.A. after he had received his second citation for driving while intoxicated: "Through the influence of my attorney, Gary J. Morris, and of others, including yourself, who understood what he was trying to do, your court decided to take a chance on me. I was offered an option that included a promise to stay away from alcohol and to attend one A.A. meeting a week for two years. If I successfully completed that requirement, I could escape the loss of my driving privileges, possible imprisonment, and a conviction on my record."

With a vivid recall of that day in court, John noted, "I remember your admonition to me. You said, 'If this doesn't work, yours will not be the only picture in the paper. Mine will be right next to it.'"

As much, or more, than the judge, John credits his attorney "for proposing the deal that put me on the road to sobriety. I met him when I was on my second DWI, at a time when there was a great public push to curb drinking and driving. The prosecutor wanted to throw the book at me and what I expected was the offer of a very expensive escape from my immediate problem. Instead, one of Gary Morris' first questions was, 'Do you think you might be an alcoholic?' Caught off guard, I told him I wasn't sure, but didn't think so. He asked in such a courteous, respectful way that I didn't take offense; privately I even allowed as how my drinking might be a problem."

Ten years after the fact, attorney Morris remembers his client

well. "When I met John," he says, "I had some general knowledge about Alcoholics Anonymous. I knew that their goal is to help people who acknowledge their alcoholism to help themselves. I suggested the program to John and it worked."

Here he notes that "the good news about John's sobriety is most gratifying. One thing that makes being a lawyer so rewarding is having the opportunity to help people change their lives for the better. Of course, it couldn't have been done without the judge, who is a very sensitive, concerned person."

Or, adds John, "without the probation officer who directed me to my first A.A. meeting, pre-trial; or the prosecutor, who had to agree to it. Every one of these people has helped to give me a new lease on life. The more I see of professionals who work with us alcoholics, the more I marvel at their patience, compassion and ability to identify with us. Through sobriety and service—a day at a time—I try to be worthy of their friendship with Alcoholics Anonymous."

### Oregon Police Officers Have Information Sheet on A.A.

The police have frequent, up-close encounters with alcoholics; maybe more than any other professionals, they are in a position to steer them to A.A.—provided they understand what the Fellowship offers.

"We realize that police are in the front line when it comes to helping alcoholics in trouble," says Kerry B. of Medford, Oregon, who co-chairs the area committee on Cooperation With the Professional Community. "So, last year, when talking to a friend of mine who heads the Southern Oregon Police Training Association, I asked if he would be receptive to our furnishing information about A.A. to the trainees. He answered affirmatively, and in September our C.P.C. committee produced a flyer on 'Law Enforcement Professionals and Alcoholics Anonymous' that is now distributed during numerous police-training sessions throughout southern Oregon."

The "blue sheet," as it is sometimes called, exhibits throughout a keen awareness of some of the tough dilemmas faced by police officers. Noting that they are "highly impacted" by alcohol abuse and the alcoholic, it says that the law-enforcement officer "is probably expected to find or produce some type of solution

to each of these encounters; and, in most cases, that solution will be temporary at best.

"It follows then that some long-term or even permanent resolution to these alcohol-based problems would be desirable, benefiting not just the abuser but the officer and society in general. The most obvious long-term solution is for the individual alcohol abuser to stop drinking alcohol. This simple remedy works directly at the root level of the problem and effectively unburdens a long list of negatively affected parties, from friends and family to police agencies and judicial systems, not to mention lessening a growing public financial burden."

The flyer suggests that since A.A. "is founded on the concept of this very solution, the A.A. program might well serve as a useful tool to policing professionals. Admittedly, A.A. does not boast an immediate and absolute answer to all alcoholic problems; however, its near 59-year existence and more than two million sober members is substantial proof that A.A. can be effective in achieving and maintaining long-term sobriety."

Among other things, the "blue sheet" capsulates the history of A.A., explains what it can and cannot do, and stresses its policy of "cooperation but not affiliation" with outside organizations. "It would be very helpful," the flyer adds, "for the police officer to have a direct contact in A.A. to use as an information source and to keep updated on local meeting schedules. That contact would be familiar with the numerous A.A. books, videos and pamphlets available that would be particularly useful to the police officer in working with alcoholics. Also, attending one or more open A.A. meetings with (or without) the A.A. member contact would surely be an invaluable experience."

In conclusion, the flyer cautions that "successes rarely happen overnight, and many times progress is not outwardly apparent. But remember, experience has shown that words of suggestion are often like slow-burning embers, that weeks or months later can ignite the desire for a problem alcoholic to seek help. When this happens and there are successful results, it can be called nothing less than a miracle that benefits everyone...so don't give up!"

## Past Trends Hold Firm In 1992 Membership Survey

According to analysis of A.A.'s 1992 Membership Survey, trends that appeared more than a decade ago have stabilized into a predictable and positive pattern. The typical member is 42 years old, has been sober more than five years, attends two-and-a-half meetings a week and belongs to a home group (83%). Significantly, more than half the respondents said that guidance from a professional individual or agency had influenced their decision to try A.A.

Anonymous surveys of the Fellowship, which have been conducted by the General Service Office every three years since 1968, offer an overview of current trends in membership characteristics as measured against the results of previous surveys.

Their purpose is two-fold: to furnish data about the Fellowship and its effectiveness to professionals working in the field of alcoholism; and to provide A.A. with more information about itself so that members worldwide can better help the inestimable numbers of alcoholics who still suffer.

The 1992 questionnaires were distributed to 91 U.S./Canada Conference delegates representing a total of 53,920 groups (now 57,515). Of approximately 24,000 questionnaires, 6,917 were completed by A.A. members and returned to G.S.O.

Questions covered personal statistics (age, sex, nature of job, dates of first meeting and last drink), A.A. activity (frequency of meeting attendance, group membership, sponsorship), factors that attracted the individual to A.A. in the first place (A.A. members, family, etc.), and "outside" considerations such as experience with treatment facilities and the medical profession.

Interestingly, the survey reveals that the percentage of women in A.A., which climbed steadily from 22% in 1968 to 35% in 1989, remains the same. This means that there is about one woman to every two men in A.A., and that the sharp increases of the past have stabilized. Among A.A.s age 30 and under, the percentage of women continued to climb slightly, from 40% in 1989 to 43% in 1992. Some other findings:

**Length of sobriety**—35% of the respondents have been sober for more than five years, reflecting an increase of 6% over the 1989 statistic; 34%, between one and five years; and 31%, less than one year.

**Introduction to A.A.**—The survey shows that the one-to-one approach is still effective: 34% were attracted to the Fellowship by an A.A. member; 29% knew about A.A. and came on their own; 27% came in through treatment facilities (down from 30% in 1989); and 21% were influenced by one or more family members. Still others were sent by the courts (8%); by a doctor (7%); and by an employer or fellow worker (6%).

**Relationship with doctors**—74% of respondents report that their doctors know they are in A.A.

**Additional help**—After coming to A.A., 56% of the respondents received some type of treatment, counseling or medical, psychological and/or spiritual help. Moreover, 87% of those members who had received such treatment or counseling said that it played an important part in their continuing recovery from alcoholism.

**Sponsorship**—A full 78% of the respondents have a sponsor (a fellow A.A. member to whom they can turn regularly for in-depth shared experience). Of these, 72% connected with their sponsors within the first 90 days of their recovery in A.A.

Key findings of the latest survey are available from G.S.O. in an updated version of the leaflet "Alcoholics Anonymous 1992 Membership Survey."

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