Cooperating with nonalcoholic professionals has long been an effective way to carry the message to the active alcoholic.

In recent years many local, area and intergroup Cooperation With the Professional Community Committees have been getting a jump start on this form of Twelfth-Step work by contacting students in professional schools, inviting them to meetings, giving presentations, or meeting with them one-on-one.

The following guidelines were developed for reaching out to medical students. However, the same model may be used when approaching other professional schools. Future professionals who will come in contact with people who would benefit from knowing about Alcoholics Anonymous include students of: Schools of Social Work, Law, Pharmacy, Nursing and Dental Schools. Also, Police Academies and other law enforcement institutions, Educators, and Seminarians and students at Theology Schools.

**Working With Medical Students And Other Professional Schools Students**

For many C.P.C. committees, work with medical students has turned out to be an effective way to carry the message. It’s done in several ways: through inviting medical students to open meetings; making presentations at medical schools and following up with invitations to meetings or other A.A. activities; by “sponsoring” students on a one-to-one basis. One local central office writes: “For over three years, students from a local college of medicine have been regularly attending open meetings at some of our groups as part of their school’s clinical psychiatry program. To quote the professor in charge of the program: ‘Our medical students become acquainted with the opportunities offered by A.A. in a way that has not been possible for a generation of physicians trained before them.’

"Hoping to show more future doctors what A.A. can (and cannot) do, the intergroup office wrote to the deans at medical schools in the area, inviting their students to learn more about the A.A. program either by attending meetings or by having a speaker come to the schools to talk to the students.

"The medical schools interested in having students attend open meetings were given a meeting list so that they could select the groups they wished to attend. These groups were contacted by intergroup to make sure they would welcome the visiting students, and have some of their members available to answer questions.

"Third-year medical students from several medical schools are now attending two local A.A. groups as part of their six-week course in clinical psychiatry. The students' reactions have been marvelous to watch. They're fascinated by the stories of hope and recovery and they're amazed by what some have called ‘the wonderful community bond in the room.’

"An A.A. speaker is also regularly scheduled every five to six weeks to talk to third-year students at another hospital. And, according to a doctor there, 'We have begun to require students to attend an A.A. meeting to see how it works.' Arrangements are now under way with another medical school that has expressed interest in having students attend open meetings."
Another C.P.C. committee reports on how it cooperates.

"A three-member panel presentation is made, using 'Information on Alcoholics Anonymous' as a guideline. Pamphlets are given out ('If You Are a Professional,' 'A Member's-Eye View of A.A.' and 'A.A. as a Resource for the Health Care Professional'), along with a current meeting schedule. This is followed by a short version of each panel members' story, and time for questions and answers.

"The sponsorship aspect of the program is explained to students after the panel presentation. Students are told that A.A. members are available to take them to meetings on an individual basis, and encouraged to call the intergroup office to make arrangements."

One local intergroup's program has served as a model for several others. Committee members have worked out a careful plan and developed background material and guidelines for the program:

"When we first were forming our C.P.C. committee, some doctors had astutely pointed out to us that many staff physicians treating alcoholics in rehabilitation places and elsewhere had never been to a meeting other than those held on the grounds of the hospital. There, you have the situation of two or three sober A.A. members addressing a room full of patients. These doctors felt that physicians had a false idea of what A.A. meetings really were.

"Because we were in the unique position of having five teaching medical colleges in our area with friendly contacts with several, we made the medical schools our first priority. It was decided to follow the procedure of one-to-one sponsorship.

"We obtained a list of students with names, addresses, and phone numbers from the administrative assistant in each medical school. At our orientation meeting, we developed the same information from all volunteer A.A. members who wished to serve as sponsors. We thus had an alphabetized list of A.A. sponsors willing and waiting.

"We developed a team of A.A. 'callers' who would phone our sponsors, getting agreement from the sponsor to call and take the student to a meeting within two weeks. Once committed, the sponsor was given the student's name, address, and phone number. We would then send a two-part postcard to the sponsor, who would return the second half to our intergroup office after the student had been taken to a meeting.

"We would urge sponsors to keep in mind that attendance is required by the medical school, and the student would not pass the course without going to a meeting. We would also urge the sponsors to come back to the orientation meetings, to share with new volunteers their experience in taking students to meetings. Before a student attends a meeting, he or she is given an envelope containing five or six pieces of A.A. literature, a meeting directory, and a cover letter explaining the mechanics and purpose of the meeting with an A.A. member.

" Orientation Guidelines' for sponsors of medical students were also developed. They stated the following:

"Our goal is to introduce medical students to A.A. in general, and to one recovered alcoholic in particular. Hopefully, this exposure will eradicate any stereotypes the students might have
about alcoholics and provide them with personal knowledge and respect for one recovered alcoholic.

"To make us more competent in explaining A.A. and how it works, we suggest the following qualifications for a sponsor: (1) a minimum of one to two years of sobriety; (2) a knowledge of the Traditions and service structure; (3) some experience as a trusted servant, either in a group, at an intergroup, or in general service.

"The following guidelines are suggested:

1. Contact the student promptly, and let intergroup know of any difficulty.
2. Students have little free time. Schedule the meeting at their convenience if possible.
3. Take students to open meetings only: (a) preferably a meeting you are familiar with and known at; (b) no hospital, rehab, or institution meetings.
4. We want the students to experience a typical meeting, and feel this is more likely if they are not introduced as medical students to the entire group before the meeting.
5. Do not travel to meetings with other sponsors or friends. One-to-one contact is important. Allow time for sharing.
6. Let the students ask the questions; don't tell them everything.
7. If you share a personal opinion, try to make it clear that you do not speak for A.A. as a whole."