

SERVING
ALL
ALCOHOLICS

**Making the A.A. Message
Accessible**

While there are no special alcoholics, there are alcoholics who have additional personal barriers to receiving the A.A. message. For some, a six-inch step can be an insurmountable obstacle. A locked access door, blocked ramp or parking problem can make it impossible to get to a meeting. Some members are ill, homebound or living in retirement or convalescent homes; others have hearing or vision loss, learning, reading or information-processing challenges; and still others are elderly, use wheelchairs or canes, or have other mobility concerns. Literature may be hard to understand. Childcare issues may make it impossible to attend regular meetings. Remote geography or cultural differences may hinder contact with other members.

A local intergroup/central office can often provide information about the accessibility of meetings, and whether organized Accessibility efforts exist in particular areas. This information is often made available through local meeting lists and events flyers. When preparing these listings, it can be helpful to use appropriate symbols and to include a name and number to contact for additional accessibility information.

If we can do a better job of reaching out to alcoholics who may face personal challenges in receiving the A.A. message, we help them to carry the message to other alcoholics they may already know or will come into contact with, providing a powerful example that it's possible to achieve sobriety despite perceived barriers.

Available for Accessibilities Committees:

- Accessibilities Kit — a three-ring binder with material to help A.A. members and committees carry A.A.'s message of recovery to those with accessibility challenges. See complete kit contents on www.aa.org.
- Accessibilities Workbook — A booklet with information on forming Accessibilities Committees, presentations to professionals and working with American Sign Language (ASL) interpreters.

The Alcoholic Who Is Deaf or Hard-of-Hearing

"I wonder in meetings if people are saying out loud what appears on their faces," writes one A.A. member who is Deaf. "Are they expressing the sadness or anger I sense in their bodies or behind their eyes? Is this real or in my mind? I wish I could hear this meeting with all its noise, all the feelings! What's the laughter about? Who's speaking now? How are the newcomers doing?"

An A.A. who signs for his home group worries about the communication gap: "When hearing alcoholics join A.A., we listen to the message of sobriety over and over, and ultimately it can penetrate our fog. But most Deaf alcoholics in the Fellowship are denied the benefits of repetition."

The challenge of serving the alcoholic who is Deaf or Hard of Hearing goes beyond that of simple "hearing." For

Deaf people who use ASL, for example, English is a second language. Idioms and colloquialisms are difficult to sign, and some phrases used in A.A. — such as “Rarely have we seen a person fail” — do not have comparable signs. ASL is a complete language, with its own unique grammar and sentence structure, and, likewise, the Deaf community is a unique culture, with unique customs and norms, as well as some regional variations. So, working with the Deaf community can be similar to working with any group that has a separate language and culture.

A growing number of groups are providing signers to interpret for their members who are Deaf. Additionally, interpreters allow Deaf and hearing members to *share* experience, strength and hope with each other, as communication with the Deaf is not a one-way street. Most groups will agree to having a non-A.A. interpreter attend its closed meetings in such cases, recognizing that professional interpreters adhere to a strict code of ethics that assures the confidentiality of the A.A. meeting.

Accessibilities Committees and local service offices often maintain lists of qualified interpreters available for hire who are willing and able to sign for A.A. meetings and events. Providing a signer takes money, and if the group cannot afford the cost, there are other sources of help. Some local intergroup/central offices have provided resources in their annual budgets for helping groups hire interpreters, and some area committees have set up special funds. Some agencies provide interpreters for people who are Deaf, or the alcoholic may bring his or her own interpreter to a meeting.

It is important, however, not to let fears about money become the focus. Our primary purpose is to carry the message and, as the A.A. Responsibility Declaration indicates, “When anyone, anywhere, reaches out for help, I want the hand of A.A. always to be there.” And for that, each one of us is responsible.

One area’s Accessibilities Committee offers the following suggestions for groups interested in starting an interpreted meeting — as either a brand new meeting or part of an established group: (1) *Determine the need.* Do some research to find out if there are any interpreted meetings available in your neighborhood, and whether there is a need for such a meeting at the time or times that your group meets. (2) If there is, *make a commitment.* Is the group willing to pay for an interpreter week in and week out, even if sometimes no Deaf or Hard-of-Hearing people show up? Remember that the meeting will be listed in the meeting book as interpreted. (3) *Designate a group member* to coordinate all the work related to an interpreted meeting, and if you plan to provide interpreter services at specific meetings and events, be sure to include that information on all flyers, published meeting lists and websites. (4) *Reach out to the Deaf community in your area.* Make up flyers; give them out at other interpreted meetings,

and send them to local professionals who work with Deaf alcoholics. Notify your local intergroup/central office and Accessibilities Committees, in writing. (5) *Be patient*. It takes time to get a signed group going. And be aware that not all Hard-of-Hearing people want to identify themselves as such, and they may be sitting somewhere other than in the designated area.

An increasing number of A.A. members are learning sign language in order to communicate with Deaf members. Some learn enough to greet Deaf or Hard-of-Hearing newcomers and encourage them to keep coming back. It is a benefit to the group to know ASL or be willing to learn it in order to communicate with Deaf members in their primary language. However, like any other language, there is a vast difference between one who may have reached a basic level of proficiency and one who is a professionally trained interpreter. Nevertheless, A.A.s should not let a lack of ASL skills prevent them from reaching out to Deaf alcoholics. Pen and paper, as well as text messaging, are excellent tools for starting up a conversation.

Visual communication is important, and a wave of the hand or a tap on the shoulder can signal that you want the person's attention. Meeting facilities that provide microphones often provide assistive listening devices (A.L.D.s) as part of their audio service. A.L.D.s are used to improve hearing ability for people in a variety of situations where they are unable to distinguish speech in noise. Often in a noisy or crowded room it is almost impossible for an individual who is Hard of Hearing to distinguish one voice among many. A.L.D.s are devices that help a person to hear and understand what is being said more clearly or to express thoughts more easily and can help Hard-of-Hearing members participate in the meeting. Several types of A.L.D.s are available to improve sound transmission for people with hearing loss. Some are designed for large facilities such as classrooms, theaters, places of worship, and airports. Other types are intended for personal use in small settings and for one-on-one conversations; all can be used with or without hearing aids or a cochlear implant.

It is important also to invite Deaf and Hard-of-Hearing members to participate in every aspect of service within the group or at an A.A. event. Communication works both ways, and groups can ask Deaf members if they would like to give A.A. talks, with the interpreter switching gears and translating for the benefit of hearing members.

Resources available: The Big Book and *Twelve Steps and Twelve Traditions* are available in ASL on videotape and DVD formats. The pamphlet "Accessibility for All Alcoholics" is also available in ASL on DVD, as well as audio CD formats in English, Spanish and French. These items produced by G.S.O. are close-captioned. Many Deaf A.A.s participate in the *Loners-Internationalists Meeting (LIM)*. *A.A. Guidelines* (on) *Sharing the A.A. Message with the Alcoholic Who Is Deaf* share experience and

information. A large number of online meetings, some videotaped in ASL, are available, as are computer bulletin boards. One source for information about these is the Online Intergroup of A.A., www.aa-intergroup.org. The Accessibilities Coordinator at G.S.O. can also provide an Accessibilities Checklist to help groups assess their own levels of accessibility.

Alcoholics Who Are Blind or Have a Visual Impairment

Simply getting to a meeting can be the biggest problem for the alcoholic who is blind or whose eyesight is compromised. Intergroup/central offices and Accessibilities Committees often maintain lists of members who are willing to provide transportation to and from meetings and other A.A. functions. Some groups have asked their local intergroup/central offices to code Twelfth Step lists to identify such members.

It is helpful for the group to assign volunteers to guide newcomers who are blind or visually impaired to chairs, the hospitality table, and rest rooms until they are familiar with the surroundings. Meeting rooms should always be set up the same way consistently, or if not, Blind members or those with visual impairments should be alerted to any changes. Banging into a chair or table that wasn't there at an earlier meeting can be both dangerous and embarrassing.

One group's experience illustrates what can be done to help any alcoholic not only get to meetings regularly but also to become a full participant in the group. The chairperson asked for volunteers to take a young blind man to meetings once a month; the volunteers were assigned specific dates, and if they couldn't take their turn, they were responsible for finding a substitute. The response was immediate and generous, and the young man is now able to attend all group meetings and participate fully in group activities. As a result of this twelfth-stepping, group members have drawn closer to their blind friend, going beyond what used to be just a few niceties at meetings to really getting to know him as another recovering alcoholic. "We have all benefited," says one member.

Such experience can be applied to welcoming all alcoholics who face personal barriers to receiving the A.A. message and participating in A.A. service opportunities: a handshake and a friendly greeting are a good start, but we can't stop there if someone is going to feel a part of our Fellowship.

Resources available: G.S.O. has a list of A.A. books and pamphlets available in braille and large-print editions, as well as on audiotape cassettes. For additional braille material, call G.S.O. at 212-870-3312. The A.A. Grapevine produces a variety of theme tapes of magazine articles. The Accessibilities Coordinator at G.S.O. can also provide an Accessibilities Checklist to help groups assess their own levels of accessibility.

A.A.s with Physical Challenges or Chronic Illnesses

Some physically challenged A.A.s can get to meetings; others cannot. For those who have difficulty walking or who are in wheelchairs, fellow members can drive them to and from meetings, install wheelchair ramps over steps to the meeting room, and arrange the room so that there is ample space for wheelchairs or walkers. Check that nearby parking is available and verify that rest rooms are truly accessible, with ample room to maneuver within the confines of the room or stall. Most local meeting lists are coded to indicate meetings that are held in wheelchair accessible facilities.

Taking a meeting to a chronically ill member who is homebound can make a tremendous difference to him or her. The experience of one area's Accessibilities Committee tells the story well: "In the front of the meeting schedules, we enclose a notice headed, We Are Not Alone Anymore Group: 'This group is for homebound members. We would like to bring a meeting to you. There are no special alcoholics, though there are alcoholics who have additional personal barriers to receiving the A.A. message. The We Are Not Alone Anymore Group believes that when anyone, anywhere, reaches out for help, the hand of A.A. will be there.' We list our phone number and encourage homebound members to call for help. We also ask A.A.s who are not living with disabilities to volunteer their services."

Another area set up a "mobile group." The chair reported: "Volunteers will carry a regular meeting to members housebound for lengthy periods of time. The traveling unit will consist of a chairperson, a leader, coffee and cookies, a few camp-type folding chairs, and *no* collection plate!"

Resources available: Many homebound A.A.s participate in the *Loners-Internationalists Meeting (LIM)* as "Homers." A large number of online meetings and computer bulletin boards are available. One source for information about these is the Online Intergroup of A.A., www.aa-intergroup.org.

Elder Alcoholics

Extending the hand of A.A. to older alcoholics can offer hope to a population that is all too frequently isolated and fearful. The support and recovery that membership in A.A. brings can be the doorway to a new life — regardless of one's age.

Many older adults have difficulty getting to A.A. meetings; they may have trouble driving or walking, and shrinking social networks can sometimes mean that fewer friends are available to help them. This is why elderly outreach programs have become so important within Alcoholics Anonymous.

Many A.A. members reach out to elder alcoholics within one's group, including those who need assistance getting

to the meeting and participating in the meeting, as well as those who become homebound. Some groups also start Seniors in Sobriety (SIS) meetings, or at least designate certain meetings Senior Friendly (SF). And remember, some of those elder alcoholics who need assistance may have long-term sobriety and can serve as valuable resources for the group — as sponsors and keepers of A.A. tradition and experience.

“When we started,” says the chair of an Accessibilities Committee that set up a phone service, “we were told, ‘If you raise expectations, be sure you deliver.’ That’s something I keep in mind always. Most of our callers are older people, and they look forward to seeing us. Often a live meeting at home gives them a new lease on life, even if temporarily. Our oldtimers are as important at home as at meetings, and we’re not going to let them disappear. We’re just giving back to them some of what they’ve given to us.”

The A.A. message can also be carried to professionals at social service agencies assisting elders, as well as elder care facilities, including retirement and convalescent homes.

Resources available: Many elder A.A.s participate in online meetings and computer bulletin boards. One source for information about these is the Online Intergroup of A.A., www.aa-intergroup.org. Additionally, there are a number of A.A. pamphlets available through G.S.O. that focus on the experience of elder alcoholics: “A.A. for the Older Alcoholic — Never Too Late” and “Do You Think You’re Different?”

Parents or Other Caregivers

Getting to meetings and participating in other service-related A.A. activities can be difficult for parents with primary childcare responsibilities or those who have other caregiving responsibilities, such as taking care of a sick parent or family member.

Many groups work with the local intergroup/central office to develop a list of meetings where kids are welcome or childcare is available. It can also be helpful to develop a list of A.A. members willing to participate in phone meetings with parents/caregivers who cannot attend meetings in person. Providing single parents or other caregivers with a list of Internet meetings also creates opportunities for such members to participate in the kind of A.A. sharing that is so beneficial to all members.

Resources available: Many parents or caregivers participate in online meetings and computer bulletin boards. One source for information about these is the Online Intergroup of A.A., www.aa-intergroup.org.

Underserved and Remote Communities

Many A.A. members live in underserved or remote communities — communities that are difficult to reach because of the geography, language or culture.

It might be a community that is far away, or one that is right around the corner; one that is comfortable using English-language resources or one that is not. It could be a group of people who have frequently been underserved: African-Americans, Eastern Europeans, Asians, Hispanics, women.

Resources available: There are a number of A.A. pamphlets available through G.S.O. that focus on the experience of underserved communities, including: “A.A. for the Gay/Lesbian Alcoholic,” “A.A. for the Black/African-American Alcoholic,” “Many Paths to Spirituality,” “Memo to An Inmate Who May Be an Alcoholic,” “A.A. for the Native North American,” “Message to Teenagers,” “A.A. for the Woman.” Additionally, a G.S.O. staff member provides shared experience on working with remote communities.

Easy-to-Read Literature

Members with limited reading abilities can be less evident than A.A.s with other needs, and may find it difficult to ask for help. There are ways to provide information without causing embarrassment. The group’s literature chair can make a point of announcing that many books, pamphlets, and Grapevine articles are available on tape. Or, if a member has trouble reading, the group can set up Step or Traditions meetings so that the Step or Tradition is read aloud at the beginning. Help with reading and comprehension can also be offered one on one through sponsors or other group members.

Resources available: There are audio- and video-cassettes available through G.S.O. In addition, several pieces of illustrated, easy-to-read literature can be ordered from G.S.O. The Grapevine carries a large inventory of e-books and CDs containing the shared experience, strength and hope of individual members.

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The G.S.O./Grapevine literature catalog has a separate section for Accessibilities materials. You can order this catalog from G.S.O. at Box 459, Grand Central Station, New York, NY 10163; 212-870-3400; www.aa.org. Resources are also available from local and area Accessibilities Committees and from outside professional agencies that serve people with physical, mental and emotional challenges.

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