Alcoholics Anonymous is dedicated to making its message of recovery from alcoholism available to as many as possible, including those with special needs.

The designation special needs usually applies to the blind or visually impaired, the deaf or hard of hearing, and those who are chronically ill or homebound. It can also include those in wheelchairs and others who may have problems accessing A.A. meetings.

“A person with a disability is already stigmatized and may be afraid of meeting strangers; they have been told they are different,” says Michael N., an A.A. member who is blind. A director of a state agency in the Midwest that serves people who are blind, he says, “there is evidence that those with disabilities are more likely than able-bodied people to suffer from alcoholism, and we need to do what we can in A.A. to help these people find us.”

Shane K., an A.A. member and director of an addiction studies program at a university in Illinois, says, “We have a long way to go, but people are getting energized by this issue. The good news piece is that in the disability community we are recognizing the need to get people into recovery. A.A. is finding a way to be there for those with disabilities.”

Committees Tackle the Problem

A.A. members in regions around the country have formed committees addressing how best to pave the way for A.A. members with special needs to reach and participate in A.A. meetings, or to arrange to have A.A. meetings brought to them. These committees work with local A.A. groups to find ways to make their meetings available to all who want to attend.

Typical of what such a committee might do, a special needs committee in New York State drew up a blueprint for A.A. groups interested in starting an interpreted meeting for the deaf or hard of hearing. The committee suggests that the A.A. group first determine a need by visiting other interpreted meetings to find out from the deaf A.A. members there whether they would welcome another such meeting. The committee also offers advice on hiring an interpreter versed in American Sign Language (ASL).

“As a borderline profound deaf person and a member of A.A., I prefer going to small groups that meet around a table so that I can take advantage of my ability to read lips,” says Bob O., of Sacramento, Calif.

“I do use interpreters in a group situation whenever practical, though, because reading lips can be very tiring and often words on the lips can look alike. I know that a lot of times when I am in a new group I have a lot of anxiety about being called on to say something because I am clueless as to what the topic is.”

“A.A. is a great program, but it depends so much on personal interaction of people that it can be especially difficult for the deaf. A sponsor, who is so very important to our recovery, is even more so for people who are deaf.”

Though the use of e-mail has become almost universal, some local A.A. offices—called central offices or intergroups—still employ TTY (Teletypewriter or Text Telephone) to enable the deaf or hearing impaired to communicate with them. Offices lacking such equipment use the Telecommunications Relay Service, which is offered in most communities.

In Tucson, Arizona, an A.A. special needs committee sent a letter to the groups in the area inviting them to contact the committee to tell it about the ways their A.A. meetings were having trouble accommodating those with special needs and promising to try to help.

According to a member of the committee: “The function of the special needs committee is to create an awareness of the problems so that together we can find solutions. I know we need to change, and I know we have to work a little harder.”

Gary P. of Long Beach, Calif., who is 17 years sober in A.A. and a quadriplegic as a result of an accident in 1975, got sober in a Veterans Administration alcohol treatment facility for the disabled. “The good thing is they treated us like any other alcoholic; they were in your face about your disease,” says Gary.

After getting sober, he and others with disabilities would travel together to A.A. meetings. “We went to meetings for years, a bunch of guys in wheelchairs. People loved having us there,” says Gary. “If one meeting wasn’t accessible, 10 were. People are sometimes timid about how to approach those with a disability, but when I reach out my hand to someone, it really breaks that barrier down.”

Literature Made Accessible

A.A.’s commitment to making its message of recovery widely accessible goes back decades. In a letter sent 20 years ago to A.A.’s U.S./Canada General Service Office in New York, a blind A.A. member, sober for two years, writes: “Being blind does prevent me from convenient access to A.A. literature, such as the Big Book and the 12 and 12.”

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That A.A. member was reassured that A.A.—even then—had material in Braille and on tape. Currently, the message of A.A. is available in various formats, including on compact discs and on cassette tapes. The main texts of A.A. literature—the book Alcoholics Anonymous and the Twelve Steps and Twelve Traditions—are on CD, as well as in Braille and ASL. There also are large-print editions of these and other A.A. publications.

The Alcoholics Anonymous monthly magazine, the AA Grapevine, is available in an audio format called AudioGrapevine. Subscribers can download and listen to most of the popular features of the Grapevine, including the personal stories of A.A. members sharing their experience, strength and hope.

A selection of A.A. literature has been revised so that it can be read easily by people who have been deaf since birth. This material can also be used for signing purposes and was developed by hearing-impaired A.A. members and American Sign Language interpreters.

For those with limited reading ability, A.A. publishes illustrated, easy-to-read material. The General Service Office in New York prints a catalog of special needs material.

**Getting to the Meeting**

In urban areas, members of an A.A. group will sometimes take it on themselves to accompany someone too frail to walk to a meeting on their own.

“One of the members of our group had a major operation. After he had recovered enough to think about attending A.A. meetings, I volunteered to meet him outside his apartment building and walk with him to the meeting,” says one A.A. member in New York. “We took that walk together once a week for a few months, and that service did at least as much for me as it did for him.”

A.A. members will commonly take a meeting to an A.A. member who is home-bound. There is also a newsletter published by the General Service Office in New York called the Loners/Internationalist Meeting (LIM), which prints correspondence from A.A. members in isolated areas, at sea, or home- or hospital-bound. For those who are disabled, A.A. members will often provide rides to meetings.

Some A.A. groups, meanwhile, are taking steps—such as installing ramps—to make their meeting spaces wheelchair accessible.

“I have seen A.A. members make great efforts to make meetings accessible,” says Michael. He stresses that it’s important that meeting lists use a consistent definition of “accessible,” so that the disabled A.A. member who shows up at a meeting designated as accessible isn’t disappointed.

“Conformity of definition is important,” he says.

To assist in this, the local A.A. structure in the southern part of Wisconsin has posted on its Web site a self-assessment check-off list for meetings wishing to define themselves as accessible.

When a counselor at a treatment facility refers a patient with a disability to a meeting, the overall concern should be how that person will reach the meeting and whether they can, with grace and dignity, take a seat there, says Michael.

“A counselor needs to ask the person with a disability a few more additional questions,” he says, such as whether they have a ride to the meeting and if they can negotiate any stairs.

“Going to an A.A. meeting the first time is scary for anyone. For the disabled person, it’s ten times so.”

**In Ireland, A.A.’s 19th World Service Meeting Draws Delegates from 34 Countries**

The 19th World Service Meeting (WSM) of Alcoholics Anonymous, which was held in Malahide, Ireland, over four days in October, drew 54 delegates from around the world.

A.A. has a presence in more than 180 countries, with an estimated 106,227 groups and more than 2 million members. Since its beginnings in 1969, the WSM has served as a forum for the sharing of experience and ideas on ways to carry the A.A. message of recovery from alcoholism. Thirty-four countries or zones sent representatives to the meeting.

Much discussion centered on the theme “Anonymous, but Not Invisible,” in the spirit of the A.A. Tradition that members who speak at the public level not reveal their full names or appear on camera. It was stressed, though, that A.A. must be visible, so that alcoholics who need help can find it.

**Let Us Hear From You . . .**

Are there any specific topics you would like to see explored in About A.A.? Please send us your thoughts, ideas, comments, so we may better communicate with the professional community. You may e-mail the Cooperation With the Professional Community desk at: cpc@aa.org.

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