A.A. Reaches Out to Native North Americans

In an ongoing effort to carry the A.A. message more effectively to Native North Americans, who are known to be at high risk for alcoholism, the trustees’ Committee on Cooperation With the Professional Community has sought to stimulate interest among A.A.s across the U.S. and Canada. The committee also is acting as a clearinghouse for information and shared experience, and is working to provide audiovisual materials that are truly helpful.

Guided by an Advisory Action of the 1985 A.A. General Service Conference, the C.P.C. Committee conducted a two-pronged survey relating to the topic; one of A.A. area delegates and alternates, the other of 600 professional persons working with Native Americans on problems related to alcoholism.

Of the A.A. respondents from 55 areas, 40% reported the existence of Native American groups in their areas, 20% of them on reservations. Of the 151 professional respondents, 61% said that A.A. meetings were held at their agencies; 72% reported that the Native Americans with whom they worked had access to A.A. groups on their reservations.

A full 89% of the professionals indicated that A.A. literature in English would help them to assist alcoholic Native Americans. Many noted that this material should reflect the successful A.A. experience of Native Americans for purposes of identification and education.

Both the A.A. and professional respondents to the surveys cited problems in carrying the message of sobriety to Native Americans. These included: cultural differences, language barriers, low motivation and lack of understanding about alcoholism, illiteracy and transportation difficulties, and the paucity of Native American A.A. sponsors.

Some professional respondents stated that many Native Americans resent the imposition of meetings mandated by the courts or treatment centers. Others, noting that some Native Americans freely blend their religious practices with the A.A. program of recovery, suggested that some A.A. audiovisual materials may not be relevant to the Indian way of life.

The General Service Office has adaptations of some A.A. Conference-approved literature, such as the Twelve Steps of A.A., the Serenity Prayer, the A.A. Preamble and the Twelve Traditions, translated into several Native American and Eskimo dialects. These service pieces are available upon request.

Most recently, the 1987 General Service Conference recommended that a pamphlet specially designed for the Native North American be prepared and brought back for consideration to the 1988 Conference. The proposed pamphlet will contain the stories of several Native Americans now sober in A.A. Graphic unity and appeal will be achieved through imagery — for example, by incorporating the symbols various tribes employ to designate the sun, which is perceived as a benign and powerful influence.

Within the past year, Betty L., the G.S.O. staff member then assigned to the C.P.C. desk, has participated in meetings held by the Bureau of Indian Affairs. She reports that the participants, including Native American representatives of the Office of Tribal Services and of Indian Education Programs, “agreed on an important point: that educating students, ministers of reservation churches and tribal leaders about A.A. is essential to the ongoing effectiveness of A.A. groups on reservations.”

Meanwhile, from Arizona and New Mexico to New York and British Columbia, an ever-increasing number of A.A.s are carrying the message to Native Americans in their areas — including those in hospitals and treatment centers, inside correctional facilities, and on and off the reservations.

This past fall, a meeting on California’s Rincon reservation was started by members of an ad hoc committee formed to carry the message to Native Americans in the San Diego area. “At present,” reports Larry N., delegate for the San Diego/Imperial Area, “we have about 15 members who meet every Wednesday evening. These meetings are attended by Native Americans and other A.A.s as well, and we are making progress.” However, Larry points out, “there is still a great deal of resistance from many Native Americans to the A.A. program. There is much confusion, ignorance and distrust about how A.A. works.”

Along with other areas attempting to carry the message to Native Americans, the San Diego committee is finding that meetings held off the reservations can be highly effective. Observes one A.A., “The most positive results seem to occur when a Native American finds sobriety off the reservation and carries it home. An important benefit here is that personal anonymity can be better preserved.”

When it comes to forming additional groups, the San Diego committee is making haste slowly. “It is essential,” the members report, “that the meetings we start do not fail. That would cause more damage than we could repair” in terms of confidence and trust.

A.A. Joins in U.S.-Russia Exchange on Alcoholism

In the interest of sharing A.A.’s program of sobriety, General Service Office manager John B. accompanied 15 professionals in the alcoholism field to Russia for an exchange of information on alcoholism prevention and treatment.
Sponsored by the National Council of World Affairs Organizations and the Soviet Temperance Promotion Society (TPS), this ground-breaking “American-Soviet Dialogue on Common Problems,” held September 4-16, 1987, was the first of a series of private exchange initiatives endorsed by President Reagan and Chairman Gorbachev at the Geneva Summit. It followed on the heels of a planning session last May in Washington, D.C.

John B. attended both colloquia as a representative of A.A. World Services. He reports that “discussions in Russia were often quite candid. In general, the focus was more on the Soviet situation than ours. That is consistent with the concept of these exchanges, and the opportunity to present American programs more clearly will arise when the Soviets visit the U.S. in spring 1988. With specific regard to A.A., our hope was to enhance the receptivity of Soviet authorities to our Fellowship and give them a better idea of how it works. I believe that progress was made in that direction.”

A.A.'s participation in the exchange resulted from a specific invitation extended by Nicholas Chernykh, presently the active head of TPS, a two-year-old organization that claims 14.5 million voluntary members. Using the slogan, “Temperance (abstinence) is the norm of the socialist way of life,” TPS aims to educate the populace, particularly the youth, about the dangers of liquor and the advantages of a “sober way of life.” The organization does this both by developing central programs and by overseeing the activities of regional and “grass-roots” voluntary TPS groups — run largely by industry managers, trade union leaders, teachers, university faculties, medical personnel and youth leaders; in general, people in a position to influence the ideas of others.

Among other things, TPS monitors the formation of narcology centers, departments and clinics throughout Russia. The centers may be consulted by workers voluntarily and anonymously, or on a compulsory referral basis. Official records are kept of involuntary referrals; after five years, the names of those who have remained incident-free are deleted.

Narcology departments, now being created near major centers of population and industry, have more extensive facilities run by narcologists and other professionals. A specialty in narcology calls for standard medical preparation, plus an additional year in the treatment of alcoholism, drug addiction (not prevalent) and solvent abuse.

Narcology clinics operate in hospitals or as separate entities. The typical mode of treatment is 1-10 days of detox, with inpatient status for up to three months and usually including day work outside the clinic. Especially difficult patients may be required to complete a two-year work experience while living in special facilities that are somewhat analogous to halfway houses in the United States.

“There apparently are no recovering alcoholics on the staffs of the narcology clinics,” John reports. “Treatment methods include detox, physical treatment and rehabilitation, hypnosis, aversion therapy and counseling. The results, quoted by a Soviet spokesman, are a recovery rate of 35-40 percent after one year, dropping to 3-5 percent after five years.”

According to Soviet officials, there are presently 4,500,000 “alcoholic addicts” (their phrase) in the U.S.S.R. However, John explains, “A distinction is made at every turn between ‘alcoholics’ — what we in A.A. might call low-bottom alcoholics — and ‘alcohol abusers.’ The Soviets would classify many of our members as ‘past alcohol abusers.’”

Because the Soviets have had little or no experience with recovering alcoholics, John points out, “they take a dim view of alcoholics. An alcoholic physician, for example, would have to leave the profession in disgrace; and an alcoholic industrial manager would be demoted to worker for not being a proper example of socialist ideals. Soviet officials have yet to see that a large number of alcoholics can be returned to full economic usefulness — or that a goodly number of them constitute a potential resource of future alcoholism professionals.”

A.A. in an organized form is presently nonexistent in Russia, although scattered meetings have sprung up in the past. To Soviets who expressed interest in the Fellowship, John gave the address of the Finland central office, which has indicated its readiness to help, as it already has in bringing A.A. to Poland. Meanwhile, John observes, “it is certainly possible that the Soviet government may wind up creating the first A.A. groups in the country. The analogue has often occurred in the U.S. and Canada, when a member of the medical profession or the clergy has initiated a group that later became independent and full-fledged.”

The meticulously scheduled 12-day visit of the American delegation included extensive tours of Soviet industrial plants, collective farms, schools, hospitals and universities, with the focus on alcohol abuse; and culminated in meetings and round-table discussions in Moscow. On the last day, Mr. Chernykh summarized the “four major results” of the U.S.-Russia exchange: (1) the promise of further cooperation in the area of biomedical research; (2) the hope offered by Alcoholics Anonymous and the probability that some future activity of that kind would occur in the Soviet Union; (3) the recognition of family problems created by alcoholism and the promise of Al-Anon in this connection; and (4) the need to emphasize a sober way of life that includes recreation, athletics and other healthful substitutes for activities involving alcohol.