Treatment Facility Committee

Presentation for A.A. members willing to serve on this committee.
“Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics it works when other activities fail.”

Alcoholics Anonymous, P. 89
Need for Treatment Facility Committee

- To take A.A. to those who need it and want it.
- 33% of members worldwide comes from Treatment Facilities.
- In Southern India, about 50% of membership comes from Treatment Facilities.
- Thousands of prospects are inside waiting for life saving message of A.A.
Criteria for members of T. F. Committee

- Good Sobriety – This can be decided by the area. Suggested to have five years of sobriety.
- Personal experience of alcoholism and recovery.
- A common sense approach – When we carry A.A.’s message of hope, experience and strength, we know this is serious business.
- Cheerful humility – We simply put the message in front of alcoholics in facility. Do not get angry or discouraged if it is ignored.
- Ability to follow directions – Carrying the message into such places calls for patience and self-discipline.
Criteria for members of T. F. Committee

- Dependability – Do stick to commitment made.
- Broad knowledge of A.A. – The deeper and broader our understanding of all aspects of our Fellowship, the more we have to offer.
- Ability to stick to our own business – Keep focused on A.A.’s primary purpose. We carry our message by sharing our experience strength and hope.
- Ability to work together – Unity at every level is key word.
What T. F. Committee does.

- Communicating with Treatment Facilities.
- Coordinates various programs for staff and clients. May be presentations.
- Starts meetings in facility with their permission.
- Distribute literature at Facilities.
- Keeps in touch with G.S.O. and other service bodies in area.
- Create Temporary Contact (Bridging the Gap) program.
Communication with Treatment Facility

- Collect addresses of Treatment Facilities in your areas.
- These addresses may be available from G.S.O. (I).
- Write letters to them – sample letters are available in Workbook on Treatment Facilities.
- Invite them to P. I. Programs organized by fellowship.
- Send them introductory literature.
Programs or presentations in Facility

- *Organize presentation for Staff of facility* – the goal of presentation is to impart knowledge about A.A. and to try to correct any misconceptions that may be held by the facility, as well as to foster a cooperative attitude between facility and A.A..

- *Presentation for inmates in facility* – the goal of presentation is to create awareness about alcoholism and possible recovery.
Presentation for staff of Treatment Facility

- Be on time, well groomed and courteous.
- Introduce A.A. and yourself as a resource, with a desire to help alcoholics but with no opinion on the facility’s policies.
- Explain what A.A. is and is not. Emphasis be given on our primary purpose, non-affiliation and anonymity.
- Give information on what happens at A.A. meetings, benefits of home group, what temporary contacts and sponsors do etc.
- Distribute literature. Mention that literature is available from local inter group.
- Invite staff to attend open A.A. meetings.
- Do keep some time for question and answers.
Presentation for inmates of facility.

- Introduce why you are there. (To carry the message of A.A.; what it is & what it is not.)
- Read and explain A.A. Preamble.
- Explain in general twelve steps and twelve traditions.
- Brief about various types of meetings.
- Inform them about A.A. literature – Books, Pamphlets etc.
- Outline the Temporary Contact Program.
- Do leave time for general question session.
- Stick to your own experience. Keep discussion away from therapeutic “issues.”
Meetings at Treatment Facilities.

- There are two types of meetings in Treatment Facilities.
  
i. **Regular A.A. Group** – This is self-supporting and completely responsible for its own affair. These groups are listed in directories and are open for all. Care should be taken while naming the group. The name should not give misleading impression that A.A. runs the facility or, alternatively, that the A.A. group is operated by the facility.

  ii. **Treatment Facility A.A. meetings** – These meetings differ from regular A.A. group meeting. Attendance is restricted to clients in the facility and not open to A.A. in community. These meetings are not listed in directories.
Distribute Literature

Generally following pamphlets are useful for A.A. in T. F.

i. A.A. in Treatment Facilities.

ii. Is A.A. for You?

iii. Is A.A. for Me?

iv. A.A. member – Medication and Drugs.

v. A Newcomer Asks.

vi. Questions and Answers on Sponsorship.

vii. Problem other than alcohol.

viii. A.A. at a Glance.

ix. Where Do I go from Here?

x. The A.A. Group.

xi. How A.A. cooperate with Professionals.

xii. If you are a Professional.

xiii. Bridging the Gap.
Temporary Contact (Bridging the Gap)

Temporary Contact is an A.A. member who works with clients who are being discharged from treatment facilities and helps them bridge the gap to A.A. in the local community.

The longest distance is between the doors of treatment facility and doors of nearby A.A. meeting. Our goal is to shorten this gap by helping the inmate to A.A. meeting upon his discharge.
Guidelines for A.A. members who are Temporary Contacts.

- A Temporary Contact is an A.A. enjoying a comfortable, stable sobriety.
- The Temporary Contact is expected to make direct personal contact with the client while at the treatment centre.
- The Contact and newcomer should attend a meeting on the day of clients discharge from treatment.
- Thereafter, for at least two weeks, the contact will take newcomer to various meetings, introducing him to other A.A. members.
Guidelines for A.A. members who are Temporary Contacts.

- Explain sponsorship to the newcomer, and the importance of obtaining a sponsor without delay.
- The Contact familiarizes newcomer with A.A. literature and meeting list.
- Sometimes it is time consuming to line up temporary contact. Therefore it is important to convince the facility to allow adequate time for the contact and client to get together before the discharge date.
Do’s and Don’ts for temporary contact.

- **DO** – Abide by the facility’s rules. We are there guests.
  - **DON’T** – Do not claim special privileges.

- **DO** – Make sure every A.A. promise is kept.
  - **DON’T** – Do not make any commitment that cannot be met.

- **DO** – Limit yourself to carrying the message of A.A.
  - **DON’T** – Do not talk about medication psychiatry, scientific theories. This is territory for professionals. Do not talk about religion.
Do’s and Don’ts  for temporary contact.

- **DO** – Listen at least as much as you talk.
  **DON’T** – Do not argue about anything with patient or staff. Arguments never win friends.

- **DO** – Live by the spirit of A.A.’s Traditions.
  **DON’T** – Do not expect facilities to follow our Traditions. They cannot and have no need to do so.

- **DO** – Remember you are A.A. to others. Your behaviour can affect others opinion about A.A.
  **DON’T** – Do not give them any reasons to be unhappy about A.A.
Do’s and Don’ts for temporary contact.

- **DO** – Always maintain cheerful humility.
  - **DON’T** – Do not brag about A.A. Just share. Let results speak for us.

- **DO** – Remember you “are responsible.” Let them know about the benefits of sponsorship and temporary contacts.
  - **DON’T** – Do not just carry the message to the facility and leave it there.
Most important

Why do all this,

Simple.

It is good way to keep our sobriety strong. “It works when other activities fail.”