The AA Service Handbook for Great Britain & Continental Europe 2025/26

The Services of AA in Great Britain & Continental Europe

This new edition of the Handbook was approved by the General Service Conference of Alcoholics Anonymous in Great Britain & Continental Europe held in York on the 11th-13th April 2025. Future alterations or additions to this Handbook require a two-thirds majority of Conference.

Ninth Edition 2025

PO Box 1
10 Toft Green York YO1 7NJ

Telephone: 01904 644026

National Telephone 0800 917 7650

"Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities."

"When using digital media, AA members are responsible for their own anonymity and that of others. When we post, text or blog, we should assume that we are publishing at the public level. When we break our anonymity in these forums, we may inadvertently break the anonymity of others" (Understanding Anonymity leaflet).

The pictures of people contained within this handbook are stock images, and are not of alcoholics. No one's anonymity has been broken.

Alcoholics Anonymous – The Preamble

CONTENTS

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism. The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

A Declaration of Unity
This we owe to AA's future:
to place our common welfare first
to keep our Fellowship united;
For on AA unity depend our lives,
and the lives of those to come.

I am Responsible…
When anyone, anywhere,
reaches out for help,
I want the hand of AA
always to be there.
And for that: I am responsible.

Contents

Service Disciplines Executive Summary

Introduction

Chapter One: Public Information

Chapter Two: AA and the Armed Services

Chapter Three: AA and Electronic Communications

Chapter Four: AA and Employment

Chapter Five: AA and Healthcare in the Community

Chapter Six: Media

Chapter Seven: AA in Prisons

Chapter Eight: Probation/Criminal Justice Service (CJSWS)

Chapter Nine: AA Telephone Services

Chapter Ten: Archives

Chapter Eleven: Young People's Liaison Officers (YPLOs)

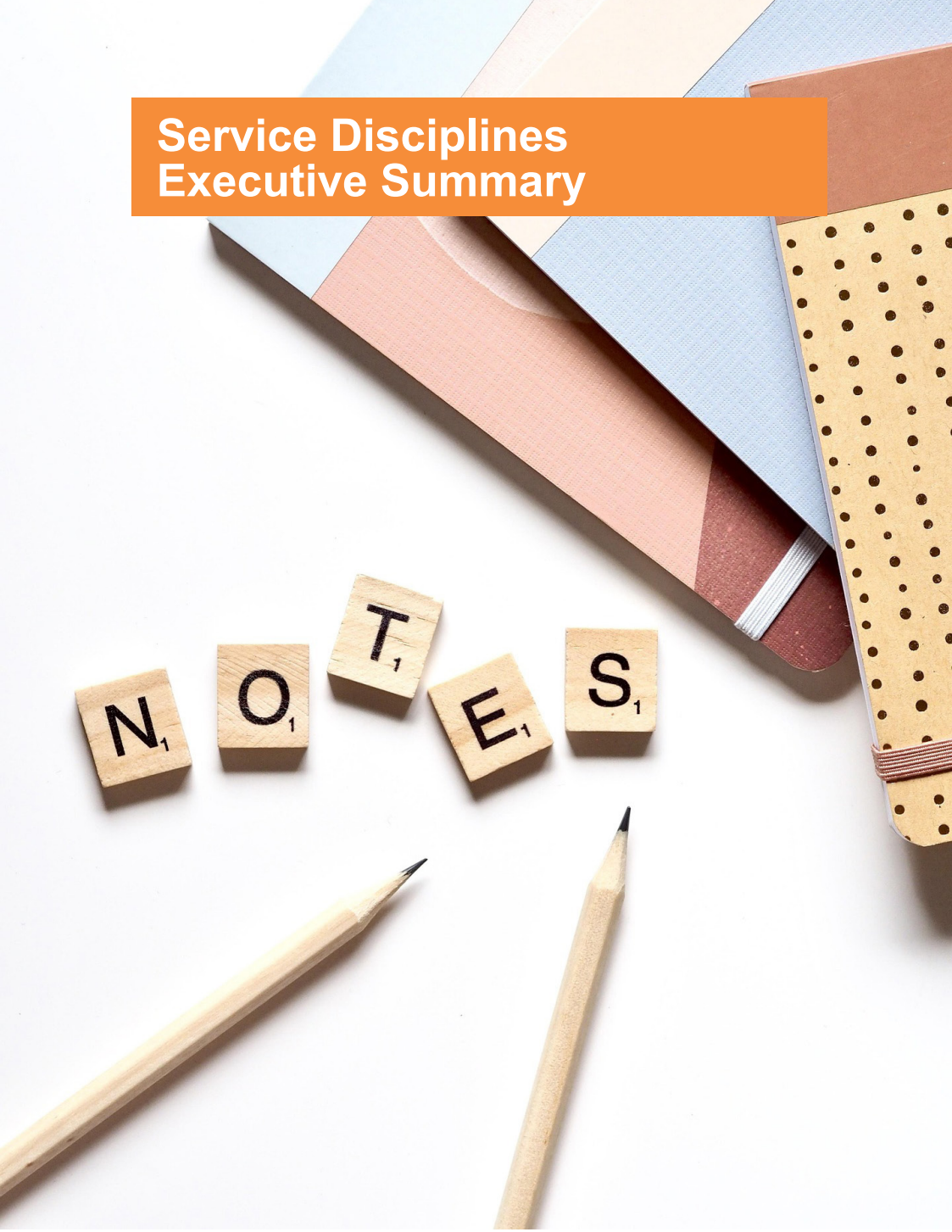
Chapter Twelve: Publications

Chapter Thirteen: Resource Material available from GSO

Appendix X: For AA Members Employed in the Alcoholism Field

Glossary

Service Disciplines Executive Summary



1 Introduction

Service at all levels within the Fellowship is an important part of our recovery, as well as vital to AA's existence.

There are a wide range of service positions that need to be filled at group, intergroup and region.

Some are individual positions and some are part of a team.

All of these service positions require a good knowledge of our Steps and Traditions or a willingness to become familiar with them, and for each there is a suggested length of sobriety. All service disciplines are supported by a relevant sub committee who will share their experience.

These opportunities are for our Primary Purpose, to 'Carry our Message...' and help to develop our personal spiritual health and recovery.

The information below is a brief insight into the various service disciplines.

2 Archives

Our archives are the memories of our fellowship from the first meeting of Alcoholics Anonymous (AA) in Great Britain (GB) and CER until the present time. They tell us what it used to be like and what it is like now.

The role of the archivist is to collect and preserve our history and ensure members anonymity in perpetuity. By these actions we will not lose the history of how we carry the message of recovery, and our memories will remain accessible for generations to come. If you are interested in the history of AA and would like to contribute to the archival collection, a service position in Archives is ideal.

3 Armed Services

By working with the still suffering alcoholic who is or was a serving member of our Armed Forces, we try to ensure that there are telephone responders with lived experience. As Armed Services and civilian life and languages differ, in a crisis we sometimes need to talk to each other from the same place and in the same language. There are also opportunities to raise awareness by working with serving personnel and veterans.

4 Electronic Communications

Electronic communications enable and support collaboration between service disciplines at all levels of the service structure to effectively disseminate information about the AA programme to the general public and professionals.

Modern technology provides tools and opportunities to make the message of recovery even more accessible. Nowadays, the free-for-life support available to the still suffering alcoholic is often just a click of a mouse away or appears with just the simple swipe of a finger on a screen.

The PI & EComms Sub Committee supports the service structure in identifying and utilising traditional and new communication channels to get the message out to where it is needed. The message stays the same even as the many ways we can carry it increase.

5 Employment

Employers are increasingly responsible for the provision of a practical policy and strategy for the health, welfare and safety of employees. AA can offer a significant contribution to this requirement by the Employment Liaison Officers of intergroups and regions, working together with them. All members can play a part in this service by contributing to the distribution of leaflets and posters.

6 First Response Online (FROSC)

We have two online services for the still suffering alcoholic who is reaching out for help. The Online Response Service (ORS) is an email service which is available by emailing help@aamail.org and Chat Now is a live chat service accessible on the AAGB website. If you would like to be the hand of AA for the still suffering alcoholic and become a responder for either of these vital services, please email secretary.fro.sc@aamail.org for a job description and application form.

The First Response Online Sub-Committee (FROSC) is responsible for the administration of the Online Response Service and Chat Now. Compulsory DBS/ Disclosure & PVG check is a requirement (as run by the Charity).

7 Health

Service in Health has always played a major part in AA's history starting with Bill and Bob, and 'the man in the bed'. Within our intergroups and regions, members of the Fellowship are always thinking of innovative ways to inform and attract professionals and patients to AA. The growth of 'open meeting workshops' has enabled us to reach the future generations of healthcare professionals giving them an understanding of the nature of our disease.

8 Literature

Since the publication of the Big Book, literature has been crucial in carrying AAs message of recovery. Our books and leaflets are vital tools in our twelfth step work. In our groups there is always a position for literature secretary – introducing newcomers to literature and helping others stay in touch with our growing library. We also have a Literature Sub Committee (LSC) which is responsible for drafting new or revising existing AA literature. It's always good to see work approved by Conference and it being published. The LSC regularly collaborates with other service disciplines by offering help with drafting, reviewing and updating literature. If you are interested in seeing how AA literature can transform lives, then start by becoming your group literature secretary.

9 Parliamentary Events

The aim of these events is to help professionals and Parliamentarians get a better understanding of AA. While AA does not affiliate with any outside organisation, we cooperate with health and social care professionals who work with people whose alcoholism is part of the problem.

We encourage the wider fellowship to help us to invite professionals and peers who would be interested in hearing more about what we do. This is usually a two-hour event, sponsored by a Parliamentarian and includes shares from two recovering alcoholics and two professionals who have experience of working with us.

10 Prisons

Helping facilitate AA meetings within prisons is a rewarding and exciting way of carrying the message. Seeing the way AA is received is amazing, with participants eager for recovery. Giving hope and help breaks the cycle of prison, drinking and despair and helping someone whose first meeting was in prison go on to attend AA on release and live a productive life is hugely rewarding.

11 Probation

Alcoholics Anonymous relationship with Probation/Community Justice Systems (CJS) is vital in providing a link for those involved with Police, Courts, Prison - on Release, Probation and Social Services.

We work across all areas and levels from using the chit system in groups to

cooperating with CJS workers. This offers hope to alcoholics involved with the Probation/CJ systems looking for a way out of the merry-go-round of alcoholism.

12 Public Information

Public Information (PI) in AA means carrying the message of recovery to the still suffering alcoholic by informing the general public about the AA programme. We do this by getting in touch with professionals and any organisation which is in a position to pass on knowledge of what AA can do for the still suffering alcoholic.

In AAGB, members involved in PI carry the message, using various methods such as distributing leaflets to surgeries and pharmacies, dropping them at libraries and posting with Parish Councils. AA literature and pamphlets are available to any agency directly connected with the public. Poster campaigns are run on buses and trams as well as in motorway service stations, so the message reaches those travelling through our towns, cities and the countryside. Presentations, seminars and talks are given to professionals, employers, prisons, Probation and Criminal Justice services and throughout the Armed Forces. Up to date information is available on request to the media. Every act of service helps to spread the message of hope and recovery that AA offers. The PI & EComms Sub Committee provides a focus to share knowledge and experience of carrying the message whilst maintaining our Traditions across all activities.

13 Roundabout

The Roundabout Sub Committee is working to produce a sharing and caring monthly magazine for Scottish readers. Along with all of your stories, Roundabout has information pages on conventions and gatherings and on group amendments or new and reopened groups. The magazine is produced every month and subscriptions are increasing. The magazine is varied, using photos, cartoons and AA 'one-liners'.

Written submissions sharing your experience strength and hope are always welcome or by becoming a 'reader' for Roundabout.

14 Share

The Steps & Traditions, the Preamble, the Pledge, in fact everything you might need to open a meeting is in your copy of Share magazine.

There are members' stories and interviews, a calendar round-up of Fellowship events and even some photos and cartoons to entertain you. No wonder we call Share 'our meeting between meetings'.

For those who have difficulty getting to a meeting, Share can be a lifeline. We always need support from you, whether it's to send an article in or take out a subscription, Share is a great thing to be a part of.

In Continental European Region there is also the publication **Arena News.**

15 Survey

AA conducts a survey of the Fellowship every five years. The intention of these surveys is to learn more about the Fellowship in Great Britain and Continental Europe so that AA's message of recovery may be disseminated more effectively to the still suffering alcoholic, thus helping us to fulfil our primary purpose.

Additionally, the survey information informs the Fellowship, Conference and the General Service Board regarding the allocation of resources and information that could be useful in communication with the professional community and the Fellowship.

In preparation for the 2020 Survey the Survey Sub Committee was established. As a result of Covid, the 2020 Survey was delivered online and from what we learned doing that, the decision was taken to continue this going forward. The next Survey will be sent out in 2025.

16 Telephones

When a suffering alcoholic, or potential alcoholic has reached a point in their lives when they might want to stop drinking, they turn to Alcoholics Anonymous through the 0800 telephone number or through an AA local helpline.

Often the first contact with AA is through telephones with a responder. The responder listens to them and shares their own experience and journey in recovery. This not only gives the still suffering alcoholic, or potential alcoholic hope, it also serves as a reminder to the responder of what it was like before they came to AA. The only requirement to be a responder is 12 months sobriety, and a willingness to be of service.

The telephone service is delivered through intergroup, sometimes region, or nationally in Scotland. The National Telephone Sub Committee is responsible for maintaining the existing 0800 telephone system enabling the suffering alcoholic access to AA through a single national telephone number!

Did any of this catch your interest? Please get in touch with your local TLO officer who can provide you with more information. Full training is provided.

17 Young People

The aim of the Young People's service discipline is to carry the message of recovery to young people, and to help encourage younger members of the Fellowship into service. Young People's Liaison Officers should ideally have come into recovery at the age of 30 or under.

There is a vibrant and enthusiastic community of younger members of AA who are involved in exciting initiatives to carry the message of recovery to the younger, still suffering alcoholic.

Introduction

1 Growing into Service

A quote from our co-founder Bill W on General Service in AA:

"An AA service is anything whatever that helps us reach a fellow sufferer – ranging all the way from the Twelfth Step itself to a ten-cent phone call and a cup of coffee, and to AA's General Service Office for national and international action. The sum total of all these services is our Third Legacy of Service." (Pass It On, page 347)

AA Service

Alcoholics Anonymous is more than a set of principles; it is a Fellowship of alcoholics in action. Service is at the centre of every AA concept and activity. It is as fundamental to AA as abstinence is to sobriety. Without this giving of oneself to another, there would be no Fellowship. This desire to serve improves recovery.

As newcomers, we see people giving time, energy and love in the service of the Fellowship, and it is suggested that we too should become involved. Those of us who have done this will tell you of the enormous benefits we have received by willingly stepping into service. A great paradox of AA is that rewards come when we begin to forget ourselves.

1.1 What are these rewards?

Simple service tasks have helped to develop confidence, a belief in one's own value and opinions, self-respect and self-worth. We have all found that participating in service activities has helped our recovery.

Everyone in AA has some contribution to make. There are so many ways of practising our Twelfth Step. Some are talented in hospital or prison work, others can write to loners or answer telephones and some have abilities which lie in committee activities or sponsorship. But service is not just for a small number of experienced people. Each one of us has been surprised at the abilities which have emerged with a willingness to grow in service.

1.2 How do we become involved?

AA's Twelfth Step "Carrying the Message" is the basic service that our Fellowship gives; it is our principal aim, and the main reason for our existence. We must carry AA's message otherwise we ourselves may fall into decay and those who have not been given the truth may die.

Carrying AA's message is therefore the heart of our Third Legacy of Service. Any action which helps AA to function as a whole is service. Where better to begin than in our own home group?

1.3 In the group

It is as a result of Twelfth Step work that a group is formed and we discover that we are a small part of a great whole. Regular attendance at our group meeting is in itself a form of service. Group meetings are necessary for maintaining sobriety. Love and effort is needed to keep the group growing and maintained. For some of us it is not always possible to do individual Twelfth Step work but for all of us regularly attending meetings, it is possible to serve within the group by helping to set up the meeting rooms; we can arrive early and help to:

- Put up the slogan signs
- Display the AA literature
- Arrange the chairs
- Greet members, especially new ones, as they arrive
- Help maintain the tradition of self-support
- Make the tea or coffee
- After the meeting, help wash up and clear up

The last two give a great service to everyone yet give us as individuals so much in return, for we all know the shared experiences gained during “washing up therapy” when shyness seems to evaporate. Perhaps here we feel our first sense of purpose and belonging

1.4 Service to newcomers at group meetings

A warm smile of greeting can make newcomers feel welcome. A cup of coffee or tea also releases tension. Giving your name and sharing your experiences on the spot can make them feel they are in the right place. Giving your telephone number, and taking theirs in order to call them, may not seem like service but where would we all be today if someone had not done this for us?

These little efforts on our part are sure steps into responsibility, reliability, and confidence. They are also steps into loving, the sort of loving that makes no demands, asks for no rewards, and fulfils our sense of purpose.

As we grow in sobriety, we may be asked to become a group office , described in our Twelve Traditions as a trusted servant. Each group needs to have certain jobs done in order to function smoothly and responsibly.

Section 2 of the chapter “Group Officers” of the Structure Handbook sets out very fully the work to be done. Our Traditions remind us to be open-minded and that we are but trusted servants, we do not govern.

We may hear of Public Information. This consists of members who ensure that the public is informed about the work we do, and how and when we are available to give them our message. These members are from a collection of groups working closely in intergroups. Some of us who have tried to serve in these ways will tell you how anxious and nervous we have felt to begin with. Others of us were brimming over with over-confidence, aggression and arrogance.

Service helps us to change, and these feelings are soon dispelled. We develop an even greater feeling of belonging and move still further in to loving and caring. The depth of our sobriety is strengthened with each task we do with willingness. Our sense of purpose is further developed.

1.5 Sponsorship, Service Sponsorship and Sponsoring into Service

Essentially, sponsorship is one alcoholic who has made some progress in the recovery programme sharing that experience on a continuous, individual basis with another alcoholic who is trying to stay sober. (from the pamphlet 'Sponsorship: Your Questions Answered').

In addition to sponsorship in the AA programme (e.g. helping someone through the Steps and Traditions), it is suggested that new members are also 'sponsored' into service.

Some AA members may seek a 'service sponsor' who has experience in a particular type of service or role. Although there are different ways of understanding service sponsorship or of sponsoring into service, the two may be viewed in similar terms. Some AA members say that service sponsorship is not separate, but simply a part of sponsorship.

Service sponsorship focuses on AA's Third Legacy of Service. A service sponsor shares experience, strength, and hope about service roles and positions within our service structure. A member may take on responsibilities within the group or further down our inverted triangle – that is, at intergroup and region.

A service sponsor supports and encourages the member in all service activities and leads by example. A service sponsor may suggest opportunities a member might consider in the group or beyond and help the member gain a deeper understanding of AA's Traditions and Concepts.

Service sponsorship helps a member understand the commitment and responsibilities of a service position and whether they are able and willing to meet the obligations of the role.

Please see also the AAGB pamphlets, 'Sponsorship: Your Questions Answered' and 'Growing into Service'.

1.6 A step further

Another service we may be asked to carry out is that of GSR. The mere name itself, Group Service Representative, describes the activity. It means:

- Regular attendance at the group you are serving
- Going to intergroup assemblies
- Having a good knowledge of group opinions, experiences and decisions
- Having an ability to share these with neighbouring GSRs at intergroup assemblies
- Being willing to share the experience of others with the home group

This service is also described in more detail in Section 3 of the chapter 'The Group' of the Structure Handbook. It brings benefits and an added breadth to a "society of alcoholics in action". You will see a broader spectrum of the AA Fellowship, meeting members from many different groups, thus giving a wider circle of AA friendship. Here, too, there will be a further step into responsibility, reliability, confidence and humility. There will be growth into deeper love and understanding, a greater strengthening of sobriety, and more opportunities to carry AA's message to the still suffering alcoholic.

1.7 Service within the intergroup

- Prison sponsorship
- Twelfth-Stepping in hospitals
- Talks to schools, the professions, and outside agencies Telephone service
- Arranging public meetings Arranging mini-conventions

Intergroups may elect up to three Regional Representatives, who attend, participate and vote in regional assemblies, carrying their intergroup's conscience forward to the region.

In most of these activities the responsibility will be shared, creating a deeper bond between groups of members all trying to carry AA's message. Those members who do this work in isolation do not receive the same benefits as those who carry out tasks with one another. Sharing in every activity is the way the Fellowship of AA works best. The more we share our experience, strength and hope with each other, the more we will be able to maintain and deepen our sobriety.

Please also see The Region Chapter, Section 2, "The Regional Assembly" in the Structure Handbook

1.8 Still more ways to serve

By this time we are usually comfortable in our service activities. The growth into responsibility, reliability and confidence is well under way. However, there is still more to be carried out by the willing member. There will be:

- Regional Representatives (elected by intergroups)
- Regional Officer
- Delegates to Conference

These are similar services carried out in the same ways as previously talked about regarding the group and intergroup. They are discussed in section 3 of the chapter 'The Group' of the Structure Handbook.

Benefit
There is an ever-increasing feeling of security within the Fellowship and the sense of belonging is deepened and broadened. We enjoy the fellowship of members from faraway places, whom we might not otherwise meet if we denied ourselves the privilege of service. All of this should improve the quality of our sobriety.

1.9 The loner

Here let us not neglect the member who, because of distance and geography, cannot participate in a local group. These members can give service by writing to other loners, by writing articles for 'SHARE' or 'Roundabout', or sharing with us their experiences and growth into sobriety.

They can keep the General Service Office informed of their whereabouts so that travelling members may have a contact in that area. They may also provide a Public Information service in their particular location. Through service loners can deepen their sense of belonging to the Fellowship.

1.10 The housebound member

Housebound members can be of valuable service to the Fellowship by telephone contact, and by writing letters and articles to 'Roundabout' and 'SHARE. They can maintain contact with the local group, intergroup or region.

1.11 The older member

At some stage in sobriety, many members may be labelled "the older member". Let us hope it happens to us all. Here we may find service in AA is seemingly being taken over by those much younger in sobriety. This is how it should be; our Traditions have always supported the idea of rotation in our service activities, but we may be feeling passed over or even isolated.

We have all had these feelings from time to time, and the older member, continuing in their practice of the Twelve Steps, will surely recognise this. Such a member will take on a measure of quiet solidity by standing aside yet remaining

steadfast to their group and sharing experience when asked. Here another role can be assumed, that of Twelfth Stepping and sponsoring newer members in the varying forms of service. This can be of the utmost help in their own and other's growth in recovery.

The symbol of AA is three-sided: Recovery, Unity, and Service. With Unity we are given Recovery; as Recovery develops we give ourselves in Service, creating deeper Unity and creating for ourselves deeper Recovery. The corners are forever turned; the road is always before us as we need to be continually furthering our progress into sobriety. Along this route we have all benefited from the love, compassion, and understanding incorporated in this three-sided symbol. Let us all, therefore, give these away in service to others in order that we ourselves may continue to grow, and the Fellowship of Alcoholics Anonymous will remain forever steadfast.

2 Information on Alcoholics Anonymous

For AA members carrying the message to professionals, for anyone sent to AA and for anyone referring people to AA.

What is AA?

Alcoholics Anonymous is a Fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

The only requirement for membership is a desire to stop drinking. There are no dues or fees for AA membership; we are self-supporting through our own contributions. AA is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

What does AA do?

AA members share their experience with anyone seeking help with a drink problem. They give person to person service, or "sponsorship", to the alcoholic coming to AA from any source. The AA programme, set out in our Twelve Steps, offers the alcoholic a way to develop a satisfying life without alcohol. This programme is discussed at AA group meetings.

Open speaker meetings: These are open to alcoholics and non-alcoholics. Attendance at an open AA meeting is one of the best ways to learn what AA is, what it does and what it does not do. At speaker meetings, AA members "tell their stories". They describe their experience with alcohol, how they came to AA and how their lives have changed as a result of AA.

Open discussion meetings: One member speaks briefly about his or her

drinking experience, and then leads a discussion on any subject of a drink-related problem anyone raises.

Closed meetings are for AAs or anyone who may have a drinking problem. Closed discussion meetings, conducted just as open discussion meetings, are for alcoholics or prospective AAs only.

Step meetings (usually closed) are discussion of one of the Twelve Steps. AA members also take meetings into prisons and treatment facilities.

AA members may be asked to conduct informative meetings about AA as a part of a programme with other organisations or educational schemes. These meetings about AA are not regular AA group meetings.

Members from court programmes and treatment facilities

In the last few years, AA groups have welcomed an influx of many new members from court programmes and treatment facilities. Some have come to AA voluntarily, others under some degree of pressure. In our pamphlet "How AA Members Co-operate" the following appears:

"We cannot discriminate against any prospective AA member, even if they come to us under pressure from a court, an employer or any other agency. Although the strength of our programme lies in the voluntary nature of membership in AA, many of us first attended meetings because we were forced to, either by someone else or by our inner discomfort. But continual exposure to AA educated us to the true nature of our illness... Who made the referral to AA is not what AA is interested in. It is the problem drinker who is our concern... We cannot predict who will recover nor have we the authority to decide how recovery should be sought by any other alcoholic."

Proof of attendance at meetings

Sometimes courts ask for proof of attendance at AA meetings. In the main this will be dealt with by the Probation/Criminal Justice Service or other professional after care services. Where necessary the following methods have proved to be satisfactory:

- With the consent of the prospective member, the AA group secretary signs or initials a slip furnished by the Court
- The Court furnishes envelopes available to anyone at the end of an AA meeting. The individual mails the envelope to the Court with their name and address, as proof of attendance
- Some AA groups have sheets of paper with the name and address of the group. Anyone wishing to sign the sheet may do so at the end of the meeting. The secretary mails this in the envelope provided by the referring court, clinic, employer or other agency sending people to AA

This reporting of attendance is not part of AA procedure. Each attendee reports on themselves at the request of the referring agency. Thus no AA member is revealing another's AA membership and none of this information is available for publication.

The non-alcoholic addict

Many treatment centres today combine alcohol and other drug addiction under "substance abuse" or "chemical dependence". Patients (both alcoholic and non-alcoholic) are introduced to AA and encouraged to attend AA on the "outside" when they leave. As stated earlier, anyone may attend open AA meetings but only persons with a drinking problem may attend closed meetings or become AA members. Dually or multiply addicted people are eligible for AA membership only if one of their addictions is to alcohol.

What AA does not do:

- Furnish initial motivation for alcoholics to recover
- Solicit members
- Engage in or sponsor research
- Join "councils" of social agencies
- Follow up or try to control its members
- Make medical or psychological diagnosis or prognosis
- Provide 'drying-out' or nursing services, hospitalisation, drugs, or any medical or psychiatric treatment
- Offer religious services
- Engage in education about alcohol
- Provide housing, food, clothing, jobs, money or any other welfare or social services
- Provide domestic or vocational counselling
- Accept any money for its services, or any contributions from non-AA member's sources

The primary purpose of AA is to carry our message of recovery to the alcoholic seeking help. Almost every alcoholism treatment tries to help the alcoholic maintain sobriety. Regardless of the road we follow we all head for the same destination – rehabilitation of the alcoholic person. Together, we can do what none of us could accomplish alone.

3 What professionals have said about Alcoholics Anonymous

Historical Giants

Sir Isaac Newton, in a letter to Robert Hooke in 1675, wrote "If I have seen further (than others), it is by standing on the shoulders of giants."

Doctor William D. Silkworth, known as “the little doctor who loved drunks,” was the first medical giant widely regarded as AA’s “medical saint.” He began his unique and everlasting contribution to AA during the early 1930’s. On July 27 1938, as medical director of Charles B. Towns Hospital, New York, he wrote this inspirational letter “TO WHOM IT MAY CONCERN.”

“I have specialised in the treatment of alcoholism for many years. About four years ago, I attended a patient by the name of William G. Wilson. He was an alcoholic of a type I had come to regard as hopeless. As part of his rehabilitation, he commenced to present his new conceptions to other alcoholics. This has become the basis of rapidly growing fellowship. These facts appear to be of extreme medical importance. Because of the extraordinary possibilities of rapid growth inherent in this group, these events may mark a new epoch in the annals of alcoholism. These men may well have a solution for thousands of these situations. You may rely absolutely on anything they say about themselves.”

Dr. Max Glatt MD, FRCPsych, MRCP, DPM, eminent consultant and Vice-Chair of the Medical Council on Alcoholism, psychotherapist addiction expert and pioneer of alcohol treatment in the UK, wrote:

“Hitherto… the most effective single therapeutic approach has been AA and whatever other approaches may be preferred, most alcoholics would benefit from introduction to AA.” (“Alcoholism,” Hodder and Stoughton, London 1982, p527).

In 1980, Dr Martin Whittet OBE, FRCP, Physician Superintendent of Craig Dunain Mental Hospital, Inverness, Scotland, following 30 years of devoted service to people with alcohol problems, wrote in the Fellowship’s Roundabout publication:

“*May I therefore be allowed as a mere medical man to say;*
Alcoholics Anonymous…I thank you
Alcoholics Anonymous…I salute you
Alcoholics Anonymous…May it be in the scheme of things that the Higher Power shall and will sustain your high endeavours until the very end of time itself and beyond until a time as we know it is no more”.

Cochrane Evidence Review and Authors' Soundbites – AA/12-Step Facilitation (AA/TSF) Works

The 2020 Cochrane Review of 27 relevant scientific studies showed that AA/TSF produced similar benefits to cognitive behaviour therapy and motivational enhancement therapy on all drinking-related outcomes, except for continuous abstinence and remission, where 'AA/TSF was superior.' This is achieved largely through the long-term use of TSF and enduring AA participation. The Review also showed that AA/TSF tended to reduce healthcare costs, since AA support from members is free.

Kelly JF, Humphreys K, Ferri M. Alcoholics Anonymous and other 12-step programs for alcohol use disorder. Cochrane Database of Systematic Reviews 2020, Issue 3. Art. No.: CD012880. DOI: 10.1002/14651858.CD012880.pub2. **https://www.cochrane.org/CD012880/ADDICTN_alcoholics-anonymous-aa-and-other-12-step-programs-alcohol-use-disorder**

"The quality of the research evidence supporting the clinical and public health utility of Alcoholics Anonymous has grown substantially in recent years. Evidence now indicates that when patients suffering from serious alcohol problems are clinically referred to AA they have higher rates of continuous remission and have longer stable recoveries than patients linked to other treatments that also address alcohol problems. Evidence also now demonstrates that the way AA is able to confer this long-term benefit is by its ability to mobilize a number of helpful therapeutic factors simultaneously over time, including by boosting relapse prevention coping skills, enhancing and maintaining recovery motivation, reducing craving and impulsivity, and by increasing spirituality, which can help people to reframe and better cope with stress. All in all, given the massive burden of disease, disability, and premature mortality attributable to alcohol problems each year, and the fact that AA is widely available and accessible for free in most communities, this new evidence indicates AA may be the closest thing public health has to a 'free lunch'."
John F. Kelly, PhD, Professor of Psychiatry, Harvard Medical School.

"AA was created by people who knew what they needed to recover: A new outlook, a new community, and new ways of interacting with other people. The scientific evidence demonstrates that the results of their efforts is a free, grassroots organization that helps more people recover than all professional treatments combined. Giving support is as good for our health as getting it. AA gives a sense of worth and service."
Keith Humphreys, Professor of Psychiatry and Behavioral Sciences, Stanford University, Honorary Professor, Institute of Psychiatry, King's College, London.

In a definitive and impactful interview, Kelly and Humphreys discuss the methods and results of the Cochrane Review, how AA/TSF works and why it is superior to other treatments for alcohol use disorders.

Does Alcoholics Anonymous Work? – YouTube at **https://www.youtube.com/watch?v=lgMjTlwh_LA** Duration: 15 minutes.

Is AA religious, spiritual, neither?

In tapping into the "God idea" and borrowing some religious concepts, language, and practices (e.g., faith, prayer, meditation, confession), arguably AA might be considered "religious", but not a religion. Without any formally agreed upon definition of what "spirituality" actually is, AA's focus on gratitude, hope, forgiveness, and compassion, might be considered spiritual in essence. It has facilitated a self-defined notion of spirituality, including even a non-spiritual, secular spirituality if one chooses, to ensure everyone has a chance at making use of its "protective wall of human community" and all that it has to offer. So, circling back to the original question posed at the outset, "Is AA religious, spiritual, neither?" The answer, would appear to be, "Yes".

Kelly JF. Is Alcoholics Anonymous religious, spiritual, neither? Findings from 25 years of mechanisms of behavior change research. Addiction. 2017 Jun;112(6):929-936. doi: 10.1111/add.13590. Epub 2016 Oct 8. PMID: 27718303; PMCID: PMC5385165.

In the 2020 AA Membership survey of Great Britain and the English-Speaking Continental European Region, when members were asked about spirituality and their notion of a 'Higher Power', 65% of respondents reported that these were based on a secular foundation, compared with only 35% whose views had an overtly religious basis. This explodes the widely-held misconception that AA is a religious organisation, which has historically led to reticence in accessing AA services. AA has members of all religions, no religion and different cultures. See **https://www.alcoholics-anonymous.org.uk/Members/2020-Survey**

World Health Organization (WHO)

The European Framework for Action on alcohol 2022-2025 is the strategic framework for the Region and was unanimously adopted by all of the 53 Member States at the Regional Committee for Europe in September 2022.

Citation. Turning down the alcohol flow. Background document on the European framework for action on alcohol, 2022–2025. Copenhagen: WHO Regional Office for Europe; 2022. Licence: **CC BY-NC-SA 3.0 IGO**.

Focus area 5. "Health services' response" includes:

"Health services should be considered as holistic, learning from people with lived experience and, if possible, including families as part of the recovery process, as well as engaging with external services, including mutual aid organizations to support long-term recovery."

"Health service actions need to be aligned with community action in identifying risky drinking behaviours, providing early interventions before health and social problems become pronounced and severe forms of Alcohol Use Disorders (AUDs) develop that require specialized medical care, as well as ensuring

that specialized services are available for people with AUDs. There is robust evidence that the linkage of clinical services with well-articulated peer-led Alcoholics Anonymous Twelve-Step Facilitation interventions can achieve important outcomes for people with AUDs in relation to achieving and maintaining abstinence, with the additional outcome of substantial cost savings to health-care services."

Priorities for action

(A). "National guidance and investment to integrate health service information and screening and brief intervention services, and combine biopsychosocial treatment strategies with community support over the long term, maintaining contact, offering crisis interventions and support when needed and at different levels of intensity, with active linkages to recovery communities (including clinically related Twelve-Step Facilitation programmes)"

(B). Concerted actions to reduce the social stigma and discrimination that prevents people from accessing alcohol-related support services

Focus area 6. "Community action" includes:

"People with alcohol problems and their families are part of communities. The lived experience that they have can help to inform strategies to prevent alcohol problems and to support recovery. Non-state actors, including nongovernmental organizations (NGOs) and recovery activists, mutual aid and self-help organizations possess expertise, experience and connections that can inform strategies to support recovery, often at insignificant cost to the state, and should be regarded as essential partners in developing and implementing national and local alcohol plans. People recover when they are happy and fulfilled and able to contribute to society."

Liver and Addiction Specialists' Testimonies

Sir Ian Gilmore, Professor of Medicine and Hepatology, President of the Royal College of Physicians of London, President of the British Society of Gastroenterology, Founder and Chair of the Alcohol Health Alliance.

"*I am a health professional engaged in helping to build the evidence-base for preventing the harm from alcohol and, when that is too late, for treating the damage done. I have always been impressed by the strength of evidence for the efficacy of the AA 12-step programme and believe we should be doing more in our hospital practice to raise awareness of this. It is heartening and welcome that NICE acknowledge the benefits of AA programmes in their latest update of the Quality Standard on Alcohol Use Disorders."*

Stephen Ryder, Professor of Hepatology, Nottingham University Hospitals, Chair of the Liver Section of the British Society of Gastroenterology.

"As a liver disease specialist, I see very substantial amounts of physical as well as psychological harms from alcohol. The reasons why people run into problems are many and varied, but every clinician is very aware that the only prospect of a healthy and happy life for many of the people we see is via abstaining from alcohol. While I accept everyone has different needs, I certainly have direct experience of many people who engage with the AA 12 step model and for whom it has made a huge positive change in their lives. I feel strongly that a range of services to help people who run into problems with alcohol should be available and that access to AA is important as part of that."

Dr Ed Day, UK Government National Recovery Champion and Clinical Reader in Addiction Psychiatry, University of Birmingham.

"*The Fellowship of Alcoholics Anonymous provides potentially life-saving support for people with alcohol dependence. It provides both social support for abstinence, but also a programme for living day-to-day that is hard to find anywhere else. The collective wisdom of thousands of people who have overcome dependence on alcohol is an incredible resource that patients of any treatment service can access, at any time, for free. All healthcare professionals should try to learn more about AA in order to encourage their patients to consider it as part of their process of recovery. This is likely to involve attending at least one meeting themselves to fully understand the process and the potential benefits. In my opinion, there are few more uplifting and inspiring experiences than listening to someone in recovery from alcohol dependence share their story.*"

Professor David Best, currently Professor of Addiction Recovery at Leeds Trinity University, and Louise Hibbert found that Quality of Life (QoL) continues to improve over periods exceeding 5 years in recovery. In those who make it to this point, their wellbeing can exceed that typically reported by those never addicted. This concept of **'Better than Well**' offers a model of hope and change and suggests that the goal of recovery is a QoL process of ongoing growth.
Hibbert, L.J. and Best, D.W., 2011. Assessing recovery and functioning in former problem drinkers at different stages of their recovery journeys. Drug and Alcohol Review, 30(1), pp.12-20.

Alcoholics Anonymous Life-Altering Gift to the World

Tom Hanks, double Oscar winner and consummate professional, broadcast in 2024 in 'The Rest is History' podcast:

"I know men and women who had their lives changed by Alcoholics Anonymous. There is probably no other life-altering movement quite like it."

Professor Keith Humphreys, co-author of the Cochrane Review, was quoted:

"If Alcoholics Anonymous was a cancer drug, every body would want it".

Henry Kissinger, American diplomat, politician, United States Secretary of State and National Security Advisor, who lived to be 100 (1923-2023), was quoted:

"America's greatest gift to the world is Alcoholics Anonymous."

Quite so!

4 AA co-operation in research and non-AA member's survey projects

As alcoholism has become a prime concern and target from government departments to local community organisations, more and more agencies and individuals have sought AA co- operation in conducting surveys and other research projects. The subject has been discussed in detail many times and we offer the following to share AA experience on this subject.

First, a letter that Bill wrote to a researcher in 1968 sheds some light on the subject:
"Thanks for your letter which outlines your research project. Whether such a project could succeed in any useful or meaningful way is a question that in my view can't be answered at all until soundings are made where the operation will take place. Therefore, I suggest that you enquire how feasible the project would be in the eyes of at least a few of the prospective participants (local AAs).

There are plenty of AAs who believe in collaboration with researchers, but it is probable that many AAs couldn't care less about scientific or sociological evaluations. Hence there is seeming indifference and hostility. This is the experience of some past researchers, particularly those who require the gathering of statistics, personal interviews in depth, and the like.

I am sure you will have to work with specially interested AAs as individuals. Even they will want to know who will make the value judgements of research reports, what will be done with them, etc.

If you are able to proceed with your plans, I would like very much to know the results."

The following points share AA experience and point of view. AA is not opposed to research and most of our members are grateful for the interest and dedicated efforts of those outside our Fellowship. Any individual AA member is, of course, free to participate in any project they choose. AA meetings traditionally have been

devoted exclusively to the AA programme. Most AA groups have not distributed questionnaires or arranged for interviews during meeting time. However, some groups have done so after meetings.

Local intergroups frequently can put researchers in touch with AA members who are interested in participating in such projects. In large communities, perhaps a committee or sub-committee made up of AA members, who are interested in these projects, could take the responsibility for finding others who share this interest. In smaller communities the group members or steering committee may be able to perform the same function. Most AAs would like to find a way of co-operating, within the AA Traditions, which would also be technically feasible for a researcher.

Decisions about such projects should be made by the local AA groups in the area where they occur, after careful scrutiny of the projects as the requests might become too numerous.

And one final quotation from Bill W, from As Bill Sees It (page 45)

"Today, the vast majority of us welcome any new light that can be thrown on the alcoholic's mysterious and baffling malady. We welcome new and valuable knowledge whether it issues from test tube, from a psychiatrist's couch, or from revealing social studies. We are glad of any kind of education that accurately informs the public and changes its age-old attitude toward the drunk."

GSO welcomes additional information from groups and members with experience to share.

5 For AA Members Employed in the Alcoholism Field

"We see that we have no right or need to discourage AAs who wish to work as individuals in these wider fields. It would be actually antisocial were we to discourage them."

Bill W. AA Comes of Age. P117

Appendix X is primarily for the benefit of AA members who are either considering employment or are already employed in treatment centres, or working in the wider field of alcoholism. These suggestions and experiences from other members, covering a wide variety of jobs and occupations, may well also help other professionals such as doctors, nurses, social workers and researchers.
Whilst this is not part of AA Service, it is considered to be sufficiently important to be included as an appendix in the Service Handbook.

As AA members we do not presume to advise about professional matters. The experiences shared here, however, do stress the real value of a strong foundation in AA recovery and service.

Chapter One: Public Information

Public Information is part of the Third Legacy of Service in action. Along with Recovery and Unity, we have inherited this legacy from the co-founders of Alcoholics Anonymous. One of the co-founders, Bill W, had this to say:

"To reach more alcoholics, understanding of AA and public goodwill toward AA must go on growing everywhere. We need to be on still better terms with medicine, religions, employers, government, courts, prisons, mental hospitals and all enterprises in the alcoholism field.

Concept XI – Twelve Concepts for World Service

AA needs effective communication with the general public and professional communities involved with the alcoholic.

1 Introduction

Public Information (PI) in AA means carrying the message of recovery to the still suffering alcoholic by informing the general public about the AA programme. We do this by getting in touch with professionals and any organisation which is in a position to pass on knowledge of what AA can do for the still suffering alcoholic.

The aim of this chapter is to guide you through the PI process, from the formation of a committee through the functions such a committee can perform. What follows suggests ways members and local PI Committees can do PI work.

Those undertaking PI work for the first time, at group, intergroup or at regional level, should be encouraged to read this Handbook.

It is important to remember that all PI work should be carried out within the confines of AA's 12 Traditions. We should remain anonymous at the level of press, radio and TV on a personal basis, but that does not mean that we cannot identify ourselves fully when dealing with professionals. We are not secret; those doing PI service work need to be accessible by name and address to those with whom we wish to conduct our business.

Our purpose is to inform the public through as many organisations as possible what AA is, how it works, and where contact can be made. We should make clear that it has worked for us. An important element of this is a willingness to spread the message by contacting appropriate professionals and services.

Sponsorship into service and working with other PIs at committee level provides experience for this type of service.

2 What is PI?

PI work is also referred to as 'Carrying our message to the general public'.

Experience has shown that intergroups and regions are the bodies that can most usefully discuss PI matters, and from which one or more PI committees can be formed.

Groups are encouraged to undertake local PI working with their intergroup where possible. PI is a co-operative venture. Communication across intergroup is essential, and the sharing of service experience is usual. Positive steps should be taken to keep the health, prison, probation/courts and the criminal justice service in Scotland, and all other liaison officers informed of PI developments.

The service structure of AA encourages the appointment of an Intergroup/Region PI Officer to help co-ordinate events, information and skills.

3 The PI Committee

For many years local Public Information Committees (PI Committees) have been the way the message has been carried to the professional community and, in many places, this is still the case. A PI Committee at intergroup may be formed of elected members from the Fellowship, and chaired by the intergroup PI liaison officer.

In deciding what activities the PI Committee initiates in relation to other service disciplines, the following may be useful:

"In keeping with our Traditions of placing principles before personalities, who or what committee carries the AA message is not important as long as our message is carried to the still suffering alcoholic."

Another thought to keep in mind is, 'Easy does it'. Once you get started with the formation of a committee, it is a good idea to take it easy at first until you are sure just what the needs are, and how many people you have available to get the job done. For some committees the first task is to inform AA members about co-operating with professionals, sometimes to correct misconceptions about whether AAs should be taking the initiative in going out to non-AA members. A few newly formed PI Committees have reported resistance from members who fear they will be doing 'promotion' by letting professionals know about AA. Whether or not misconceptions exist, it is always a good idea to make sure there are members available and eager to start before setting up ambitious projects.

4 Communication

Communication about PI work is important for ongoing initiatives. Some PI Committees:

- share with one another via region or by exchanging minutes of their meetings
- share activities and ideas with the General Service Office (GSO) for possible inclusion in AA Service News and other relevant communication channels
- are visible to other AAs through regular attendance and participation at group and other AA business meetings
- share service experience, encouraging sponsorship into service
- let the Online Response Service and intergroups know whom to approach when there is a need for a PI contact

Often, the AA programme works when an active alcoholic wants help, and an AA is on hand to give that help. Professional services such as doctors, alcoholism agencies, treatment facilities, employers, or even a relative may be crucial to getting that alcoholic into recovery because of the message that had been carried to them.

5 Working within the Traditions

Our guiding principles as a Fellowship are contained in the Twelve Traditions. The responsibility for preserving our Traditions rests with AA's and with us alone. In order to preserve them, we must understand them. We cannot expect non-AA members to comprehend and observe the Traditions unless we are well informed about them ourselves.

Thoughtful reading of AA literature, such as 'Twelve Steps & Twelve Traditions' and the pamphlets, 'AA Tradition – How it Developed', and, 'An Introduction to our 12 Traditions', is recommended for anyone who works with non-AA members. In addition, the first few pages of, 'How AA Members Co-operate with Professionals', point out some ways all the Traditions are relevant for PI.

6 Contacting professionals

A very important part of PI work is contacting professionals for example to:

- establish formal contact between the organisation and AA
- ask for an appointment with a representative of the organisation
- provide speakers to give talks about AA and share their experience
- provide literature

Sponsors may wish to invite sponsees, as this will provide a valuable learning experience. When carrying out PI work, ideally, two members should present. On some occasions it may be convenient to play an AA Conference approved video.

Members can provide AA published literature at a talk, and it is suggested that a telephone number should be provided for attendees to contact AA following the meeting.

Most people at a meeting of non-AA members want to know what AA is and what it does, rather than hear a drinking story. Speakers may wish to draw upon the AA Preamble and Twelve Traditions and also provide a short history of AA. PowerPoint slides may also be used. Some presentations and templates are available on the AAGB website (www.alcoholics-anonymous.org.uk).

We should all bear in mind the statement of PI adopted by the Fellowship in 1956:

"In all public relations, AA's sole objective is to help the still suffering alcoholic. Always mindful of the importance of personal anonymity, we believe this can be done by making known to him, and those who may be interested in his problems, our own experience as individuals and as a Fellowship in learning to live without alcohol. We believe that our experience should be made available freely to all who express sincere interest. We further believe that all efforts in this field should always reflect our gratitude for the gift of sobriety and our awareness that many outside of AA are equally concerned with the serious problem of alcoholism."

What your committee decides to do will be dictated by your own needs and experience. The suggestions here are just that – suggestions. It is hoped they will spark your thinking and give you leads on new ways to approach professional people where you are.

7 Personal identification

Conference 1998 decided "In today's society there is an ever-increasing requirement for protecting the identity of members of the Fellowship."

When working with outside agencies for PI work, the host may require individual personal identification, such as a letter from intergroup or region, passport, ID card, driving licence or letter of invitation. It is important that members of Alcoholics Anonymous remember that they are guests and co-operate fully.

Notification of the arrangements made for visits or talks including, where appropriate, the sponsoring PI Officer, should provide the names of members attending to the host organisation.

It is important that Alcoholics Anonymous does not become invisible – some loss of anonymity is inherent in PI work.

8 Ways to proceed

The following are some of the ways AA members in your area can tell others about AA, and to keep the friends of AA working with us.

8.1 Public Information meeting for non-AA persons

A public information meeting can do a lot to strengthen relationships with non-alcoholic friends and help make new friends. Such meetings can be set up by the PI committee and sometimes groups hold public meetings (to celebrate the group anniversary, for example). Many groups regularly invite to their open meetings: doctors, ministers, police officers, employers, public service workers and others who deal with active alcoholics.

Many such meetings benefit from being in the day time, as most professionals find this more convenient in their schedule. It is a good idea to send invitations well in advance to professionals before a meeting is planned. Send invitations to friends of AA and to all who are interested in the problem, such as, doctors, judges, alcoholism agencies, clergy/spiritual leaders, HR directors, social workers and the media.

8.2 A suggested meeting format

Short introduction by AA Chair who should try to cover the following:

- welcoming remarks: AA's willingness to help whenever it can

- anonymity: A request that all present respect the anonymity of AA members present
- what AA is and is not
- AA is inclusive
- AA is available 24/7 and we are self-supporting through our own contributions
- ways of contacting AA

As many non-AA members have helped us, a non-AA guest speaker may be invited to discuss AA from their point of view and experience. An AA may speak briefly about their drinking experience, the AA programme and especially their recovery. Some time could be provided for questions from visiting professionals. There could be concluding remarks from the Chair, thanking all those present, reminding them of how AA can help and where it can be found, and asking those attending to encourage other professionals they know to come to future open or public meetings.

It is not always necessary to include non-AA speakers but experience shows that many PI Committees have had larger attendance and support from other professionals when a non-AA speaks well of our Fellowship.

Many PI Committees use the 'public meeting' as an introduction to professionals and other interested parties. Professionals attending such meetings could then be contacted by members offering literature, telephone service numbers and lists of local meetings, as well as giving further talks about how AA can co-operate.

8.3 AA Speakers at non-AA meetings

Talks to outside groups are perhaps the most widely used and are a popular method of PI. Detailed suggestions on this means of communication will be found in the pamphlet, 'Speaking at non-AA Meetings'. The pamphlet, 'AA at a Glance', is often used as a give-away item when members speak to non-AA member's groups.

8.4 Participation in non-AA member's events

In observance of Tradition Six (co-operation but not affiliation) many PI Committees participate in events sponsored by non-AA organisations.

PI liaison officers are often asked to participate in Health Fairs or voluntary organisation open-days, sponsored by local colleges, public health organisations etc. Members of the local PI Committee frequently staff an AA booth to provide any information requested. Some health and social care providers along with intergroups and regions organise Alcohol Awareness days which provide other opportunities for AA to co-operate.

Display units and literature for use in these events can be obtained from GSO. Experience shows that by attending such events, the message is not only carried to those visiting but also to other voluntary or professional organisations

attending the sponsored event. This sometimes creates follow up actions for the PI Committee.

8.5 A Public Information workshop for members of the Fellowship

Many PI Committees have found that holding workshops to look at local needs and opportunities, the service structure and the Traditions are a great way of exploring ideas and settling on methods to carry the message.

Here is an example:

An all-day workshop was planned. It was opened with the Serenity Prayer, followed by a reading of the short form of the Twelve Concepts. The Fifth Tradition was also read and related to the First Concept. The Tradition says that each group has but one primary purpose – to carry the message; the ultimate responsibility and authority belong to the groups. A brief presentation on PI was given. The bulk of the day was devoted to discussion. Breakout groups were organised to discuss specific topics with a secretary appointed to take notes and report back.

Discussion topics were assigned to each breakout group. Suggested topics could include:

- what is the best way to form a PI Committee?
- how do we form a working plan for the committee?
- what is the best way to reach and engage with professionals?
- how can we sponsor members of the Fellowship into service?
- how can we support doctors, clergy, and police?
- how can we bridge the gap between professionals and AA?
- what types of presentations are appropriate for professionals?
- what is AA's attitude towards professionals?

Each breakout group then presented a summary of their discussion to the full workshop.

8.6 A public information newsletter

One PI Committee chair started a PI newsletter, sharing news of what was going on in the area, urging members to get involved and to help find others who wanted to participate. One newsletter suggested the use of literature as a training tool for new committee members and as handouts to professionals where appropriate. The chair included lists of literature appropriate for these purposes, and offered to work with local committees. The use of Conference approved literature for all PI work was recommended.

The newsletter was circulated to all Group Service Representatives, suggesting that attendance at intergroup and participation in PI Committee meetings would be a great way to get involved in carrying the message.

9 Suggested professional contacts and helping organisations

Some suggested organisations that you can provide information and help to are:

- Alcohol Treatment Units, NHS Alcohol Support, community-based alcohol services
- Agencies involved with delivering work related assessments to health benefit claimants
- Age UK
- Approved Premises
- Carers e.g. Carers UK
- Chambers of Commerce
- Charities
- Citizens Advice – a source of a wide range of organisations
- Civil Service – www.gov.uk, follow 'contact' links
- Deafness – e.g. Deafness Support Network. (The Big Book is available in BSL on DVD)
- Dentists
- Ethnic Community Groups
- GPs – also Practice Nurses and Practice Managers within the surgery
- Health and Safety organisations
- Health Service e.g. District Nurses, Community Psychiatric Nurses, Health Visitors, Nursing Tutors, Health Education Services, to name a few
- Hospitals e.g. Accident and Emergency, Medical and Surgical wards, substance misuse
- Homeless hostels
- Housing Aid and Advice Centres
- Housing Department of Local Authority
- JobCentre Plus – e.g. Personal Advisors, Employment Engagement Team, Disability Employment Advisor, all of whom may welcome greater awareness
- Libraries – may be willing to display posters, literature, videos etc.
- Magistrates – The Clerk to the Court can be very helpful e.g. by displaying posters and passing on literature to the magistrates
- Mediation services – divorce and separation specialists
- Pharmacies
- Police e.g. Police Community Support Officers, Community Liaison Officers and Domestic Violence Units
- Prisons
- Probation Services – besides dealing with offenders, they can provide help and support with severe family problems. May also use the chit system
- Public Health and Health Planning departments
- Rotary Club
- Samaritans
- Schools and colleges
- Spiritual leaders
- Trades Unions

- Vision support (Literature is available in Braille and spoken word Big Book on CD. There is also a soundtrack on the Big Book BSL DVD)
- Welfare Rights
- Youth and community services

Regular contact with organisations is important as staff may change frequently. Check the local press to ensure that the AA telephone number and website details are listed in the Helpline Services. Make posters and contact cards available to doctors' surgeries, pharmacies, police stations, Citizens Advice, churches etc. Also make available AA contact details to charities and other organisations.

10 Suggested Literature at events

Please find following some suggested literature that may be appropriate for distribution at events (available from GSO):

- An Introduction to our 12 Traditions (www.alcoholics-anonymous.org.uk/Members/Document-Library/)
- Speaking at non-AA Meetings
- A Message for Professionals
- How AA Members Co-operate with Professionals
- A Member's Eye View of Alcoholics Anonymous
- Problems other than Alcoholism
- Understanding Anonymity
- Is AA for you?
- A Brief Guide to AA
- The AA Member, Medication and other Drugs
- The God Word

(Revised 2024)

Chapter Two: AA and the Armed Services

Alcoholics Anonymous in Great Britain and Continental European Region has over four thousand AA meetings a week. Ideally there will be meetings close to almost every Naval, Army and Air Force Base where UK Service personnel serve.

Conference 2009 supported the proposal that intergroups and regions appoint Armed Service Liaison Officers.

The purpose of this guidance is to provide practical help for AA members, groups, intergroups and regions who wish to become involved with carrying the message to the Armed Services.

2:1 Introduction

Intergroups and regions are responsible for the appointment of an Armed Services Liaison Officer [ASLO] to work in conjunction with other intergroup and regional officers. The role of the ASLO is to establish and maintain communication between Alcoholics Anonymous and The Royal Navy, The Army and The Royal Air Force and to report back at all levels within intergroup or region. It is also important to cultivate similar contact and communication with Community Welfare Officers and organisations such as Soldiers, Sailors, Airmen and Families Association (SSAFA) and Veterans-UK.

Familiarity with the local area and a thorough working knowledge of the AA Service Handbook for Great Britain & Continental Europe are vital before accepting the role of Armed Services Liaison Office.

2:2 Making contact

It is suggested that a list of all local service establishments be created and the aims of AA involvement explained to groups, intergroups and in particular, serving and ex-service personnel in AA who may wish to become involved.

Initial contact with service establishments can be made by letter or e-mail, perhaps followed by a telephone call to seek an appointment (intergroups should have headed paper for this purpose). Shared experience with serving personnel suggests that suitable first contacts may be the Padre/Chaplain, Medical Practice Manager/Nurse, Welfare Officer or local SSAFA.

2:3 Meeting an armed service professional

Our initial role will be to provide information about what AA can and cannot do, always remembering that the Fellowship is committed to remaining non-professional. Our approach is based on our abilities, as recovering alcoholics, to work effectively with the still-suffering alcoholic and when co-operating with the armed services we should always adhere to our Traditions.

There is a requirement when visiting Armed Service establishments that we take photo ID with us, e.g., a driving licence or passport. Prior to our visit we may also need to inform the establishment of the names and vehicle registrations of AA members who will be attending.

It is suggested that we:

- arrive punctually, suitably dressed
- politely introduce ourselves
- take writing materials and record items relevant to our intergroup/region
- do not engage in debates about outside issues [Tradition 10]
- never commit Alcoholics Anonymous or its members beyond our Traditions

2:4 Conducting an AA Presentation

It is suggested that we:

- communicate the aims and the primary purpose of Alcoholics Anonymous
- explain what happens at AA meetings, provide the National Helpline number, national and local website addresses
- do not talk too long about our personal experience
- allow ample time for questions
- remain, if possible, after the presentation should someone wish to talk in private

2:5 Co-operating with the Armed Services

Alcoholics Anonymous receives invitations to attend Health Fairs organised by the Armed Services: AA participation usually requires a display stand with a table-top selection of AA literature. Experience has shown that since many other organisations are often also involved, Health Fairs are ideal opportunities for 'networking'.

The Fellowship also receives invitations to attend Armed Services presentation events equally effective for making good contacts – at which AA representatives need to be prepared to just sit and listen. During breaks or at the end of an event are the times to introduce ourselves and talk about AA.

2:6 Intergroup Armed Services Liaison Officer

(Refer to section 'The Intergroup' of the Structure Handbook)

An Armed Services Liaison Officer is responsible for establishing local links with the Royal Navy, the Army, the Royal Air Force and any other organisation that is connected with the Armed Services.

These trusted servants should have an established period of sobriety, ideally not less than two years, and a good working knowledge of the AA Service Handbook. It is recommended that they should serve for not less than two years and not more than three years.

It is through the intergroup assembly that the intergroup ASLO is elected and to which they subsequently report. An important task of the Armed Services Liaison Officer (as with all other trusted servants) is to keep intergroup informed of events on a regular basis.

It often takes a long time to establish a good working relationship between AA and the Armed Services. In order therefore to safeguard progress to date and ensure continuity should another member need to take responsibility at short notice, it is good practice for the intergroup Public Information Officer to have access to all relevant Armed Services material, contacts and details of forthcoming presentations.

2:7 Regional Armed Services Liaison Officer

(Refer to section 'The Region' of the Structure Handbook)

It is recommended that trusted servants should have at least three years continuous sobriety, a good working knowledge of the AA Service Handbook and serve for a maximum of three years, confirmed annually. It is through the regional assembly that the regional armed services liaison officer is elected. They should ideally have some experience at intergroup level, though this is by no means essential.

The task of the regional armed services liaison officer is to communicate with, and to collate information from, the intergroup armed services liaison officers within their region. This information is passed on to region in the form of a report given at each regional assembly.

Another function is to encourage intergroups where activity is slow or non-existent.

Experience has shown that workshops offer a forum where armed services liaison officers can share their experiences and encourage others into service.

2:8 Expenses

(Refer to the finance sections of 'The Intergroup' and 'The Region' of the Structure Handbook)

The payment of expenses depends upon the group conscience of the region or intergroup, always bearing in mind our Tradition of self-support.

In principle, any member elected to a service position should not be prevented from fulfilling the role for financial reasons. Therefore, when carrying out an intergroup or regional function duly authorised service workers may be offered the option of claiming expenses. For a variety of reasons regions and intergroups will probably differ in their approach to this question; although there may be no uniformity, there need be no controversy if decisions are taken with common sense and in the spirit of AA.

Service is defined as that which makes the Twelfth Step possible.

Expenses should not be claimed for individual 'face to face' Twelfth Step work.

2:9 Recommended reading/literature

- Twelve Traditions
- AA Structure and Service Handbooks for Great Britain & Continental Europe
- AA and the Armed Services
- A Message f Professionals
- Speaking at non-AA Meetings
- How AA Members Co-operate
- Who Me?
- AA at a Glance
- 44 Questions
- AA Service News
- AA Comes of Age
- The AA GB Website
- For details of Confirmation of Attendance 'Chits' see Chapter 9.3.2 page 61 (Probation/Criminal Justice Services)

(Revised 2017)

Chapter Three: AA and Electronic Communications

The purpose of this guidance is to provide practical help for AA members, groups, intergroups and regions who wish to use electronic communications in their service work.

"A vast communications net now covers the earth, even to its remotest reaches... nothing matters more to AA's future welfare than the manner in which we use the colossus of modern communication. Used unselfishly and well, it can produce results surpassing our present imagination."

Bill W, The AA Grapevine, Inc., November 1960

3:1 Introduction

This guidance is not intended to be a technical manual; its purpose is to:

- give guidance on the appropriate use of electronic communication in AA service work
- outline the role of the Electronic Communications Liaison Officer (ECLO) at intergroup and region level
- outline the guidance of Alcoholics Anonymous Great Britain (AAGB) in respect of our presence on the Internet

3:2 Email

Electronic mail is a widely used and accepted method of communication. It is cheap, effective and very fast, and used regularly as a service tool in AA. It is, therefore, vitally important to ensure that our use of this facility conforms to our Traditions, and special care must be given to guarding the anonymity of our members. It is recommended that the blind carbon copy (bcc) option be used when emailing multiple addresses, unless all recipients have agreed otherwise.

It is recommended that officers at intergroup and region use AA email addresses for service correspondence rather than their own personal email addresses. Not only does it give a more professional appearance, especially when emailing to recipients outside the Fellowship, but it ensures continuity as the AA email address is transferred to the next office holder when rotation occurs.

It is not recommended that business email addresses are used for AA service work. As well as potentially breaching the anonymity of the member, many employers object to employees sending/receiving private emails and actively monitor their mail systems.

3:3 Bulk email (spam)

The term “spam” is widely used as a derogatory term for any kind of unwanted electronic communication and is seen as a major nuisance. Spam is email sent to a recipient not known to the sender, and/or mail that has not been specifically requested by the recipient. Adding inappropriate or out-of-context messages to mailing list communications could also be included under the spam heading. It is, therefore, strongly suggested that AA members do not send bulk unsolicited emails for AA service work i.e., email ‘mail shots’, as to do so could be in violation of UK law and bring the AA name into disrepute, damaging the reputation of AA as a whole.

3:4 Online Video calls

Conference calls using video are a most cost-effective method of online communication.

Various applications and programmes are available for video and conference calls, and many are freely available on the Internet. These applications enable calls to be made computer to computer – often with additional functionality to transfer documents between the callers as an added benefit. Such systems can be used on laptops, PC’s and mobile devices, so these can be an ideal way for remotely situated members to engage in discussion.

Conference calls and internet communication could be considered as a way of reducing the costs of small service meetings.

3:5 Electronic Communications Liaison Officer (ECLO)

The principal role of the ECLO is one of liaison, communication and co-ordination between groups, intergroup, region, and the Public Information and Electronic Communication Sub Committee (PI & EComms SC) and to facilitate the correlation and dissemination of relevant information between these principal service areas. Therefore, a good understanding of the Traditions and the Service and Structure Handbooks is more important to the role than technical knowledge. A minimum of three years' sobriety is recommended, as is a general competence with using computers and other digital technology.

If desired, a committee of technically skilled members could be formed to assist the ECLO in setting up, maintaining and updating the digital technology used by intergroup or region, with the ECLO acting as chair of this committee. Such a committee would provide an opportunity for less experienced but technically skilled members to engage in service.

The ECLO:

- is the liaison point between the local Fellowship and the PI & EComms SC, advising the intergroup/region on the availability and use of the facilities available on the AAGB website and other information technology resources
- is responsible for checking the accuracy of any local information posted on the AA GB website (i.e., meeting list addresses and postcodes, local web page content etc.) to ensure that out of date or misleading local information is not published

3:6 The AA GB website

The national AAGB website is located at www.alcoholics-anonymous.org.uk and is a multifunction site with dedicated areas allocated to fulfilling our primary purpose and to providing services to the Fellowship.

The website is administered on behalf of the Fellowship by the General Service Board (GSB) via the PI & EComms SC and by the General Service Office (GSO) of Great Britain & Continental Europe.

In addition to the PI & EComms SC and GSO staff, website services are supported by third party suppliers for server hosting, managed IT services, security and technical support which may be outsourced by the GSB.

In accordance with Conference 2013 decision, the AAGB website allows the following external links:

- the websites of other national AA GSOs
- mapping software, to aid searches for meetings
- language translation software, to aid people for whom English is not their first language
- secure payment services to allow members to use the online shop

Further, a Conference 2019 decision allows the PI & EComms SC to seek approval from the GSB for appropriate external links, provided a clear disclaimer is displayed, warning that the user is leaving the AA website.

3:7 Local websites

The national AAGB website provides microsite functionality for intergroups/regions so that local service information can be published and updated. This facility is free of charge to the user. Each microsite should be maintained in accordance with our Traditions and the guidance given in our Structure and Service Handbooks. Access to the Content Management System is provided via a secure microsite manager user account, and it allows easy creation and editing of microsite web pages.

The availability of intergroup and regional microsites removes the need to maintain and pay for externally hosted websites outside of the national AAGB website. It is strongly recommended that any intergroup or region with an external website take advantage of the AAGB website hosting facilities for local information, saving AA money as well as having a centrally maintained meeting finder database, promoting Unity.

The content of local websites should be kept updated regularly by those responsible, generally the intergroup or regional ECLO.

If any personal data is published on a microsite, due care must be taken to comply with all relevant data protection legislation and guidance.

3:8 Online Responder Service and Chat Now Service

AA GB provides two online response helpdesks where members of the public can make enquiries about AA and AA meetings.

Online Response Service (ORS) - where emails are sent to help@aamail.org
Chat Now Service (CNS) - certain pages of our website allow a visitor to open a keyboard chat.

These services are administered by the First Response Online Sub Committee (FROSC).

The aim of these helpdesks is to encourage an individual to call the national helpline number and to attend local meetings.

The helpdesk enquiries are answered by teams of online responders. Qualifications for this are:

- two years' continuous sobriety
- experience of service within AA
- a thorough understanding of the programme of AA and a good understanding of the Traditions

- computer literacy
- ORS requires experience and familiarity with sending email across the Internet
- CNS requires the ability to answer queries quickly and succinctly

When applying to be a responder, applicants will also need to agree to a basic DBS/ Disclosure & PVG check, as they will be volunteers for the Charity.

Full training is provided to those new to ORS or CNS, before they are expected to act as responders.

The FROSC reviews the activities of the ORS and CNS taking care to ensure that the services are sufficiently resourced, have appropriate leadership in the form of Administrators and have succession plans in place for when the Administrators rotate out. Administrators hold positions on the FROSC, and they may also appoint assistants to help with training and other administrative functions.

3:9 Important points to remember

Although there can be many advantages to using information technology, we must always remember that there can also be disadvantages. Care must be taken to ensure that no member is disenfranchised through lack of digital technology or internet connection.

When using email in PI work, remember that your email may be the first contact the recipient has ever had with the Fellowship – and first impressions matter. Use an AA service email address to send to recipients outside the Fellowship.

Remember the recipient of your email cannot see your smile, or hear the tone of voice you use, so it is easy to give offence where none was intended. Be aware, also, that your email could be passed along to other recipients, unknown to you.

Courtesy and politeness in written communications is always essential, and we need always be mindful of our Traditions and general code of conduct.

A document called ‘AA Style and Tone of voice guide’ is available from the Document Library on the AAGB website. It contains useful information to assist drafting electronic communications in a consistent and accessible way.

The email accounts supplied by AAGB are protected by individual passwords. Only those users who are authorised should be able to access them.

Anonymity is the spiritual foundation of our Fellowship. A ‘Hints and Suggestions on Internet Safety’ card is available from GSO with suggestions on how to preserve Tradition 11 when using the Internet and social media.

A File Storage platform is available for service work, and is separate to the AAGB website. It is similarly protected by individual user accounts and passwords.

Note that using the File Storage area cannot guarantee the security of service documents - whilst every effort is made to maintain stability, it should be used as a working storage repository rather than a long-term archive.

Be aware that anything posted on the AAGB website is accessible to all.

3:10 Summary

Electronic communications are evolving swiftly. New features and services, which are not available at the time of writing this guidance, will appear. There will be greater advantages to be gained – and greater pitfalls to avoid. We are responsible – not only for making the best use of the service and facilities available – but also of ensuring that it is used with integrity and in accordance with our Traditions. If we do this, we will not go far wrong.

(Revised 2025)

Chapter Four: AA and Employment

Section A of this Guidance is published to assist Employment Liaison Officers (ELOs) to carry AA's message to employers and also contains suggestions for AA groups in the workplace while Section B is published to help individual members who are employees.

4:1 Section A

Since the early days of our Fellowship, AA has sought to carry its message to employers, hence Chapter 10 of the “Big Book” ‘Alcoholics Anonymous’. In Great Britain & Continental Europe the General Service Conference has considered since 1982, how best to carry the message to the workplace in a structured way. At present intergroups and regions support and appoint liaison officers at local level to deal with this branch of service within PI/Service Committees (see Chapter 1 on PI).

4:1.1 Employment Liaison Officers (ELOs)

The responsibility of ELOs is to carry AA’s message to employers within their local area, supported by intergroup and region and a PI/Service Committee if one exists. Employment specifically concerns any organisation employing or serving staff companies, trade unions and associations, government departments and/or related agencies. An established period of sobriety (ideally not less than two years) and a good knowledge of the AA Service Handbook for Great Britain & Continental Europe are necessary before accepting this role. Willingness to commit to not less than two years and not more than three years’ service and the ability to deal with a wide range of professional people and talk about AA when invited to do so, are also qualities that have proven to be desirable. The service term may depend on the individual conscience of the Intergroup.

4:1.2 Regional Employment Liaison Officers (RELOs)

The Regional Employment Liaison Officer (RELO) attends regional committee meetings and reports on ELO activity, chairs ELO committee meetings, supports new and existing ELOs and helps to coordinate regional employment activity.

4:1.3 Activities

Many employers see alcoholism as a very wasteful drain on resources and are often encouraged to find that AA does not cost them either time or money. They see the advantages of a sober worker who attends AA and will often display and make available AA literature.

Experience has shown that a business-like approach to employers is most likely to succeed. Often a phone call to ascertain the right person to contact is required, asking for the name and title of the person who deals with alcohol policies or employee welfare. This could be the Personnel Manager, Welfare Office , Occupational Health Nurse, Health and Safety Office , Company Doctor or Managing Director. An approach should then be made by telephone, e-mail or letter to that person, requesting a meeting and followed up by a written confirmation if requested. Intergroups and regions should supply properly headed paper for this purpose if needed.

4:1.4 Co-operation with employers and employee assistance programmes

Many employers have set up Employee Assistance Programmes (EAPs) to help employees whose drink problem affects their efficiency and well-being Experience has shown that AA can help in the following ways:

- by making posters, literature, local contact numbers and details of local AA meetings available
- offering to talk to staff or management about the AA programme including showing appropriate presentations
- by making available the cumulative experience of over two million recovering alcoholics
- by explaining what AA is and how AA can help with the problem of alcoholism in the workplace
- by putting employers in direct contact with men and women who have achieved sobriety in AA and who are willing to share their personal experience freely with any problem drinker who seeks help

4:1.5 AA does not plan or set up alcoholism programmes

It is important to establish that AA does not plan or set up alcoholism programmes for employers, rather AA should be presented as a community resource available to the employee with a drinking problem. Bodies such as Alcohol Concern and its affiliated Regional Councils, the Medical Council on Alcohol and Alcohol Focus Scotland provide such a service and many AA members are active in the work of these. We are reminded that AA has no opinion on outside issues including alcohol policies but that does not mean we cannot co-operate within our Traditions.

4:1.6 Large companies

In larger companies, which may have formal programmes for problem drinkers, one employee may be given the job of acting as a counsellor for alcoholic employees. They may sometimes be an AA member who has had the necessary training to qualify for such a job. The counsellor generally works closely with the medical department and since this kind of work constitutes professional activity, it is therefore not Twelfth Step work.

4:1.7 AA groups

Tradition Six: An AA Group ought never endorse, finance or lend the AA name, to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.

Some companies that have formal programmes for problem drinkers may support the formation of an AA group. Experience suggests that an AA group is most successful when the non-alcoholics who have co-operated limit their “support” to making facilities available for group meetings. Meetings held on

company premises, whether in company time or not, are within the Traditions of AA, provided that no strings are attached. AA groups within a company made up entirely of employees of that particular company can be helpful in introducing the AA programme to the problem drinker.

Where a company employs a counsellor who is also an AA member, an AA group can usually be set up without difficult , following traditional AA procedures. In such cases, it is appropriate for the AA member to take their place as a member of the group. Where there is no known AA member on the company's staff, an outside AA group may be invited to assist with the responsibility of forming and sponsoring a group made up of company employees. In most areas the local AA groups should be able to handle all referrals, making "employee only" groups unnecessary.

In businesses where there is no structured programme of help informal arrangements can be made for AA members to meet employees who have a drink problem and who may wish to stop. This is not professional counselling but simply an AA member carrying the message of recovery.

4:1.8 Trade Unions

Unions should be dealt with in similar ways to employers. However, our experience shows that before contacting local branch officers, an approach initially to their headquarters is not only courteous but also beneficial in carrying the AA message. Often they will supply you with details of who to see or may arrange it directly.

Many Unions and employers organise conferences, trade shows and information meetings. Attendance at these meetings can usually be arranged through the organisers or the support of a friendly contact. Experience has shown that any ELO/PI/Service Committee organizing these events should ensure that literature and information provided addresses the professionals' attending and also carries the message to any potential AA members who may be present. Follow up from anyone attending the meeting should be expected and welcomed.

4:1.9 To summarise

Guided by our Traditions, the ELOs can act as a contact for employers within an intergroup, work as part of a PI/Service Committee and share information with other intergroup officers and the RELO, in order to offer our programme of recovery to all problem drinkers who come to the notice of employers.
AA welcomes any opportunity to:

- Meet with any employer to discuss ways AA can co-operate
- Provide presentations (online or face-to-face) to explain AA to employees
- Take employees with a drinking problem to AA meetings See section 5:4 for links to further online resources

4:2 Section B

4:2.1 Personal anonymity

Perhaps one of the most frequent questions asked by newer members at group meetings is “Should I tell my employer that I am an alcoholic”? Clearly the answer to this must rest with the individual but is likely to be influenced by whether or not the employer in question is enlightened on the subject of alcoholism. Exercising prudence and seeking advice from a sponsor or other AA members with experience around this can be helpful.

4:2.2 Personal involvement

Because of the complexity of the circumstances which can arise when members find themselves becoming involved in this field, we should be aware of the dangers to our security and sobriety unless we tread carefully.

In some situations, it may be appropriate to Twelfth Step a fellow employee, but it is usually better for an AA member to refer a problem drinker to another AA member outside the company. The sole concern of AA is the personal recovery and continued sobriety of those who turn to it for help with their drinking problems.

The Fellowship is committed to remaining forever non-professional, and the AA approach is essentially a simple one based on the unique ability of recovered alcoholics to work effectively with other problem drinkers.

4:3 Recommended literature available from GSO

- AA Service and Structure Handbooks for Great Britain & Continental Europe
- Speaking at non-AA meetings
- How AA members Co-operate with Professionals
- A Member’s Eye View of AA
- AA as a Resource for Employers
- When Drink Stops Working
- A Message for Professionals
- A Brief Guide to AA
- Is AA for you?
- Who Me?
- For details of Confirmation of Attendance ‘Chits’ see Chapter 9.3.2 page 61 (Probation/Criminal Justice Services)

4:4 Online links

For online use the link for literature is https://bit.ly/3vuHy6f

Summary of resources available when working with Employers https://bit.ly/3uvvFvi

Online information service for Employers: https://bit.ly/2SzsWnF

Videos for Professionals https://bit.ly/2SFod3S

Sample presentations given to Employers https://bit.ly/2RJWfDZ

(Revised 2021)

Chapter Five: AA and Healthcare in the Community

5:1 Introduction

The purpose of this chapter is to assist Health Liaison Officers (HLOs), at intergroup or region, and all members helping the still suffering alcoholic, through cooperation with the healthcare profession.

AA has a history of working with the healthcare community, whether visiting patients in hospital (Bill and Bob visiting 'The Man on the Bed'), talking to doctors and nurses either in hospitals, treatment centres or GP surgeries, making presentations to communities or talking to a patient referred to AA. Frequently, the alcoholic is referred to as a 'problem drinker', 'alcoholic dependent' or 'suffering from alcohol use disorder'.

The AA Great Britain & Continental Europe website has an extensive section on Health that can be viewed as follows:

- Health within the Members Service Disciplines Area. This includes an Introduction, Health Resources, Roles and Terms of Reference of the Health Sub Committee
- Healthcare within the Professionals Social Sectors Area

See also the sections on Safeguarding on the website and in the AA Structure Handbook for Great Britain & Continental Europe

5:2 Communication

Intergroups and regions are responsible for appointing Health Liaison Officers (HLOs), who ideally, should work as a member of the local AA combined services committee, working with Liaison Officers from other service disciplines. HLOs should aim to establish contact and maintain communication with healthcare professionals and report back to their intergroup/region.

It is important that HLOs communicate with other AA members working in health liaison in their area. The primary role of the regional HLO is to support and co-ordinate the work of intergroup HLOs. This way, the AA message of recovery can be passed more effectively. Do not be afraid to seek advice from other intergroup HLOs, your regional HLO or a member of the Health Sub Committee. Regular reporting is an effective way of communicating activity and ideas between intergroup, region and the sub committee.

5:3 Ideas for activity

There have been many changes in the NHS, and in the provision of mental health and substance misuse services, over the last few years. Our message remains the same, whether we are delivering it directly to a patient or to a professional in the hope that it will be passed on to problem drinkers.

Perhaps start by investigating and listing potential healthcare contacts in your area, such as hospitals, medical / treatment centres, mental health charities, surgeries, medical training establishments, public health and wellbeing teams at local authorities, and any other healthcare establishments where a health professional may come into contact with a problem drinker.

The lists below offer some ideas on how HLOs, together with their intergroup and / or region, can move towards achieving our primary purpose:

- Provide stands at local events
- Invite/accompany professionals to open AA meetings
- Give talks to groups of health professionals
- Develop contact with medical training facilities with the objective of including Open Meeting Workshops (OMWs) in their curriculums
- Establish contact with local government health and wellbeing teams

Hospitals/Treatment Centres:

- Look for opportunities to display AA literature, always asking for permission first
- Work closely with hospitals/treatment centres for problem drinkers

- Find out if there is an Alcohol Liaison Nurse or Liver Specialist Nurse, contacting them directly to see if there is help we can offer
- Investigate the opportunity to help with staff or student development
- If there is no AA meeting in the hospital, look into the possibility of helping to start one up
- Ask a local group to develop a good working relationship with the hospital

GP Surgeries and Health Centres:

- Look for opportunities to display AA posters and literature, talking to the Practice Manager first to obtain their support
- Make use of any central distribution point, such as Integrated Care Boards (ICBs), for sending information out to GPs, Health Centres and pharmacies
- Liaise closely with Social Prescribers, who are healthcare professionals employed in GP practices, to support patients with multiple needs including alcohol issues, by signposting to community groups and services
- Try to ensure staff have a supply of contact cards with the helpline number. Local meeting lists may also be useful
- Talk to your own GP and/or Patient Participation Groups (PPGs) about how AA has helped you and how you would like to help others
- Offer to arrange a speaker for their training days to explain how AA works
- Contact local ICBs to see if there are opportunities to offer talks or OMWs, or to carry the message in other ways

Other possible contacts may include: Alcohol Forums, Alcohol Support Services, Alcohol Problems Advisory Services, Drug and Alcohol Action Teams (DAATs), Alcohol and Drug Partnerships (ADPs) in Scotland, Social Work departments, Treatment Centres, Rehabilitation and Substance Misuse Teams, mental health charities and various other alcohol awareness projects. It also may be worth researching Psychiatric Day Hospitals/ Centres, Home Detoxification Services, Clinics, Dentists, Community Health Centres/ projects and Pharmacies.

Many educational establishments that deal with health education would appreciate talks from AA members or OMWs - see AAGB website. These include Universities, Schools of Medicine, Nursing, Paramedic Practices, Health Scientists, Colleges with Health and Social Care departments or those that run Counselling Courses, local Health Initiatives run by ICBs or DAATs and GP Vocational Training Scheme programmes.

There is real benefit from working with other AA liaison officers.

5:4 Meeting healthcare professionals

Our role is to provide information about AA, what it can and cannot do, always remembering that as a Fellowship we are committed to remaining non-professional. Our approach is based on our ability, as alcoholics who have recovered from the illness of alcoholism, to work effectively with the still suffering alcoholic.

When meeting a healthcare professional, it is suggested that we:

- Turn up on time, suitably dressed
- Politely make yourself known
- Provide information on local meetings, the National Telephone Service and 'Chat Now' service
- Be fully aware of the Steps, Traditions and Concepts
- Never discuss individual AA members
- Do not give medical advice to anyone
- Do not engage in debates on outside issues such as budgets, medical staff shortages or the NHS
- Never commit Alcoholics Anonymous or other AAs beyond your remit or our Traditions and Concepts
- Record and share items relevant to region/intergroup
- Don't be afraid to ask questions. It is also important to listen as it is the way we learn
- Enjoy your role, safeguard the position and pass on your experience at rotation. If the experience is new to you, make use of the experience of other members in your area

5:5 Hospital/treatment centre meetings (groups and sponsored)

There are two forms of meeting suitable for these premises:

- **The regular AA 'open or closed' group meeting**, run according to guidance in the Structure Handbook, using the hospital/treatment centre as a venue. These meetings welcome patients being treated for alcoholism and should honour Tradition Seven
- **An AA sponsored meeting held solely for inpatients.** These meetings are not open to AA members in general, nor are they listed in AA's 'Where to Find'. AA members from outside do service at these meetings. This type of meeting may not be self-supporting. It may be necessary for the AA organisers to provide speakers, refreshments and AA literature. Inpatients generally undergo treatment for relatively short periods, and so the continuation of the meeting depends heavily on the facilitating AA members. It is usual for these meetings to be open, to allow health professionals to attend

5:6 Starting a meeting at a hospital/treatment centre

Discuss the idea at intergroup, region and combined AA service meetings to establish support from local members. Experience has shown that a minimum of four AA members are required, who are prepared to commit to support the meeting for at least one year. The HLO, with support from the service committee, should then make contact with the hospital/ treatment centre to discuss the form of meeting to take place on their premises.

5:7 Visiting patients in hospital

The HLO may establish contact with a hospital or treatment centre, creating an opportunity to visit patients on the wards and share our experience, strength and hope. A small team of volunteers should be prepared to visit the wards on a basis agreed with the hospital, reporting back to intergroup.

Volunteers may have to be registered with the hospital administration and this may include a Disclosure and Barring Service check (DBS). A DBS check is not transferable and is held by the individual, but requested by the medical unit.

Volunteers must abide by the hospital /treatment centre rules; we are only guests. At all times, the hospital staff have control and determine our access to patients. We are invited onto the wards by the staff. We are allowed to talk to patients only with their consent. These conversations are strictly confidential.

- Limit yourself to carrying your own story of recovery
- Be willing to listen, more than talk
- Have a thorough knowledge of the Steps, Traditions and Concepts, and live by their spiritual foundation

Although we visit the wards as individuals, we will be known as members of AA by people in the hospital, and our appearance, language, manner and conduct may influence their opinion of AA as a whole.

- Always maintain a courteous, cheerful humility about the amateur status of AA. We are not professionals, but we are experienced in recovering from alcoholism
- Do not talk about medication, psychiatry or scientific theories on alcoholism
- Never interfere or comment on the treatment or drug regime of the patient. This is the sole responsibility of the doctors and nurses
- Do not boast about AA. Let results speak for themselves

When taking responsibility for meetings in a professional centre, it is necessary to maintain contact with members of staff there.

5:8 GP surgeries/healthcare centres

General Practitioners (GPs) provide an obvious opportunity for health liaison (see also section 5:3 above “GP Surgeries and Healthcare Centres”). Simply mentioning AA during a doctor’s appointment is a start.

A short meeting or email contact with the Practice Manager or nurse may generate enough interest for a formal presentation to surgery staff, perhaps during a weekly/monthly staff meeting.

The format of the presentation may vary and could include:

- How AA works
- Stories from individual members
- What AA has to offer
- The presentation of an OMW
- Ways in which AA and health professionals can work together

Presenters should leave the attendees with solutions/suggestions that they can use. Always stress AA’s benefits and that we are a free resource.

5:9 Pharmacies

Pharmacists have become a first point of call for many. Making yourself known to local pharmacists and supplying literature, posters and AA contact cards may prove beneficial. Some pharmacy chains are reluctant to display posters that are clearly visible to the public, but are willing to display them in private consultation rooms. Take time to discuss opportunities that might be of mutual interest.

5:10 Other NHS or healthcare groups

Many different groups are involved with health, whether funded by the NHS, local government wellbeing hubs, charities or groups with specific interests. Those involved with mental health or addiction may benefit from a knowledge of Alcoholics Anonymous. Be prepared to invite any healthcare practitioner or contact to a local open AA meeting.

5:11 Useful approved literature

AA produces a considerable number of leaflets and videos that are continually being reviewed and these are available from the General Service Office. A full catalogue is available online.

5:12 Restricted access caused by a Covid-19 pandemic

Our experience during the Covid-19 pandemic was that restricted treatment access made it extremely difficult and sometimes impossible to practise our primary purpose. Although many of our activities had to be cancelled, postponed or amended, we could still maintain contact with individuals and organisations.

Should similar restrictions occur again, it may be beneficial to follow a path similar to that taken during Covid-19:

- Face-to-face contact can be replaced by virtual AA meetings with individuals or small groups, provided permission from an organisation is obtained when required, and that the risk of spreading infection (or just getting in the way) is agreed and safely addressed

- Medical staff could be given AA contact cards and appropriate supporting literature. Patients might be encouraged to make contact and speak virtually, or to meet in a safe location on discharge. Drug and alcohol liaison and liver specialist nurses can be especially supportive

We need to be regarded as an additional rapid, local and free resource that can always be called upon.

5:13 Alcoholics Anonymous/12-Step Facilitation (AA/TSF) NICE Recommendation and Cochrane Evidence Review

National Institute for Health and Care Excellence (NICE) Recommendation

The NICE Quality Standard (QS11) '**Alcohol-use disorders: diagnosis and management'**, commissioned by NHS England, published July 2023, provides 'best practice' recommendations in England and Wales. The Quality standard is the new Gold Standard for Alcohol-use disorders (AUDs).

HLOs can mention this information when they talk to professionals and adults seeking help for an alcohol-use disorder, noting that it does not come from AA, and being mindful of Traditions 6, 10 and 11.

QS11 covers identifying and supporting adults and young people (aged 10 and over) who may have an alcohol problem, and caring for people with alcohol-related health problems, as well as support for their families and carers.

Out of the 5 Quality Statements set out in QS11, **Quality Statement 2** states:

'Adults seeking help for an alcohol-use disorder are given information on, and support to access, community support networks and self-help groups.'

This is relevant to the 12-step programme offered by AA.

Further information on the NICE QS11 can be found at:
https://www.nice.org.uk/guidance/qs11

Cochrane Evidence Review

The Cochrane Review of 27 relevant scientific studies showed that AA/TSF produced similar benefits to cognitive behaviour therapy and motivational enhancement therapy on all drinking-related outcomes, except for continuous abstinence and remission, where AA/TSF was superior. This is achieved largely through the long-term use of TSF and enduring AA participation. AA/TSF also tended to reduce healthcare costs since AA support from members is free.

(Kelly JF, Humphreys K, Ferri M. Alcoholics Anonymous and other 12-step programs for alcohol use disorder. Cochrane Database of Systematic Reviews 2020, Issue 3. Art. No.: CD012880. DOI: 10.1002/14651858.CD012880.pub2.)

The Cochrane Review can be found at:
https://www.cochrane.org/CD012880/ADDICTN_alcoholics-anonymous-aa-and-other-12-step-programs-alcohol-use-disorder

In this AA Service Handbook for Great Britain & Continental Europe, Introduction, Section 3, 'What professionals have said about Alcoholics Anonymous', there are quotations from and the link to a YouTube interview about the Cochrane Review with co-authors, John Kelly and Keith Humphreys.

Does Alcoholics Anonymous Work? YouTube at:
https://www.youtube.com/watch?v=lgMjTlwh_LA

(Revised 2025)

Chapter Six: Media

1. AA and the media
2. Working with the media
3. Newspapers and magazines
4. Radio
5. Television and films

6:1 AA and the media

Many people in the media have great respect for AA although some may not know much about it. Because we are not seeking publicity for ourselves as individuals, they are usually more willing to co-operate with us and observe our personal anonymity requirements once these are explained to them. Service work involving professionals is for members who are willing to make the contacts we need to make. It is not necessary to be an expert in communications. What is required is a willingness to spread the message by making contact with the right people to pass that message on. All that is needed is to say who you are and what you hope to do. Our basic task is to tell the public through as many organisations as possible what AA is, how it works, and where contact can be made. First of all we should make clear that it has worked for us.

6:2 Working with the media

Ever expanding contact with the media is vital for carrying AA's message. The Features or Community Features desks of local newspapers, radio and TV stations can be contacted by telephone. There are opportunities for anonymous interviews, phone-ins, articles and programmes on AA as well as advertisements and community service announcements.

Any contact from the national media should be passed to GSO at York as this could affect all groups.

AA has no opinion on outside issues. Even when a member states that an opinion is his or hers and not AA's, it might be seen by others as AA's opinion. It is usually better to give no opinion at all.

It is important to explain the relevant Traditions before an interview or talk takes place.

In all media reports of any kind try to ensure that the AA help line number and website address are mentioned at least once.

Helpline: 0800 917 7650

http://www.alcoholics-anonymous.org.uk

We are not able to participate in discussions on alcoholism and treatment methods, other agencies and organisations or medication and drugs. We are simply there to carry the message of AA.

6:3 Newspapers and magazines

Many local papers have "Helplines" or similar local services sections where details may be published free of charge. Some PI Committees in large towns and cities may find the occasional paid advertisement of meetings times and addresses, together with local telephone service numbers worth considering. Feature stories, articles, letters and announcements in newspapers should be encouraged within the guidance of our Traditions of Anonymity, but will require full name and address to be provided stating that "it is not for publication". Reporters are welcome at our open meetings and the only restriction on reporting is a request not to disclose the name of any AA member.

6:4 Radio

Radio (including hospital radio), public service announcements, information features and phone-ins are an important part of public information. Many PI committees record taped information messages for local hospitals and radio networks. As with much of our PI work, approaches should be made to the director of the radio station concerned by e-mail or letter. The most important aspect to get across during the radio time is the name Alcoholics Anonymous and the AA service telephone number and website address at least twice per broadcast. When agreeing to speak at radio stations, seek to get agreement for any webcam to be switched off during the broadcast, so that anonymity can be preserved. It is advisable to notify the telephone service prior to the broadcast to ensure sufficient Twelfth Steppers to meet the increased response.

Many radio stations hold discussions regarding alcoholism with voluntary organisations. Co-operation within the Traditions is essential as it carries our recovery programme to both the listener and the voluntary organisations. Discussions with other alcohol agencies and treatment services should bear in mind our Tradition of having no opinions on outside issues as well as anonymity.

6:5 Television and films

Public service announcements are broadcast by independent television companies and some local cable television stations. Contact can be made through the Community Programme producer. The additional benefit of seeing as well as hearing the AA telephone service number and website address and the name of Alcoholics Anonymous reinforces this media announcement.

In all cases of service, but especially with regard to the media, private telephone numbers should not be used unless they are an integral part of an AA telephone service. Numbers of other agencies and organisations should not be used.

With regard to anonymity of the AA member, it is important that they should not appear identifiably on the screen at any time, in any circumstance whatsoever. With this in mind, many PI Committees make full use of the AA DVDs as an ideal format that overcomes this problem of anonymity when carrying the message through local television stations.

It is recommended that TV programmes, other than public service announcements, should be dealt with by the General Service Board communicating directly with the TV companies.

(Revised 2008)

Chapter Seven: AA in Prisons

1. Prison groups
2. Prison Liaison Officers (PLOs)
3. Communication
4. Literature
5. Code of Conduct

Our Fellowship has long recognised our responsibility for carrying the message of AA to the suffering alcoholic in prisons in Great Britain & Continental Europe. It is recommended that AA groups should be established in all prisons and young offenders' establishments.

Responsibility for sponsorship of prison groups has been placed by Conference with the intergroup and is exercised through the intergroup Prison Liaison Office . As a member of Alcoholics Anonymous you are there by permission of the Governor and staff and it must be remembered that every Governor, although working within a national framework, has the right of decision in his or her own institution.

Familiarity with prisons in the local area and a thorough knowledge of the 'AA Service and Structure Handbooks' for Great Britain & Continental Europe are vital before accepting the role of Prison Liaison Office .

7:1 Prison groups

Prison Group Chairs are appointed according to the intergroup conscience. These Chairs facilitate prison meetings and visit the prison on a regular basis. It is recommended that Chairs have a minimum of three years' continuous sobriety. Security clearance is invariably necessary. Wherever possible, a team of AA Prison Group Chairs should be maintained so that inmates will gain a broader view of how AA works.

So far as the Fellowship is concerned, female members may be included in the panel of agreed Chairs for male prisons, provided they are accompanied by a male AA member or male AA members on the panel for female prisons, and provided they are accompanied by a female AA member, subject to the approval of the Governor.

As with all meetings, it is desirable that prison groups discuss the whole of the AA programme of recovery using every opportunity to introduce the Steps and Traditions and referring to the Big Book. In this way, it is possible for inmate members to learn that they can live the AA way of life prior to release.

Prison group members should, wherever possible, be encouraged to take an active part in their group in accordance with AA Traditions. Whenever possible, Prison Group Chairs should adopt only a supporting role.

AA members may be invited to speak at a prison group meeting at the discretion of the Chair. It is recommended that any such speakers have a minimum of one year's continuous sobriety. They need to be aware that they may also require security clearance.

7:2 Prison Liaison Officers (PLOs)

Prison Liaison Officers organise schedules for prison visits as well as facilitating communication with the relevant prison. Communication is reported back to the intergroup and region.

7:3 Communication

Prison Group Chairs share reports with their intergroup Prison Liaison Officer (IPLO) on a regular basis, outlining what is occurring within the prison(s) for which they are serving as Chairs.

Prior to release prisoners are encouraged to make contact with the Fellowship within their local area through the relevant Service Office. AA Members who wish to correspond with prisoners should do so only through the prison correspondence programme operated through the General Service Office.

Where no AA group exists at a prison, the local intergroup is encouraged to make every attempt to form one. Permission to establish a new prison group must be obtained from the Governor. The initial approach should be made by the Intergroup Prison Liaison Office .

Experience shows that participation of prison group sponsors in meetings at national conventions and in regional Prison Sponsor meetings can be useful in raising awareness of prisons service within the Fellowship and expanding member service experience in it.

7:4 Literature

Every effort should be made to ensure that the prisoner induction pack, together with sufficient literature, is available to prison AA members. Additional AA publications e.g. SHARE and Roundabout (with contact details removed) can also be provided by the local intergroup.

7:5 Code of Conduct

Abide by the laws and regulations governing visitors to prisons. These are very clear and very strict. Check with the particular establishment you will be visiting.

As a member of Alcoholics Anonymous, you are there by permission of the Governor and staff. Act accordingly. From their point of view you will be AA's representative and their respect and esteem for the Fellowship as a whole will depend on your conduct.

- Act always with courtesy and diplomacy.
- Your appearance, language, manner and conduct will affect everyone's opinion of AA
- Failure to observe prison rules is a criminal offence and could cause AA to be banned, so do not be tempted to do favours for prison group members and give them cigarettes that are forbidden, or carry in or take out a card, letter, money etc. The message is all we take in, and we take nothing out
- Obey smoking regulations. If inmates can't smoke, AA visitors shouldn't either
- In accordance with our Preamble, we have no authority to discuss medication, theories on alcoholism, professionally prescribed treatments or obtaining parole. We are there only to carry the AA message
- AA does not participate in meetings which are the responsibility of another agency in the field of alcoholism. If other agencies also have meetings within the establishment, the authorities should be informed that we are not affiliate
- Be punctual and observe the establishment visiting times
- The personal example of the prison sponsor is our greatest asset with prison authorities and in carrying the message to prisons.

(Revised 2008)

Who You See There, What You Hear There, Let It Stay There

Chapter Eight: Probation/ Criminal Justice Social Work Services (CJSWS)

The term 'offender management service' is used in this Chapter to indicate Probation Services in England and Wales, and Criminal Justice Social Work Services in Scotland.

Co-operation with bail hostels, courts, the Police services and local solicitors' organisations might sensibly be included in the remit of Probation/Criminal Justice Social Work Services Liaison Officers.

8:1 Introduction

Experience has shown that positive results can follow when groups, intergroups and regions co-operate with the offender management service with a view to helping the still suffering alcoholic.

In our pamphlet "How AA Members Co-operate" the following appears:

"We cannot discriminate against any prospective AA members, even if he or she comes to us under pressure from a court, an employer, or any other agency.

Although the strength of our programme lies in the voluntary nature of membership in AA, many of us first attend meetings because we were forced to, either by someone else or by our inner discomfort. But continual exposure to AA educated us to the true nature of our illness. Who made the referral to AA is not what AA is interested in. It is the problem drinker who is our concern. We cannot predict who will recover, nor have we the authority to decide how recovery should be sought by any other alcoholic."

A good working relationship between AA and the offender management service often takes many months and sometimes years to build. Experience shows that, as in many areas of service, setting up a system of co-operation is most likely to prove successful if patience and perseverance are practised.

8:2 Groups

(Refer to section 'The Group' of 'The AA Structure Handbook for Great Britain & Continental Europe'.)

Tradition Five tells us that "Each group has but one primary purpose – to carry its message to the alcoholic who still suffers."

Sometimes the way in which a person enters AA may seem unorthodox, controversial or even in breach of our Traditions. However, a closer look will show us that AA is not interested in how a person comes to us but simply in how we can help in that person's release from alcoholism. Each group is autonomous and how it chooses to co-operate (if at all) with the offender management service is for the group conscience to decide. One method could be the participation of the group in the confirmation of attendance or 'chit' system, the details of which may be found in Section 9:3.2 below.

8:3 Probation/CJSWS Liaison Officers

8:3.1 General points

Resources
It is hoped that each Liaison Officer will be sponsored into service and passed relevant information by the person who is rotating out of office. To support Liaison Officers AA has prepared a Liaison Officers Pack: Probation/CJS available from GSO and in the AA (GB) Web site's Documents Library.

All Liaison Officers should familiarise themselves with the following AA literature:

- Twelve Traditions
- 'The AA Service Handbook for Great Britain & Continental Europe' and 'The AA Structure Handbook for Great Britain & Continental Europe'.
- 'Liaison Officers Pack: Probation/CJS'
- The leaflet 'Co-operation between Alcoholics Anonymous, Probation Services and Criminal Justice Services', intended for both members and for criminal justice professionals. The leaflet is included in the 'Liaison Officers Pack: Probation/CJS', in the website Documents Library and can be purchased as AA literature
- AA Web site and what it has to offer those involved in this area of service.

The AA (GB) Web site http://www.alcoholics-anonymous.org.uk/ has a section to assist Liaison Officers, in the Members' Area under Service, and then Disciplines. The section 'Probation/Criminal Justice Services' carries background information, news about recent and forthcoming events, and links to resources such as the Liaison Officers Pack and stories from members, the website will be updated in the event of significant changes within the probation/criminal justice systems. The Web site also has a section carrying information for professionals in the Legal/ Criminal Justice areas.

Co-operation across AA
It is suggested that the Liaison Officers work closely with their AA colleagues in other service areas, in particular with those in Prison Liaison and Public Information. They may also need to co-operate across intergroup and regional boundaries, as an offender management service may cover an area, which includes more than one AA intergroup, or region.

A number of intergroups and regions have found it valuable to encourage the setting up of small teams to assist Liaison Officers and to provide local contacts across the larger offender management service areas.

Budgets and expenses
(Refer to 'AA Money' in Section 7 of 'The AA Structure Handbook for Great Britain & Continental Europe.)

It is suggested that Liaison Officers should prepare annual budgets for their service activities. These should be prepared according to the established procedures of each individual intergroup or region. They might include sums for travel to Regional Assemblies, the purchase of AA literature for placing in offender management and courts' offices and other places, travel to national events like the regional officers meeting or Probation/CJSWS Seminars, and any projects planned for the following year.

The payment of expenses depends upon the group conscience of the region or intergroup, always bearing in mind our Tradition of self-support.

- Service is defined as that which makes the Twelfth Step possible
- It is agreed that no expenses should be claimed for individual 'face-to-face' Twelfth Step work

In principle, any member who is qualified to carry out a particular task in our service should not be prevented from doing so for financial reasons, and should be offered expenses.

When carrying out an intergroup or region function, duly authorised service workers should be offered expenses.

For a variety of reasons regions and intergroups will probably differ in their approach to this question, and there may be no uniformity, but there need be no controversy if decisions are taken in the spirit of AA and with common sense.

8:3.2 Setting up a Confirmation of Attendance or 'Chit' System

The confirmation of attendance system, often called 'the chit system' is simply a scheme to let people have some document to show that they have attended a particular meeting. That person can then give the confirmation to offender managers, Social Services, an employer or any other body.

The system was endorsed by Conference 1987 as being within the Traditions, and operates without compromising anyone's anonymity. It is up to the person requesting the chits to report on themselves to whoever is supervising them.

It is, of course, entirely up to each intergroup and group whether and how they choose to introduce the confirmation system. One common scenario has been for intergroups initially to discuss and vote on whether to endorse the use of the chit system in that particular intergroup. If the intergroup decides to endorse the introduction of the chit system the next step would be for GSRs to take the matter back to their individual group, to discuss at a conscience meeting whether or not that group wishes to participate.

The intergroup Probation/CJSWS Liaison Officer might wish to attend any meeting debating the 'chit' system to explain the system.

Each group that agrees to participate tells intergroup so, and the P/CJSWS Liaison Officer would add that group's details to the list of participating groups prepared for the local offender management service.

The statement that confirms a person's attendance at a particular AA Meeting can be of several types. The traditional 'chit' is simply a sealed envelope provided by intergroup or made up by the group. The envelope contains a slip of paper on which is printed the group's unique group number as allocated to all groups by General Service Office (GSO). When this is given to the person requesting confirmation of attendance, a group officer just writes the time and date (not the location) over the sealed flap of the envelope, and initials it.

Some intergroups now give groups supplies of blank certificates. Blank confirmation of attendance certificates are available free of charge from GSO and can be requested by any group, intergroup or regional office . They are printed with anti-counterfeit ink and use the group's number as a 'signature' thereby ensuring the anonymity of the member filling them out. They will only be posted out to a group, intergroup or regional office 's address already registered with GSO, so before requesting any please ensure that your contact details are up to date, also ensuring group registration details are up-to-date, e.g. via the 'pink form'.

Details of setting up and running a confirmation of attendance/chit system are given in AA's 'Liaison Officers Pack: Probation/CJS' available from GSO and in the AA (GB) Web site's Documents Library.

8:3.3 Intergroup Probation/CJSWS Liaison Officer

(Refer to section 'The Intergroup' of 'The AA Structure Handbook for Great Britain & Continental Europe'.) It is through the intergroup assembly that the intergroup liaison officer is elected.

It is recommended that intergroup Liaison Officers should have ideally at least two years' continuous sobriety when elected, and should serve for a maximum of three years.

The main tasks of the intergroup liaison officer are:

- Obtaining and reading the 'Liaison Officers Pack: Probation/CJS' and using it as the Liaison Officer feels appropriate, and using the AA Web site's section on Probation/ CJSWS Liaison for information and resource material
- to establish/maintain links in the intergroup area with:
  - Offender management services dealing with non-custodial sentences
  - Bail hostels and similar facilities
  - Magistrates/Justices, local courts and court officer
  - Police forces
  - Solicitors' organisations
  - Other professionals having regular contact with probationers
- Report to each intergroup meeting by the Liaison Officer to keep intergroup informed on a regular basis. A copy of each intergroup report should be sent to the regional Probation/CJSWS Liaison Office , who should be kept informed of developments in the intergroup.
- Maintaining lists of contacts, Twelfth-Steppers, helpers etc so that continuity of service can be eased
- Attending regional Workshops when available, and keeping in contact with the regional Liaison Office
- Attending AA's national Probation/Criminal Justice Social Work Seminars when these are arranged

Some intergroups have a flourishing relationship with their local offender management services department. In others there will have been little contact. It is for each Liaison Officer to decide the best way of taking the role forward. Some suggested methods are as follows:

- Setting up a committee or team to assist in the work and to Twelfth Step any probationers.
- Establishing a named contact in each local offender management service office in the area, and with the courts service, police and other organisations
- Distributing approved AA literature and posters for display in offender management service offices bail hostels, court office and police stations, and to be given by them to offenders. Material given to offenders might include stories from AA members who have encountered similar problems, which are available from the AA Web site and the Prison induction pack.

- Attending meetings with individuals and teams in the offender management service to inform them of how AA works and what it does and does not do.
- Attending similar meetings with courts staff, solicitors, the police etc.
- Arranging to provide speakers for offender groups such as alcohol awareness sessions, perhaps with the help of members who have experienced aspects of the criminal justice system. The message from previous offenders who have changed the direction of their lives after finding AA and stopping drinking is a very powerful one.

8:3.4 Regional Probation/CJSWS Liaison Officer

(Refer to section 'The Region' in 'The AA Structure Handbook for Great Britain & Continental Europe'.)

It is through the Regional Assembly that the regional Probation/CJSWS Liaison Office is elected, ideally though not essentially being a member with some experience at intergroup level.

It is recommended that officer should have at least three years' continuous sobriety at the time of election, that the officer should serve for a maximum of three years and be confirmed in post annually. Consideration should be given to their experience or interest.

The main tasks of the Regional Liaison Officer are to:

- Obtain and read the 'Liaison Officers Pack: Probation/CJS' and use the AA Web site's section on Probation/CJSWS Liaison for information and resource material
- Communicate with intergroup Liaison Officer within the region and to collate information from them into a report to be given by the regional Office to each Regional Assembly
- Send a copy of each such report to the Board Trustee responsible for Probation/ CJSWS matters and to the designated member of the Board's Probation/CJSWS Sub-Committee
- Encourage intergroups where liaison activity is slow or non-existent to seek members to undertake service in this area
- Offer support and encouragement to intergroup Liaison Officers especially those new to the role and those taking up previously vacant positions
- Communicate with the designated member of the Board's Probation/CJSWS Sub- Committee
- Liaise with offender management services at a senior level, as frequently the services will have responsibility for an area which will include several intergroups
- Liaise with other regions in co-ordinating approaches to offender management services whose areas extend across regional boundaries
- Prepare an annual report on the region's liaison activities and send it to the annual meeting of regional Probation/CJSWS Liaison Officers to attend that meeting or arrange for an Alternate to attend, and to report back to region relevant items from that meeting
- Attend AA's national Probation/CJSWS Seminars when these occur

Experience has shown the following activities to be helpful:

- Holding Probation/CJSWS workshops at regional level, where all the Liaison Officers and helpers are invited to share their experience, and to encourage others into service
- Visiting intergroups and groups when requested for help, assistance or guidance
- Supporting intergroups in attempts to set up contact and co-operation with their local offender management service
- Setting up effective links between intergroup and regional Liaison Officers to share experience and offer mutual encouragement and support between Regional Assemblies and workshops, and also establishing links with the designated member of the Board's Probation/CJSWS Sub-Committee.

8:4 The General Service Board's Probation/CJSWS Sub-Committee

The AA Board's Probation/CJSWS Sub-Committee is chaired by the Trustee for Probation/ CJSWS and has up to seven other members with experience of Probation/CJSWS Liaison.

The main purpose of the Probation / CJSWS subcommittee is to assist the GSB in supporting the fellowships structure in its service work. This includes raising awareness of Alcoholics Anonymous and its services through cooperation with Probation/ CJSWS agencies at a national level.

Its objectives include:

- Developing and maintaining resources for Liaison Officer
- Disseminating information on Probation/CJSWS through the Fellowship
- Developing and maintaining the Probation/CJSWS areas on the AA(GB) website
- Supporting the development and sharing of good practice
- Supporting regional Liaison Officer
- Organising the annual regional Liaison Officers meeting held in York
- Organising periodic seminars for regional and intergroup Liaison Officer
- Developing links with Prison Service Liaison Officer

Each member has been asked to work closely with a particular group of regions, and contact details are sent out to regions. Regional Liaison Officers are encouraged to contact members of the Sub-Committee for suggestions, advice, support and guidance, and intergroups in regions without a regional Liaison Officer should not hesitate to make direct contact with members.

The Sub-Committee's email address is: infoprobation.sc@aamail.org

(Revised 2024)

Chapter Nine: AA Telephone Services

1. Structure
2. Finance
3. Telephone Service

Alcoholics Anonymous' National Telephone Service operates the number **0800 917 7650** nationally and internationally **+44 800 917 7650**.

This number links the still suffering alcoholic with a telephone responder from one of the local helplines across Great Britain. Telephone responders collate the caller's information and pass it to a 12th Stepper in the caller's area.

The local helplines also have their own **Direct-Dial Helpline number** which is published locally and on the national website. An A-to-Z Directory of towns listing the corresponding Direct-Dial Helpline number is supplied to responders by the National Telephone Sub-Committee (NTSC).

Please check with your local intergroup/region telephone liaison officer (TLO) as to how the telephone service operates in your area.

9:1 Structure

Responsibility for telephone services rests with the intergroup TLO. However, in some areas it is devolved to region or a telephone helpline committee. The local helplines are also responsible for purchasing, managing and curating the data of the telephone system they choose for their Direct-Dial Helpline number.

The national number is managed and data curated by the NTSC. Comprehensive data analysis is supplied quarterly/annually by the NTSC and distributed to all TLOs.

9:2 Finance

Our traditions of autonomy and self-support apply to all helplines in line with Tradition 4 and Tradition 7.

The national telephone account is managed and payment is met by AA's General Service Office, York, through money collected by Tradition Seven.

Individual helplines manage their own Direct-Dial Number account and payment is met by the intergroup, region or telephone service committee depending on the local structure.

Expenses incurred by members participating in telephone service may be claimed from intergroup, region or in Scotland from the Scottish Telephone Committee.

9:3 Telephone Service

The main purpose of our telephone services is to put the still-suffering alcoholic in touch with an individual contact or AA group. Telephone services require support and participation by local groups and members.

Telephone responders/operators (Scotland)/volunteers (London), should be chosen with care and endorsed through local groups and procedures, have at least 12 months' continuous sobriety, and have undergone the required training.

The NTSC has prepared comprehensive Training and Safeguarding Guidelines for Telephone Responders, which are available on the AA website: **https://www.alcoholics-anonymous.org.uk/members/ service/disciplines/ telephones.**

There are three basic types of call:

1. From the still-suffering alcoholic.
2. From family and friends of the alcoholic. We never discuss another person's drinking with a third party, even if they say they are a spouse, family or friend.
3. General enquiries:

    - out-of-area calls need to be passed to the problem drinker's local helplines.
    - calls received from employers, probation, NHS, social workers and requests for speakers (schools and colleges, universities) etc., should be passed to the relevant intergroup/region
    - calls from press, radio or television, etc. should be referred to the General Service Office, 10 Toft Green, York, YO1 7NJ, 01904 644 026, **aainformation@gsogb.org.uk** so that a coordinated response can be made

Northern Ireland
Callers from Northern Ireland should be referred to the Northern Ireland Service Office, Belfast on 0289 035 1222.
http://www.alcoholicsanonymous.ie/

Emergency Services
If you consider a caller to be in personal danger or suicidal, call the emergency services. Please remember that the telephone service exists to receive calls from suffering alcoholics and outside agencies. It is not intended to provide immediate rescue in the same way as the police, fire or ambulance services. It is not a counselling service.

Call…. on 999 (UK ONLY), 112 (EUROPE).

Twelfth Step Work:
The 12th Step work is the cornerstone of the telephone helpline service and requires the full participation and support of local groups and members. Information gathered by helpline responders is passed to them and they make direct contact with the problem drinker to discuss what AA can offer and to arrange for them to attend a meeting or to meet with them.

At least 12 months' continuous sobriety is a prerequisite for 12th Step service.

12th Steppers should have read and understood the comprehensive *Safeguarding Guidelines for 12th Step Work* which are available to download from the AA website.
https://www.alcoholics-anonymous.org.uk/members/%20service/disciplines/telephones/

Intergroup TLOs are responsible for curating the directory of 12th Steppers for their area and making sure that an accurate list is available to responders for their helpline rota.

If you are interested in becoming a Telephone Responder/Volunteer/ 12 Stepper, please contact your local telephone liaison officers for more information on how to apply.

(Revised 2025)

Chapter Ten: Archives

10:1 Mission and purpose

The mission of the Alcoholics Anonymous Archives is to document permanently the work of Alcoholics Anonymous Great Britain & Continental Europe to make the history of the organization accessible to AA members and other researchers, and to provide a context for understanding AA's progression, principles and traditions.

There are several AA archives. The largest is the General Service Office Archive which is now located at the Borthwick Institute for Archives at the University of York and managed by archivists there. But there is also a large collection of Scottish archives in the Northern Service Office in Glasgow, and there are many regional and intergroup archives, including those in the Continental European Region (Continental Europe), which have been collected and looked after by AA archivists. Most of the guidance in this chapter is directed at these archivists who together constitute the AAGB Archivists' Network. This guidance is compiled from the shared experience of AA members in various service areas. It also reflects guidance given through the Twelve Traditions and the General Service Conference. In keeping with our Tradition of autonomy, except in matters affecting other groups or AA as a whole, most decisions are made by the group conscience of the members involved.

In 1995 the General Service Board adopted a policy statement, subsequently ratified by Conference, which reads:

"Where any civilisation, or society perishes, one condition is present, they forgot where they came from" – Carl Sandburg.

These words represent a good reason why the General Service Board (and Conference) re-affirm its commitment and support for archival activity as a vital and integral part of the healthy life and growth of the Fellowship in this country. Just as each of us feels that it is essential to recall and appreciate where we came from, and how we got here, so it is with the Fellowship as a whole. The General Service Board recognises the need for accurate records to be rescued, retained, catalogued and used in a manner which will serve to dispel some myths which swirl distortingly around our past, thus allowing us to obtain a truer perspective and reveal to us our real heritage, so that our future may be ensured.

10:2 Keeping an archive as a part of our primary purpose

Like any other AA service, the aim of those involved in archival work is to carry the message of Alcoholics Anonymous. Looking after an archive is not just a custodial task; it is the means by which we collect, preserve and share the rich and meaningful heritage of our Fellowship. The creation of stories and presentations from our archives give us valuable insight into how our Fellowship came to mature. It is by the collection and sharing of these important historical elements that our collective gratitude for Alcoholics Anonymous is deepened.

Thus archive activity may be regarded in the same light as other services that members of the Fellowship provide in order to fulfil our primary purpose to the best of our ability. This is a responsibility and a debt, no less, which we owe to ourselves and others; it is as richly endowed with simple spiritual principles of humility, sacrifice and prudence as the rest of our work. It is also an act of practical simplicity and efficient practice. Planned and co-ordinated records are an essential tool to efficient administration and the basis of any history to come. This combination of practical and spiritual simplicity is maintained by the commitment of AA archivists with the support of the General Service Board.

10:3 AA Archives

The archives of Alcoholics Anonymous GB, be they the GSO archive now located in the Borthwick Institute, or regional and intergroup archives held locally, are collections of administrative files, correspondence, manuscripts, publications, photographs, audio-visual material, artefacts, and memorabilia related to the origin and the development of AAGB.

Consistent with AA's primary purpose of maintaining our sobriety and helping other alcoholics achieve recovery, these archives should:

- Hold, catalogue, and conserve such material
- Provide access to these materials for members of Alcoholics Anonymous and to others who may have a valid need to review such material, contingent upon a commitment to preserve the anonymity of our members
- Promote knowledge and understanding of the origins, goals and programme of Alcoholics Anonymous

Even though the GSO Archives are located at the Borthwick Institute, they remain the property of AA Great Britain, Ltd., which is the charity established by the Fellowship as a whole. Regional and intergroup archives are the property of the relevant group – i.e., region or intergroup. Thus archivists are custodians of group archives, not owners of them. So it is important that archivists guard against disputes about ownership of any archive they have been looking after which might arise after their death by:

- Clearly distinguishing papers and other materials which constitute an AA archive which they have been looking after and which may well be housed in their home from similar items which belong to their own personal collection of papers and other things;
- Including in their will a codicil to the effect that the papers and other materials in the AA archive are the property of their region or intergroup, to which they should be returned after their death

10:4 The role of the Archivist

Archivists share the aim of preserving the Fellowship's past and ensuring that fact prevails over fiction or myth. They are responsible for collecting, arranging, preserving and providing access to permanent historical records of enduring value. The nature of the archival materials they deal with is usually unpublished and unique. They employ professional standards and practices unique to archiving to ensure the safety, security, integrity and authenticity of the materials under their care. They are also responsible for ensuring the protection of the anonymity of members of AA, past and present, and the confidentiality of records concerning them.

The role of the Archivist can be considered therefore to be twofold:

- There is a custodial responsibility for maintaining the physical integrity of the collection;
- There is an interpretative responsibility for creating an inventory of the collection in such a way that it is a source of knowledge and understanding.

In these ways archivists seek to fulfil Bill W's urging that archives are needed "so that myth doesn't prevail over fact". AA Archivists are "keepers of the past", and

many archivists conduct historical research for the groups they serve. But in all cases the archives they look after carry the message from yesterday into today so that those who want help can hear the message tomorrow.

Unlike those who hold other service positions with the Fellowship, archivists are not subject to the normal principle of rotation after three years, since continuity at all levels has been shown, through experience, to be a vital aspect of archival work. But when they do resign their position as archivist, they should try to find, with the help of their region or intergroup, a successor who is prepared to act as a custodian of the archive they have been caring for.

10:5 The role of the Fellowship Archivist

The Fellowship Archivist is an archivist appointed by the General Service Board to oversee the care of all of AA's Archives and in this role to seek to achieve an effective liaison between the AA Archivist at the Borthwick Institute, the General Service Office, the Archives Sub Committee, and the members of the Archives Network. Thus the Fellowship Archivist:

- Takes responsibility for maintaining the Archives Network (see 11:7 below)
- Advises the Archives Sub Committee on matters within its responsibility (see 11:8 below)
- Advises the General Secretary in his role as Data Protection Office for the AA Archive at the Borthwick Institute (see 11:10 below)
- Advises AA Archivists on the creation, development, and management of their archive
- Works with the AA Web manager on developing the archives section of the AA website

10:6 Developing and using an archive

Archivists will typically take over and then develop collections of region and intergroup minutes, administrative paperwork, correspondence, conference reports, newsletters, literature, books, and photographs. Audio-visual items can be a valuable addition to an archive collection, and an archivist might also arrange to audio record old timers, in order to create oral histories. Local AA historical material such as letters, bulletins and photographs should be collected regularly from old timers, past delegates and various committee members etc. Do not forget non-alcoholics who were instrumental in helping AA in the early years of the fellowship.

It is very important for an archivist to keep an updated box list or inventory of the material in their care. If the collection they have taken over does not come with an inventory, they should try to make one. This may be a large and difficult task, and they should not be afraid to ask for help from the Fellowship Archivist and through the Archives Network (see 11:7). Further information about the process of creating box lists can be found in the Guide for AA Regional and Intergroup Archivists and the Policy and Procedures Manual for Archivists which are available from GSO.

While this will require careful, and perhaps tedious, cataloguing and conservation work, it is worth returning to the point emphasised earlier, that the role of the archivist is not just custodial. The aim of preserving these records of past discussions, debates and decisions is to make this past available to present members of the Fellowship so that they can create a better future, and archivists have a central role in fulfilling this goal. So in addition to the procedures listed above archivists are encouraged to take a lead in organising more enjoyable activities, such as:

- Publicising and participating in local history gathering efforts
- Providing displays at AA events and gatherings
- Encouraging, facilitating, and undertaking historical research

10:7 The Archives Network

For many years archivists have connected with each other in an informal network which enables them to share advice and experience. The role of this informal network is to further or facilitate the identification, recording and securing of archival material, as well as stimulating interest in archival activity by carrying the message of “Don’t throw me away, I belong to AA”. Experience shows that this can be furthered by promoting regional workshops based on such archival topics as:

- Classification and Cataloguing
- Conservation, Storage and Accessibility
- Confidentiality and Anonymity
- Questions to ask Old Timers
- Archives and local histories

- Organising exhibitions

In recent years the practice has developed of an annual meeting of the whole network at the General Service Office in York, as occasions at which experienced archivists can pass on their expertise to those who have only recently become an archivist, and for the purpose of consulting the network concerning the further development of AA's archives.

10:8 The Archives Sub Committee

The Archives Sub Committee recommends policy, projects, budgets and procedures to the General Service Board. It advises the Fellowship on the storage, conservation and preservation of archival material deposited in trust. Members of the sub committee are appointed by the General Service Board as required. The Fellowship Archivist and the Board Trustee are integral members of this committee.

The Archives Sub Committee is responsible for establishing policies and procedures for archivists within the Fellowship. This includes suggestions concerning the types of material of historical significance which will enhance an archive and the ways in which archives can be put to use within the Fellowship.

An important further function of the Archives Sub Committee is to develop and maintain the Archives Network within the Fellowship at all levels as recommended by Conference.

10:9 Preserving AA's archives

Now that the GSO archive has been moved to the Borthwick Institute, its long-term future is assured, at least while the current relationship between AA and the Borthwick Institute is in place.

But what about local regional and intergroup archives?
Regions and intergroups cannot be expected to find the money to hire convenient storage facilities. So the default solution is that local archivists make their own arrangements to store their collections – either at home or in some other location where conditions are suitable for the storage of archive materials. But an Intergroup or Regional Archivist cannot be expected to store vast amounts of archival material, nor should this factor be a barrier to taking up the post. So if storage is a problem, other arrangements will need to be considered and talks should take place with the Fellowship Archivist as to the best arrangements in the circumstances.

In 2021 Conference recommended that, subject to the autonomy of groups assured under Tradition 4, regions and intergroups should be asked to transfer materials that are 10 years old or older to the GSO Archive at Borthwick Institute. In considering this recommendation the Archives Sub-Committee has taken note of the points made by the Archives Network concerning:

- The importance of preserving unique materials that are of importance to the development of the Fellowship;
- The importance of maintaining and supporting a vibrant network of local archives which sustain local AA traditions and identity.

As a result, the Sub Committee has decided that, as a first step, local archivists should send an inventory of their archive (see 11:6) to the AA Archivist at Borthwick Institute, in order to initiate a dialogue concerning the possible transfer of important materials, or copies of them, which are not currently contained in the AA Archive at the Borthwick Institute. More detailed guidance will be provided, but any archivist, region, or intergroup facing immediate problems should contact GSO for advice.

10:10 Anonymity and GDPR

As emphasized above, one of the main purposes of AA's archives is to facilitate historical and social research concerning AAGB and the Fellowship. So this use of AA's archives is to be welcomed. But for two reasons access to the archives has to be carefully managed. One will be familiar to the Fellowship: the protection of anonymity, which implies that access to papers which reveal the identity of AA members needs to be strictly controlled. The second reason is new legislation concerning 'General Data Protection Regulation' (GDPR), as laid down by the Data Protection Act (2018) which specifies how GDPR rules apply to archives such as AA's archives which are 'Archives in the Public Interest' because of their importance for historical and social research.

Under this legislation archivists are exempted from the GDPR rules which apply to medical databases and similar collections of data which require individual consent for the preservation of personal data, allow individuals to remove their personal data ('the right to be forgotten'), and require archivists to correct mistakes in the personal data they hold. Instead 'archives in the public interest' are subject to the following rules:

The archives themselves must allow public access if they are to be classified as 'archives in the public interest'. In the case of AA GB's archives, this is obviously facilitated by the fact that the GSO Archive is located at the Borthwick Institute whose catalogue is publicly accessible (see borthcat.york.ac.uk/aa); but in principle the same point applies to regional and intergroup archives.

Access to archives is subject to GDPR rules concerning the protection of the identity of individuals referred to in archive materials, though the AA rule that anonymity is to be preserved for ever is stricter than the GDPR rule which holds that this requirement lapses after death.

Archives should have a specified Data Protection Officer (DPO) who will control access to the archive. In the case of the GSO AAArchive in the Borthwick Institute, the DPO will be the General Secretary, who will work closely with the Fellowship Archivist and the Archives Sub Committee in fulfilling this role. In the case of local archives it is probably best for the DPO to be the local archivist, acting on the advice of the Fellowship Archivist and GSO.

10:11 Research and access

Researchers wanting to access material in the AA GB Archive, should in the first instance check the online catalogue at borthcat.york.ac.uk/aa to ensure the archive holds material relevant to their research.

If a researcher wants to view material, they should contact the Borthwick Institute for Archives who will provide further information about visiting the Borthwick's search room, or providing digital copies of the archive material if required.

Three levels of access are applied to material in the AAGB Archive at the Borthwick Institute, which are based on the type of record and the sensitivity of information they contain. In the online catalogue, the heading 'Conditions Governing Access' states which level of access the archive file or item falls under.

The three levels of access are:

General access:
Material is available for research purposes without special conditions, though researchers still need permission from the General Service Office, acting on the authority of the General Secretary as DPO, and access is subject to relevant data protection legislation.

Examples of General access material: Reports of the General Service Board and General Service Conference, literature, newsletters, and magazines.

Restricted access:
Access to material is restricted by the General Service Board of AAGB, and is normally permitted only for relevant research purposes. Enquiries regarding access will be handled in the first instance by the Borthwick Institute, who will forward requests for access to the General Secretary as DPO, or staff at GSO acting on their behalf.

Examples of Restricted material: Region and Intergroup minutes, sub committee minutes, directories, material related to service disciplines, audio/ visual recordings

Confidential access
This material has been classified as confidential by the General Service Board of AA GB, and access will only be permitted in exceptional circumstances. Enquiries regarding access will be handled in the first instance by the Borthwick Institute, who will forward requests for access to the General Secretary as DPO, who will normally consult Trustee members of the Archives Sub Committee.

Examples of Confidential material: General Service Board minute, telephone logs.

Access permissions forms:
Before accessing material in the AA GB Archives, researchers will be asked to complete an access permissions form. A copy of the form can be obtained by contacting GSO or from the Borthwick Institute. The purpose of an access permissions form is to ensure that the AAGB Archive is being used for appropriate research purposes, and for the protection of member anonymity. Once the access permission form has been submitted it will be reviewed by the Fellowship Archivist or staff at GSO acting on their behalf; they will endeavour to respond within 48 hours.

In addition, because archive material which contains sensitive information about living individuals falls under the Data Protection Act of 2018 (see above), researchers wishing to access records containing such information will be asked by the Borthwick Institute to complete a data protection statement once they have submitted their request to access material.

Researchers working in the archives should understand that they will be expected to adhere strictly to AA anonymity Traditions – only first names and last initials of AA members may be used by them. It is recommended that there be no photocopying of private correspondence. This recommendation, whilst designed to assure anonymity protection, also helps maintain the physical integrity of archival documents. In addition to the preservation of the anonymity of the author of the correspondence, the writer's private opinions and observations, some of which might be highly controversial, must be treated with extreme delicacy. It should be remembered that members share these documents with a trust and expectation that their remarks will be held in confidence. No one has an intrinsic right to view another's private correspondence; it is essential that the archivist's chief concern of assuring the spiritual wholeness of the collection be understood and supported.

10:12 References

For more detailed discussion of archival matters please read the Archives Service literature available from GSO and liaise with the Fellowship Archivist and members of the Archive Network.

The Alcoholics Anonymous Great Britain & Continental Europe Archive online catalogue can be accessed at https://borthcat.york.ac.uk/aa

For more detailed information about managing and protecting archives please refer to the Guide for Intergroup and Region Archivists.

Information about the Data Protection Act (2018) can be found in the guide produced by The National Archives – https://cdn.nationalarchives.gov.uk/documents/information - management/guide-to-archivingpersonal-data.pdf

Revised October / November 2021

Chapter Eleven: Young People's Liaison Officers

11:1 Introduction

Conference 2015 recommended that each Intergroup and Region should set up the post of Young People's Liaison Officer (YPLO) to encourage more young people into AA and into service within the Fellowship.

11:2 Young People's Liaison Officers (YPLOs)

11:2.1 General points

The YPLO will be someone who came into AA at the age of 30 or younger, and so will have experience of getting sober at a young age, the better to relate to the particular problems faced by young people seeking to live sober.

They should have a good working knowledge of the 12 Steps, 12 Traditions and the AA Service and Structure Handbooks GB.

YPLOs will work closely with other service officers, in particular those in Public Information. The main tasks of YPLOs will include:

- Receiving and answering email, telephone and other enquiries from young people
- Sharing experience, strength and hope about getting sober at a young age
- Assisting Public Information Officers with presentations where the audience is likely to include a significant proportion of young people, e.g. talks to schools, universities, young offenders' institutions etc.
- Helping to develop PI material which will carry a clear message to young people
- Developing contact lists of those who came into AA at or before the age of 30 who are available and willing to assist with talks, 12-Step calls and other service to help, in particular, young people
- Encouraging young people to enter into all aspects of service (where the recommended qualifications for sobriety are met). Younger people are needed in all service disciplines, in part to ensure that the perspective of young people is represented

- Supporting AA activities such as Workshops, Conventions and PI events aimed at young alcoholics both within and outside the YPLO's Intergroup or Region
- Participating in the work of the General Service Board's Young People's Project Team for as long as that Team is convened

11:2.2 Intergroup Young People's Liaison Officer

(Refer to section 'The Intergroup' of 'The AA Structure Handbook for Great Britain & Continental Europe'.)

It is through the intergroup assembly that the Intergroup Liaison Officer is elected.

It is recommended that Intergroup Liaison Officers should have ideally at least two years' continuous sobriety when elected, and should serve for a maximum of three years. The Officer should have come into AA at the age of 30 or younger.

The main tasks of the Intergroup YPLOs are those mentioned in 12:2.1 above and to:

- Establish close working relations with other service posts, in particular the Public Information Office
- Report to each intergroup meeting to keep intergroup informed on a regular basis. A copy of each intergroup report should be sent to the Regional YPLOs, who should be kept informed of developments in the intergroup
- Attend regional Workshops when available, and keep in contact with the Regional Liaison Office

11:2.3 Regional Young People's Liaison Officers (RYPLOs)

(Refer to section 'The Region' in 'The AA Structure Handbook for Great Britain & Continental Europe'.)

It is through the regional assembly that the Regional Liaison Officer is elected, ideally though not essentially being a member with some experience at intergroup level.

It is recommended that the officer should have at least three years' continuous sobriety at the time of election and that the officer should serve for a maximum of three years and be confirmed in post annually. The officer should have come into AA at the age of 30 or younger.

The main tasks of the Regional Liaison Office, in addition to those mentioned in 12:2.1 above, are to:

- Establish close working relations with other service posts, in particular the Public Information Office
- Communicate with Intergroup Liaison Officers within the region and to collate information from them into a report to be given by the Regional Officer to each Regional Assembly
- Send a copy of each such report to the Young People's Board Trustee
- Encourage intergroups where liaison activity is slow or non-existent to seek members to undertake service in this area
- Offer support and encouragement to Intergroup Liaison Officers, especially those new to the role and those taking up previously vacant positions
- Liaise with other regions in co-ordinating activities
- Communicate with the Young People's Board Trustee
- Prepare an annual report on the region's liaison activities and send it to the Young People's Board Trustee.

Experience has shown the following activities to be helpful:

- Holding workshops at regional level, where all the Intergroup Liaison Officers and helpers are invited to share their experience, and to encourage others into service
- Visiting intergroups and groups when requested for help, assistance or guidance
- Supporting intergroups in attempts to reach out to young alcoholics
- Setting up effective links between Intergroup and Regional Liaison Officers to share experience and offer mutual encouragement and support between regional assemblies and workshops.

Chapter Twelve: Publications

12.1 Introduction

AA produces a number of different publications in support of our primary purpose. The Fellowship has two monthly magazines - Share for our whole Fellowship, and Roundabout with a focus on Scotland.

A diary and a calendar for members are produced annually. AA Service News is published four times a year and carries news of service developments and opportunities within the Fellowship.

In addition, AA produces a number of leaflets and pamphlets devoted to specific topics or aimed at particular audiences, under the auspices of the Literature Sub Committee of the General Service Board (GSB).

This chapter seeks to give information about each of these aspects of our publications.

12.2 Share magazine

Share magazine is produced and published monthly by the GSB. It is written by members for members, and its primary purpose is to carry the message of Alcoholics Anonymous in print. There are many AA members who find it difficult to get to a meeting, such as the housebound, those in the armed services, on oil rigs, in prisons or hospitals. There are lots more who rely on our magazine as a supplement between meetings, or instead of one.

Share's first issue was dated October 1972, succeeding the AA 'Newsletter', which was started by AA members in London in October 1949. Since then, it has gone from strength to strength and is now lovingly known as 'Our meeting between meetings'.

Group Share Representative

Groups elect a Share representative to encourage members of the group to purchase the magazine.

It is the job of the group representative to subscribe to the magazine on behalf of the group and to purchase an agreed number of copies using the group funds (Tradition Seven). As issues are sold the money returns to the pot, allowing the subscription to be ongoing.

The representative is also responsible for raising awareness of the magazine in their group by announcing when new issues are available, making sure the magazines are conspicuously on display, and encouraging members to submit articles, photographs and cartoons. Of course, Share can also be purchased individually by group members if there is no Share representative in position.

Intergroup Share Liaison Officer (ISLO)

The ISLO provides essential contact between members, groups and their region. The main aim is to inform the Fellowship via the groups that the magazine exists. This can be accomplished by visiting groups in the intergroup area, providing subscription forms and helping to set up a subscription. The ISLO is invited to attend an annual Share workshop. They may also attend conventions or other AA gatherings to raise awareness, encourage the sale of the magazine and seek contributions of articles, photos and cartoons from members.

The length of sobriety required for this position is usually two years, and the officer is expected to serve for two years - up to a maximum of three if no successor is forthcoming.

Region Share Liaison Officer (RSLO)

It is the responsibility of the RSLO to keep in touch with the intergroup Share liaison officers and the Share editorial team. This can be done by holding a bi-monthly meeting for all the intergroup Share reps in their region where they can swap news and ideas. Officers are also asked to attend and submit a report at their region meetings.

The length of sobriety for this position is usually three years, and the officer is expected to serve for a maximum of three years.

There are many ways in which a RSLO can raise awareness of Share - attending conventions and AA public information events, visiting intergroups or groups locally to spread awareness of the magazine, helping with subscription forms, or supporting people who would like to submit articles but aren't sure how to go about it. Once a year there is a meeting at the General Service Office (GSO) in York to which all RSLO's are invited.

Share Sub Committee

The Share editorial team is a sub-committee of the GSB. All roles are appointed through interview by the GSB.

The Share Sub Committee is made up of:

- GSB Trustee (as chair)
- Editor
- Assistant Editor
- Four editorial readers (one of whom will serve as secretary)
- Fellowship Calendar & Diary Editor (If eligible - see below)

The sub-committee can meet up to four times annually, depending on workload. Generally, there will be two face-face meetings at GSO in York and two online.

All prospective sub-committee members should have at least five years' continuous sobriety at the time of application, have a good level of literacy skills and relevant proven service experience at intergroup/region. All positions on the sub-committee are for four years. For more information on how to apply, see AA Service News or vacancy ads in Share.

How to contribute to Share

Articles
When a Share officer encourages a member to submit an article, they may want to bear in mind the following tips:

- you don't need to be a polished author;
- all grammar and spelling will be amended for you if needed;
- you can write just a few lines or up to 1,000 words;
- personal stories and experiences are welcome;
- we don't publish poetry or obituaries.

Photographs
We receive lots of pictures of flowers and trees and that's great, but how about something a little more quirky? Any photo that catches the members' attention is great. Pictures need to be 2MB in size for printing.

Please email your pictures to imagebank@gsogb.org.uk

Cartoons
Can you create a cartoon that expresses your experience of alcoholism, or where it took you? If so, Share would like to hear from you.

Note:
If the magazines are taken into public places (e.g. prisons/hospitals), the events pages (centre) should be removed where telephone numbers are on display.

Magazine scrolls and banners are available for use at local conventions/ gatherings/workshops from GSO and the Southern Service Office and should be returned to the office after an event.

12.3 Roundabout magazine

The primary purpose of Roundabout, the Fellowship's Scottish magazine, is to carry the message of Alcoholics Anonymous in print. The magazine can be a lifeline for sick and housebound members, and may also be taken to prisons and hospitals. It is written by members, for members. Without contributions from members, there would be no Roundabout!

Roundabout is published monthly by the GSB. It is produced by the Roundabout Editor with the help of the Roundabout Sub Committee. The first printed edition of Roundabout was launched in February 1951 by the Fellowship in Scotland.

Group Roundabout Representative

Groups are asked to elect a representative to encourage members of the group to purchase the magazine. The representative would explain that they would purchase magazines for the group with primary purpose money, in accordance with the Tradition Seven belonging to the group. This will be returned monthly to the primary purpose money, allowing them to purchase more magazines when the subscription lapses. The representative can also suggest that people contribute, and encourage them to submit articles, photographs and cartoons.

Intergroup Roundabout Liaison Officer (IRLO)

When the intergroup elect an IRLO, the main aim is to inform the Fellowship via groups that the magazine exists. This can be accomplished by the IRLO visiting groups in the intergroup area, providing subscription forms and helping the group set up a subscription. The appointee should attend an annual Roundabout Workshop in Glasgow. They may also attend conventions or gatherings (where possible) to promote and encourage the sale of the magazine.

Region Roundabout Liaison Officer (RRLO)

Elected at region level, the RRLO would contact the IRLOs and ask them for a report on how well the magazine is doing with subscriptions. RRLO's may also attend intergroups and conventions to inform members about the Roundabout.

Roundabout Sub Committee (RSC)

The RSC is a Sub Committee of the GSB. All RSC roles are service posts, and are appointed through interview by the GSB.

The RSC comprises an appointed GSB Trustee who acts as chair of the sub-committee, plus a maximum of eight members of the Fellowship of as follows:

- Chair (GSB Trustee)
- Editor
- Assistant Editor
- Secretary
- Link Liaison Officer
- Four Proofreaders

The RSC can meet up to four times annually, depending on workload. Generally, there will be two face-face meetings at the Northern Service Office in Glasgow and two online.

All prospective sub-committee members should have at least five years continuous sobriety at the time of application, have a good level of literacy skills and relevant proven service experience at intergroup/region. All positions on the subcommittee are for four years.

Roundabout Link Officer (RLO)

The RLO is one of the members of the Roundabout Sub Committee. The RLO's purpose is to act as a regular link between the Editor and all IRLO's and RRLO's, keeping channels of communication and support open across the service. The Link Officer also offers feedback to the RSC.

For more information on service within the RSC, and how to apply, please see AA Service News, the vacancy ads in Roundabout or AAGB website.

How to contribute to Roundabout

Articles
When a Roundabout officer encourages a member to submit an article, they may want to bear in mind the following tips:

- you don't need to be a polished author;
- all grammar and spelling will be amended for you if needed;
- you can write just a few lines or up to 1,000 words;
- personal stories and experiences are welcome;
- we don't publish poetry or obituaries.

Photographs
We receive lots of pictures of flowers and trees and that's great, but how about something a little quirkier? Any photo that catches the members attention is good. Pictures need to be 2MB in size for printing.

Please email your pictures to imagebank@gsogb.org.uk

Cartoons
Can you create a cartoon that expresses your experience of alcoholism, or where it took you? If so, Roundabout would like to hear from you.

Note:
If taking the magazines into public places e.g., prisons/hospitals then the events pages need to be removed where telephone numbers are on display.

Roundabout scrolls are available for use at local conventions/gatherings from the Northern Service Office which should be returned.

12.4 Fellowship Calendar & Diary Editor

This position is a four-year rotation with the responsibility of producing the Fellowship calendar and the Fellowship diary on an annual basis. The editor reports direct to the GSB Trustee. The position can be based in any region. If the region is in Scotland, it will be part of the Roundabout Sub Committee; if in England or Wales, it will be part of the Share Sub Committee; and if it is Continental European Region, the position will be shared between the sub-committees.

Calendar Photographs
The Editor's job is to review photographs submitted by members of the Fellowship and select 13 for publication in the annual calendar. The criteria for consideration are:

- the digital photograph files submitted need to be at least 2MB in size - most smartphone cameras take pictures in excess of this size, and meet this criterion;
- the calendar is produced in landscape (horizontal) format and the photographs submitted should be in this format.
- Please email your pictures to imagebank@gsogb.org.uk

Portrait (vertical) photographs are more suitable for the magazines. We get a lot of nature and animal pictures - alternatives that stand out, match the month, or have a connection to AA, can have a better chance of being published. Neither identifiable faces nor product names should be visible and photographs should not have been previously published.

The Calendar & Diary Editor selects suitable quotations from Conference approved literature for both publications, updates the important dates (bank holidays, conventions etc.) and then submits the final draft to the Share and Roundabout trustees for approval, before sending the finished product to be printed.

12.5 AA Service News

What it does for you and others

AA Service News (AASN) is the Fellowship magazine which promotes the benefits of service across the whole of AA Great Britain and Continental European Region. It helps meet our primary purpose by carrying the message across the whole Fellowship.

AASN showcases active service throughout the Fellowship, the benefits to those that do service, and the outcomes for other alcoholics. It is delivered free of charge on a quarterly basis to over 4,000 groups, over 200 intergroups and 16 regions. It is also available digitally.

Every article is written by an alcoholic for alcoholics. From group level down to board level, AASN provides each and every member with examples of service that work, and that are being delivered throughout the Fellowship.

AASN carries your voice.

In addition to articles about service, AASN includes:

- Conference questions and recommendations (winter and summer editions respectively)
- a regular message from the General Secretary
- board meeting bullet points
- job adverts for sub-committees.

There are also occasional requests for shares on particular topics for AA pamphlets such as Mental Health, Sponsorship into Service etc. Look out for the adverts!

What you can do for AASN and for others

Without your articles on service, AASN would only be half the magazine it is today. We are always looking to you to share your service experience with others. You never know, your shared service experience may help another AA put in place the same activity, which in turn, may change or save someone's life.

Perhaps you can write to the editor at AA Service News with your experience. We are looking for both short and longer articles up to a maximum of 750 words. Your articles don't have to be perfect either - that's the editor's job! Leave something for them to do…

You can also send us your pictures of service, other pictures that you really like or ones that are really distinctive and may catch the eye of another alcoholic. All we ask is that they are a JPG and at least 2MB.

Please send your articles to the editor.aasn@aamail.org or contact them for any further information.

It's over to you now!

12.6 Literature

Group

Each group, being autonomous, selects the officers its members feel are necessary for the smooth running of the group. Most groups select a Literature Secretary, who has a known period of continuous sobriety of at least one year, and have shown themselves willing and available to give dependable service through regular attendance at meetings.

The duties of the Literature Secretary include but are not limited to ensuring that the group has available its own copy of the Big Book (Alcoholics Anonymous), and ordering and keeping the group supplied with Conference approved books and pamphlets published by AA, which are available from GSO. Other duties for a Literature Secretary may be:

- putting together selected packs of literature for newcomers, making sure that stocks are replenished
- ensuring that literature is on display and available to members at group meetings, encouraging members to buy from the collection
- purchasing literature from the AAGB online bookshop
- encouraging individuals/groups to combine orders to reduce postage costs
- making available the current edition of the AA Service News and Structure Handbooks for Great Britain, especially at business meetings
- passing any accounts for payment of literature to the Treasurer
- helping the Secretary to circulate AA Service News, convention flyers, notices from GSO etc

Intergroup and Region

There tends to be no literature roles at intergroups and regions. Each service discipline usually sources their own literature. Some intergroups, however, do have specific roles for literature.

Literature Sub Committee

Aims

The Literature Sub Committee ensures that our literature remains current in line with AA's Steps, Traditions and Concepts and is always available for AA members to use in their recovery and service. In this way, the message is carried to still the suffering alcoholic in a clear and concise way.

Objectives

Under the guidance of Conference via the GSB, the Literature Sub Committee is responsible for drafting new and reviewing existing literature. It collaborates with other service disciplines by reviewing and updating their literature.

To serve as a member of the Literature Sub-Committee you would need to:

- have five years' sobriety
- have an understanding of the Steps, Traditions and Concepts
- be able to commit for a period of four years whilst working collaboratively with others
- be able to attend meetings up to four times a year - twice in York and twice online
- be happy to work in smaller teams on projects.

Experience at intergroup and region would be an advantage, and experience at Conference would be useful but is not necessary.

Apart from getting involved and growing within service, members benefit from discovering the joy, satisfaction and excitement gained in creating new literature as directed by Conference. They see the difference this makes to AA's primary purpose.

Working as part of a team, where everyone is listened to and all ideas are considered, members acquire skills such as active listening, flexibility, assertiveness and learning the practical values of AA's Traditions and Concepts.

Chapter Thirteen: Resource Material available from GSO

PUBLICATIONS

GSO is the service office for the Fellowship. It keeps a store of service material available to AA members upon request. Most service material is listed on the order form. Service material does not have the Conference Approved seal on it because it does not go through the various committee procedures required. It is produced when GSO correspondence indicates that there is a need for readily available material on a specific subject. Service material is prepared from information in the files or from sharing specifically requested by a questionnaire. It is constantly updated, changed, or dropped according to Fellowship needs.

A comprehensive and up to date list of available literature can be obtained by contacting GSO or from the AA (GB) website. Additional service material available includes:

- Deaf (hearing impaired) Groups: list of groups available
- Survey: results from the last survey of AA
- Portable Display Unit
- Table Top Display Unit

Appendix X: For AA Members Employed in the Alcoholism Field

Experience has shown that a member, well-informed about AA, combined with a professional responsibility, can be invaluable to both roles.

AA contributors to this guidance overwhelmingly agreed that it is professional skill and experience, not AA membership, which qualifies one for these positions.

Understanding the Twelve Traditions and how they were developed is encouraged, especially Traditions Six, Eight, Ten and Eleven. If in any doubt, seek guidance from a sponsor.

An individual working in the alcoholism field may well be the only AA member that their colleagues have ever met. It should be made clear from the start that they do not represent AA.

In accordance with Tradition Six, members working within agencies should discourage the use of the AA name in its promotional literature or using language that implies endorsement by AA.

AA does not recommend people for jobs in the alcoholism field. Individuals may recommend another member, but on the clear understanding that the reference is strictly personal.

Anonymity

Whether or not we disclose AA membership is up to the individual, remembering that it is important not to violate Tradition Eleven. Saying publicly or in print, on television or anywhere else “I am an alcoholic” or “a recovering alcoholic” does not break an AA Tradition provided AA membership is not included in that statement. It is vital to remember never to reveal another member’s identity.

Helpful Hints:

a. Personal recovery comes first, recognising the separation between AA and the job;

b. If possible, speak to other AA members employed in similar fields;

c. Consider your personal and professional boundaries before:

- Sponsoring a current client or service user
- Attending the same meeting as your current clients or service users; remember that they may feel uncomfortable. It would be useful to remind them that you are there as an AA member only.

Common sense should always apply!

(Revised 2025)

Service Handbook Glossary

AA	Alcoholics Anonymous
AAGB	Alcoholics Anonymous Great Britain
AASN	AA Service News
ADP	Alcohol and Drug Partnership
ASLO	Armed Services Liaison Officer
CA	Citizens Advice
CCG	Clinical Commissioning Group
CHIT	Confirmation or Proof of Attendance at an AA Meeting
BSL	British Sign Language
CER	Continental European Region
CJS	Criminal Justice System
CJ/SWS	Criminal Justice / Social Work Services
CNS	Chat Now Service
CSC	Conference Steering Committee
DAAT	Drugs and Alcohol Action Team
DBS	Disclosure and Barring Service Check
DHSS	Department of Health and Social Security
DPO	Data Protection Officer
EAP	Employee Assistance Programme
ECLO	Electronic Communications Liaison Officer
ECSC	Electronic Communications Sub Committee
ELO	Employment Liaison Officer
GDPR	General Data Protection Regulation
GP	General Practice
GSB	General Service Board
GSR	Group Service Representative
GSO	General Service Office
HLO	Health Liaison Officer
IPLO	Intergroup Prison Liaison Officer
IRLO	Intergroup Roundabout Liaison Officer
ISLO	Intergroup Share Liaison Officer
NAT	Non-Alcoholic trustee
NSO	Northern Service Office
OMW	Open Meeting Workshop
ORS	Online Response Service

PCJ/SWS	Probation and Criminal Justice / Social Work Services
PI	Public Information
PLO	Prison Liaison Officer
PPG	Patient Participation Group
RASLO	Regional Armed Services Liaison Officer
RECLO	Regional Electronic Communications Liaison Officer
RELO	Regional Employment Liaison Officer
RPLO	Regional Prison Liaison Officer
RRLO	Regional Roundabout Liaison Officer
RSC	Roundabout Sub Committee
RSLO	Regional Share Liaison Officer
RTLO	Regional Telephones Liaison Officer
RYPLO	Regional Young People's Liaison Officer
SSO	Southern Service Office
SSAFA	Soldiers, Sailors, Airmen, and Families Association
SSASM	Sub-Sahara Africa Service Meeting
TLO	Telephones Liaison Officer
YPLO	Young People's Liaison Officer

www.alcoholics-anonymous.org.uk
33700825

www.alcoholics-anonymous.org.uk
0800 917 7650 • help@aamail.org