

Lifeline

Published by Orange County Intergroup Association of Alcoholics Anonymous

Santa Ana

June, 1995

Vol. XXXIII No. 6 USPS 312-680



Orange County
Intergroup Association

A FAMILY AFFAIR

What's Inside

Features

A Family Affair	1
What AA Used to be Like	2
The Morning After	4
Message From the Lifeline Committee ...	4
The Family Tree	7
AAWS & IWS Reach an Agreement	8
Letters to the Editor	9
Directory Changes	12

Departments

AA Birthdays	3
Tradition of the Month	3
Calendar of Events	5
Subscriptions	5
Who-Where-When	6
A Chance to be of Service	7
Contributions	10 & 11

"I had to give more than lip service to the principles..."

An old-timer once said, "If you really want to see how people work on their A. A. program, ask their family what they are like at home".

After over twenty-one years of continuous sobriety in AA, I have found living a spiritual program is not just thinking or talking it. I've found you cannot think or talk your way into right living, but you can live your way into right thinking.

The Big Book tells me I will have peace of mind in exact proportion to the peace of mind I bring into other people's lives. For the most part, I have found those "other people" are the people I live with.

For too many years I talked the talk at AA meetings, but I failed to walk the walk at home. The results were predictable. My home was a constant battleground as I tried to force my will on my loved ones.

Change is what the AA program teaches me. I had to let go of my old ideas (and attitudes) or the results were nil. Simply

talking about change at meetings was not enough. I had to give more than lip service to the principles. I had to practice the principles if I was going to have any peace of mind or allow those around me to have some degree of serenity.

Far too often I have come across AA friends who were like me. Their families, like mine, are victims of untreated alcoholism. And untreated alcoholism (not the drinking, but the thinking) can produce a scenario of uprooted lives and relationships torn asunder.

So, I had to pocket my pride and inventory myself and see where I had set the ball rolling.

I have been told that change is painful. However, I can attest to the fact that not to change is even more painful and damaging -- not only to myself but to those closest to me.

*Bill C., Chicago, IL
(Reprinted from the Grapevine)*

ALCOHOLICS ANONYMOUS CENTRAL OFFICE

HOURS

Weekdays	8:00 A.M. to 9:00 P.M.
Saturdays	9:00 A.M. to 4:30 P.M.
Sundays & Holidays	10:00 A.M. to 4:30 P.M.

2712 S. Grand Avenue
Santa Ana, CA 92705
Phone (714) 556-4555

From San Clemente, Dana Point, Laguna
Beach & Capistrano Valley Areas -
Phone (714) 581-2694
TDD 556-4559

WHAT A.A. USED TO BE LIKE....

I finally hit my alcohol bottom in December of 1971. In a 20 year span I had gone from an occasional drinker to having to drink all day, every day. My first meeting was East Side Open Door in Long Beach, a podium participation meeting with about 60 to 70 members. As I sat there (on my hands to keep them from shaking) I looked about me and saw the happy faces and smiling eyes and knew I was at home at last. The people that spoke that evening told my story with such openness and honesty that I knew that I need never be alone again.

The freedom to go to an AA meeting and hear the members talk about alcohol was undisputed. The opportunity to identify with others in the group was always there. Sure I heard a little about pills, pot, and other drugs from time to time but never from the podium, never in a discussion meeting, and never at a speaker meeting. Alcohol and alcoholism was the sole reason for us being together.

At about this time an apparently minor change was made by the American Medical Association. They declared alcoholism a disease. At first we thought this was a victory and that the medical community would at last take our life-threatening condition seriously. And they did. As a disease, alcoholism was now covered by insurance policies and this meant big bucks for the medical institutions. Before this change there were a few de-tox wards but we were not really welcome; after all, most of us could not pay the hospital bills so filling beds with a bunch of drunks was not a top priority with most hospitals. Now that the hospitals and clinics could bill insurance companies for our convalescence, we suddenly became most welcome. Recovery programs sprung up with lightning speed and anyone with any substance abuse problem was not only welcome but sought after. Commercials began to appear on T. V. begging us to come to their facility for a month, a week, or 10 days with two easy follow ups.

These recovery programs did (and are still doing) a lot to help alcoholics come to grips with their alcohol problems, providing they had an insurance policy to cover the costs. However, the only after care program they could offer was to send their "graduates" to A. A. Still, this was a good thing as long as they just sent us their drunks, but unfortunately they did not stop there. Since their programs dealt with any kind of addiction, they were unable or unwilling to make any kind of distinction between a drug addict, a pot smoker, a pill head or an alcoholic. As a result everyone who went through their program was automatically sent to A. A. and our meetings were starting to be filled with an assortment of people with a variety of problems. At first, nothing was said in the meetings but the real alcoholics were beginning to feel uneasy. What was happening to us? We were not sure of being able to identify with each other anymore. People started to introduce themselves as "and-a's". Soon the drunkalogs became drugalogs and a few of the old timers and some of the newer people began to speak out in self defense. But more often than not the complainers were shouted down and nothing more was said in meetings, but much was said in the coffee shops and private gatherings outside of the meetings. We honestly did not know what to do. Many of the newcomers truly did have a problem with alcohol in addition to drugs, and we certainly must welcome them. It became the sponsors job to educate and advise the new people about the 12 traditions. And to a great extent this worked for a time. But the floods of addicts kept coming and soon we felt overwhelmed. We found out that the recovery programs were telling the addicts to lie about their disease and call themselves alcoholics even though they did not have a problem abstaining from alcohol, only drugs. It was their theory that any problem could be "fixed" in A. A.

The one thing the medical community does not have to do as far as our program is concerned is to follow our Traditions. And

this is where the problem lies. We are doing a very poor job of protecting our Traditions in many areas and the few of us that do speak out in meetings are usually attacked by the non-alcoholics in the room. I have been called a Nazi, Black Belt, witch, b—— and a variety of other names in the past years and I know that many others have had to put up with the same abuse. But I do not blame the newcomer. I remember when I was new I believed anything anyone told me in an A. A. meeting and I am sure it is the same way now. If someone had told me I had to lie to get in I would have done so. The fault lies with me and the other old timers in not doing enough to protect our Traditions. No one from outside of A. A. can harm us as long as we follow the Traditions that those who came before us worked so hard to develop.

Any harm to us will come from inside our fellowship. So often people will say to me after a meeting that has gone off track, that they would defend the traditions but they don't feel that they know enough about them to speak up. Well, the solution seems simple enough; do some homework. Read up on our history, learn the traditions, go to a traditions meeting once in a while. Anyone who will take the time to do this will be able to defend our traditions and not come off as if they were just voicing their own opinion. After all nowhere in the Big Book or in the Twelve and Twelve does it ask for our opinions.

The solution to dual-addiction is clearly stated in tradition three in the Twelve and Twelve. It talks about a newcomer who asked to be let in but said that he had another addiction worse stigmatized than alcohol. Would they let him in anyway? After much discussion it was decided to let the newcomer in and he became a very valuable member for many years. The secret of the success of this decision lies in the sentences on page 147. **"Never did he trouble anyone with his other difficulty. A. A. had taken its first step in the formation of Tradition Three."**

Continued on page 8...

AA BIRTHDAYS

Birthday Donations...

Many AA members celebrate their AA birthdays by sending a donation to Central Office. These donations help keep the doors of Central Office open, so that new members may get the same help so many of us have received. Some members send one or two dollars for each year of sobriety. Others make a personal donation monthly or on a quarterly basis. This month we'd like to extend thanks to:

Happy Birthday!

Carol C.	1	Year	Garden Grove
Jim	8	Years	Garden Grove
Anna Marie	10	Years	Fountain Valley
Alberta B.	17	Years	Huntington Beach



The Lifeline would like to extend its thanks to Roger M., our past chairman, who has decided to move on from the Lifeline Committee to other service commitments. Thanks, Roger!

Also, we would like to extend a warm welcome to our new Committee Chairman, Allen M. Welcome aboard!

**LIFELINE USPS 312-680
2712 S. GRAND AVE.
SANTA ANA, CA 92705**

Published monthly by the
Orange County Intergroup
Association of
Alcoholics Anonymous.
Subscriptions are \$12 annually.
Second class postage paid at
Santa Ana, 92799. Postmaster,
send address changes to
2712 S. Grand Ave.,
Santa Ana, CA 92705

LIFELINE COMMITTEE:

Allen M., Ellery S.,
Roberta B., Rick C., Jan T.

Tradition of the Month

TRADITION SIX

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

Ask Yourself...

1. Should my fellow group members and I go out and raise money to endow several A.A. beds in our local hospital?
2. Is it good for a group to lease a small building?
3. Are all the officers and members of our local club for A.A.'s familiar with "Guidelines on Clubs" (which is available free from GSO)?
4. Should the secretary of our group serve on the mayor's advisory committee on alcoholism?
5. Some alcoholics will stay around A.A. only if we have a TV and card room. If this is what is required to carry the message to them, should we have these facilities?

—Reprinted from the AA Grapevine Traditions Checklist

