

Cooperation with the  
Professional Community  
WORKBOOK

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# Cooperation with the Professional Community WORKBOOK

This workbook is service material, reflecting A.A. experience shared at the General Service Office. A.A. workbooks are compiled from the practical experience of A.A. members in the various service areas. They also reflect guidance given through the Twelve Traditions and the General Service Conference (U.S. & Canada).

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## **A.A. Preamble**

*ALCOHOLICS ANONYMOUS*<sup>®</sup> 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.

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## Introduction

Your service committee can bring the A.A. message to professionals and to students at professional schools in your community, helping them to understand how and why A.A. works.

A.A. has always valued friends in all professional fields. These associations have been mutually beneficial and completely in keeping with the A.A. Traditions.

## Origin and Purpose of C.P.C.

“Our Twelfth Step — carrying the message — is the basic service that the A.A. Fellowship gives; this is our principal aim and the main reason for our existence. Therefore, A.A. is more than a set of principles; it is a society for alcoholics in action. We must carry the message, else we ourselves can wither and those who haven’t been given the truth may die.”

*The A.A. Service Manual*, “A.A.’s Legacy of Service,” page S1

C.P.C. came into being as a distinct entity in 1970 when the trustees’ committee was formed as an outgrowth of the Public Information Committee. In 1971, the Conference C.P.C. Committee was established. Today, many local communities, areas and regions consider C.P.C. an activity separate from public information, treatment or corrections work. In some places, though, there is overlap.

Members of C.P.C. committees inform professionals and future professionals about A.A. — what we are, where we are, what we can do, and what we cannot do. They attempt to establish better communication between A.A.s and professionals, and to find simple, effective ways of cooperating without affiliating.

## **C.P.C. Work and Why A.A.s Do It**

Cooperating with nonalcoholic professionals is an effective way to carry the message to the sick alcoholic. Such people often meet the alcoholic in places where A.A. is not present. Through professionals, alcoholics may be reached who might otherwise never find the program, or they may be reached sooner with the help of informed non-A.A.s.

Here is a list of jobs and professions that C.P.C. committees have approached. Your committee may think of others: alcoholism or substance abuse counselors; armed forces officers, unit commanders or military chaplains; athletic coaches; corrections officers; court officials; educators; employers or employee assistance professionals; health care professionals (doctor, nurse, psychiatrist, psychologist, etc.); clergypersons; judges; juvenile services professionals; law enforcement officers; lawyers (prosecutor, defense attorney); probation or parole professionals; professional students; public health officials; senior services professionals; social workers; union officials.

A professional can be a family doctor or other health care professional, a member of the clergy, a law enforcement or court official, an educator, a social worker, an alcoholism or other counselor, or anyone who deals with problem drinkers in the course of their work. Many of these people often encounter the suffering alcoholic, and in spite of public awareness, many of them simply don't know what to do with a drunk.

C.P.C. work can begin when individual A.A.s reveal their membership to their doctors or drop a quiet word in the ear of a pastor, priest or rabbi that an A.A. member is available to the congregation. Some A.A. members, groups or committees share a single issue of the A.A. Grapevine, La Viña or La Vigne with the professionals, explaining how our meeting in print paints a picture of the Fellowship in action through members' stories and letters. Groups can further participate in C.P.C. by welcoming professionals and future professionals to open meetings and offering a subscription to the A.A. Grapevine, La Viña or La Vigne.

Committees on the area or local level actively seek ways to make contact with professional people and set up programs to increase knowledge and understanding of Alcoholics Anonymous.

The aim of this workbook is to serve as a guide through the C.P.C. process, from formation of a C.P.C. committee to discussion of the work and activities such committees can perform. It is important to remember that cooperation with professionals — like everything else in A.A. — is based on personal contact.

What a committee decides to do will be dictated by local needs and experience. The suggestions here are just that — suggestions. It is hoped they will spark thinking and

provide leads on new ways to approach professional people locally.

A look at our history shows clearly that cooperation with professionals has been an integral part of the Fellowship since our beginnings. A.A. might never have gotten off the ground, or progress would have been much slower, without the help of nonalcoholics such as Dr. Silkworth, Sister Ignatia and the Reverend Sam Shoemaker.

It is important that C.P.C. workers understand the importance of A.A.'s Traditions and learn how to explain them to nonalcoholics. The cardinal fact is that the Traditions are *our* Traditions, and there is no reason non-A.A.s should be expected to understand them unless we take the initiative and explain them.

### ***Singleness of Purpose***

This Singleness of Purpose statement has been added to pamphlets intended to share information about A.A. with professionals:

Some professionals refer to alcoholism and drug addiction as “substance abuse” or “chemical dependency.” Nonalcoholics are, therefore, sometimes introduced to A.A. and encouraged to attend A.A. meetings. Nonalcoholics may attend *open* A.A. meetings as observers, but only those with a *drinking* problem may attend *closed* meetings.

This is in keeping with the Long Form of A.A.'s Third and Fifth Traditions:

**Third Tradition:** Our membership ought to include all who suffer from alcoholism. Hence we may refuse none who wish to recover. Nor ought A.A. membership ever depend upon money or conformity. Any two or three alcoholics gathered together for sobriety may call themselves an A.A. group, provided that, as a group, they have no other affiliation.

**Fifth Tradition:** Each Alcoholics Anonymous group ought to be a spiritual entity *having but one primary purpose* — that of carrying its message to the alcoholic who still suffers.

### ***Working Within the Traditions***

Let's take a look at some other A.A. Traditions and their relationship to cooperation with the professional community.

**Tradition One:** “Our common welfare should come first; personal recovery depends upon A.A. unity.”

We can all keep this Tradition in mind when, for example, an influx of new members from a local rehab causes controversy within a group.

**Tradition Two:** “For our group purpose, there is but one ultimate authority — a loving God as He may express Himself in our group conscience. Our leaders are but trusted servants; they do not govern.”

This Tradition is helpful when we're tempted to impose the “right” way of working the program on seemingly unwilling newcomers.

**Tradition Four:** “Each group should be autonomous except in matters affecting other groups or A.A. as a whole.”



**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.”

This Tradition reminds us never to give the impression that A.A. itself, or any A.A. group, endorses (or opposes) or finances any other enterprise, no matter what our individual opinions may be. It also points out that seeking prestige always creates problems for us.

**Tradition Seven:** “Every A.A. group ought to be fully self-supporting, declining outside contributions.”

**Tradition Eight:** “Alcoholics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.” We do not accept payment for A.A. service work.

**Tradition Ten:** “Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy.”

**Tradition Eleven:** “Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio, and films.”

This Tradition informs us that A.A.s always respect each other’s anonymity.

**Tradition Twelve:** “Anonymity is the spiritual foundation of all our Traditions, ever reminding us to place principles before personalities.”

## Anonymity

### ***C.P.C. Service Work: An Anonymity Break?***

When approaching C.P.C service work, some A.A. members are concerned that revealing their identity to members of the professional community constitutes an anonymity break, since the Eleventh Tradition states: “Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio and films.” This Tradition of anonymity lies at the heart of A.A. and is a constant and practical reminder that personal ambition has no place in A.A. As the Twelfth Tradition states: “Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.” Humility, expressed by anonymity, is the greatest safeguard that Alcoholics Anonymous can ever have.

However, the purpose of C.P.C. and Public Information (P.I.) service work is to share with the general public what A.A. is, what we do, and how to get in touch with us. Our hope is that an alcoholic, or a concerned friend or relative, who hears about A.A. will know that we offer a solution to alcoholism. The general sense is that A.A. members remain anonymous at the public level involving all forms of media, but that the A.A. name itself (as well as phone numbers, websites, etc.) should be known, and that accurate and consistent information on A.A. needs to be made available.

### ***Anonymity at the Public Level***

In *The Language of the Heart*, Bill writes, “Our whole public relations policy, contrary to usual customs, should be based upon the principle of attraction rather than promotion.” In the pamphlet “A.A. Tradition: How It Developed” (page 41), he stated: “We ought not disclose ourselves to the general public through the media or the press, in pictures or on the radio.” (This would also, these days, include digital or social media.)

### ***Anonymity at the Personal Level***

In *The Language of the Heart* (page 15), Bill writes: “It should be the privilege of each individual A.A. to cloak himself with as much personal anonymity as he desires.” At the personal level anonymity provides protection for all members from identification as alcoholics, something newcomers may particularly desire. However, in doing C.P.C or P.I. service work — such as giving presentations to those in a professional field — an A.A. member may be asked for his or her first and last names. This is not an anonymity break because it is not on a level of press or media, and because an A.A. member doing this type of service work is also doing Twelfth Step work. However, if

as an A.A. member, you are uncomfortable with this, then perhaps another form of service might be a better fit for you.

### ***Anonymity at the Group Level and Open A.A. Meetings as an Informational Tool***

C.P.C. committees often make open A.A. meetings known to professionals as an informational tool for those students, family members or professionals wanting to know more about A.A., since nonalcoholics can attend as observers. If this is the case, it is a good idea for the C.P.C. committee member to have a conversation before the A.A. meeting explaining the principle of personal and public anonymity with the professionals in attendance. Many open A.A. meetings start with an anonymity statement. (Anonymity cards containing a brief statement about A.A.'s anonymity Tradition may also be obtained from G.S.O.)

The 1956 General Service Conference approved the following brief statement of A.A.'s Movement-Wide Public Information Policy, which holds true for C.P.C. work:

“In all public relationships, A.A.'s sole objective is to help still-suffering alcoholics. Always mindful of the importance of personal anonymity, we believe this can be done by making known to still-suffering alcoholics, and to those who may be interested in their problem, 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 believe further that all our efforts in this field should always reflect our gratitude for the gift of sobriety and our awareness that many outside of A.A. are equally concerned with the serious problem of alcoholism.”

The 23<sup>rd</sup> General Service Conference (1973) reaffirmed that “the furnishing of information about Alcoholics Anonymous to professional societies is not in violation of the Traditions.”

### ***How to Handle Anonymity as a Practical Matter***

C.P.C. service workers frequently gain access to professional events and are sometimes asked to supply identification. This is not an anonymity break at a public level — you are simply following the rules of the particular facility you are entering.

When staffing a booth, one's badge can read either “A.A. Volunteer” or “Sally — A.A. Volunteer,” without any last names being used. The same holds true when C.P.C. committees give presentations on A.A. to professionals — only first names should be used.

It is generally wise to clarify the A.A. Tradition of Anonymity with those arranging the meeting at which you are speaking, especially if you think a report of the meeting might be published, disseminated via social media or broadcast.

### ***Anonymity Resources***

The books *Alcoholics Anonymous Comes of Age* and *Twelve Steps and Twelve Traditions* share some of the history of the development of C.P.C. and Public Information activities, as well as information on anonymity.

Other sources to be found at [www.aa.org](http://www.aa.org) include the pamphlets “Understanding

Anonymity” (P-47), “Problems Other Than Alcohol” (P-35) and “Speaking at Non-A.A. Meetings” (P-40). A.A. Guidelines can be found on the Internet, as well as the “Anonymity Resource Page” at [www.aa.org](http://www.aa.org).

The long form of Tradition Eleven states: “Our relations with the general public should be characterized by personal anonymity. We think A.A. ought to avoid sensational advertising. Our names and pictures as A.A. members ought not be broadcast, filmed, or publicly printed. Our public relations should be guided by the principle of attraction rather than promotion. There is never need to praise ourselves. We feel it better to let our friends recommend us.”

— *Twelve Steps and Twelve Traditions*, page 192

## How To Get Started

C.P.C. committees are started with the agreement of local groups to support this Twelfth Step service work. Today, most areas have working C.P.C. committees (in some cases, the committee also serves “public information” functions). Typically, a C.P.C. committee is aligned with and funded by one or more service bodies — area, intergroup/central office, district, etc.

### *A Few Suggestions on Getting Started*

- When you believe the need for a C.P.C. committee is apparent, notify local groups through G.S.R.s or other contacts that any interested A.A. member is welcome to participate. Area, district or central office newsletters can be utilized to do this. Include the D.C.M. or other area officers as well.

If practical, invite one or more A.A.s experienced in C.P.C. service in nearby communities to attend the meeting for the purpose of sharing how they got started.

- In addition to this Workbook, study the basic material listed below. Have extra copies for those attending the start-up meeting.

“Speaking at Non-A.A. Meetings”

“How A. A. Members Cooperate with Professionals”

“Understanding Anonymity”

“Problems Other Than Alcohol”

A.A. Fact File

A.A. as a Resource for Drug & Alcohol  
Court Professionals (F-177)

A.A. Guidelines: Cooperation with the Professional Community; Cooperating with Courts, D.W.I....; For A.A. Members Employed in the Alcoholism Field

- At the first meeting, after everyone has been introduced, ask an experienced A.A. guest(s) to briefly share.
- Develop a committee membership list from those attending the meeting. One of the basic activities of committee members is to read and discuss the relevant pamphlets and other literature.
- C.P.C. committees find that regular meetings help to keep their services moving forward and provide opportunities to iron out any difficulties. It is important to have scheduled dates and times for these meetings.
- Once the new committee has met and become comfortable with the basic C.P.C. literature, determine which committee members are available during daytime hours,

as well as those who are willing to participate in evening functions. This is important because much C.P.C. work takes place during business hours at the professional person's workplace or during classes at professional schools.

- Some committees find it helpful to prepare a list of local open A.A. meetings to provide to professionals.
- Next, the committee could discuss which group of professionals to contact first. Established C.P.C. committees have found that focusing on one profession at a time, such as a visiting nurse association, home health care agency or school of nursing, prevents a scattering of A.A. resources.
- An email or telephone call to such an agency should lead to identification of the person responsible for information and training or curriculum. A conversation with that person might include an offer to meet and provide A.A. information. It might also be appropriate at this time to set a date for an A.A. presentation.
- Once a date is set, several committee members volunteer to take on this assignment.
- Communication with the various professional communities is very important. Identify professional entities, including schools and faculties, that would benefit by knowing more about A.A. and develop a list of people to telephone for preliminary meetings. Arrange to attend meetings of professional societies as an observer. Develop personal face-to-face relationships within the professional community.
- Local C.P.C. committees sometimes provide G.S.O. with copies of locally developed C.P.C. pieces, such as flyers for those who have been court ordered and suggestions for approaching an individual's doctor to share about Alcoholics Anonymous. Contact the C.P.C. desk to see what is available.

### ***Suggested C.P.C. Committee Goals and Projects***

- Study C.P.C. Workbook and related A.A. literature and resources available on G.S.O.'s A.A. website: [www.aa.org](http://www.aa.org).
- Communicate and cooperate with Correctional Facilities, Treatment and Accessibilities, Public Information, and other C.P.C. committees to share experience.
- Hold workshops for members who want to learn about C.P.C. Twelfth Step service and how to share information about Alcoholics Anonymous with professionals they may come in contact with in their daily lives.
- Contact local professional schools that train future health care, legal/correctional or human resources/employment professionals and offer to do A.A. presentations.
- Contact professionals and offer to meet with them in their office to share information.
- Utilize the *About A.A.* newsletter in your C.P.C. contacts with professionals. (Past issues can be found at [www.aa.org](http://www.aa.org).)
- Utilize the C.P.C. Videos for Professionals.

- Invite local professionals to a breakfast or luncheon with a presentation explaining how A.A. can be a resource and explaining what A.A. is and is not.
- Contact local court professionals and offer A.A. presentations.
- Contact a military base or VA facility in your area to offer a presentation or meeting.
- Contact local physicians, hospitals and clinics and arrange for A.A. literature to be available in their waiting rooms, and develop a plan for how to keep the literature stocked.
- Let groups know the committee is available as a resource if questions or problems arise with the local courts.
- Invite professionals and professional students to attend an open meeting.
- Contact the C.P.C. desk at G.S.O. to request a PowerPoint presentation that can be adapted for local needs.
- Create a display for use at professional meetings and conferences.
- Contact local professional organizations and offer A.A. presentations and/or investigate opportunities to have an A.A. table/exhibit at their meetings or conferences.
- Send sharing on local C.P.C. efforts to G.S.O.
- Share your enthusiasm! Find a co-chair and interested members in order to help.

## Committee Services

One of the best resources for C.P.C. work is A.A. literature. Sample literature is usually enclosed in letters of introduction to professionals, and a variety of pamphlets and books are a part of any C.P.C. presentation.

*About A.A.* is a newsletter for professionals published twice a year. The mailing list includes professionals who request this service, and local C.P.C. chairpersons, who are free to make copies of each issue for use during presentations and A.A. exhibits at professional meetings. *About A.A.* can also be read on G.S.O.'s website. Names of professionals who wish to be on the *About A.A.* mailing list are sent to G.S.O., attention: C.P.C. Desk. For "Digital Delivery" professionals can sign up to receive the *About AA* newsletter for professionals by going to G.S.O's A.A. website, [www.aa.org](http://www.aa.org), then, from the homepage, clicking on the box labeled "A.A. Periodicals Digital Subscriptions" and follow directions.

It's a good idea to keep a supply of literature on hand for unanticipated opportunities (see C.P.C. Discount Order Form in pockets of folder for low-cost bulk purchases).

### ***Presentations***

**Preparing for a C.P.C. presentation:** Presentations can take place at the invitation of an outside organization, possibly as part of one of its regular meetings. Often, the C.P.C. committee takes the initiative through email, a phone call or face-to-face meeting, offering to make information on A.A. available. The pamphlet "Speaking at Non-A.A. Meetings" is essential reading for those planning such a presentation.

**Basic guidelines for C.P.C. presentations:** There are two suggested formats for presentations: first, with a speaker and one or two supporting members; and second, with a panel of two to four people.

A.A. participants include a moderator and one or two A.A. members experienced in speaking about A.A. Sometimes, a knowledgeable, nonalcoholic friend of A.A. may also be invited to take part.

In either case, the points listed below can be useful:

- Introduce yourself and ask other A.A.s to follow suit; read or summarize the Anonymity card for public meetings; read or paraphrase the A.A. Preamble, emphasizing relation to Traditions.
- Discuss how we can be helpful to professionals in their work with problem drinkers.
- Briefly explain A.A.'s Twelve Steps, and briefly summarize their application in your own experience.



- At this point consider showing videos such as the C.P.C. video “A.A. Cooperation With the Professional Community,” “Hope: Alcoholics Anonymous,” “A.A. Videos for Young People” or other videos appropriate for the audience.
- Explain that A.A. meetings may follow a variety of formats — speaker, discussion, etc. — but that there are two basic types:

*Open:* Guests are welcome as observers; if practical, mention that individual members are available to take a professional friend to a meeting.

*Closed:* For A.A. members or those with a desire to stop drinking.

- It’s important to have information on local meetings available, whether the central office A.A. meeting directory or a listing of local open meetings. Be prepared to offer the names and phone numbers of one or two committee members to the guests.
- Discuss what A.A. does and does not do (refer to “Fact Sheet”).
- Give a brief version of your story, emphasizing recovery in A.A.
- Allow time for a question-and-answer period:

Our credibility is determined by the way we respond to questions. “I don’t know” is often the best answer. If you are uncertain of an answer, research the question and contact the person later.

Avoid commenting on issues outside of A.A., including remedies or treatments for alcoholism used by others.

- For professionals who wish to receive *About A.A.* there is a ‘Subscribe to *About A.A.*’ prompt on the website, or requests can be sent to G.S.O.

### ***Working with Students Attending Professional Schools***

Many local, area and intergroup committees have gotten a jump start on informing professionals about A.A. by working with students in various professional disciplines. Most of the information that follows concerns working with medical students, but the same ideas may be used with students in such other areas as social work, law, nursing, dentistry, pharmacy, education, law enforcement and theology.

**Typical programs:** C.P.C. committees have contacted medical schools offering to send speakers and give presentations at the school, take students to meetings, and meet with them on a one-on-one basis.

The experience of a local central office is typical: The central office wrote to the deans of medical schools in the area, inviting students to learn more about the A.A. program by attending meetings or having an A.A. speaker come to the school. Students interested in attending open meetings were given a meeting list to select the groups they wanted to attend, and in turn the groups were notified to make sure they would welcome students and have members available to answer questions.

At a local hospital, an A.A. speaker is scheduled to talk to third-year students every five to six weeks. The format is a three-member presentation using “Information on Alcoholics Anonymous” as a guideline. Pamphlets and a current meeting list are

distributed, and time is left for a short version of each panelist's story and for questions and answers.

**Shared experience on building relationships with students one on one:** Many staff physicians who treat alcoholics in rehabs and elsewhere have never been to a meeting other than those held at the hospital. Doctors in one area wanted to get a truer idea of what A.A. meetings really are, and the local intergroup set up a program of one-on-one sponsorship, which has since served as a model for other programs. The goal is to eradicate stereotypes about A.A. by giving a student first-hand experience of A.A. meetings and the chance to get to know an individual A.A. member.

The intergroup obtained a list of students, with names, addresses and phone numbers from the medical school's administrative office, and at an orientation meeting collected the same information from A.A. members who volunteered to serve as sponsors.

Intergroup members assigned a team of A.A. callers to phone the volunteer members, asking them to take a student to a meeting within two weeks. Once committed, the A.A. member was given the student's name and other information and asked to get in touch. Before attending a meeting, the student was given an envelope containing five or six pieces of A.A. literature, a meeting list and a cover letter explaining the mechanics and purpose of the meeting. Afterwards, the member notified the intergroup office that the student had been to the meeting and agreed to attend future orientation meetings for volunteers to share experience.

- The A.A. member should have a minimum of one or two years of sobriety, knowledge of the Traditions and service structure, and some service experience (group, intergroup or general service).
- Volunteers should contact the student promptly and let intergroup know of any difficulty.
- Since students have little free time, the meeting should be scheduled at their convenience.
- Students should attend open meetings only, preferably those the member is familiar with and where he or she is known. Hospital, rehab or institution meetings should be avoided.
- In order to help students experience a typical meeting, members should introduce them as medical students to the entire group after the meeting rather than before.
- One-on-one contact is important. Volunteers should not travel to the meeting with other A.A. friends.
- Volunteers should let the students ask the questions and not tell them everything.
- When sharing a personal opinion, volunteers must make it clear that they do not speak for A.A. as a whole.

## ***Working with the Military***

A number of local, area, and intergroup committees have been informing professionals about A.A. by working with various members of the military, often addressing their efforts to unit commanders or military chaplains.

**General approach:** From the perspective of one A.A. member involved in carrying the message to the military, education is critical to helping the military address alcoholism issues. “Education can begin with getting material to unit commanders who rotate through jobs. There is currently a trend among the professional substance abuse community in the armed forces not to refer problem drinkers to a single solution [i.e., not A.A. alone], so reaching out to military bases can include identifying the right person to reach in the chain of command and making contact via letters or emails; making yourself available to speak on base; distributing meeting schedules, etc. In other words, making sure the chain of command knows that A.A. is there, wanting to help.” Adds another member who has had experience as both C.P.C. chair and public information chair, “Unlike A.A., the military is a hierarchical organization. Chain of command is everything, so A.A.s can utilize that to help carry the message. The person they should talk to is the commanding officer of the base or the medical unit, or the Chief of Chaplains.”

**Shared experience with building relationships between local A.A., veterans and military professionals:** A G.S.R. in St. Louis, MO for District #53 shares that the district supports the local VA Hospital by providing almost nightly meetings for veterans. Each group in the district is asked to chair one night a month, or two if they have the membership to support this. The district also hosts a “Sunny and Sober” event in May and September for veterans at the hospital, with food and A.A. speakers. The turnout is always good and the vets are brought over by a bus provided by the VA. “We give away Big Books to the most and least amount of sobriety. Vets have become home group members in nearby meetings thanks to the work of some of our A.A.’s who take them to their home groups.”

Says another A.A. from St. Louis, “We carry the message into a homeless shelter for veterans only. A.A. has a good relationship with the homeless shelter. The shelter asked for A.A.’s presence.

“The meeting uses one of the following formats: a Big Book study, speaker meeting, a sharing session and a birthday speaker on the 4th Monday. The chairperson tries to locate A.A. speakers who are vets themselves. The participants seem to be more responsive to people who are vets.

Area Veterans do not want to be treated differently, but they do have “special issues.”

“A lot of these gentlemen suffer from PTSD and traumatic experiences. We have not fully come up with a really effective way to reach these folks, and the members carrying in the message have to be able to exhibit a lot of patience and gain awareness that they are dealing with more issues than just alcohol. Being more informed about what the disorder is and learning how it might impact carrying the message is key.”

For those A.A.s on active duty, the challenges can be different. A member from Northwest Florida shares: “When I was on active duty, most of the military A.A. members supported each other at off-base meetings and through sponsorship. The difficulties occurred when we were deployed and had limited contact with each other.

It was also difficult to locate meetings overseas, and due to the transient nature of the active duty life, meetings on bases come and go.

“The message was most effectively carried to me (on deployment) through Grapevines that my local group members sent to me, speaker tapes/CDs of A.A. members (especially other sober military members), and through the stories of military members in the 3rd Edition of the Big Book.

A member from Canada shares additional experience, “During my time in A.A. I have been in many different places because of my service in the Canadian Army. A memorable tour was in Damascus, Syria in 1978 where I was the only sober member of A.A. in a city of 4 million. I could not attend meetings. Things that got me through that tour were the letters I received from my sponsor and the Grapevines he sent me.”

Another A.A. notes: “While on active duty I had the honor of starting English-speaking A.A. meetings in Germany, putting on an A.A. Roundup for sober GIs and civilians in Augsburg, Germany, working as a liaison to German-speaking A.A., starting an A.A. meeting in Basra, Iraq and attending A.A. meetings in Talill and Balad, Iraq.”

Some of the ways this A.A. has carried the message to the veteran and active duty community.

1. Bringing A.A. meetings into VA treatment facilities on a regular basis.
2. Speaking at treatment centers that cooperate with the National Guard and provide low cost treatment to soldiers who don't qualify for VA treatment.
3. Conducting A.A. workshops for Chaplains of the Minnesota National Guard, showing the video “Hope,” along with lively Q&A sessions.

### ***Approaching Professionals***

Many areas encourage individual A.A. members to approach professionals and share information about A.A. Some areas provide a packet for local members to help them. The packet often includes a guide letter directed to the A.A. member offering information on how to approach a professional as well as a letter to the professional, along with a few pieces of A.A. literature. Samples of some of these are available from the C.P.C. desk at G.S.O., along with “An Open Letter to Health Care Professionals” from Dr. John Fromson, former Class A (nonalcoholic) A.A. trustee (available at [https://www.aa.org/assets/en\\_US/f-210-AnOpenLettertoHealthCareProf.pdf](https://www.aa.org/assets/en_US/f-210-AnOpenLettertoHealthCareProf.pdf)).

Below are some pieces of A.A. literature that might be included in a packet directed to a specific profession. As committees become familiar with C.P.C. literature, they may make changes or additions that are more appropriate for professionals in their community.

**For Medical Professionals:** “A.A. as a Resource for the Health Care Professional”; “Problems Other than Alcohol”; “The A.A. Member — Medications and Other Drugs.”

**For Legal Professionals:** “Alcoholics Anonymous in Your Community”; “If You Are a Professional”; “Information on Alcoholics Anonymous.”

**For Clergy:** “Members of the Clergy Ask About Alcoholics Anonymous.” “Alcoholics Anonymous in Your Community”; “A Member’s-Eye View of Alcoholics Anonymous”.

**For Employers or Employee Assistance Professionals:** “Alcoholics Anonymous in Your Community”; “Information on Alcoholics Anonymous”; “Is There a Problem Drinker in the Workplace?”

**For the Military:** “A.A. and the Armed Services”; About A.A. (Fall 2017); AA in the Military (AA Grapevine).

As you conclude your visit with the professional, let them know that your committee would like to know how it could be more helpful, and ask if the professional would fill out this stamped and addressed postcard after you leave. Fill in the date of the meeting before handing over this card, which can be already stamped and addressed to your local C.P.C. committee chair.

***Sample contact assessment postcard for professionals***

Date: _____	
<b>Thank you for meeting with us today!</b>	
1. Was the length of time we spent with you about right?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Will you be able to use the A.A. information and literature we provided?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Do you now have a clearer understanding of what A.A. does and does not do?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Overall, was meeting with the A.A. member valuable to your work?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Based on today's meeting, is there anything we can do better explain about A.A. to members of your profession?	
_____	
_____	
_____	
For CPC Committee Use:	
Contact was to doctor(s)/staff, Association, other: _____	

***Shared Experience for One-on-One C.P.C. Contact with Professionals***

Direct contact with professionals one-on-one is an effective way to share information about Alcoholics Anonymous. C.P.C. committees have shared the following suggestions for personal contacts with professionals:

- Be prepared — gather any appropriate background information about the professional and take appropriate literature (see page 39).
- C.P.C. appointments are business appointments — be prompt and dress appropriately. One committee shares, “The most important thing when an A.A. member of the C.P.C. committee meets with a professional is that they are representing A.A. — impressions are important. Wear your sobriety well.”
- If you plan on using online resources, such as showing a local website or G.S.O.’s A.A. website (www.aa.org), make sure you have web access ahead of time.

- Most professionals are extremely busy people and appreciate brevity and adherence to the issues at hand.
- Be sure to express appreciation for the opportunity to meet face-to-face.
- Professionals want to know how best to get their clients involved in the A.A. program (meeting lists, the A.A. telephone number and/or website and how to use them, i.e., how to arrange for their client to be taken to their first A.A. meeting and any other appropriate local resources).
- Give the professional a nonrotating telephone number or email address to contact you/the C.P.C. committee.
- Many professionals are interested in acquiring A.A. literature for their clients and receiving regular replacement literature.
- Go in pairs. If you are making an initial contact with a treatment or correctional professional, you may want to invite a Treatment or Corrections committee member to accompany you.
- When making initial contact with a treatment or correctional professional, be sure to establish what the protocols and expectations will be when A.A. enters the facility — both for the A.A.s and their clients, and communicate this information to the Treatment or Corrections committee. There may be additional considerations if minors are involved.
- Remember that no member speaks for A.A. as a whole.
- Focus on sharing the solution and what A.A. is and is not. Explain our primary purpose.
- Offer to make a presentation to their professional associates.
- Invite the professional to an open meeting and offer to accompany them.
- Complete any meeting follow-up promptly.
- Detailed local sharing on one-on-one contacts with professionals is available from the C.P.C. desk at G.S.O.

### ***Workshops***

**For A.A. members:** Often workshops are held during state and regional A.A. conventions, area assemblies and district and central office meetings and for the purpose of explaining the ways in which C.P.C. services enhance our ability to carry the A.A. message to the still-suffering alcoholic. This type of workshop provides an opportunity to encourage A.A. members to share their sobriety and basic A.A. information with their doctor, lawyer, clergy person, former bartender, etc.

**For professional friends:** To explain how A.A. may be helpful to the people served by professionals, the C.P.C. Presentation Guidelines can be used.

Sometimes C.P.C.s arrange gatherings of professional people, such as a breakfast or buffet luncheon with one or two speakers.



## ***Newsletters***

Some C.P.C.s publish regular newsletters to inform local A.A.s of their activities. Many committees distribute reports of their meetings to the district, area committee, and delegate, and often send a copy to the C.P.C. desk at G.S.O. Area C.P.C. chairpersons often exchange information and progress reports with each other.

## ***Exhibits***

**Exhibits at national or international meetings of professional groups:** Exhibits at national or international sites are coordinated through the C.P.C. desk at G.S.O. Invitations arrive at the C.P.C. desk and are reviewed by the trustees' C.P.C. committee, which approves A.A.'s participation in specific national meetings.

With the agreement of the local C.P.C. committee, keeping the area delegate informed, A.A. members staff these exhibits. All costs and advance arrangements are handled by G.S.O., including shipping the C.P.C. traveling exhibit to the chairperson or responsible committee member.

Well ahead of the opening date, two pieces of service material, "For the Chairperson Staffing an A.A. Exhibit" (F-200) and for "Volunteers Staffing an A.A. Exhibit" (F-201), are mailed by G.S.O.

**At local, state or regional professional meetings:** Area or local C.P.C. committees learn of opportunities to staff a booth through contacts with professionals and "meeting planners," people who handle advance arrangements for larger meetings. Other resources for information on upcoming professional conferences or meetings are convention bureaus, chambers of commerce, and offices of professional societies.

When G.S.O. receives information on local or regional professional conferences, the details are sent to the local C.P.C. chairperson, along with a reminder that G.S.O. will ship appropriate literature to the committee, provided the request is received well in advance.

As with all committee services, the purpose is to carry the A.A. message to professionals who may be in contact with the still-suffering alcoholic. When staffing an A.A. exhibit or booth, this is done by displaying and distributing A.A. information, offering a "welcome" to people attending the meeting, and having open communications with other exhibitors. This often leads to other C.P.C. opportunities.

C.P.C. committee people also answer questions and assist visitors interested in filling out free subscription cards (from G.S.O.) for *About A.A.* or providing their contact information on a business card. Blue and white "Public Information" mailing labels (also from G.S.O.) may also be filled out by interested visitors. When G.S.O. receives a completed label, the addressee is sent a letter of appreciation with links to items on aa.org that would be of interest to professionals, along with a packet of basic A.A. literature.

**Advance planning:** Select the professional events the committee hopes to attend well in advance, then contact the meeting planner to learn location, dates and possible exhibitor fees. Customarily, a table — sometimes with skirt, chairs, etc. — is supplied by the exhibit host. If there is a fee for exhibit space, you might inquire if there is a lower fee for nonprofit groups such as A.A.

Exhibits are usually held in hotels or in large areas that allow for many booths to be set up side by side. The committee is assigned a booth in advance, and the event planner

sends details as to time for set-up and dismantling, and the hours that the exhibit area will be open. Questions go to the meeting planner or contact person.

**Exhibit costs:** If possible, the committee's budget should include funds for exhibit space fees for these events, literature for professional meetings, and small, unanticipated opportunities throughout the year.

**Portable exhibits:** A number of areas have built or purchased simple, professional-appearing exhibits for use by the C.P.C. (and often, P.I. and Corrections) committees. Contact other C.P.C. committees or G.S.O. for more information.

**Enlisting A.A. Volunteers:** Attend area assembly, district and intergroup meetings and announce C.P.C. commitment to exhibit, asking for A.A. volunteers for the dates of the event. Get names and phone numbers from prospective volunteers, and give your phone number to each.

Some C.P.C. committees find that a smooth-functioning exhibit staff is assured by getting all the A.A. participants together before the event and reminding them to dress neatly and to follow the basic examples in the "Fact Sheet" and the A.A. Traditions. A.A.'s presence at these meetings is often the first contact a professional may have with a recovering alcoholic. Because of this, some care must be given as to how we present ourselves. Familiarity with the pamphlet "Speaking At Non-A.A. Meetings," as well as with the Traditions, is essential.

- The shifts of volunteers should be scheduled well in advance. Two at a time is often best so that no one A.A. is overburdened. A woman and man together works well, as does putting an experienced member with someone new to C.P.C.
- Send reminder notes to each A.A. who agreed to participate. Follow up with a phone call one or two days before the event.
- Transport and set up the exhibit and literature during hours designated by the host organization.
- Arrange literature (pamphlets, books, copies of *About A.A.*, meeting lists, Grapevine, La Viña and/or La Vigne copies) in an appealing manner for easy access by exhibit visitors. Literature racks are available through G.S.O.'s Conference-approved literature catalog. Keep additional supplies under the table to replenish the display.
- Be on time. Introduce yourselves to other exhibitors. Open communications with these friends often leads to other C.P.C. opportunities.
- Don't push. Remember: a cheerful smile and welcoming hand put most people at ease and leave a positive impression of our Fellowship.
- It's suggested that A.A. volunteers minimize obstacles between themselves and attendees. For instance, it's best to be near the front of the A.A. exhibit space and not allow the booth furnishings to be a barrier.
- When the event closes, pack up exhibit supplies and literature. Send P.I. labels, *About A.A.* cards, and any special requests to G.S.O., attention C.P.C. desk.



- Leave the A.A. space in good order, looking as you would want the Fellowship to be remembered.
- Give feedback to the A.A. community the committee serves (area, district or intergroup).
- Be open to the next opportunity to carry our message through a professional person.

**Capturing contact info:** Badge-Reader Technology, also called Lead Retrieval Systems, is one new way of capturing contact information for everyone who comes to visit an exhibit at a conference or trade show. Such technology is getting more and more popular at trade shows and makes following up with professionals much more efficient. Often, it's an app or simple device and event personnel may offer technical assistance if needed. G.S.O. will pay for such technology at national conferences if the Area C.P.C. committee is comfortable with trying it. More information is available through the C.P.C. desk at G.S.O.

## Guide Letters

Many C.P.C. committees initiate contact with professionals by postal mail or email. The suggestions below and the templates that follow are meant to be guides to help with the content and style of those letters and emails.

- Make the letter easy to read. White space helps.
- Let the professional know how A.A. can be a resource for them and those they serve.
- Aim for one idea per paragraph and keep paragraphs short — usually two or three sentences.
- News often gets readers' attention. Is there news to convey?
- Speak of yourself in the plural: “we” “us” “our” as if to say we are all in this together.
- Offer to give a presentation (for example, the C.P.C. PowerPoint presentation, available from the C.P.C. coordinator at G.S.O.).
- Offer to accompany professionals or students to open A.A. meetings.
- Make it clear what their next step should be — for example, to contact you.
- Give them a choice of ways to contact you — for example, by phone or by email. Use non-rotating emails and phone numbers when possible. Make sure your contact information is clear and easy to find.
- If you are sending the letter via email add hyperlinks so the professional can just click to go to webpages you reference or click to email you.
- Personalize letters. Add a handwritten signature and consider handwriting the envelope so it won't look like a mass mailing.
- For enclosures, consider pamphlets addressing their specific profession and service pieces such as F-210 (Open Letter to Healthcare Professionals), the Preamble, and F-2 (Information on A.A.).
- Information on the Traditions may also be helpful, especially those dealing with anonymity and cooperation without affiliation.

## ***Sample guide letter to physicians/healthcare professionals***

Dear \_\_\_\_\_,

If you have patients with a drinking problem, we are here to help. Support from Alcoholics Anonymous can be a complement to virtually any treatment you offer a problem drinker.

Referring patients to A.A. is as simple as having them go to the homepage of the A.A. website, [www.aa.org](http://www.aa.org) and click on Need Help With a Drinking Problem?

The latest survey of our members in the U.S. and Canada indicates that 50% have been sober more than five years and 24% have been sober between one and five years. Put simply, A.A. works.

On the 'For Professionals' page on [www.aa.org](http://www.aa.org) you can find a brief overview of A.A. written for healthcare professionals.

Additionally, we can provide you with A.A. pamphlets you can offer to patients and, if you wish, a rack of A.A. literature for waiting areas. We can also provide a list of local meetings. If a patient would like a member to accompany them to a meeting we would be happy to help. We would also be happy to accompany you to one of our Open meetings if you would like to find out more about A.A.

Alcoholics Anonymous is not a religious organization. It includes people of many faiths, as well as atheists, agnostics and nonbelievers. What unites us is our shared suffering and our shared solution.

Today A.A. has over two million members in 180 countries around the world. In the U.S. and Canada alone there are over 65,000 A.A. groups offering hope to the sick and suffering alcoholic.

Please contact us if there is any way that we can be of service to you and your patients.

Sincerely,  
Jane S., Cooperation with the Professional Community  
[jane@gmail.com](mailto:jane@gmail.com)  
(123) 123-4567

***Sample guide letter to physicians/healthcare professionals  
using service piece F-210***

A past trustee of the General Service Board, Dr. John Fromson, a nonalcoholic, recently provided us with “An Open Letter to Healthcare Professionals.” It is available on the Information for Professionals page at [www.aa.org](http://www.aa.org) and can be ordered on the website (F-210). The power of a peer to peer recommendation leads us to suggest using it when contacting healthcare professionals. Below is a template for a cover note that could accompany Dr. Fromson’s letter if it were mailed or attached in an email. You could also simply put a sticky note on the letter saying that you thought it might be of interest to the professional and include your contact information if he or she would like more information.

Dear \_\_\_\_\_,

We thought you might be interested in this recent “Open Letter to Healthcare Professionals” from John Fromson, M.D., Chief of Psychiatry at Brigham and Women’s Faulkner Hospital and Associate Professor of Psychiatry at Harvard Medical School.

In it he mentions that “a referral to Alcoholics Anonymous (A.A.) can be a lifesaving event for those with an alcohol use disorder.”

Dr. Fromson says that referring patients can be as simple as having them go to the A.A. website, [www.aa.org](http://www.aa.org).

If you wish, we can provide you with A.A. pamphlets you can offer to patients, along with a literature rack for waiting areas. We can also provide a list of local meetings. If a patient would like a member to accompany them to a meeting we would be happy to help. We would also be happy to accompany you to one of our Open meetings if you would like to find out more about A.A.

Please contact us if there is any way that we can be of service to you and your patients.

Sincerely,  
Jane S., Cooperation with the Professional Community  
[jane@gmail.com](mailto:jane@gmail.com)  
(123) 123-4567

## ***Sample guide letter to physicians using bold headlines***

Dear \_\_\_\_\_,

**You may have patients you have diagnosed as having a problem with alcohol. You may also have found it frustrating to try and help them. No matter how convincing the lab results or physical findings, alcoholic patients often still deny that they have a problem or protest that they're 'not that bad.'**

**Alcoholics Anonymous (A.A.) can be a great resource for you.** Referring patients to A.A. is as simple as having them go to the homepage of the A.A. website, *www.aa.org*, and click on *Need Help With a Drinking Problem?*. A brief overview of A.A. written for healthcare professionals can also be found on the *Information for Professionals* page of *aa.org*.

**Local A.A. members are also available to help you.** Our local committee can provide you with A.A. literature as well as a literature rack if you wish to display it in your waiting room. We can also supply you with lists of local meetings. And we'd be happy to accompany a patient to a meeting if they are interested in A.A.

**We'd be happy to bring you to one of our Open meetings.** Many physicians and other nonalcoholic professionals attend our open meetings so they can better understand what A.A. is and what it is not and tell patients they send to A.A. what to expect.

**A.A. is not a religious organization.** Our members represent almost every belief and attitude imaginable. We have atheists and agnostics. We have people of nearly every race, culture and religion. What unites us is our shared suffering and our shared solution.

**A.A. has helped millions recover since 1935.** A.A. was founded by a surgeon from Akron and a stockbroker from New York who realized they could help each other stay away from a drink, one day at a time. Today A.A. has over two million members worldwide. In the U.S. and Canada alone there are over 65,000 A.A. groups offering hope to the sick and suffering alcoholic.

**Please contact us if we can assist you in helping your patients.**

Sincerely,  
Jane S., Cooperation with the Professional Community  
jane@gmail.com  
(123) 123-4567

## *Sample guide letter to the Clergy*

Dear Reverend/Rabbi/Father \_\_\_\_\_,

Members of the clergy are often among the first persons sick and suffering alcoholics approach for help and understanding — and frequently the first to whom they candidly acknowledge their illness. Alcoholics Anonymous has always tried to be a helpful ally of the clergy and we would like you to know that we are here as a resource for the suffering alcoholic.

Introducing problem drinkers to A.A. can be as simple as having them go to the homepage of the A.A. website, [www.aa.org](http://www.aa.org), and click on Need Help with a Drinking Problem?. In the A.A. Near You section they can find contact information for the nearest A.A. Intergroup or Central Office which can guide them to nearby A.A. meetings where they will be most welcome.

We can also provide you with a printed list of local meetings as well as literature you can share with those who are interested. If you would like a display rack of literature that can also be arranged.

A.A. has both Open and Closed meetings. Open meetings are for anyone interested in finding out more about our program of recovery. Closed meetings are only for those with a desire to stop drinking. We warmly invite you to attend our open meetings and would be happy to accompany someone with a drinking problem to a meeting if that would help them feel more comfortable trying A.A.

A.A. does not inquire into alcoholics' religious beliefs — or lack thereof — when they turn to the Fellowship for help. However, the A.A. program of recovery is based on certain spiritual values. Individual members are free to interpret these values as they think best, or not to think about them at all.

Today A.A. has over two million members in 180 countries around the world. In the U.S. and Canada alone there are over 65,000 A.A. groups offering hope to the sick and suffering alcoholic.

We are always seeking to strengthen and expand our communication with members of the clergy and to work more effectively with you in achieving the purpose we share: to help the alcoholic who still suffers. Please contact us if there is any way we can be of service.

Sincerely,

Jane S., Cooperation with the Professional Community

[jane@gmail.com](mailto:jane@gmail.com)

(123) 123-4567

## *Sample guide letter to Military Chaplains*

Dear Chaplain \_\_\_\_\_,

We know from the experience of A.A. members in the military that Chaplains often play a crucial role in helping problem drinkers in the military recover. Often a Chaplain is the first person the drinker turns to for help and understanding, the one person they feel they can trust. We want to help you more effectively achieve the goal we share: to help the alcoholic who still suffers.

Introducing men and women to A.A. can be as simple as having them go to our website, [www.aa.org](http://www.aa.org), and click on Need Help with a Drinking Problem? In the A.A. Near You section they can also find contact information for the nearest A.A. Intergroup or Central Office which can guide them to nearby A.A. meetings where they will be warmly welcomed.

The website is also a valuable resource for professionals. We have an 'Information for Professionals' page, and offer access to pamphlets such as:

Members of the Clergy Ask about Alcoholics Anonymous

A.A. and the Armed Forces

A.A. has both Open and Closed meetings. Open meetings are for anyone interested in finding out more about our program of recovery and we welcome professionals to attend. Closed meetings are only for those who feel they have a problem with alcohol. We would be happy to accompany someone to a meeting if you believe that would help them feel more comfortable trying A.A.

A.A. does not inquire into alcoholics' religious beliefs — or lack thereof — when they turn to the Fellowship for help. However, the A.A. program of recovery is based on certain spiritual values. Individual members are free to interpret these values as they think best, or not to think about them at all.

Today A.A. has over two million members in 180 countries around the world. Often there are A.A. meetings where a soldier will be deployed. There are also a variety of online meetings (email, chat, forum, audio) in a variety of languages available at [www.aa-intergroup.org](http://www.aa-intergroup.org). We can also introduce you to the International Journal of A.A. called Grapevine. The magazine recently dedicated an issue to A.A. in the Military.

We are always seeking to strengthen and expand our communication with members of the clergy and to help the alcoholic stop drinking and lead a healthy, productive life. Please contact us if there is any way we can be of service.

Sincerely,

Jane S., Cooperation with the Professional Community

[jane@gmail.com](mailto:jane@gmail.com)

(123) 123-4567

***Sample guide letter to professionals who work with military veterans:***

Dear \_\_\_\_\_,

If you are a professional who works with military veterans that may have a drinking problem, we want you to know that Alcoholics Anonymous is here to help.

Introducing men and women to A.A. can be as simple as having them go to our website, [www.aa.org](http://www.aa.org), and click on Need Help with a Drinking Problem?. In the A.A. Near You section they can also find contact information for the nearest A.A. Intergroup or Central Office which can guide them to nearby A.A. meetings where they will be warmly welcomed.

The website is also a valuable resource for professionals. We have an 'Information for Professionals' page, and offer access to pamphlets such as:

Members of the Clergy ask about Alcoholics Anonymous

A.A. and the Armed Forces

In case you are not familiar with A.A., we are a fellowship of men and women who have had a drinking problem and some of us are military veterans as well. A.A. is nonprofessional, self-supporting, multiracial, apolitical, and available almost everywhere. It is not a religious society since it requires no definite religious belief. The A.A. program is based on acceptance of certain spiritual values, but the individual member is free to interpret those values as he or she thinks best. Membership is open to anyone who wants to do something about their drinking problem.

We know that it is common for veterans to have other conditions in addition to problems with alcohol. Guided by our primary purpose of trying to help others with their drinking problems, we try to share only our experience with drinking and recovery in A.A., leaving the consideration of other issues to those more qualified to handle them. As nonprofessional volunteers, we are not affiliated with any particular hospital or organization, though many A.A. groups do cooperate with V.A. facilities in order to help veterans who have a problem with alcohol.

We would be happy to visit your office and make a presentation to you and your staff explaining what A.A. is and what it is not. We can also accompany anyone who wants to experience an A.A. meeting to one of our Open meetings (our Closed meetings are only for those with a desire to stop drinking).

We share the goal of wanting to help the alcoholic stop drinking and resume their normal life and career. Please contact us if there is any way we can be of service.

Sincerely,

Jane S., Cooperation with the Professional Community

[jane@gmail.com](mailto:jane@gmail.com)

(123) 123-4567



## ***Sample guide letter to Corrections Professionals:***

Dear Warden \_\_\_\_\_,

Many corrections professionals agree that participation in Alcoholics Anonymous can help the alcoholic inmate live a sober and contented life both while in custody and after release. With over 1,400 A.A. groups in correctional facilities throughout the U.S. and Canada, and nearly 35,000 offenders working on staying sober behind the walls, there are countless stories of incarcerated men and women who have turned their lives around by practicing the A.A. program of recovery.

We would be happy to give a brief presentation to you or members of your staff about free resources A.A. can provide to help those suffering from alcoholism in your facility. Resources include:

- **A.A. Literature:** There are soft-cover books, booklets and pamphlets in a variety of languages as well as a monthly magazine that regularly features articles written by offenders who are staying sober.
- **Correspondence:** The Corrections Correspondence Service links offenders with “outside” A.A. members from other regions of the country who have volunteered to share their experience, strength and hope through letters or, when available, email.
- **Pre-release:** A.A. has a network of volunteers throughout the country who will coordinate getting an offender to a meeting as soon as they are released.
- **Video:** We have recently produced a video, now available on DVD, called “A New Freedom.” It was filmed in several prisons in the U.S. and Canada and features a diverse group of inmates sharing how finding A.A. in prison has led to positive changes in their lives. In addition to helping offenders it has been used as a training tool for staff. It can be previewed on [www.aa.org](http://www.aa.org).
- **On-site meetings:** A.A. volunteers understand that safety and security are the priority in correctional facilities and will cooperate fully with the rules and regulations of your facility if allowed to bring in meetings.

Please contact us if you would like to find out more about the help A.A. can offer.

Sincerely,  
Jane S., Cooperation with the Professional Community  
[jane@gmail.com](mailto:jane@gmail.com)  
(123) 123-4567

***Sample guide letter to Probation and Parole Professionals:***

Dear \_\_\_\_\_,

Probationers and parolees need a community of support to help them succeed. Alcoholics Anonymous can be that community of support and stability for those men and women who have a problem with alcohol.

If you are not familiar with A.A., the website [www.aa.org](http://www.aa.org) has a page 'For Professionals' which features videos and written information. We would also be happy make a presentation to you or participate in staff training, explaining our program of recovery from alcoholism, how sponsorship works, what A.A. literature is most helpful to newcomers, and the different kinds of A.A. meetings offered locally. We can also accompany anyone on staff who wants to experience an A.A. meeting to one of our Open meetings (our Closed meetings are only for those with a desire to stop drinking).

The strength of our program lies in the voluntary nature of membership in A.A. Yet, many of us first attended meetings because we were forced to, either by someone else or out of our own inner discomfort. And continual exposure to A.A. educated us to the true nature of our illness and how A.A. could help.

We are not professionals, but we have one unique qualification — our personal experience. We would love to put that to use helping the alcoholic who still suffers. If you think we can be of service please contact us. We look forward to hearing from you.

Sincerely,

Jane S., Cooperation with the Professional Community

[jane@gmail.com](mailto:jane@gmail.com)

(123) 123-4567

## ***Sample guide letter to Vocational Rehabilitation Professionals:***

Dear \_\_\_\_\_,

If one of your clients has a problem with alcohol, we want you to know that Alcoholics Anonymous is here to help.

We can provide you with information about the accessibility of meetings in the area and introduce you to other resources A.A. can offer. For example:

- A growing number of groups are providing signers to interpret for their members who are deaf.
- A.A. literature is available in many new formats including audiobooks, e-books, large-print, braille and ASL.
- We can also provide a sampling of illustrated, easy-to-read literature.
- A large number of online meetings, some videotaped in ASL, are available, as well as computer bulletin boards.
- We can provide you with local meeting lists that are coded to indicate meetings which are held in wheelchair accessible facilities.

If you are not familiar with A.A. the website, [www.aa.org](http://www.aa.org), has a page 'For Professionals' which features videos and written information. We would also be happy make a presentation to you and any other staff who are interested. We'd gladly accompany anyone on staff who wants to experience an A.A. meeting to one of our Open meetings (our Closed meetings are only for those with a desire to stop drinking).

There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. Alcoholics Anonymous is not a religious organization. It includes people of many faiths, as well as atheists, agnostics and nonbelievers. What unites us is our shared suffering and our shared solution. Today, A.A. has over two million members in 180 countries around the world.

Please contact us if there is any way that we can be of service to you and your clients.

Sincerely,  
Jane S., Cooperation with the Professional Community  
[jane@gmail.com](mailto:jane@gmail.com)  
(123) 123-4567

***Guide Letter Inviting Professional  
to Take Part in a Workshop***

Dear \_\_\_\_\_,

The \_\_\_\_\_ Area/District/Central Office/Intergroup Cooperation with the Professional Community Committee of Alcoholics Anonymous will hold a workshop for A.A. members and others who are interested in helping alcoholics maintain sobriety through the A.A. program of recovery.

We would be delighted if you agreed to take part in a panel discussion on the subject of \_\_\_\_\_. This panel will be held from \_\_\_\_\_ p.m. to \_\_\_\_\_ p.m. on \_\_\_\_\_. Some of the other panelists will be \_\_\_\_\_ and \_\_\_\_\_. A preliminary program for this workshop is enclosed.

It is only through the kind cooperation of so many of our nonalcoholic friends like you that A.A. now has well over two million members in over 180 countries worldwide.

The \_\_\_\_\_ panel of our workshop would be greatly enhanced by the addition of your insight and professional expertise.

Please let us know by \_\_\_\_\_ if you will join us.

Sincerely yours,

Enclosure: Preliminary program

***With a slightly different approach, the body of another letter might contain the following wording:***

This letter comes to you from Alcoholics Anonymous, not as a request for anything, but as an offer of A.A. services through you to (your patients, clients, students, congregation members, etc.) who may have a drinking problem. Because of your involvement, you are in a unique position to have contact with what we call the “still-suffering alcoholic.”

The purpose of our A.A. Committee for Cooperation with the Professional Community is to be “friendly with our friends” in all walks of life, so that the A.A. message of personal recovery can reach more of those who need and desire our help.

Simply stated, Alcoholics Anonymous is a worldwide Fellowship of more than two million men and women who help each other maintain sobriety and who offer to share their recovery experience with others. Anyone who thinks he or she has a drinking problem is welcome at an A.A. meeting.

Much more information about A.A. is available in A.A. literature. The enclosed postcard lists a few of the available services in which you may be interested. This card, returned to us with any or all of the boxes checked, will be answered promptly with a phone call to arrange an answer to your request in the manner most convenient to you.

(This language may be tailored to meet the needs of a particular audience.)

The “Fact Sheet,” reproduced on the next page, clearly explains what A.A. does and does not do, and might be included with all mailings. Information in the “Fact Sheet” has successfully answered many questions about our Fellowship.

## A.A. Fact Sheet

### ***The Preamble of Alcoholics Anonymous***

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.

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### ***What A.A. Does***

Nonalcoholic guests are welcome at “open” A.A. meetings. Attendance at “closed” meetings is limited to those who are alcoholic or think they may have a drinking problem.

At meetings A.A. members share their recovery with anyone seeking help with a drinking problem, and provide experience, strength and hope or “sponsorship” to the alcoholics coming to A.A.

The A.A. program, as set forth in the Twelve Steps to recovery, offers the alcoholic a design for living that works.

### ***What A.A. Does NOT Do***

A.A. does not: Furnish initial motivation for alcoholics to recover... solicit members... engage in or sponsor research... keep attendance records or case histories... join “councils” or social agencies (although A.A. members, groups and service offices frequently cooperate with them)... follow up or try to control its members... make medical or psychological diagnoses or prognoses... provide detox, rehabilitation or nursing services, hospitalization, drugs or any medical or psychiatric treatment... offer religious services, or host/sponsor retreats... engage in education about alcohol... provide housing, food, clothing, jobs, money or any other welfare or social services... provide domestic or vocational counseling... accept any money for its services, or any contributions from non-A.A. sources... provide letters of reference to parole boards, lawyers, court officials, social agencies, employers, etc.

*Our recovery is based on sharing our experience, strength and hope with each other, that we may solve our common problem; more importantly, our continued sobriety depends upon helping others to recover from alcoholism.*

## A.A. Website

G.S.O.'s A.A. website, at [www.aa.org](http://www.aa.org), is available in English, French and Spanish. We hope you will visit our home page and include information about it in your presentations to professionals.

The contents of the website include the following:

- A.A. Videos for Health Care, Legal and Corrections, and Employment/Human Resources Professionals.
- A link to the “For Professionals” page.
- A link to the “What is A.A.?” page.
- The full-length video “Hope: Alcoholics Anonymous” can be streamed in its entirety on the G.S.O. website.
- The A.A. General Service Conference-approved “A.A. Fact File.”
- The Conference-approved pamphlets “A Message to Teenagers,” “A Newcomer Asks” and “Is A.A. for You?”
- List of central offices/intergroups/answering services in U.S./Canada, and a location search feature for local A.A. offices and websites.
- List of international general service offices.
- Anonymity letter and a video to the media.
- Information on A.A. (service piece).
- *About A.A.*, a newsletter for professionals. Current and past issues can be viewed and printed out. “Digital Delivery” subscription sign-up available.
- A link to AA Grapevine website.

The General Service Office contacts C.P.C. committees to act as a local resource to professionals who request additional information. A.A. experience indicates that this provides a valuable opportunity for C.P.C. committees to reach the sick alcoholic through cooperation with the professional community.

## Literature Guide

The front and back pockets of the C.P.C. Kit have samples of material especially useful for C.P.C. committee members. Here is an expanded list of A.A. information in three categories: basic guidance for members of C.P.C. committees; information useful for professionals; and literature for the people professionals serve. This material is available in English, French and Spanish, and can be viewed on the A.A. G.S.O. website at [www.aa.org](http://www.aa.org).

### For C.P.C. Committee Members

Speaking at Non-A.A. Meetings (P-40)  
C.P.C. Workbook (M-41)  
Understanding Anonymity (P-47)  
Information on Alcoholics  
    Anonymous (F-2)  
A.A. Membership Survey (P-48)  
How A.A. Members Cooperate. . . (P-29)  
A Member's-Eye View of A.A. (P-41)

Many Paths to Spirituality (P-84)  
A.A. as a Resource for Drug & Alcohol  
    Court Professionals (F-177)  
A.A. Cooperation with the Professional  
    Community Videos H.R./E.A.P., Legal/  
    Correctional and Healthcare (DV-13)  
*About A.A. Placard* (F-24)  
*About A.A. Subscription Cards* (F-23)

**A.A. Guidelines on:** C.P.C. Committees; Cooperating with Courts, D.W.I. & Similar Programs; Relationship Between A.A. and Al-Anon; For A.A. Members Employed in the Alcoholism Field; Public Information Committees; Accessibility for All Alcoholics.

### For Professionals

Understanding Anonymity (P-47)  
If You Are a Professional... (P-46)  
Members of the Clergy Ask About A.A. (P-25)  
Problems Other Than Alcohol (P-35)  
Is There a Problem Drinker in the  
    Workplace? (P-54)  
This Is A.A. (P-1)  
A.A. In Your Community (P-31)  
A.A. as a Resource for the Health Care  
    Professional (P-23)  
Access to A.A. (P-83)  
A.A. Membership Survey (P-48)

A Message to Corrections Professionals (P-20)  
Information on Alcoholics Anonymous (F-2)  
A.A. as a Resource for Drug & Alcohol  
    Court Professionals (F-177)  
A.A. Cooperation with the Professional  
    Community Videos H.R./E.A.P., Legal/  
    Correctional and Healthcare (DV-13)  
Many Paths to Spirituality (P-84)  
A.A. Members — Medications and  
    Other Drugs (P-11)  
*About A.A.* (F-13)

### For the People Professionals Serve

A.A. at a Glance (F-1)  
This Is A.A. (P-1)  
Is A.A. For Me? (P-36)  
A Brief Guide to A.A. (P-42)  
Too Young? (P-37)  
Do You Think You're Different? (P-13)  
Is There an Alcoholic in Your Life? (P-30)  
Problems Other than Alcohol (P-35)  
A Message to Teenagers (F-9)  
Access to A.A. (P-83)  
Is A.A. For You? (P-3)  
A.A. and the Armed Services (F-50)  
Frequently Asked Questions About A.A. (P-2)

A.A. for the Older Alcoholic —  
    Never Too Late (P-22)  
A.A. Members — Medications and  
    Other Drugs (P-11)  
A.A. for the Black and African-American  
    Alcoholic (P-51)  
LGBTQ Alcoholics in A.A. (P-32)  
A.A. for the Native North American (P-21)  
Women in A.A. (P-5)  
The "God" Word: Atheist and Agnostic  
    Members in A.A. (P-86)  
A.A. for Alcoholics with Mental Health  
    Issues (P-87)  
A.A. Grapevine, La Viña and La Vigne



**Videos:** Hope: Alcoholics Anonymous; A New Freedom; Carrying the Message Behind These Walls; Your A.A. General Service Office, the Grapevine, and the General Service Structure; A.A. Videos for Young People.

These publications are all listed, with brief descriptions and prices, in the Conference-approved Literature and Other Service Material catalog, which also includes literature for those facing accessibility challenges. There is also a catalog of Grapevine material, including La Viña.

Most C.P.C. committees have found it helpful for each member to have a personal copy of this Cooperation with the Professional Community Workbook. G.S.O. furnishes a C.P.C. Kit to the area committee chairperson at no charge. Additional kits and workbooks may be purchased.

