

HOW

A publication of Indian River Central Office

Volume 24, Issue 3

HOW
March 8, 2004

BILL'S SPIRITUAL EXPERIENCE

In December 1934, I appeared at Towns Hospital, New York. My old friend, Dr. William Silkworth shook his head. Soon free of my sedation and alcohol I felt horribly depressed. My friend Ebby turned up and although glad to see him, I shrank a little as I feared evangelism, but nothing of the sort happened. After some small talk, I again asked him for his neat little formula for recovery. Quietly and sanely and without the slightest pressure he told me and then he left.

Lying there in conflict, I dropped into the blackest depression I had ever known. Momentarily my prideful depression was crushed. I cried out, "Now I am ready to do anything -- anything to receive what my friend Ebby has." Though I certainly didn't expect anything, I did make this frantic appeal, "If there be a God, will He show Himself!" The result was instant, electric beyond description. The place seemed to light up, blinding white. I knew only ecstasy and seemed on a mountain. A great wind blew, enveloping and penetrating me. To me, it was not of air but of Spirit. Blazing, there came the tremendous thought, "You are a free man." Then the ecstasy subsided. Still on the bed, I now found myself in a new world of consciousness which was suffused by a Presence. One with the Universe, a great peace came over me. I thought, "So this is the God of the preachers, this is the Great Reality." But soon my so-called reason returned, my modern education took over and I thought I must be crazy and I became terribly frightened.

Dr. Silkworth, a medical saint if ever there was one, came in to hear my trembling account of this phenomenon. After questioning me carefully, he assured me that I was not mad and that perhaps I had undergone a psychic experience which might solve my problem. Skeptical man of science though he then was, this was most kind and astute. If he had said, "hallucination," I might now be dead. To him I shall ever be eternally grateful.

Good fortune pursued me. Ebby brought me a book entitled "Varieties of Religious Experience" and I devoured it. Written by William James, the psychologist, it suggests that the conversion experience can have objective reality. Conversion does alter motivation and it does semi-automatically enable a person to be and to do the formerly impossible. Significant it was that marked conversion experiences came mostly to individuals who knew complete defeat in a controlling area of life. The book certainly showed variety but whether these experiences were bright or dim, cataclysmic or gradual, theological or intellectual in bearing, such conversions did have a common denominator -- they did change utterly defeated people. So declared William James, the father of modern psychology. The shoe fitted and I have tried to wear it ever since.

For drunks, the obvious answer was deflation at depth, and more of it. That seemed plain as a pike-staff. I had been trained as an engineer, so the news of this authoritative psychologist meant everything to me. This eminent scientist of the mind had confirmed everything that Dr. Jung had said, and had extensively documented all he claimed. Thus William James firmed up the foundation on which I and many others have stood all these years. I haven't had a drink of alcohol since 1934.

INSIDE CONTENTS:

<i>THREE</i>	2
<i>TREATMENT SCHEDULES</i>	3
<i>THE ONLY REQUIREMENT</i>	3
<i>FYI</i>	4
<i>BIRTHDAYS</i>	5
<i>OUR SINGLENESS OF PURPOSE</i>	7
<i>YOUR CENTRAL OFFICE</i>	8



3 Three III

STEP

"Made a decision to turn our will and our lives over to the care of God as we understood Him.

"It is when we try to make our will conform with God's that we begin to use it rightly. To all of us, this was a most wonderful revelation. *Our whole trouble had been the misuse of willpower. We had tried to bombard our problems with it instead of attempting to bring it into agreement with God's intention for us.* To make this increasingly possible is the purpose of A.A.'s Twelve Steps, and Step Three opens the door."

Reprinted with permission from *Twelve Steps and Twelve Traditions*
Copyright © Alcoholics Anonymous World Services, Inc.

TRADITION

"The only requirement for AA membership is a desire to stop drinking."

1. In my mind, do I prejudge some new AA members as losers?
2. Is there some kind of alcoholic whom I privately do not want in my AA group?
3. Do I set myself up as a judge of whether a newcomer is sincere or phony?
4. Do I let language, religion (or lack of it), race, education, age, or other such things interfere with my carrying the message?
5. Am I overimpressed by a celebrity? By a doctor, a clergyman, an ex-convict? Or can I just treat this new member simply and naturally as one more sick human, like the rest of us?
6. When someone turns up at AA needing information or help (even if he can't ask for it aloud), does it really matter to me what he does for a living? Where he lives? What his domestic arrangements are? Whether he had been to AA before? What his other problems are?

Reprinted with permission from *The Traditions Checklist*
Copyright © The AA Grapevine, Inc.

CONCEPT

As a traditional means of creating and maintaining a clearly defined working relation between the groups, the Conference, the A.A. General Service Board and its several service corporations, staffs, committees and executives, and of thus insuring their effective leadership, it is here suggested that we endow each of these elements of world service with a traditional "Right of Decision."

Reprinted with permission from *Twelve Concepts for World Service*
Copyright © Alcoholics Anonymous World Services, Inc.



TREATMENT: GROUP COMMITMENTS

ALCOHOPE

Meeting Open to AA Community
5925 37th St, Vero Beach, FL 32966
778-7215

CENTER FOR EMOTIONAL & BEHAVIORAL HEALTH

CEBH - Meeting Closed to Public
1190 37th St, Vero Beach, FL 32960
563-4666

TUESDAYS:	SATURDAYS:
Easy Does It 3-02	
Free & Easy 3-09	
ODAAAT 3-16	Royal Palm 3-06
Indian River Men's 3-23	Candlelight 3-13
South Vero 3-30	King's Highway 3-20

MONDAYS:
South Vero Group March 1
Vero Beach 12 & 12 March 8
Noontime Recovery March 15
Safe Harbor Women's March 22
Friday Young People's March 29
Indian River Thursday April 5
Indian River Women's April 12
NEED GROUP COMMITMENT ? April 19
South Vero Group April 26
Vero Beach 12 & 12 May 3
Noontime Recovery May 10
Safe Harbor Women's May 17

Alcohope and CEBH meetings are sponsored by the Treatment Committee of the Indian River Central Office of Alcoholics Anonymous and should be conducted in keeping with AA guidelines.
If your group would like to participate in the rotating commitment for carrying the AA message into these facilities, please contact the Treatment Committee Chair, Lee Kimball.
Group commitments are currently needed for the CEBH meeting on Mondays at 7PM.

CARRY THE AA MESSAGE!
FOR INFORMATION CALL LEE: 567-4759

THE ONLY REQUIREMENT

Recently, I received a call from a newcomer through the "Bridge the Gap" Program that our district conducts with treatment centers in this area. I met him upon his release from the facility and took him to a meeting of my home group Monday Night. As newcomers do in my group, he sat quietly and listened and all was well.

The following Wednesday, he met me for a meeting that we carry to the Rocky Mount Detox. During the meeting, he introduced himself as an addict and proceeded to share a little bit on the problems he has had with drugs. Following the meeting, as I was giving him a copy of our book, I decided to have a talk with him regarding his sharing. I asked, "I noticed that you introduced yourself as an addict and I need to ask, Do you have a problem with alcohol?" He shared, "No, I haven't had a drink in over a year and a half. I don't like alcohol and never really drank too much, my problem is with the drugs." I then asked, "If you don't have an alcohol problem, then why are you coming to AA meetings?" His response was "When I was in the treatment center, they told me to come to AA because there is more recovery there."

I explained to him that I was not trying to make him feel unwelcome in AA, but in order to be of help to him, I had to know where he was coming from. He again stated that he never has had a problem with alcohol, that drinking does not create the craving that it does in alcoholics of our type. Knowing that many alcoholics of our type reach their "bottom" through the aid of drugs and only later come to discover and admit to their alcoholism, I did not presume that he was non-alcoholic or that AA was not the path of recovery for him. I told him, "I will help you to get started in recovery and we will begin by studying the Doctor's Opinion in the Big Book and I suggest you read that as soon as possible. I will help, but I will only help if you attend NA meetings in addition to your AA meetings. This is because there will come a time and place where you will have to take suggestions to stay sober that go against your nature -- things you don't want to do -- and if you are not absolutely convinced that the person giving you the suggestions has overcome the same problem you have, you will not follow the suggestions that may save your life."

That is where we parted and I did not hear from him for a week. I had been thinking that I had run a newcomer off when I got a call from him. He said, "I just wanted to let you know that I am all right. I am going to NA and have a home group that I like and am going to pick a sponsor this week. I just want to thank you for your help and I'll call once a week to let you know how it's going."

Why am I telling this story? I guess I feel that it shows real growth in my AA program. In the past, I would have been more com-

Continued on page 6...



... Continued from page 3

fortable to welcome this non-alcoholic addict and attempt to sponsor him in AA. It makes me feel better to be all inclusive, to say all are welcome, to play the good Samaritan to one and all. I would have chosen my comfort over his welfare and the welfare of AA. My efforts to sponsor non-alcoholics in AA have always failed and I now realize that the way to be of real help is to help the non-alcoholic find the help he needs from those best equipped to give this help. Singleness of purpose not only benefits AA as a whole, but those who seek recovery for whatever problem they have. There are many fine Twelve Step programs out there whose singleness of purpose makes them best equipped to help the non-alcoholic addict, gambler, co-dependent, etc. My failure to realize this and direct these persons to the program they need is selfish and ego-rewarding, choosing what feels good to me over what is right for them. We do not have all the answers for all the problems known to man.

What we do have is an answer for one very particular problem -- alcoholism as defined in the Big Book of Alcoholics Anonymous. When I take a drink, I get a craving for another drink that eliminates all control over how much I drink or what I do in the process. And most importantly, knowledge of this fact will never keep me from taking the next drink. It is a progressive and fatal malady that we have come to view as a disease process involving an allergic, or abnormal, reaction to alcohol coupled with a mental obsession for more of the same.

Our program began when one alcoholic, seeking to keep himself sober, sought out another alcoholic with whom he shared his experience with this particular problem. Dr. Bob, who was only going to listen for 15 minutes, spent over 6 hours because, as he said of Bill, "*He was the first living human with whom I had ever talked who knew what he was talking about in regard to alcoholism from actual experience.*" Dr. Bob was then able to accept the solution because of his assurance that Bill had overcome a problem not unlike his own.

So it was then and is still today. Our greatest asset as recovered alcoholics is our past. Whether in a meeting, on the answering service, or one-on-one, we use our past experience with alcohol to reach the still-suffering alcoholic. It is through our stories of alcoholism that we help the alcoholic overcome his feelings of difference and isolation and accept the solution that we have to offer. As an alcoholic, I had many defenses against those who would talk to me of my drinking, but I had no defense against you when you spoke to me of *your* drinking. It was through hearing these stories that denial fell away and hope was born for myself and countless others like me.

I am an alcoholic. I have a drug history as long as my alcoholism, but I am not an addict. The stories I have heard of addicts, gamblers, and so on elicit sympathy from me, but do not reach that place in me of identification that I find in the story of another alcoholic -- that place where I actually begin to feel the pain experienced by the speaker and relate his experience to my own.

Thank God you had alcoholics speak to me of alcoholism when I came into AA. Because identification is so vital to the recovery of alcoholics like myself, I do not wish to risk weakening my effectiveness by speaking of my drug use in an AA meeting.

We alcoholics come with many "related disorders" of drugs, gambling, overeating, sex, depression, anxiety, and so on, but by choosing to join AA we have chosen a common ground on which to relate to one another -- alcoholism and our recovery from alcoholism. Given the diversity of people and problems in AA, the unity necessary to function as a group would be impossible and our effectiveness with newcomers diminished if we did not keep our focus on our common problem. I have to relate myself to the group as a whole for my own recovery and the recovery of those I would help. I would hate to see the day in AA where an alcoholic's chance to recover was dependent upon whether we had the "right" person with the "right" set of problems for him that day on the answering service, Twelve Step call, and so on. I would hate to see the day when any real alcoholic finds himself unable to relate to a speaker or discussion due to too much talk of problems other than alcoholism that he does not possess. I want every alcoholic to have the chance I had to enter an AA meeting and come to realize, as I did, that "those people are like me and maybe if I do what they did it will work for me too."

I'm sorry to inform those who don't know it already, but AA is not all inclusive, nor was it ever intended to be. We developed from a narrowing of the broad objectives of the Oxford Group to focus on helping alcoholics only. We are still strong... the Oxford Group is *not*. Many fine organizations have come and gone because of their inability to stick to one thing they do well. Many organizations have failed because they lacked the humility to realize their limitations. Tradition Three states, "our membership ought to include all who suffer from alcoholism." Members may have as many "related disorders" or problems as they wish, but to be a member of Alcoholics Anonymous, one must have alcoholism and a desire to stop drinking.

Many fine Twelve Step programs have developed out of our program because their members understood the importance of identification in recovery and sought to create a place where maximum identification and therefore maximum recovery was possible for their particular problem. In this day and age, anyone seeking help can find a group to deal with his particular problem. Our job is not to try to expand our program to fit all situations or persons, but to grow in effectiveness at the one simple thing that we do well. It is not always the easy path to stand on this principle, as arguments on this topic often run to extremes. I am learning that if we keep in mind that "to be helpful is our only aim," we can maintain our singleness of purpose with kindness, compassion, and tolerance. By doing so, we may see to it that Alcoholics Anonymous continues to be the single most effective treatment for alcoholism in recorded history and that all those who suffer from alcoholism may find the hand of AA when they reach out for help.

Submitted by Active Member of
The Came to Believe Group
District 91, Area 51
Rocky Mount, North Carolina
Reprinted from their website with permission



SINGLENESS OF PURPOSE

Today many AA members find themselves faced with difficulties that ostensibly have nothing to do with their alcoholism and for which they seek help from persons or agencies outside AA. Although this is not a new practice (the early AA members also sought help for other problems), it is perhaps more widespread today because both AA members and the helping professionals are more aware of the problems encountered by alcoholics during their recovery process.

Whatever the cause, it is a fact that alcoholics who are recovering in AA often confront problems other than alcohol for which they must seek help. Most frequently, these problems include family difficulties, mental and emotional troubles requiring psychiatric help, spiritual or religious dilemmas, eating disorders, etc. Alcoholics Anonymous does not offer any panaceas for the multitude of problems that AAs may experience in sobriety. For these difficulties, extra help should be sought. AA does offer a solution to one problem: alcoholism. This singleness of purpose unites alcoholics in a common bond, which is the key to recovery in AA.

One recurring problem faced by AAs who carry the message into treatment facilities is the increasing number of non-alcoholic drug addicts being referred to A.A. Some treatment facilities are inclined to view all "substance abusers" and alcoholics as having the same common addictions and they are treated accordingly. AAs who carry the message into treatment facilities often find that nonalcoholic drug addicts are encouraged by professional staff to attend AA meetings within the facilities. In addition, because of the effectiveness of the AA program in providing post treatment support to alcoholics, nonalcoholic drug addicts are often referred to AA when they are discharged. In such cases, the practices of the treatment facility are clearly at odds with AA Traditions.

AA policy regarding nonalcoholic drug addicts is clear. Open meetings are available to anyone interested in the Alcoholics Anonymous program of recovery from alcoholism. Closed meetings are for AA members only, or for those who have a drinking problem and "have a desire to stop drinking."

"AA's singleness of purpose must be communicated to the administrators and staff of treatment facilities by the AA treatment facilities committee, as that committee has the task of informing and sharing with these professionals about AA policy and Traditions. AA meetings within a facility cannot be "substance abuse meetings." Although enlightening treatment facilities personnel on the reasons for abiding by AA policy on this matter is often difficult and time consuming, experience has shown that the most effective communication by AAs is handled in a cordial manner and in the spirit of cooperation.

In the pamphlet "Problems Other Than Alcohol," Bill W. addressed his concern for the growth and survival of the AA Fellowship. This concern led our co-founder to answer "NO" to the following questions:

- x Can a nonalcoholic pill or drug addict become an AA member?
- x Can AAs who have suffered both alcoholism and drug addiction, and who have formed a group to help other AAs who are having drug problems, refer to such a special-purpose group as an AA group?
- x Can nonalcoholic drug or pill addicts attend closed AA meetings?

Regardless of our sympathies, Bill explains that it is the first duty of AA members to ensure our own survival. To stray from our single purpose will result in the collapse of the AA Fellowship, leaving the suffering alcoholics who follow us with no place to go.

Reprinted with permission
From the A.A. in Treatment Facilities Handbook
Copyright, Alcoholics Anonymous World Services, Inc.

IN LOVING MEMORY

VERO BEACH AA LONGTIMERS

JIM HANSARD

September 10, 1930 - February 21, 2004

BOB TOUVELLE

February 26, 1927 - February 22, 2004

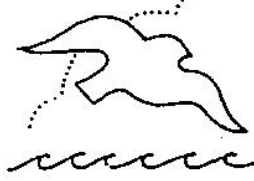
JIM LANDERS

December 5, 1927 - February 20, 2004

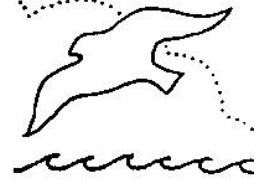
REST IN PEACE



HOW



Indian River Central Office of Alcoholics Anonymous
 855 Centre, Suite 4, Miracle Mile
 P.O. Box 1776
 Vero Beach, FL 32961
 772-562-1114



URL: www.indianriveraa.freesevers.com

E-MAIL: info@indianriveraa.freesevers.com

STEERING COMMITTEE

CHAIR: Elizabeth T
 CO-CHAIR: Darcie A
 TREASURER: Richard E
 SECRETARY: Katrina T

STANDING COMMITTEES

ARCHIVES: Sue L
 WEBSITE COORDINATOR: Dutch VN
 CORRECTIONS WOMEN: Petra D
 Lin C
 CORRECTIONS MEN: John K
 D.J. I
 DESK COORDINATOR: Sue L
 HOW EDITOR: Darcie A
 PROOFREADER: Dutch VN
 LITERATURE: John H
 PUBLIC INFORMATION: Marty P
 INVENTORY CONTROL: Paul H

STANDING COMMITTEES (Cont'd...)

TELEPHONE COORDINATOR: Bill K
 UNITY CHAIR: Lorrie N
 WHERE & WHEN: Joseph J
 AREA LIAISON DISTRICT 6: Rich K
 BIRTHDAY DINNER 2004: Lee K
 Dutch VN

DELEGATES AT LARGE:

Rich K
 Sarah P
 John H

Indian River Central Office of Alcoholics Anonymous
 855 Centre, Suite 4, Miracle Mile
 P.O. Box 1776
 Vero Beach, FL 32960

PLACE
 STAMP
 HERE