YOUR BUFFALO AREA TREATMENT FACILITIES COMMITTEE

82 Your Homegroups the opportunity to carry The AA message to the still sick and suffering Men and Women in our area. We have meetings at several of our major facilities such as:

- · E.C.M.C.
- Horizons Health Services
- Veterans Hospital
- The Salvation Army
- The Renaissance House
- Stutzman
- Terrance House (291 Elm)



We are always growing!

BRIEF HISTORY:

Since its beginning in 1935, the Fellowship of Alcoholics Anonymous has cooperated with treatment facilities. Bill W. himself was a product of a treatment facility—Towns Hospital in New York City. After he had finally put together several months of sobriety, Bill returned to Towns to try to work with other alcoholics. This was the beginning of A.A.'s Twelfth Step work in hospitals. After he sobered up, Dr. Bob, a surgeon, realized the need for an alcoholism ward at St. Thomas Hospital in Akron, Ohio, where he worked. With the loving assistance and dedication of Sister Ignatia, Dr. Bob established a ward for alcoholics; together, they reached over 5,000 alcoholics.

~Taken from the Treatment Committee Workbook issued by the General Service Office in New York~



TFC MEETS MONTHLY ON THE 1ST SUNDAY MONTHLY AT 5:30 PM

BUFFALO CENTRAL OFFICE

111 CROCKER AVE (FRANKLIN ST. DOOR)

ROOM'S 105-107

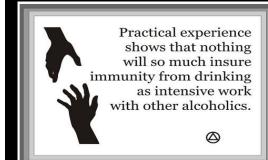
SLOAN, NY 14212

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TREATMENT
FACILITIES
COMMITTEE
OF BUFFALO AREA
INTERGROUP







What is the purpose of TFC?

Treatment Committees are formed to coordinate the work of individual A.A. members and groups who are interested in carrying our message of recovery to alcoholics in treatment and outpatient settings, and to set up means of bridging the gap from the facility to an A.A. group in the individuals community.

Functions of TFC:

- With approval of administration, takes
 A.A. meetings into treatment settings.
- Encourages group participation. In some areas each group has a representative on the Treatment Committee.
- Arranges purchase and distribution of literature for these groups and meetings.
- Seeks to understand, respect, and Adhere to all treatment setting regulations.
- Makes information about A.A.'s
 Functions and purpose available.
- Assists in the formation of new A.A. meetings in treatment settings or outpatient facilities.



Some Traditions that apply to Treatment 12th Step Work

Tradition One points our that "personal recovery depends upon A. A. unity. "The chairperson carries the message of A.A., rather than a specific treatment program, and is responsible for seeing that the meeting is not disrupted by one patient.

Tradition Five is really what Twelfth Stepping in treatment settings is all about: "Each group has but one primary purpose to carry its message to the alcoholic who still suffer." This is what A.A.s do best, share their experience, strength and hope with suffering alcoholics. There can be no more important commitment for the A.A. member.

<u>Tradition Six</u> "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." Experience has given us a simple guiding principle: We cooperate, but we do not affiliate.

Tradition Seven "Every A.A. group ought to be fully self-supporting, declining outside contributions." No contribution is required, as this meeting is not an A.A. group.

Tradition Ten "Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy." A.A.s ought to abide by the rules and regulations of the treatment facility even though they may disagree with its policies. Although A.A.s may disagree with the methods used by some treatment facility, they learn to "walk the walk" and simply carry the A.A. message. A.A.s who do Twelfth Step work in treatment facilities should not be diverted from their primary purpose.

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." A.A.s who carry the message into treatment settings represent A.A. itself to a facilities personnel and should remember that they are the "attraction" to A.A. not only for the clients, but also for all staff members.

What qualifications should an A.A. member have to carry the message to treatment settings???

- I. Some good sobriety. For exactly how long, nobody can say. Some members handle this kind of A.A. activity beautifully soon after getting sober, especially when they are accompanied by an experienced member. But others need a longer time.
- 2. Personal experience of alcoholism and recovery.
- A cheerful humility. We simply put the message in front of the alcoholic in treatment. What the alcoholic does with it is not our business.
- 4. Ability to follow directions. In carrying our message into treatment settings, our personal will is subject to authority in at least two ways: First, the ultimate authority for A.A. work is, of course, a loving God as He may express Himself in the group conscience. Second, the professional treatment is in charge of its patients or clients and is responsible for them.
- 5. Dependability. Once an A.A. commitment is made to any institution or organization, we cannot let our Fellowship down by not living up to the agreement fully. We go to any lengths to perform faithfully the services promised in the name of A.A. We try not to let anything interfere with keeping our word.
- 6. Broad knowledge of A.A. The deeper and broader our understanding of all aspects of our Fellowship.
- 7. Ability to stick to our own business. Carrying the message to alcoholics in treatment settings can challenge our ability to keep focused on A.A.s primary purpose, which is "to stay sober and help other alcoholics to achieve sobriety." We are not in the business of educating nonalcoholic's about

