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Pass It On

Albuquerque AA Intergroup Central Office Newsletter

<https://www.albuquerqueaa.org/>

505.266.1900

AA News

- ◆ There is a **NEW** email address for submissions, feedback, etc. for the Pass It On. It is abqpassiton@gmail.com
- ◆ **Central Office Intergroup meetings** are always on the second Sunday of every month on Zoom at 2 p.m.
- ◆ **Please welcome Janette R., our new Alternate Coordinator, to the Central Office Intergroup. Also, Central Office has a new position open, Schedule Editor.** The Schedule Editor keeps the Albuquerque Metro meeting schedule up-to-date and prepares it for printing. *Experience with complex print layout will be helpful.*
- ◆ **Sept. 30—Oct. 2: NMCYPAA Conference.** The Annual Conference of New Mexico Conference of Young People in A.A. (NMCYPAA) will be held September 30th through October 2nd. It will be at Kamp Kiwanis, 20 miles south of Gallup, NM. Bunk style and camping available. For more info call (580) 699-9604. You can DL the flyer at Albuquerqueaa.org.
- ◆ **October 15: District 18 Fall Workshop on Sponsorship.** This workshop is cohosted by the Winners Circle and the Beginners Group. See Albuquerqueaa.org for link to flyer.

What my Sobriety Means to Me

When I discovered our rooms of Alcoholics Anonymous I was a broken individual. Being broken spiritually, emotionally, and physically. From the first days in AA I had the feeling I had found a way of living that I had always dreamed of but could never attain through my own efforts. As the years have passed I have learned to follow the directions as suggested in our living owners manual, Alcoholics Anonymous.

From very early childhood I was a slow learner thus felt I was not very bright and would never attain much in my life. I had the feeling I was broken, firstly I did not have a complete family. Our mother had succumbed to cancer. It was never talked about, my younger brother and myself found ourselves being tossed from one associated family member to another. No real feeling of a unity or belonging to any family. It was living out of a suitcase. So began a personal commitment of not trusting anyone. I was going to have to make it on my own, a loner. In my late teens I discovered the magical elixir called alcohol. I had found a solution in a bottle. I felt a part of being with people.

My drinking career included a college education and adventure. I was a Peace Corps volunteer followed by a budding career in foreign affairs. In the end my appetite for alcohol ended all opportunities. I was no longer welcomed by good citizens. The dreams of success vaporized. I looked through windows of life and saw people living and enjoying life. I initially gained a perceived social ability with alcohol, but in the end it was only a passing dream that was out of reach. Back to a loner wandering down a lonely road.

What seemed to be the end was a new beginning. I believe it maybe luck with the assistance of our Higher Power the door to Alcoholics Anonymous opened up. I feel blessed that I was struck with the thought I had no more chances. The saying AA is the last house on the block rang true for me. The feeling of belonging quickly grabbed hold of me. For once in my life I followed directions from sponsors and did the steps as outlined in our textbook Alcoholics Anonymous. I'm grateful to be a part of our AA path that welcomes the lonely alcoholic traveler.

Stephen H.

"The purpose of this newsletter is to offer information that may further readers' understanding of the medical, legal and social aspects of alcoholism; the severity and international scope of the illness; and the worldwide efforts being made to combat it. Publication here does not imply endorsement or affiliation. AA does not conduct or participate in research, nor does it hold any opinion on research conducted by others."

What is the Albuquerque Central Office and Intergroup?
(End of Part One)



From the Editor...

Greetings fellow AAs! This month the Pass It On will start a limited printing of 100 copies which will be distributed among the bigger AA groups and the Central Office. *This issue will still be accessible on our web site, albuquerqueaa.org.* As always, if your home group has an upcoming event you'd like to see in the PIO, please send it to me at abqpassiton@gmail.com

Also, I'm interested in personal accounts of getting sober and staying sober. These stories often touch others in ways that maybe were not intended by the author, but whose impact is nonetheless salient.

Steven G.

Plea for peas

An alcoholic woman was arrested for shoplifting. In court, the judge asked her, "What did you steal?"

"A can of peaches," she replied.

"How many peaches were in the can?" the judge asked.

"Six," she replied.

"Then I sentence you to six days in jail," the judge declared.

Just then the woman's husband rose from his seat.

"Your Honor," he said, "she also stole a can of peas."

Paul C., Oceanside, CA.

This first contact with AA through the Central Office is something no single group could provide. Think about it. Your group probably doesn't have a phone and if you did, could your group members answer it 24 hours a day, 365 days a year? Your group probably doesn't have a website. If you did, some group member would have to create and maintain it and the group would have to pay for it. So, if there was not a Central Office how would your group get newcomers? Unfortunately, most groups don't do what the old timers did and actively go out and seek drunks who want to quit drinking. But, by the work of many AA volunteers' the Central Office is available to bring the message to the alcoholic who wants to end his suffering and get him to a meeting.

Part Two

By the work of many AA volunteers' the Central Office is available to bring the message of AA to the alcoholic who wants to end his suffering and get him to a meeting. We have volunteers who man the phone 24 hours a day, 365 days a year. (We are one of only a few in the nation that do that!) We get around 80 calls per month from newcomers and about 15 twelfth step calls each month.

Without our volunteers there is no way the Central Office could function successfully. Who are they? Well, one of them might be a member of your group, all of them are members who have chosen to serve AA by passing on our message of hope. Each month there are about 75 three hour shifts that a volunteer mans the front desk, answering phone calls and processing purchases. Most people volunteer for one shift a week or one every other week. Then there is a long list of "substitutes" who have said they are available whenever someone cannot cover their assigned shift. There are literally thousands of volunteers like this across the world and without them, the AA we know today would not exist.

The daily functioning of the Central Office as a "place of business" is maintained by the Coordinator and Assistant Coordinator. These are two people that have been interviewed and hired by the Intergroup Steering Committee. They are not paid anything near to commensurate with their performed duties and at this point basically work for us as a matter of love for AA. What do they do? Well, you know, all the "office" stuff. Here's part of that list. They open and close the office, maintain security, keep track of all transactions, collect cash and make bank deposits, maintain all the records, order and maintain book and other merchandise inventories. There is a bunch more, including vacuuming the floors and cleaning the toilet. But probably most importantly, they organize and support the volunteers and they are the prime contact with all of the local groups and organizations outside of AA.

Martin W., Intergroup Steering Committee Chair, Keep On Keepin' On

Slips and Human Nature

by William Duncan Silkworth, MD

The mystery of slips is not so deep as it may appear. While it does seem odd that an alcoholic, who has restored himself to a dignified place among his fellowmen and continues dry for years, should suddenly throw all his happiness overboard and find himself again in mortal peril of drowning in liquor, often the reason is simple.

People are inclined to say, "there is something peculiar about alcoholics. They seem to be well, yet at any moment they may turn back to their old ways. You can never be sure."

This is largely twaddle. An alcoholic is a sick person. Under the technique of Alcoholics Anonymous he gets well – that is to say, his disease is arrested. There is nothing unpredictable about him any more than there is anything weird about a person who has arrested diabetes.

Let's get it clear, once and for all, that alcoholics are human beings. Then we can safeguard ourselves intelligently against most slips.

In both professional and lay circles, there is a tendency to label everything that an alcoholic may do as "alcoholic behavior." The truth is, it is simple human nature.

It is very wrong to consider any of the personality traits observed in liquor addicts as peculiar to the alcoholic. Emotional and mental quirks are classified as symptoms of alcoholism merely because alcoholics have them, yet those same quirks can be found among non-alcoholics too. Actually they are symptoms of mankind!

Of course, the alcoholic himself tends to think of himself as different, somebody special, with unique tendencies and reactions. Many psychiatrists, doctors, and therapists carry the same idea to extremes in their analyses and treatment of alcoholics.

Sometimes they make a complicated mystery of a condition which is found in all human beings, whether they drink whiskey or buttermilk.

To be sure, alcoholism, like every other disease, does manifest itself in some unique ways. It does have a number of baffling peculiarities which differ from those of all other diseases.

At the same time, any of the symptoms and much of the behavior of alcoholism are closely paralleled and even duplicated in other diseases.

The slip is a relapse! It is a relapse that occurs after the alcoholic has stopped drinking and started on the A.A. program of recovery. Slips usually occur in the early states of the alcoholic's A.A. indoctrination, before he has had time to learn enough of the A.A. techniques and A.A. philosophy to give him a solid footing. But slips may also occur after an alcoholic has been a member of A.A. for many months or even several years, and it is in this kind, above all, that often finds a marked similarity between the alcoholic's behavior and that of "normal" victims of other diseases.

No one is startled by the fact that relapses are not uncommon among arrested tubercular patients. But

here is a startling fact – the cause is often the same as the cause which leads to slips for the alcoholic.

It happens this way: When a tubercular patient recovers sufficiently to be released from the sanitarium, the doctor gives him careful instructions for the way he is to live when he gets home. He must drink plenty of milk. He must refrain from smoking. He must obey other stringent rules.

For the first several months, perhaps for several years, the patient follows directions. But as his strength increases and he feels fully recovered, he becomes slack. There may come the night when he decides he can stay up until ten o'clock. When he does this, nothing untoward happens. Soon he is disregarding the directions given him when he left the sanitarium. Eventually, he has a relapse.

The same tragedy can be found in cardiac cases. After the heart attack, the patient is put on a strict rest schedule. Frightened, he naturally follows directions obediently for a long time. He, too, goes to bed early, avoids exercise such as walking upstairs, quits smoking, and leads a Spartan life. Eventually, though there comes a day, after he has been feeling good for months or several years when he feels he has regained his strength, and has also recovered from his fright. If the elevator is out of repair one day, he walks up the three flights of stairs. Or he decides to go to a party – or do just a little smoking – or take a cocktail or two. If no serious aftereffects follow the first departure from the rigorous schedule prescribed, he may try it again, until he suffers a relapse.

In both cardiac and tubercular cases, the acts which led to the relapses were preceded by wrong thinking. The patient in each case rationalized himself out of a sense of his own perilous reality. He deliberately turned away from his knowledge of the fact that he had been the victim of a serious disease. He grew overconfident. He decided he didn't have to follow directions. Now that is precisely what happens with the alcoholic – the arrested alcoholic, or the alcoholic in A.A. who has a slip. Obviously, he decides to take a drink again some time before he actually takes it. He starts thinking wrong before he actually embarks on the course that leads to a slip.

There is no reason to charge the slip to alcoholic behavior or a second heart attack to cardiac behavior. The alcoholic slip is not a symptom of a psychotic condition. There's nothing screwy about it at all. The patient simply didn't follow directions.

For the alcoholic, A.A. offers the directions. A vital factor, or ingredient of the preventive, especially for the alcoholic, is sustained emotion. The alcoholic who learns some of the techniques or the mechanics of A.A. but misses the philosophy or the spirit may get tired of following directions – not because he is alcoholic, but because he is human. Rules and regulations irk almost anyone, because they are restraining, prohibitive, negative. The philosophy of A.A. however, is positive and provides ample sustained emotion – a sustained desire to follow directions voluntarily.

In any event, the psychology of the alcoholic is not as different as some people try to make it. The disease has certain physical differences, yes, and the alcoholic has problems peculiar to him, perhaps, in that he has been put on the defensive and consequently has developed frustrations. But in many instances, there is no more reason to be talking about "the alcoholic mind" than there is to try to describe something called "the cardiac mind" or the "TB mind."

I think we'll help the alcoholic more if we can first recognize that he is primarily a human being – afflicted with human nature³

A Sentiment for Things Past (Tim T.)

As my tenure as Treasurer for the Albuquerque Central Office passes, I'm drawn to memories. Challenging times. Dramatic changes. Joy and sorrow. One of the great gifts of AA service work for me is how it forces me into dependence on my program – I have to keep growing and learning to deal with life through the 12 Steps.

My first days began suddenly with the tragic death of the previous incumbent. It was a scramble, but within a few months, a new team gathered itself and operations achieved stability. Turnover brought a new Coordinator, a new Alternate Coordinator, and myself, a newbie with but one semester of formal accounting under his belt.

Then – COVID. Uncertainty abounded through the first few months of 2020. A new virus, its characteristics still a mystery to even the microbiologists. The churches and other meeting venues slammed shut in efforts to exclude the peril. This uprooted most of our meetings, leaving existing groups and clubs at a loss.

Pressure on the Central Office multiplied. Concerned calls came in with questions about the groups and the meetings that AA members needed in order to obtain and maintain their sobriety. As face-to-face meetings shut down, our old paper schedule became obsolete. Many meetings converted over to Zoom meetings. Other resolute AA members started outdoor meetings that braved the wintery elements but carried the message of recovery nonetheless!

As these first months of 2020 evolved, we had a new Website Editor and a new Schedule Editor. The Coordinator, Alternate Coordinator and Treasurer had little more than one year on deck. Rapidly changing government directives meant the elimination of our volunteer desk workers. This work means more to our volunteers than just a task. It is an opportunity to give back to the Fellowship that has saved their lives. Loss of that opportunity was distressing to all.

Two enormous challenges impacted Central Office. First, most of the meeting schedule had suddenly gone up in smoke. Second, the office was closed down except for the Coordinator and the Alternate Coordinator taking all the phone calls and doing curb service for all purchases of books and literature.

The new Schedule Editor and the new Website Editor leaped into the breach. How were AA members and prospective new members supposed to find the support that both had assumed would always be there?

Zoom meetings were brand-new. Many members had limited computer or online AA abilities. The Schedule and Website Editors worked night and day through these first disjointed times, innovating and evolving the website schedule so that

anyone with a computer could remotely access a meeting. Virtually all of the community's AA meetings were impacted. So, these two folks had to modify hundreds of entries and do it accurately enough to reliably lead folks to AA support. Many groups and many meetings changed multiple times as they adapted. Repeated updates were requested. Many weeks of this intense work was necessary. But they did it.

Meanwhile, at the office! The Coordinator and Alternate Coordinator, each working alone at the office, answered dozens of calls each day. Members had depended for many years on their face-to-face meetings to maintain their sobriety and warm themselves in the fellowship on a daily basis. Many now phoned the Central Office for information and comfort. Both Coordinators spent hours talking AAs and AA prospects off ledges, doing their best to comfort and reassure them. It was exhausting work; I witnessed their work and was inspired by their dedication. This work went on for months. It was only when limited face-to-face openings of some venues became practicable that this supportive task began to ease.

How does one begin to appreciate this devotion by members of a Fellowship as informally assembled as ours?

In late winter of 2021, hope blossomed that perhaps COVID was easing its grip. Our Alternate Coordinator had just become Coordinator upon the retirement of the past Coordinator. A new Alternate Coordinator joined us. Innovative ideas burgeoned! Some modernizing changes were begun.

A grievous blow came to our tiny platoon in the late spring. Our Coordinator was diagnosed with a terminal illness. During his last weeks, we again pulled together and sadly but determinedly supported him. He wanted most of all to serve Central Office until the end. He told me that his service during the COVID crisis had been the most rewarding work he could remember.

Our clutch of folks did our best to maximize his time to be with us, [to be with Central Office](#). On the last day of May, a Monday morning, he opened Central Office. He got out the cash box and helped a desk worker start the day. [Thursday afternoon he passed to the Larger Meeting. We all continue to carry him in our hearts.](#)

As I rotate out at the end of this year, I feel blessed. I feel privileged to have witnessed, been inspired and been a small part of such a glorious adventure.

A favorite quote of mine: "To be in service to others, with people like you that I trust, can I ask for anything more?"