

PROPOSED NEW COMMITTEES

COMMITTEE #1 – COMMUNICATION

Treatment Facilities
Special Needs
Correctional Facilities
Remote Communities
Public Information
National Website
Service Website
Co-operation with the Professional Community
International

COMMITTEE #2 – INTERNAL

Policies
Admissions to Conference
Finance
Conference Committee on Trustees
Conference Agenda
Allocation of Conference Topics

COMMITTEE #3 – LITERATURE

Literature
Service Manual
Guidelines
Conference Charter
Conference Report

5 YEAR HISTORY OF TOPICS ALLOCATED TO CONFERENCE COMMITTEES

	2015	2016	2017	2018	2019
Policies & Admissions	9	3	4	5	2
Report Charter & Service Manual	5	9	2	5	3
Agenda Committee	1	6	3	1	1
International	1	4	0	2	0
Conference Committee on Trustees	0	2	0	0	0
Treatment Facilities & Special Needs	2*	0	3	2*	0
Correctional Facilities	1*	1	2	2*	0
PI&CPC	5	2	3	4	1
Finance	4	11	2	4	3
Remote Communities	1	4	2	1	1
Literature	7	7	2	2	6

*Combined with other committee/s

The Conference Agenda Committee agreed that the following information from Concept XI regarding fixed term contracts for staff should be made available with this topic.

“In the future – at those times when the rotation system does not work perfectly – there will be the natural demand to throw it out in the supposed interest of efficiency. Certainly our successors will be at liberty to try, but past experience surely suggests that they may be jumping from the frying pan into the fire.

One more aspect of rotation: the matter of time. We already know that the more responsible the assignment, the longer the term of service must be, if we are to have effectiveness. For example, a group secretary can be changed every six months and an Intergroup committeeman every year. But to be of any use whatever, a Delegate has to serve two years, and a Trustee must serve four.

In the World Service Office, we have found it impractical and unfair to set any fixed term of employment. A staff member has to have several years training. Are we then to throw her out, just as she is getting top grade? And if she realized that she could only serve for a fixed period, could we have hired her in the first place? Probably not. These posts are hard to fill because they require just the right ingredients of personality, ability, stability, business and A.A. experience. If we insisted on a fixed term of service, we would often be forced to engage A.A.'s really not qualified. This would be both harmful and unfair.

But we need not fear too many staff members' getting “old in the service.” The emotional pace of “A.A. around the clock” is too strenuous for most of them to take for a very long period of time. Already they come and go for this and for other personal reasons. Within reason, most of them can and must rotate from assignment to assignment. But we should attempt no more rotation than this”.

Example of
proposed
change #1

thought it emanate from our best minds. What about people who proved that **humankind** could never fly? Yet we had been seeing another kind of flight, a spiritual liberation from this world, people who rose above their problems. They said God made these things possible, and we only smiled. We had seen spiritual release, but liked to tell ourselves it wasn't true.

Further
examples of
proposed
change #1

Actually we were fooling ourselves, for deep down in every **person** is the fundamental idea of God. It may be obscured by calamity, by pomp, by worship of other things, but in some form or other it is there. For faith in a Power greater than ourselves, and miraculous demonstrations of that power in human lives, are facts as old as **humankind**.

Example of
proposed
change #1d

We finally saw that faith in some kind of God was a part of our make-up, just as much as the feeling we have for a friend. Sometimes we had to search fearlessly, but **God** was there. **God** was as much a fact as we were. We found the Great Reality deep down within us. In the last analysis it is only there that **God** may be found. It was so with us.

We can only clear the ground a bit. If our testimony helps sweep away prejudice, enables you to think honestly, encourages you to search diligently within yourself, then, if you wish, you can join us on the Broad Highway. With this attitude you cannot fail. The consciousness of your belief is sure to come to you.

Example of
proposed
change #4

In this book you will read the experience of a **person** who thought **they were** an atheist. **Their** story is so interesting that some of it should be told now. **Their** change of heart was dramatic, convincing, and moving.

Example of
proposed
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AABASICSFORBUSYDOCTORS

Dear Health Professional



Who are

we?

We self-identify as alcoholics and choose not to drink alcohol. We have decided that becoming a member of AA is the best way for us to live a sober life. We attempt as best we can to follow the Twelve Steps suggested by AA. You can view these at www.aa.org.au. We make no claims about our Twelve Steps but are happy to speak of their effectiveness for us. When other alcoholics ask for help, we consider ourselves responsible to respond by sharing our experience of recovery from alcoholism. However, we are neither professionals nor authorities on alcoholism. We remain anonymous in the media so that people will not be deterred from seeking help because they fear public disclosure.



You may be familiar with Alcoholics Anonymous, better known as "AA". This pack contains a taster pamphlet explaining AA for the health professional. There is a list of all metro AA meetings, an online link to all meetings, also a drinking questionnaire on the Meetings pamphlet.

What your patients will experience at AA is people sharing their recovery experience with anyone seeking help with a drinking problem. They will find that while our programme has a spiritual basis, we are NOT a religious organisation. AA is a community support group available all day, every day, for no charge.

You can take comfort that AA does not make diagnosis, offer medical advice, or engage in professional treatment. We are solely dedicated to offering people an opportunity to develop a satisfying way of life free from alcohol.

If you have any further questions, or if you would like to put a patient in touch with a recovered member, please contact us. We are only too willing to help. (Please see over for contact details)

What is AA

Alcoholics formed AA to help each other get and stay sober. AA is a community - based option that many alcoholics have found alleviates the problems arising from alcohol. The only requirement for AA membership is a desire to stop drinking. There are no fees for AA membership or services.

AA is a worldwide non-profit fellowship of local groups that has been established in Australia since 1945.

Members are anonymous but AA needs to be visible. However, AA's public relations policy is based on attraction rather than promotion. Nonalcoholics speak to the media on behalf of AA so that members remain anonymous. AA is not allied with any sect, denomination, politics, organisation or institution. AA does not wish to engage in any controversy so it does not endorse or oppose any cause. AA confines itself to helping alcoholics: other Twelve Step programs modeled on AA offer assistance for other addictions and cater to the family or friends of alcoholics.



Every week, AA holds 121 meetings across metropolitan Perth

AA does not keep any membership records, but typically between 5 and 40 people attend each meeting. Your patients can find a convenient AA meeting on the enclosed list of local meetings or by contacting AA for assistance. (24hour)

Perth Central Service Office- Ph: 9325 3566

Non-Metro, also National Ph: 1300 222 222

(24 hour Helpline)
www.aaperthwa.org

There are at least 61 AA meetings weekly in country WA.

AA does not keep aa membership records but

// AA DOES NOT : cityscapgood.com

- define 'alcoholism' or profess any profound knowledge of its cause or 'cure'.
- have any opinion on public policy or Practices, regarding what some professionals term, 'alcohol dependence and abuse'.
- compete with other treatments or get into debates about evidence, for, or against, various treatment options.
- provide drying out, professional treatment, or other welfare services.
- educate about alcohol, or engage in research.
- provide references for any purpose
- solicit members, make diagnoses or offer advice.
- seek or accept contributions from non-members, or any outside ~~organisation~~.
- join councils or social agencies
- follow-up or try to control its members.

What Happens at AA Meetings?

Most AA meetings are open to alcoholics and their families and to anyone interested in solving a personal drinking problem or helping someone else to solve such a problem. A few 'closed' meetings ask that only alcoholics attend. AA members only use first names at meetings to keep it anonymous. If someone happens to see a person they know, both can expect a warm welcome but they do not disclose to outsiders who they met at AA. The meetings follow a more or less set pattern.

A chairperson describes the AA program briefly for the benefit of any new-comers in the room and calls speakers who relate their personal drinking histories and may give their interpretation of recovery using AA's Twelve Steps. Speaking is encouraged but not compulsory.

The meetings last for up to 90 minutes. At the end there is usually a period for announcements while a treasurer passes the hat to defray costs of the meeting venue, literature, and incidental expenses. Members only donate if they can afford it and a gold coin or small note is enough. The meeting then adjourns, often followed by informal chatting.





AABASICSFORBUSYCLERGY

Dear Pastor, Chaplain



Who are

we?

We self-identify as alcoholics and choose not to drink alcohol.

We have decided that becoming a member of AA is the best way for us to live a sober life.

We attempt as best we can to follow the Twelve Steps suggested by AA. You can view these at www.aa.org.au

We make no claims about our Twelve Steps but are happy to speak of [their](#)

effectiveness for us. When other alcoholics ask for help, we consider ourselves

responsible to respond by sharing our experience of recovery from

alcoholism. However, we are neither professionals nor authorities on

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media so that people will not be deterred from seeking help because they fear public disclosure.



You may be familiar with Alcoholics Anonymous, better

known as "AA". This pack contains a taster pamphlet explaining AA for Members of the Clergy. There is also information for your patient including a self-diagnosis drinking questionnaire, and a list of all metro and country AA meetings.

What your patients will experience at AA is people sharing their recovery experience with anyone seeking help with a drinking problem. They will find that while our [programme](#) has a spiritual basis, we are NOT a religious [organisation](#). AA is a community support group available all day, every day, for no [charge](#).

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AA DOES NOT: cityscsigpond.com

- define 'alcoholism' or profess any profound knowledge of its cause or 'cure'.
- have any opinion on public policy or Practices, regarding what some professionals term, 'alcohol dependence and abuse'.
- compete with other treatments or get into debates about evidence, for, or against, various treatment options.
- provide drying out, professional treatment, or other welfare services.
- educate about alcohol, or engage in research.
- provide references for any purpose
- solicit members, make diagnoses or offer advice.
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- join councils or social agencies
- follow-up or try to control its members.

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Australia wide Facebook Ads



it would be adverse to narrow the audience by any interests, for example, "interested in alcohol" because not everyone might show they are interested in alcohol on facebook yet still be an alcoholic.

I would suggest keeping it as broad as possible.

Parameters:
30 day duration
18 - 65+ years of age
Men and women.

Even if the ad gets served to non-alcoholics that isn't a bad thing, they might know of a family member or friend in need of AA

Gender ⓘ

All Men Women

Age ⓘ

18 65+

Locations ⓘ

DISCLAIMER: All of the following is Facebook's estimation based on their algorithm and data. Based on our experience it could be below or between the following "reach" ranges.

Here are various budgets with the parameters above and the potential individual people reached all amounts include GST.

\$5,000

Potential total 1.26m - 3.66m

Estimated daily results

Reach ⓘ

42K-122K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

\$10,000

Potential total 2.49m - 7.23m

Estimated daily results

Reach ⓘ

83K-241K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

\$15,000

Potential total 3.75m - 10.8m

Estimated daily results

Reach ⓘ

125K-360K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

\$20,000

Potential total 4.98m - 14.3m

Estimated daily results

Reach ⓘ

166K-479K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

\$25,000

Potential total 6.21m - 17.94m

Estimated daily results

Reach ⓘ

207K-598K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

\$30,000

Potential total 7.44m - 21.51m

Estimated daily results

Reach ⓘ

248K-717K

The accuracy of estimates is based on factors such as past campaign data, the budget you entered, market data, targeting criteria and ad placements. Numbers are provided to give you an idea of performance for your budget, but are only estimates and don't guarantee results.

[Were these estimates helpful?](#)

TOPIC #026: INFORMATION FROM CONFERENCE AGENDA COMMITTEE

This topic refers to a decision made by the 2001 General Service Conference.

Advisory Action #060/2001

Conference resolved that Certificates of Currency for the new Public Liability Insurance scheme be issued to groups that register and contribute to its cost in accordance with the distribution of surplus ratio selected by the group conscience.

CONFERENCE PI&CPC COMMITTEE
ATTACHMENT TO TOPICS #004/20 & #021/20

The following questions were raised as a result of this floor action from Conference PI&CPC Committee 2020.

Conference 2020- Floor Action

The PI&CPC Committee request permission to take action on topics #004/2020 and #021/2020, both topics are ostensibly to investigate and enable a “Chat Now” function on our website, www.aa.org.au.

The PI & CPC Committee have met with UK AA and investigated their Chat Now function on the website www.alcoholics-anonymous.org.uk. From its conception, the UK initiative took 6 months to become a reality - their current Chat Now Coordinator indicated we could cut this to 2-3 months with their assistance.

The UK Chat Now is administered by an independent committee and reports to conference. Initially through the establishment of a sub-committee from within the current PI&CPC Committee we could form a roster of members willing and able to serve as Chat operators. Currently many AA members are working from home, working less hours or unemployed. Full training to become a chat operator is a mere 6 hours through several sessions.

We believe that time is of the essence for such an initiative. The latest figures for visits to www.aa.org.au indicate traffic is higher than ever whilst many are locked down, physically vulnerable, geographically disadvantaged or are simply more comfortable with communicating via instant messaging and surfing the internet than by phone. This is the future communication trend.

At a cost of US\$99 (approx. AU\$140) per month, we believe this is a cost-effective method when considering the phenomenal results from 4 years of operation in the UK- 56,000 individual chats, with an average response time of 6 seconds.

Advisory Action #34/2020

Conference resolved that the Conference PI&CPC Committee investigate a Chat Now function on our website and provide a report to be sent as an attachment with topics submitted in 2020 which were deferred to Conference 2021.

Voting: For-21, Against-4, Abstentions-4. Carried.

The questions raised at Conference 2020 were forwarded to the current UK ChatNow Coordinator and the following responses provided.

1. Are there any types of Government/Criminal/Working with Children checks your operators must undergo before volunteering to operate the online Chat?

- A) No, there are no checks required, the same as our telephone responders, they are not required in Great Britain
2. Have there been any additional costs, over and above the monthly fee you pay, involved in operating the Chat function?
- A) No, only the monthly fee and any costs that the AA GB website incurs
3. Do you have a standard Duty of Care policy which would become operative in the case of someone threatening to end their life or do some type of personal harm or intend to harm somebody else?
- A) We have protocols in place which were decided at our Annual Conference some years ago regarding telephone responders. Decided at Conference 2004, Committee 6 Question 2. I served on that committee the year it was decided
<https://aaqb.silverink.ie/download/1/Library/Documents/Conference%20Reports%20and%20Background/Conference%202004/Conf%202004%20Final%20Report.pdf>
Page 46

Additionally, the following pages represent the current UK flyer for volunteers, ChatNow Job Description, Guidelines and a step-by-step description of actual service experiences and how to deal with them. These have been adapted to, where possible, reflect the Australian website and various service entities and outside agencies mentioned.

YIS,

2021 Conference PI&CPC Committee.

Looking for new AA service?

Chat Now

online response service
is looking for new members



*"Modem-to-modem or
face-to-face,
A.A.s speak the language
of the heart
in all its power and simplicity"*

Full job description and application forms
can be found here:

www.aa.org.au/TBA

Menu/TBA/TBA/TBA



Interested?

Email us: example@TBA.com.au

Do you have ...?

- ... 2 years continuous sobriety?
- ... a good knowledge of the 12 steps and 12 traditions?
- ... access to a laptop or desktop computer?
- ... a couple of hours a week free?

Purpose of role:

The main purpose of the Chat Now Help Desk is to answer live, real time queries from the still suffering alcoholic and provide them with information about AA and the 12 Step Program.

Requirements:

2 years continuous sobriety is recommended as well as a good understanding of the AA Program and AA Traditions, 12 Stepping and the AA 12 step service structure and the Chat Now Responder Guidelines.

Applications will need to be endorsed by their Area or Region.

The Chat now service uses a live chat box to respond to any enquiries, so working knowledge of and ability to operate a computer and access the internet is expected. Good communication skills, spelling and grammar are also important

Responsibilities:

The Chat Now response service operates with members covering shifts. The duration of shifts is flexible, up to two hours at any one time, organised on a weekly Rota. During the time on shift it is important that members can respond immediately.

Sponsorship and Support:

During sponsorship into this service position, the Responder will be shown how to use the Pure Chat online dashboard and coached in effective ways to respond to enquiries received. Training will be conducted using a training page.

It will be seen that clear and simple replies that address the issues raised by the enquirer are the most effective. There are editable 'canned' replies available for the more common enquiries. Guidance will be given on how best to respond to challenging situations and emergencies.

As with all 12 Step work, we always need to show empathy towards the still suffering alcoholic.

It should be fully understood that any text, once posted on Chat Now, is reproducible and the reputation of AA depends on our fully upholding the AA Traditions.

The Chat Now Service works as a team with all members supporting each other and sharing experience. To aid this, there will be a Zoom Chat room for all Chat Now responders who wish to participate.

For further information please email example@TBA.com.au

PI&CPC Sub-Committee *Last Updated 02-Apr-2021*



Chat Now Guideline

Last updated by PI&CPC 2021

Overview of ChatNow

General:

The Chat Now Response Service (CNRS) falls under the Conference PI&CPC ChatNow Sub-Committee. The sub-committee has ultimate responsibility for the activities of CNRS. The CNRS Administrator's role is dependent upon the approval of the appointment of candidates to the PI&CPC sub-committee. The CNRS Administrators will therefore have been nominated and elected to the sub-committee before taking over responsibility for the administration of CNRS. It is recommended that there be rotation of the Admin role within the CNRS Service Structure.

What is it? How does it work? What are the requirements?

- It is an instant response service to enquiries that come in from the AA website
- Responders pick up the enquiries via Pure Chat
- 2 years continuous sobriety
- Computer literacy
- Good understanding of 12 steps and traditions
- Ability to reply quickly, i.e. start response within 20 seconds
- Able to commit to a weekly shift of one to two hours

As Electronic Communications are now such an important part of our service to the still suffering alcoholic, it must always be borne in mind that the written word could stay in the cyber-domain for as long as the caller chooses to keep it. **This also means that the possibility of our responses finding their way into the public domain (either via social media or the press) is a very real possibility. So we have more need than ever before to be vigilant in our replies.**

Responders are AA members who have 2 years continuous sobriety and have a competent level of computer knowledge and good communication and grammar skills

All applicants are endorsed by either their respective Area, GSR, Region or the sub-committee.

Members of the Chat Now Responder Team answer live Chat requests that are received via the Chat Now window on the AA website.

What we do:

The purpose of the Chat Now function on the AA Website is to provide an instant response service to enquiries that come in from the AA website.

This will initially involve offering the newcomer the National Helpline number and/or a local Helpline number and may include reassurance by explaining how it works, i.e. that they will speak to a recovered alcoholic who will understand, advise and help. If they so wished, the caller's details could be passed to a local recovered alcoholic on a first-name confidential basis. Using the caller's name within your replies adds a personal touch. Remember the 1300 number is NOT 24 hrs in all areas.

Should someone say that they cannot get through on the 1300 number, ask where they are calling from. We can then check the availability of that local helpline number.

Whether the offer is accepted or refused, then the AA meeting is then mentioned. We offer meeting details should the suffering alcoholic be ready to get themselves to a meeting.

While we aim to steer a suffering alcoholic towards the Helpline or to meetings, we acknowledge that by its very nature, Chat Now will be an appealing channel of enquiry to suffering alcoholics or others who have questions about what is on offer in AA before being ready to make personal contact.

We should recognise that a caller may be more comfortable with online contact and our experience shows that there are often cases where a suffering alcoholic will respond well to some identification and clarification of what AA has to offer before being gently steered towards the Helpline or meetings. In this respect, the responder will use their own judgement as to whether the conversation is moving towards a practical solution or not.

Our job is to actively 'listen' and understand exactly what is being said and/or asked for by the chat visitor and provide them with as much information as possible in a professional, courteous and helpful way.

We do not:

- Give medical advice. Nor do we comment on health matters, either explicitly or implied. For example, depression is often associated with alcoholism....
- Tell the Chat Visitor what to do or say – we only ever make suggestions
- Use scare tactics under any circumstances
- Undermine the Chat Visitor in any way
- Engage in arguments
- Show offence, even if you're feeling angry, upset or insulted
- Treat the Chat Visitor harshly or sternly
- React to angry or discourteous messages by responding in a similar fashion
- Include direct links to web sites other than our own to avoid any inference of affiliation.
- We may send links to GSB of Aus and overseas General Service Offices and these can be found on our website: www.aa.org.au/contact
- E-mail addresses or telephone numbers may however be used in our replies.
- Sponsor from here!
- Use AA jargons and slogans that may confuse the Chat Visitor
- **Pass on any contact or personal details for Responders, Admin or any other AA Member**
- Comment on how groups are run

Responders should

- Look carefully through the incoming message and identify any specific vulnerabilities that may need addressing for example, cannot get to a meeting
- Try to answer any questions asked relating to AA
- Give the 1300 number letting the enquirer know that it may not be 24 hrs in all areas.
- Where the area has been provided by the caller, offer Local helpline and times manned
- Be understanding, compassionate and tolerant in all instances
- Remember that your messages, once sent, are in the public domain for as long as the chatvisitor chooses, may be copied, and it could open to any form of public exhibit just as the visitor may wish to publicise it
- Always be mindful of the responsibilities we assume as responders when dealing with those asking for help. If we try to ensure that we act with integrity and in accordance with our Traditions, we will not go far wrong.

In sections below, (CR) indicated that there is a Canned Response available, which can be used or adapted to aid quick responses.

Suffering Alcoholics

1. Give them a Helpline number to ring so they can get a 12-Step call
2. Provide them with information about meetings so they could go straight there if they wish. Indicate the meeting finder pane at the top of the page, or post a link to the AA meeting finder (CR). If the caller gives a locality, then meeting information can be copied from the meeting finder and posted into the chat response
3. Share our experience, strength and hope where appropriate
4. Offer links to relevant AA Newcomers literature (CR)
5. *Note that if any information is given, the visitor should be advised to copy the information before the Chat is ended. (CR)*

Current Members

We also receive enquiries from AA members e.g. wanting meeting details. Again, offer meeting information as above.

General 'sharing'

We are not here to 12th Step, but to try to get suffering alcoholics to the 12th Step. Some sharing of our experience with the visitor can provide identification to help them make the decision to try AA. However, sharing on subjects outside AA is a No No. Experience shows that being able to listen and identify helps the enquirer decide what they wish to do.

Friends and Family

Many enquiries come from friends or family members with an alcoholic in their lives. These visitors

should be thoughtfully and tactfully directed to AI-Anon (CR). We can also provide AA telephone and meeting details and a link to newcomers literature which they can pass onto the alcoholic in their life should they wish to. *Note: AI-Ateen is part of AI-Anon and is for children aged 12 and 17*

AI-Anon Family Groups Australia: www.ai-anon.org.au | 1300 ALANON (1300 252 666)

Other Agencies

AA co-operates with these and has no affiliation to them. We have a “special relationship” with AI- Anon, cemented by both our World Service Conferences as well as the recovery of hundreds of thousands of families. With everyone else, advise that the enquirer uses a search engine to find details as required. We simply pass on the requested information with courtesy and without comment. Please don’t recommend other agencies – it only leads to the complication later of... “ButAA **told** me!”

Professionals

Calls from social services, the medical community, legal authorities, colleges and public information sources can be given a link to the Professionals page of the AA-Australia Website: www.aa.org.au/professionals and offered contact details for GSO:

Alcoholics Anonymous Australia
Tel. 0466 319 786 (Office hours only)
Email: gso@aa.org.au | Website: www.aa.org.au

Media

Any contact from the media should be immediately directed to GSO as above.

Callers with other conditions or issues

Medical Problems

With respect to any medical problems, we suggest that enquirers contact their GP or NHS Direct

AA has no opinion on outside issues. This saves lives. Sometimes callers or their family or carers give us details of medical symptoms with which we are tempted to identify – and to share back our experiences of GPs, alcoholic wards and the like. We cannot give advice and sometimes our sharing of our own medical experiences can be mistaken for the giving of advice.

What about DTs, shakes and bad hangovers, drying-out, treatment facilities, medical problems?

As above

Routine for being on duty

1. Logon to purechat at the appropriate time
2. Click on available for chats button
3. If you are unavailable for even a short time, making coffee or some such, mark yourself as Unavailable, until you return
4. Responders should aim to answer chats within 10 seconds and no longer than 20 secs.

Chats going unanswered for longer periods is not good for the service

5. Read the enquiry carefully to ensure that you reply to the question asked
6. If you are nearing the end of your shift, you can switch your status to unavailable without interrupting open live chats.
7. Similarly, if you have more than one chat open and have as much as you can manage for the moment, switch status to unavailable while you deal with the current live chats.
8. It is recommended that at three active chats, responders on duty should switch to "unavailable" as to give the current visitors the proper care and attention.
9. Anyone is free to give Ad Hoc cover. Please note the protocol listed under Ad Hoc Shifts
10. New responders will be shadowed for the purpose of mentoring and support.
11. Transcripts of chats may be reviewed to facilitate on-going support and guidance.

Ending a session

When finishing a session it is essential to ensure that

- 1) all chats are closed, including those between responders
- 2) Switch your status to Unavailable
- 3) log off Pure Chat

If we miss any of these steps then we get missed chats on pure chat when there is no one covering

Ad Hoc Shifts

Anyone is free to give ad hoc cover. In the case where a Responder is on their rostered shift, the following etiquette should always be observed:

1. Responders switching to available whilst another responder is on a rostered shift should be discouraged unless agreed between both parties
2. Do not send operator Chat requests whilst the active responder is on a live chat.
3. If you are not the rostered responder, please allow the rostered responder time to pick up incoming chat requests, at least 20 seconds, including second or third chat requests unless otherwise agreed
4. It is recommended that at three active chats, responders on duty should switch to "unavailable" as to give the current visitors the proper care and attention.

Useful Information

Always give 1300 number for suffering alcoholics. If they tell you their location, then give a local helpline number if possible.

While on Pure Chat there is a facility for responders to chat privately.

All responders can see who is logged in at that moment. - note you will also see who has closed browser without logging off!

When getting information, let the visitor know- i.e. "Give me a moment..." If the caller has got what they need, don't chase them

Don't forget to remind to enquirer to copy and paste or note down the info given. (CR)

Give them time to do this at the end of chat, i.e. let them close the chat.

Remember we can receive enquiries from abroad also. The 1300 number is not suitable for them.

12-13 14 Steps to Chat Now

1. Greet everyone warmly by name and ask how we can help them.
2. Offer 1300 22 22 22 and local one, if they are willing to give their area.
3. Do not use text abbreviations or AA jargon, as enquirer may not understand.
4. No links to anything outside AA Australia.
5. Callers who threaten suicide should be offered Lifeline (CR:LifeLine) or 000 repeatedly.
6. 'We are not medically qualified' CR for anything medically related, no matter how trivial.
7. Go unavailable if you have maximum of three active chats, less if you feel more comfortable doing one or two. Write "3 on, 2 on, 1 on" in the main chat Skype room to alert free responders that the CN line is unavailable.
8. If you have a difficult chat, please contact one of the admin/trainers. If appropriate, ask them to monitor or, in extreme cases, to join the chat (informing the chatter of this first).
9. Do not respond to bad language or abuse. Try to remain calm and serene.
10. During your shift please have following things open: Pure Chat, Zoom, Telephone A-Z, and the AA Australia website. This saves time and frustration – especially with more than one chat on.
11. Refer any Professional or Literature Order enquiries to GSO (CR: GSO)
12. Never start a private operator chat with a responder who is currently on a chat.
13. Never initiate a chat with a site visitor, even if you have been previously chatting and have been disconnected.
14. Always remember Rule #62. (Twelve Steps and Twelve Traditions, Tradition 4 page 149)