

AD HOC COMMITTEE REPORT ON HOSPITAL AND INSTITUTIONAL MEETINGS

At the December 1984 meeting of the trustees an ad hoc committee composed of Jack B. and Bob R. was assigned to provide to the Board a draft report providing a clearer understanding of what an H&I meeting is. This assignment came as response to the growing concern about meetings whereas because they may have restrictions imposed on the meeting place or the participants, they might more correctly be classified as an H&I meeting.

The committee had opportunity to meet twice and discuss the issues by phone on other occasions.

THE REPORT

The problem arose, to some degree, from the convenience afforded to members having been graduated from treatment programs where N.A. was encouraged or stressed as part of the treatment program. In many of these cases, the facility staff encouraged the start of or started their own meeting at the facility for the convenience of their patients. Some of these facilities, learning from the unfortunate experience of problems caused by former residents or outpatients or simply from N.A. members not previously connected completely autonomous N.A. meeting impossible.

For example, some facilities decided that anyone who was loaded could not be on the grounds of the facility, even to attend an N.A. meeting. Other facilities decided that a former resident patient who did not successfully complete the program could not attend an N.A. meeting at the facility until they had been away from the facility for a given period of time. At other facilities, security searches were made. These are but a few of the examples of requirements placed on meetings by the facility owners.

This situation however provides the foundation for a long range danger to the Fellowship. The erosion of understanding, application or adherence to our traditions provides the seeds for failure on the part of individuals to successfully work the program. This has disastrous affects on the lives of addicts and the strength of the Fellowship as a whole.

The committee conclusion is that some action is required by the trustees to inform the Fellowship of the dangers involved and encourage the Fellowship to make adjustments in those meeting arrangements where the conflicts exist or develop new meeting locations where the conflicts will not be present.

The committee found that Tradition Three is being violated through the conduct of meetings in certain hospitals, treatment centers and institutions. These violations have come to our attention from many letters and phone calls. The importance of this issue cannot be underestimated. Because these meetings are operating in violation of tradition it affects N.A. as a whole.