Narcotics Anonymous®

Additional Needs Resource Information

Twelve Steps of Narcotics Anonymous

1. We admitted that we were powerless over our addiction, that our lives had become unmanageable.
2. We came to believe that a Power greater than ourselves could restore us to sanity.
3. We made a decision to turn our will and our lives over to the care of God *as we understood Him.*
4. We made a searching and fearless moral inventory of ourselves.
5. We admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. We were entirely ready to have God remove all these defects of character.
7. We humbly asked Him to remove our shortcomings.
8. We made a list of all persons we had harmed, and became willing to make amends to them all.
9. We made direct amends to such people wherever possible, except when to do so would injure them or others.
10. We continued to take personal inventory and when we were wrong promptly admitted it.
11. We sought through prayer and meditation to improve our conscious contact with God *as we understood Him,* praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as a result of these steps, we tried to carry this message to addicts, and to practice these principles in all our affairs.

Additional Needs Resource Information

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INTRODUCTION

Most of us can find a meeting on a meeting list, get to it, enter and sit down, and hear the spoken message of recovery without a second thought. However, there are some for whom this is not possible. They need some form of assistance in order to do what most of us take for granted. In other words, they are addicts who, for a number of reasons, have *additional needs*.

The Fifth Tradition states that *our primary purpose is to carry the message to the addict who still suffers*. However, it is often not enough to share only our recovery. We also need to recognize when our meeting space cannot be easily approached or entered and/or the message our group is carrying cannot be easily obtained. The reason may be a poor choice of location for our meeting. When this happens, we should make every effort to remove the barriers that make finding recovery difficult for some addicts. This material was developed to provide information to our regions, areas, and groups on how to go about accomplishing this task.

There are many things we can generally do within our service structure and as groups to help addicts with additional needs find recovery. For example, Hospitals & Institutions subcommittees can evaluate accessibility of their meetings. Public Information subcommittees can stay updated on the accessibility of all facilities listed in meeting schedules and provide the information where necessary to agencies. Literature subcommittees can educate our regions on the needs, capabilities, and limitations of addicts with additional needs. Convention committees can ascertain that facilities are accessible and that convention flyers and schedules make note of this. Groups and areas can compile rosters of individuals who are willing to provide assistance and/or transportation to addicts with additional needs.

There are things individuals can do as well, most which require only common sense. The best thing we can do, is to examine our own attitudes and prejudices towards others and begin to make necessary changes.

Although there are others, the following three categories of additional need seem to be the most common:

For individuals who are	accessibility means
• in wheelchairs/use walkers (physically impaired)	• getting into and maneuvering within meeting places and, in some cases, transportation
• deaf/hearing-impaired	• receiving the spoken and written message
• blind/visually impaired	• receiving the written message and help in getting to meetings

GENERAL SUGGESTIONS

This material contains information and suggestions for both new and already-established groups and service committees on how to go about evaluating meeting places for accessibility. We suggest that you look through this booklet to get an idea of the types of physical and other barriers that may be problematic. In addition, the diagnostic survey in Appendix II will be useful in determining the accessibility of your meeting place.

Suggestions for Regional and Area Service Committees

- Compile accessibility information, include it in area directories and forward it to regional PI subcommittees.
- Include RSO and WSO resources on the order form in group starter kits.
- Make sure meeting places for service meetings are accessible.
- Host learning days and/or awareness weekends on additional needs.

Suggestions for Subcommittees

Regional Service Offices (RSOs) are encouraged to:

- Keep available materials for addicts with additional needs in stock.
- Keep PI subcommittees informed as to what is available.
- Make a WSO resource list available.
- Include information in group starter kits.
- Help disseminate information.

Convention committees are encouraged to:

- Determine accessibility to all functions.
- Ensure access to scheduled dances and/or speaker meetings.
- Allow addicts with additional needs to be seated first.
- Request a block of rooms for individuals with additional needs.
- Make sure *all* restrooms are accessible to *all* addicts.
- Schedule workshops on additional needs.
- Get speakers with additional needs for speaker meetings.

H&I subcommittees are encouraged to:

- Keep a current list of accessible H&I meetings.
- Make sure the area has a list of accessible H&I meetings available.

Literature subcommittees are encouraged to:

- Solicit stories from addicts with additional needs.
- Provide articles on what areas, groups, and individuals can do.
- Help educate regions on this topic.

PI subcommittees are encouraged to:

- Mail information to agencies serving people with additional needs.
- Include information in the regional meeting directory.
- Provide a space on meeting update/change forms to address these questions.
- Suggest a TDD/TTY to phoneline services.

Suggestions for Groups

- Determine wheelchair accessibility for group meetings (including restrooms).
- List accessible meetings in schedules.
- Provide area with the information.
- Develop a list of members willing to provide transportation.

Suggestions for Individual NA Members

- Assist addicts with additional needs.
- Avoid making assumptions.
- Use common sense.

A word about sponsorship: One of the best ways we can help addicts with additional needs is to be willing to sponsor them. We should take care to not overlook the experience, strength, and hope of addicts with additional needs when we consider a sponsor for ourselves.

SUGGESTIONS SPECIFIC TO NEED

Addicts with Hearing Impairment

There are several types of hearing loss and just as many words to describe them. *Deaf* is generally used to characterize individuals who have lost most or all of their hearing. *Hard of hearing* describes those who can hear only with difficulty. However, these terms most often depict cultural identity more than impairment. For example, those individuals who describe themselves as *deaf* usually identify with the deaf community and do not differentiate between degrees of impairment. They have their own lifestyle, customs, and traditions. Also, those who have been deaf since infancy are generally limited in spoken language skills. On the other hand, those who consider themselves *hard of hearing* usually identify with the hearing community and, in most cases, do not use sign language. Both deaf and hard of hearing persons may wear a hearing aid in one or both ears. However, a hearing aid usually amplifies sounds and filters out background noises, but does not replace normal hearing.

One-on-One Communication

There are many ways for hearing-impaired individuals to communicate. Some communicate through speech or lip reading. Others prefer written notes. Of manual communication methods, sign language is most popular. To learn what works best for any one individual we need to ask.

When first meeting a hearing-impaired person:

- Observe how they communicate with hearing people.
- Ask how you can best communicate.

Each time you start a conversation:

- Get the person's attention.
- Look at them when you speak.
- Avoid standing in front of a light source.
- Allow plenty of time for conversation.

When you are the speaker:

- Speak slowly and clearly in a normal tone of voice.
- Do not put anything in your mouth when speaking.
- Don't move around a lot.
- Use short sentences.
- Ask questions to confirm understanding.

When you are the listener:

- Pay careful attention to words, facial expressions, and gestures.
- Ask to repeat if necessary.
- Ask questions to confirm understanding.

Written Communication

When written communication is used, the following guidelines are useful:

- Organize your thoughts.
- Be concise.
- Summarize or restate important items.
- Ask questions with yes/no choices.
- Wait for a response.

Manual Communication

These tips assume a basic knowledge of sign language:

- Face the person so that they can clearly see your lips.
- Keep your hands chest-high.
- If you don't understand something, ask.

Communicating Through an Interpreter

An interpreter's role is to facilitate communication between a hearing-impaired individual and a hearing individual. As such, they bridge the communication gap between two parties. Sign language interpreters use language and finger-spelling skills; oral interpreters silently form words on their lips for speech-reading. Interpreters will interpret all information in a given situation and also voice for deaf people, if requested. The following suggestions are helpful in one-on-one communication or with groups when there is an interpreter present:

- Face the hearing-impaired person and speak directly to them, not to the interpreter.
- If you have questions about the individual, ask them and not the interpreter.
- Let the interpreter and/or hearing-impaired person decide where they will position themselves to best facilitate communication.
- Put chairs in a circle or semi-circle so that the hearing-impaired person can see everyone clearly.
- Provide adequate lighting.
- Speak at a normal tone and pace.
- During group discussions, allow only one addict to share at a time.

- Give the interpreter time to finish so that the hearing-impaired person can ask questions or join the discussion.
- If written materials are used, provide the interpreter with an advance copy.
- If interpreting steps and traditions becomes a problem, ask the interpreter to contact the WSO for information.
- Inform the interpreter of any concerns that may have arisen during the meeting.
- Ask the deaf member if the service (interpreter) was satisfactory.

How to Find and Fund a Qualified Interpreter

Whether or not to use an interpreter should be the choice of the hearing-impaired person. If they prefer an interpreter, but do not know how to get one, the group (or individuals from the group) may help them do so.

It is very important to make sure we have only qualified interpreters in our meetings. Just because someone knows how to use sign language does not mean they are qualified to interpret the NA message clearly and accurately. Although specifics may vary in different countries, professional interpreters are generally bound by a code of ethics which ensures confidentiality, accuracy, impartiality, and proficiency. As professionals, they also charge a fee for their services. Quite often, this fee is flexible and may be based on a sliding scale. If a group does not have the funds to cover a qualified interpreter, an outside agency for individuals with additional needs may be able to assist with this expense. According to the Seventh Tradition, our groups cannot ask an outside entity to pay for services provided in our meetings, but the individual can. In many cases, the hearing-impaired individual will also have experience with such agencies.

Technology and Other Tools

Some hearing-impaired individuals prefer technological tools which can be used to improve hearing in a group setting. This usually involves a microphone which carries sound directly to a hearing aid. When used in a meeting, it should be announced and emphasized to the group that this is an *amplifying* device, *not* a recorder.

It is also possible for deaf individuals to communicate on the telephone if they have a Telecommunications Device for the Deaf (TDD), the most common being a Text Telephone (TTY or TT). However, both the caller and the recipient must have one. Unfortunately, most people—deaf or hearing—do not own a TDD/TTY due to the high cost of owning one.

Addicts with Visual Impairment

Although there are many types of visual impairment and each individual's situation will be unique, for the sake of simplicity we will discuss blind, visually impaired, low vision, and sight-impaired addicts as one group of addicts with additional needs.

Accessing NA Literature

The most common method for visually impaired addicts to access our literature in recent years has been the use of cassette tapes. The WSO has a variety of tapes and NA recovery literature available for visually impaired addicts. Outside agencies which assist individuals with visual impairment may also be helpful resources.

Technology and Other Tools

Technological solutions, such as photocopying machines which can both duplicate and enlarge items may be available to help visually impaired addicts access our literature. Also, most addicts with visual impairment have friends in the fellowship who are willing to record various pieces of recovery literature. (*A word of caution:* anyone who agrees to record literature should be careful to read the text exactly as it is written without personal interpretation or editorial comments included.) In addition, it is now possible, using computers and special devices and software, to scan, enlarge, and even read literature to individuals who cannot see. When using technology, it is important to remember that as with any other copyrighted material, limits are placed on the reproduction and distribution of NA literature. The guidelines for each situation may vary, so it is best to contact the WSO for approval.

Getting To and From Meetings

Again, each situation may be different. However, it is each addict's responsibility to arrange his or her own transportation to and from meetings. When giving a ride to an addict who is visually impaired, there are a number of things to remember:

- Do not honk the horn unless you are sure that he or she will recognize your car.
- If necessary, meet the addict at the door and guide him or her to the car.
- Place the addict's hand on the top of the open car door. This helps gauge the height of the car and its approximate distance from the curb.
- Some visually impaired persons prefer being shown the door handle so they can open the door themselves.
- Whenever possible, it is safest for the visually impaired person to close the door.

- Anyone else closing a door should always announce their intention and then wait a few seconds before doing so.
- When driving a visually impaired person home, ask if he or she needs help getting to the door.
- It may only be necessary to help the addict get oriented by giving the location of the walk or entrance such as "ten feet to the left."
- If the addict needs guidance to the door, go around to the car and wait for him or her to exit.
- Offer your arm and provide guidance.
- Never grab, pull, or push anyone who is visually impaired.
- When in doubt about what level of assistance the addict needs, ask.

Sighted-Guide Techniques

Sighted-guide techniques are based on the practice of having a sighted person (the guide) move ahead of the blind person who maintains contact by touching either the shoulder or upper arm of the guide. Some helpful things to keep in mind when guiding a blind person are:

- The guide should always on alert for obstacles.
- The guide should be extremely careful when judging height and clearance.
- It is a good idea to describe, in a general way, terrain or surroundings being traversed.
- The guide should always move more slowly on stairs or other complex obstacles.
- When seating a person who is blind, the guide should place his arm on the back of the chair and announce any special information such as "There is a chair with arms and a small table just in front of it."

Guide dogs: A person using a dog as a sighted guide may need little assistance. The dog is trained to do most of the work. Do not pet a guide dog in harness; it is working and does not have time for this. Never distract the dog while traveling. Guide dogs pose few problems either in a meeting or in a restaurant after the meeting since they are well trained to handle such situations.

Red-tipped White Canes: Some visually impaired persons carry a red-tipped white cane, known as a Hoover cane. These canes may either be one piece or a folding kind that can be folded up and put out of the way. The cane can be used to identify a person who cannot see and is used by the person to travel. The training for such travel is very detailed and the skills are very specific. If a visually impaired person is carrying a white cane, the guide can be sure they know how to use it. A person in the path of a blind person traveling with a cane should either get out of the way or announce their presence. *When someone lays a cane down, it should never be moved without their knowledge.*

Meetings and Meeting Places

It is a good idea to spend a few moments with a visually impaired addict orienting them to the meeting facility. The following suggestions may be helpful:

- Always point out emergency exits.
- Point out restrooms and go over the layout if necessary.
- Show them how to find coffee and ashtrays.

In most cases, the visually impaired person will ask for the information they need to be comfortable with their surroundings. There are other things we can do:

- Go around the room and have everyone introduce themselves.
- If the meeting splits into two groups, be sure that someone helps in locating the other group.
- The guide might offer to take phone numbers and read them back at a later time.
- When greeting a person who is visually impaired be sure to tell them your name and that you want a hug.
- When a visually impaired person approaches a group of sighted addicts, be sure to introduce everyone.
- Never come up quietly and grab an addict who is visually impaired.
- Never remain silent when a visually impaired addict enters the room alone.

Additional Tips

There is little need for a sighted person to change their normal manner of speaking in order to converse with a visually impaired person. For example, it is not generally necessary for a sighted person to avoid color words or normal usage of other words. However, phrases such as "Look over there," are of little use to a person who cannot see. As in most situations, common sense should prevail.

The guidelines for assisting visually impaired persons in meetings will work in most social settings as well. Most of them are used to restaurants and dances. Be sure to let the visually impaired addict know where the restrooms are, and don't forget that he or she may need a ride home. Never ignore them, and try to include them in any conversation. The tools that work in getting a sighted newcomer to feel more at ease will work with a visually impaired newcomer as well. The best rule to follow is to treat others—with or without additional needs— the way we ourselves would want to be treated.

Addicts in Wheelchairs

There are many important factors involved in making meeting places accessible for those addicts in wheelchairs or other mobility devices. The following suggestions can help:

- Seek volunteers from the group to greet and assist addicts in wheelchairs.
- Make sure your meeting facility is accessible.
- Include accessibility information in meeting schedules.
- Provide H&I and PI subcommittees with this information.

Wheelchair Accessibility

Accessibility means more than being able to pass through the front door. It also means being able to get into the meeting room itself, to use the restrooms, and reach a water fountain. It means being able to take care of basic needs with dignity. Generally, a facility must meet the following conditions in order to be considered accessible. It must have:

- An operable ramp into the facility.
- Restrooms which allow access to everyone.
- Parking should be near the door or ramp to the building.
- Doorways must be wide enough for entry.
- Bathing facilities (at overnight functions) must be safe for wheelchairs.
- Meeting rooms need to have ample space to maneuver.

Some Hints For Helpers

Folding a wheelchair

- With hands in center of seat, push out with heels of hands.
- Don't put your fingers between the chair frame and the seat—they may be crushed.

Opening a wheelchair

- Remove the seat cushion and pull upward on the seat at the center.
- Don't lift the chair by the armrests as they may come off.

Storing a wheelchair

- Position folded wheelchair next to vehicle's trunk.
- Grasp the struts of the chair only.
- Using your legs—not your back—to lift it, balance the chair on edge of trunk.
- With the full weight on the chair on edge of trunk, tip it up and over, and slide it in.

Maneuvering a wheelchair down a curb

- Placing your foot on the tipping lever, take firm hold of the hand grips, and tip the chair back towards you.
- Gently lower the chair down the curb, adjusting your body to take the weight.
- Both rear wheels must hit the ground at the same time or the chair may tip.
- An alternate method: turn the chair and lower the back wheels to ground level, then the front wheels. Ask the person which they prefer.

Maneuvering a wheelchair up a curb

- Place a foot on the tipping lever and lift the chair, setting the front wheels onto the curb.
- Lift the back wheels up and onto the curb. This may be somewhat difficult.
- A second person can help to lift the chair by both people grasping the bar below the armrest. Both should lift at one time.

Carrying a wheelchair up stairs (two people are needed)

- Position the wheelchair squarely on floor with back towards foot of the steps.
- Tip the chair backward.
- With a firm grip on chair, place one foot up a step, throw the same shoulder slightly backward, and pull the chair up.
- A second person must steady and lift from the front.
- Repeat for all steps.

Carrying a wheelchair down stairs

- Never try to take a wheelchair down a flight of stairs unless you are absolutely sure you can bear the entire weight and maintain full control.
- Holding a tight, steady grip on chair, slowly let it forward, controlling the downward movement against the step's edge.
- Use your body as a brake at the top of the step. Don't wait until the chair drops to do so.
- Stop for a rest between steps.
- Use another person, whenever available. The second person stands in front, slowing and steadying the descent.

If no one in the group is familiar with handling wheelchairs, one or two members of the group can ask the addict in the wheelchair to teach them.

OTHER BARRIERS TO RECOVERY

In addition to those obstacles mentioned, a major barrier faced by people with additional needs is that of prejudice and negative attitudes. The attitudes may be those held by society, friends, families, or others with additional needs. Fear can cause irrational reactions to those we believe are somehow different from us. Some react with judgment and prejudice, others with pity. Some exert control, while others cannot do enough to help. In all such cases, the individual with additional needs ends up feeling different because they are treated differently.

We can help change such negative thinking by becoming aware of our own attitudes. This is most obvious in the terminology we use on a daily basis when speaking to or of addicts with additional needs. We need to avoid words that diminish the individual's dignity or magnify the disability. Many common labels for individuals with additional needs are demeaning and inaccurate. We should avoid them at all cost.

It is always important to treat addicts with additional needs as we would any other addict coming into the rooms. Addicts who were able to use on their own will be able to recover on their own, though some assistance may be necessary. We must never do for the addict with additional needs what he or she can do alone. Sometimes it is hard to know what help an addict may need, but a good rule of thumb is that a person who needs help will request it.

APPENDIX I

Glossary of Common NA Terms

The therapeutic value of one addict helping another is without parallel. In conclusion, as with *all* addicts, when we help an addict with additional needs, we help carry the message of NA recovery.

Additional needs, addicts with. Additional needs arise from physical challenges such as blindness, hearing impairment, or mobility limitations imposed by use of wheelchairs. Reaching addicts with additional needs and making our meetings and other services more accessible to them is an obligation our fellowship takes very seriously at all levels of its service structure.

Area service committee (ASC). A committee created to provide common services for NA groups in a specific locale. Composed of GSRs, ASC officers, and subcommittee chairpersons. Usually part of a region, to which it sends RCMs.

Closed meetings. NA recovery meetings that are closed to nonaddicts.

Common needs (special interests). A name tag referring to specialized groups formed to provide additional identification for addicts with particular needs or interests in common—for example, men's or women's groups and gay or lesbian groups.

Conference-approved service material. Material approved by the World Service Conference that is intended primarily for use within the context of an NA service board or committee.

Fellowship-approved literature. See *NA-approved literature.*

Group service representative (GSR). Elected by an NA group to participate on the group's behalf in the ASC and the regional assembly.

GSR. See *group service representative.*

H&I. See *hospitals and institutions.*

Home group. The group an NA member calls "home." Home group membership calls for regular attendance of its recovery meetings, financial and voluntary service support, and participation in conscience-building and decision-making processes.

Hospitals and Institutions (H&I). A field of service usually covered by one ASC subcommittee devoted to carrying the NA message primarily to correctional inmates and treatment facility patients.

NA Way Magazine, The. The NA Fellowship's quarterly journal, published in various languages.

NA-approved literature. Recovery literature officially sanctioned by the Fellowship of Narcotics Anonymous as given voice by its groups through their delegates to the World Service Conference. Also referred to as "fellowship-approved literature."

Narcotics Anonymous World Services (NAWS). Refers to Narcotics Anonymous World Services, Inc., the legal name for the World Board. (See World Board description.)

Open meetings. NA recovery meetings that allow attendance by nonaddicts.

Phoneline. An NA telephone contact service providing means by which an addict or a general community member can get information about Narcotics Anonymous, especially NA meeting schedules. Usually administered by an ASC subcommittee.

PI. See *public information.*

Public information (PI). A field of service usually covered by one ASC subcommittee devoted to carrying the NA message to government and private agencies, the public media, community leaders, those in the helping professions, and the community-at-large so that addicts seeking recovery will be referred to Narcotics Anonymous.

RCM. See *regional committee member.*

Regional committee member (RCM). Elected by an ASC to participate on the area's behalf on the regional service committee.

Regional delegate. A World Service Conference participant elected by a region's GSRs and RCMs.

Regional service committee (RSC). A body that draws together the combined service experience of a number of adjoining areas for those areas' mutual support. Composed of RCMs, the regional delegate and alternate delegate, and others as needed.

RSC. See *regional service committee.*

Service bulletins. Articles, position papers, and food for thought on a variety of NA service-related topics. A number of such bulletins are available from our World Service Office.

Special interests (common needs). A name tag referring to specialized groups formed to provide additional identification for addicts with particular needs or interests in common—for example, men's or women's groups and gay or lesbian groups.

TTD/TTY Telecommunications Device for the Deaf (TTD) and the most common being a Text Telephone (TTY or TT). A small typewriter-style piece of equipment that transmits typed text by telephone connection.

Trusted servant. An NA euphemism for "leader," "official," or "officer." Derived from NA's Second Tradition, in which NA leaders are characterized as "trusted servants" as opposed to governors.

Twelve Concepts for NA Service. One of three bodies of basic NA principles, the concepts apply specifically to the development, coordination, and maintenance of NA services on behalf of the groups.

Twelve Steps. One of three bodies of basic NA principles, the steps describe NA's regimen leading to personal recovery and a spiritual awakening.

Twelve Traditions. One of three bodies of basic NA principles, the traditions provide guidance for the behavior of NA groups, helping the groups maintain their independence while nurturing their unity.

World Board. The World Board is the service board of the World Service Conference. It provides support to the Fellowship of Narcotics Anonymous in their efforts to provide the opportunity to recover from addiction; and oversees the activities of NA world services, including our primary service

center, the World Service Office. The board also holds in trust for the NA Fellowship the rights for all their physical and intellectual properties (which includes literature, logos, trademarks, and copyrights) in accordance with the will of the WSC.

World Service Conference (WSC). A deliberative body composed of regional delegates and world-level trusted servants, the WSC provides an effective voice and active conscience for the worldwide NA Fellowship.

World Service Conference Report. The full reports of the World Service Conference and the World Board and its committees.

World Service Office (WSO). World Service Board headquarters (Los Angeles) and branch facilities (Canada, Europe).

WSC. See *World Service Conference.*

WSO. See *World Service Office.*

APPENDIX II

Self-Diagnostic
Additional Needs Accessibility Questionnaire

The following questions are designed to help your group evaluate accessibility for addicts with additional needs.

- Does your meeting place have clearly marked, easily accessible parking spaces reserved?
- Is your meeting facility equipped with adequate ramps?
- Are parking lots and walkways well lit?
- Are all doors (gates, etc.) wide enough for a wheelchair to pass through?
- Are elevators available to access meeting rooms not on ground floor?
- Are restrooms accessible?
- Is the group willing to allow an interpreter to accompany a deaf person in both open and closed meetings?

If your group has answered "yes" to all seven questions, then you can consider your meeting accessible. If not, please read through this booklet to get more information.

Please let your area and regional PI committees know once your meeting place is accessible. They will be able to include this information in the area and regional meeting directories.

APPENDIX III

Suggestions for Convention Committees

Below are several suggestions for making our conventions more accessible to addicts with additional needs. It may be helpful for the convention committee to appoint an Additional Needs chairperson to the committee to ensure that the convention is as accessible as possible.

When selecting a hotel and/or convention center, make sure that all areas are accessible to anyone with a physical disability. Many times a facility may claim to be accessible, but has showers with sliding doors, high tub sides, and/or no bars to use for balance, etc. For this reason it is very important that a member of the committee inspect the rooms before contracting with the facility.

- Make sure all restrooms are accessible.
- Ask the hotel to block off some rooms that are fully accessible for persons with additional needs.
- Allow those who are in wheelchairs or who are visually impaired to enter through a separate door prior to the rest of the population entering the room. This information (time and location) should be printed in the program.
- Put a sign on the door to be used for addicts with additional needs. Please do not have the chairperson or anyone from the podium to ask them to move to the front of the room. Space should be made available but we need to allow them to sit wherever they are most comfortable.
- Provide interpreters during meetings. This information should be added to the convention flyer. Also, the program should be coded so that the deaf addicts will know which meetings will be interpreted.
- If interpreters are provided, reserve seats in the front for the deaf participants so that they will be able to see the interpreter. However, do not have the chairperson announce this from the podium. This can be embarrassing. A better strategy would be to include this information on flyers and note in the program that addicts with additional needs may request to have a seat reserved at a workshop or speaker meeting.
- If you have hired an interpreter, make sure that there is room for him/her on the podium. Also, you need to be aware that for any meeting lasting more than two hours, it will be necessary to hire two interpreters.
- If possible, have a workshop on additional needs to help educate our fellowship.

Twelve Traditions of Narcotics Anonymous

1. Our common welfare should come first; personal recovery depends on NA unity.
2. For our group purpose there is but one ultimate authority—a loving God as He may express Himself in our group conscience. Our leaders are but trusted servants, they do not govern.
3. The only requirement for membership is a desire to stop using.
4. Each group should be autonomous except in matters affecting other groups or NA as a whole.
5. Each group has but one primary purpose—to carry the message to the addict who still suffers.
6. An NA group ought never endorse, finance, or lend the NA name to any related facility or outside enterprise, lest problems of money, property, or prestige divert us from our primary purpose.
7. Every NA group ought to be fully self-supporting, declining outside contributions.
8. Narcotics Anonymous should remain forever nonprofessional, but our service centers may employ special workers.
9. NA, as such, ought never be organized, but we may create service boards or committees directly responsible to those they serve.
10. Narcotics Anonymous has no opinion on outside issues; hence the NA name ought never be drawn into public controversy.
11. 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.
12. Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.