



Adult Children of Alcoholics®/Dysfunctional Families  
World Service Organization, Inc.

## Niños adultos para Hospitales e Instituciones (H&I) Pautas para las reuniones

### Propósito primario

El propósito principal de llevar las reuniones a las instituciones es llevar el mensaje de ACA a aquellos que de otra manera no pueden abandonar las instalaciones para asistir a las reuniones de ACA.

Llevar el mensaje de ACA a hospitales e instituciones requiere que transmitamos un mensaje claro de ACA acerca de los pasos de la ACA, la asistencia a las reuniones, el patrocinio y la sobriedad emocional. Proporcionamos publicaciones de ACA a los asistentes a las reuniones y al personal de la institución, y hacemos que la información de las reuniones esté disponible y sea accesible.

### Introduction

The disease of family dysfunction is a progressive disease. Because of this, some adult children seek help in a treatment setting or psychiatric hospital. Other adult children are sentenced to prison for crimes they have committed while acting out with addiction or codependency. These adult children often form an ACA meeting in their facility and ask for outside support.

Hospitals and Institutions meetings are ACA meetings held in a treatment center, jail, prison or other facility that houses adult children. While there is ACA involvement, there is no affiliation between ACA and the facility. Many members carry the ACA message into these facilities as part of their service work and personal program of recovery. Many ACA members began their program in one of these facilities.

ACA members from the outside attend these meetings, carrying the message to the adult child wherever and whenever they are asked. Adult children in these facilities are grateful for the outside support. Many attend ACA meetings once they are released. They become group members, carrying the message of hope that was carried to them.

Adult Children of Alcoholics®/Dysfunctional Families World Service Organization, Inc.

[www.adultchildren.org](http://www.adultchildren.org) | [information@acawso.com](mailto:information@acawso.com) | +1(310) 534-1815

ACA WSO Literature Distribution Center | +1(562) 595-7831

### Why Are H&I Meetings Necessary?

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The purpose of an ACA H&I meeting is to carry the message of ACA recovery to adult children who, by virtue of their presence in a hospital, institution, or prison, cannot attend other ACA meetings.

## **What Qualifies as an H&I Meeting?**

The following qualities are shared by all ACA H&I Meetings:

- The meeting is not an ACA group, but a service provided by an area's H&I subcommittee of an Intergroup, or where there are no Intergroups, the group's H&I committee.
- The H&I meeting takes place in facilities where adult children do not have access to other ACA meetings.
- Due to the institution's rules, the meeting must be closed to outside participation by ACA members other than the ACA meeting leaders or chairpersons.

## **What an H&I Meeting is *Not***

An H&I meeting is not fully self-supporting or free of restrictions. The rules of the institution must be adhered to. An H&I meeting is not an open meeting; even former residents of the institution may not return to these meetings unless they have become members of the H&I committee that takes the meetings in and has prior approval by the institution's staff. The H&I meeting is not registered with the WSO because it is not open and does not collect 7th Tradition donations. The H&I meeting does not send a representative to the Intergroup, Region, or to ABC meetings.

If you are confused about whether or not a meeting qualifies as an H&I meeting, please contact your H&I subcommittee, Intergroup, or ACA WSO.

## **H&I Panels**

An H&I panel could consist of a one-time visit to a facility. The panel would consist of two or three ACA members who are willing to share their ACA story, and through that tell some of the hope and solutions they have found, and the tools they have used. There could be handouts of the "25 Questions" trifold, as well as the "ACA Essentials" trifold – two of the most powerful tools we have. This would be followed with a question and answer period.

## **H&I Meeting Recommendations**

It is recommended that ACA members carrying the message into one of these facilities have a clear understanding of the ACA program. The suggestions for how to share or talk in an ACA meeting apply here as well. We identify as an adult child and explain our recovery and the ACA program with clarity and honesty. Please read the ACA Fellowship Text segment on sharing in an ACA meeting.

We also abide by all facility rules and guidelines. We do not fraternize with or become romantically involved with adult children in these settings. We are there to carry the ACA message of recovery.

## **Coordinating an ACA Meeting**

Hospitals and Institutions meetings are usually coordinated by an ACA group or Intergroup. Occasionally groups and Intergroups also supply information about ACA to hospitals and prisons. At the group level, ACA members ask for volunteers to attend or help form an H&I meeting. ACA members attending an H&I meeting should be working an ACA program by attending meetings, remaining abstinent, and demonstrating emotional sobriety.

## **An Emphasis on Safety**

We must be aware of and adhere to the facilities' rules and regulations as they relate to our interaction with prospective residents.

Some facilities will require that a facility staff person be present at each meeting. We may also request that a staff member be present. Either way, we should be sure to have a designated facility contact to assist with meeting needs should any issues arise.

- For our own safety, we do not attend H&I facilities meetings alone. ACA meetings within H&I facilities should be attended by two ACA service members.
- We do not bring messages, correspondence or letters in or out of the facility.
- We avoid wearing flashy jewelry or bringing excessive cash into a facility.
- We never give money or gifts to any facility resident.
- We do not accept gifts from residents. Instead, we express our thanks in words.
- We do not give anyone within the facility our address or telephone number or that of another member.
- We do not discuss employment or living arrangements.
- We take special care in understanding and adhering to any regulations and restrictions the facility may have regarding adolescent residents of the facility.
- We do not provide transportation, jobs, housing, letters of reference, or other forms of assistance to residents within H&I facilities.
- Women should work with women, and men should work with men on Step work or other ACA recovery work.

## **When a Hospital or Institution Makes a Request**

Sometimes an institution will contact ACA asking for help to start a meeting there. This is a perfect opportunity for service, and an Intergroup, ACA group, or an H&I subcommittee can be instrumental in making this happen. The initial approach to starting a meeting in that facility should be made to the local Intergroup or H&I subcommittee lead. We do not act alone – it is important for issues of both safety and unity to use a coordinated effort to bring ACA meetings inside hospitals and institutions.

Before an ACA meeting takes place, a representative of an Intergroup or group interested in H&I service work should discuss with facility administration the proper procedures and expectations, putting any agreements in writing.

When meeting with hospital and institution staff, we bring ACA literature and discuss with our contact how ACA can benefit Adult Children within their population. We have the literature order form on hand and encourage the purchase of a supply of literature before the first meeting begins. If a facility is unable to purchase literature, the local group, Intergroup or WSO should be contacted for assistance.

## **How to Start an H&I Meeting**

The first thing we do is find out who the appropriate administrative person or counselor is to contact. The initial calls or letters should be addressed to that person. Following up by phone shortly after sending a letter is appropriate.

If the institution is interested in having ACA H&I meetings in their facility, we schedule a time to meet with the appropriate person to explain ACA, discuss the meetings, and make arrangements to start the H&I meeting. All final agreements, expectations, and procedures for both the ACA members and the institution should be put in writing.

When attending the initial meeting, we remember we are representing ACA. We should be courteous, neat in appearance, on time, and have some ACA literature on hand to show the staff. We can also give them the ACA website address and encourage the facility to order materials for their library or residents. Orientation sessions should be held for the H&I volunteers so they can be informed of the facility rules, be familiar with ACA policies and suggestions for sharing in H&I meetings, understand appropriate behaviors in the facility, and understand how to carry a clear ACA message.

Once the meetings are established, it is important to keep the lines of communication open so any potential problems can be discovered, discussed, and handled in a timely fashion.

Though we can provide ACA literature, there are other things we may be asked to do that we should not do, such as provide a sponsor, write letters for an individual in the facility, give money to a resident of the facility, or become romantically involved with someone in the facility. If asked to do something that is beyond the scope of an H&I committee, we inform the facility of the constraints of the H&I committee and if necessary, contact the WSO H&I committee person or any Board member. It is the responsibility of the H&I subcommittee to observe the ACA Twelve Traditions and the H&I structure to keep the relationship with the facility on track.

## **Appendix A: Sample Letters to Introduce ACA to a Facility**

Letters 1 and 2 can have the ACA Intergroup or group's address at the top. Then type the name of the person the letter is addressed to and the facility's address. The last paragraph of these letters gives room for the contact information of the person from the H&I who is to be contacted to set up the arrangements.

Letter 3 is a fill-in style letter. It can be copied, with the contact information written in as needed.

Letter 4 is more appropriate for treatment programs and mental health providers. It is simply a letter of introduction.

## SAMPLE LETTER 1

(Date)

ACA Intergroup  
ACA Intergroup Representative Name

Dana Doe  
Name of Facility  
Address  
City, State or Province  
Postal Code

Dear Ms. (Mr.) Doe:

This letter is to introduce you to the Adult Children of Alcoholics®/Dysfunctional Families (ACA) fellowship. ACA is an anonymous Twelve Step, Twelve Tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Through our attendance at meetings and reading our literature, we discover how our childhood affected us in the past and influences us in the present. We take positive action by practicing the Twelve Steps, focusing on the Solution, and accepting a loving Higher Power of our own understanding. We find freedom from the past and a way to improve our lives today.

One of our goals is to help the adult child of an alcoholic who still suffers and to bring meetings and information to those who do not have access to them. We want to share the experience, strength, and hope that our fellowship offers through its meetings.

Our Hospitals and Institutions subcommittee can bring presentations of ACA recovery to the persons in your facility. We offer our Fellowship Text, Twelve Step Workbook, and other literature, if you approve. You may also order this same literature online at [www.adultchildren.org](http://www.adultchildren.org).

To connect with an ACA member from a local ACA Intergroup to discuss a time to explain what we have to offer, please contact \_\_\_\_\_.

Sincerely,

\_\_\_\_\_  
ACA (group or Intergroup) H&I contact

SAMPLE LETTER 2

(Date)

ACA Intergroup  
ACA Intergroup Representative Name

Dana Doe  
Name of Facility  
Address  
City, State or Province  
Postal Code

Dear Ms. (Mr.) Doe:

This letter is to introduce you to the Adult Children of Alcoholics®/Dysfunctional Families (ACA) fellowship. ACA is an anonymous Twelve Step, Twelve Tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Through our attendance at meetings and reading our literature, we discover how our childhood affected us in the past and influences us in the present. We take positive action by practicing the Twelve Steps, focusing on the Solution, and accepting a loving Higher Power of our own understanding. We find freedom from the past and a way to improve our lives today.

We have a common purpose: to help the adult child who still suffers to lead a healthy productive life. Some who seek recovery from growing up in an alcoholic household are not able to attend meetings when they want to. They have limited contact with the shared experience that our fellowship offers through its meetings.

Our Hospitals and Institutions (H&I) subcommittee can bring presentations of ACA recovery to the residents in your facility. We offer our Fellowship Text, Twelve Step Workbook, and other literature, if you approve. You may also order this same literature online at [www.adultchildren.org](http://www.adultchildren.org). To connect with an ACA member from a local ACA Intergroup to discuss a time to explain what we have to offer, please contact \_\_\_\_\_.

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Sincerely,

\_\_\_\_\_  
ACA (group or Intergroup) H&I contact

## SAMPLE LETTER 3

(Date)

Dear \_\_\_\_\_

This letter is to introduce you to the Adult Children of Alcoholics®/Dysfunctional Families (ACA) fellowship. ACA is an anonymous Twelve Step, Twelve Tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Through our attendance at meetings and reading our literature, we discover how our childhood affected us in the past and influences us in the present. We take positive action by practicing the Twelve Steps, focusing on the Solution, and accepting a loving Higher Power of our own understanding. We find freedom from the past and a way to improve our lives today.

Our purpose is to help the adult child who still suffers to lead a healthy productive life. Some who seek recovery from growing up in an alcoholic household are not able to attend meetings when they want to. They have limited contact with the shared experience that our fellowship offers through its meetings.

Our Hospitals and Institutions (H&I) subcommittee can bring presentations of ACA recovery to the residents in your facility. We offer our Fellowship Text, Twelve Step Workbook, and other literature, if you approve. You may also order this same literature online at [www.adultchildren.org](http://www.adultchildren.org). To connect with an ACA member from a local ACA Intergroup to discuss a time to explain what we have to offer, please contact:

To connect with an ACA member from a local ACA Intergroup to discuss a time to explain what we have to offer, please contact:

\_\_\_\_\_  
(ACA contact name, phone, and/or email)

\_\_\_\_\_  
(ACA contact name, phone, and/or email)

\_\_\_\_\_  
(ACA contact name, phone, and/or email)

\_\_\_\_\_  
(ACA contact name, phone, and/or email)

Thank you for your consideration.

Sincerely,

\_\_\_\_\_  
ACA (group or Intergroup) H&I contact



SAMPLE LETTER 4

(Date)

Name of Facility

Address

City, State or Province

Postal Code

**Reference: Adult Children of Alcoholics or Otherwise Dysfunctional Families**

We are writing on behalf of Adult Children of Alcoholics®/Dysfunctional Families (ACA, also known as ACoA), because of your program's focus and the possible aid that ACA may give the people you work with and serve.

Founded in 1978, ACA is an independent Twelve Step, Twelve Tradition program of recovery for adults raised in alcoholic or otherwise dysfunctional families. For over 30 years, ACA has helped adults raised in dysfunctional families heal from their past and live responsibly as adults.

To familiarize you with the ACA program, allow us to highlight a few core ACA concepts and beliefs:

- ACA believes that children are infected with the disease of alcoholism or family dysfunction during their childhoods and that they recreate the effects in their adult lives. Children in these kinds of families acquire a model for external and internal addiction, which they act out in their adult lives.
- The impact of alcoholism or family dysfunction is multi-generational. A child who is exposed to traumatic childhood experiences presents a false self to the world to feel safe and buries the True Self to survive the terrorizing onslaught.
- As adults, when confronted with adult situations, they unconsciously regress to a stage in their childhoods. Thus, the ACA literature discusses such topics as alcoholism, external and internal addiction, generational dysfunction, PTSD, dissociation, dependency, codependency, grieving, depression, obsessive compulsion, behavioral addiction, incest, molestation and regression as some of the consequences of being raised in a alcoholic or otherwise dysfunctional family.

The only requirement for ACA membership is the individual's desire to recover from the effects of being raised in an alcoholic or otherwise dysfunctional family. ACA members take responsibility for their lives and do not blame their circumstances on their caregivers or childhood experiences. ACA suggests to its members that they read ACA literature, attend ACA meetings and practice ACA's Twelve Steps and Twelve Traditions. ACA members learn to reparent themselves with gentleness, humor, love and respect. ACA members aim to achieve wholeness and have an awakening of their spirit. ACA does not align itself with any religions, programs, or philosophies, and does not accept any outside donations.

You may view and download our free literature on our website at [www.adultchildren.org](http://www.adultchildren.org), including "ACA Is...", an introductory tri-fold. You are invited to copy and disseminate this to your colleagues and clients as you deem appropriate. Additional ACA literature may also be purchased from our shopping cart at <https://shop.adultchildren.org>. "ACA Is..." and the Twelve Step Workbook are also available in Spanish.

We hope this information is useful to you, your colleagues, and those you serve. Thank you for your time.

Sincerely,

Hospitals and Institutions Committee of \_\_\_\_\_



# The Twelve Concepts of ACA

## Concept I

The final responsibility and the ultimate authority for ACA World Services should always reside in the collective conscience of our whole fellowship.

## Concept II

Authority for the active maintenance of our world services is hereby delegated to the actual voice, the effective conscience for our whole fellowship.

## Concept III

As a means of creating and maintaining a clearly defined working relationship between the ACA meetings, the ACA WSO Board of Trustees, and its staff and committees, and thus ensuring their effective leadership, it is herein suggested that we endow each of these elements of service with the traditional Right of Decision.<sup>1</sup>

## Concept IV

Throughout our structure, we maintain at all responsible levels a traditional Right of Participation.

## Concept V

Throughout our structure, a Right of Petition prevails, thus assuring us that minority opinion will be heard and that petitions for the redress of grievances will be carefully considered.

## Concept VI

On behalf of ACA as a whole, our Annual Business Conference has the principal responsibility for the maintenance of our world services, and it traditionally has the final decision respecting large matters of general policy and finance. But the Annual Business Conference also recognizes that the chief initiative and the active responsibility in most of these matters would be exercised primarily by the Trustee members of the World Service Organization when they act among themselves as the World Service Organization of Adult Children of Alcoholics.

## Concept VII

The Annual Business Conference recognizes that the Articles of Incorporation and the Bylaws of the Adult Children of Alcoholics World Service Organization are legal instruments: that the Trustees are thereby fully empowered to manage and conduct all of the world service affairs of Adult Children of Alcoholics. It is further understood that our World Service Organization relies upon the force of tradition and the power of the ACA purse for its final effectiveness.

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<sup>1</sup> *The right of decision as defined herein refers to:*

- *the right and responsibility of each trusted servant to speak and vote his/her own conscience, in the absence of any contrary mandate, on any issue regardless of the level of service;*
- *the 12 Steps, 12 Traditions, and the Commitment to Service will be followed by trusted servants in decision making;*
- *delegates to the Annual Business Conference are trusted servants and therefore equally guided by the 12 Steps, 12 Traditions, 12 Concepts, and the Commitment to Service;*
- *standard practice that decisions made by subcommittees are subject to the authority of the service body which creates its mission and defines its parameters.*

### **Concept VIII**

The Trustees of the World Service Organization act in this primary capacity: with respect to the larger matters of over-all policy and finance, they are the principal planners and administrators. They and their primary committees directly manage these affairs.

### **Concept IX**

Good service leaders, together with sound and appropriate methods of choosing them, are, at all levels, indispensable for our future functioning and safety. The primary world service leadership must necessarily be assumed by the Trustees of the Adult Children of Alcoholics World Service Organization.

### **Concept X**

Every service responsibility should be matched by an equal service authority – the scope of such authority to be always well defined whether by tradition, by resolution, by specific job description, or by the Operating Policy and Procedures Manual and bylaws.

### **Concept XI**

While the Trustees hold final responsibility for ACA's World Service administration, they should always have the assistance of the best possible standing committees, corporate trustees, executives, staffs, and consultants. Therefore the composition of these underlying committees and service boards, the personal qualifications of their members, the manner of their induction into service, the systems of their rotation, the way in which they are related to each other, the special rights and duties of our executives, staffs and consultants, together with a proper basis for the financial compensation of these special workers, will always be matters for serious care and concern.

### **Concept XII**

In all its proceedings, Adult Children of Alcoholics World Service Organization shall observe the spirit of the ACA Twelve Traditions, taking great care that the conference never becomes the seat of perilous wealth or power; that sufficient operating funds, plus an ample reserve, be its prudent financial principle; that none of the Conference members shall ever be placed in a position of unqualified authority over any of the others; that all important decisions be reached by discussion vote and whenever possible, by substantial unanimity; that no WSO action ever be personally punitive or an incitement to public controversy; that though the WSO may act for the service of Adult Children of Alcoholics, it shall never perform any acts of government; and that, like the fellowship of Adult Children of Alcoholics which it serves, the WSO itself will always remain democratic in thought and action.