

CONNECTIONS: A GUIDE TO GIVING AND RECEIVING SUPPORT IN ACA RECOVERY

(Working Title)

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Discussion



DRAFT EXCERPT

A Note to ACA Members:

This is an excerpt of a draft being written by the ACA "Sponsorship subcommittee" to address different forms of support beyond the terms "sponsor" and "fellow traveler," which are used, sometimes confusingly, in *Adult Children of Alcoholics/Dysfunctional Families* (The Big Red Book or BRB). Our goal is not to find sponsors or other support for members, but to show the variety of ways we can give and receive support. We welcome the response of the membership to the work we are doing. What follows is an explanation of certain terminology and a discussion of the range of different ways to support each other.

We include the full table of contents at the end of this excerpt so that you can see the specific topics we address. We hope you will find the materials helpful and would appreciate your assistance in filling out a survey, which we will separately post.

A Note on Terminology Relating to Support Relationships

The terms "Sponsor," "Sponsee," "Co-sponsor," "Fellow Traveler," "Mentor," "Recovery Partner," "Recovery Friend," and others are commonly used in ACA. We use the words the "Supporter" and the "Supported" or the "Supported person," recognizing that these roles may shift back and forth in a support relationship. We recognize that the BRB states that one should "get a sponsor." We don't exclusively use the word "Sponsor" because it describes only one type of support relationship. This guide offers different support relationships as helpful in recovery.

Our purpose is to acknowledge that when one person in ACA works on recovery with another, there is a range of possible relationships. Although we may not share the same level of Experience, Strength and Hope (ESH) in the program, we are all on equal footing as

humans with fundamental worth and deserving of respect, regardless of what relationship we choose to work our program.

The nature of the relationship may evolve as we change and grow in our program. ACA does not offer any one “right” relationship for all people at all times. Also, regardless of the terms used, the benefits, commitments, and problems that may arise are common. The book is organized to discuss the features of working together that are common to those both seeking and offering support. It also contains sections directed specifically to either the person seeking support or to the person offering support.

In the Big Red Book, the term “fellow traveler” is sometimes used as a synonym for the term sponsor and refers to a peer-to-peer sponsorship relationship. In practice, the term fellow traveler has taken on additional meanings beyond how it is described in the Big Red Book.

Some Adult Children use the term “fellow traveler” to refer to anyone on the ACA path or in their ACA group(s) or support network. Others use it to refer to a co-sponsor. More rarely, it is used to refer to a sponsor or sponsee.

In this guide, we focus less on “sponsor” as a noun and more as a verb. To sponsor someone is to provide support for another person’s recovery as well as one’s own. To be sponsored is to receive support from another person to work the ACA program, which also contributes to the person offering support.

1. Range of Ways of Working with Others in Recovery

The ACA program has embraced a wide range of supportive relationships with people at different recovery levels. These help us go through the step work and laundry lists, reparent our inner child, and explore feelings and progress in our ACA recovery. As we grow in our program, the nature of the relationships may change. We may not be of equal ESH with another, but we are all on equal footing—human beings deserving of respect. We can learn from those with more ESH and also from those who are newer than ourselves. As our ESH grows, we watch for any tendency to become an authority figure.

Having a range of relationships to choose from allows us to work our program as our inner loving parent - with gentleness, humor, love, and respect.

The only requirement to attend ACA is the desire to recover from a dysfunctional upbringing. Some ACAs will choose not to use one-on-one support. In those cases, they are still encouraged not to do this program alone and to find the support they need to recover and break isolation.

A) Working One-on-One with Someone with More ACA Experience

In this approach, one person shares their ESH with someone less experienced. People with more experience can offer support to work through survival traits. They have healed, integrated, or released some of theirs. This method is different from sponsorship in some other 12-step programs in that it is supportive rather than directive.

Both the more experienced and the less experienced members can grow in trust and intimacy as the relationship develops. The more experienced member is someone who regularly attends ACA meetings, has ideally worked all of the ACA Twelve Steps, actively practices reparenting, and has their own one-on-one support person. The person has made progress in recovering from the effects of growing up in a dysfunctional home and understands the sequence of recovery through direct experience.

The experienced member shares their spiritual program of recovery and guides the newcomer who is building their own foundation for recovery through the Twelve Steps of ACA. The experienced member understands the effects of being raised in a dysfunctional family, and the importance of resolving stored grief and reparenting oneself through the ACA Steps. These experienced members are not therapists or counselors, but they can offer needed support to another person revisiting abuse, trauma, and other overwhelming childhood experiences.

Various terms apply to this type of relationship, such as Sponsor, Fellow Traveler or Recovery Partner.

B) Working one-on-one with Someone with Similar ACA Experience

In this approach, two ACA members with similar program time and experience support each other's continued recovery. This model works well for ACA members having significant time and experience in the program because they will have worked through some of their distorted thinking and will be familiar with program literature and principles. This can also work for two relative newcomers. Both of these relationships can be helpful in places where there aren't many people with sufficient ESH to guide or help newcomers. These relationships apply to two people working together through the Steps, the Laundry List Traits Workbook, reparenting, feeling work and other program literature.

Various terms apply to this type of relationship, such as Co-sponsor, Fellow Traveler or Recovery Partner.

C) Working one-on-one on a Temporary Basis with Someone with More ACA Experience

In this approach, a person with time and experience in the program serves as an interim support until longer-term support can be found. Some people work through parts of the Big Red Book or yellow Step Study book together. Others focus on helping the person learn and practice reparenting skills.

Various terms apply to this type of relationship, such as Mentor, Temporary Sponsor, Fellow Traveler or Recovery Partner.

All of these 1:1 relationships allow for growing trust and intimacy.

D) Working in a Closed Study Group (Steps, Traits, Reparenting, etc.)

Some ACAs join private groups that aren't registered as open ACA meetings to work the program. These groups often meet to complete a cycle of the Twelve Steps or other ACA workbooks. These members provide each other with indirect support. Members seek answers together, collectively discovering how to set boundaries, release family roles, what it means to 'become an inner loving parent.' Working in a closed group allows members to

notice family roles and dysfunctional family dynamics in a supportive atmosphere.

Closed groups can benefit ACAs who work with a support person one-on-one; as well. Some ACAs choose to work primarily in private groups; others work in closed groups and meet one-on-one with other adult children regularly. The ACA program offers choice; and encourages creativity; in how members avail themselves of support.

E) Long Distance Support

Working by Skype, internet, or telephone is another way to work with a support person. This can work well where distance or circumstances (like few or no local ACA meetings) prevent in-person contact. Members can use mail, e-mail, telephone, and video conferencing services to do extensive Step (and other) work with a long-distance support. In these situations, members often participate in ACA meetings online or by phone in addition to their one-on-one work.

F) Working with a “Mentor”

A mentoring program is designed to provide one-to-one support to newcomers in their first six weeks in ACA and introduces them to the program.

A mentor aspires to

- Establish a connection with a newcomer
- Answer questions
- Share their story of family alcoholism or dysfunction
- Provide information about the ACA program, recovery, and service
- Provide their contact information and a meeting phone list
- Explain the ACA steps
- Explain the various tools and approaches to ACA recovery
- Share the processes and tools they have used in ACA recovery
- Introduce the Newcomer to the Service Structure of ACA and encourage the newcomer's involvement once they're ready
- Participate with the Newcomer in ACA events, and opportunities to learn more.

Help the newcomer understand the different ways people get support in ACA, and look for and find more permanent support.

G) Recovery Buddies

Applies to people in ACA who have a more informal but supportive relationship, perhaps supporting one another by phone, meeting for coffee, finding ways to support fun and play, reading program literature together, or working together in Service. Various terms apply to this type of relationship, such as Fellow Traveler, Program friend, Recovery Partner.

H) Indirect Support

Attending ACA meetings and ACA workshops are a form of indirect support. Groups that emphasize the Twelve Steps, Twelve Traditions, program tools, service, and offer a well-stocked literature table with a phone list provide indirect support.

Social activities, for example coffee groups, lunch clubs, or other group social activities are another way we can practice our new-found recovery behaviors.

I.) Service Support. (TO COME)

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