



Have you heard the Good News?

# Good News



Est. 1948

Spring 2010

## Upcoming Spring Conference

Isn't it wonderful that we are back visiting the wonderful San Ramon for our 63rd Annual Spring Conference? The dates are March 12, 13, & 14 2010.

### Friday, March 12, 2010

2:00 PM Registration Opens

3:30 PM Early Bird Meeting

8:00 PM - Open Speaker Meeting - Jack G., Huntington Beach

### Saturday, March 13, 2010

9:30 AM General Service Speaker Meeting

11:00 A Host Committee Event

1:00 PM H & I Panel Meeting

3:30 PM Young People's Meeting - Dylan C., Berkeley

8:00 PM—Open Speaker Meeting

Sheri R., Fort Worth, Tx

10:00 PM Dance Following meeting

### Sunday, March 14, 2010

9:30 AM All A.A. Service Panel Meeting

11:00 AM Open Speaker Meeting—Marilyn H., Eugene, Oregon

There will also be A Raffle Saturday night and Marathon Meetings throughout the entire conference.

We have a contract with the Marriott San Ramon to get the entire facility at a significantly reduced charge for the weekend if we occupy a certain number of guestrooms. With the permission of the NCCAA Steering Committee, we will only list the Marriott San Ramon on our flyer. You always have the option of rooming elsewhere: but showing your support by staying at the host hotel will help NCCAA to provide an affordable weekend.

It would be best if you register at the hotel at **least 30** days in advance of the conference. You need to tell the registration person when you ca

as well as when you check in, that you are attending the NCCAA conference in order to obtain the special rate. The code when you register is NCANCAA. Room rates are :

\$99.00 Single

\$99.00 Double

Amenities: Pool, Jacuzzi, Exercise Room, full restaurant, (pet friendly facility)

**Marriott San Ramon**

**2600 Bishop Drive**

**San Ramon, Ca. 94583**

**800-228-9290**

**Online Registrations:**

<http://www.marriott.com/hotels/travel/OAKSR?groupCode=NCANCAA&app=resvlink&fromDate=3/12/10&toDate=3/21/10>

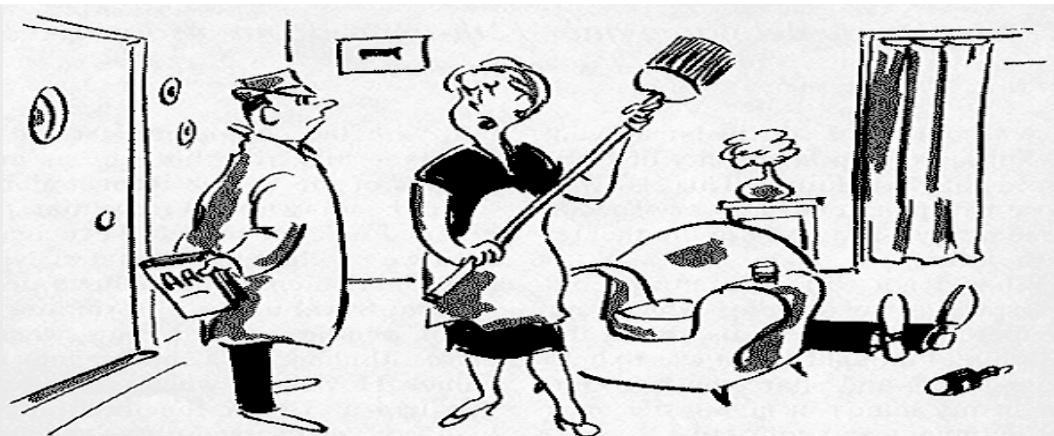
Or San Ramon Marriott

Have you visited your Web Site yet?

<http://www.nccaa.org>

You'll find:

- The History of NCCAA—Our Purpose, Structure, & Function"
- Past Issues of the "Good News"
- A list of upcoming Speakers
- Flyers
- Future & Past Programs
- Information on our Archivist
- Guidelines for Hosting a Conference
- A Link to AA General Service
- And More



"I don't know about spiritual awakenings but he's about to have a rude awakening!"

## Why Study A.A. History?

This article is written by nationally recognized historian and oft-quoted

Alcoholics Anonymous archivist Mitchell K.

Why study, or for that matter, even discuss the history of Alcoholics Anonymous? What difference would it make? How could it affect how we live and work our own individual recovery? Who cares?

In a quote attributed to Carl Sandburg, he summed it up when he wrote; "Whenever a civilization or society declines (or perishes) there is always one condition present - they forgot where they came from."

This quote, often used by Frank M., Archivist for AA General Services gives a warning to present and future generations of AA members to "Keep It Green."

The Washingtonians, The Oxford Group and others forgot where they came from. They watered-down and made changes to their respective movements which eventually led to their demise. AA members could take notice and begin to learn their roots. The history of AA can be both educational and fascinating and help in making the recovery process a fruitful one.

Bill W. stated in 1940 that of those entering AA, 50 percent never drank again. 25 percent remained sober throughout their lives after experiencing some early difficulties and the remaining 25 percent could not be accounted for. Bill stated that 75 percent of AA members back then got well - they recovered.

Group records indicate that in Cleveland, Ohio there was a 93 percent success rate for recovery in the early 1940's. Could these astounding figures be attributed to the fact that only low-bottom alcoholics came into AA? Could they be attributed to the lack of multiple addictions? We think not.

Early records indicate that though a great number of early members were considered as low-bottom, there were many who entered AA before losing everything. Both Dr. Bob and Bill had difficulties with drugs other than alcohol. Bill struggled with these problems until his death in 1971.

Why did they stay sober?

The original members of AA, between 1935 and 1939 went to only one meeting per week, and that meeting wasn't an AA meeting - they were Oxford Group meetings. They got well and they recovered. Why?

There was no 90-in-90 back then. It is not even mentioned in the first 164 pages of the Big Book. There were no conventions, retreats or treatment centers as we know them today. There weren't even the 12 Steps until 1938. Why did they stay sober, on a continuous basis until their deaths?

People in AA state that it takes time to get through the Steps.

. "A Step a year," some even say. This writer has even heard some in AA say that after two years in the Program, they are still working on Step One, or Two or Three.

For those who are in that position, or listening to those who state that it can take up to 12 months, or longer, to go through the Steps, I urge you to read from the last paragraph on page 290 through the end of the first paragraph on page 293 in the Big Book. After reading these important pages, ask yourself why it was suggested that you take your time, remaining in the problem and not fully celebrating the solution?

The Big Book of Alcoholics Anonymous and the way of life described within its pages is probably the most sane way of living possible. It promises a changed life, removal of obsession, removal of fear and being "rocketed into a fourth dimension of existence of which we have not even dreamed."

No daily meetings

Were these people who wrote the book long-term members of AA? Did they have decades of recovery behind them which gave them the wisdom to write such a "prescription for a miracle?"

The longest term of sobriety for those who wrote this book was just over four years. The average was about eighteen months. All were relative newcomers, those who wrote and described what this writer and many others describe as the greatest spiritual movement of the 20th Century.

They didn't have the benefit of daily meetings, many didn't have telephones and there were no 28-day treatment centers. What they did have was a program of recovery and determination to do whatever it took to stop drinking forever.

The study of the history of AA will show you what it was that worked so many wonders which resulted in so many miracles. Learning about where AA came from and what they did will give you an idea of what they had. Remember, "If you have decided you want what we have and are willing to go to any lengths to get it..."

Strengthening the fellowship

It is this writer's hope and prayer that a continuing dialogue and forum be made available to study the history of AA. Hopefully, this continuing open discussion will not only serve to strengthen your personal recovery but also begin the serve to strengthen AA as a whole.

Revolving Door Recovery will eventually lead AA towards the fate of the Washingtonians and the Oxford Group. For the sake of the future generations of alcoholics and those addicted to other drugs, I pray that AA remain strong.

I invite any questions, answers and even debates from those on the Internet. Let us together delve into the history of AA and share our experience, strength and hope with each other so that we can stay sober and help others to recover.

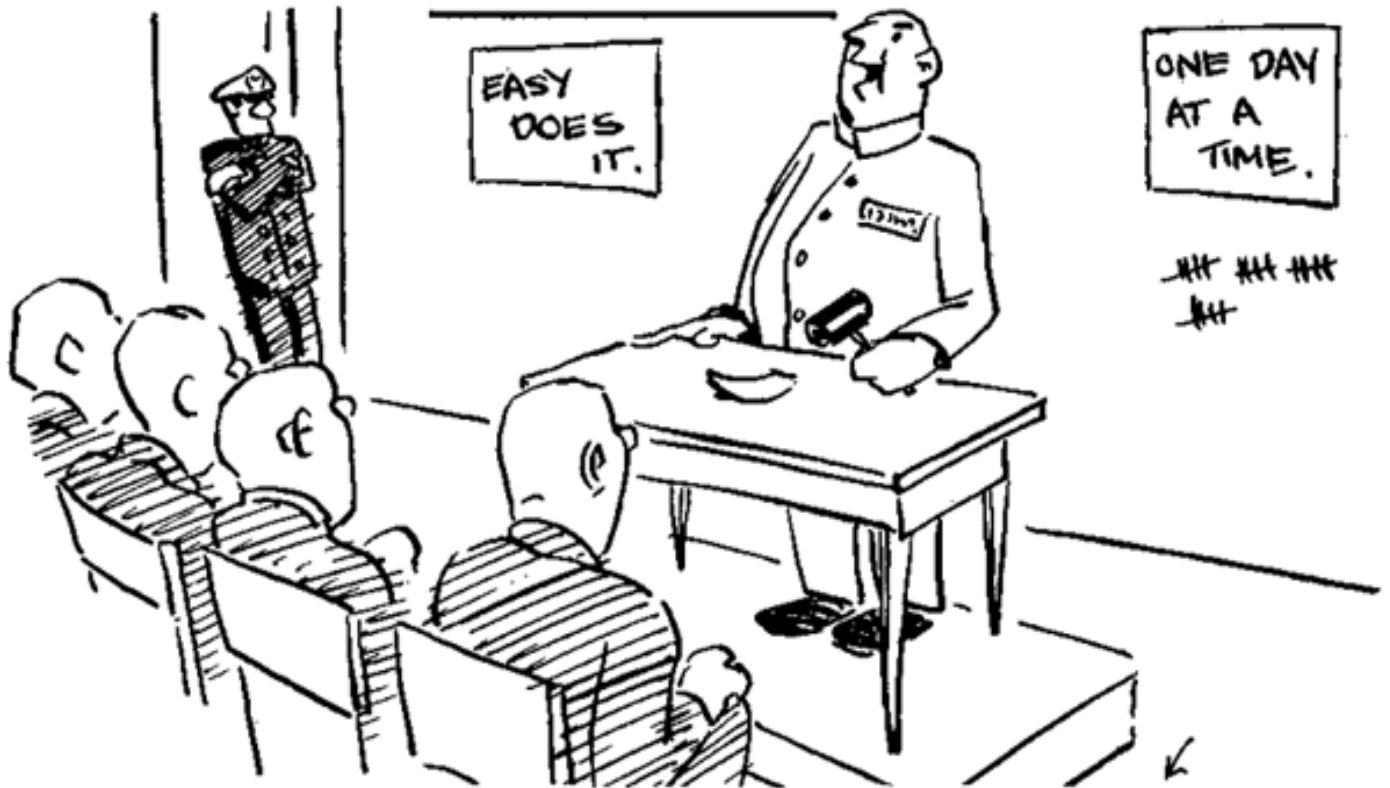
Mitchell K. - [the\\_archivist@excite.com](mailto:the_archivist@excite.com)

## Hospitals And Institutions

### New service position for Diane Olsen, former NCCAA chairperson

Diane Olsen, former NCCA chairperson has been appointed to the General Service Board of trustees Corrections Committee. She will be flying back to New York to join the rest of the committee where their first point of business will be to work on the pamphlet, "It sure beats sitting in a cell".

This is another in a long string of service commitments for Diane including being a delegate to New York in 1985 & 1986, NCCA Chair from 1993—1996, Intergroup Chair, All Groups Chair, Coastal Secretary for NCCAA, Chairman of the Finance committee for Northern California H&I, PI work for H&I, serves at the area level as the treasurer for H&I, 10 years active General Service, secretary of GSR DCM, served on Central Service Board, just to name a few.



*"My number is 7895641, and I am an alcoholic!"*

### Humility

On his desk, DR Bob had a Plaque defining humility:

"Perpetual quietness of heart. It is to have no trouble. It is never to be fretted or vexed, irritable or sore: to wonder at nothing that is done to me, to feel nothing done against me. It is to be at rest when nobody praises me, and when I am blamed or despised, it is to have a blessed home in myself where I can go in and shut the door and kneel to my Father in secret and be at peace, as in a deep sea of calmness, when all around and about is seeming trouble."

293 CENTRAL PARK WEST -MEDICAL RECORD MARCH 17, 1937

Alcoholism is considered by many physicians a chronic condition that gradually unfolds itself to a dismal end. They feel that it is a state of mind and advise these patients that it is up to them to discontinue their accustomed drug, which it is assumed they can do by merely making up their minds to do so. Proper attention is not given to the psychological problem as well as the physical condition of these people.

Partly as a result, the economic and social importance of alcoholism is astounding, and only those in close touch with this phase of medicine realize that the situation is a direct challenge to the physician, worthy of his best efforts. It is rendered more acute by the invasion of public bars by women and young girls, the vicious institution of the "cocktail hour" and the "new freedom" that have resulted from general demoralization during the post-war era. The subject now, concerns both sexes and all ages to a degree never before experienced, and its importance will not be fully realized until the present generation has reached middle life.

A heavy responsibility, therefore, rests upon the physician. No other condition has attained such general and widespread proportions. No other disease entails such far-reaching suffering and disaster to families and friends, nor is there any other with which the physician has been less able to cope with reasonable assurance of at least minimizing its ravages. The reason for this lies not only in the influences we have noted already, but in the fact that heretofore alcoholism has been considered a vice within the control of the relatively few individuals concerned and not as a disease entity in its more subtle and damaging aspects; and all that has been expected of the physician has been the administration of sedatives, purges and emetics to control acute stages.

It is our purpose to show that there is a type of alcoholism characterized by a definite symptomatology and a fixed diagnosis indicative of a constant and specific pathology; in short, that true alcoholism is a manifestation of allergy. If the arguments adduced appear to upset traditional ideas on the subject, it is because the major points of diagnostic importance as well as the fundamental basis of the physical and mental alterations that occur in the victims, have not heretofore been correlated or analyzed with the same interest that attaches to other conditions that are no more serious but elicit more sympathy. As the result of observations of numerous cases at Towns Hospital, New York City, over a period of years, clinical constants have been derived and data have been accumulated which indicate that the subject must be considered from the constitutional and serological point of view.

We may set it down as a fundamental proposition that alcoholism is not a habit. Second, drunkenness and alcoholism are not synonymous. Intoxication with alcohol, as commonly observed, is a purely superficial manifestation of no diagnostic importance whatever in itself; nor is the desire to take a drink, which is common to many.

The majority of people who drink alcohol apparently do so with impunity. Prohibition revealed, among other things, how much people desire to use alcohol on all sorts of occasions, and that this desire, and intention, are not limited to chronic alcoholics. The judge, the senator, the preacher, all want their alcohol on occasion. The merchant or the broker closes transactions over a highball and frequently indulges several times daily for many years. The clubman and the society matron, the daily laborer, the high and the low alike may drink daily more or less liberally of any and all sorts of liquor during much of their life time. They may, and do, become intoxicated; but note that in the majority of such cases alcohol exhibits only the immediate effects of the drug, and recovery is prompt and uncomplicated. Copious elimination, with a cold pack on the head and a brisk shower bath on the "morning after" end the matter. Also note, for later comparison, that if, for any reason, this type of drinker decides to "swear off", he experiences no more physical or mental pang than accompanies the abandonment of any other habitual mode of living. There is no "problem", no struggle, no psychic complications to be met, nothing but the transient inconvenience of interruption in his usual customs. For one reason or another he has decided that the inducements to stop drinking are greater than those to continue it. He has had a one hundred percent change of mind and his will is one hundred percent free to act accordingly.

Such people drink from choice and not from necessity. They find in alcohol a pleasant stimulation, a relief from anxieties, an increased warmth of conviviality. It is not a dominant factor in their lives. They are normal people, mentally and physically, to all intents and purposes. We must keep in mind, also, the fact that the multitude of persons who exhibit misbehavior conduct through faulty upbringing or complexes, who are oppressed by a sense of humiliation or inferiority because of unfriendly or disapproving associates or because of some physical defect, and find that a few drinks enable them to consider themselves the equals of any or even superior to all others, are not to be classed as chronic alcoholics merely because they indulge in alcohol regularly. A change of environment, a new mental attitude, or the restoration of confidence in themselves may suffice to bring about a totally new policy on their part. The significant point is that under such circumstances, if they desire to stop drinking they can do it without a struggle. They have no need to lean upon anyone else or anything outside of themselves for support. Alcohol is not necessary for them.

Continued on pg 6.

# Sobriety Birthdays

Happy Birthday!

## Spring Birthdays



Bill K. 3/16/1977

Brian G. Mountain View, Ca. 4/17/1983

Bud A. Modesto, Ca. 4/9/1959

Carol H. Lodi, Ca. 5/19/1985

Cindy P. Manteca, Ca. 5/1/1994

Clinton N. Roseville, Ca. 5/7/2008

Eli M. San Jose, Ca. 5/22/2001

Janet V. Livermore, Ca. 4/31/1996

Jeffrey N. San Anselmo, Ca. 5/6/1988

Jeff L. San Jose, Ca. 5/27/2000

Jo M. Turlock, Ca. 3/15/2001

Joe P. Antelope, Ca. 4/6/2003

Kathleen C. Sunnyvale, Ca. 5/21/1998

Kathryn C. Roseville, Ca. 3/9/1990

Keith H. Guernville, Ca. 5/31/1993

Lisa T. Elk Grove, Ca. 3/18/1988

Marcia B. Hayward, Ca. 3/13/2007

Mary C. S. San Francisco, Ca. 4/1/1972

Miki S. Madera, Ca. 5/4/1996

Peter M. San Francisco, Ca. 5/1/1995

Robert B. Modesto, Ca. 5/6/1986

Ron J. San Jose, Ca. 3/19/1979

Terry F. North Highlands, Ca. 3/2/1994

Theresa A. Paradise, Ca. 4/1/1991

Tom P. Meadow Vista, Ca. 4/1/2005

Veronica S. Pacifica, Ca. 4/1/1991

William R. Woodland, Ca. 4/6/2006

## Winter Birthdays

Arthur B. San Francisco, Ca. 1/15/2002

Barb P. Red Bluff, Ca. 1/20

Brooks M. 2/6/1956

Carina H. Livermore, Ca. 12/2/1990

Clem T. Elk Grove, Ca. 1/15/1974

Dennis D. San Leandro, Ca. 1/17/2003

Diana F. Copperopolis, Ca. 1/24/1979

Gavin W. Sunnyvale, Ca. 1/13/2003

Gary S. Felton, Ca. 02/20/1990

Howard H. Carmichael, Ca. 12/14/1982

Jean R. Half Moon Bay, Ca. 1/5/1978

Lawrence M. Morgan Hill, Ca. 12/7/2005

Lisa V. Stockton, Ca. 2/1/2005

Michael B. Alameda, Ca. 1/22/1983

Pat G. Sacramento, Ca. 1/28/1988

Peggy B. Lodi, Ca. 2/4/1977

Raul F. Orange Cove, Ca. 2/4/2008

Richard M. San Leandro, Ca. 2/30/1994



Manifestation of an Allergy -Dr. Silkworth (continued from pg 4)

This, we believe, is a fair view of the general drinking public, and constitutes a familiar background against which to contrast a very different picture. These people are not true alcoholics, but they may become so; and it is from among them that the real alcoholics are derived.

Let us now contrast with this kind of drinker an entirely different type. He is, as we have noted, a development of the class we have just described, his history may be quite like that of the average. But sooner or later there comes a time when he manifests changes that place him in a classification characterized by symptoms that were entirely lacking before, and unequivocally set him apart from the average drinker. Whereas he formerly drank for pleasure, he now has to drink from necessity in order to keep going. He cannot take his liquor or leave it, as he used to do. Yet, even if he is more or less soaked with it all day, his mind at first functions fairly well, he transacts his business with fair efficiency and keeps up with his obligations to his associates and the community. But he discovers that a change has occurred in him. He finds that he has to have a drink in the morning. Then he finds, after a little more time, that his hand shakes; when he signs his name, for example. Later, irritability and lack of concentration supervene. He is not the man temperamentally that he used to be. In order to meet these changes and increasing symptoms, he is compelled to increase the amount he consumes, and a prolonged spree replaces a short intoxication.

Next Issue: PHYSICAL SYMPTOMS OF ALCOHOLISM, ALCOHOLISM A TRUE ALLERGIC STATE, & PHYSICAL AND PSYCHOLOGICAL TREATMENT from the same article.



Cartoon from AA Grapevine Volume 3 Issue 2 ([July 1946](#))

## Humility

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UPCOMING CONFERENCES

San Jose Summer Conference June 11, 12, 13 2010

Friday	8:00 PM	Diane C.	Sausalito, Ca.
Saturday	3:30 PM	Thia B.	Los Angeles, Ca.
Saturday	8:00 PM	Steve L.	Los Angeles, Ca.
Sunday	11:00 AM	Fernando S.	Concord, Ca.

Modesto Fall Conference October 8,9,10 2010

Friday	8:00 PM	(to be announced)	
Saturday	3:30 PM	Dominica	Sacramento, Ca.
Saturday	8:00 PM	Rosie T.	Lakewood
Sunday	11:00 AM	Paul W.	Los Angeles, Ca.

Foster City March 11, 12, 13, 2011

(Speakers to be announced)

Stockton June 10, 11, 12, 2011

(Speakers to be announced)

Santa Rosa October 28, 29, 30, 2011

(Speakers to be announced)

San Ramon March 16, 17, 18, 2012

(Speakers to be announced)

Sacramento October 4, 5, 6, 2012

(Speakers to Be Announced)

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