

Disability & Our Primary Purpose

In the last edition of AA News we read of the recommendations made by the 36th General Service Conference held in April of this year. Its theme was Our Primary Purpose and Committee Four was asked to “consider the needs of the disabled to participate fully in our service structure”. The committee responded with a predictably comprehensive answer to the question. However, I feel that, whilst there was nothing wrong with the question as such, it did nothing to address the far more pressing problem of disability at the basic level of stopping drinking and staying stopped - Our Primary Purpose, for without it the service structure would soon disappear.

The particular disability I have in mind is one that can not be seen by even the most caring, and yet it is almost certainly the most common physical disability with which we come into the rooms. It is probably the least appreciated and yet fraught with danger for the sufferer who may well be unaware of the extent of the problem. Deafness affects at least ten percent of the population [so almost every group has at least one deaf member] and whether one wants to say that someone has impaired hearing, is hard of hearing or just deaf, the result to a greater or lesser degree is the same. That person can not receive the AA message of experience, strength and hope in the same way as the member with unimpaired hearing. The sufferer is more or less excluded from one of the most basic privileges of our Fellowship.

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At a meeting the other day and almost at the end, a member who has been around a number of years shared very emotionally that she was having real problems with attendance at meetings because she could not hear most of what was said. She saw little point in coming if she could not understand the majority of people sharing and really came along just because she knew she needed to. We must thank God that she overcame her reticence to say something. Undoubtedly most of the people in that room had no idea of her disability and, now that they know, they might remember to take some regard of it. However, deafness is invisible and unfortunately easily forgotten. We need constant reminders that for many people the lifeline of AA is there only if we speak clearly and act appropriately.

What can we do to help fulfil Our Primary Purpose? First of all, we must reach out in a positive way, for it would be unrealistic to expect the newcomer to act as the lady in the paragraph above. It would clearly be impractical to have someone using sign language at every meeting and, in any case, the vast majority of people with impaired hearing have not been trained to understand it. Most of the people who use sign language are profoundly deaf from childhood, though that, of course, does not mean they are not alcoholics. They are, however, used to the problems of everyday communication.

Equally, the loop system installed in theatres and big conference halls is unlikely to be the answer to the average AA meeting, though large conventions could well use them. Moreover, for the loop to be of use anywhere you need a hearing aid capable of picking up the transmission

- and such hearing aids not only cost quite a lot of money, but carry a stigma not associated with any other disability. The deaf must pay handsomely for their hearing aid, and from time to time endure the patronising behaviour of those who think deafness akin to senility and stupidity. So it is little surprise that the sale of hearing aids is much lower than the potential. Many people who could well afford one will not wear one, though it has to be said that some can not.

Too often I hear at Regional and Intergroup Assemblies the same sober members repeat at every meeting that they can not hear what is being said, and I can not help wondering if some of those people might well be able to help themselves with a hearing aid. If the sober refuse to wear them, can we expect the newcomer to buy one when he is probably broke and anyway thinking of much bigger problems.

There are, however, simple things we can do at our meetings that would immeasurably improve the life of the hearing impaired. Some of the requirements are so obvious and simple that they should be part of every group's procedure: some of them require a little more planning

and forethought. Most of us lip-read to a certain extent even if we are unconscious of it, so try and have a good level of lighting and seat people so that they can see the speaker. The chairperson, on welcoming a visiting speaker to the meeting, could quietly remind him or her that there may be someone present who is hard of hearing and it would help therefore if they sit upright, speak clearly and resist putting a hand to their face. Basic rules, you might think, but watch the average speaker.

It might be sensible if occasionally the chairperson reminded the members that our own lack of awareness can be a problem to the hard of hearing. Every time a chair is scraped on the floor or a mug tipped over, the words of the speaker are lost to some of those present. Those of us who are unlucky enough to arrive late at a meeting or who need to leave the room could help by making as little noise as possible. Background noise is a real problem for the deaf - even those with hearing aids - so try and keep extractor fans and kettles switched off. If, after the meeting, you are chatting with somebody and the noise level means it is difficult to hear, try moving somewhere quieter: after all, the meeting after the meeting is often where the sobriety is to be found.

At conventions and many social gatherings there is often not only the wonderful and welcome background chatter of friends that must be coped with, but also totally unnecessary and unwanted background music. Why? Who travels half way across the country to a convention to listen to someone else's choice of recorded music? When I once asked about this the reply was "What background music?" We need to be aware of the problem before we can deal with it.

The Conference Committee made the valid point that "It is of vital importance for members with disabilities to make their needs known." That said, what all the sober members of our Fellowship must do if we are to help the disabled recover and participate in service is to be more aware. How often is the sober deaf person to say "Please speak up"? How often must the sober, partially sighted ask "Where is the sugar?" or "Are there steps here?", and can we really expect that of the newcomer? We say often enough that we want the hand of AA to be there. Do we, in our hearts, always mean it?

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