

## **SOUTHERN FOOTHILLS AREA OF NARCOTICS ANONYMOUS**

**November 19, 2006**

The regularly scheduled meeting of the SFANA opened at 4:00 p.m. Chairperson, A.J. R.. opened with the “We” version of the Serenity Prayer, followed by the Twelve Traditions read by Jeff O. and the Twelve Concepts read by Karen H.

Secretary Laura B. called the roll of Officers and Home Groups.

Jessica N.: Because the Carolina Region moved to South Carolina, we no longer pay sales tax, so from now on we will be paying 13% for our literature order and I need to know how much to pay. It was pointed out to me that everything we paid for, we were paying 21% for it. If I charged you 13% then I am not making back what was spent on this, but as an Area it is not right if we are taking money from anyone. So I need to know do I charge 13% which is what I was paying when I would order as far as home groups.

AJ R.: To replenish what we buy, 13% will cover it. 21% is going to be going over above what we need.

Karen H.: I make a motion that we pay 13% from here on out starting today.

AJ R.: That should be done in new business.

Karen H.: Then everyone will have to wait after the meeting is over to order their literature.

AJ R.: We can vote to suspend business. Motion on the floor to pay 13% - Passes.

### **OFFICERS PRESENT**

Co-Chair - A.J. R.

Secretary - Laura B.

Treasurer - Scott D.

Policy & Procedure - Pam O.

Literature Chair - Jessica N.

Alt. Literature Chair - Dana A.

RCM - Jeff B.

Activities Chair - Joe P.

H&I Chair - Rookie K.

Outreach - James Y.

PI Chair – Marsha

### **OFFICERS ABSENT**

Alt. Secretary - Ashley R

### **HOME GROUPS PRESENT**

Addicts R Us  
Agape  
Back to Basics  
Beaten Path  
Carry the Message  
Clean & Serene  
Courage to Change  
EZ Riders  
Found Freedom  
Just for Today  
Learning to Live

**HOME GROUPS ABSENT**

Never Too Late

**OPEN OFFICER POSITIONS**

Chair  
Alt. Treasurer  
Alt. RCM

Minutes were accepted for the month of October.

Secretary, Laura B. called for reports. (See attached.)

**OLD BUSINESS**

**Nomination:** James Y. - Outreach Chair - Passed

**Nomination:** Marsha B. - PI Chair - Passed

**Motion 10-2-06** - GSRs should attend P&P orientation- **Passed**

**Motion 10-4-06** - Revise P&P to have 4 persons sign checks - **Passed**

**Motion 10-5-06** - Add questions to SFANA resume - **Passed**

**OPEN FORUM**

AJ R.: The World Service committee is currently doing an update of the Basic Text. They want input from the entire fellowship. There is a Basic Text Review draft right now that any member of NA can get for free from the World Service Office. It is a draft of all the new stories, and new introduction. By February of next year they want all input back so they can begin to revise it and release an approval draft. I have this flier that is actually from the greater Charlotte Area. They are doing workshops on this. It is suggested to have workshops in your area. I don't know if this is something we can discuss if you want to try to do that. This has an address to go get that, personally to go on there and submit a request and they will mail it to you. This is something that is important for this area to have some input on.

Scott D.: I got a copy in the P.O. box about a month ago and the stories have all been updated and it is

fresh, it looks like it will be a good text, not that there would be a bad one.

AJ R.: In this Basic Text review, in the packet it has instructions on how to set up a workshop. It explains how to do it. We don't have a literature review committee in this area, I don't know if it is something that we could try to do. I just wanted to know what you guys thought about it, if it was something this area would be willing to do.

Karen H.: At Charlotte's campvention, they had a workshop. It was really good the way it went. They passed it around and read. When they were done with the stories, they wrote down the changes they wanted to be made. And that is going to be sent to World. I really enjoyed it and learned a lot. And they said that anything that we submitted would be reviewed and that is part of being a part of this program.

Jeff B.: When is the one in Charlotte?

AJ R.: The first and third Saturday of December, January and February.

James Y.: I make a motion from the floor that the literature committee put together a Basic Text workshop.

AJ R.: That will be voted on in new business.

Mike: I feel the need to bring this up. I feel very strongly about this, my home group feels strongly about this. We talked about this and feel that this has a serious affect on NA as a whole. It is a matter of one of our subcommittees had a presentation with an addict on prescribed methadone. With me being an ex-methadone patient, I have experience. With someone not even being clean, carrying the message to a facility, I couldn't even imagine being someone in the facility and having somebody obviously deliver the message high on methadone. Someone high on dope, giving the message of recovery blurs the message of NA and could possibly kill somebody. I suggested myself, my sponsor and members with experience, I don't know what to do to have it continue with the confusion of the sick and suffering addict, never having exposure to NA at all, have an individual on drugs carrying the message.

AJ R.: Let's see what anybody else has to say about it.

Joanne: I am on that subcommittee and I sat in on several meetings that this person was in on and was unaware. I could not tell he was. To me, he delivered a clear and concise message. I thought he did a good job.

Joe P.: I am in Mike's home group and I was there for that discussion when we had it. The way my home group feels about it is we would prefer that the committee handle it themselves. Not just that committee, but the PI committee, too. The way our home group feels about it is that any committee that is doing a presentation or has a panel with 4 other people especially those who aren't in NA, we want people that are 100% up there delivering the message that's the way my home group feels about it. If you are 90% or 95%, we don't want you up there giving the message. My home group, doesn't want you up there giving a message come from NA. We want you up there 100% giving a message for NA because you might be giving to a doctor or a lawyer or a drug counselor or somebody else that could actually tell if you are 5% off because you are under that medication. You might have just gone to the doctor to get a tooth pulled and took a pill for pain for tooth pull and that might be all you took that day. So we are not just talking about one person in particular. Our home group feels that anybody on any panel that is dealing with somebody

outside of NA, we feel that anybody that is on any kind of prescription that is possibly mind or mood altering, that you ought to remove yourself from that panel or that presentation until you are finished with that prescription. That is just the way my home group feels about it because we want that clear message delivered 100% every time. That's just the way my home group feels about it. We thought about making a motion to come in here and ask that ya our committee, anyone that is one prescription medication of any kind that is doing a panel or presentation remove themselves from that panel or presentation until they are off of that medication. But we would prefer that the committee handle it themselves. So that is why my home group asked Mike to come in here and bring it up in open forum and let the home groups discuss it. Hopefully the committees discuss it again, the PI committee and H&I committee will discuss it again amongst themselves and re-think this, and if not then yes, my home group will come back with a motion and put it out there for the home groups to vote on. The other home groups might agree with us, they might not agree with us, but we definitely would prefer that the committee take care of this themselves.

Lane H.: I talked to a couple of people about this when it first come up. The discussion I heard was that NA has no rules or regulations we can tell you what or what not to do in NA. We aren't going to start asking people "Are you on Prozac? On a PI committee on Prozac, on an H&I committee on Prozac or have you had a doctor prescribe you any type of pills?" What right do we have to ask each individual what is prescribed by their doctor? In the NA literature, it tells us what to do in times of illness, what to do with a prescription. And this individual is taking a prescription, prescribed by a physician for pain. He is not taking it to get high off of it. There are a lot of mind and mood altering chemicals out there being used in the rooms of Narcotics Anonymous. We have a Rules and Regulations that you have no right to tell me how to walk into the rooms, you tell me you have no right how to tell me how to attend a meeting. And if you serve on a subcommittee, you have no right to tell me how to go to that meeting. If you want to approach me about it and give me a suggestion, that is one thing, but to make up a rule or regulation goes directly against the readings of Narcotics Anonymous. That's from NA literature, not how I feel.

Yvonne F.: The World has a definite opinion on methadone, they do not have an opinion on anti-depressants. There opinion on the methadone is that it is a drug treatment drug, not a pain medication. 99% of the time, it is used to get off of other drugs and it is suggested that a person that is using methadone get on a different pain prescription plan, and it is also considered at the World level that if you are on methadone, you are using.

Amanda: I was a client at the Recovery Center when this individual shared and I heard a very clear and wonderful message from this guy. He did not seem at all messed up on anything. Methadone is a drug treatment medication, but it is also prescribed for pain. In our text, it does say that we can take our medication for pain when it is prescribed. In my opinion, I think that we should let him stay because he did a very good job.

James Y.: This is for anybody in the rooms that if you are thinking about using methadone. If you are using methadone, you are using. Methadone is liquid heroin. I don't know what other folks are telling you or where you are hearing this from, but using methadone is using. This was discovered many moons ago. If you are drinking that non-alcohol beer, you are using! Thanks.

Jeff B.: There is a methadone pill that is prescribed as a high chronic pain medication. I have my own personal feelings, I have been prescribed medication for chronic pain and didn't use it, I just hurt a lot. Like Lane said, we can not dictate what kind of pain medication someone uses. It is left up to that person. That person is responsible for what he does. There is a subcommittee and people around him that if he is not

giving a clear message, to go to him. I don't think there is anywhere in this program that says this body ought to dictate who is a member of any certain subcommittee. It is up to that subcommittee to deal with their own issues. I don't know what they would expect this body to do. Go to the guy and give him a suggestion. Anyone can serve on any subcommittee. Are you telling me that I can't serve as RCM because my doctor prescribes me vicodin for my pain and I take it? We don't dictate.

AJ R.: There are a lot of mixed feelings in here on this and I don't know if we are going to hear much different than what we have already heard, but let me just say this. The H&I subcommittee discussed it and decided to leave it alone, so the home groups can determine what the H&I guidelines are, if they want to. It will have to go back to the home groups, then. I guarantee we could discuss it for hours. It sounds like if anything will be done, it will have to come as a motion.

Scott D.: We have to be careful that we don't run anyone off. Our 3rd tradition states that the only requirement for membership is the desire to stop using. That is why these traditions were formulated.

AJ R.: I know everybody has something to say, but we are not accomplishing anything. I don't know what we can accomplish.

Karen H.: To come to a God conscious, everybody has to express what they feel and then continue to discuss it until a decision is reached. That is what a God conscious is. We could put in a motion and vote and be a democracy but Narcotics Anonymous is supposed to be about a God conscious. My personal feelings right now about what my Higher Power tells me is written in our literature. It is just like what Lane said. Our literature does not say that we have to do this or we have to do that and we are not allowed to do this or that to be a part of NA. I understand what you are saying about a newcomer going into a hospital or institution where the speaker is slurring their words, and I have sat in a meeting where the chair was f\*\*ed up. Three or four days later, he blew his brains out and I will always remember that. I will always remember that meeting but, to me, Lane just had surgery on his hand and was given a prescription for percocet. Now I can testify that Lane loved some damn percocet. If he had got that prescription filled and took those pills for the pain, is that using? This guy that we are talking about is taking prescription pill methadone that was prescribed for pain. So just because methadone was your drug of choice and your drug of choice, I never done no methadone but, I liked to take some damn xanax's if the doctor prescribed them, am I using?

Joe P.: My home group in no way was suggesting that the person be removed from the committee. We would like to see anyone that wants to serve on a committee, serve on a committee. We were just hoping that people would step down from the commitment of working on a panel or doing a presentation until they are off of a prescription medication that is possibly mind or mood altering. In fact, you all are talking about traditions, which our traditions tell us that they serve the area. Our committees take direction from the home groups. In other words, if each home group here told my activities committee that you all didn't like bowlarama and you didn't want us to have it anymore, guess what? We would have no bowlarama because you all told us not to if we like it or not because we take direction from you all. No matter what we think, if you all told us not to do it, we would not do it because we take direction from you all. Now, you all do let us be trusted servants, but you all let us cut our ideas and cut our guidelines and stuff, but if we do something that you all don't like, you all can tell us that you all don't like it and you don't want us to do it anymore. I mean, that is you all's option because we take direction from you all. But like I said, our home group does like to give the committees the opportunity to handle it themselves. We would prefer that because you all are trusted servants. Members of all committees are trusted servants. But if we see

something that could possibly hurt NA as a whole, then we feel like we need to bring it up. We prefer that the committees go back and discuss it between themselves, even if they have discussed it once, we prefer that they go back and discuss it again. They don't have to if they don't want to, but that is what my home group would like to see happen. But like I said, they don't have to if they don't want to, but that is what we would like to see happen. And we were in no way saying that this guy lost his clean time and that he is using if he is on prescription medication, we weren't insinuating that, either. It says in our literature that if you all are on prescription medication and taking it as prescribed, that is okay. We are not even insinuating that this guy is doing anything wrong. We are just saying that we don't believe that it is a good idea that you are on any possibly mind or mood altering medication that you serve on a panel or do a presentation to the public, that could influence or make NA possibly look bad. And I am not saying that this one person is doing it, I am saying that if you all 10 people in here and 10 thinks he is doing it good and 1 thinks he is doing it bad, there could be one person out there that he gave a presentation to that thought he did a bad job. Or say not even that person, but what if somebody comes a long two years from now and is on a PI panel and goes out there and does a presentation, gets a tooth pulled, takes a percocet an hour before he does his presentation and then goes in and starts slurring a few words and he is doing it to a group of professionals, then what are they going to think about NA? Are they going to tell people, ya you need to go to NA they will help you. No, they are probably going to say I don't know about that, the person giving the presentation was slurring their words and could hardly talk straight. So, that's the way my home group feels about it. Like I said, we are not saying that this guy did anything wrong, we aren't saying we want him off of the committee, we are just saying that we would like the committee to take a look at who is doing the presentations, and who serves on the panels. But we would like him to continue to be on the committee, we appreciate him being on the committee.

Mike: I didn't realize until I got off of methadone, how messed up I was. The fact is, is that it is a drug. When someone is carrying the message on methadone, it is sending the message that it is okay to get high in Narcotics Anonymous. If you are on prescription medication, it is all well and good, it is. But if you are on methadone, it is different. I can tell you that I was on methadone for years, and it wasn't until it was removed from my life that I knew what it did to me.

Charles: I think that what I am hearing is a boundary between medical aspects and the guidelines of NA. I think we need to make it clear about what this home group is pertaining to this person being on methadone and chairing on an H&I subcommittee. I myself believe that if a person is on methadone, I don't know anything about it. It does send a mixed message. Now me personally, I am on pain medication as prescribed by a doctor and I take it as prescribed. But when I was using, I never used pills. And now that I am taking them from a doctor for pain, I take them as prescribed, and no way in my spirit in my conscious do I feel like I am using. So I can't say if he needs to step down from the subcommittee.

AJ R.: This discussion is closed. You can over-rule me if you want, but we can't come to a God conscious in here. Our home groups have to do it.

### **NEW BUSINESS**

**Motion 11-1-06** - *Home Groups* - Change Area date in event of a holiday.

**Pro** - Pam O.: I don't want any more resentments on Father's Day.

**Con** - Ronnie: I call my birthday a holiday.

Jason W.: Responsibilities don't stop because of the holidays.

**Motion 11-2-06** - *Home Groups* - Literature should put together & host a Basic Text workshop.

**Concern:** Laura B.: Maybe we should look at the willingness of this area that is going into H&I and Outreach. We are looking to start up a whole new thing that is going to last for a couple of months and the area still has positions that need to be filled. Not that we shouldn't do this, but I think we need to take a look at the fact that there are other subcommittees that need support and we are asking for willingness to start a whole other thing.

AJ R.: It sounds like they can pretty much pick a date and time and just facilitate it. If it passes we will just pick a date at the next ASC as a group conscience.

**Suggestion:** That each subcommittee add to their policy "An addict serving on SFANA subcommittee abstain from sharing on a panel presentation or any form representing NA as a whole to the using or non-using public while on a prescribed narcotic.

Next Area business meeting will be December 17th, 2006 at 4:00p.m.

Agape

Back to Basics

Beaten Path

Carry the Message

Clean & Serene

Activities Chair

Treasurer and Literature Audit

3:00 p.m. next ASC date

**OPEN POSITIONS:**

Chair

Alternate Treasurer

Alternate RCM