

Membership Surveys Alcoholics Anonymous

Title of the pamphlets reflecting the results of A.A.'s Membership Surveys changed over the years.

Pamphlet Titles:

- ❖ "The Alcoholics Anonymous Survey"
- ❖ "Profile of An A.A. Meeting"
- ❖ "The A.A. Member"
- ❖ "Alcoholics Anonymous [YEAR] Membership Survey"

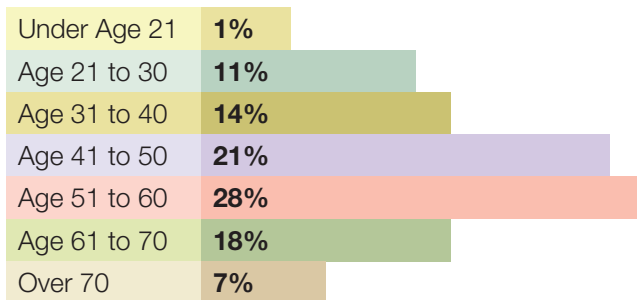
Survey Year	Year Pamphlet Printed (first printing)	Title
1968	1970	"The Alcoholics Anonymous Survey"
1971	1972	"Profile Of An A.A. Meeting"
1977	1978	"The A.A. Member"
1980	1981	"The A.A. Member"
1983	1984	"The A.A. Member"
1986	1987	"AA Membership Survey"
1989	1990	"Alcoholics Anonymous 1989 Membership Survey"
1992	1993	"Alcoholics Anonymous 1992 Membership Survey"
1996	1997	"Alcoholics Anonymous 1996 Membership Survey"
1998	1999	"Alcoholics Anonymous 1998 Membership Survey"
2001	2002	"Alcoholics Anonymous 2001 Membership Survey"
2004	2005	"Alcoholics Anonymous 2004 Membership Survey"
2007	2008	"Alcoholics Anonymous 2007 Membership Survey"
2011	2012	"Alcoholics Anonymous 2011 Membership Survey"
2014	2015	"Alcoholics Anonymous 2014 Membership Survey"

ALCOHOLICS ANONYMOUS

2014 MEMBERSHIP SURVEY

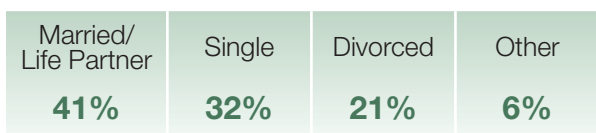


AGE OF MEMBERS



Average Age of Members is **50** Years.

MARITAL STATUS OF MEMBERS

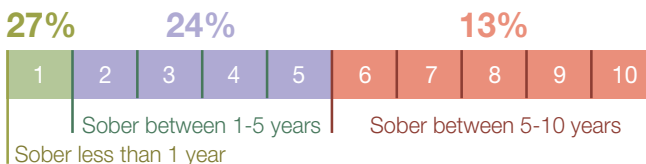


GROUP MEMBERSHIP



86% of the members belong to a home group.




LENGTH OF SOBRIETY (YEARS)



Members attend an average of **2.5 A.A. meetings** per week.

MEETING ATTENDANCE

INTRODUCTION TO A.A.*

Through an A.A. member		32%
Treatment facility		32%
Self-motivated		30%
Family		27%
Judicial System		12%
Counselor/Mental Health Professional		13%
Medical Professional		4%
Employer or fellow worker		4%
Non-A.A. friend or neighbor		3%
Correctional facility		2%
Al-Anon or Alateen member		2%
A.A. literature		2%
Newspaper/magazine/radio/TV		1%
Member of clergy		1%
Internet		1%
Other		6%



RELATIONSHIP WITH HEALTH CARE PROFESSIONALS

75% of members' doctors know they are in A.A.

57% of members said they were referred to A.A. by a counselor, medical or mental health professional.



The average length of members sobriety is almost ten years.

SPONSORSHIP

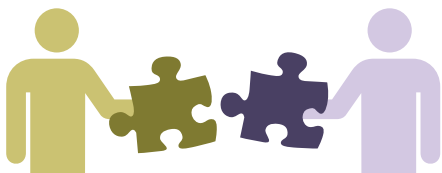
82% of members have a sponsor.

74% got a sponsor within 90 days.



* These numbers do not add up to 100% because respondents were allowed to select more than one.

ADDITIONAL HELP . . .



BEFORE coming to A.A., **59%** of the members received some type of treatment or counseling (such as medical, psychological, spiritual, etc.) related to their drinking.

74% of those members who received treatment or counseling said it played an important part in directing them to A.A.

AFTER coming to A.A., **58%** of the members received some type of treatment or counseling (such as medical, psychological, spiritual, etc.) related to their drinking.

84% of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

MEMBERS OCCUPATIONS

19%	Retired
11%	Other (including self-employed)
8%	Unemployed
10%	Manager / Administrator
9%	Professional / Technical
7%	Skilled trade
5%	Disabled (not working)
6%	Health professional
5%	Laborer
4%	Sales worker
4%	Educator
2%	Student
4%	Service worker
2%	Clerical worker
2%	Homemaker
1%	Transportation
1%	Craft worker

ABOUT A.A.

A.A. can be found almost everywhere, almost all the time – in more than 115,000 groups throughout the world. We welcome opportunities to cooperate with others who are providing help to alcoholics.

Look for A.A. in your phone book, newspaper or write to: Grand Central Station, Box 459, New York, NY 10163. General information is available on our Web site: www.aa.org

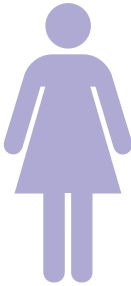
IN 2014 more than 6,000 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three to four years since 1968 by the General Service Office.

Alcoholics Anonymous conducts this survey to keep members informed on current trends in membership characteristics. The survey also provides information about A.A. to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

GENDER OF MEMBERS



62%
Men



38%
Women

COMPOSITION OF MEMBERSHIP

White	89%
Hispanic	3%
Black	4%
Native American	1%
Asian	1%
Other	2%



A.A. PREAMBLE[©]

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

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The contents of this pamphlet are available in a table-top display available from G.S.O. (M-13).

The display is 27 inches high and 39 inches wide, has a double easel in the back, and can be folded in half for storage.

To order, write: A.A. World Services Grand Central Station
Box 459, New York, NY 10163.

The pamphlet contents are also on G.S.O.'s A.A.Web site,
www.aa.org



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New York, N.Y. 10163

XXM - 6/19 (PAH)

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IN 2011 more than 8,000 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three to four years since 1968 by the General Service Office.

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GENDER OF MEMBERS



COMPOSITION OF MEMBERSHIP

White	87%
Hispanic	5%
Black	4%
Native American	2%
Asian	1%
Other	1%



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ALCOHOLICS ANONYMOUS

2011 MEMBERSHIP SURVEY

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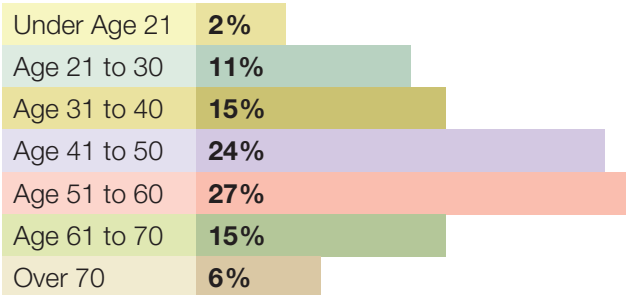
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AGE OF MEMBERS



Average Age of Members is **49** Years.

MARITAL STATUS OF MEMBERS

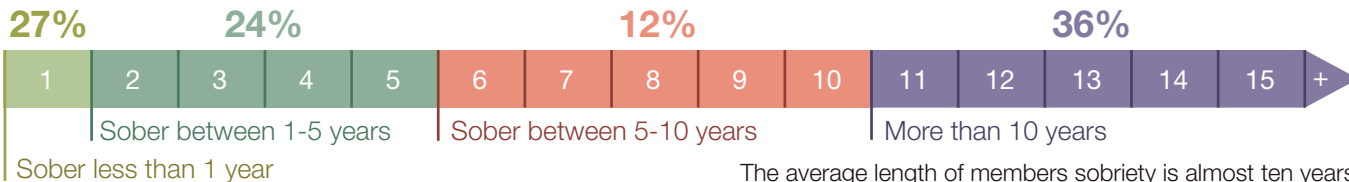
Married	Single	Divorced	Other
36%	34%	22%	8%

GROUP MEMBERSHIP



86% of the members belong to a home group.

LENGTH OF SOBRIETY (YEARS)



The average length of members sobriety is almost ten years.



MEETING ATTENDANCE

Members attend an average of **2.6 A.A. meetings** per week.

INTRODUCTION TO A.A.*

Through an A.A. member	34%
Treatment facility	32%
Self-motivated	29%
Family	25%
Court order	12%
Other	8%
Counseling agency	7%
Health Professional	7%
Employer or fellow worker	4%
Non-A.A. friend or neighbor	3%
Correctional facility	2%
Al-Anon or Alateen member	2%
A.A. literature	2%
Newspaper/magazine/radio/TV	1%
Member of clergy	1%
Internet	1%

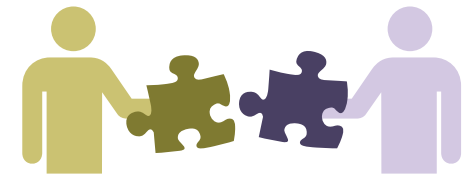


RELATIONSHIP WITH HEALTH CARE PROFESSIONALS

75% of members' doctors know they are in A.A.

40% of members said they were referred to A.A. by a health care professional

ADDITIONAL HELP . . .



BEFORE coming to A.A., **63%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc.

74% of those members who received treatment or counseling said it played an important part in directing them to A.A.

AFTER coming to A.A., **62%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc.

82% of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

MEMBERS OCCUPATIONS

17%	Retired
10%	Other (including self-employed)
10%	Unemployed
9%	Manager / Administrator
8%	Professional / Technical
8%	Skilled trade
6%	Disabled (not working)
6%	Health professional
5%	Laborer
5%	Sales worker
3%	Educator
3%	Student
3%	Service worker
2%	Clerical worker
2%	Homemaker
2%	Transportation
1%	Craft worker

* These numbers do not add up to 100% because respondents were allowed to select more than one.

ALCOHOLICS ANONYMOUS 2007 MEMBERSHIP SURVEY

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- A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes.
- Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

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50M - 7/08 (DG3)

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unity

ABOUT A.A.

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Look for A.A. in your phone book, newspaper or write to:
Grand Central Station,
Box 459, New York, NY 10163.
General information is available on our
Web site: www.aa.org

IN 2007 more than 8,000 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office.

Alcoholics Anonymous conducts this survey to keep members informed on current trends in membership characteristics. The survey also provides information about A.A. to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

AGES OF MEMBERS

Under age 21	2.3%
Age 21 through 30	11.3%
Age 31 through 40	16.5%
Age 41 through 50	28.5%
Age 51 through 60	23.8%
Age 61 through 70	12.3%
Over 70	5.3%

The average age of an A.A. member is **47** years.

COMPOSITION OF MEMBERSHIP

White	85.1%
Black	5.7%
Hispanic	4.8%
Native American	1.6%
Asian and other	2.8%

GENDER OF MEMBERS

Men	67%
Women	33%

MARITAL STATUS OF MEMBERS

Married	35%
Single	34%
Divorced	23%
Other	8%

LENGTH OF SOBRIETY

Sober more than 10 years	33%
Sober between 5-10 years	12%
Sober between 1-5 years	24%
Sober less than 1 year	31%

Average sobriety of members is more than **eight** years.

GROUP MEMBERSHIP

85% of the members belong to a home group.

INTRODUCTION TO A.A.

Factors most responsible for members coming to A.A. (two responses permitted—total responses may add up to more than 100%).

Through an A.A. member	33%
Treatment facility	33%
Self-motivated	31%
Family	24%
Court order	11%
Counseling agency	8%
Health Professional	7%
Employer or fellow worker	4%
Non-A.A. friend or neighbor	3%
Correctional facility	3%
Al-Anon or Alateen member	2%
A.A. literature	2%
Newspaper/magazine/radio/TV	1%
Member of clergy	1%
Internet	1%
Other	7%

SPONSORSHIP

79% of members have a sponsor.

73% got a sponsor within 90 days.

MEETING ATTENDANCE

Members attend an average of **2.4** A.A. meetings per week.

RELATIONSHIP WITH HEALTH CARE PROFESSIONALS

74% of members' doctors know they are in A.A.

39% of members said they were referred to A.A. by a health care professional.

ADDITIONAL HELP...BEFORE

Before coming to A.A., **63%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc.

74% of those members who received treatment or counseling said it played an important part in directing them to A.A.

ADDITIONAL HELP...AFTER

After coming to A.A., **63%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc.

86% of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

MEMBERS' OCCUPATIONS

Retired	16%
Self-employed/Other	11%
Manager/Administrator	10%
Professional/Technical	10%
Skilled Trade	8%
Unemployed	8%
Laborer	6%
Health professional	5%
Disabled (not working)	5%
Sales worker	4%
Student	4%
Service worker	3%
Educator	3%
Clerical Worker	2%
Homemaker	2%
Transportation (equip. oper.)	2%
Craft worker	1%

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ALCOHOLICS ANONYMOUS

ALCOHOLICS ANONYMOUS® is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

- The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions.
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50M - 6/05 (INTRA)

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2004 Membership Survey

About A.A.

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In 2004 more than 7,500 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office.

The purpose of the survey has been to keep A.A. members informed on current trends in membership characteristics, and to provide information about Alcoholics Anonymous to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

Ages of Members

Under age 21	1.5%
Age 21 through 30	7.9%
Age 31 through 40	18.2%
Age 41 through 50	33.0%
Age 51 through 60	23.1%
Age 61 through 70	11.5%
Over 70	4.8%

The average age of an A.A. member is 48 years.

Composition of Membership

White	89.1%
Black	3.2%
Hispanic	4.4%
Native American	1.8%
Asian and other	1.5%

Gender of Members

Women	35%
Men	65%

Marital Status of Members

Married	38%
Single	29%
Divorced	24%
Widowed	4%
Separated	5%

Length of Sobriety

Sober more than 10 years	36%
Sober between 5-10 years	14%
Sober between 1-5 years	24%
Sober less than 1 year	26%

Average sobriety of members is more than **eight** years.

Group Membership

86% of the members belong to a home group.

Introduction to A.A.

Factors most responsible for members coming to A.A. (two responses permitted—total responses may add up to more than 100%).

Through an A.A. member	31%
Treatment facility	31%
Self-motivated	30%
Family	23%
Court order	11%
Counseling agency	8%
Health Care provider	8%
Employer or fellow worker	5%
Non-A.A. friend or neighbor	4%
Al-Anon or Alateen member	2%
Correctional facility	2%
A.A. literature	1%
Newspaper/magazine/radio/TV	1%
Member of clergy	1%
Other	7%

Sponsorship

78% of members have a sponsor.

70% got a sponsor within 90 days.

Meeting Attendance

Members attend an average of **two** A.A. meetings per week.

Relationship with Health Care Professionals

77% of members' doctors know they are in A.A.

39% of members said they were referred to A.A. by a health care professional.

Additional Help...Before

Before coming to A.A., **64%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc.

74% of those members who received treatment or counseling said it played an important part in directing them to A.A.

Additional Help...After

After coming to A.A., **65%** of the members received some type of treatment or counseling such as medical, psychological, spiritual, etc.

84% of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Members' Occupations

Retired	14%
Self-employed/Other	11%
Manager/Administrator	10%
Professional/Technical	10%
Skilled Trade	9%
Laborer	6%
Health professional	6%
Sales worker	5%
Service worker	3%
Educator	3%
Clerical Worker	3%
Student	3%
Homemaker	2%
Transportation (equip. oper.)	2%
Craft worker	1%
Disabled (not working)	6%
Unemployed	6%

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Alcoholics Anonymous 2001 Membership Survey

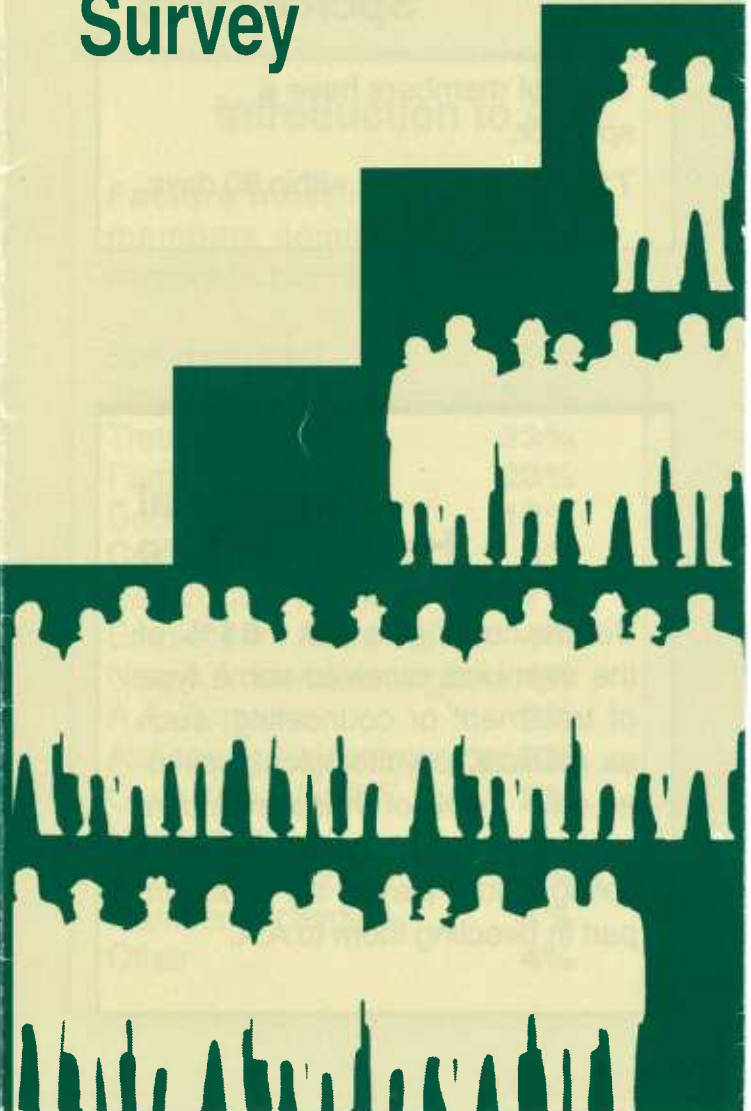
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Ages of Members

Under age 21	2%
Age 21 through 30	9%
Age 31 through 40	24%
Age 41 through 50	31%
Age 51 through 60	20%
Age 61 through 70	10%
Over 70	4%

The average age of an A.A. member is 46 years.

Gender of Members

33% Women **67%** Men

Marital Status of Members

37% Married **31%** Single
24% Divorced **5%** Widowed
3% Separated

Composition of Membership

White	88%
Black	5%
Hispanic	4%
Native American	2%
Asian and other	1%

Members' Occupations

Professional/Technical	13%
Self-employed/Other	13%
Retired	13%
Manager/Administrator	10%
Laborer	7%
Health professional	6%
Sales worker	5%
Service worker	4%
Craft worker	4%
Educator	3%
Clerical Worker	3%
Student	3%
Homemaker	2%
Transportation (equip. oper.)	2%
Disabled (not working)	5%
Unemployed	7%

Meeting Attendance

Members attend an average of **two** A.A. meetings per week.

Length of Sobriety

- 48%** Sober more than 5 years
- 22%** Sober between 1–5 years
- 30%** Sober less than 1 year

Average sobriety of members is more than **seven** years.

Introduction to A.A.

Factors most responsible for members coming to A.A. (two responses permitted).

Self-motivated	33%
Through an A.A. member	32%
Treatment facility	32%
Family	23%
Court order	12%
Counseling agency	8%
Health Care provider	7%
Employer or fellow worker	4%
Non-A.A. friend or neighbor	4%
A.A. literature	2%
Al-Anon or Alateen member	2%
Correctional facility	2%
Newspaper/ magazine/radio/TV	1%
Member of clergy	1%
Other	4%

Group Membership

85% of the members belong to a home group.

Sponsorship

77% of members have a sponsor.

71% got a sponsor within 90 days.

Additional Help . . . Before

Before coming to A.A., **61%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc. **74%** of those members who received treatment or counseling said it played an important part in directing them to A.A.

Additional Help . . . After

After coming to A.A., **64%** of the members received some type of treatment or counseling such as medical, psychological, spiritual, etc. **85%** of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Relationship with Health Care Professionals

73% of members' doctors know they are in A.A. **38%** of members said they were referred to A.A. by a health care professional.

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Alcoholics Anonymous 1998 Membership Survey

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Grand Central Station
Box 459
New York, NY 10163

100M-5/99 (BN)

P-48

PRINTED IN U.S.A.



About A.A.

A.A. can be found almost everywhere, almost all the time—in more than 97,000 groups throughout the world. We welcome opportunities to cooperate with others who are providing help to alcoholics. Look for A.A. in your phone book, newspaper or write to: Grand Central Station, Box 459, New York, NY 10163. General information is available on our Web site (www.alcoholics-anonymous.org).

In 1998 more than 6,800 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office.

The purpose of the survey has been to keep A.A. members informed on current trends in membership characteristics, and to provide information about Alcoholics Anonymous to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

Ages of Members

Under age 21	2%
Age 21 through 30	9%
Age 31 through 40	28%
Age 41 through 50	30%
Age 51 through 60	18%
Age 61 through 70	9%
Over 70	4%

The average age of an A.A. member is 45 years.

Gender of Members

All Members:		
34% Women		66% Men
Age 30 and Under:		
38% Women		62% Men

Marital Status of Members

39% Married	27% Single
25% Divorced	5% Widowed
4% Separated	

Composition of Membership

White	88%
Black	5%
Hispanic	4%
Native American	2%
Asian and other	1%

Members' Occupations

Professional/Technical	13%
Retired	13%
Other (Including self-employed)	11%
Manager/Administrator	10%
Laborer	8%
Unemployed	6%
Health professional	6%
Disabled	6%
Sales worker	5%
Craft worker	4%
Service worker	4%
Clerical worker	3%
Educator	3%
Homemaker	3%
Student	3%
Transportation (equip. oper.)	2%

Meeting Attendance

Members attend an average of **two** A.A. meetings per week.

Length of Sobriety

47% Sober more than 5 years
26% Sober between 1–5 years
27% Sober less than 1 year

Average sobriety of members is more than **seven** years.

Introduction to A.A.

Factors most responsible for members coming to A.A. (two responses permitted).

Self-motivated	34%
Through an A.A. member	36%
Treatment facility	34%
Family	25%
Court order	11%
Counseling agency	9%
Health Care provider	8%
Other	7%
Employer or fellow worker	5%
Non-A.A. friend or neighbor	4%
Al-Anon or Alateen member	3%
Correctional facility	3%
Newspaper/ magazine/radio/TV	2%
A.A. literature	2%
Member of clergy	2%

Group Membership

85% of the members belong to a home group.

Sponsorship

75% of members have a sponsor.

68% of those got their sponsor within 90 days.

Additional Help . . . Before

Before coming to A.A., **60%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc. **75%** of those members who received treatment or counseling said it played an important part in directing them to A.A.

Additional Help . . . After

After coming to A.A., **62%** of the members received some type of treatment or counseling such as medical, psychological, spiritual, etc. **83%** of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Relationship with Health Care Professionals

75% of members' doctors know they are in A.A. **38%** of members said they were referred to A.A. by a health care professional.

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ALCOHOLICS ANONYMOUS® is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

- The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions.
- A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes.
- Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

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Alcoholics Anonymous 1996 Membership Survey

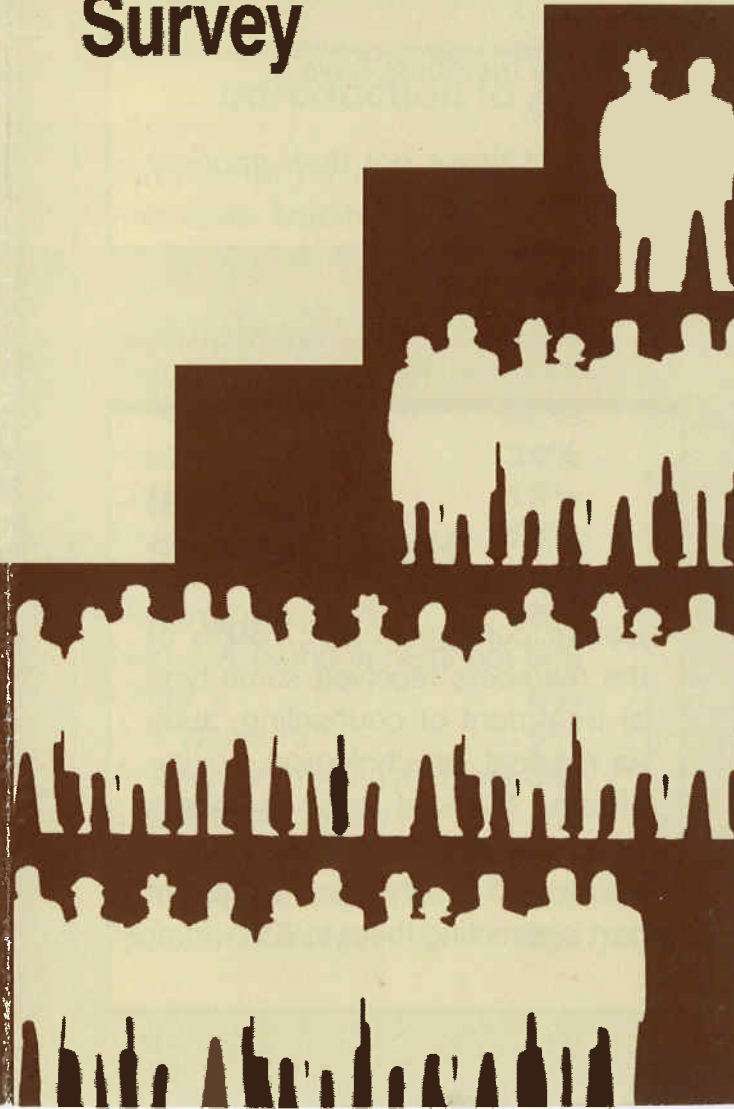
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In 1996 more than 7,200 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office with one exception.*

The purpose of the survey has been to keep A.A. members informed on current trends in membership characteristics, and to provide information about Alcoholics Anonymous to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

*The Survey which would have occurred in 1995, consistent with the existing triennial pattern, was deferred for one year by Conference Action and was actually conducted in 1996.

Ages of Members

Under age 21	1%
Age 21 through 30	12%
Age 31 through 40	30%
Age 41 through 50	29%
Age 51 through 60	16%
Age 61 through 70	9%
Over 70	3%

The average age of an A.A. member is 44 years.

Gender of Members

All Members:		
33% Women		67% Men
Age 30 and Under:		
40% Women		60% Men

Marital Status of Members

39% Married	28% Single
24% Divorced	6% Widowed
3% Separated	

Composition of Members

White	86%
Black	5%
Hispanic	4%
Native American	4%
Asian and other	1%

Members' Occupations

Professional/Technical	13%
Retired	11%
Other (Including self-employed)	11%
Manager/Administrator	10%
Laborer	9%
Unemployed	7%
Health professional	6%
Craft worker	5%
Disabled	5%
Service worker	4%
Sales worker	4%
Clerical worker	4%
Educator	3%
Homemaker	3%
Student	3%
Transportation (equip. oper.)	2%

Meeting Attendance

Members attend an average of more than **two** A.A. meetings per week.

Length of Sobriety

- 45%** Sober more than 5 years
- 28%** Sober between 1–5 years
- 27%** Sober less than 1 year

Average sobriety of members is more than **six** years.

Introduction to A.A.

Factors most responsible for members coming to A.A. (three responses permitted).

Self-motivated	51%
Through an A.A. member	48%
Treatment facility	40%
Family	39%
Counseling agency	16%
Court order	13%
Employer or fellow worker	9%
Health Care provider	8%
Non-A.A. friend or neighbor	8%
Other	8%
A.A. literature	5%
Al-Anon or Alateen member	3%
Correctional facility	3%
Newspaper/ magazine/radio/TV	3%
Member of clergy	3%

Group Membership

86% of the members belong to a home group.

Sponsorship

76% of members have a sponsor.

67% of those got their sponsor within 90 days.

Additional Help. . . Before

Before coming to A.A., **60%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc. **77%** of those members who received treatment or counseling said it played an important part in directing them to A.A.

Additional Help. . . After

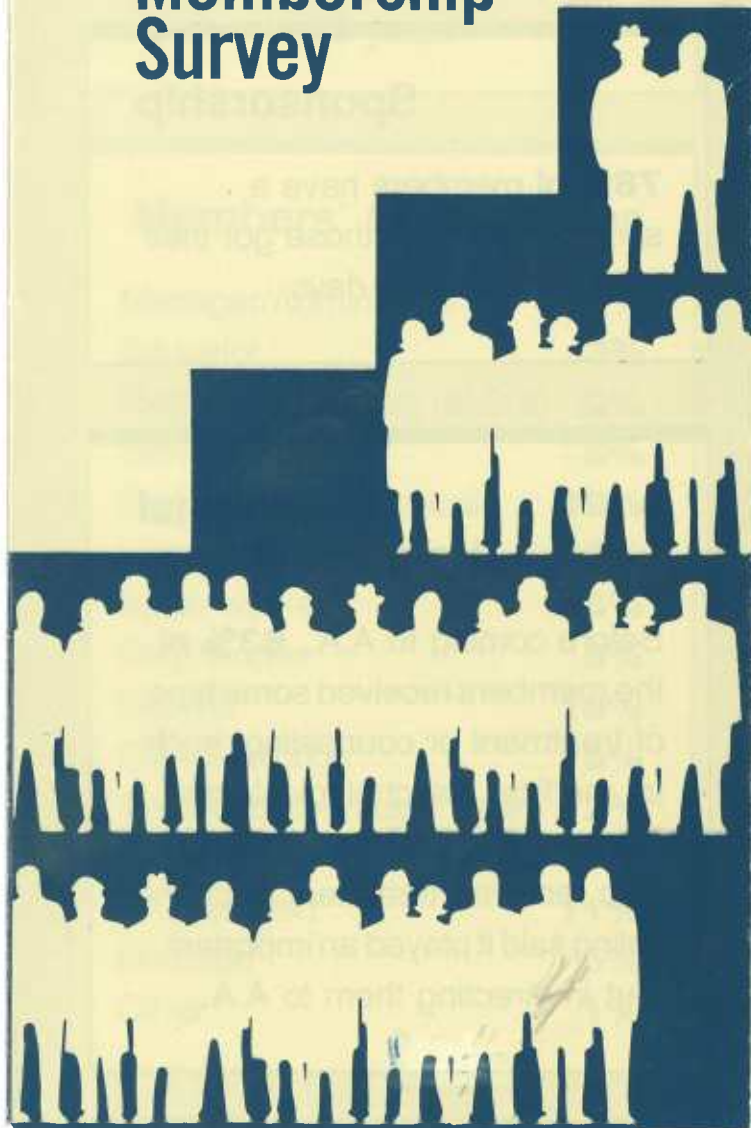
After coming to A.A., **62%** of the members received some type of treatment or counseling such as medical, psychological, spiritual, etc. **85%** of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Relationship with Health Care Professionals

73% of members' doctors know they are in A.A. **39%** of members said they were referred to A.A. by a health care professional.

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Alcoholics Anonymous 1992 Membership Survey



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In 1992 more than 6,500 A.A. members from the U.S. and Canada participated in a random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office.

The purpose of the survey has been to keep A.A. members informed on current trends in membership characteristics, and to provide information about Alcoholics Anonymous to the professional community and to the general public as part of A.A.'s purpose to carry our message to those who still suffer from alcoholism.

Alcoholics Anonymous 1992 Membership Survey

Length of Sobriety

35% Sober over 5 years

34% Sober between 1–5 years

31% Sober less than 1 year

Average sobriety of members is more than **five** years

Gender of Members

All Members:

35% Women **65%** Men

Age 30 and Under:

43% Women **57%** Men

Introduction to A.A.

Factors most responsible for members coming to A.A. (two responses permitted)

Through an A.A. member	34%
Self-motivated	29%
Treatment facility	27%
Family	21%
Counseling agency	9%
Court order	8%
Doctor	7%
Employer or fellow worker	6%
Non-A.A. friend or neighbor	4%
Al-Anon or Alateen member	4%
A.A. literature	3%
Correction facility	3%
Newspaper/ magazine/radio/TV	2%

Meeting Attendance

The average member attends **two and one half** meetings per week

Ages of Members

Under age 21	2%
Age 21 through 30	17%
Age 31 through 40	32%
Age 41 through 50	25%
Age 51 through 60	14%
Age 61 through 70	8%
Over age 70	2%

The average age of an A.A. member is **42** years

Members' Occupations

Manager/Administrator	11%
Educator	3%
Medical profession (M.D.s)	2%
Service worker	6%
Professional/Technical	19%
Homemaker	5%
Sales worker	6%
Craft worker	5%
Laborer	10%
Clerical worker	5%
Transportation (equip. oper.)	2%
Retired	9%
Unemployed	11%
Disabled	5%
Other	1%

Group Membership

83% of the members belong to a home group

Sponsorship

78% of members have a sponsor. **72%** of those got their sponsor within 90 days

Additional Help . . . Before

Before coming to A.A., **63%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc. **80%** of those members who received treatment or counseling said it played an important part in directing them to A.A.

Additional Help . . . After

After coming to A.A., **56%** of the members received some type of treatment or counseling such as medical, psychological, spiritual, etc. **87%** of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Relationship with Doctors

74% of members' doctors know they are in A.A.

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Alcoholics Anonymous 1989 Membership Survey



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Alcoholics Anonymous 1989 Membership Survey

About A.A.

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Box 459, Grand Central Station,
New York, NY 10163.

In 1989 more than 9,000 A.A. members from the U.S. and Canada participated in a carefully designed, random survey of the membership. Such studies have been conducted every three years since 1968 by the General Service Office.

The purpose of the survey has been to keep A.A. members informed on current trends in membership characteristics, and to provide information about Alcoholics Anonymous to the professional community and to the general public as part of the effort to reach those who still suffer from alcoholism.

1 Length of Sobriety

- 29%** Sober over 5 years
- 37%** Sober between 1-5 years
- 34%** Sober less than 1 year

Average sobriety of all members is more than **four** years.

2 Sex of Members

All Members:

35% Women **65%** Men

Age 30 and Under:

40% Women **60%** Men

3 Meeting Attendance

The average member attends **three** meetings per week.

4 Introduction to A.A.

Factors most responsible for members coming to A.A. (two responses permitted).

Through an A.A. member	34%
Treatment facility	30%
Self-motivated (on my own)	27%
Family	19%
Counseling agency	10%
Doctor	7%
Employer or fellow worker	6%
Non-A.A. friend or neighbor	4%
Al-Anon or Alateen member	4%
Newspaper/ magazine/radio/TV	3%
A.A. literature	3%

5 Ages of Members

Under age 21	3%
Age 21 through 30	19%
Age 31 through 40	30%
Age 41 through 50	25%
Age 51 through 60	14%
Age 61 through 70	7%
Over age 70	2%

The average age of an A.A. member is **41** years.

6 Members' Occupations

Professional/Technical	23%
Labor	17%
Manager/Administrator	13%
Sales	6%
Homemaker	5%
Craft Worker	5%
Office and Clerical	5%
Student	4%
Retired	8%
Unemployed	6%
Disabled	3%
Other	5%

7 Group Membership

88% of the members belong to a home group.

8 Sponsorship

85% of members have, or have had, a sponsor. **72%** of those got their sponsor within 90 days.

9 Additional Help ... Before

Before coming to A.A., **68%** of the members received some type of treatment or counseling, such as medical, psychological, spiritual, etc. **80%** of those members who received treatment or counseling said it played an important part in directing them to A.A.

10 Additional Help ... After

After coming to A.A., **60%** of the members received some type of treatment or counseling (other than A.A.) such as medical, psychological, spiritual, etc. **85%** of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

11 In addition to their alcoholism, **42%** of the members said they were addicted to drugs.*

**Alcoholics Anonymous' primary purpose is recovery from alcoholism.*

12 Relationship with Doctors

70% of members' doctors know they are in A.A.

In 1986

almost 7,000 AA members from the U.S. and Canada participated in a carefully designed study of the AA membership. Such studies are conducted every three years by the General Service Office for the purpose of keeping AA members and the professional community informed on current trends in membership characteristics.

1 Length of Sobriety

29% Sober over 5 years

38% Sober between 1 to 5 years

33% Sober less than 1 year

**Average sobriety overall:
52 months**

About AA

AA can be found almost everywhere, almost all the time—in over 73,000 groups throughout the world. And it's free. We welcome opportunities to cooperate with others in providing help to alcoholics. Look for AA in your phone book or write: Box 459, Grand Central Station, New York, NY 10163.

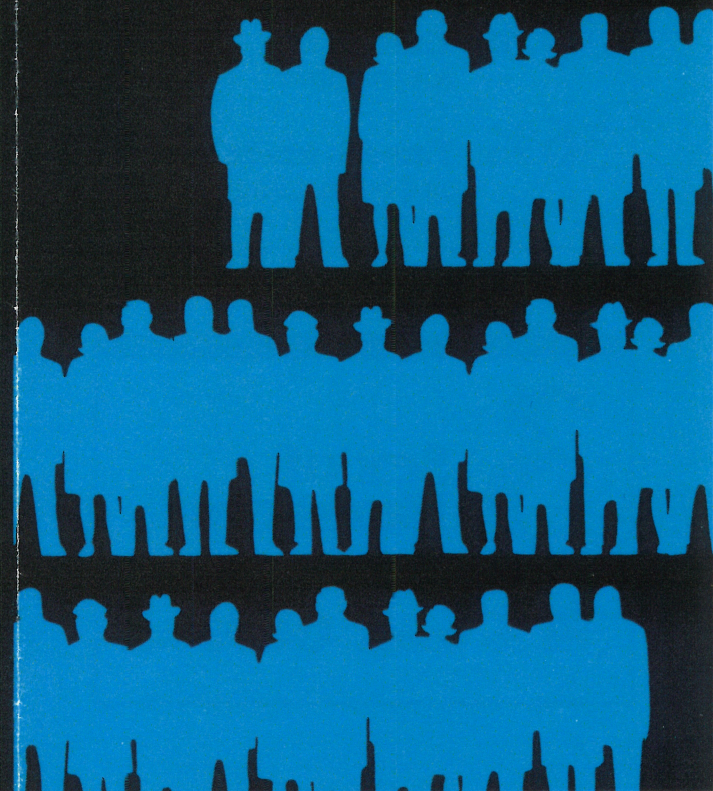
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AA Membership Survey



2 Newcomers to AA

Some of the factors most responsible for members coming to AA (Each respondent named 2.)

- 7% Through a doctor
- 19% Through a family member
- 27% Self-motivated ("on my own")
- 36% Through an AA member
- 36% Through rehabs and counseling

3 Sex of Members

34% Women 66% Men

4 Ages of Members

- 3% Age 20 and younger
- 18% Ages 21 through 30
- 52% Ages 31 through 50
- 27% Age 51 and older

5 38% of members also addicted to drugs.

6 The average member attends 4 meetings per week.

7 60% of members have had prior counseling.

8 Members' Vocations

	<u>Men</u>	<u>Women</u>
Sales & Business	22%	16%
Homemaker	2%	15%
Professional	24%	22%
Labor	25%	12%
Office & Clerical	2%	10%
Unemployed	7%	8%
Retired	10%	5%
Other*	10%	12%

* Agriculture, military, student, etc.

10/84

THE A.A. MEMBER



THE A.A. MEMBER

Sobriety to date45 months
% women30%
Average meetings a week 4%
Having prior counseling60%
Addicted to another drug31%

Contents of this pamphlet available in display form

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WHERE IS A.A.?

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The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

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LATES YOUNG PEOPLE

...THEY REACHED A.A.
BY DIFFERENT ROUTES...
(Many of those surveyed
gave two responses)

...AT A TYPICAL A.A. MEETING:
35-40% SOBER LESS THAN 1 YEAR
35-40% SOBER 1 TO 5 YEARS
20-30% SOBER OVER 5 YEARS

...LARGEST AGE GROUP 31-50

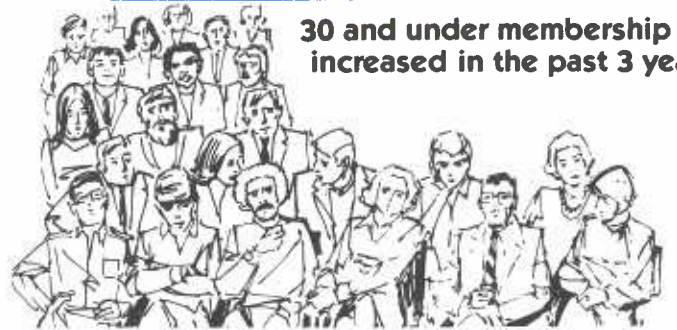
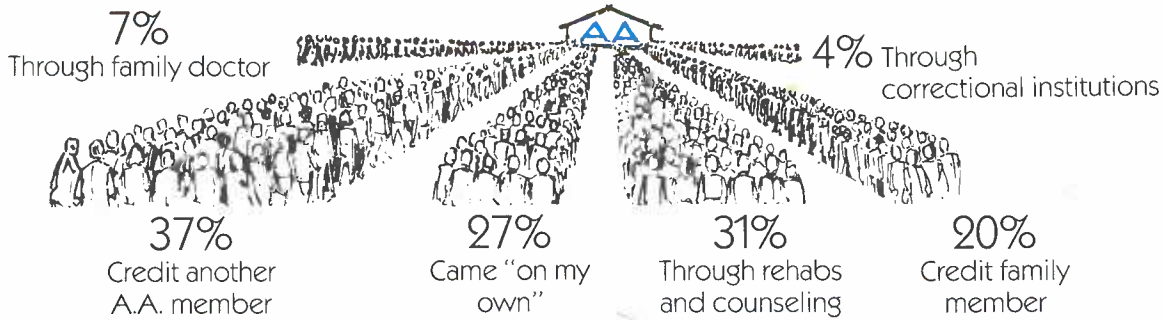
30 AND UNDER	20.0%
(3% are under 21)	
31 THROUGH 50	52.0%
51 AND OVER	28.0%

RESPONDENTS
FELL INTO
THE FOLLOWING
GENERAL CATEGORIES:

	Sal
MEN	
WOMEN	

*Almost 8000 A.A. members participated in the

LATEST SURVEY* SHOWS INCREASE OF PEOPLE IN A.A. — OTHER FINDINGS REVEAL:

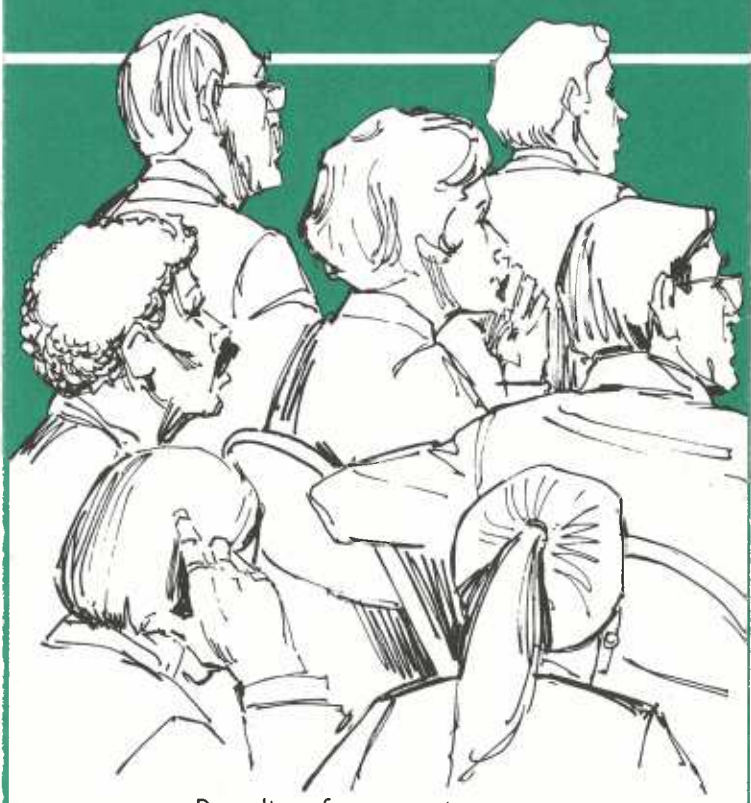


Professionals & Business	Homemaker	Professional	Labor	Office & Clerical	Unemployed	Retired	Other (including agriculture, military, student, etc.)
20%	0.2%	18%	29%	1%	10%	10%	12%
12%	19%	19%	12%	12%	10%	8%	8%

...most carefully designed study of its kind.

9/81

The A.A. Member



Results of a recent survey
of the membership of
Alcoholics Anonymous

NEW EDITION

WHERE IS A.A.?

The facts in this leaflet apply to members in the United States and Canada only.

A.A. can be found almost everywhere, almost all the time --- in more than 42,000 groups throughout the world. And it's free. We welcome opportunities to cooperate with others in providing help to alcoholics. Look for A.A. in your phone book or write: Box 459, Grand Central Station, New York, NY 10163.

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150M-9/81(T)

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LATEST SURVEY WOMEN AND YOUNG

... THEY REACHED A.A.
BY DIFFERENT ROUTES ...

(Many of those surveyed
gave two responses)

... AT A TYPICAL A. A. MEETING:
35-40% SOBER LESS THAN 1 YEAR
35-40% SOBER 1 to 5 YEARS
20-30% SOBER OVER 5 YEARS

... LARGEST AGE GROUP 31-50
30 AND UNDER 14.7%
31 THROUGH 50 51.0%
50 AND OVER 31.8%

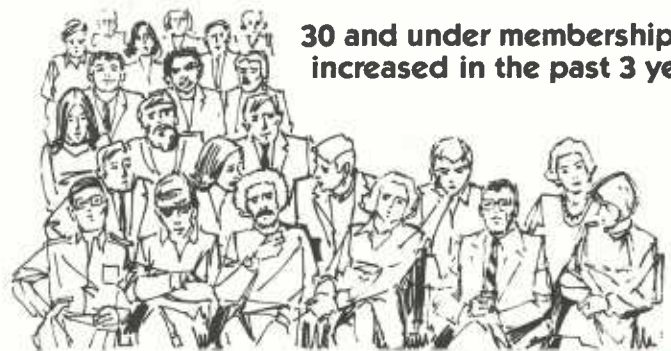
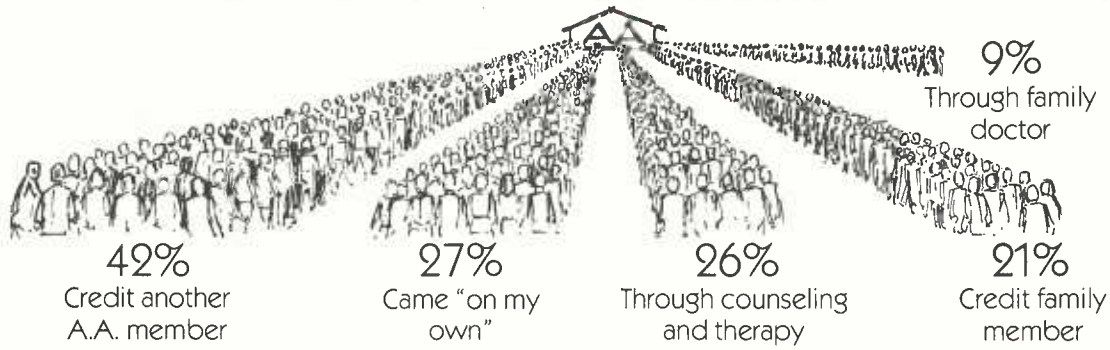
(2.5% did not indicate their age)

RESPONDENTS
FELL INTO
THE FOLLOWING
GENERAL CATEGORIES:

MEN	Sales & E 19
WOMEN	11

*Almost 25,000 A.A. members participated in

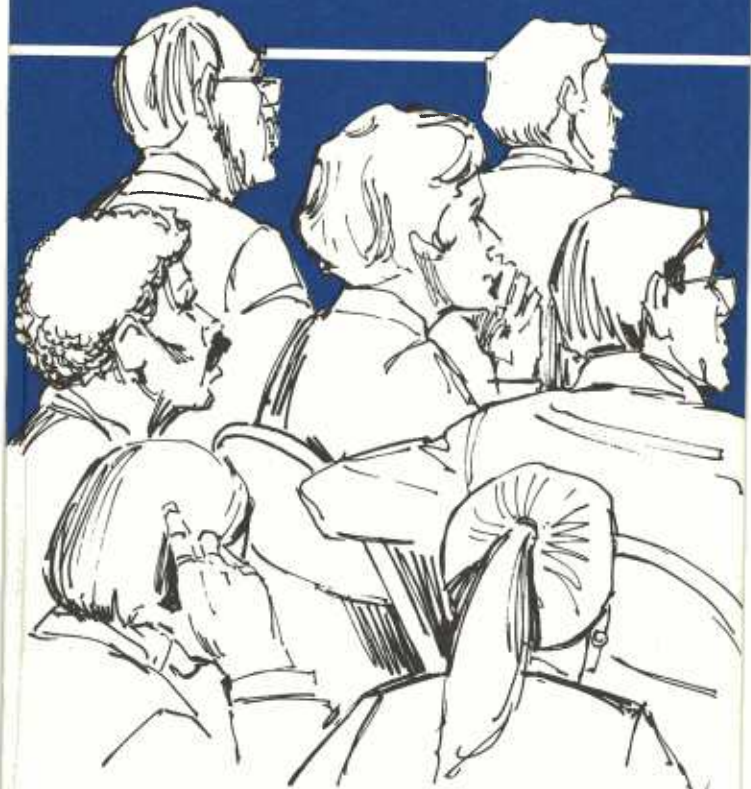
Y* SHOWS ACCELERATING INCREASE OF G PEOPLE IN A.A. — OTHER FINDINGS REVEAL:



Business %	Homemaker	Professional	Labor	Office & Clerical	Unemployed	Retired	Other (including agriculture, military, student, etc.)
0.1%	17%	30%	3%	7%	12%	12%	
25%	18%	7%	15%	9%	5%	10%	

the largest and most comprehensive study of its kind

The A.A. Member



Results of a recent survey
of the membership of
Alcoholics Anonymous

11/78

WHERE IS A.A.?

The facts in this leaflet apply to members in the United States and Canada only. For a detailed analysis of worldwide membership survey data, write to the mail address below.

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... THEY REACHED A.A.
BY DIFFERENT ROUTES ...

(Many of those surveyed
gave two responses)

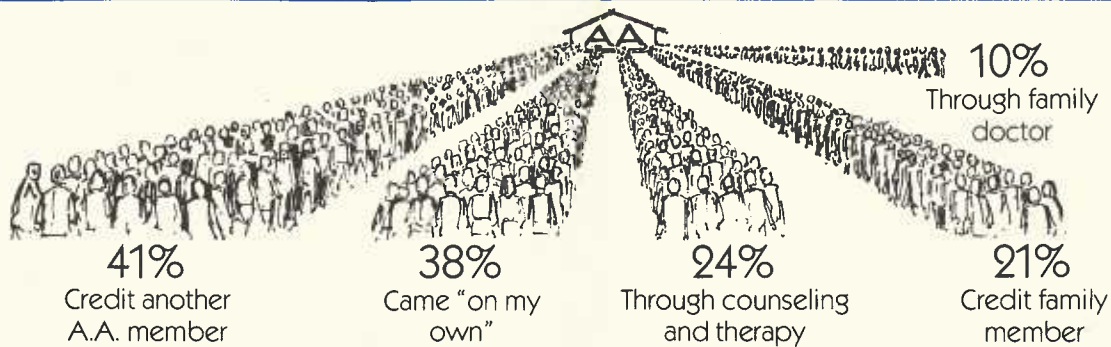
... AT A TYPICAL A. A. MEETING:
35-40% SOBER LESS THAN 1 YEAR
35-40% SOBER 1 to 5 YEARS
20-30% SOBER OVER 5 YEARS

... LARGEST AGE GROUP 31-50
30 AND UNDER 11.3%
31 THROUGH 50 51.9%
50 AND OVER 35.1%
(1.7% did not indicate their age)

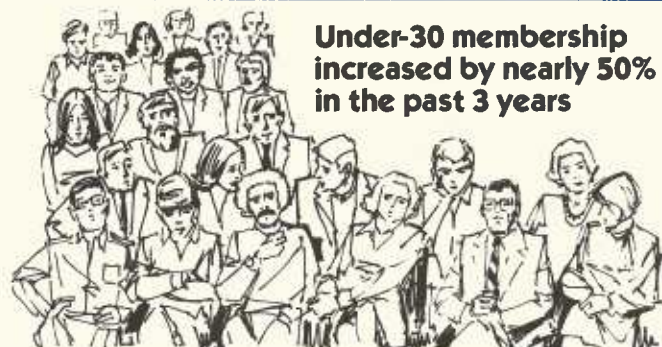
... VIRTUALLY ALL
OCCUPATIONS ARE
REPRESENTED ...

* More than 17,000 A.A. members participated

Y* SHOWS ACCELERATING INCREASE OF G PEOPLE IN A.A. — OTHER FINDINGS REVEAL:



**One out of three
is a woman**

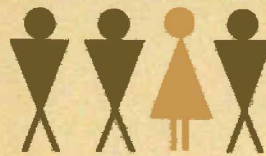


**Under-30 membership
increased by nearly 50%
in the past 3 years**

MEN	Sales & Business	Crafts	Professional	Semiskilled	Other
	29%	27%	26%	11%	7%
WOMEN	Homemaker	Professional	Office, Clerical	Sales & Business	Skilled & Semiskilled
	40%	21%	18%	14%	7%

ated in the largest and most comprehensive study of its kind

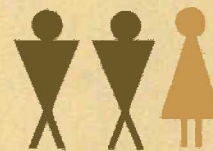
ONE OUT OF FOUR IS A WOMAN



LARGEST AGE GROUP IS 31-50



31-50—50%



51-65—30%



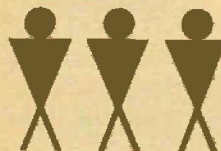
UNDER 31—10%



OVER 65—10%

PRACTICALLY ALL OCCUPATIONS ARE REPRESENTED

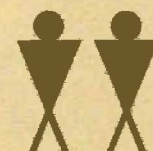
MEN



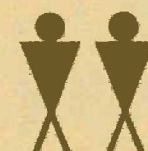
EXEC. PROF. TECH./30%



CRAFTS/20%



SALES/20%

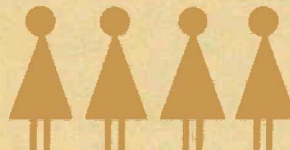


SERVICE & SEMI-SKILLED LABORER/20%

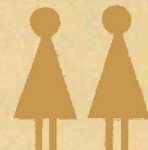


OTHERS/10%

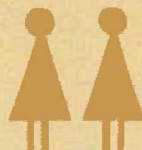
WOMEN



HOMEMAKER/40%



SALES-CLERICAL/20%



EXEC. PROF. TECH./20%

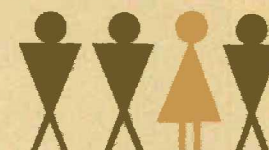


SERVICE & SEMI-SKILLED/10% OTHERS/10%

THE AA MEMBER AND HIS SOBRIETY



SOBER 1 YEAR TO 20 PLUS/60%



SOBER LESS THAN 1 YEAR/40%

HOW EFFECTIVE IS AA?



SOBRIETY WITHIN 1 YEAR OF A.A./60%



WITHIN 2-20 PLUS YEARS/40%

WHERE CAN AA BE FOUND?

Almost everywhere, almost all the time, and it's free . . . in more than 20,000 groups around the world (14,000 in the U.S.A. and Canada)!

A.A.'s welcome opportunities to cooperate with professionals (and others) in providing help to alcoholics.

Look for A.A. in your phone book or write: Box 459, Grand Central Station, New York, N.Y. 10017.

WHO HELPS THE ALCOHOLIC FIND AA?

Thousands owe their lives to nonalcoholics—professionals and laymen—who have interested themselves in the A.A. program.

THE NEW STUDY SHOWS THAT:

One A.A. in five credits a physician or hospital for directing him to A.A.

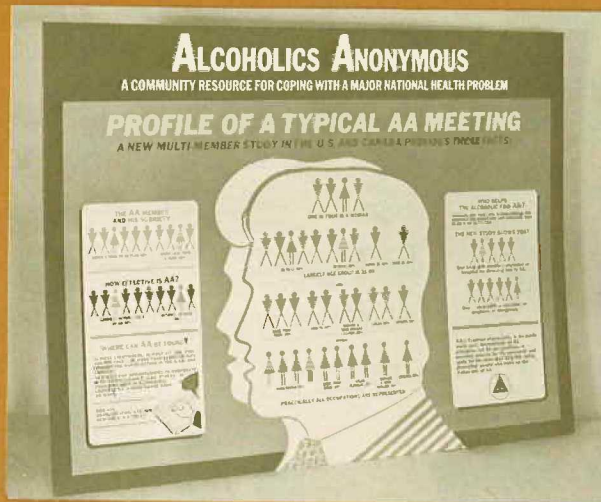
One in six credits a counselor or employer or clergyman.

A.A.'s Tradition of anonymity in the public media puts the emphasis on A.A. principles, not A.A. personalities. It provides security for the newcomer and unity for the more than 650,000 widely diversified people who make up the Fellowship of A.A.

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**A MULTI-MEMBER
STUDY IN THE U.S.
AND CANADA PROVIDES
THESE FACTS...**





PROFILE OF AN A.A. MEETING DISPLAY AVAILABLE

The Alcoholics Anonymous Display pictures A.A. as a community resource in coping with a national health problem. It briefly describes what A.A. is, where it is located, and how to reach the more than 20,000 A.A. groups in the United States and Canada and abroad. It states the reasons for anonymity in the public media and emphasizes A.A.'s willingness to cooperate with all professional groups and individuals who come in contact with alcoholics.

The Display available at G.S.O. presents a profile of a typical A.A. meeting--giving figures, based on a recent survey, on **who** is an A.A. member . . . in terms of age, sex, and occupation, and who helps the alcoholic to find A.A.

The Display is 29 inches high and 40 inches wide, has a double easel in the back and can be folded in half for storage.



This is A.A. General Service
Conference-approved literature

Mail Address:
Box 459 • Grand Central Station
New York, N.Y. 10017

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P.48

Printed in USA 50 M 12/74 (K)

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**THE
ALCOHOLICS
ANONYMOUS
SURVEY**

**11,355
A.A. members
answer
questions
about
themselves**

Copyright 1970
Alcoholics Anonymous World Services, Inc.

Mail address: Box 459
Grand Central Post Office
New York, N.Y. 10017

25M 1/70 (K)

PRINTED IN U.S.A.

ALCOHOLICS ANONYMOUS is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.

- The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions.

- A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes.

- Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

TWELVE SUGGESTED STEPS OF ALCOHOLICS ANONYMOUS

- 1—We admitted we were powerless over alcohol—that our lives had become unmanageable.
 - 2—Came to believe that a Power greater than ourselves could restore us to sanity.
 - 3—Made a decision to turn our will and our lives over to the care of God *as we understood Him*.
 - 4—Made a searching and fearless moral inventory of ourselves.
 - 5—Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
 - 6—Were entirely ready to have God remove all these defects of character.
 - 7—Humbly asked Him to remove our shortcomings.
 - 8—Made a list of all persons we had harmed and became willing to make amends to them all.
 - 9—Made direct amends to such people wherever possible, except when to do so would injure them or others.
 - 10—Continued to take personal inventory and when we were wrong, promptly admitted it.
 - 11—Sought through prayer and meditation to improve our conscious contact with God *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
 - 12—Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.
-

FOREWORD

This, the first broad survey of Alcoholics Anonymous, indicates that 60% of the A.A. members now attending meetings throughout the United States and Canada have been without a drink for a year or more.

The survey, which this pamphlet summarizes, was undertaken in June and July, 1968, following the unanimous recommendation of the delegates to the General Service Conference of Alcoholics Anonymous and under authorization of the Board of Trustees.

A total of 11,355 members at 466 A.A. meetings in the United States and Canada anonymously filled out questionnaires on such matters as length of sobriety, how long it took them to stop drinking after coming to A.A., and primary factors responsible for their first coming to A.A. Cross indexing of replies yielded further information.

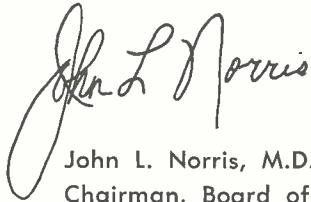
Among other things, the survey shows that: the average age of members at meetings, three-fourths of whom are men, is 46; 90% go to at least one meeting a week; most came to A.A. because of another A.A. member or someone in their family.

There were two major reasons for undertaking the survey:

1. To enable A.A. to furnish more accurate data about the Fellowship and its effectiveness to the growing number of professionals — doctors, psychiatrists, social workers, law enforcement officials and others— who are working today in the field of alcoholism.

2. To provide A.A. with more information about itself so that members can work more effectively in helping the many millions of alcoholics who still suffer throughout the world.

The information gathered in this survey is not only of great value but is extremely encouraging. However, survey results should not be used to project figures for either the Fellowship of A.A., alcoholics in general, or the population as a whole. A.A. members who filled out the questionnaire represent only those who attended the particular meetings at which the survey was conducted. This represented 5% of the groups in each of the fifty States and Canada.



John L. Norris, M.D.
Chairman, Board of Trustees
Alcoholics Anonymous

BACKGROUND

Many A.A. members have had an opportunity to answer questionnaires regarding their drinking experience. "Twelve Questions Only You Can Answer" is one example. But few have had a chance to answer questionnaires regarding their experience in achieving and maintaining sobriety.

However, it is now possible for A.A. members not only to check over the following questionnaire but to measure their own experiences in A.A. against those of a broad sampling of the membership. This is one result of the survey taken among more than 10,000 A.A. members attending meetings throughout North America during the summer of 1968.

Up to now, the only broad gauge of measurement and comparison available to all members has been the rule-of-thumb estimate developed in the early years of the Fellowship. This surprisingly accurate estimate held that of all those who seriously attend A.A., 50% stop drinking immediately or within the first few weeks; an additional 25% eventually stop drinking, and the remaining 25% don't seem to be able to make it for one reason or another.

Other surveys have been taken over the years. Among them, one in Texas traced the experience of the members of one group. Another, more elaborate survey was conducted among members of groups in New York City, and yet another in England.

The results of these surveys were heartening in that they tended to confirm the 50-25-25 estimates, as well as the fact that A.A. worked in different areas for a great many people on a long-term basis. However, there were some drawbacks to these earlier surveys. For instance, samples were either too small, or taken from too limited a geographical area. In some cases, respondents were selected, rather than picked at random.

NEED

It was Dr. John L. Norris, nonalcoholic chairman of A.A.'s Board of Trustees, who first cited the need for more accurate information about A.A. and its members.

In dealing with the medical and scientific community on the question of alcoholism and its treatment, Dr. Norris found that he could cite numerous examples of how A.A. works, but that he lacked facts and figures.

He posed his problem at a meeting of the Policy Committee of the Board of Trustees and requested that the Fellowship explore ways and means of providing more accurate data.

The Policy Committee is made up of all trustees, G.S.O. and Grapevine staffs, directors of the Grapevine and A.A.W.S. and members of other Trustee Committees: Literature, Finance, International, Public Information and Nominating. Every three months, at a town-hall type meeting, these members—forty to fifty of them—discuss ideas and suggestions that will contribute to the effective growth of the Fellowship.

Members of the Policy Committee were aware, of course, that Dr. Norris had been associated with A.A. for more than fifteen years and knew as much or more about the Fellowship than many members. If he had a problem in coming up with hard facts, the same must be true for other good friends of A.A., as well as for members themselves.

Following discussion at two successive Policy Committee meetings, the matter was favorably referred to the Board of Trustees for its consideration. The Board authorized a pilot study to determine whether or not such a survey was feasible on a broad scale—that is, to see if A.A. members more or less randomly selected from among the entire North American membership would object to filling out an anonymous questionnaire, provided that the purpose was fully explained.

The Trustees' Public Information Committee was assigned the task of developing a questionnaire that would provide meaningful information, as well as to determine effective methods and procedures in conducting the survey. This was done by a task force made up of members who had experience in conducting surveys and in measuring public opinion.

It was decided that the simplest way to conduct the pilot survey was with the help of the regional trustees themselves. Each of them agreed to take the questionnaires to one group in his area to see if there would be any adverse reaction or any other problem.

Following successful completion of the pilot survey, the trustees submitted the survey questions to delegates at the 1968 General Service Conference. The delegates, representing every state and province in the United States and Canada, not only voted unanimously to authorize such a poll of the membership but volunteered to do the job themselves.

The survey task force group at G.S.O. decided to send to the delegates enough questionnaires to cover 5% of the groups in the United States and Canada. A 15% return on this number would have been adequate, but it was hoped to obtain a 25% return. The response was almost overwhelming, with a total of 11,355 members from 435 groups filling out the questionnaires. This represented a 92% return, a testimony not only to the hard work of the delegates, area representatives and general service representatives who helped make this survey possible, but to the willingness of A.A. members everywhere to provide information which they felt would help carry the A.A. message more effectively to more people throughout the world.

In the following pages you will find a copy of the survey questionnaire itself, along with an analysis.

til he had lost a few jobs, his family, and had made the rounds of the institutions. All that takes time, with the result that the average age of members was then estimated to be in the late forties. As the years pass and education about alcoholism and A.A. becomes more widespread, the average age of A.A. members is getting lower. According to the survey, the average age of A.A. members now attending meetings is 46. Their average age when they came to their first A.A. meeting was 43.

As more and more professionals in medicine, social work, law enforcement and other fields learn to recognize the symptoms of alcoholism and as more and more people begin to recognize their problem at an earlier stage and age, it is probable that the average age of A.A. members will continue to decrease.

LENGTH OF SOBRIETY

TABLE 3. Time Reported Since Last Drink

For most people who come to A.A., there is a point after which they just don't drink. This point may be at their first A.A. meeting. It may be a week, month or years after their first meeting. But once having achieved this point, experience has shown that the great majority do not resume drinking.

While A.A. has no measure of the number of alcoholics who have gotten sober, resumed a normal life without ever drinking and died without having taken a drink, we can assume that this is a normal pattern for those who accept the A.A. program.

Thus, A.A. views success as continuous sobriety—that is, the alcoholic lives a normal life without ever drinking. However, the medical and scientific community often has a less demanding criterion for success. This criterion is frequently one year of total abstinence.

Using that standard, there is apt to be a lot of successful sobriety in any A.A. meeting anywhere in the United States or Canada.

Of the 11,355 members who filled out questionnaires at A.A. meetings, 60% reported that they had not had a drink of alcohol for one year or more. This is one indication that A.A. works.

According to the data which follows, it can be assumed that many of the remaining 40% are newcomers who have either not had a drink or who stopped drinking shortly after attending their first meeting.

HOW LONG FOR A.A. TO "TAKE"?

TABLE 4. Length of Time from First Visit to A.A. to Time of Last Drink

Another indication that A.A. works well is shown by the fact that a total of 64% of the respondents in the survey reported that they had stopped drinking, either immediately after their first meeting (41%) or within the first year (23%).

A total of 68% of the women in the survey reported that they had stopped drinking within a year of their first meeting, as compared with only 63% of the men. At the same time, 74% of those under thirty reported they had stopped drinking within a year of attending their first A.A. meeting, compared with 63% of those over thirty.

Here it should be noted that while a number of those surveyed have not yet attained successful sobriety, few A.A. members would be apt to refer to them as hopeless. Most A.A.'s know of at least one member who attended A.A. meetings year after year with little or no success, but then finally sobered up. Unless the alcoholic dies, the most that the majority of A.A. members will say is that it hasn't worked so far.

WHO GOES TO THE MOST MEETINGS?

TABLE 5. Frequency of Attending A.A. Meetings by Length of Sobriety

Nearly 95% of the members surveyed re-

ported going to at least one meeting a week, regardless of the length of sobriety. As can be expected, newcomers reported attending more meetings than oldtimers. The surprising thing, however, is that the difference was so little. For instance, while 94% of those with less than one year of sobriety reported going to at least one meeting a week, 92.2% of those with fifteen to twenty years of sobriety also reported going to at least one meeting a week. The difference between newcomers and oldtimers would seem to be in the **number** of meetings attended each week, with 52% of those who had less than a year of sobriety, going to three to seven meetings a week, as against 53% for those with one to five years of sobriety, 45% for five to ten years; 39% for ten to fifteen and about 34% for fifteen and more years.

Note: Although it is common to hear around A.A. that it is more difficult for women to attend meetings than men, there is little difference reported among males and females in the number of meetings attended.

In checking frequency of attendance at A.A. meetings by age it was shown that younger members tend to go to more meetings than older members. It might also be assumed that in general younger members have been sober for a shorter time than older members, which would bear out the previously cited figures showing that newcomers tend to go to more meetings than oldtimers. Of the group from eighteen to thirty years of age, 60.8% reported going to from three to seven meetings a week, as opposed to 49.7% for the total sample; 51.5% for the thirty-one to fifty age group; 45.2% for the fifty-one to sixty-five age group and 43.7% for those over sixty-five.

GETTING TO A.A.

TABLE 6. Factors Most Responsible for First Attendance at A.A. Meetings

This table shows the great importance of Twelfth Step work, as well as the remarkable effect that one alcoholic can have on another who is still suffering. In more than half of the cases respondents cited another A.A. member as the factor most responsible for their first attendance at an A.A. meeting. (The question of where members first heard of A.A. was not asked.) Families came in a strong second in getting the member to his first meeting and doctors were cited as the third major factor. While males were proportionately more responsive than females to other A.A. members, their own families and employers, females tended to be more responsive to doctors, A.A. literature, newspapers, magazines and television and social workers.

NEWCOMERS AND OLDTIMERS

TABLE 7. Factors Most Responsible for First Attendance at A.A. Meeting by Length of Sobriety

The earliest members, with more than twenty years of sobriety, point up the tremendous impact on A.A. of articles, such as Jack Alexander's story in the March 1, 1941, issue of the **Saturday Evening Post**. A total of 27% cited newspapers and magazine stories as responsible for getting them to their first meeting, as opposed to 2.6% for other A.A. members. However, this was during a time when there weren't many other members to get them to their first meeting.

The newest (not youngest) members who have been sober less than one year, provide a good example of the sharply increasing influence of the medical profession today in getting members to their first meeting — 18.5%, compared with 12% for those sober fifteen years or more, for an increase of better than 50%.

A.A.'s POSITION IN THE FIELD OF ALCOHOLISM

ALCOHOLICS ANONYMOUS is a worldwide fellowship of men and women who help each other to maintain sobriety and who offer to share their recovery experience freely with others who may have a drinking problem. The A.A. program consists basically of "Twelve Suggested Steps" designed for personal recovery from alcoholism.

THE FELLOWSHIP functions through approximately 15,000 local groups in 90 countries. Several hundred thousand alcoholics have achieved sobriety in A.A., but members recognize that their program is not always effective with all alcoholics and that some may require professional counseling or treatment.

A.A. IS CONCERNED solely with the personal recovery and continued sobriety of individual alcoholics who turn to the Fellowship for help. The movement does not engage in the fields of alcoholism research, medical or psychiatric treatment, and does not endorse any causes—although A.A. members may participate in such activities *as individuals*.

THE MOVEMENT has adopted a policy of "cooperation but nonaffiliation" with other organizations concerned with the problem of alcoholism.

ALCOHOLICS ANONYMOUS is self-supporting through its own groups and members and declines contributions from outside sources. A.A. members preserve personal anonymity at the level of press, films and broadcast media.

THE TWELVE TRADITIONS OF ALCOHOLICS ANONYMOUS

- 1—Our common welfare should come first; personal recovery depends upon A.A. unity.
 - 2—For our group purpose there is but one ultimate authority—a loving God as He may express himself in our group conscience. Our leaders are but trusted servants; they do not govern.
 - 3—The only requirement for A.A. membership is a desire to stop drinking.
 - 4—Each group should be autonomous except in matters affecting other groups or A.A. as a whole.
 - 5—Each group has but one primary purpose—to carry its message to the alcoholic who still suffers.
 - 6—An A.A. group ought never endorse, finance or lend the A.A. name to any related facility or outside enterprise, lest problems of money, property and prestige divert us from our primary purpose.
 - 7—Every A.A. group ought to be fully self-supporting, declining outside contributions.
 - 8—Alcoholics Anonymous should remain forever non-professional, but our service centers may employ special workers.
 - 9—A.A., as such, ought never be organized; but we may create service boards or committees directly responsible to those they serve.
 - 10—Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy.
 - 11—Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio and films.
 - 12—Anonymity is the spiritual foundation of our traditions, ever reminding us to place principles before personalities.
-

A.A. PUBLICATIONS

APPROVED BY THE GENERAL
SERVICE CONFERENCE OF A.A.

Complete order forms available at
Box 459, Grand Central Post Office, N.Y., N.Y. 10017

BOOKS

ALCOHOLICS ANONYMOUS

(605 pages, \$4.50)

ALCOHOLICS ANONYMOUS COMES OF AGE

(335 pages, \$4.00)

**TWELVE STEPS AND
TWELVE TRADITIONS**

(190 pages, \$2.75)

**TWELVE STEPS AND
TWELVE TRADITIONS**

(Pocket-size edition)

(190 pages, \$3.00)

THE A.A. WAY OF LIFE

(346 pages, \$3.50)

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A.A. TRADITION—HOW IT DEVELOPED

A CLERGYMAN ASKS ABOUT A.A.

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ALCOHOLICS ANONYMOUS AND

THE MEDICAL PROFESSION

A.A. IN YOUR COMMUNITY

IS. A.A. FOR YOU?

THIS IS A.A.

QUESTIONS AND ANSWERS

ON SPONSORSHIP

A.A. FOR THE WOMAN

A.A. AND THE ALCOHOLIC EMPLOYEE

THE JACK ALEXANDER ARTICLE

THE FORTUNE STORY

LETTER TO A WOMAN ALCOHOLIC

YOUNG PEOPLE AND A.A.

SEDATIVES, STIMULANTS

AND THE ALCOHOLIC

THE ALCOHOLIC HUSBAND

THE ALCOHOLIC WIFE

INSIDE A.A.

THE A.A. GROUP

MEMO TO AN INMATE

BACKGROUND INFORMATION ON A.A.

COOPERATION BUT NOT AFFILIATION

THE G.S.R.

A.A. IN PRISONS

A.A. IN HOSPITALS

WHAT HAPPENED TO JOE

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GENERAL SERVICE OFFICE

of

ALCOHOLICS ANONYMOUS



*This is A.A. General Service
Conference-approved literature*

•

I am responsible . . .

**When anyone, anywhere,
reaches out for help, I want
the hand of A.A. always to be there.
And for that: I am responsible.**

•