



WORLD SERVICE BOARD OF TRUSTEES BULLETIN #27

HIV and AIDS in NA

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Any life-threatening disease causes us to work our program rigorously, whether we're afflicted by it ourselves or are supporting members who suffer from it. HIV and AIDS have become a reality in the NA recovering community. The paradox of this disease, like the disease of addiction itself, is the need to belong while already feeling separated. The strain of having to deal with a potentially fatal disease striking so many addicts, compounded by the disease of addiction itself, can be overwhelming. It is no surprise that, at times like these, we often ask ourselves if continued recovery is worth it. At our potentially weakest moment, we need more than ever the strength found in our fellowship.

HIV and AIDS affect us all in NA. Fear of the virus can allow the defects of self-centeredness, denial, rationalization, and the urge to run to assert themselves. The spiritual principles that made recovery possible and that strengthen our groups must continue to guide us during these times.

HIV and AIDS in NA are considered by some as an outside issue--a subject not to be discussed for fear of diluting our message of recovery from drug addiction. That point of view has not been stated in any world-level publication, but it has been implied through silence. Our lack of direction coupled with ignorance of the virus and an often inflexible interpretation of the traditions has caused many groups and committees to label HIV and AIDS as outside issues. While there are many issues around HIV and AIDS that may well be outside issues, the experience of recovering addicts with HIV is not.

Committees responsible for conventions, learning days, workshops, etc., have often been directed not to include HIV/AIDS as a topic. Our reasoning for this was based on our lack of experience and our fear. Instead, we have been guided toward having topics on life threatening diseases in general. This was sometimes done out of concern that participants of a topic meeting on AIDS might choose to discuss the medical treatment or the political ramifications of the disease. While some of those fears might have some basis in reality, open-mindedness keeps us focused on our shared experience, strength, and hope.

There are a range of HIV and AIDS-related issues that are outside issues; for example, offering medical information, educating using addicts about needle-cleaning or endorsing the availability of clean needles, supporting or opposing AIDS quarantine proposals, encouraging specific methods of safer sex, or commenting on the merits of the "Just say no" campaign in limiting the spread of AIDS. NA's involvement in any of these activities would undoubtedly draw the NA name into public controversy. And that would surely compromise our ability to carry the message of recovery from addiction.

However, there is more to HIV and AIDS in NA than outside issues. This virus has put strains on our relationships. Despair is closer to some of us than others, and our *Just for Today* prayers become much more relevant. Anybody who has ever gained a practical understanding of "living in the present" has some incredible experience, strength, and hope to share with all of us. Although we all live with the life-threatening disease of addiction, those of us with HIV and AIDS sometimes have a heightened awareness of living just for today. We may all gain from sharing and being open toward an understanding of new aspects of powerlessness and surrender.

While in active addiction, we all faced a life-threatening disease. In recovery, NA members have historically continued to face other such diseases, but never to the extent being encountered today. Some of our groups in urban areas are experiencing a very high percentage of members with HIV or AIDS.

When first faced with these overpowering numbers, some of our groups made mistakes. Fear and ignorance separated groups and members from open-mindedness and the ability to care for all their members. Much worse than that was the isolation felt by members living with the virus. Recovery in this fellowship can be tough enough when we are accepted. When we are rejected, recovery may seem impossible.

The only requirement for membership, according to our Third Tradition, is the desire to stop using drugs. Nothing more, nothing less. It seems simple enough to remember, but fear and ignorance can be strong influences. Groups which began experiencing large numbers of members who were HIV positive learned that when there is an "us" and "them", someone is being treated differently, and our groups suffer. These groups learned that a group's survival depends upon autonomy, anonymity, unity, and our Fifth Tradition. A group's primary purpose must remain constant: to carry the message of recovery to addicts who still suffer. Having learned from these mistakes, these groups may understand this tradition better than most because the meeting topics, though often reflecting our struggle with HIV and AIDS, are centered on recovery from addiction.

"Anonymity is the spiritual foundation of all our traditions." We may need to remind ourselves to use caution in relating some of our experience. Some members may feel they need to share about their illness only with their sponsor or a close friend, while others choose to discuss their experience with HIV or AIDS openly at meetings. Ideally, a meeting is a haven where we can all feel and be safe to share. Regardless of how we share--whether one-on-one or in a meeting--it is important that we do share.

Some of us with HIV or AIDS come to NA with weakened immune systems. At times, we may not be able to get to meetings or might be too ill to go out at all. We may be dealing with the necessity of taking medications. Some of our literature, such as *In Times of Illness* and the Tenth Chapter of our Basic Text, give us experiences with having to deal with doctors and medication in our recovery. For those who are hospitalized or bedridden at home, we have publications like *The NA Way Magazine* and *Meeting by Mail*.

If we believe that one addict sharing with another is without parallel, then we need to understand that this concept applies not only in times of joy but also in times of sorrow and grieving. In our consideration of the HIV/AIDS issue, let us be honest, open-minded, supportive, and nurturing. Let us unite to learn, unite in our prayers, and unite in the spirit of love so that our ignorance may be replaced with open-mindedness and the willingness to learn.