

ABOUT A.A.

With an estimated membership of over two million, attending more than 123,000 A.A. groups in approximately 180 countries, A.A. is a global phenomenon. In Great Britain and English speaking Continental Europe – there are approximately 5,500 meetings, both face-to-face and online.

In 2020, a sample of 1,800 A.A. members from Great Britain and English speaking Continental Europe participated in a membership survey, which has been conducted since 1978 by the General Service Board of A.A.G.B.

A.A. G.B. carries out the survey to inform its members of current trends in membership characteristics. The survey also provides information about A.A. to the professional community and the general public, as part of A.A.'s primary purpose, of helping those experiencing problems with alcohol.

COOPERATING WITH PROFESSIONALS

A.A. aims to improve communications with healthcare professionals. Many members have come to AA as a consequence of contact with a well-informed professional. We seek to cooperate with the medical profession and others in our attempts to reach those with our problem.

In all our work with medical professionals our sole objective is to help those suffering from problems with alcohol. If you would like more information or to make contact with our local Health Liaison Officer, please follow the links overleaf.

“It must never be forgotten that the purpose of Alcoholics Anonymous is to sober up alcoholics. There is no religious or spiritual requirement for membership. No demands are made on anyone. An experience is offered which members may accept or reject. That is up to them.”

- Bill W (Co-founder)

A.A. PREAMBLE[©]

Alcoholics Anonymous is a fellowship of people 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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For general information of A.A. in Great Britain:
www.alcoholics-anonymous.org.uk/



English speaking A.A. in Continental Europe
www.alcoholics-anonymous.eu/

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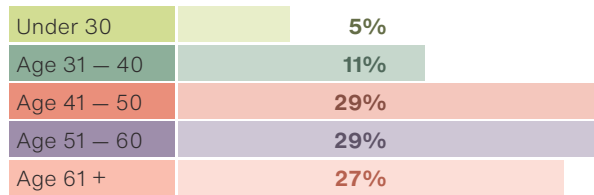
ALCOHOLICS ANONYMOUS

GREAT BRITAIN AND ENGLISH SPEAKING CONTINENTAL EUROPE

MEMBERSHIP SURVEY 2020



AGE OF MEMBERS

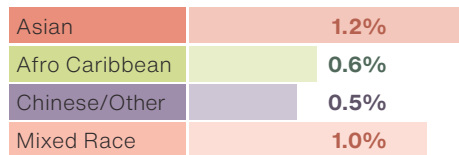


Membership of A.A. in Great Britain and English speaking Continental Europe is estimated to be 26,700.

GENDER OF MEMBERS

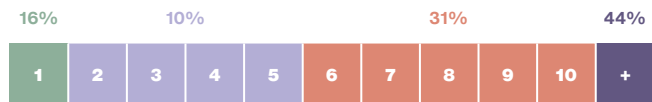


ETHNICITY OF MEMBERS



There are significantly more white members of A.A. (96.8%) than other ethnic groups.

LENGTH OF SOBRIETY (YEARS)



Less than 1 year • Between 1 - 2 years • Between 3 - 10 years • 10 years plus

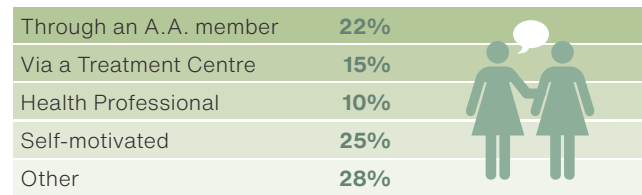
75% of members have 3 or more years of continuous sobriety.

MEETING ATTENDANCE

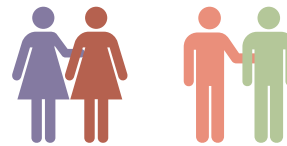
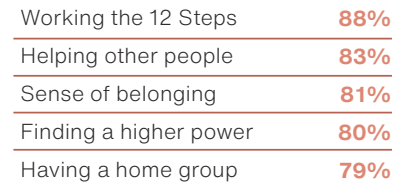


Members attend an average of **3.4 A.A. meetings** per week. 95% of members attend A.A. meetings on a regular basis.

INTRODUCTION TO A.A.

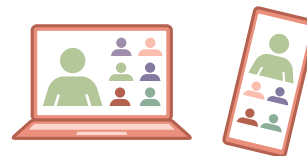


WHAT PROMOTES RECOVERY?

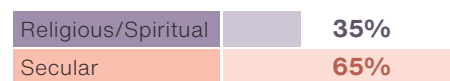


A.A. RESPONSE TO COVID

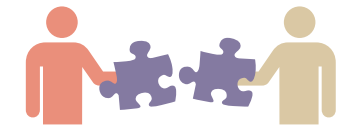
A.A. in GB and Continental Europe responded to the 2020 COVID lockdown almost immediately by moving meetings online. **93% of groups** changed to online format and/or hybrid meetings.



AN INCREASING SECULAR MEMBERSHIP



Although 90% of members have a spiritual concept, for **two thirds** of them, their concept is contained within a secular framework.



ADDITIONAL HELP ...

Before coming to A.A. **60%** of members received some type of treatment or counseling (e.g. medical, psychological, spiritual, etc.) related to their drinking.

After coming to A.A. **33%** of members received some type of treatment or counseling (e.g. medical, psychological, spiritual, etc.) related to their drinking.

36% of those members who received treatment or counseling said it played an important role in their recovery.



CO-EXISTING MENTAL HEALTH CONDITIONS

As well as their problematic drinking, **45%** of the people who came to A.A., reported they had been diagnosed with co-existing mental health conditions. The most frequently reported mental health conditions were depressive (**73%**) and anxiety (**39%**) disorders, while **11%** reported being diagnosed with PTSD/CPTSD*

*Complex post-traumatic stress disorder

EMPLOYMENT STATUS OF A.A. MEMBERS

