

shortcomings, as well as inconsistent values, beliefs, words, and behavior.

We identify the neglect, loss, fear, abuse, and trauma we suffered.

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 God to remove our shortcomings.

Steps 8 – 11 (Clean Up)

8. Made a list of all persons we had harmed and became willing to make amends to them all.

We come out of denial by learning about family systems of dysfunction including addicts and codependent victims, sort out which roles each family member including ourselves enacted and own up to having hurt ourselves and others. We then focus on ourselves and make our lists of whom we hurt and how we hurt them.

9. Made direct amends to such people wherever possible, except when to do so would injure them or others.

When we feel the neglect, loss, fear, abuse, and trauma we suffered, we express our feelings about them and grieve them.

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 understand God, praying only for knowledge of God's will for us and the power to carry it out.

As our own loving parents, we begin re-parenting ourselves by building healthy lives. We work to change our negative beliefs to positive beliefs. We learn to be trustworthy and how to determine when to trust others. We become assertive, set limits, and identify boundaries. We improve self-esteem. We assist our Inner Children to complete their stages of emotional development. Finally, we build our lives to reflect who we are and who we want to become.

Step 12 (Step Up)

Having had a spiritual awakening as a result of these steps, we tried to carry this message to others who still suffer, and to practice these principles in all our affairs.

By Step 12, we are continually doing service in ACA at our meeting, Intergroup, Region, and World Service boards and committees.

By Step 12, we have achieved the ACA Promises.

By Step 12, we are involved with healthy individuals and working in our communities practicing functional behavior.



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Mentoring in ACA



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Mentoring Program in ACA

Newcomers to ACA often face confusion about the recovery process due to the sequencing and the many components to address as they climb the 12 Steps.

Too often newcomers come to a meeting or two and become overwhelmed by the complexity of our program. Our newcomers hear the 14 characteristics of an adult child. They also hear people revealing taboo family secrets. This can make newcomers very fearful and uncomfortable.

The ACA mentoring program is designed to provide one-to-one support to newcomers in their first six weeks in ACA. Mentors orient newcomers to the ACA program of recovery and service.

After four weeks, the mentor educates the mentee on what to look for in their first ACA sponsor and how to ask someone to sponsor him. Two weeks later, the mentor presents the newcomer with his 6-week graduation program chip.

What ACA Mentors Do

- Establish a social connection with mentees through fellowship
- Answer newcomers' questions
- Share their own story of family dysfunction
- Provide information about the ACA program, recovery, and service
- Provide their own contact information and meeting phone list
- Explain ACA Steps
- Explain techniques in ACA recovery
- Share their own processes & techniques used in ACA recovery

- Encourage mentee to participate in meeting service (greeter, refreshments, literature, leader, phone lists, etc.)
- Introduce mentees to the service structure of ACA
- Participate with mentees in ACA events, education, and service opportunities

Explain the ACA Recovery Process

Mentors need to explain the overview of ACA recovery to newcomers. ACA recovery is about using the 12 Steps to grow up through the stages of emotional development by working through the unresolved experiences of neglect, loss, fear, abuse, and trauma.

Techniques Used

Learning as an Equal

The mentor takes part in the learning process with the mentee as an equal learner.

Building the Foundation

The mentor provides the mentee with information that the mentee may not understand at the time, but the mentee will have it and be able to use it when it is needed.

Recognizing Opportunity

When the mentee is ready, the mentor encourages the mentee to act, reframe his thinking, rethink his own identity, and sort out his own values from those he learned in his dysfunctional family.

Demonstrating & Sharing

The mentor demonstrates how to work through a real world problem by sharing his experience, strength, and hope on an issue he has worked through and resolved.

Reflecting Mentee's Progress

When the mentor becomes aware that the mentee has made progress in recovery, he points it out so the mentee realizes his own progress.

The Solution

We adopt the program precept: *The solution is to become your own loving parent.* As loving parents to our Inner Children, we guide them through the stages of healthy emotional development. In the Steps below, we have included the developmental milestones.

12 Steps in ACA Recovery

Steps 1-3 (Give Up)

1. We admitted we were powerless over the effects of alcoholism or other family dysfunction, 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 understand God.

Steps 4 – 7 ('Fess Up)

4. Made a searching and fearless moral inventory of ourselves.

We inventory our emotional foundations (values, beliefs, words, and actions).

We define our identity – likes and dislikes, needs and wants, talents and