

## Buddhist Recovery Christchurch

### Guidelines

#### ***General***

The Buddhist Recovery meetings offer a Buddhist perspective to the recovery process, and complement the 12 step program of AA.

They are not an AA meeting and they are not an alternative to AA meetings. Those who attend Buddhist Recovery meetings are encouraged to carry on with their regular recovery path.

The meetings are respectful of all paths of recovery, all Buddhist traditions, and individual Buddhist practice. The meetings are open to members of any 12 step program, or any Buddhist practitioner, and any professional working with addiction.

The meetings are 'not-for-profit', dana/koha will be gratefully accepted to help with running costs

#### ***Membership***

There are no joining fees.

The meetings will be led by a facilitator and anyone who turns up will be considered a member.

The meetings will follow the AA tradition of anonymity and confidentiality. Who is seen and what is heard at the meeting, stays at the meeting.

#### ***Prerequisites***

It is requested that those attending abstain from their addictive substance or behaviour for at least 24hr prior to the meeting. It is also strongly suggested that those attending be formally on a recovery path (AA or other).

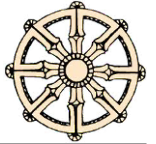
Previous meditation practice is preferable but not required. Basic instruction will be given prior to the meeting, the facilitator must be advised 24hr before the meeting.

Previous knowledge of Buddhism and the dhamma is preferable but not required.

Working a 12 step program to step 11 is preferable but not required.

# Open Dhamma

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## **Format**

The meeting starts promptly at 7:15

- Preamble is read
- Check-in (10 minutes total)
- Meditation (20 minutes)
- Leg stretch and cup of tea in silence (10 minutes)
- Reading of Step material
- Discussion on Step material, and anything that arises from the check-in
- Sitting/meditation/reflection/contemplation on the discussion, in silence (10 minutes)

Meeting ends with recitation of the Serenity Prayer and transference.