



# Crystal Meth Anonymous<sup>TM</sup>

## **Fellowship Survey Report**

### **Public Information and Outreach Advisory Committee**

October 2014

The Public Information and Outreach Advisory Committee (PI&O) of Crystal Meth Anonymous (CMA) is pleased to share with you the results of our first-ever Fellowship Survey. The purpose of the Survey was to provide CMA's trusted servants with insight as to how to better serve the Fellowship.

The process to conduct this Survey began in 2011 and came to fruition in late 2012. Many trusted servants have dedicated time, effort, love, and service to make this happen. Our efforts were coordinated with the Communications Advisory Committee and their assistance was integral to the success of the project.

We have not done any analysis of the responses – in other words, this report is simply a summarization of the data as it was provided to us. The only additional data points, as applicable, are (1) percentages, and (2) the number of non-responses. Percentages are provided as a portion of those who responded to that question, unless otherwise noted. At the request of the Fellowship, we have determined how many participants chose to not answer a question.

Also included are selected comments provided by Survey participants. These comments were selected by members of the Fellowship who assisted PI&O with the data entry process. The full list of comments can be made available upon request.

The Survey, as it was provided to the Fellowship (along with the FAQ page), is included at the end of this report.

We serve at the pleasure of the Board and in service to the Fellowship. Any comments, questions, support and feedback are welcomed. It is our hope that this tool will serve the Fellowship in continuing to carry the message of recovery.

We hope that members of the public who come into contact with crystal meth addicts will benefit and help them connect active addicts with the solution CMA offers.

For more information, please see our website : <http://crystalmeth.org>

To contact us directly, please email us at : [survey@cmagso.net](mailto:survey@cmagso.net)

Yours in Service,

Public Information & Outreach Advisory Committee

Having received no communication or survey responses from approximately half of the Areas where we believe there to be Crystal Meth Anonymous (CMA) meetings, we cannot accurately estimate the number of members in the Fellowship. For this and other reasons, the data we are presenting is not a statistically relevant analysis. Instead, it is a reflection of the Fellowship at this time based solely on the survey responses we did receive.

The Survey was conducted in paper form only. With the assistance of the Communications Advisory Committee, we provided advance notice of the Survey via email. The Survey was sent as a PDF via email to all registered Trusted Servants. We relied on the service structure to disseminate, print, distribute, collect and return completed surveys. The Survey was open to anyone in a CMA meeting who identified as a member of CMA.

According to CMA Registrar, there are registered groups in approximately 40 states (including the District of Columbia) and seven foreign provinces. We received responses from 21 states (including the District of Columbia) and six foreign provinces. It is our hope that future iterations of the Survey will reach a broader representation of the Fellowship.

**Table of Contents**

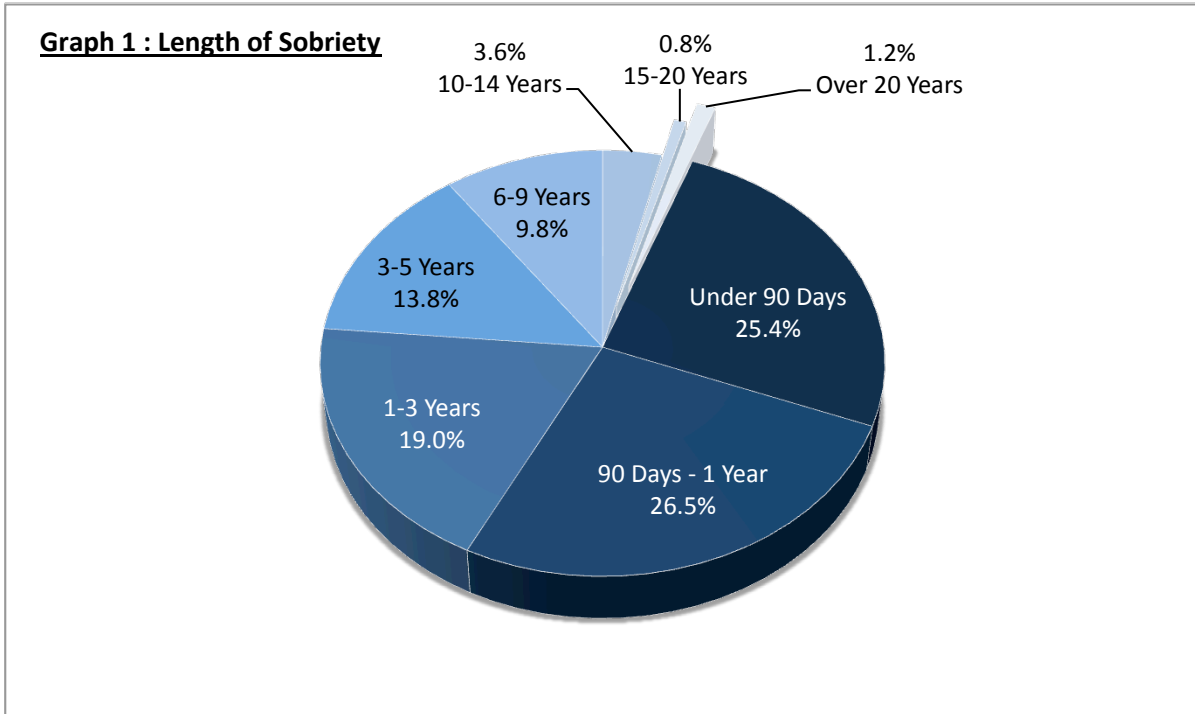
<u>Item</u>	<u>Page</u>
Respondents by locality	1
Length of sobriety	2
How we found CMA	2
Substance history	3
Attempts at recovery	3
Number of meetings	4
Other 12-Step meetings	4
Working the Steps	5
Frequency of working the Steps	5
Attended rehab	6
Sponsor	6
Sponsees/Education level	7
Attended college	8
Degree earned	8
Incarceration	9
Age	9
Race	10
Primary language	10
Gender	11
Orientation	11
Occupation	12
Service work	12
More local meetings	13
Informed of CMA events	13
Selected comments	14
Appendix – 2013 membership survey form	15
Appendix – 2013 FAQ	16

We received a total of 2,092 responses from 21 states, 4 Canadian provinces, London & Sydney.  
See Table 1.

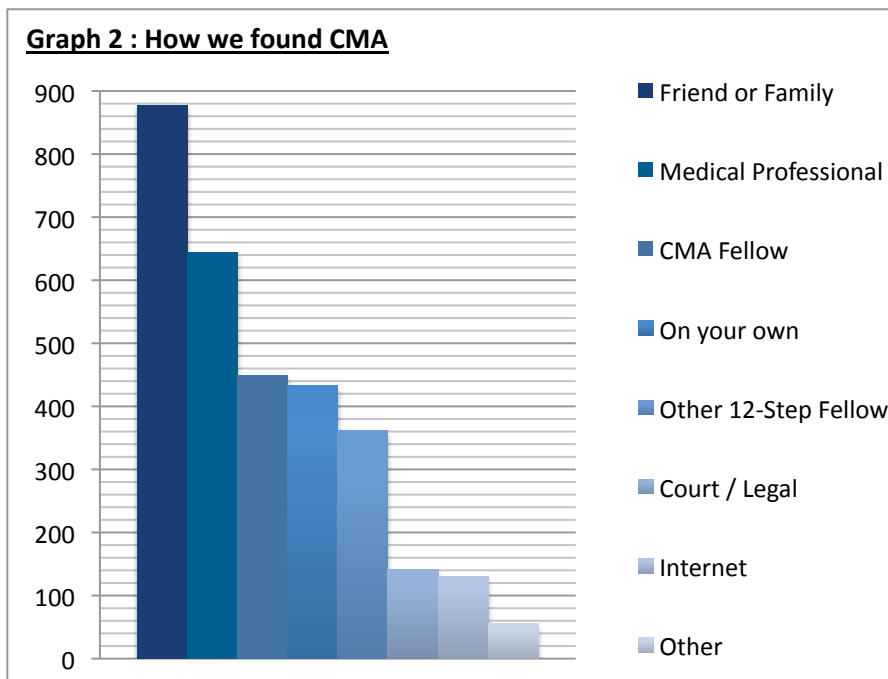
**Table 1 : Respondents by locality**

<u>State / Province</u>	<u>Count</u>	<u>Percentage</u>
Alberta (Canada)	44	2.11%
Arizona	85	4.07%
British Columbia (Canada)	18	0.86%
California	960	45.96%
Colorado	146	6.99%
Connecticut	37	1.77%
District of Columbia	10	0.48%
Florida	50	2.39%
Georgia	89	4.26%
Greater London (England)	18	0.86%
Illinois	43	2.06%
Kentucky	5	0.24%
Massachusetts	17	0.81%
Minnesota	83	3.97%
Nebraska	2	0.10%
Nevada	152	7.28%
NS Wales (Australia)	13	0.62%
New York	94	4.50%
North Carolina	26	1.24%
Ontario (Canada)	1	0.05%
Oregon	16	0.77%
Pennsylvania	16	0.77%
Quebec (Canada)	13	0.62%
South Carolina	2	0.10%
Texas	63	3.02%
Utah	18	0.86%
Washington	68	3.26%
	2,089	
No response :	3	
<u>US States with no respondents</u>		
Alabama, Alaska, Arkansas, Delaware, Hawaii, Idaho, Indiana, Iowa, Kansas, Louisiana, Maine, Maryland, Michigan, Mississippi, Missouri, Montana, New Hampshire, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Rhode Island, South Dakota, Tennessee, Vermont, Virginia, West Virginia, Wisconsin, Wyoming		

Half of the respondents had less than one year of continuous sobriety and about one-fifth had more than six years as shown in Graph 1.



Respondents have arrived at the doors of CMA through a variety of experiences. Friends & families and the medical community continue to be some of the strongest supporters. Note that for this question, multi-response was permitted. See Graph 2.



While most have used crystal methamphetamine, approximately 8% of respondents have not. Respondents reported history with a multitude of other substances. See Table 2.

**Table 2 : Substance History**

<u>Substance</u>	<u>Count</u>	<u>Percentage</u> <sup>1</sup>
Meth/Speed	1,914	91.49%
Alcohol	1,525	72.90%
Cocaine / Crack Cocaine	1,233	58.94%
Marijuana	1,207	57.70%
Pills	822	39.29%
Psychedelics / Hallucinogens	750	35.85%
Depressants	510	24.38%
Heroin / Opiates	410	19.60%
GHB	190	9.08%
Ecstasy / MDMA	104	4.97%
Ketamine	71	3.39%
Poppers	32	1.53%
Inhalants	14	0.67%
Spice / Bathsalts	7	0.33%
Entheogens	6	0.29%
PCP	3	0.14%
Cough Syrup	2	0.10%

Note 1 : Percentages for this question are based on the number of Survey responses

Approximately 70% of respondents reported having made more than one attempt to get and stay clean. See Table 3.

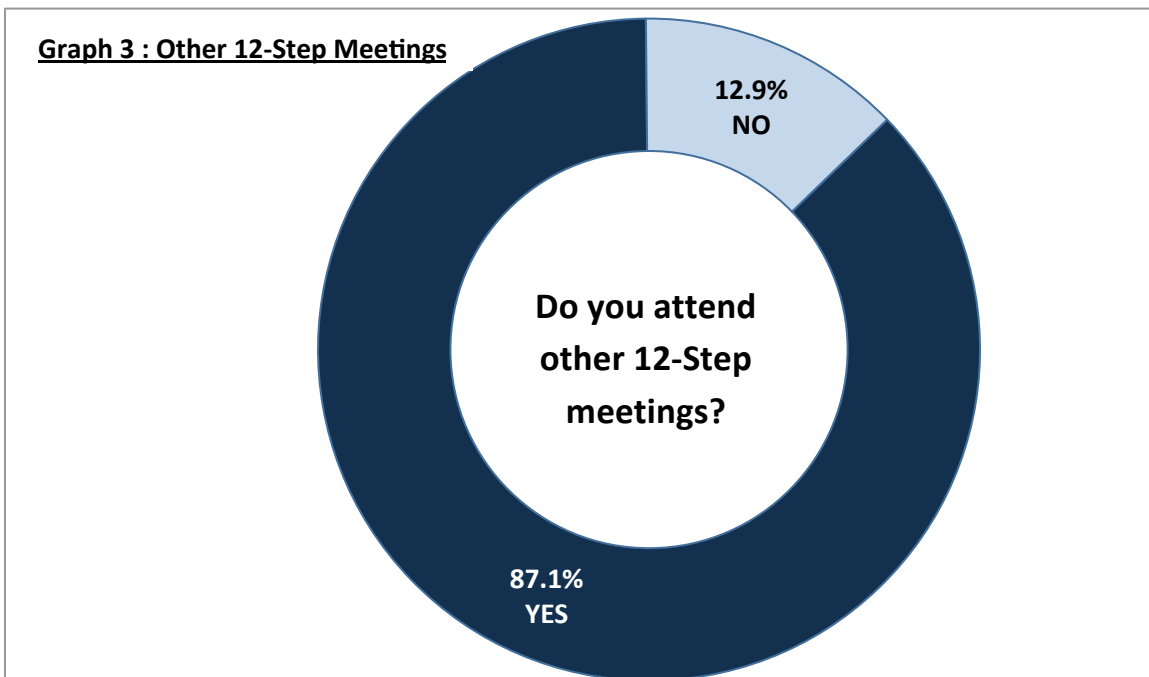
**Table 3 : Attempts at Recovery**

<u>How many attempts at recovery have you made?</u>	<u>Count</u>	<u>Percentage</u>
1	589	29.45%
2	398	19.90%
3	266	13.30%
4	132	6.60%
5	81	4.05%
More than 5	534	26.70%
	<u>2,000</u>	
No response :	92	

Slightly more than half of respondents attend between 2 and 4 meetings per week and the majority of respondents attend other 12-Step meetings. See Table 4 & Graph 3.

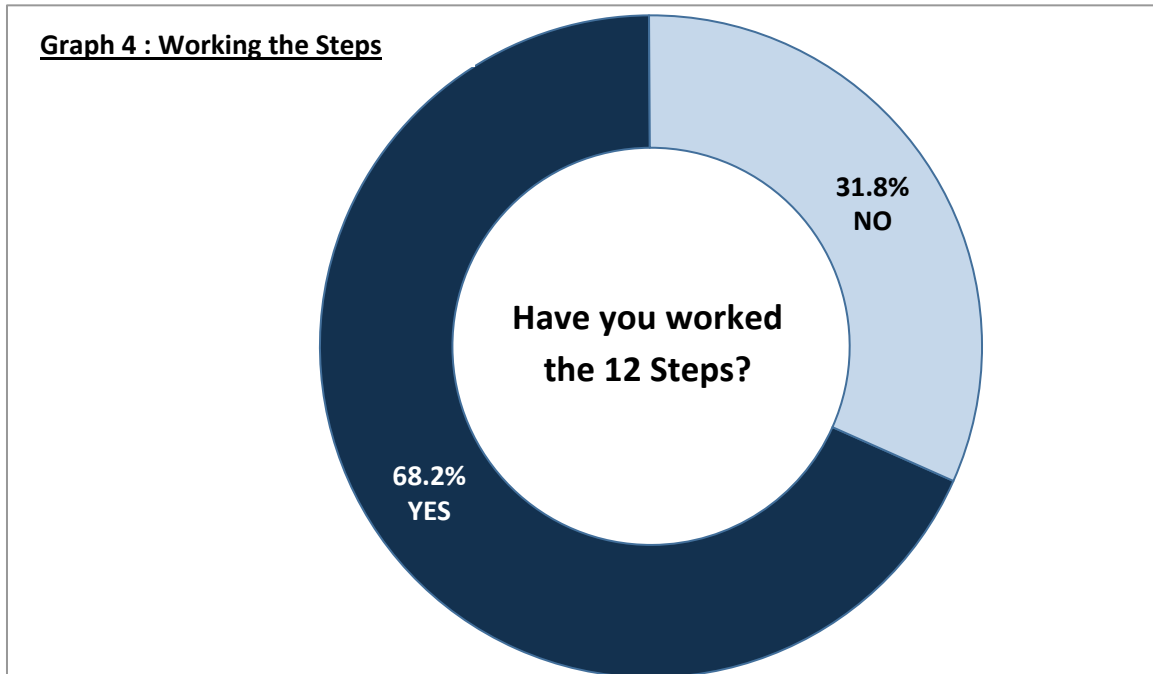
**Table 4 : Number of Meetings**

<u>How many CMA meetings a week do you attend?</u>	<u>Count</u>	<u>Percentage</u>
1	716	35.89%
2	474	23.76%
3	389	19.50%
4	170	8.52%
5	121	6.07%
6	50	2.51%
7	52	2.61%
more than 7	23	1.15%
	<u>1,995</u>	
No response :	97	





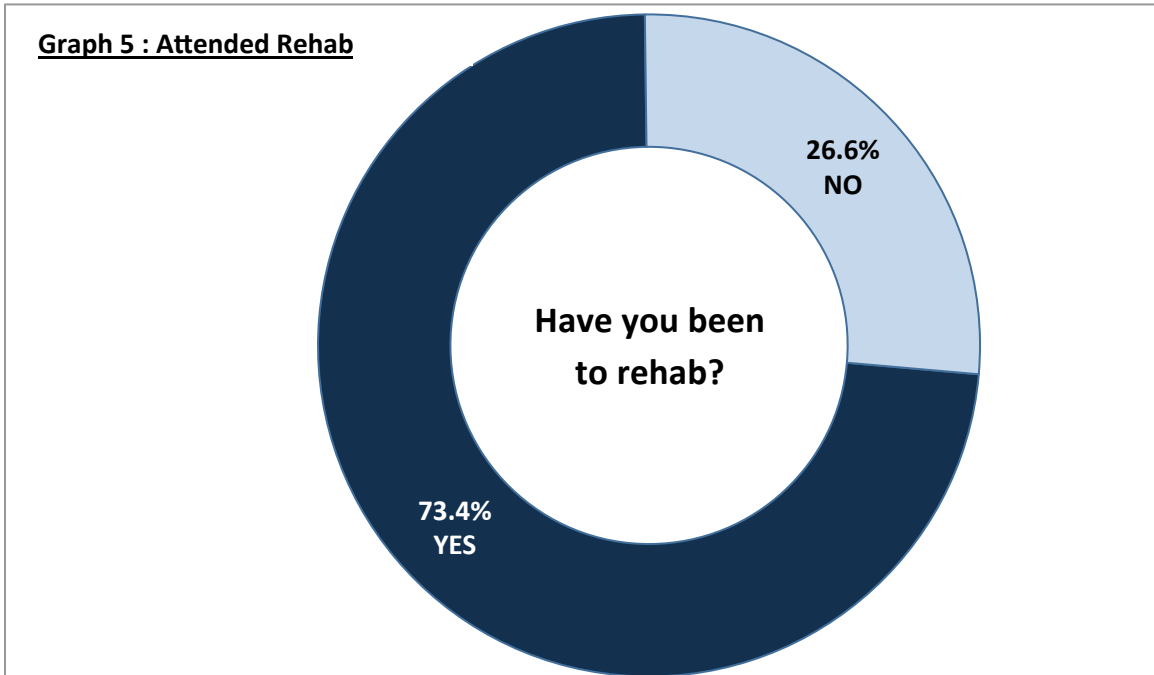
Most respondents have or are currently working the 12 Steps and many have done so multiple times. See Table 5 & Graph 4.



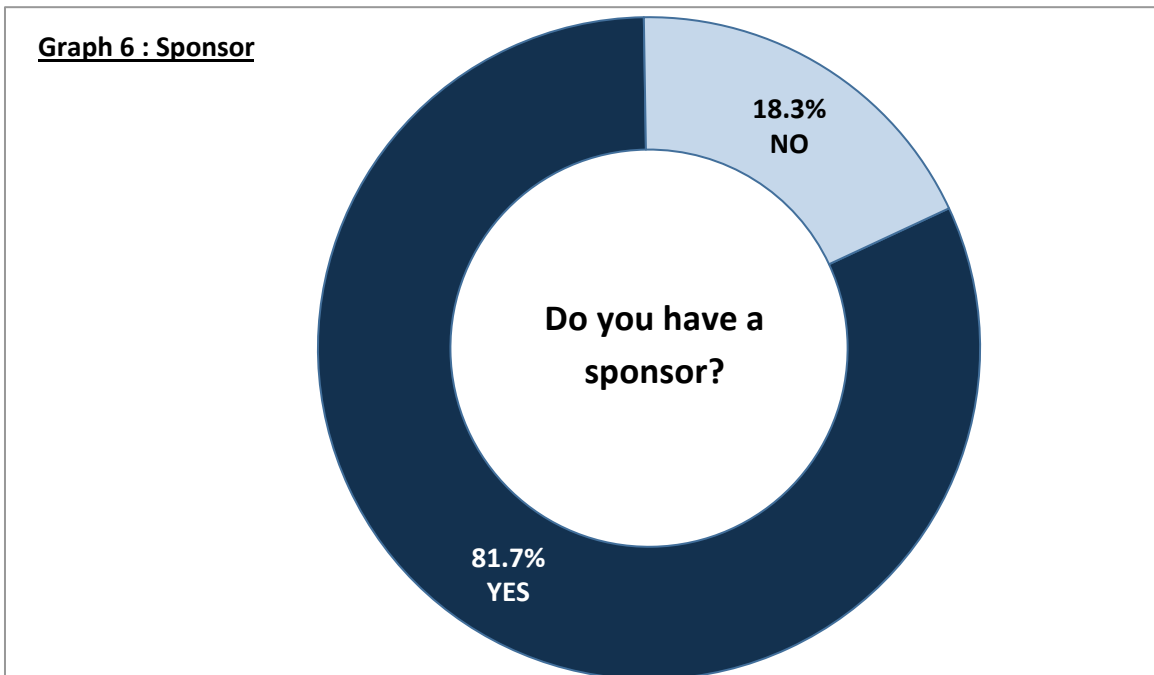
**Table 5 : Frequency of Steps**

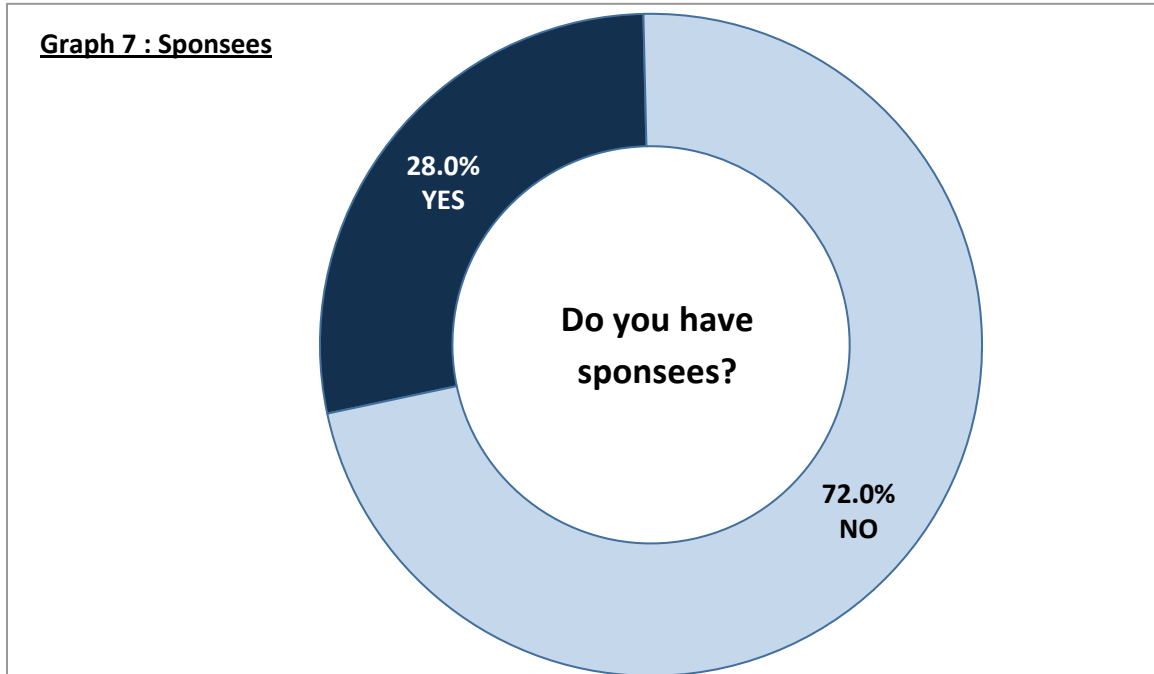
<u>If so, how many times?</u>	<u>Count</u>	<u>Percentage</u>
1	651	50.12%
2	299	23.02%
3	156	12.01%
4	61	4.70%
5	32	2.46%
6	2	0.15%
more than 6	98	7.54%
	<u>1,299</u>	

Nearly three-quarters of respondents have been to a rehab facility. See Graph 5.



A majority of respondents have a Sponsor. A small portion of respondents serve as Sponsors – this may be due, in part, to a large number of respondents who reported less than one year of continuous sobriety. See Graphs 6 & 7.



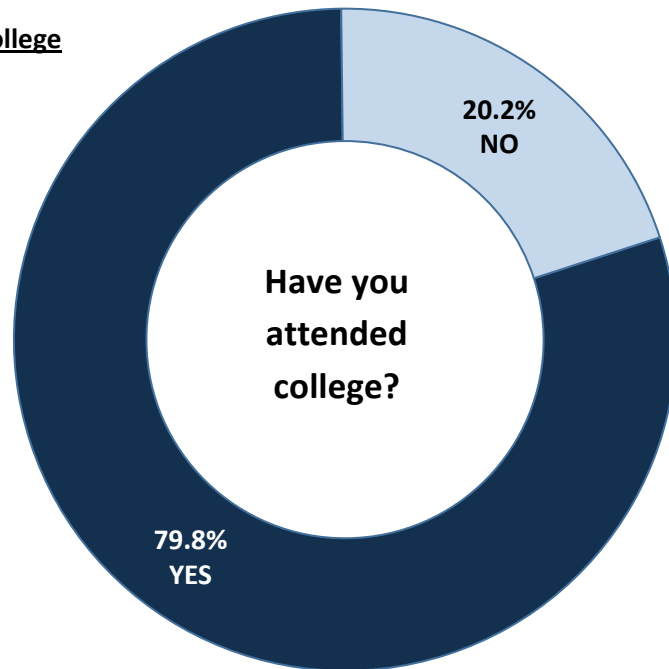


The education demographics show that three-quarters of respondents have attended secondary education and many have earned a degree. See Table 6 and Graphs 8 & 9.

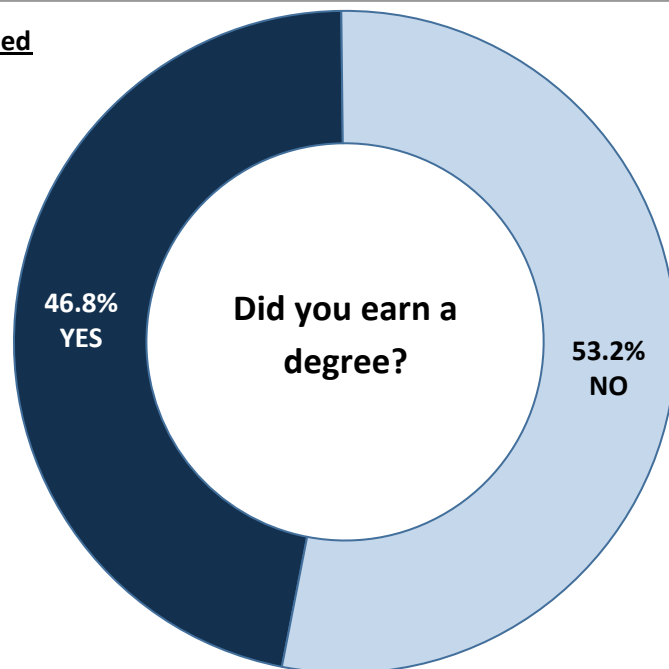
**Table 6 : Education Level**

<u>Highest Educational Level</u>	<u>Count</u>	<u>Percentage</u>
Less than high school degree	179	8.68%
High school degree or equivalent (e.g. GED)	406	19.68%
Some college but no degree	564	27.34%
Associate degree (e.g. AA, AS)	156	7.56%
Bachelor's degree (e.g. BA, AB, BS)	500	24.24%
Master's degree (e.g. MA, MS, MBA)	187	9.06%
Professional degree (e.g. MD, DDS, JD)	45	2.18%
Doctorate degree (e.g. PhD)	26	1.26%
	<u>2,063</u>	
No response:	29	

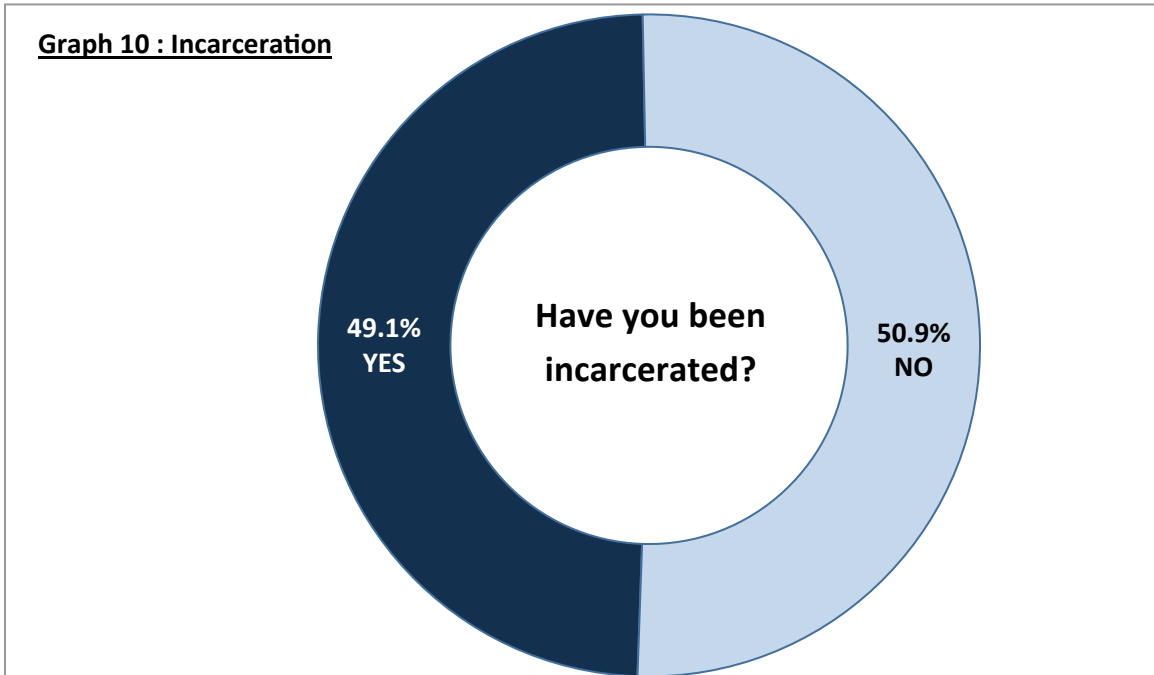
**Graph 8 : Attended College**



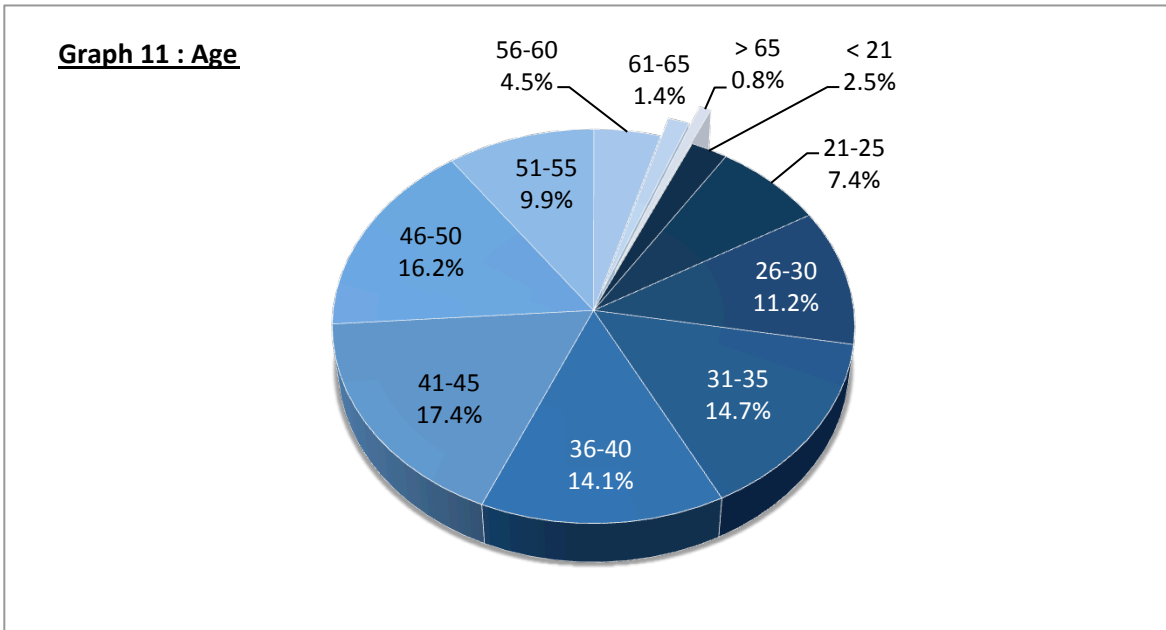
**Graph 9 : Degree Earned**



Nearly half of respondents reported having been incarcerated. See Graph 10.



Respondents covered a full range of ages – about half are in the 36-50 demographic range. See Graph 11.



Three-quarters of respondents identify as White/Caucasian. Respondents represent many other races and ethnicities. English as a primary language was the modal response. See Tables 7 & 8.

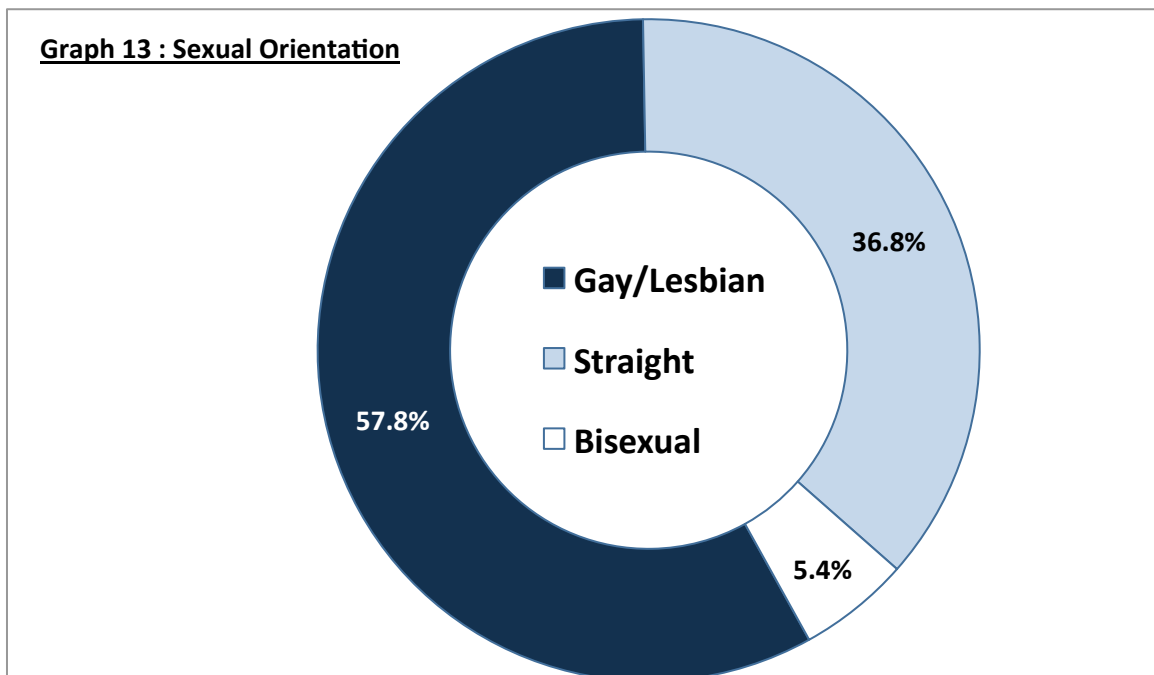
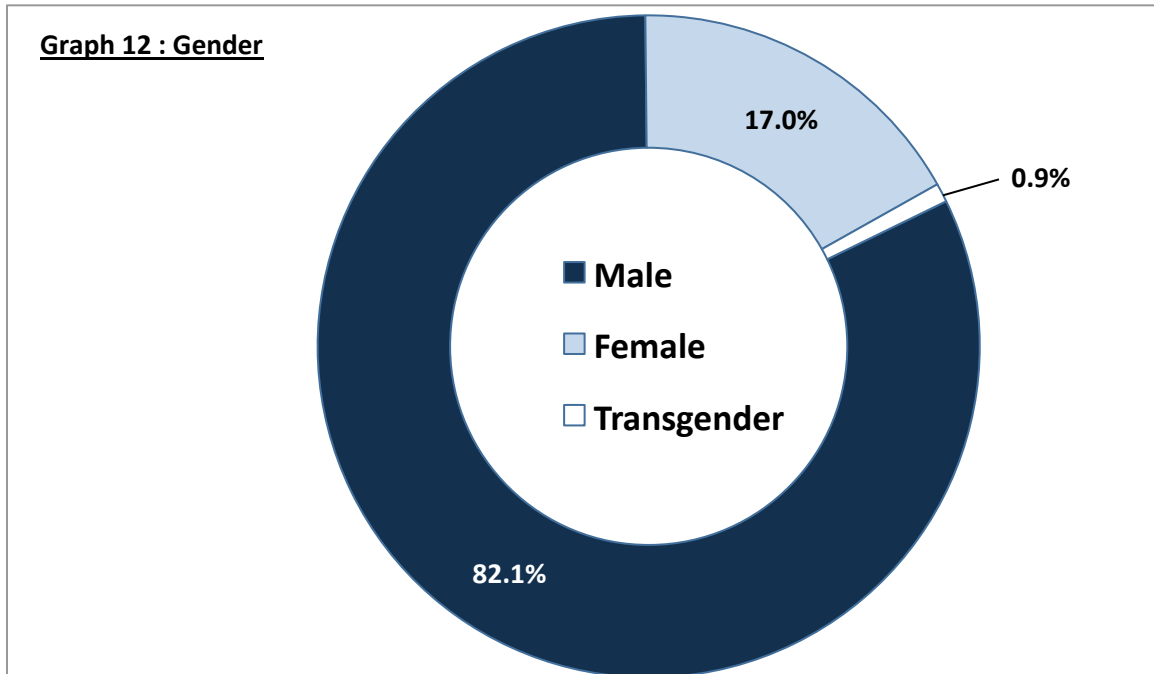
**Table 7 : Race**

<u>Race</u>	<u>Count</u>	<u>Percentage</u>
Aboriginal	1	0.05%
African-American / Black	88	4.37%
Asian / South Asian	58	2.88%
Caucasian / European / White	1,519	75.46%
Hispanic / Latino	231	11.48%
Middle Eastern	6	0.30%
Multiracial	70	3.48%
Native American	37	1.84%
Pacific Islander	3	0.15%
	2,013	
No response :	79	

**Table 8: Language**

<u>Primary Language</u>	<u>Count</u>	<u>Percentage</u>
Multilingual	5	0.25%
Arabic	1	0.05%
Croatian	1	0.05%
Dutch	1	0.05%
English	1,970	96.57%
Farsi	1	0.05%
French	15	0.74%
Hmong	1	0.05%
Italian	1	0.05%
Nepali	1	0.05%
Portuguese	2	0.10%
Russian	1	0.05%
Somali	1	0.05%
Spanish	38	1.86%
Tagalog	1	0.05%
	2,040	
No response :	52	

Survey respondents were largely male and more than half identified as gay or lesbian. See Graphs 12 & 13.



Respondents have a wide variety of occupational backgrounds and about two-thirds do service work for CMA, in addition to their day jobs. See Tables 9 & 10.

**Table 9 : Occupation**

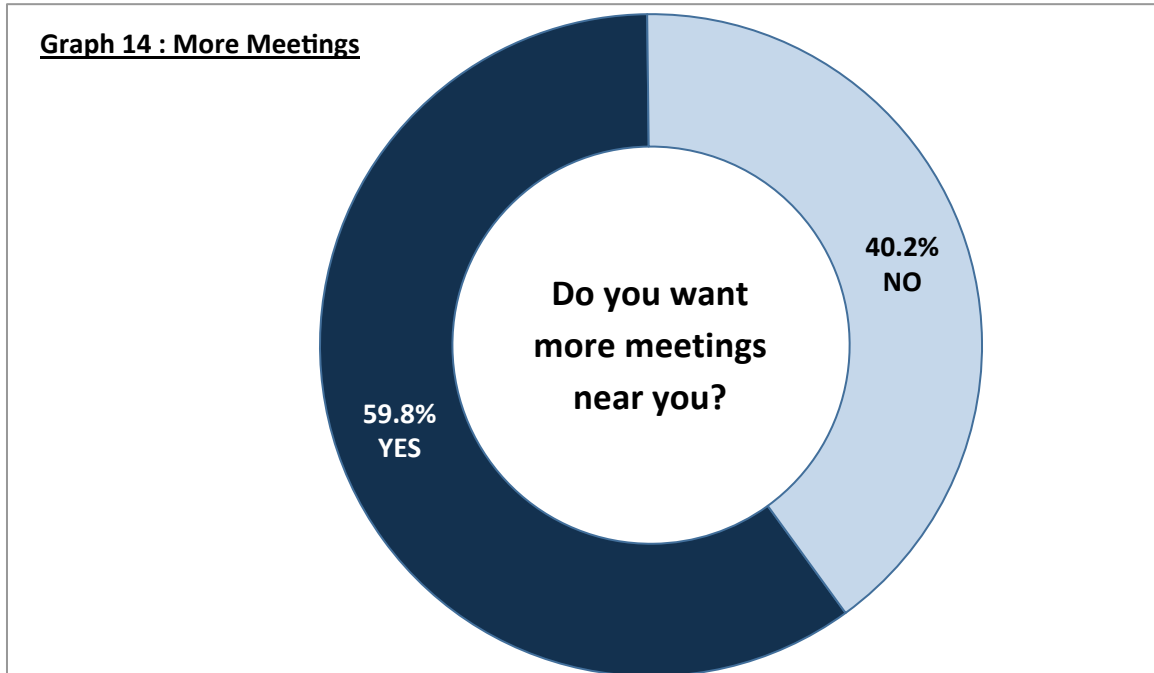
<u>Occupation</u>	<u>Count</u>	<u>Percentage</u>
Accountant / Financial	80	4.21%
Administrative	174	9.16%
Art / Creative / Design	57	3.00%
Community / Non-Profit	21	1.11%
Education	46	2.42%
Engineering	15	0.79%
Government	29	1.53%
Health & Wellbeing	188	9.89%
Homemaker / Stay-at-Home-Parent	17	0.89%
Hospitality / Retail	248	13.05%
Information Technology	64	3.37%
Legal / Insurance	37	1.95%
Other	35	1.84%
Personal Health / Fitness / Beauty	46	2.42%
Real Estate / Property Management	16	0.84%
Retired / Disabled / Not Applicable	349	18.37%
Sales / Marketing / Public Relations	152	8.00%
Self-Employed	35	1.84%
Skilled Labor (Construction, Auto, etc.)	208	10.95%
Student	83	4.36%
	<u>1,900</u>	
No response :	192	

**Table 10 : Service**

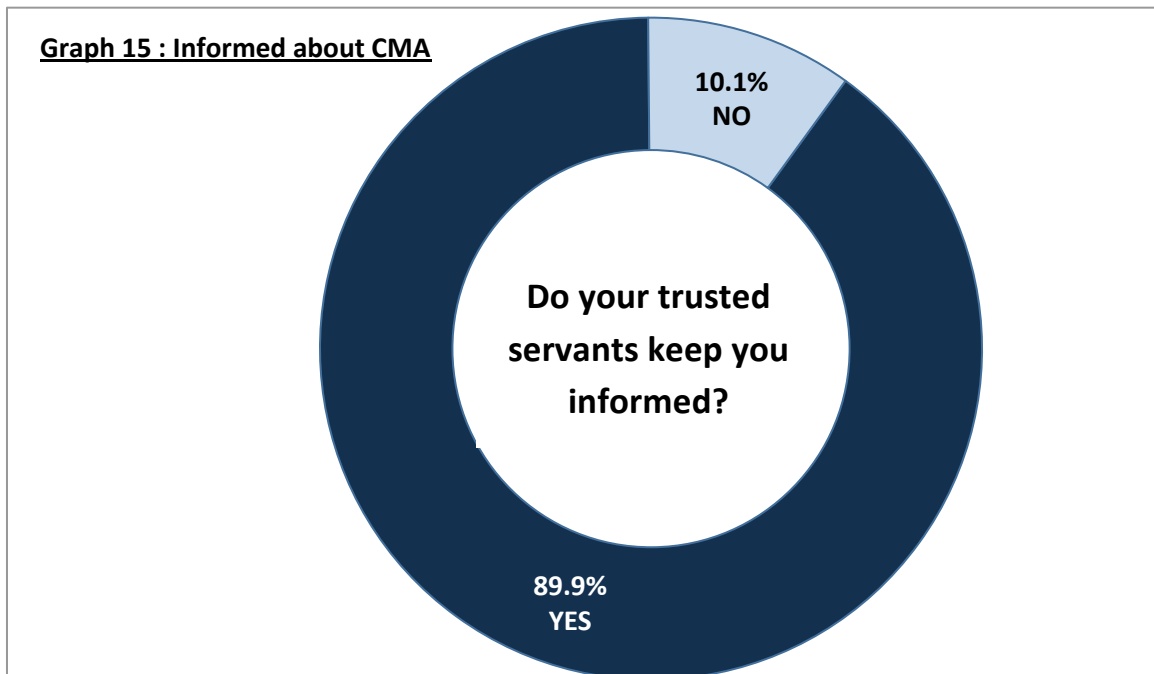
<u>Service Commitments</u>	<u>Count</u>	<u>Percentage<sup>1</sup></u>
Group	1,027	49.09%
District	166	7.93%
Area/Region	118	5.64%
World	36	1.72%
Not at this time	903	43.16%
Note 1 : Percentages for this question are based on the number of Survey responses		



A large portion of respondents want more meetings in their localities. See Graph 14.



An overwhelming majority feel that their trusted servants keep them connected and informed of CMA events. See Graph 15.



**Selected Comments**

I think there should be a CMA events page or letter for updates on current announcements - we don't have many announcements. :(
Excited to be part of a group that is continuing to grow. Thanks for reaching out w/ this survey.
GSRs should be supported with training/guidance in responsibilities
This program - and this particular fellowship - saved my life.
CMA saved my life. Truly grateful for the support, the family, the love & the solution found here
Metal medallions only go to ten. We need to go higher, which is a good problem to have.
Our fellowship has grown and become an amazing means of recovery
Getting the word out about our group will be helpful to increase our membership. Also, it's been a challenge trying to get a speaker.
A daily reader would be great. Also, a pamphlet about medications and/or health issues for the addict (CMA).
CMA works Thank U
We need more meetings in rural/small cities where there is lots of meth but no CMA : Medford OR; Reno; NoCal; Inland Empire; Fresno
Would like to see a broader spectrum of people, men/women/straight/gay in CMA meetings. Outreach need to work harder.
CMA saved my life & family :)
CMA is the meeting I feel most comfortable in. I can share openly with no judgment; I don't get chastised for saying sober instead of clean and vice versa. I feel at home in CMA and have made life-long friends here.
I LOVE THIS FELLOWSHIP
We need more CMA stories for readings. Would like to start a meeting in Capetown, South Africa.
Just praise and gratitude - this is the first attempt at recovery in 30 years of addictions that is working today.
I love CMA. It has brought me to a new understanding of how my life was unmanageable. I am very thankful and grateful for all the 12 step programs and CMA in particular. Thanks for my life
People from other groups should travel and visit other meetings to share about their groups and to network
CMA changed my life and allowed me to personally identify with recovery. Thank you.