

HIMS Monitor Guidelines

1. Ensure the recovering pilot takes responsibility for his or her own recovery. Every successful recovering person must, in time, take responsibility for his or her sobriety. AA and the continuing care, or monitoring, plan provides an external support structure. The goal of the monitoring period is to move the pilot from “coerced sobriety” to “choosing abstinence.” Or, in other words, from external monitoring to self-monitoring. Monitors who insist their pilots fulfill their recovery obligations, whether those requirements are mandated by an AA Sponsor, FAA, or company agreement, enhance this process. Examples of taking responsibility and making recovery a priority include: scheduling face-to-face monthly meetings as soon as practical following the release of the pilot’s schedule, bidding a schedule which permits attendance at therapy and peer group meetings, encouraging family participation in Al-Anon or other support groups, etc.

2. Be a mentor, not a sponsor. An AA Sponsor’s relationship with their “sponsee” is a privileged one. A recovering person rightly expects their sponsor will provide support and counsel but will also maintain a very high level of privacy regarding information that is shared. If a sponsee shirks his responsibility, lies to others, or engages in relapse behavior, the sponsor will not normally discuss this situation with others. By contrast, a HIMS Monitor has an obligation to report such behavior to other members of the pilot’s support team. In all cases, both the HIMS Monitor and the recovering pilot need to remember the Monitor is providing an oversight function and is required to report high-risk behavior to the Independent Medical Sponsor and the company.

3. Share your experience. The newly recovering pilot is an unfamiliar and scary situation. Most pilots compartmentalize their emotions and prefer to live in highly structured and familiar situations. Many of them are also highly identified with their occupation. These characteristics work well in the mentally challenging environment of operating an aircraft. However, attachment to one’s job and dealing with the many uncertainties associated with living a newly sober life creates a lot of anxiety for the pilot. And, as was mentioned, most pilots are separated from their emotions and lack effective coping skills. If one adds an alcoholic or addict’s tendency to project worst-case scenarios and to obsess about those possibilities, one realizes how self-induced stress can become an impediment to healthy recovery. One major antidote to this type of thinking and behavior is a Monitor sharing his experience about recovery and flying sober. This function can be accomplished better by the HIMS Monitor than by anyone else. So, by all means share your experience, just make sure the monitored pilot is doing most of the talking.

4. Contact others if you observe relapse behavior or suspect the pilot’s sobriety is in jeopardy. Many people have observed that a relapse, reuse of a mood-altering chemical, is preceded by other behaviors. Such behaviors include isolation, keeping secrets, ignoring recovery related suggestions, anger, resentment, frustration, impatience, minimal participation in recovery activities, and working one’s own program. As a Monitor, if you are also in recovery, you may pick up on subtle indications of this high-risk behavior long before any other member of the aftercare team. It is important to immediately communicate your observations to the pilot’s AME and other team members, probably via a phone call(s). In many cases, other parties will have observed similar behavior but not considered it particularly significant. It is important to remember that all recovering pilots will experience relapse thinking in some form or another. The best result is to identify the “at risk” individual and provide them with additional support. Both medical research and experience tell us that a relapse can be prevented if the intervention is accomplished soon enough. Such research also shows us that early intervention, even if chemical use has occurred, will increase the chances of re-establishing healthy sobriety.

5. Make your reports to the IMS detailed enough to communicate the pilot's recovery progress. It is obviously important to state your belief the pilot is maintaining his or her sobriety. However, it is also important to state your opinion regarding the pilot's progress in recovery. Recovery is a progressive process and thinking that is "normal" for a newly sober pilot might be considered "high risk" for a pilot who's in his second year of monitoring. In many cases a company monitor will lack the experience to put certain comments or behavior in the proper context, and the AME will be unaware of day-to-day progress because of infrequent contact or the pilot "playing the game." You are uniquely suited to determine whether the pilot is "going through the motions" or "walking the walk" of recovery. Share this information in your reports to the AME and in your discussions with other team members. Everyone will benefit from your unique perspective and insight.

6. Protect the program, not the pilot. Many Peer Monitors are members of the pilot's union group. Often, union membership creates a fraternal bond that includes protecting other members from sanction for common mistakes or misbehavior. It is imperative that Monitors not allow this fraternal bond to threaten the viability of the HIMS program. The HIMS program is a cooperative venture that involves a level of trust and mutual understanding between the union, FAA, and the company. Hiding instances of non-compliance or "covering up" a relapse denies the recovering pilot the support that can be provided by the monitoring group operating as a team. While such actions may prevent a pilot from experiencing an outcome he might perceive as negative, such as re-treatment, it will also almost always result in continued "poor" behavior. Such action on the part of a member of the continuing care team also violates the trust and cooperation that is essential for the team to be most effective. Finally, without cooperation and trust, the HIMS program might well be discontinued at a particular carrier. Always remember, for every pilot that is in the program, there are other pilots who have yet to be identified and will need the support of HIMS to get sober and to keep their jobs. Do not sacrifice those future program participants for one who fails to do what he or she has voluntarily agreed to do.

7. Treat your role as a HIMS Monitor as service work. Being a HIMS Monitor is AA "12th Step" work. But, in addition to "carrying the message" of recovery, being a Monitor also allows you to educate company managers, union representatives, and peer pilots about the importance of the HIMS program and recovery from chemical dependency. You can be a successful example of someone who has overcome a chronic fatal disease not only for the newly recovering pilot, but for others as well. One never knows if a pilot you speak to today will someday "see himself" in your story and ask for help. Or, perhaps the manager you impress today will someday be your company's Vice President of Operations. If you're in recovery, sharing your experience and knowledge will benefit your own sobriety, so take advantage of the opportunity.

8. Remember you are not responsible for the success or failure of your "monitreee." As a HIMS Peer Monitor you are but one part of a group of people who are trying to help a pilot stay sober. The pilot should be engaged with an IMS, a counselor, a group of recovering peers, an AA or NA Sponsor, a company manager, and have a home group he or she attends regularly. While you may have a significant impact on a pilot's recovery, that outcome is determined more by the pilot than by you. The best advice in the world is of no use if the pilot is unable or unwilling to listen to it. So, don't expect perfection. If you serve as a Monitor long enough, you will most likely deal with a pilot who relapses. Don't take a relapse personally. No one is responsible for a pilot taking a drink except the pilot himself.

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