The Week You Actually Have



Session 06

Recovery Has to Survive Tuesday. A 60-minute adult group education session that brings Volume 1 together through a realistic week map, a changed-plan rehearsal, and a next support step.

The work today

Map actual responsibilities and needs. Choose one useful action, test what happens if plans change, and decide when and how to review it.

Progress is progress

A plan can need changing and still be useful. One missed block of time does not have to decide what you do with the rest of the week.

Before you lead

Audience and scope

Adults 18+, approximately 4-10 participants, with a facilitator competent in group work and the setting’s safeguarding procedures. Original education, not a validated treatment, crisis plan, or substitute for individual care.

Preparation outside the hour

Print participant pages 1-8. Prepare slides, pens, a clock and verified local supports. Explain actual privacy limits and available support to new members beforehand. Group confidentiality cannot be guaranteed. Know what support continues after this volume or group ends.

Choice and access

People may use Taylor, write, draw, listen, or pass. Read prompts aloud and offer a scribe with consent. No calendar app, full schedule, financial details, health disclosure, or account of substance use is required. Adapt for shifts, pain, disability, caregiving and uncertain housing.

The 60-minute run sheet

00-05 / Welcome / slides 1-2

Participant page 1. Explain options and invite one brief takeaway from earlier sessions, or a pass.

05-13 / Taylor’s changed week / slides 3-4

Participant page 2. Read the original example and identify what still needs attention.

13-23 / Week map and model / slides 5-6

Introduce participant page 3. Model a few entries and the distinction between a responsibility and a hopeful extra.

23-38 / Individual planning / slides 7-8

Page 3 for seven minutes, page 4 for seven minutes, one minute for transition. Page 4 names one action and its support.

38-50 / What if Tuesday changes? / slides 9-10

Participant page 5. Two minutes to choose a change, three each role in pairs or solo review, two revision, two reflection. Page 7 is a creative alternative.

50-57 / Review and support / slide 11

Participant page 6. Decide when to check the plan and what support is actually available.

57-60 / Volume 1 close / slide 12

Optional page 8 follow-up and voluntary feedback. Clearly state what continues and what ends.

Opening words

Suggested script

You have a real week. It has bills, people, work, waiting, tired mornings, and things that do not stay where you put them. Today we are making a plan for that week. Leave room for being a person. We are looking for something you can come back to when the day changes.

Agreements

No comparing calendars, recovery paths, productivity or attendance. Ask before offering suggestions. Keep private appointments and contacts off the shared screen. A thin or unfinished map is allowed.

Connection to the series

Invite one useful idea from earlier work: separating a hard event from a verdict, checking a money question, respecting someone else’s answer, finding an option for an ordinary hour, or checking before a yes. People can complete this session without having attended the others.

Taylor’s Tuesday

Original fictional scenario

Taylor starts the week with work shifts, a Wednesday support appointment, a bill to check, and a promise to help with dinner on Saturday. Tuesday’s shift runs late. Taylor misses the time set aside to look at the bill and thinks, The whole week is already off. There is no immediate emergency in this fictional example. Taylor still has responsibilities and choices for the next day.

Questions

What happened? What did Taylor conclude? Which responsibilities still need attention? What changed, and what did not? What is a smaller way to reconnect with the plan?

Facilitator stance

Do not assume the bill is overdue or that a later time has no consequences. Taylor needs to check the actual deadline. A missed block is information for revising, not proof of a diagnosis, poor character or inevitable substance use.

A week map with room in it

Start with the actual week

Use page 3 to note known work, care, travel, appointments, basic needs and responsibilities. Unknown shifts can stay marked unknown. Keep personal details vague. The page is a working sketch, not a compliance record.

Add support and recovery choices

Include the person’s own supports, a manageable activity, connection, rest, or a practical inquiry. Leave buffer where possible. If demands exceed available time or resources, name the gap and seek appropriate help; do not solve it by shaming the planner.

What the sources support

SAMHSA describes recovery through personal pathways and the dimensions of health, home, purpose and community. Its coping guidance includes routines where possible and time for breaks. These broad ideas inform the topic. The map, rehearsal and scripts are original and not validated interventions.

A worked week example

A few entries

Monday: work and travel; ask about Wednesday transport. Tuesday: work; check the bill’s deadline. Wednesday: support appointment and travel. Saturday: help with dinner as agreed. Food, sleep, care and other obligations need space too; this is an illustration, not a complete prescribed calendar.

When Tuesday runs late

Taylor will check the actual bill deadline at breakfast Wednesday before deciding when the task can move. If urgent, Taylor will seek appropriate practical help rather than assuming waiting is harmless. Taylor will keep the support appointment or contact the provider if a genuine conflict arises.

One useful action

At breakfast Wednesday, open the statement and write down the deadline and the official contact if a question remains. If the statement is inaccessible, identify a verified official contact or ask a suitable worker for help locating it.

Avoid guarantees

A planner cannot create money, transport, appointments or family trust. The example identifies a next inquiry and leaves unresolved needs visible.

Lead the individual pages

Page 3 / My week at a glance

Seven minutes. Use day labels or write dates and shift labels. Enter known responsibilities and one or two supports or choices. No one has to fill every row or share the map.

Page 4 / One useful action

Seven minutes. Write the action, timing, setup or support, and the obstacle that needs attention. A smaller action should still serve a real purpose.

Access prompts

Would a few words or symbols work better? Would you like me to read the headings? Could we plan only the next day? Offer help with permission and avoid interpreting an unfinished page as resistance.

A practical gap

If transport, food, care, housing or access is missing, identify an appropriate support inquiry. The gap is part of the plan, not evidence that someone did the worksheet wrong.

What if Tuesday changes?

12-minute rehearsal

Use page 5. Two minutes to choose one change; three minutes each role; two minutes to revise; two minutes to reflect. Solo writers use the same time to draft a change, check consequences and revise.

Choose one change

A shift runs late. A ride is canceled. Energy is lower than expected. A support contact does not answer. Use one change, not a pile of emergencies. Participants can stay with Taylor.

Listener role

Ask: What needs attention now? What can move, shrink, or need help? What responsibility or consequence must be checked? Offer one suggestion only with permission. No clinical advice or role-play of crises.

If the change is serious

Stop the rehearsal if a real urgent safety concern emerges. Follow the setting’s response procedures. A changed-plan worksheet does not replace care, emergency help or existing clinical guidance.

A restart you can actually use

Page 6 / Review and support

Choose when to check the plan, how to notice what helped, and who or what could support the next step. Confirm a contact method or ask for help identifying one. Do not assume another group is available.

A plain restart line

That part did not happen. What needs attention now? What is one useful next action? Use neutral wording. Avoid promises to start perfectly on Monday or make up every missed task at once.

Creative alternative / page 7

Within the rehearsal block, write or draw two versions of the same day: the first plan and the changed version. Label one responsibility, one adjustment, and one support question. No art skill, disclosure or showing the page is required.

Follow-up / page 8

Optional and kept by the participant. Ask what they tried, learned or still need. An incomplete plan can provide useful information. No abstinence pledge or personal outcome report is required.

Closing Volume 1 responsibly

Name the actual next support

Tell the group which services or contacts continue, how to access them, and any real limits. Do not imply ongoing facilitator availability or automatically scheduled appointments. Offer a private referral conversation within role.

When a plan is not enough

Practical needs require practical help. Increasing distress, urges, a return to use or health concerns may require appropriate recovery or clinical support. Existing care plans remain in place. Medical or immediate safety needs take priority; follow setting procedures.

Responsibilities and privacy

Do not advise abandoning dependent care, ignoring legal deadlines, changing prescribed care, or testing unsafe contact. Plans involving those issues need appropriate qualified support. Keep participant calendars and contact information private.

Keep progress personal

Some participants will leave with a plan. Others may leave with one question or a clearer understanding of a resource gap. Do not rank these outcomes or promise what happens next.

Close and prepare the pilot

Closing words

What is one thing you can carry into the week you actually have? You can pass. You can revise the plan and keep going. A mile or a millimeter, progress is progress.

Voluntary feedback

What was useful across the series? What felt unrealistic or inaccessible? What needs changing before someone else uses it? Review timing and facilitation with appropriate staff. Do not collect private recovery stories for marketing or treat feedback as clinical evidence.

Sources and authorship

SAMHSA: About Recovery; How to Cope. See Sources-and-Review.md for links and scope. Reviewed October 28, 2026. Original learning materials by Belle Morey / Progress is Progress LLC. No agency endorsement.

Release status

Part of the 12-session author-review pilot. Appropriate professional review, local support checks and a suitable pilot should precede sale. No clinical effectiveness claim. www.progresscounselingprograms.com.