A Life Worth Coming Back To



Session 12

A 60-minute adult education session bringing the collection together through ordinary priorities, practical support and a next step.

The work today

Choose one part of ordinary life to support, connect it to a realistic action and prepare a way to reconnect if the plan changes.

Progress is progress

A useful next step can count while life remains unfinished. You do not have to earn the right to begin again.

Before you lead

Audience and scope

Adults 18+, approximately 4-10 participants. Facilitators need group skills, competence appropriate to their role, and access to safeguarding and emergency procedures. This is original recovery education, not a validated treatment, diagnosis, crisis service or substitute for individual care.

Preparation outside the hour

Read the guide and notes. Print participant pages 1-8, prepare slides, pens and a clock, and verify local support contacts. Orient new members beforehand. Explain the setting’s privacy limits; group confidentiality cannot be guaranteed. Know how to offer private support.

Participation and access

Offer fiction, private writing, drawing, listening or passing. Read prompts aloud and offer a scribe with consent. No personal history, diagnosis, substance details, contact, movement, performance or completed worksheet is required. Adapt for language, disability, energy, caregiving and resources.

Topic-specific preparation

This is a general recovery education closing session, not suicide intervention or crisis planning. Know actual continuing services, access and limits. Prepare appropriate local support routes. No future vision, optimism or public pledge is required.

The 60-minute run sheet

00-05 / Welcome / slides 1-2

Participant page 1. Explain choices and offer a brief optional check-in.

05-13 / Fictional situation / slides 3-4

Participant page 2. Read the example and discuss the stated questions. Avoid a round of personal histories.

13-23 / Teaching and model / slides 5-6

Use Devon’s ordinary priorities and one inquiry on page 2. Explain that the plan needs actual resources and continuing support.

23-38 / Individual work / slides 7-8

Participant pages 3-5, about five minutes per page. Read prompts and offer private help with consent.

38-50 / Rehearsal / slides 9-10

Page 6 pair or solo practice. Page 7 is a creative alternative within the same block. Two minutes setup, three minutes each role, two minutes revision, two minutes reflection.

50-57 / Actual-week step / slide 11

Revisit page 5. Add timing, access, support and a fallback. No public promise or pledge.

57-60 / Close / slide 12

Offer optional page 8 follow-up and a voluntary takeaway or pass. State actual continuing support and its limits.

Opening words

Suggested script

There may still be bills, arguments, grief, urges and tired days after this group. The goal was never a life where nothing gets hard. Today we are choosing one part of ordinary life to support, one step that fits, and a way to reach for help when the first plan does not hold.

Group agreements

No graduation test, promises of permanent change, ranking progress or required inspirational speech. No pressure to disclose a personal recovery story or find a positive in every loss. Respect different pathways and unfinished needs.

Check-in

Ask: Is there an activity, script or question from this collection you want to keep? Listening or passing is welcome. Prior attendance is not required.

Devon’s ordinary next week

Original fictional scenario

Devon wants next week to include one decent meal, a manageable support contact and time for something interesting. Money is tight and work hours may change. Devon worries, If I cannot keep the whole plan, what is the point? No emergency is described. Devon wants a plan with room for actual life.

Questions

What matters to Devon in ordinary terms? What is one useful action rather than the whole plan? What support or resource needs checking? How could Devon reconnect if the day changes?

Facilitator stance

A difficult or incomplete plan is not a verdict about recovery. Do not promise resources, a mood change or future success. The group cannot replace ongoing care or create availability by writing a contact on a page.

Something to support, a step to take

Choose ordinary meaning

Food, rest, a relationship, a useful role, an interest or a safe place can matter. The person chooses. No grand purpose, ideal family or productivity goal is required.

Connect meaning to resources

Ask what action serves that part of life and what time, access, care or support it needs. A shortage stays visible and may need practical help.

Prepare a way to reconnect

Plans change. Decide what to check next, which appropriate support route exists and what to do if unavailable. This educational plan complements existing care; it is not a crisis or medical plan.

A completed example

Devon’s chosen part

A manageable meal and some connection matter more than a perfect weekly overhaul. Devon chooses one inquiry to begin.

A practical first step

Before the next shopping trip, Devon will check which meal ingredients are already available and whether the budget covers the missing items. If not, Devon will ask an appropriate local worker about current food options.

Connection and revision

Devon will ask a suitable support contact about a time that fits the work schedule. If it is unavailable, Devon will ask about another route. A changed day means checking needs and revising, not proving failure.

Lead the individual pages

Page 3 / What I want more room for

Let the person choose what matters. Avoid a purpose test, forced optimism or prescribed family goal.

Page 4 / The support it actually needs

Separate available support from assumptions and resource gaps. Keep contact information private and verify routes.

Page 5 / My next seven days

Name one action, timing and a fallback. This is not a crisis plan, pledge or proof of completion.

Support without taking over

Ask permission before suggesting. Keep unresolved needs visible. A resource gap or an unfinished page needs curiosity and appropriate practical support, not a lecture about motivation. Participants may stay with the fictional example.

Practice without a performance

12-minute sequence

Two minutes to choose pair or solo; three minutes each role; two minutes to revise; two minutes to reflect. Partners use fiction. The creative alternative replaces this practice, not extra time.

Speaker role

Use Devon to rehearse a support inquiry after a changed day. No real crisis, personal disclosure or abstinence pledge.

Listener role

Ask what still needs attention and what appropriate route could be checked. Do not promise availability or take responsibility for someone’s entire plan.

Solo option

Write a changed-day response and one support question. A private draft or pass is valid.

An ordinary day worth supporting

Same practice block

Map an ordinary day with a practical need, a choice and an appropriate support question. This replaces the pair practice.

Example

Need: a meal. Choice: check available ingredients. Support question: what current local option could help if the budget does not cover it?

Reflection

Does the day depend on resources that are missing? What could be smaller? What support should be checked rather than assumed?

Privacy and choice

No one must show the page, read aloud, send a message, revisit a distressing memory or complete the activity. Offer the fictional example, neutral drawing, observation or a pass.

When more support is needed

Continuing support and endings

State which services continue, their actual hours and limits, and how to access them. Do not imply automatic appointments, ongoing facilitator availability or a transfer of care. Offer a private referral discussion within role.

When the worksheet is not enough

Increasing distress, urges, a return to use or health concerns may need appropriate qualified care. Medical or immediate safety needs take priority. Follow setting procedures and existing care plans. Do not make optimism or group completion a condition of help.

Respect obligations and resources

No advice to ignore dependent care, legal requirements, unsafe relationships or prescribed care. Practical gaps need practical assistance. This group does not guarantee housing, treatment, relationships, employment or any outcome.

Close and prepare the pilot

Closing words

What is one useful thing you can carry into the life you actually have? You can pass. A mile or a millimeter, progress is progress. There can still be a next step while the rest remains unfinished.

Voluntary feedback

Was the activity understandable? Could you find a realistic next action or question? What felt uncomfortable, inaccessible or unrealistic? Check timing and access. Do not collect sensitive personal stories for marketing or treat feedback as evidence of clinical effectiveness.

Sources and authorship

Broad background sources are listed in Sources-and-Review.md and relevant slide notes. Reviewed October 28, 2026. Original scenarios, scripts and learning sequence by Belle Morey / Progress is Progress LLC. No agency endorsement.

Release status

Author-review pilot. Belle’s review, appropriate professional review, local response and referral checks, and a suitable timing and usefulness pilot should precede commercial release. www.progresscounselingprograms.com.