Treatment Myths and Questions - Cooperative Planning Workshop

40 minutes | 3-12 people | Adults with trained group facilitation

Turn a stigmatizing treatment statement into a respectful question for a qualified clinician.

Open with choice - 3 minutes

Explain the purpose, privacy limits, and the option to observe, use fiction, adapt, or pass. Check access needs and group readiness; do not promise absolute confidentiality.

Meet the fictional case - 4 minutes

A member hears that prescribed recovery medication means not being in recovery. Ask what is known, what is assumed, and what the person in the case wants.

Practice: Planning workshop - 26 minutes

Turn a stigmatizing treatment statement into a respectful question for a qualified clinician. In pairs or small groups, create two possible plans for the fictional case. Compare access, effort, likely tradeoffs, and consent. Choose one reversible trial with a backup and a review point; allow an observing role.

Reflect and compare - 4 minutes

How can the group avoid substituting judgment for information? Ask what fits, what does not, and what external conditions or supports affect the options. No personal disclosure is required.

Close and integrate - 3 minutes

Invite an optional observation, support request, or small next step. Passing is welcome. Agree how to revisit questions and seek appropriate help outside the exercise.

Practice output

A feasible plan with a support, a backup, and a review question.

Scope and care

Use ordinary or fictional examples, not graphic substance-use stories or cue exposure. No competitive abstinence scoring, forced disclosure, or required pathway. These plans do not manage intoxication, overdose, withdrawal, or medication changes; follow individualized care and appropriate medical assessment.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background references: GP01, GP02, GP03, RF-SUR. Full source links: library.morethantherapy.org/group-activities/GRP509