Recovery Group Mutual Aid - Clinician dialogue

Guide a collaborative conversation about recovery group mutual aid while checking fit and participant choice.

Mental health professionals | 15 minutes

Fictional example: Jordan's group includes people using different treatment and peer-support pathways.

Invite and obtain permission

Offer: "Would it be useful to explore recovery group mutual aid using an ordinary or fictional example? We can adapt it, observe, or stop." Ask what the person wants from the conversation.

Elicit before teaching

Ask: "How does this show up, if at all, in your own words?" Offer this idea tentatively: A group can offer choice and shared learning without prescribing a single pathway. Ask what fits and what does not.

Guide the task

Use fictional examples to exchange one useful coping idea and one support request; permission is required before advice. Ask for permission before giving an example. Use this fictional illustration if useful: Jordan's group includes people using different treatment and peer-support pathways.

Reflect and check accuracy

Reflect only what was offered: "I heard you describe ___. What did I miss?" Ask: How can the group respect different definitions of progress? Avoid assigning motives or interpreting silence as agreement.

Respond to a mismatch

If the person rejects the frame, say: "Thank you for correcting it. What would be more useful?" Return to their language or choose a different approach.

Close with agency

Ask which observation, question, or support request the person wants to keep. Confirm a manageable ending and appropriate follow-up; do not turn a tentative possibility into a homework obligation.

Reflection

What would tell me to adapt, stop, or seek supervision?

Scope and adaptation

Adapt to individualized assessment and the person's chosen recovery goals. Worksheets do not manage intoxication, overdose, or withdrawal. Abrupt cessation of alcohol or benzodiazepines can be dangerous: seek medical guidance rather than using a worksheet to stop or taper. Follow existing emergency and overdose-prevention plans; medication choices belong with qualified prescribers.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background: Substance Use Disorders. Full source links and scope: library.morethantherapy.org/recovery/resources/SUR-A19-3