



The Journey Recovery Project

**Group Curriculum:
Facilitator's Guide**

journeyrecoveryproject.com

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INTRODUCTION

The Journey Recovery Project curriculum is a companion to journeyrecoveryproject.com – a web resource for women with substance use concerns who are or have been pregnant or parenting. The Journey Project explains the perinatal period, and the aspects of pregnancy and parenting unique to people with substance use disorder or those in recovery, in an encouraging and easy-to-understand way. With videos of people telling their personal stories, worksheets, and in-depth information, the Journey Recovery Project offers an array of support and resources. There are also sections of the Journey Project for fathers, co-parents, and other family members.

The goal of this Facilitator’s Guide is to help you develop the website content into a supportive group curriculum for perinatal people in recovery or with substance use disorder. The Journey Project Facilitator’s Guide suggests group guidelines, structure, and elements that accompany the Journey Project material and maximize its usefulness. This guide offers activities, ranging from completion of worksheets to facilitating hospital tours, which outline ways that facilitators can best educate and support women with substance use disorder as they navigate their perinatal experience.

This guide has a lot of information about pregnancy, parenting, and recovery, yet it is designed to be flexible to the needs and interests of the group members. Encourage group members to give feedback on the content, emphasis, and order of the sessions. As you gain practice facilitating Journey groups, experiment with allowing participants to take the lead. Eventually, the group will belong to and be co-created by the group members.

The Step-By-Step Guide (page 3) walks you through a suggested agenda for a typical Journey Group and also serves as the table of contents. Each section of the outline indicates a page number where you will find customizable scripts, activities, and information. At the end of the guide, there are handouts (also available on the Journey Project website) and activity sheets, which you can copy and print for your groups.

STEP-BY-STEP GUIDE:

STEP 1 (page 4)

PREPARATION FOR THE GROUP

Planning
Setting Up

STEP 2 (page 6)

GROUP OPENING

Welcome, Introductions, and Intention Setting
Guidelines

STEP 3 (page 10)

MINDFUL MOMENT

Guided Brief Meditation
Check-In

STEP 4 (page 14)

JOURNEY MILESTONE CONTENT

Videos
Information
Milestone 1 (page 20)
Milestone 2 (page 22)
Milestone 3 (page 28)
Milestone 4 (page 30)
Milestone 5 (page 34)
Milestone 6 (page 36)

Handouts
Resources

STEP 5 (page 10)

MINDFUL MOMENT

Guided Brief Meditation
Check-In

STEP 6 (page 42)

GROUP CLOSING

Reflective Question
Thanks and Closing

STEP 7 (page 44)

FREQUENTLY ASKED QUESTIONS ABOUT LEADING JOURNEY GROUPS

STEP 8 (page 46)

HANDOUTS AND TOOLS

Tip Sheets on Journey Website
Body Outline for Sensation Check-in
Affirmation Cards
Window of Tolerance Scale
Web of Support Worksheet

PREPARATION FOR THE GROUP

PLANNING FOR THE GROUP

This Facilitator's Guide is designed to be customizable to suit the needs of each group. Review the scripts, activities, and content in each of the following sections and decide what to include in each session. Use feedback from group participants to help guide how you create the agenda for each session. As you build a partnership with the group members, eventually it will become their group.

SET THE SPACE FOR THE GROUP

Make your group space as inviting and comfortable as possible. Set up healthy snacks and water, chairs or sofas in a circle, and mats for infants before group members arrive. Make sure you have the proper technology, including a projector or TV, and internet access for the website content presentation portion of each session. Check to make sure the sound and visuals work before the group begins. Print handouts for the group and have enough pens or pencils for writing if needed. Set out any supplies you will need for all planned activities.



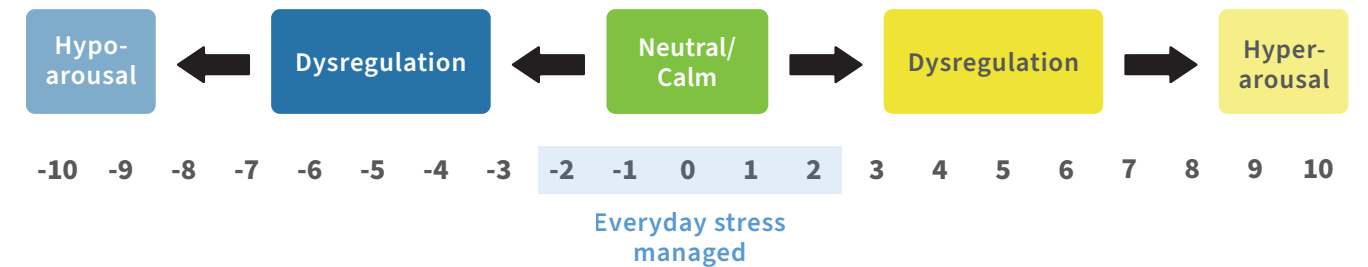
GROUP OPENING

WELCOME, INTRODUCTIONS, AND GUIDELINES

Thank group members for coming: their time, thoughts, and experiences are important. The group would not be possible without each and every person in it. Introduce yourself with your name and role. Invite group members to introduce themselves with their first names and ask them to share one small thing that they want to get from the session. This will help group members set an intention for the session and allow the facilitator to get a sense of participant priorities.

After introductions, explain the Window of Tolerance and its scale to group members. Each session will begin with members checking in on where they are relative to the window of tolerance using the visual for guidance (depicted on page 7). Ask group members to check in using the window of tolerance scale: have them point to where they are on the scale or say the number that corresponds to how they are feeling in the moment. If a group member checks in below a -2 or above a 2 on the scale, offer a technique that they can use to help themselves regulate emotionally.

WINDOW OF TOLERANCE SCALE



The Window of Tolerance scale is a tool for self-awareness and regulation. Group members can use this tool to describe their present state of being. A rating of 1 or negative 1 denotes a feeling of neutral, calm, and readiness to face the day, with positive one being slightly upbeat or happy, and negative one being more subdued or tired. (A rating of zero is not typically used; encourage participants to pick a number on either side of zero.) The range from -2 to +2 indicates a window in which we are able to manage regular stress from everyday life, and respond appropriately to situations. We all have a differently sized window, and sometimes things that we experience in a day or in the past change the size of our window. People with trauma, stressful pasts, situational stress, and history of addiction can be more likely to become dysregulated.

If a person is low on the scale, they are experiencing hypo-arousal and may feel sleepy, like they are “on autopilot,” or “checked out.” Hypo-arousal is related to the *freeze* stress

response. If a group member identifies that they are below a -2 on the scale, give strategies to help them regulate during the session. They may stand up or place their hands palm face up during the meditation, doodle on the side of their worksheets during the group to help them focus, or use a stress ball or other fidgeting tool to help bring their energy up towards optimal functioning for them.

If a person is high on the scale they are experiencing hyper-arousal and may feel very emotional; they may have impulsive or aggressive outbursts, and may feel overwhelmed or anxious. Hyper-arousal is related to the *flight* and *fight* stress responses. If a group member identifies that they are above a +2 on the scale, give strategies to help them regulate during the session. They may face their palms down during the meditation, move to sitting with both feet on the ground, or take slow rhythmic breaths to help bring their energy down towards optimal functioning for them.

GUIDELINES

Read these guidelines at the beginning of each group. You can also post guidelines or print them on cards and have group members read them. Begin by reading guidelines as they are written here, but you may tailor them over time with participation of the group to meet the needs of group members.



CONFIDENTIALITY

Anything that is shared in this group, stays in this group. We avoid referring to anything that was said by another group member outside of this group session. In this way, everyone can feel safe to share. The facilitator may have to repeat something that was said, if someone reports that they are going to hurt themselves or someone else, or reports that someone is in danger.



COMMUNITY

We are a community, growing together. We listen to each other, and we try to connect, rather than compare. Even when we mean well, advice can feel like criticism, or judgmental to the person who hears it. Therefore, we listen without suggestion and we speak only from our own experience. During sharing times, we snap our fingers, nod, or put our hand on our heart when we hear something we relate to. We do not interrupt. We share our accomplishments with the group as well as our struggles. We value each other's experiences.



COMPASSION

We assume the best intentions of each other. Each person here is on their own journey and we support each other with affirmations and positive feedback. We offer compassion to ourselves as well. Asking for and receiving help is courageous. We have what it takes to recover. It is never too late to start on our recovery or to make a different choice. We hold hope for ourselves, and each other.



CARE

We are the expert on our child(ren) and the most important person to them. Care for your child(ren) during group if you need to: change, bounce, feed, or snuggle your baby. Care for yourself. Check in with your body during group: use the bathroom, eat, or move to care for your body when you need to. Take a deep breath or pass your turn to care for your mental and emotional health. Be gentle with yourself and take everything one step at a time. Ask the facilitator for additional support if you feel you need it.

Add any guidelines that your group comes up with / Notes

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MINDFUL MOMENT

GUIDED BRIEF MEDITATION

Mindfulness practices are effective ways to reduce stress and increase attention. Including mindfulness in your group can help focus the group and build skills that will help group members in their everyday lives. We offer three scripts for use during a Journey group. Also, check out the many mindfulness and meditation apps, videos, and scripts available online. Get feedback from group members on their preferences and incorporate their ideas into the mindful moments portion of group.

Remind group members that there is no “right way” to meditate. There is no expectation that anyone quiets their mind, feels calm, or “succeeds.” Remember, it’s called a meditation practice for a reason.

Read the scripts very slowly. Pause after each direction, allowing each group member enough time to respond to the prompt. Speak clearly and use a calm tone of voice while reading these scripts.

GUIDED BREATHING SCRIPT

I invite you to place both of your feet flat on the ground and sit in a comfortable, grounded position. If it feels comfortable for you, please close your eyes or soften your gaze and turn your attention to your breathing. Without trying to control your breathing, notice how the air feels moving in your lungs on your inbreath. Then, how the breath feels exiting your mouth or nose on the outbreath. Take a long slow breath in. Hold that breath for a second, then exhale more slowly than you inhaled. Take a few more breaths this way. (Pause, 30 seconds to 3 minutes, depending on group.) When you feel ready, open or refocus your eyes.

GUIDED BODY SCAN SCRIPT

I invite you to place both of your feet flat on the ground and sit in a comfortable grounded position. If it feels comfortable for you, please close your eyes or soften your gaze. Turn your attention to the top of your head. Now move your focus down to your face. Notice each part of your face: your forehead, your eyes, your cheeks, your jaw, and your mouth. Shift your focus to your neck and shoulders, noticing your skin, joints, and muscles. Moving from the neck and shoulders to the arms all the way to the fingertips. As you move your attention down your body, notice, without judgement, any feelings or sensations. If you feel any pain or tension in your body, notice it, but don’t attach a story to it. Just notice it, and move on. Notice how your breathing moves your chest, back, and belly; your weight on your chair; and sensations in your hips, legs, and feet. Finally, when you feel comfortable, open or refocus your eyes.

GUIDED MINDFULNESS SCRIPT

I invite you to place both of your feet flat on the ground and sit in a comfortable grounded position. If it feels comfortable for you, please close your eyes or soften your gaze. Notice how your body feels, notice any tension. There might be tightness in your brow, your jaw, your shoulders, your belly, your hands, your legs. Notice the weight of your hands in your lap. Notice the weight of your feet on the floor. Notice how the air in the room feels: is it warm or cool? Notice any smells in the room. Notice any sounds you hear. Listen to sounds in the room. Listen to sounds outside of the room, in the distance. Slowly open or refocus your eyes. Notice to yourself the first three things you see as you come back to this moment.



HELPFUL TIP

You may decide to use the same meditation to open and close a session. This may increase a sense of comfort and accomplishment for group members.

CHECK-IN ACTIVITIES

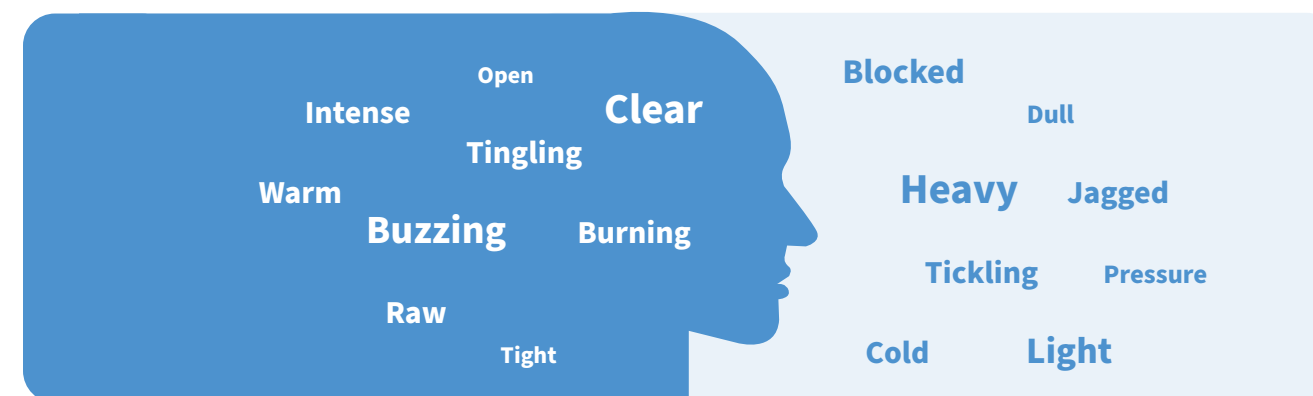
During introductions, group members checked-in using the Window of Tolerance. That was a chance for them to gauge where their energy level was, and to get a sense of how other group members were feeling that day. The activities below build upon this, helping group members develop an internal sense of how they are feeling and practice using emotion language, and give them take-home skills that they can use throughout the week to recognize and meet their emotional needs.

Check-in activities, done during group or as homework, can also help participants build self-awareness. Self-awareness is a key skill for parenting. Help your group members understand that recognizing their own emotional state will help them also recognize their child's feelings, and to see that those two emotional states do not have to be the same. For example, they can feel agitated when their child cries, and they can practice one of these exercises to calm down, even if their child continues to cry. They can change how they are feeling, no matter what situation they're in.

AFFIRMATIONS

Have each group member make up an affirmation, or pick from ones that you have prepared. Ask them to say this affirmation to themselves now, and suggest that they recite this affirmation throughout the week or until the group meets again. Their affirmation should be short and non-judgmental. It should offer a sense of empowerment over their internal state. While they recite their affirmation, encourage them to breathe very deeply, down to the bottom of their lungs, at least twice. Ask them to repeat this every time they remember to during the week, and to check in about the experience at the next group session. (There are suggested examples of affirmations on page 51).

Write your own affirmations for the group to use



SENSATION CHECK-IN

Identifying feelings in the body can be a helpful mindfulness practice. Making a habit of identifying feelings or sensations in the body can help to regulate emotions and build a feeling of presence in the moment. For women with histories of trauma, disassociation (or “checking out”) is a common coping skill. This activity can help group members return to their bodies in a safe and controlled environment, which can help with trauma healing. This activity is also something they can practice with their child, once it is developmentally appropriate. This activity can build participants' emotional and sensory vocabulary, which can help with communication, self-advocacy, and self-compassion.

Instruct group members to identify one feeling that they are having in their body to share with the group. Offer several feeling words as examples, then ask them to share their sensation or feeling. For example: “I am feeling tingling in my arms;” “I am feeling warmth in my breath;” “I am feeling tightness in my throat.” Encourage them to practice identifying and describing feelings and sensations throughout the week.

Write your own sensation words



USE ART TO TALK ABOUT IT

Use art as an alternative way to describe feelings.

Use the body outlines on page 49 and instruct group members to use colored pencils or markers to draw sensations that they are having in their bodies. They can use different colors, lines, or shapes; but no words. At the end of this activity, have each group member share their experience.

JOURNEY MILESTONE CONTENT

Each Journey Recovery Project milestone has four elements: video, information, handouts, and resources. Depending on the size of your group, the length of the session, and other factors, you may not include every element in every session. Be flexible in your session-planning and consider the needs and wants of the participants. Decide before each session what elements you may include so that you can prepare all materials or handouts you will need.

The Journey Project was created to give women in recovery or with substance use disorder truthful, scientific, and encouraging information about pregnancy and parenting. Each Journey milestone dispels stigma and myth, and empowers women to be the experts on their own body and perinatal process. Read and discuss the information in each milestone; watch the associated video to hear experience, strength, and hope; and craft activities out of the handouts and individual needs of group members. For instance, group participants can collectively prepare for prenatal medical appointments; develop packets to share with DCF if they may be notified after birth; or create special art to share with children who may not be in their custody. Use the Journey milestone content as a jumping off place for constructive conversations and meaningful action.

Encourage group members to lift each other up. Carefully listen during each session to identify and reinforce when women complement each other, share an accomplishment, or show pride in themselves or each other. When you notice women put themselves or each other down, share inaccurate information, or diminish their own or each other's accomplishments, gently challenge these comments.

Encourage members to believe in themselves and to support other women in the group. In recovery, we talk a lot about "life on life's terms." In all of our lives, stuff happens—sometimes really tough stuff. Sometimes the group will need to process difficult feelings before and/or after the content of the group, depending on the topic. Be flexible to the wants and needs of the group members; allow for the group to take its time when members are having a beneficial conversation or processing emotional content.



In this group, we put recovery first: we learn how to take care of ourselves and each other, we reach out for support, and that helps us handle everything else.





JOURNEY VIDEOS

The video components in the Journey Recovery Project are called “*In Our Own Voices*.” There are biographical videos introducing some of the Journey Moms; those are called “*Meet Your Guides*,” and can be found on the Resources page. There are also videos for each milestone, including *Your Recovery*; *Pregnancy*; *The Early Days*; *The First Year*; and *Women with Older Children*. There is not a video for the milestone *Birth Day*. The *For Family and Friends* milestone has a video, but please consider carefully before including it in a Journey Group with perinatal women.

Once you’ve selected a milestone video, set up the technology before the group begins. Queue the videos so you only need to press play during the group.

“*Meet Your Guides*” is separate from the rest of the Journey content. For the “*Meet Your Guides*” group, you can view all six videos in a single session. You may want to do this at the beginning of your Journey Group series, to introduce group members to the Journey Moms. After each video, take between 3 and 5 minutes for the group to briefly respond to the video. Group members may respond with emotional reactions, a change in their window of tolerance, a body sensation, or a personal reflection. Encourage all of these responses. Emphasize a spirit of connecting, rather than comparing. Repeat this process until the group has seen all of the videos. After all of the videos have been shared in the group, have each group member reflect on the videos using a reflective question.

REFLECTIVE QUESTIONS

- What is one example from the videos of how a woman recognized her own power?
- How did the women in the videos put their recovery first?
- What is one example from the videos of how a woman cared for herself and also for her child?
- What is a positive quality that you see in one of the women in the videos and also in yourself?
- What is one compliment you would give one of the women in the videos if she were here?

Write your own empowering reflective questions



JOURNEY MILESTONES

Each Journey milestone has information with both audio and written content, providing information and encouragement to women on their recovery, pregnancy, and parenting journey. The Journey milestones may include more information than can be covered in one session. Depending on the length of your group and the intensity of the information, you may consider splitting the milestone into multiple sessions. [Suggestions on where you may divide the content are noted throughout.](#)

1

YOUR RECOVERY

The first milestone includes resources for a woman looking for treatment or help with her substance use disorder. The video on the Your Recovery page welcomes women to the website and shows how the Journey Moms first reached out for help. Facilitate a conversation about how group members first sought help for their substance use disorder. How did pregnancy encourage or intimidate their decision to seek help? In Motivational Interviewing (MI), there is a tactic in which you ask the participant to explain how they were able to make the progress that they have made, rather than asking why they haven't done more, or didn't do it sooner. In MI, we focus on the positive, and that attention helps foster more positive action. Use this technique to validate and encourage participants, no matter how far along they are on their journey.

Notes

Lined area for taking notes, consisting of approximately 20 horizontal lines.

SUGGESTED STOP POINT after completing the activity



MAKE ART ABOUT IT

Affirmation Treasure Box

Have group members make a treasure box filled with affirmations. Each group member will paint or collage a small box and fill it with affirmations from page 51 of this guide, positive quotes, or affirmations they write themselves. Have group members put their affirmations in their treasure box and keep it someplace they will see every day.

Materials needed - Paint, paintbrushes, smallboxes, glue, Mod Podge, magazines, colored tissue paper, scissors, printed affirmations, blank paper, pens, markers, glitter, etc.

2

PREGNANCY

The video on the Pregnancy page offers advice for pregnant women, based on the experiences of the Journey moms. After watching the video, facilitate a brief conversation about how pregnant women with substance use disorder can prioritize their health and their recovery. What have group members done or what are they doing now to take care of their addiction and their pregnancy? If this isn't their first experience, what are they doing differently this time around?

The Pregnancy Milestone has information about fetal development, prenatal health, postpartum depression/anxiety, medications, and medical and treatment providers. Decide as a group if you want to listen to the audio, or have group members take turns reading the printed language on the screen.

Listen to or read the information titled *“Congratulations on your Pregnancy”* and *“A Few Things to Remember.”*

Hand out the **People to Meet During Pregnancy** checklist, and ask group members to share memories or ideas about the various providers. Allow group members to share tips and ideas with one another, but make sure that any information shared is accurate and strengths-based. Be familiar, before the group session, with the policies and practices of local birth hospitals, and other resources in your area. You can also use the Journey Resources page to explore local resources.

Listen to or read the information on the tabs under *“Life in the Womb”*. Allow time for group members to reflect and ask questions. If you don't know the answer to one of their questions, that's ok! Offer to write down the question and look it up later. If a group member asks a question related to her medical treatment, encourage her to ask her doctor.

Have group members take turns reading language under *“One Step at a Time.”*

Take time to reflect: What is one small change you can make today?

SUGGESTED STOP POINT after completing the reflection

Listen to or read the information titled *“It Takes a Village,” “Recovery First!”* and *“Building Your Team.”* After reviewing the tabs under *“Meet Your Birthing Team,”* leave space for participants to talk about provider experiences they've had, or are hoping/afraid they'll have in the future.

After reviewing the tabs under *“Meet Your Recovery Team”* discuss the roles listed, and come up with additional people who help support a pregnant woman's recovery.

It is common for women with addiction to feel isolated and alone, particularly when they are new to recovery. Validate this feeling, and begin a conversation about how new supportive relationships might be started. Talk about how to meet new helpful people, like through support groups or community organizations. Emphasize the hope of building new relationships, and remind participants that both recovery and parenting are great ways to form new and healthy bonds.

Notes

SUGGESTED STOP POINT after completing this page

LEAD A CONVERSATION ON BUILDING A CARE TEAM

- What does it mean to be the “captain” of your treatment team?
- Who are the most important “players” on your team right now? Recovery community? Family? Providers? Supportive friends?
- Are there any missing “players in your lineup”? As the “captain” of your team, how do you get these people on your team?
- Remind participants that they are the captain of their team: they know what does and does not work for them, and they can learn how to speak up for what they want and need.

Listen to or read the information on each tab under the heading “*Making the Most of Prenatal Visits.*” Allow time for group members to reflect and ask questions.

Hand out the **Prenatal Appointment Tip Sheet** and listen to or read the information titled “*Dealing with Fear and Loss of Control.*”

Lead a discussion to help group members identify questions that they want to ask their medical or prenatal providers. Take time to reflect on how to use advocacy skills with providers. If you have group participants who are pregnant, encourage them to fill out the **Prenatal Appointment Tip Sheet**, and use group time to develop additional questions to ask her provider. Encourage group members to make a plan, such as calling a support person before an appointment, or bringing someone along to an appointment, to maximize feelings of safety and comfort during the appointment.

LEAD A CONVERSATION ABOUT GROUP MEMBERS’ EXPERIENCES IN MEDICAL SETTINGS

- What kinds of experiences have you had with past providers?
- How do you feel in doctors’ offices?
- What does it mean to feel “safe” in a doctor’s office?
- How can you stand up for the needs of yourself and your child(ren)?
- How do you find different providers if you do not feel safe or comfortable with the ones you currently see?

Listen to or read the information titled “*Emotions.*” Lead a conversation about perinatal emotional complications, including how often they occur in both men and women, and how they don’t always feel like sadness. Sometimes, postpartum depression or anxiety can trigger cravings for substance use, or can make interactions with DCF even more difficult. Treating mental health symptoms is essential for successful recovery and parenting.

Notes

SUGGESTED STOP POINT after completing the activity



MAKE ART ABOUT IT

Compass Collage

Hand out blank or colored paper and have collage materials ready. Clients will create a collage compass with the cardinal directions (North, East, South, and West) depicting the most important elements of their recovery. These compass points will help each person navigate early parenting and recovery.



PLAN OF SAFE CARE

Although there is not a section on Plan of Safe Care (POSC) in the Pregnancy Milestone, pregnancy is the right time to begin the POSC process. If you are working with pregnant group participants, we suggest you devote an entire group session to beginning or working on a POSC.

Before the POSC session, ask your group members if they already have a POSC, or are working on a service plan that includes goals for both their recovery and their parenting. Although the POSC may have many names, the three essential elements are that it includes the parent’s behavioral health needs, the infant’s care needs, and referrals to needed services. If participants already have a POSC, ask them if they’re willing to bring it to group to work on it further. If they don’t have one already, or want to start a new one, bring a few templates to the session for them to choose from.

In the Journey Recovery Project, the **Birth Planning Checklist** can provide a template for a POSC. Also, the **Family Support Plan** is another template that can be found at mass.gov/safecare. We have created a Journey Recovery Project Birth Planning Kit, which contains all of the elements of a POSC. Free copies can be ordered from the Massachusetts Health Promotion Clearinghouse: <https://massclearinghouse.ehs.state.ma.us/>. All POSC must include documented referrals, and a plan both for the parent’s wellness and the infant’s care and protection. Many women will want to use group time to organize their records and documents of their treatment to share with DCF in case they’re called at delivery. That is one very good use of the POSC. Other important uses are to help organize the services a pregnant woman is receiving, help her connect to additional services she needs, and make sure that her providers are communicating with each other, to better organize her care.

Notes

SUGGESTED STOP POINT after completing this page

Listen to or read the information on each tab under the heading “Pregnancy and Medication Assisted Treatments (MAT).” Allow time for group members to reflect and ask questions. If you don’t know the answer to one of their questions, that’s ok! Offer to write down the question and look it up later. If a group member asks a question related to her medical treatment, encourage her to ask her doctor.

Sometimes, people are misinformed about the use of medication assisted treatments (MAT) during pregnancy. If a group member says that MAT is bad or other negative comments, gently remind the group that MAT is a recommended medical treatment for the benefit of both mom and baby! Encourage women to have open conversations with their providers to determine the best treatment for them and their child(ren).

Notes

SUGGESTED STOP POINT after completing this page

LEAD A DISCUSSION

- What does it mean to take control of your health in recovery?
- How do you feel when you make informed decisions to take care of yourself and your baby?
- What does having support to make informed decisions about you and your baby’s care look like?

Hand out the **NAS and NOWS Guide**. Talk about why the language might be updated from NAS to NOWS. Talk about other substances, other than opioids, that can lead to symptoms of withdrawal. Share tips for how parents can help their infant recover from NAS/NOWS more quickly by rooming in, holding their baby, and trying to breastfeed.

3

BIRTH DAY

Listen to or read the information titled “*Birth Day*,” “*Preparing for Birth*,” and “*Create a Birth Packet*”, and listen to the recorded audio.

If you have not already done the activities paired with the **People to Meet During Pregnancy** checklist (page 22), or the Plan of Safe Care (page 26), do those now.

If you have already done the activities in the Pregnancy Milestone, ask group members to bring their Plans of Safe Care to group to update and discuss their progress.

Notes

SUGGESTED STOP POINT after completing this page

LEAD A DISCUSSION

Lead a discussion on the Plans of Safe Care, Family Support Plans, and/ or Birth Planning Checklists completed earlier by group members:

- Do you feel like the “captain” of your treatment team?
- Do you feel like your treatment team is working for you?
- Do you feel safe and comfortable with all of your providers?
- Do you feel like your providers are talking to one another, and do you feel included in those conversations?
- Do you feel like you are missing something or someone on your team?
- Do you feel like you need to “change the lineup” of your team?

Listen to or read the information titled “*Welcome Baby*” and “*A Caring Partnership*.” Have group members take turns reading language on “*Your Baby’s Stay*” and hand out the **NAS and NOWS Guide** and **Soothing Sheet**. Review the information on both handouts. Allow time for group members to reflect and ask questions. If you don’t know the answer to one of their questions, that’s ok! Offer to write down the question and look it up later. If a group member asks a question related to her medical treatment, encourage her to ask her doctor.

Listen to or read the information titled “*A Working Partnership*” and “*Your Baby Needs YOU!*”

Notes

SUGGESTED STOP POINT after completing this page

LEAD A DISCUSSION WITH GROUP MEMBERS

- Who are your cheerleaders in your parenting journey?
- What is one quality you have that will (does) help you to be a good parent?
- What does “being gentle with yourself” look like in your life?

4

THE EARLY DAYS

This Milestone addresses sensitive topics regarding custody and child welfare. When you are planning your group curriculum, mark the session that will address this topic. Begin to tell participants 3-4 weeks before this session that it's coming up. Encourage a lot of self-care among participants, and allow them the control to design this session, and change the course of the discussion at any time. Plan some extra care during this session: place coloring or fidgets at each space in the room, turn on soothing music, or pair this session with extra mindfulness activities.

Remind participants, as always, of the importance of the Group Guidelines. Sometimes, when we feel triggered or vulnerable, it is easier to become judgmental or angry. Allow all group members to interrupt themselves or take back something they've said. A small phrase like "Can I start over? That came out wrong" can make space for participants to learn and grow and start over, without breaking the sense of community.

Listen to or read the information titled "Custody and Support," "Getting Ready to Be a Mom", and "Plan the Effort Not the Outcome." Allow some time for discussion here, but do not let the group get sidetracked by recounting painful stories from the past. Try to keep the group focused on what worked or went well, even in the hardest situations.

SUGGESTED STOP POINT after completing the activity

If there are group members who do have newborns in their custody, or who are pregnant, take turns reading the printed language in both tabs of the section titled "Home." Hand out printed copies of the **Safe Home Checklist** (you can order free copies of this checklist from the Massachusetts Health Promotion Clearinghouse: <https://massclearinghouse.ehs.state.ma.us/>) and lead a discussion about getting your space ready for an infant. If you don't know the answer to one of the group members' questions, that's ok! Offer to write down the question and look it up later.

Notes



MAKE ART ABOUT IT

Patchwork Quilt of Support

Instruct group members to take as many square pieces of paper as they want and use markers or colored pencils to draw designs on them that represent supportive people or positive things. Remind group members to include a quilt square for themselves! They are the most important person in their support quilt. When all the squares are completed, use tape to fasten them together to complete the "quilt."

Materials Needed - Square pieces of decorative paper, markers, colored pencils, and tape for fastening the squares together.





Listen to or read the information titled “*Getting to Know Your Baby*” and “*Building Support.*” Do a short mindful attention exercise: watch a short video of a baby, without the sound on. The baby can be eating, crawling, interacting with a toy or another person. (You can find a video online, just make sure you preview it first. Make the video one minute or less, with no one but the baby in the scene.) Ask group participants to describe what they noticed about the baby. Reinforce any observations related to what the baby might have been feeling, thinking, wanting, or realizing.

SUGGESTED STOP POINT after completing this section

For the session on safe sleep, early infant care, and home visiting, it is a good idea to invite a lactation consultant, parenting specialist, or child developmentalist in to talk about the benefits of breastfeeding, the importance of safe sleep, and the different services available in your area. Someone from the local WIC office or Early Intervention program may be able to visit this group session. For this sort of informational series, it can be helpful to have important information presented by a new face. Having a guest from an Early Intervention program or a WIC office can also demystify these services for group members, helping them embrace these services if they want or need them once they are parenting.

Listen to or read the information on each tab under the headings “*Caring for Baby*” and “*In-Home Support.*”

LEAD A DISCUSSION

- How do you feel about in-home services? Why?
- What experiences have you had with in-home services?
- What would you like in-home services to be like?

Notes

SUGGESTED STOP POINT after completing this page

5

THE FIRST YEAR

Listen to or read the information titled “*Being a Parent.*” Listen to or read the information on each tab under the heading “*Being a Newborn.*” Allow time for group members to reflect and ask questions. Listen to or read the information titled “*Your Job.*”



ACTIVITY

Sensory Activity Drawing Game

Have group members write different activities that they can do to foster their newborn’s sensory development, write them on popsicle sticks, and put them in a jar. When they are with their baby, they can draw a popsicle stick and do whatever the popsicle stick says! Take the suggested activities from the tabs under the heading “*Being a Newborn*” and also have group members come up with their own ideas.

Materials needed -
Plastic or glass jars,
markers, large
popsicle sticks

Examples -
Sight: show your baby different bright colors and say the name of the color as you show it to them.
Sound: make silly noises while looking at your baby and see if they try to mimic the sounds.

Notes

SUGGESTED STOP POINT after completing the activity

Listen to or read the information on each tab under the heading “*Keeping Your Baby S.A.F.E.*” Have group members listen to or read the information in “*Communicating with Baby.*” Have group members identify times when they have seen an infant communicate with an adult and give examples.

If any of the group members have an infant in the group, ask the mother *before the group begins* whether the group can observe their baby’s behavior during group. With permission, ask the group to quietly observe the baby for a few minutes. Ask what people noticed. (You can use a video of a baby if there are no babies in group.)

- Did baby start to get fussy and then find a way to soothe?
- Did the baby look around and notice something, or startle at a noise?
- What else did people notice about how a young infant interacts with their environment, even before they can talk or walk?

Notes

SUGGESTED STOP POINT after completing the activity

If you haven’t covered the NAS and NOWS information in an earlier group session, hand out the **NAS and NOWS Guide** and review the information provided in it. Allow time for group members to reflect and ask questions. If a group member asks a question related to her infant’s medical treatment, encourage her to ask her pediatrician. Have group members listen to recorded audio or take turns reading information on “*How to Take it One Day at a Time.*”



ACTIVITY

Achievements and Compliments

The facilitator will describe the activity and go first: share a recent accomplishment or progress with the group. The co-facilitator will demonstrate the flow of the activity by complimenting the facilitator on their accomplishment and then sharing an achievement of their own with the group. Each group member will compliment the person who went before them on their achievement or progress, then tell the group one thing they recently accomplished. Sharing will continue in this fashion until everyone has shared. The facilitator who led the activity will close the circle by complimenting the person who went last. Compliments should be modeled as reinforcing the person’s effort, courage, and dedication, rather than their success, aptitude, or skill. The simplest compliment is “I see you.”

6

WOMEN WITH OLDER CHILDREN

Listen to or read the information titled “Parenting: Finding a Balance.”

Print copies of the Web of Support handout (see worksheet on page 55) In each box on the top row, ask participants to write a tricky situation, where they will likely need extra support. It could be needing more sleep; having a fight with a loved one; losing someone to addiction; or running out of diapers. In the bottom row, ask them to fill the boxes in with places/things/people that can offer them support or help meet their needs.

These can be a community center, therapist, tub bath, or dry cleaner. In the middle row, have them fill the boxes in with actions they will need to take to seek out support and ask for their needs to be met, such as making a phone call, finding a babysitter, or preparing a favorite meal. As homework, ask parenting participants to keep their Web of Support handy, and to draw lines between the boxes each time they responded to a need by seeking help or support. Ask them to bring their Webs back to a future group to report on how it worked.

SUGGESTED STOP POINT after completing the discussion


Listen to or read the information titled “Parenting: First Things First” and “Understanding Behavior: Big Feelings.” Use the Sensory Check-In (page 49) to begin a conversation about feelings and emotions.

- How do group members know what they are feeling?
- Have they ever not realized what they were feeling until after they said or did something that expressed their feelings to others?
- How does recovery change how we feel, and how we deal with our feelings?
- What feelings do we notice in our children or other people close to us?
- How can we practice having different feelings than the people around us?

Read the information titled “Parenting Styles.” Check in with each other about what actions people are taking *today* to take care of their recovery. Ask each group member to share ways they’ve gotten help with parenting so that they could meet their recovery goals.

The remainder of the information in this milestone addresses specific aspects of parenting, such as siblings, visitation, and reunification. Check in with your group members and select material that is relevant and important to them. If you have some group members navigating these situations, encourage the group to go through the rest of the milestone. There is likely to be information that is helpful to everyone. Remind the group to work on connecting, rather than comparing.

Listen to or read the information titled “Siblings: How to Parent Children of Different Ages.” Disagreements and conflict are a natural part of parenting more than one child. Navigating conflict and discomfort are also important skills to learn in recovery. Have a group discussion about ways members are learning to handle conflict or disappointment in their own lives. Reflect together about what lessons their children might learn from watching them work through anger, disagreements, or hurt feelings.



ACTIVITY
Building Emotional Awareness
 Sometimes we express emotion without realizing how others perceive us, or even how we are really feeling. Ask group members to write a short journal entry with these questions in mind: When I am angry or afraid or disappointed, how do I behave? How does this behavior impact people or situations? What is the Hurt, or Lie that underlies this behavior? (For instance, if I am mean to people because I’m afraid they’ll leave me, the underlying Hurt may be a fear that I’m not lovable.) What actions can I take to heal this deep Hurt and change my behavior? (Actions can be simple like “tell myself I am lovable” or “make more friendships with healthy people.”)

SUGGESTED STOP POINT after completing the discussion

Listen to or read the information on each tab under the heading “*Parenting From a Place of Wellness.*” Go around the room and ask each member to share one word that explains their approach to each of the four key components of parenting: Safety, Boundaries, Structure, and Love. What values do group members have in common? What values or strategies do we admire about one another? Reflect together.



ACTIVITY

Filling My Cup

Give each group member a glass jar. Have large stones, representing things important to their recovery, and smaller stones, representing their priorities around parenting.

Then have small beads or colored sand, representing all of the other expectations or tasks in their life. Using a tray, to contain any mess, have each person experiment with trying to fit everything into the jar. Eventually, they will realize that the big pieces – their recovery must come first, then parenting, and then everything else.

Materials needed - Plastic or glass jars, stones, beads, sand, and trays

SUGGESTED STOP POINT after completing the activity

If it is appropriate in your group, listen to or read the information on each tab under the heading “*Custody and Reunification.*” There are many ways to proceed with groups devoted to custody and reunification, depending on the situations of the members. You can invite a speaker from DCF to come to your group and listen and talk to the members, answering specific questions that group members have, and listening to their feelings. It is also a good idea to try role play, if you have members who are trying to improve how they work with their DCF caseworker. They can practice talking to another group member, pretending it’s DCF, and working on asking for what they want and need without leading with anger or fear.

Mindfulness exercises are very important to this work. Ask group members, if they can handle this, to think of a negative emotion. Maybe not something as severe as losing custody, but something milder: a subtle fear or resentment. Have them sit in meditation – just for 1-5 minutes – and sit with the feeling, breathing into it, and paying attention to their breath. Building distress tolerance skills will help them in their interactions with DCF as well as other people in their lives, including their children.

Sometimes it is easier to do something that is emotionally challenging while in a supportive environment. Ask each group member to set their own goal, based on the information in the Custody section. Maybe they want to make a

card for a child not in their custody, or come up with a ritual for visitation or symbol of hope. Ask them to give some thought to what they’d like to create and devote a group session to creating together. Not all group members need to be in the same situation in order to create together.

Listen to or read the information on each tab under the heading “*An Individual Journey.*” Go around the group and ask each member to say one judgmental or hurtful thing they have heard someone say about their parenting/recovery, or something they are afraid people think. After each person goes, ask 2-3 volunteers to come up with a countering statement. A Countering Statement is something that is based in evidence that challenges the judgment or criticism. This skill, also called Reality Testing, is a great way for group members to remind themselves that fears are not facts.

Example: “I am afraid people think I messed up my kid because I used when I was pregnant.”

Countering statement: “I have heard you talk about your kid: how smart she is, and how well she is doing in her Early Intervention sessions. It doesn’t sound like she’s ‘messed up’ at all, so people are wrong if they think that.”

JOURNEY HANDOUTS

There are worksheets related to the Journey Recovery Project group curriculum included at the end of this booklet. The Journey Recovery Project Guides are informational handouts, located on the Resource page under the heading “Tip Sheets and Journey Resources” on journeyrecoveryproject.com/resources/.

Some handouts include information and some are worksheet style with questions to ask providers and room to make notes: “Birth Planning Checklist,” “NAS and NOWS Guide,” “People to Meet During Pregnancy,” “Prenatal Appointment Tip Sheet,” and “Safe Home Checklist.” Depending on the length of your group and the needs of your group members, you may want to dedicate a whole group to reviewing or filling out one of the handouts, or you may share them with members to do on their own.

There are also materials located on the Journey Resources page that are intended to supplement the information: “Journey Recovery Project Birth Planning Kit (POSC);” “Release of Information,” “Safe Sleep Poster;” and the “Soothing Sheet.” When you hand these out, plan enough time to review them and answer questions that the group may have.



HELPFUL TIP

Provide additional time when you use handouts to thoroughly review them and allow for group members to ask questions.

Notes/Other handouts you use

JOURNEY RESOURCES

Journey Resources are geared toward pregnant and parenting women with substance use disorders living in Massachusetts.

The Plan of Safe Care (POSC) landing page includes an interactive map with services in the state of Massachusetts listed. This is a good tool to use to find providers and services. www.mass.gov/plan-of-safe-care

The Journey Resource page and the POSC landing page can be incorporated into other parts of the curriculum as a support to filling out worksheets such as the Journey Recovery Project Birth Planning Kit (POSC), the Family Support Plan, or the “People to Meet During Pregnancy” Journey Guide. There may also be time in session dedicated to searching for resources.

For groups in which the Resource page or the POSC landing page are utilized, the facilitator will prepare by ensuring that all participants have a way to individually access the page(s). The facilitator may take the group to a library or computer lab if possible, or ensure that each participant has a phone with the capability to access the internet.

Not all providers have the same expertise or experience. Group members may want to ask their providers if they understand addiction and how it can affect pregnancy. If they feel uncomfortable with the knowledge or attitudes of their providers, they can use the group to try and find a different one(s) that they feel more comfortable with.

Lead a conversation using the Resource page about ways to ask providers about their understandings of addiction and how it can affect pregnancy. It is important that each group member feels that their treatment providers are “on their team.” Support group members in finding treatment providers that they feel comfortable with.



Every woman deserves providers who are respectful, knowledgeable, and supportive of them and their wishes.

MINDFUL MOMENT

Turn to page 10 for a mindful moment

GROUP CLOSING



REFLECTIVE QUESTION

Ask the group an empowering question and have each group member respond.

EXAMPLES

- You're taking care of your baby already, in how you take care of yourself. What small thing can you do today to take good care of yourself?
- What is one quality you have that will (does) help you be a good parent?
- What is one thing you are proud of yourself for?
- What is one compliment you want to share with another member of the group?
- What is one way you can stand up for yourself and/or your child(ren) this week?
- What is one way you can ask for help this week?

Write your own empowering reflective questions

THANKS AND CLOSING

Thank the group members for their time and willingness to share. The group would not be possible without them. Each member is a valued part of the group and their contributions and presence make every group special.



You may ask the group to check in on the Window of Tolerance during the closing to gauge how each group member is regulated at the end of the session.

Notes

FREQUENTLY ASKED QUESTIONS ABOUT LEADING JOURNEY GROUPS

Q: WHAT IF GROUP MEMBERS ARE NOT ALL AT THE SAME POINT IN THEIR PERINATAL JOURNEY?

A: It is rare that you will have a group of all pregnant women, or all parenting women. You may feel tempted to skip a Journey milestone that doesn't reflect the current experience of most or any of the group members. You can do this, and we encourage you to discuss these options with the group participants. However, we suggest that there is still merit in covering the Pregnancy milestone, for instance, with postpartum women. There is value in a review and reframing of her past experience, and a tremendous opportunity for her to learn about substance-exposed pregnancies to support other women in her life or in the future.

Q: DO WE NEED TO MOVE SEQUENTIALLY, OR CAN WE JUMP AROUND BETWEEN TOPICS?

A: There may be an urge to mine the Journey Project for bits of information, or use it more as a resource to look up specific topics. This can be done, although we suggest that the Journey Project be used in the context of a facilitated group as a sequential learning process. There is value in the thoroughness of the information presented in Journey, as well as the inspiration and encouragement of the language. The Journey Project is more than just factual information. It offers women the opportunity to take ownership over their perinatal health; it validates the experience of pregnancy or parenting in recovery; and it hopefully coaches self-advocacy and empowerment. We find the best way for these effects to take root is through a patient exploration of all of the content in order.

Q: SHOULD MY GROUP BE CLOSED, OR CAN I ACCEPT ROLLING ADMISSIONS?

A: This is up to your program and facilitation style. There is merit in having a closed group, as members build a trusting community and information is equally shared with all. However, some service sites must accommodate rolling admissions, and this is not a barrier to having a strong and mutually supportive group process. We encourage you to offer the new member a chance to go through any of the Journey milestones that she's missed on her own. You may want to ask for volunteers from the group to be milestone ambassadors, and answer any questions the newcomer may have about a particular milestone that meant a lot to them.

HANDOUTS FOUND ON JOURNEYRECOVERYPROJECT.COM

Plan of Safe Care

People to Meet During Pregnancy

Consent Form/ Release of Information

Prenatal Appointment Tip Sheet

Birth Planning Checklist

NAS and Nows Guide

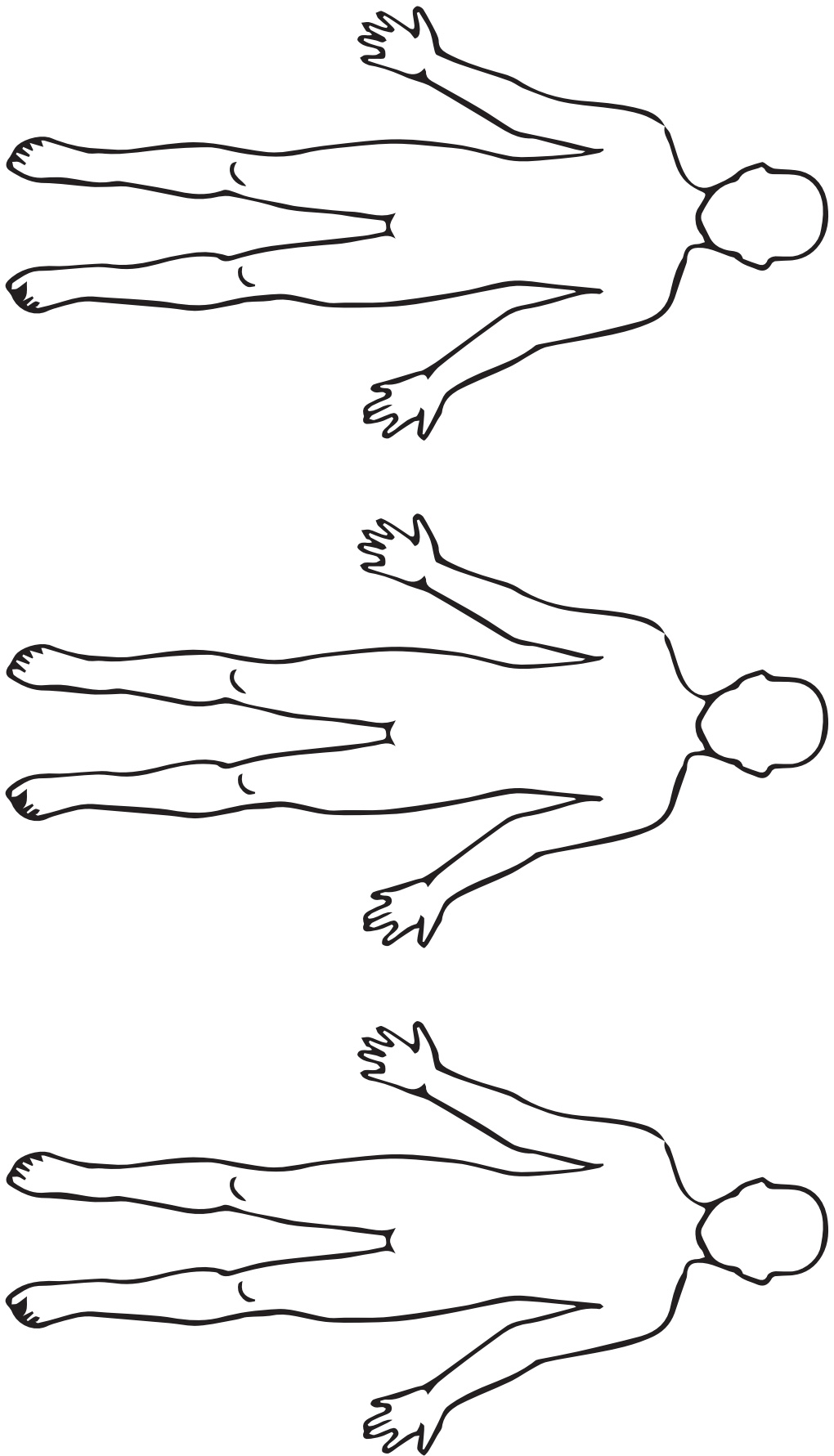
Safe Sleep Poster

Safety Checklist

Soothing Sheet

[Resources on mass.gov/safecare](#) Family Support Plan

[Resources on Clearinghouse](#) Birth Planning Kit



AFFIRMATION CARDS

I CAN TRUST MY INNER WISDOM

MY NEEDS ARE IMPORTANT

MY PAST IS PART OF ME BUT
DOES NOT DEFINE ME

I CAN FIND WAYS TO CARE FOR
MYSELF THAT WORK FOR ME

I VALUE WHO I AM

I CAN ASK FOR HELP
WHEN I NEED TO

I CAN MAKE GOOD CHOICES

I HAVE LEARNED FROM
MY EXPERIENCES



A WEB OF SUPPORT

Fill in the boxes, and draw lines between them every time you reach out for help and support.

Situations that I'll need support for:				
Actions I can take to meet my needs, or get support:				
Sources of Support (People, places, things, thoughts):				



