RESTORING HOPE MINISTRIES / RECOVERY INITIATIVE

Experiential Recovery Education

How RHM moves learning from information toward reflection, practice, application, agency, and responsible contribution

> The goal is not simply to transfer information from an expert to a participant. The goal is to create conditions in which people can discover, practice, test, and responsibly apply what they learn.

WHO THIS IS FOR

Participants, families, peer leaders, facilitators, educators, churches, treatment providers, reentry programs, and community partners

HOW TO USE IT

Read online, download from the RHM website, share before a conversation, or use it as a guided discussion resource.

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Prepared by Restoring Hope Ministries

Dr. Jeffrey W. Gross, President and Lead Counseling Pastor

https://rhmwi.net/RecoveryInitiative

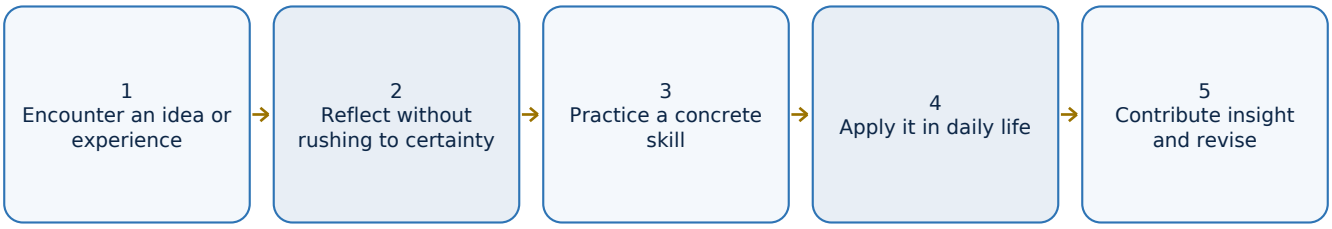
FROM INFORMATION TO RESPONSIBLE ACTION

Experiential Recovery Education

Knowing something intellectually is not the same as being able to recognize it, practice it, and carry it into relationships and daily decisions.

RHM's educational model invites participants to encounter an idea, connect it with lived experience, practice a skill, receive feedback, apply the learning, and contribute what they discover. The aim is not passive compliance. It is growing insight, agency, responsibility, relational wisdom, and the capacity to make meaningful choices.

The learning cycle



What this can look like

NARRATIVE

Use stories, books, films, memories, metaphors, and personal meaning to notice patterns and possibilities.

RELATIONSHIP PRACTICE

Try reflective listening, repair language, healthy boundaries, asking for help, and responding to disagreement.

REAL-WORLD SCENARIOS

Work through decisions involving stress, employment, family, reentry, recovery supports, setbacks, and community participation.

REFLECTIVE CREATION

Write, draw, teach, role-play, design an activity, or create a resource that demonstrates what was learned.

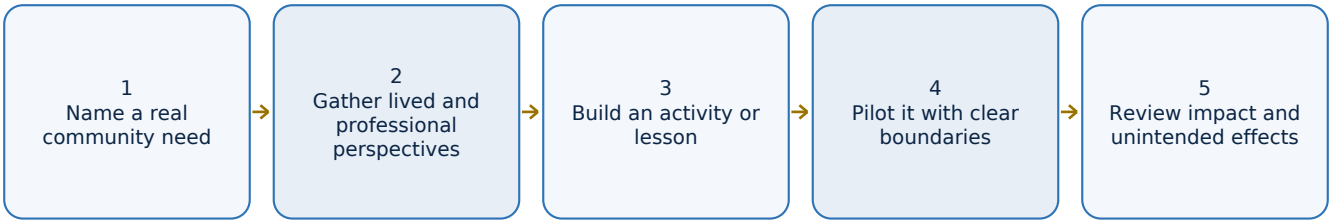
> Learning question: A useful class does not merely ask, 'Did you understand the lesson?' It also asks, 'What did you notice, what can you practice, and what will help you carry this into life?'

CURRICULUM AS A LIVING PRACTICE

How Participants and Peers Help Shape Learning

Curriculum becomes more responsive when professional knowledge and lived community knowledge are allowed to test and refine one another.

A collaborative curriculum process



The mentor's posture

Doctoral-level providers, researchers, educators, and experienced practitioners can bring ethical responsibility, research literacy, theory, clinical awareness, and program-development skill. Their role is not to erase lived wisdom or enforce one ideology. It is to ask better questions, clarify boundaries, identify unsupported claims, and help the group examine whether the heart of the work is actually being accomplished.

The peer's contribution

Peers can identify where language feels disconnected, where examples miss the reality of recovery, where activities may unintentionally shame or exclude people, and where a lesson could become more practical. Their contribution is not symbolic. It should meaningfully influence design, delivery, reflection, and revision.

A practical example: moving beyond 'communication skills'

Define reflective listening.	Listen to a short story, reflect the meaning and emotion, receive feedback, and try again.
List common barriers to communication.	Notice one's own shutdown, defensiveness, rescuing, overexplaining, or certainty during a guided scenario.
Memorize conflict-resolution steps.	Practice pausing, naming the problem without blame, asking a curious question, and making one realistic request.

A LEARNING CULTURE

Humility, Curiosity, Kindness, and Accountability

The initiative seeks durable principles that can be recognized across recovery traditions, psychological perspectives, spiritual frameworks, and lived experience.

HUMILITY

We can hold convictions while admitting limits, correcting errors, and remaining teachable.

CURIOSITY

We ask what an experience means to the person before forcing it into a preferred explanation.

KINDNESS

Confusion and disagreement are met with dignity rather than ridicule, pressure, or social punishment.

ACCOUNTABILITY

Agency includes responsibility. Learning should help people recognize impact, repair harm, and make wiser choices.

CONTEXT

A skill is explored within real relationships, culture, faith, family, work, reentry, health, and community conditions.

PRACTICE

Change is supported through repetition, feedback, reflection, and the freedom to revise rather than perform perfection.

Participant reflection questions

- What did I notice in myself that I had not named before?
- What part of this idea fits my experience, and what part needs more examination?
- What small practice could I try before the next meeting?
- Who could help me practice safely and honestly?
- How might this affect another person, not only me?
- What would responsible application look like in my actual circumstances?

Explore recovery education

RHM is developing classes, workshops, peer-created learning activities, recovery-capital education, relational skill building, vocational and reentry learning, and community presentations.

https://rhmwi.net/RecoveryInitiative

Important: This public resource is educational. It is not a diagnosis, treatment recommendation, treatment intake, crisis service, or promise of outcome. For an emergency, call 911 or go to the nearest emergency department. In the United States, call or text 988 for crisis support.

Sources and further reading

SAMHSA, About Recovery (updated 2024).
Kolb, D. A. (1984). Experiential Learning: Experience as the Source of Learning and Development.
Miller, W. R., & Rollnick, S. (2013). Motivational Interviewing: Helping People Change (3rd ed.).