The Help-Seeking Path - Session activity

Facilitate a structured practice of the help-seeking path with preparation, reflection, and an agreed closing.

Mental health professionals | 30 minutes

Fictional example: Riley wants to know whom to contact when familiar coping is insufficient.

0-5 min | Agree on purpose and fit

Explain the educational scope. Ask what would be useful, check readiness and access needs, and establish choices to observe, adapt, or pass. Use an ordinary example; do not solicit trauma narratives.

5-10 min | Orient with an example

A visible route can make asking for support more concrete. Fictional example: Riley wants to know whom to contact when familiar coping is insufficient. Ask what is observed and what remains uncertain.

10-20 min | Practice and compare

Draw a routine support path and a higher-support path using existing care guidance and verified contacts chosen by the person. Offer quiet individual work, a supported conversation, or an observing role. Compare two possible responses without evaluating people as right or wrong.

20-25 min | Reflect on meaning

What would make using this path easier? Ask what fit, what did not fit, and how culture, power, disability access, or external conditions affect the options.

25-30 min | Integrate and close

Invite one optional next step or support request. Orient to the current setting, allow an unfinished question to remain unfinished, and agree how to revisit it. End early or adapt if activation increases.

Adaptations

For a group, use fiction and no compulsory round-robin disclosure. For remote use, allow off-camera reflection and private notes. For brief use, keep one example and one question while retaining opening and closing choices.

Reflection

What adaptation or follow-up is needed?

Scope and adaptation

An original DBT-informed house metaphor for educational reflection, not an official standardized DBT assessment, diagnostic drawing test, or comprehensive DBT. The maker defines meanings. Offer another metaphor if housing is sensitive, and allow omissions or fiction. Do not interpret rooms, colors, or omissions as evidence of pathology or safety.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background: Dialectical Behavior Therapy Skills Training: Fundamentals. Full source links and scope: library.morethantherapy.org/recovery/resources/DBH-A18-4