A Shared House by Consent - Clinician dialogue

Guide a collaborative conversation about a shared house by consent while checking fit and participant choice.

Mental health professionals | 15 minutes

Fictional example: A group adds support ideas to a shared drawing while keeping personal notes private.

Invite and obtain permission

Offer: "Would it be useful to explore a shared house by consent 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 house can represent shared resources without requiring personal disclosure. Ask what fits and what does not.

Guide the task

Build a fictional shared structure with optional contributions, permission before interpretation, and no requirement to display private work. Ask for permission before giving an example. Use this fictional illustration if useful: A group adds support ideas to a shared drawing while keeping personal notes private.

Reflect and check accuracy

Reflect only what was offered: "I heard you describe ___. What did I miss?" Ask: How can the shared design leave room for different needs? 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

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-A19-3