

**Alexandra Whitney, Ph.D.**  
**Somatic Experiencing® Practitioner**

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**INFORMED CONSENT FORM**

*This letter serves to inform you of what I offer and what I do not offer in the Somatic Experiencing® sessions, describes my background, and will orient you to our professional relationship. Please read this information carefully before signing. If you have any questions, please feel free to discuss them with me.*

**Somatic Experiencing®**

Somatic Experiencing® (SE) is a short-term naturalistic approach to the resolution and healing of trauma developed by

Dr. Peter Levine and is supported by research. The word “trauma” in this sense covers a wide range of physical and psychological symptoms that result from the effect of accumulated stress on human physiology. SE is based upon the observation that wild prey animals, though threatened routinely, are rarely traumatized. Animals in the wild utilize innate mechanisms to regulate and discharge the high levels of energy arousal associated with defensive survival behaviors. These mechanisms provide animals with a built-in “immunity” to trauma that enables them to return to normal in the aftermath of highly “charged” life-threatening experiences.

SE supports individuals in completing basic fight, flight, and freeze response patterns that remain inhibited after stressful or traumatic experiences. The completion of these response patterns can bring a greater capacity for self-regulation as well as an increased sense of social engagement, well-being, and integration. Even though SE primarily targets issues of trauma, it is also seen as an effective way of supporting individuals interested in expanding their ability to authentically be in the world. People often report feelings of greater ease physically, psychologically, and spiritually.

- SE employs awareness of body sensation to help people “renegotiate” and heal rather than re-live or re-enact trauma.

- SE's guidance of the bodily "felt sense," allows the highly aroused survival energies to be safely experienced and gradually discharged.
- SE may employ touch in support of the renegotiation process.
- SE "titrates" experience (breaks down into small, incremental steps), rather than evoking catharsis – which can overwhelm the regulatory mechanisms of the organism.  
*For more information about SE please note the following references:*  
 Levine, P. (1997). *Waking the Tiger: Healing Trauma*. Berkeley, CA: North Atlantic Books.  
 Levine, P. and. Kline, M. (2007). *Trauma Through A Child's Eyes: Awakening the Ordinary Miracle of Healing*. Berkeley, CA: North Atlantic Books. For further references and information online about SE go to: <http://www.traumahealing.com>.

## Background and Training

I am a certified Somatic Experiencing<sup>®</sup> Practitioner and an approved SE Assistant for SE trainings. I receive supervision from an approved SE Consultant, and continue to attend advanced SE trainings. In addition, I am a doctor of East-West Psychology and I have a Master of Arts degree in Clinical Psychology. I am license eligible in the state of Colorado. In my work, although I am trained as a Psychotherapist I will not be offering psychotherapy. I take the role of an educator who supports clients in developing the necessary awareness towards physical and mental processes that can lead to the resolution of symptoms resulting from unresolved trauma and stress.

I began my work with Peter Levine, founder of Somatic Experiencing<sup>®</sup> and Dave Berger, International SE Educator in 2009. I provide a gentle, supportive approach, and incorporate fundamental somatic experiencing<sup>®</sup> principles in my work. SE has been recognized as effective with physical and emotional trauma, medical trauma, sexual trauma from childhood/adulthood, incest, rape, assault, molestation; depression, stress, anxiety, relationship problems, chronic illness; grief and sudden loss; addictive behaviors, unconscious developmental/ attachment trauma; relationships; and spiritual unfolding.

## Session Description

Sessions are 60-75 minutes in length. Sessions are offered at a base rate of \$150 a session. However, for clients who are in need of a lower rate due to finances I offer a sliding fee scale from \$150-\$60 a session. As we work together, we will both be assessing the process. While some clients may need only a few sessions, others may benefit from more sessions over a longer period of time. You are in complete control and may end the sessions at any point.

Your regular appointment time is reserved for you and you are responsible for providing a minimum of 24 hours advanced notice of cancellation. If you do not provide 24 hours notice, you will be responsible for the full session fee.

## Consent to Participate in Sessions

Please read the following statements and sign below so that we are clear about the parameters of our sessions. If you have any questions, please feel free to discuss them with me.

- I understand that Alexandra Whitney is a certified Somatic Experiencing<sup>®</sup> Practitioner.
- I give Alexandra Whitney permission to facilitate my inner exploration using the modalities of Somatic Experiencing<sup>®</sup> and meditation.
- I understand that I may terminate my sessions at any time and that, at termination, a closure session is generally recommended.
- I understand any information I provide during SE sessions with Alexandra Whitney is confidential. Alexandra will not disclose information without my consent except as indicated below:

If I demonstrate credible threat to harm others or myself.

Any information that indicates neglect or abuse of a minor child or dependent adult or elder abuse.

- I understand that Alexandra Whitney does not provide bodywork. However, I give Alexandra Whitney permission to use touch if she and I consider it appropriate for facilitating my exploration. I understand that this touch is not intended to manipulate tissue, is non-sexual, and is only used when necessary for the support of awareness. I also understand that it is my responsibility to inform Alexandra if I am at any time uncomfortable with touch.

**If you do not want to incorporate the support of touch in your sessions, please initial here: \_\_\_\_\_**

Client Printed Name: \_\_\_\_\_

Client Signature: \_\_\_\_\_

Location: 206 16th Street Unit G St. Augustine, Florida 32080

Date: \_\_\_\_\_ SEP Signature: \_\_\_\_\_