CLINICAL BRIEF · PATH TO FREEDOM ALONGSIDE

Somatic Therapy

The window of tolerance and reflection

Somatic approaches work with the body's regulation of arousal, using titration, pendulation, and resourcing to widen a person's capacity to remain present. Reflection on identity is most useful inside that capacity and less so outside it. The path teaches no body practices. It presents an occasion for reflection that a somatically informed clinician can time and limit.

Clinical frame

- Attention to interoceptive sensation, arousal, and the completion of defensive responses (Somatic Experiencing)
- Titration and pendulation between distress and resource to avoid overwhelm
- Sensorimotor psychotherapy attends to posture, movement, and procedural patterns
- The window of tolerance (Siegel) as a working heuristic for optimal arousal

Path to Freedom frame

- Names the body as part of a person's story and teaches no body practices
- Reflection done alone at the person's pace, and a lesson can be finished by private reflection
- Offers no arousal regulation techniques
- No treatment of the effects of stress or trauma

Points of conceptual fit

The window of tolerance and Impetus IMPETUS	Reflection presupposes enough regulation to stay present. A clinician who widens the window supports the readiness the path's opening asks for.
Bodily signal during Discovery DISCOVERY	Clients often notice bodily response as they name a mask or rule. The clinician can help the client work with that response, and the path leaves the work to the clinician.
Pacing IMPETUS, DISCOVERY	A reflection can be stopped at any point. The clinician can teach the client the signs that mark the edge of the window, so the client knows when to stop and return.

Division of labor

The clinician

- Work with arousal, sensation, and defensive responses
- Widening the window of tolerance
- Teaching the signs that mean stop

The path

- Reflection within the client's capacity
- Stopped at any point
- Pointing the client back to the clinician

Coordination and cautions

Reflection can raise arousal. Clients should learn from the clinician which signs mean stop, and the path's role is to hand the client back at those signs.

Return to the clinician when a memory returns with more force than reflection can hold, when sleep, appetite, or functioning change sharply, when panic, numbness, or a sense of being unreal appears, when there is fear of someone in the person's life, or when there are thoughts of ending life or harming someone (988 in the United States).

A proposed conceptual integration offered by The Autonomy Commission. It is not a manualized protocol and has not been empirically evaluated. The Path to Freedom is not psychotherapy, offers no diagnosis or treatment, and defers to the treating clinician on every clinical decision. Nothing is shared without the client's written consent.

An institute for the self that was always there.

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