



Somatic Consent Reflection Guide

A 6-Week Clinical & Experiential Journey from Survival to Self-Trust
by Dr. Loi, Somatic Psychologist, Ketamine Assisted Therapy, Intensives

Introduction

Most of us were taught that consent is a verbal agreement, but true consent is a biological event - a signal that must be felt in the body before it can be spoken by the mind. This guide is designed to help you reconnect with your 'Internal Compass.' These are the nervous system signals that tell you who you are, what you actually want, and where your boundaries lie.

Note - this guide is educational and is designed for low-stakes practice. If you are currently in a state of high crisis or active trauma, please use this guide only in the presence of a qualified clinical provider.

This guide is not a substitute for clinical therapy.



Foundation: Safety & Stabilization

The Golden Rule: Titration 🌿

In somatic work, "more" is not better. We work in drops, or bits. Titration is the process of experiencing small amounts of activation at a time so your nervous system can integrate it without becoming overwhelmed.

Somatic work can be activating. You are the expert on your own pace.

If at any point you feel overwhelmed, dizzy, or checked out, if your heart starts racing, if you have heat in your face, if you feel panic, numbness, have uncontrolled shaking, a sense of leaving your body (dissociation), a sudden flood of past memories, or a sudden urge to stop - **LISTEN** to your body.

Stop. Look around the room and see what's right in front of you.

Touch a cool surface or something close by.

Listen for what you hear. Do you smell anything? Notice your breathing.

This practice gets you into the present moment (it's called **orienting**).

You can also move your body, drink some water, and come back another day.



Remember you are building capacity, not forcing anything.

Week 1: Mapping the Internal Compass

Focus: Interoception

Interoception is your ability to feel the internal state and sensations of your body via the interior receptors (these are how the nervous system senses, interprets, and integrates signals that originate inside the body). Before we set boundaries with others, we must be able to hear our own internal "messages."

Clinical Note on Numbness: If you feel "nothing," that is a signal. Numbness is a protective mechanism and it is important to acknowledge it: *"My system is choosing not to feel right now to keep me safe."*

Anchor of Safety:

Before you begin tracking signals, identify one 'Anchor' in your current environment or body that feels neutral or pleasant (e.g., the weight of your feet on the floor, the sight of a plant, the feeling of your back against the chair). If a reflection feels too 'big,' return your eyes and your breath to this Anchor immediately.

The Practice: The Micro-Consent Log

Three times today, during low-stakes moments (e.g., choosing a snack, picking a seat, opening an email), pause for 5 seconds and notice what happens inside.

- The Moment: (e.g., Opening an email) _____
- The Physical Signal: (Expansion, contraction, warmth, tightness, leaning in, pulling back, blankness etc) _____
- The Verdict: (Yes / No / Maybe) _____

You can also think back on a low-stake moment in your past and note how it feels in the body.

Notice what comes up for you around this, write any reflections:

Understanding Your Nervous System Hierarchy

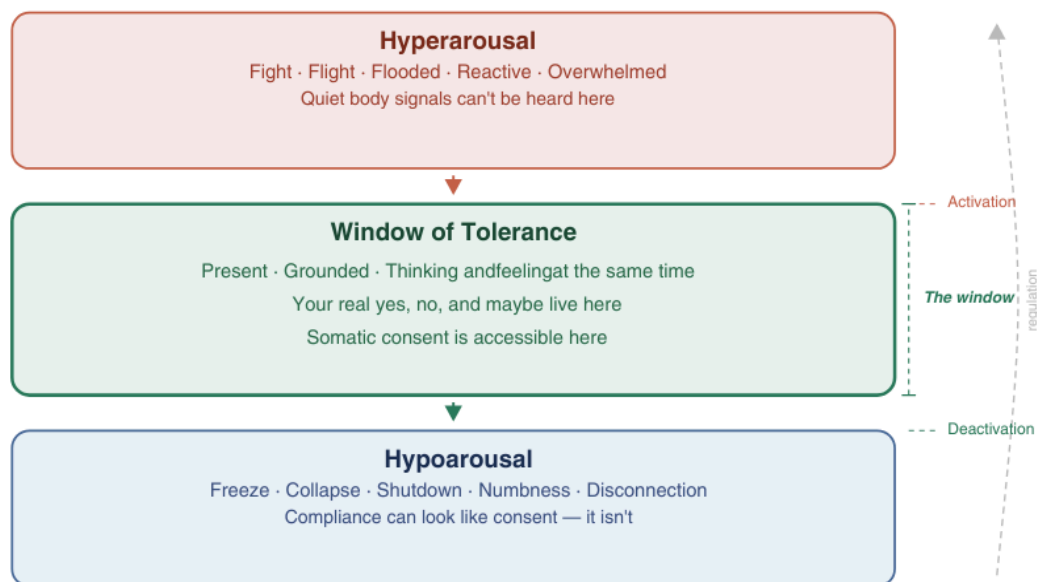
Your body prioritizes safety above all else and your nervous system selects its response based on a subconscious assessment of safety. Understanding that your internal responses and subsequent reactions (even the ones that feel frustrating) are biological adaptations rather than moral failings or personal flaws might allow you to shift from self-judgment to somatic curiosity.

We cannot access authentic consent if we are in a state of survival. By mapping our responses to the 'Polyvagal Ladder,' we can begin to see which signals are coming from our true selves and which are coming from our self-protection system.

Polyvagal Ladder (based on Polyvagal Theory, Porges adapted for Somatic Consent education)

Consent isn't just a decision we make; it's a state we inhabit. Use this ladder to identify which 'zone' you are in before you respond to others.

1. Ventral Vagal (Top): "Safe & Social." You feel curious, open, grounded and able to give genuine, embodied consent.
2. Sympathetic (Middle): "Fight or Flight." Consent here feels like pressure, urgency, or a need to agree to "get it over with."
3. Dorsal Vagal / Fawn (Bottom): "Freeze or Appease." Consent here is a reflex to stay safe. You feel numb, checked out, shut down, or overly agreeable.



Dr. Loi Medvin - drloi.com - Adapted for somatic consent education

Week 3: The Protector & the Reflective “Yes”

Focus: Moving from Self-Blame to Self-Compassion

Most of us view "people-pleasing" or compliance as a character flaw. In somatic work, we rename this the **Fawn Response**.

Fawning is a brilliant, high-level survival strategy. It is your nervous system’s way of neutralizing a threat by staying in the "good graces" of others. When your system feels it cannot safely fight or flee, it chooses to **appease**.

In this state, a "Yes" isn't a choice; it’s a reflex. A fawning "Yes" is often your body’s way of saying: "Please stay safe with me."

The Anatomy of a Fawn Response

Think of a recent time you said "Yes" while feeling a "No" or a "Wait" underneath.

- **The Physical Signal:** Where in your body did you feel that hidden "No"? (e.g., *tightness in the throat, a knot in the stomach, holding your breath*)

- **The Survival Logic:** What was the unspoken fear behind that "Yes"? (e.g., *"If I say no, they will be angry," "I'll be a burden," "I'll be rejected"*)

Meeting the Protector

Somatic psychology (and Internal Family Systems) views this reflex as a **Protective Part** of your system. It isn't trying to betray your truth; it is trying to ensure your survival. When we acknowledge this part’s hard work, the internal "tug-of-war" begins to soften.

Fawning is often tied to childhood attachment survival - know that you don't have to "solve" the fear yet. **Note: We are only meeting the Protector today. We are not asking it to leave or change. Just noticing its presence is enough for this week**

The Somatic Inquiry: Turn your internal attention toward the part of you that stepped in to say "Yes" before you were ready.

Week 6: From Internal Awareness to External Expression

Focus: Relational Integration

After 5 weeks of internal listening, how do we stay connected to our bodies, our “Self” while in connection with others?

Here are some examples of things you might say to honor your body's signals. Feel free to amend these, play with the wording, or shorten them until they feel “right” in your own mouth.

To Buy Yourself Time (Honoring the “Maybe”)

When you aren't a “No,” but your system hasn't reached a clear “Yes” yet. These phrases protect you from the pressure of immediacy:

- “My mind wants to say yes, but my body is saying ‘wait.’ I’m going to honor my body today.”
- “I’m noticing a ‘not yet’
- in my system. I need some time to sit with this before I have an answer.”
- “I need 10 minutes (or a few days) to check in with myself before I decide.”
- “I’m not a ‘no,’ but I’m not a ‘yes’ yet. Can we check back in on this tomorrow?”
- “I need to think about that and see how it lands.”

To Honor the Limit (The Somatic “No”)

When your internal compass has registered a clear pull-back, bracing, or “No.” These phrases are clear, kind, and final.

- “I’m noticing a ‘no’ signal in my system, so I’m going to pass.”
- “My capacity is full right now. I need to stop here.”
- “I’ve realized I don’t have the somatic capacity for this favor/event/task today.”
- “That doesn’t feel right for me/my system.”
- “My body is giving me a clear ‘no’ on this one, so I’m going to listen to it.”

Relational Check-Ins (Shared Consent)

When you want to invite someone else into a shared state of somatic awareness. These are invitations, not interrogations. (see next page for examples)

- **The Curious Pause:** “I’m noticing a shift in the energy here. What happened?”

- **The Co-Regulation:** "Something just happened here - I'm feeling a bit of [tightness/speed] in my own system. Can we take a minute and both check in with ourselves?"
- **The Pressure Valve:** "I want to make sure I'm not moving too fast for your system. How does this pace feel to your body?"
- **The Non-Verbal:** "Can we just pause and feel our feet on the floor for a second before we keep going?"

When You've Already Said Yes (Revocable Consent)

When you realize mid-way through that your "Yes" has turned into a "No."

- "I thought I was a yes to this, but I'm realizing my body is actually feeling done. Can we stop here?"
- "My internal signal has shifted. I need to change my answer to a no."
- "I've reached my limit for today. I'm going to step back now."

A Note on the "Gulp" Moment

It is normal to feel a "gulp" in your throat or a racing heart when you first start using these phrases. That is your nervous system reacting to the "newness" of setting a boundary. **The Goal:** We aren't looking for a "perfectly calm" delivery. We are looking for **integrity**—matching your outside words to your inside truth.

The Invitation:

Focus: **Moving forward** 

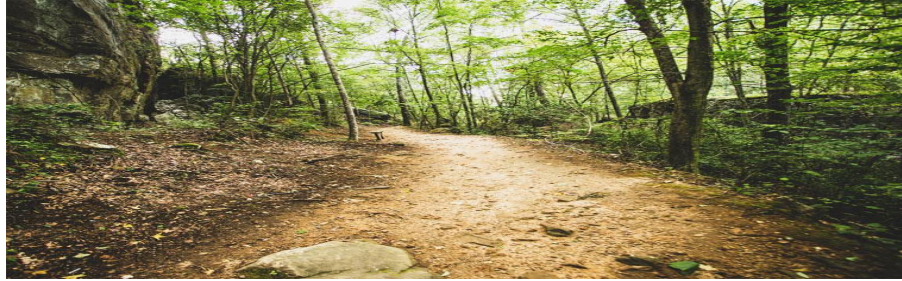
Somatic awareness is a foundational skill. Developing a "felt sense" of your *Yes*, *No*, and *Maybe* gives you immense *power and choice* in how you show up and who you interact with.

By having conscious awareness in the moment, you gain the agency to create new neural pathways and new behavior patterns. With practice, these new choices become your new baseline.

When Noticing Isn't Enough: That said, many of our consent strategies are survival based and built to protect us. These patterns are stored below the level of language (subcortical) and "stuck" in the body. It may be difficult to shift these deep-seated patterns by yourself. If your "No" feels stuck, your "Maybe" feels heavy, or you feel a

desire for longer-lasting change, I am here to help. The specialized somatic work I do - including Intensives (longer sessions for deeper, and more rapid change), Brainspotting and Ketamine-Assisted Psychotherapy - provides the professional "scaffolding" needed to reorganize these deep patterns safely.

Deepen the Work 🌿 Dr. Loi Medvin | *Somatic Psychologist Specializing in Intensives, Brainspotting & Ketamine-Assisted Therapy* www.drloi.com (707) 604-8087



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To support your ongoing journey of self-trust, the following clinical resources and concepts provide the neurobiological foundation for the practices we have explored.

Appendix: Clinical References & Resources

Foundations of Neurobiology & Safety

- Porges, S. W. (2017). *The Pocket Guide to the Polyvagal Theory: The Transformative Power of Feeling Safe*. W. W. Norton & Company. *The primary clinical framework for this guidebook's exploration of the nervous system and the biological necessity of safety.*
- Porges, S. W., & Porges, S. (2023). *Our Polyvagal World: How Safety and Connection Win Over Reactivity*. W. W. Norton & Company. *Essential for understanding how these biological signals translate into our social and relational boundaries.*
- Levine, P. A. (1997). *Waking the Tiger: Healing Trauma*. North Atlantic Books. *Foundational somatic work on completing survival loops and the role of the "Fawn" and "Freeze" responses*
- Menakem, R. (2017). *My Grandmother's Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies*. Central Recovery Press. *A critical resource for understanding how culture and lived history influence our internal signals of safety and consent.*

Clinical Concepts for Self-Trust & Consent

To deepen the integration of the 6-week journey, this guidebook utilizes two core somatic principles that support the transition from survival to agency:

Titration (The Power of the "Drop")

Derived from the work of Peter Levine, Titration is the clinical practice of experiencing small amounts of distress or activation at a time. In the context of Somatic Consent, we work in "drops" rather than waves. This ensures that as you reconnect with your internal signals, your nervous system can integrate new awareness without becoming overwhelmed or re-traumatized. Self-trust is built through these successful, small-scale experiences of staying present with oneself.

Biological Completion

Many survival responses, such as the Fawn Response (people-pleasing), are "incomplete" biological loops. Your body initiated a protective strategy that never reached a state of resolution or safety. Through the practices in this guide, we aim for Biological Completion—allowing the system to move through the defensive reflex and return to a state of ventral vagal social engagement. Recognizing that your past responses were brilliant survival strategies allows for the self-compassion necessary to build authentic consent.

Professional Modalities for Deep Reorganization

For those wishing to bridge the gap between somatic awareness and subcortical healing, the following modalities are utilized in Dr. Medvin's clinical practice:

Modality	Clinical Focus
Brainspotting (BSP)	A neurobiological tool used to locate, focus, and release neurophysiological sources of emotional and physical pain by reaching the subcortical brain.
Ketamine-Assisted Psychotherapy (KAP)	Utilizes a "neuroplastic window" to soften rigid defensive structures, facilitating deeper somatic reorganization and shifts in long-standing patterns.

Experiential Tools from this Guide

The Somatic Consent Framework: Clinical application of Polyvagal principles to the honoring of internal "Yes" and "No" signals.

The "Sacred Maybe" & The Pause: Practices designed to create space for the nervous system to settle before externalizing a response.

The Somatic Phrase Guide: Scaffolding for externalizing internal boundaries in real-time connection.

This guidebook serves as a clinical companion to deep somatic work. For individual therapy, clinical consultation, or to learn more about the 6-week journey, please visit the author's website - www.drloi.com



**Awaken the Joy
of Being**