

COMMUNITY * VITALITY * SUPPORT * COMPASSION * EXCELLENCE *

MEDIA KIT

TRANSFORMING LIVES
through HEALING TRAUMA



SomaticExperiencing[®]

“Helping the helpers.”

Trauma is a fact of life. It does not, however, have to be a life sentence.

That is a guiding principle of the Somatic Experiencing Trauma Institute (SETI) . We exist to bring *education and training* to those who can help heal people with trauma, *hope* to those living with trauma, and *awareness* of trauma to related professional communities and the general public.

Somatic Experiencing is a psychobiological method for healing trauma and other stress disorders. It is based on a multidisciplinary intersection of physiology, psychology, biology, neuroscience and medical biophysics and has been clinically applied for more than four decades.

The SE approach offers education and clinical tools to those in the “helping” professions —therapists, medical professionals, addiction professionals, social workers, first responders, educators, counselors in religious settings.

We know that trauma can result from a wide variety of stressors: war, natural disasters, emotional abuse, loss, domestic conflict, accidents. We also know that it *can* be overcome —with the right knowledge, tools, and support system. That’s why we’re dedicated to *helping the helpers*.

We also serve as a resource for the media to educate consumers and how to seek help.

Because when we do that successfully, we can achieve our vision of transforming lives through healing trauma.

“ . . . [T]he journey toward a vital, spontaneous life means more than alleviating symptoms – it means transformation. . . Transformation is the process of changing something in relation to its polar opposite. . . This is a profound metamorphosis.”
—Dr. Peter Levine, Somatic Experiencing pioneer

Mission

Support trauma resolution and resilience through culturally responsive professional education, training, research, and outreach in diverse global communities.

Vision

Transforming lives through healing trauma.

Values

- Support: Foster and nurture hope and empowerment.
- Compassion: Lead with empathy and understanding.
- Excellence: Deliver quality professional education in a spirit of innovation, creativity and research.
- Community: Cultivate trust and safety through acceptance, equity, inclusion, and unity.
- Vitality: Inspire new possibilities and restore resilience through increased organizational capacity and self-regulation.



Somatic Experiencing® Trauma Institute

What is Somatic Experiencing

The Somatic Experiencing method is a body-oriented approach to the healing of trauma and other stress disorders. It is the life's work of Dr. Peter A. Levine, resulting from his multidisciplinary study of stress physiology, psychology, ethology, biology, neuroscience, indigenous healing practices, and medical biophysics, together with over 45 years of successful clinical application. The SE™ approach releases traumatic shock, which is key to transforming PTSD and the wounds of emotional and early developmental attachment trauma.

The Somatic Experiencing Approach offers a framework to assess where a person is “stuck” in the fight, flight or freeze responses and provides clinical tools to resolve these fixated physiological states. It provides effective skills appropriate to a variety of healing professions including mental health, medicine, physical and occupational therapies, bodywork, addiction treatment, first response, education, and others.

The Science: Trauma may begin as acute stress from a perceived life threat or as the end product of cumulative stress. Both types of stress can seriously impair a person's ability to function with resilience and ease. Trauma may result from a wide variety of stressors such as accidents, invasive medical procedures, sexual or physical assault, emotional abuse, neglect, war, natural disasters, loss, birth trauma, or the corrosive stressors of ongoing fear and conflict.

How It Works: The Somatic Experiencing approach facilitates the completion of self-protective motor responses and the release of thwarted survival energy bound in the body, thus addressing the root cause of trauma symptoms. This is approached by gently guiding clients to develop increasing tolerance for difficult bodily sensations and suppressed emotions.





Somatic Experiencing® Trauma Institute

Fast Facts about the SE™ Institute:

- 501(c)(3) nonprofit founded in 1994 and governed by a five-member Board of Directors
- Based on the foundational work of Peter A. Levine, Ph.D. (please read more in the History section)
- Based in Boulder, Colorado with trained Somatic Experiencing Practitioners working around the world
- Training offered includes: a three-year curriculum designed to lead to the Somatic Experiencing Practitioner Certificate, short courses on the basic principles of Somatic Experiencing, and assistant and provider programs
- More than 120,000 professionals in over 35 countries on 6 continents have been trained in SE. Currently there are SE students 74 countries.
- Our organization includes more than 1,400 staff, faculty, coordinators, and training assistants.





Somatic Experiencing® Trauma Institute *About Our Training*

In 1972, in his “tree house” in Berkeley, California, Dr. Peter Levine held the first class on his therapeutic concept of Somatic Experiencing. Since then, more than 120,000 professionals in the healing profession have taken SE professional training worldwide.

Trauma *can* be overcome —that’s why we’re focused on *helping the helpers*. At the Somatic Experiencing Institute, students no longer meet in a tree house. Around the world —six continents to be exact —professionals participate in our robust and comprehensive training in person and on-line.

Training is delivered through a combination of lectures, live demonstrations, guided practice sessions, audio-visual case studies, and suggested reading. Students enroll in one of our many offerings: a three-year curriculum designed to lead to the Somatic Experiencing Practitioner certificate (SEP), short courses on the basic principles of Somatic Experiencing, and assistant and provider programs. More than 12,000 mental health, medical, bodywork and other professionals globally have been trained in SE.

Rather than focus on the re-telling of traumatic events or personal history, SE aims to identify what is interfering with people’s internal threat-recovery process and helps clients develop tools for restoring their innate capacity to rebound from overwhelming experiences. By facilitating the completion of self-protective responses and releasing survival energy that has become bound in the body, SE addresses the root cause of trauma symptoms.

We envision a world of transforming lives through healing trauma.





Somatic Experiencing[®] Trauma Institute *Media Insights*

If you are a member of the media, we invite you to review the specific topics below and contact us for further information or resources. Please contact Marv Tuttle at communications@traumahealing.org

Trauma and War

According to the National Center for PTSD, a unit of the U.S. Department of Veterans Affairs, between 11 percent and 20 percent of soldiers who served or are serving in Operation Iraqi Freedom and Operation Enduring Freedom have post-traumatic stress syndrome (PTSD) in a given year. Even more disturbing is the fact that 15 percent of veterans of the Vietnam War were diagnosed with PTSD *20 years after the war* and approximately 30 percent of all Vietnam veterans have had PTSD in their lifetime. In addition to combat, another cause of PTSD in the military can be military sexual trauma —23 percent of women have reported sexual assault when in the military.

Although the standard treatment for PTSD has typically involved psychotherapeutic intervention, in recent years the search has been on for new approaches to help veterans heal from PTSD trauma—including body-centered or somatic approaches such as Somatic Experiencing[®]. These approaches share the assumption that trauma is first and foremost an experience that affects and imprints the body and that it's essential to engage the body in the healing process.*

[* J. Scott Janssen, MSW, LCSW, Social Work Today, September/October 2015
Somatic Experiencing : A Body-Centered Approach to Healing Veterans' PTSD](#)





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Trauma and Animal Behavior

Animals are constantly under threat of death, yet show no symptoms of trauma. From his years studying animal behavior, Dr. Peter Levine discovered that trauma has to do with the third survival response to perceived life threat, which is freeze. When fight and flight are not options, we freeze and immobilize, like “playing dead.” This makes us less of a target. However, this reaction is time-sensitive—in other words, it needs to run its course, and the massive energy that was prepared for fight or flight gets discharged, through shakes and trembling. If the immobility phase doesn’t complete, then that charge stays trapped, and, from the body’s perspective, it is still under threat. The Somatic Experiencing method works to release this stored energy and turn off this threat alarm that causes severe dysregulation and dissociation.

SE helps people understand this body response to trauma and work through a “body first” approach to healing with a trained SE Practitioner.





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Trauma in Communities

Community trauma affects social groups or neighborhoods long subjected to interpersonal violence, structural violence, and historical harms.

Research suggests that the causes of community trauma lie in the historic and ongoing root causes of social inequities, including poverty, racism, sexism, oppression and power dynamics, and the erasure of culture and communities.* For example, nearly half—42%—of Baltimore’s children experience three-plus traumatic events before they reach adulthood.*

The Elijah Cummings Healing City Act, enacted by the Baltimore City Council in January 2020, will seek to train the focus of Baltimore government and leadership on healing from the trauma, violence and racial inequity in the city.

The Act creates a multi-agency task force that requires formal training on trauma-informed care and makes trauma-responsive and trauma-informed delivery of services a priority across city government. The task force will address childhood trauma and requires training at every Baltimore city agency to provide appropriate response to the unmet need of providing a lasting response to those who are dealing with trauma in their lives and communities.

[Trauma-Informed Community Building and Engagement, The Urban Institute, April 2018; Mayor’s Office of Children & Family Success, \[bmorechildren.com/policy-advocacy\]\(http://bmorechildren.com/policy-advocacy\)](#)





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Trauma and First Responders

Rescue workers can be defined as any person who professionally or voluntarily engages in activities devoted to providing out-of-hospital acute medical care; transportation to definitive care; freeing persons or animals from danger to life or well-being in accidents, fires, bombings, floods, earthquakes, other disasters and life-threatening conditions.

As a consequence of these activities, rescue workers have a high exposure to traumatic events. A traumatic event is defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM) as experiencing, witnessing, or being confronted with at least one event that involves actual or threatened death or serious injury, or a threat to the physical integrity of self or others.

The occupational routine of rescue workers includes the provision of emergency medical assistance to severely injured people, searching for and recovering victims from natural disasters or other traumatic events, all of which qualify as traumatic according to DSM criteria.

Because the risk of developing PTSD increases with the number of traumatic events experienced, rescuers are a high-risk group for PTSD. Besides occupation, the nature, the severity, and the repetition of the exposure to traumatic events may influence the prevalence of PTSD. Research studies indicate promising results on the use of Somatic Experiencing to resolve the physiological component of trauma in disaster survivors and responders.*

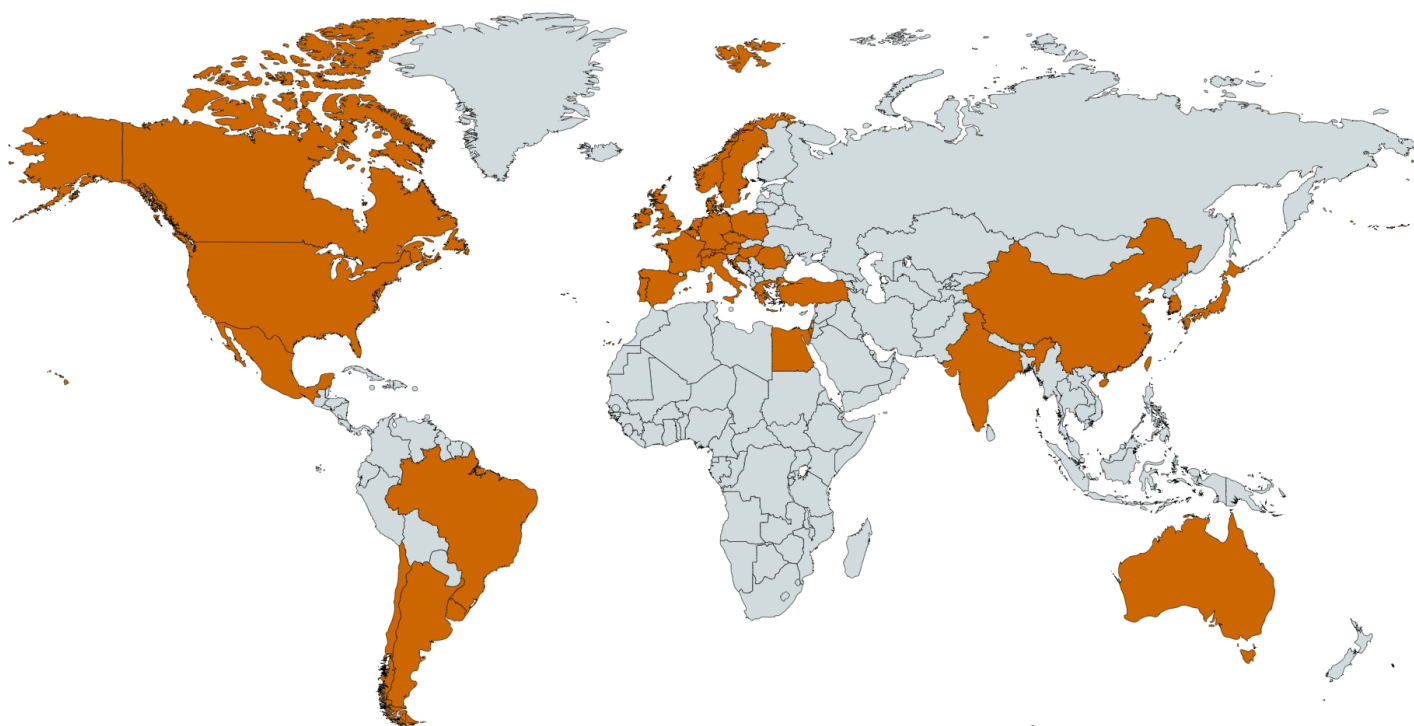
Please see the Resources tab on our website www.traumahealing.org/resources for more helpful information on Somatic Experiencing .

*[*Rescuers at risk: a systematic review and meta-regression analysis of the worldwide current prevalence and correlates of PTSD in rescue workers, ncbi.nlm.nih.gov; The Role of Somatic Psychotherapy in Treating First Responders: Providers' Perspectives, Master of Social Work Clinical Research Papers, Sophia.stkate.edu](#)*



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Somatic Experiencing® Trauma Institute *Global Presence*



Argentina
Australia
Austria
Belgium
Brazil
Canada
Chile
China
Croatia
Czech Republic
Denmark
Egypt
France
Germany
Great Britain
Greece
Hong Kong
Hungary
India
Ireland

Israel
Italy
Japan
Mexico
Netherlands
Norway
Poland
Portugal
Romania
Scotland
Singapore
South Korea
Spain
Sweden
Switzerland
Taiwan
Turkey
Uruguay
United States



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Michael Changaris, PsyD, 2020 Chairman Michael is a clinical psychologist with a specialty in the biological bases of behavior, stress physiology, and the neuroanatomy of PTSD. He is the training coordinator for an integrated health psychology program, training and supervising post-doctoral, pre-doctoral and practicum level students on a biopsychosocial approach to team-based care. Michael completed his post-doctoral fellowship with the child, family and adolescent intensive outpatient program with Kaiser Permanente in Antioch, California. He received a doctorate in psychology from John F. Kennedy University. Dr. Changaris completed his dissertation research on the efficacy of Somatic Experiencing in treating adults who were homeless. He also has worked extensively with seniors and has developed treatments and trainings to address the unique needs of this population.

Monica Simionato, MA, SEP, Vice Chair: Monica is a consultant, professor and writer about leadership through emotional intelligence. An Italian anthropologist and master journalist, Monica now lives in Canada where she is a PhD candidate at Université du Québec à Trois-Rivières. Previously she was based in Brazil, and consulting primarily for international companies, developing programs in leadership and human awareness. She is trained in neuro-linguistic programming (NLP), anger management, emotional intelligence, and andragogy. Monica has taught in Italian, French, and Swedish universities and she formerly served as professor of leadership in the prestigious Fundação Getúlio Vargas (FVG) and Sao Paulo State University in São Paulo, Brazil. She is the author of several books published in Italy and Brazil about leadership and emotions and the emotional factors in negotiations. Monica completed the SE Professional Training and earned her SEP certificate in São Paulo.



Rebecca Stahl, JD, LLM, SEP: Rebecca is Deputy Executive Director at the Sayra and Neil Meyerhoff, representing children in child welfare cases. She previously represented children in both family and child welfare cases in Tucson, Arizona at the Pima County Office of Children's Counsel. Rebecca was a Fulbright Scholar in New Zealand and during her Fulbright year earned a master of law degree from the University of Otago in Dunedin, New Zealand, where she studied the role of lawyers for children in family court cases. Rebecca has presented at a variety of international conferences focused on children's rights and family law on topics ranging from yoga and stress management to the role of lawyers for children in both family and juvenile court. She also has taught presentations on being more trauma-informed in legal practices, particularly in representing children, and she recently published a book regarding the psychological issues lawyers for children need to understand to better represent their child clients. Rebecca completed the SE Professional Training and earned her SEP™.



Sangeeta Fernandes, Ph.D.: Sangeeta is the director of the American Academy of Ophthalmic Executives, serving a specialized group of 4,000 practice executives and physicians within the San Francisco-based international association of 30,000 ophthalmologists. In her previous work, Sangeeta studied mental health and sexual trauma among marginalized populations, including those at risk for HIV. Her work focused on finding pathways to provide risk education and inspire health efficacy in populations challenged by socio-cultural and economic inequity. She has more than 15 years of experience working in and with academic and research institutions in international public health.

Michele Solloway, Ph.D., MPA, SEP, RPP, LMT/BCMBT Michele is a nationally renowned health services scientist and researcher. She is president of Renew Your C.O.R.E (Creativity, Opportunities, Resilience and Effectiveness), a private practice in Baltimore, Maryland, specializing in trauma healing at the individual, group, and organizational levels. As a healing arts practitioner for more than 15 years, she is certified in Somatic Experiencing®, polarity therapy, craniosacral therapy, massage, and energy healing. Michele has a particular interest in working with professional service providers (healthcare, social services, education, and justice) who are at high risk for secondary or vicarious trauma. She also has more than 25 years experience as a health services researcher with a focus on adverse childhood experiences (ACEs), child and family health, vulnerable populations, federal and state health policy, and integrative medicine. Michele recently coauthored a national agenda on ACEs for research, policy, and practice and consults with organizations to provide training to promote trauma-informed organizations and systems of care.





Somatic Experiencing® Trauma Institute *Helping Others*

The SE Trauma Institute is dedicated to comprehensive public awareness of Somatic Experiencing and how it can help heal trauma. We also want to help those in related professions recognize and understand secondary trauma.

Secondary trauma is an umbrella term for the trauma that results from repeated empathetic engagement with traumatized populations. It is a very real and very serious issue. It is a natural consequence of working to help those who have been traumatized. Secondary trauma can have serious consequences on health, both mental and physical.* Secondary trauma is not a lack of willpower, resilience, or commitment. It is not just “normal” work-related stress. It is an occupational hazard that can affect professionals in various settings and occupations.

Our decades-long experience in helping people heal from trauma can help institutions and communities of professionals who may experience secondary trauma. We invite you to contact us for more on how we can develop a customized program on Somatic Experiencing and trauma resolution to your organization.

Medical Community: doctors, nurses, physical and occupational therapists, medical academics, hospital social workers

Workplace: human resources professionals, wellness program managers, volunteers

Victim Service Providers: professionals involved in services to people who have experienced sexual assault, child abuse/neglect, domestic violence, elder abuse, hate crimes, accidents, natural disasters

Legal and Justice Community: police, investigators, legal advocates, prisons

Journalists: editors, reporters, photojournalists

Religious Community: Clergy, peer-to-peer religious or spiritual counselors

[*Secondary Trauma in the Workplace, Montana State University](#)



SE

Somatic Experiencing® Trauma Institute *Our Staff Leadership*

Marv Tuttle, Interim Executive Director

Krysti Giese, Director of Operations and Human Resources

Ana Paula Bastian, Director of Legal Affairs

Sonja Cole, Director of Programs and Conferences

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