

## INFORMED CONSENT

I have an ethical obligation to help you make an informed choice in seeking treatment to address your concerns. At any time, you may ask me to explain why I am requesting information or indicating a new approach. I will be glad to explain the purpose behind my techniques, and the model from which I am operating.

**The possible benefits** of participating in therapy may include:

- A better ability to handle or cope with marital, family and other interpersonal issues
- Increased understanding of family and personal goals and values
- A deepening of connections in your relationships
- A healing of wounds inflicted past or present
- Greater sense of wellbeing or happiness as an individual and increased relational harmony
- Resolution of specific concerns brought to therapy.

**The possible risks** of participating in therapy may include:

- No guarantee as to therapy outcome. While most people improve, some people experience no improvement in their situation, while a few may even think that the situation is worse after treatment.
- The experiencing of intense and uncomfortable feelings as we address unpleasant events, relationship patterns and other concerns
- Therapy can sometimes lead to individual decisions that can be disruptive to the couple or family.

My signature below affirms my informed and voluntary consent to enter therapy (and/or have my child/ren enter therapy). I affirm that prior to becoming a client of Cecilia Esquivel, LCSW-C, she gave me sufficient information to understand the nature of therapy, including the possible risks and benefits, and also the nature of confidentiality. I understand her office policies and procedures. I have had an opportunity to ask questions and have had my questions answered satisfactorily. I understand that I can ask questions and raise concerns about the treatment at any time.

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