



## Shenandoah Art Therapy, LLC Group Informed Consent Addendum

### Confidentiality

It is very important this be a safe place for you and all members of our group to discuss art processes and creative experiences in order to reach the full potential benefit of the group component of this program. Anything said between any two or more group members at any time is confidential. I agree anything which occurs between or among group members will not be discussed outside of group. There is an exception to this confidentiality which applies to the art therapist. If the art therapist becomes aware that someone is in danger of hurting themselves or someone else or there is a risk of or disclosed occurrence of child or adult abuse or neglect, the art therapist has a professional obligation to intervene/report abuse in order to keep everyone safe. I understand the limitations of my confidentiality with the group leaders in order to maintain my safety.

### Privacy

You will never be required to offer more information than you are comfortable sharing. We encourage you to find opportunities to process your responses to the art process and provide helpful feedback to the other group members/receive feedback. If I am asked questions or asked to participate in an activity which makes me feel uncomfortable, I understand that I have the right to refuse. I agree that I will never pressure other group members to participate in any discussion or activity after the member has refused. I understand that the art therapist is obliged to protect this right. I also understand that I will benefit more from the group the more I am able to take risks in sharing and participating.

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Participant Signature

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Date

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Guardian Signature (if applicable)

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Date