
A WORKBOOK BY CARRIE DAVIDSON

THE COMPANION WORKBOOK

Addicted *to Trauma*

WORKBOOK

A guided journey through CPTSD, addiction, and taking your life back.

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FIRST EDITION · 2026

The Addicted to Trauma Companion Workbook

A guided journey through CPTSD, addiction, and taking your life back.

First Edition · 2026

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AGENTLENOTE

Before You Begin: Safety Planning

This workbook can surface strong emotions. Before beginning, complete this page. Think of it as knowing where the exits are before the flight takes off. You do not need to be in crisis to use it.

CRISISRESOURCES

988 · Suicide & Crisis Lifeline — call or text 988
741741 · Crisis Text Line — text HOME to 741741
1-800-662-4357 · SAMHSA Helpline — free, confidential, 24/7
1-866-662-1235 · Alliance for Eating Disorders

My therapist or counselor, and how to reach them:

A trusted friend I can call:

My sponsor or recovery contact:

My first regulation step if I feel overwhelmed:

A safe physical space I can go to:

If any exercise feels too large to hold alone, close the workbook and reach out. Returning to the work later is not failure. It is wisdom.

ORIENTATION

How to Use This Workbook

This workbook is a companion to *Addicted to Trauma*, but it is also its own complete journey. You do not need to have read the memoir to use it — you need only to be someone who recognizes yourself in the patterns it describes.

Move through the workbook at your own pace. There is no timeline. Some exercises take five minutes. Some take days.

ANOTE BEFORE YOU BEGIN

Every section begins with the Somatic Check-In from Exercise 1.1. Do not skip it. Your body is not separate from this work. It is the work.

ONE**Understanding Your Nervous System**

The polyvagal map, baseline, and body inventory.

TWO**The Four F Responses**

Fight, flight, freeze, fawn, and the outer critic.

THREE**The Loop**

Mapping your relational patterns and rewriting the script.

FOUR**The Parts Work**

IFS, toxic shame, and grieving childhood losses.

FIVE**The Tools**

Walker's 13 Steps, activation protocol, mindfulness, accountability.

SIX**Boundaries and Daily Practice**

The architecture of self-respect.

SEVEN**The Corrected Map**

Abandonment depression, earned security, new templates.

PART ONE

Understanding Your Nervous System

The foundation underneath everything else

“I was six years old when I learned to flinch. Thirty years later, I’m still in the process of convincing myself the storm is over.”

A note before we begin

Nothing you have done makes you broken. Everything your nervous system did — the hypervigilance, the scanning, the flinching, the reaching for relief wherever you could find it — was adaptation. Your brain received accurate information about its environment and responded accordingly. It kept you alive. It did its job.

The problem isn't that it did its job. The problem is that it never got the memo that the original threat is over. The work ahead is about updating the information.

The Three Polyvagal States

Polyvagal theory gives us a precise map of the nervous system's three states. Understanding which state you are in is the first step toward being able to shift it.

Ventral Vagal — Safe & Social

Calm, connected, curious, present. Able to think clearly and tolerate difficulty.

Sympathetic — Fight or Flight

Activated, anxious, restless, scanning for threat. Heart racing, difficult to think.

Dorsal Vagal — Collapse & Freeze

Shut down, numb, heavy, dissociated, hopeless. Often mistaken for depression.

People with CPTSD often oscillate between sympathetic activation and dorsal vagal collapse, with limited access to the ventral vagal state. The goal of regulation is to spend more time in ventral vagal and return there more quickly after activation.

EX
1.1

The Somatic Check-In · Your Foundational Practice

Return to this exercise at the start of every section. It takes three minutes. Do it before you read, before you write, before anything else. Your body is not separate from this work. It is the work.

Find a comfortable position. Take three slow breaths. Move your attention through your body from head to feet. Notice without judgment.

Where do I feel sensation right now?

What might this be linked to? What could it stem from?

Activation level — circle one:

☐ 1
 ☐ 2
 ☐ 3
 ☐ 4
 ☐ 5
 ☐ 6
 ☐ 7
 ☐ 8
 ☐ 9
 ☐ 10

Polyvagal state, circle one:

☐ Ventral
 ☐ Sympathetic
 ☐ Dorsal

Quality of the sensation, circle any:

☐ Buzzing
 ☐ Heavy
 ☐ Tight
 ☐ Numb
 ☐ Hollow
 ☐ Scattered
 ☐ Braced
 ☐ Foggy
 ☐ Raw
 ☐ Steady

☐ Open
 ☐ Light
 ☐ Warm
 ☐ Expansive
 ☐ Grounded
 ☐ Alive

IFYOUNOTICEDSOMETHINGPLEASANTORPOSITIVE

Pause here. Let yourself stay with it for a moment before moving on. Notice where in your body you feel it. Let it be real. Positive states are data too — your nervous system needs evidence that they exist.

What does my body most need right now?

EX
1.2

Your Nervous System Timeline

This exercise is not about blame. It is about information.

Earliest memory of feeling unsafe

Age:

When I feel afraid, the world is:

Environment:

When I need something, people:

Body feeling:

When things go wrong, I am:

Which survival responses did you develop?

- Fight — anger, control, pushing people away
- Flight — busyness, moving, changing relationships
- Freeze — going still, dissociating, going blank
- Fawn — people-pleasing, self-abandonment

EX
1.3

Mapping Your Baseline

Think about an ordinary Tuesday — not a hard day, not a great one. Just a regular day.

My shoulders are usually: Relaxed / Slightly tense / Significantly tense / Braced

My jaw is usually: Loose / Slightly clenched / Significantly clenched

My stomach feels: Settled / Mildly uneasy / Persistently uneasy / Knotted

Quiet feels: Restful / Slightly uncomfortable / Suspicious / Unbearable

What does my baseline tell me?

If my baseline were a weather report:

EX
1.4

The Body Keeps the Score — A Personal Inventory

Three physical symptoms with no clear medical explanation:

Where do emotions live in your body?**Anxiety lives in my:**

Shame lives in my:

Grief lives in my:

Safety feels like ____ in my body:

Anger lives in my:

Joy feels like ____ in my body:

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

What is one thing your nervous system has been doing for years that, now that you understand it, you can finally offer some compassion to?

PART TWO

The Four F Responses

Fight · Flight · Freeze · Fawn

“I was six years old and I had already learned that my own fear was less important than managing everyone else’s. That is not a personality trait. That is a survival strategy.”

A note before we begin

The four F responses are not disorders. They are adaptations. Every single one developed for a reason and kept you safe at some point. The work here is not to eliminate these responses — it is to understand them deeply enough that they stop running you from behind the scenes.

EX 2.1 *The Somatic Check-In*

Return to Exercise 1.1 and complete the check-in before continuing.

EX 2.2 *Your Four F Profile*

Rate how strongly you identify with each response on a scale of 1 to 5, then answer the reflection questions.

The Fight Response

Safety through control or conflict. Can look like rage, criticism, perfectionism, or difficulty being wrong.

1 2 3 4 5

Where does this show up in your life?

.....

.....

The Flight Response

Safety through movement or distraction. Can look like workaholism, busyness, changing cities, or the inability to be still.

1 2 3 4 5

Where does this show up in your life?

.....

.....

The Freeze Response

Safety through stillness or disconnection. Can look like dissociation, numbness, or feeling like you're watching your life from behind glass.

1 2 3 4 5

Where does this show up in your life?

.....

.....

The Fawn Response

Safety through appeasement and self-suppression. Can look like people-pleasing, inability to say no, or feeling hollow after giving everything.

1 2 3 4 5

Where does this show up in your life?

.....

.....

EX
2.3

The Outer Critic — The Fawn Response's Hidden Defense

Pete Walker distinguishes between the inner critic — which attacks the self — and the outer critic — which attacks others as a defense against intimacy. Many CPTSD survivors run both simultaneously.

The outer critic finds fault in others before they can find fault in you. It keeps you emotionally distant while the fawn response performs closeness — an exhausting combination.

What does my outer critic say about people in general?

What does it say about the people I'm close to?

When does it get loudest? What is it protecting?

Someone my outer critic has kept me from getting closer to:

EX
2.4

Origin Stories

I first learned this response was necessary when:

At the time, this response kept me safe by:

The cost of this response in my adult life:

What it actually needs — what it has always needed:

EX 2.5

Catching the Response in Real Time

For the next week, log each time you notice one of your F responses activating.

The trigger:

The response (which F fired):

The old story my nervous system believed:

What was actually happening:

EX 2.6

A Letter to Your Survival Response

Choose the response that has caused the most damage. Tell it when you first needed it. Tell it what it protected you from. Tell it that it can finally rest.

Dear _____,

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

Which survival response are you most ready to understand with compassion rather than judgment?

PART THREE

The Loop

The pattern that kept repeating

“That’s the loop. Not one dramatic spiral but a decade of the same story told in different cities to different people who never knew they were reading from a script written long before they arrived.”

A note before we begin

The loop is not evidence that you are broken. It is evidence that your nervous system is doing exactly what nervous systems do — seeking the familiar because the familiar is what it learned to survive inside. The repair starts with seeing the loop clearly enough to name it.

EX 3.1 *The Somatic Check-In*

Complete the check-in from Exercise 1.1 before continuing.

EX 3.2 *Mapping the Pattern*

A relationship pattern that keeps repeating:

.....

.....

Love feels like:

.....

.....

Another relationship with a similar dynamic:

.....

.....

To be loved, I have to:

.....

.....

What do these have in common underneath the surface?

.....

.....

EX 3.3 *The Familiar Versus the Safe*

Three qualities that immediately feel like home:

Three qualities that should feel safe but feel uncomfortable:

Are these safe or familiar? Where did you first encounter them?

Where does that discomfort come from?

EX
3.4

The Exit Patterns

Exit 1

What triggered it:

Which F response drove it:

What I was running toward:

What I was running from:

What I told myself:

What I think the actual reason was:

Exit 2

What triggered it:

Which F response drove it:

What I was running toward:

What I was running from:

What I told myself:

What I think the actual reason was:

Exit 3

What triggered it:

Which F response drove it:

What I was running toward:

What I was running from:

What I told myself:

What I think the actual reason was:

What pattern do you notice across all three?

EX
3.5

Breaking the Script

Write the first thing that comes. Don't overthink. These are the automatic scripts your nervous system runs — not truths, but predictions.

People always eventually:

When things are going well, I wait for:

When someone is consistently kind to me, I assume:

The moment I feel truly close to someone, I:

My role in relationships is always to:

The thing I most want someone to see that I hide:

EX
3.6

Writing a New Script

These new sentences will not feel true yet. You are writing intentions — the direction you are choosing to move in. Post them somewhere you will see them.

Old script:

New script:

Old script:

New script:

Old script:

New script:

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

What is one loop you are ready to name out loud — to yourself, to a therapist, to this page — that you have never fully named before?

PARTFOUR

The Parts Work

Going back for the ones you left behind

“When I finally turned toward my teenage self — the one I had exiled deepest and longest — I found someone who had been waiting a very long time for me to come back.”

A note before we begin

You are not one thing. You are a system of parts, each of which developed for a specific reason, to protect something essential. This section includes IFS parts work, dedicated toxic shame exercises, and childhood grief work — three of the most important and most commonly avoided areas of CPTSD recovery.

EX
4.1

The Somatic Check-In

Parts work can bring up unexpected emotion. Know where you are in your body before you go inward.

EX
4.2

Meeting Your Parts

This is an introduction — not an excavation. We are simply going to notice who is in the room. Give each part a descriptive name.

Part 1

Name:

.....
.....

What it feels like in your body:

.....
.....

What it tends to say:

.....
.....

What it most needs:

.....
.....

Part 2

Name:

.....
.....

What it feels like in your body:

.....
.....

What it tends to say:

.....
.....

What it most needs:

.....
.....

Part 3

Name:

What it feels like in your body:

What it tends to say:

What it most needs:

Part 4**Name:**

What it feels like in your body:

What it tends to say:

What it most needs:

EX
4.3*Protectors and Exiles***Protector 1****Name:**

Strategy:

What it fears:

What exile it protects:

Protector 2

Name:**Strategy:**

.....

.....

.....

.....

What it fears:**What exile it protects:**

.....

.....

.....

.....

Your Exiles

If there is a younger version of you still carrying something — how old is she? Where is she? What is she carrying?

.....

.....

.....

.....

.....

EX
4.4*A Conversation with Your Inner Critic***Whose voice does it most sound like?****“I hear you. I know you developed because ____”**

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.....

.....

.....

.....

.....

The three things it says most often:**What is it afraid will happen if it stops?**

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EX
4.5*Reparenting Your Younger Self*

The heart of the parts work. Go back — not to relive the past, but to finally be the adult in the room.

How old is she?

.....

.....

What does she most need to feel?

.....

.....

Where is she?

.....

.....

What does she most need to hear?

.....

.....

Dear _____,

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Toxic Shame

DEFINITION

Toxic shame is different from guilt. Guilt says I did something wrong. Toxic shame says I am something wrong — it is identity-level, lives below conscious thought, and is the central wound of CPTSD.

Shame was installed before you had words for it — by contempt, by neglect, by the repeated experience of having your needs treated as inconvenient. Healing it requires naming it directly, tracing its source, and building a compassionate internal response.

EX
4.6

Mapping Your Toxic Shame Narrative

Complete these sentences quickly and honestly. These are the beliefs toxic shame has been running in the background — not facts, but deeply held survival conclusions.

I am fundamentally:

The thing I most fear people will find out about me:

I don't deserve:

The part of myself I most try to hide:

When I make a mistake, I tell myself:

I became this way because:

Whose voice does that shame narrative sound like?

What would you say to a child who believed this?

EX
4.7

Guilt vs. Toxic Shame — A Distinction

GUILT	TOXIC SHAME
I did something wrong	I am something wrong
Specific to a behavior	Global — about who you are
Motivates repair and change	Produces paralysis and hiding
Can be resolved	Feels permanent and indelible

Think of something you feel bad about. Is this guilt or toxic shame? How do you know?

A compassionate response to your shame — separating any behavior from your worth as a person:

Grieving Your Childhood

FROM PETE WALKER

Grieving childhood losses is one of the most essential and most avoided tasks in CPTSD recovery. Grief in CPTSD is the grief of absence — of what never was. The attunement, the safety, the childhood that was organized around managing the adults instead of being held by them.

EX
4.8

What I Needed and Didn't Get

This exercise is not about blaming caregivers. It is about finally acknowledging the truth of what you experienced so your nervous system can stop carrying it as a present-tense emergency.

As a child, I needed to feel:

The childhood I deserved but didn't have looked like:

As a child, I needed to hear:

The losses I have never allowed myself to feel:

As a child, I needed someone to:

The feeling underneath my anger is often:

EX
4.9

A Letter to Your Childhood Self

Write to the child you were. Not to fix anything or explain anything. Just to witness. To say: *I see you. I know what it was like. You deserved better. And I am here now.*

Dear little one,

EX
4.10

Tracking the Parts in Daily Life

Use this simple daily check-in for one week.

Morning — Which part is most activated? What does it need?

Before a difficult interaction — Which part is about to walk in?

After a difficult interaction — Which part took over? What triggered it?

Evening — Which part am I most grateful for today?

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

What is one thing you have been carrying that you are finally ready to grieve? What does your younger self most need to hear from you today?

PART FIVE

The Tools

Building the pause between trigger and response

“That pause — that small gap between stimulus and response — is where freedom lives for a trauma survivor. Everything before the pause is nervous system. Everything inside the pause is choice.”

A note before we begin

Recovery gave me tools before it gave me anything else. Not healing — healing came slowly. But tools I could use the same day I learned them. Learn these tools. Practice them before you need them. They need to already live in your body.

EX 5.1 *The Somatic Check-In*

Complete the check-in from Exercise 1.1 before continuing.

EX 5.2 *The Activation Protocol*

This is the single most important tool in this workbook. I use it every day. My clients use it every day.

STEP ONE—NAME IT

When you feel your body begin to activate, say: I am activated. Not I am angry. Not I am overreacting. Just: I am activated. This locates the experience in the nervous system rather than in a character flaw.

STEP TWO—REGULATE THE BODY

Hold ice cubes for 30 seconds · Splash cold water on your face · Take 5 slow breaths (exhale twice as long as inhale) · Step outside and feel your feet on the ground.

STEP THREE—WAIT 30 MINUTES

Do not re-engage with the conversation or situation for 30 minutes. Set a timer. Before 30 minutes your thinking brain is still partially offline. After 30 minutes you have access to choice.

Practice log — one week:

What triggered the activation:

Which tool I used:

What I wanted to do before 30 minutes:

What I actually did after 30 minutes:

What was different:

EX
5.3

Pete Walker's 13 Steps for Managing Emotional Flashbacks

Emotional flashbacks are sudden regressions into the overwhelming feeling-states of being an abused or abandoned child. They arrive as sensation and feeling, not visual memory. These thirteen steps — adapted from Pete Walker's Complex PTSD: From Surviving to Thriving — are the most widely used flashback management protocol in CPTSD recovery.

Signs you may be in an emotional flashback:

- The feeling is intense and out of proportion to what just happened
- You feel suddenly much younger — small, helpless, ashamed, terrified
- You have a strong urge to flee, fight, freeze, or disappear
- The present moment has lost its context — everything feels urgent
- Feeling small and fragile is a hallmark sign (Pete Walker)

The 13 Steps:

- 1 Say to yourself: *I am having an emotional flashback.*
- 2 Remind yourself: *I feel afraid but I am not in danger. I am safe now. I am reacting to old trauma.*
- 3 Own your locus of control: *I am not helpless. I have choices and resources I didn't have as a child.*
- 4 Breathe slowly and deeply. Let your body know it is safe.
- 5 Resist the inner critic. Do not let shame or self-blame amplify the flashback.
- 6 Feel your feet on the ground. Come back to your body, the room, the present moment.
- 7 Grieve. Let yourself feel the sadness underneath the fear without being consumed by it.
- 8 Resist the urge to isolate. Reach out to someone safe — even just to say: *I am in a flashback.*
- 9 Identify any present-day triggers. What rhymed with the original wound?

- 10** Rest afterward. Flashbacks are exhausting. You did not overreact.
- 11** Be patient with your recovery. Flashbacks decrease in frequency and intensity with practice.
- 12** Recognize that resolving flashbacks is gradual — each time you manage one, you build resilience.
- 13** Practice self-compassion. The flashback is not a relapse. It is your nervous system doing what it was trained to do.

Describe a recent emotional flashback — what was the trigger?

.....

.....

Which of the 13 steps do you most need to practice?

.....

.....

How old did you feel?

.....

.....

EX
5.4

Building Your Regulation Toolkit

Try each tool and circle your response. Build a personalized list ready to reach for before activation peaks.

Physical tools

Cold water on face or wrists: Yes / No / Sometimes

Vigorous movement: Yes / No / Sometimes

Slow deep breathing: Yes / No / Sometimes

Progressive muscle relaxation: Yes / No / Sometimes

Heavy blanket: Yes / No / Sometimes

Being in nature: Yes / No / Sometimes

Relational tools

Being near someone safe: Yes / No / Sometimes

Calling someone who doesn't need you to manage them: Yes / No / Sometimes

A pet: Yes / No / Sometimes

My top 5 regulation tools, in order:

EX
5.5

The Mindfulness Practice

Mindfulness in trauma recovery is not about achieving calm. It is about developing the capacity to observe your internal experience without being consumed by it.

Set a timer for five minutes. Sit comfortably. Notice what is happening without trying to change it. When a thought or feeling arises, name it simply and return to your breath. The moment you notice you are distracted and return is the practice. *That moment is the pause.*

Daily mindfulness log — one week:

Day 1 — minutes / what I noticed / activation before and after (1–10):

Day 2 — minutes / what I noticed / activation before and after (1–10):

Day 3 — minutes / what I noticed / activation before and after (1–10):

Day 4 — minutes / what I noticed / activation before and after (1–10):

Day 5 — minutes / what I noticed / activation before and after (1–10):

Day 6 — minutes / what I noticed / activation before and after (1–10):

Day 7 — minutes / what I noticed / activation before and after (1–10):

EX
5.6

The Accountability Inventory

This is not a shame exercise. Accountability says I made choices that caused harm, and I am capable of making different ones.

Situation 1**What happened:**

Which survival response was driving it:

What I told myself:

Who was affected:

What I wish I had done differently:

Situation 2**What happened:**

Which survival response was driving it:

What I told myself:

Who was affected:

What I wish I had done differently:

Situation 3

What happened:

Which survival response was driving it:

What I told myself:

Who was affected:

What I wish I had done differently:

My behavior was understandable because:

My behavior was still harmful because:

The amends — not an explanation, not a justification. Just: *I hurt you and I am sorry.*

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

Which tool in this section does your body actually need right now? What would it mean to use it before you close this workbook?

PART SIX

Boundaries and Daily Practice

The architecture of self-respect

“Healing is not linear. It is not a destination. It arrives in accumulations so small you sometimes can’t see them until you turn around and realize how far you’ve traveled.”

A note before we begin

Two areas essential to CPTSD recovery and most commonly skipped: boundaries and daily practice. Boundaries are not punishment — they are the architecture of self-respect. Daily practice is the accumulated evidence your nervous system needs to update the map.

EX
6.1

The Somatic Check-In

Complete the check-in from Exercise 1.1 before continuing.

Boundaries

For fawn-type survivors especially, boundaries are not natural — they were never modeled, they were often punished, and they feel dangerous. The result is a life organized around other people's comfort at the expense of your own.

WHAT A BOUNDARY IS NOT

A wall. A punishment. A rejection. A test of love.

WHAT A BOUNDARY IS

Information about what you need in order to stay present and regulated in a relationship. Healthy boundaries protect connection rather than end it.

EX
6.2

Identifying Your Boundary Patterns

The situations where I most struggle to say no:

.....

.....

.....

What I fear will happen if I set a limit:

.....

.....

.....

A relationship where I consistently override my needs:

.....

.....

.....

What it has cost me:

.....

.....

.....

EX
6.3

Where Boundaries Come From

When I expressed needs as a child, the response was:

The message I received about my needs was:

In order to be loved, I learned I had to:

The first person I learned not to say no to:

EX
6.4

Practicing the Language of Limits

Boundaries don't have to be dramatic. They can be stated simply, once, without extensive explanation. You do not owe anyone a justification for a limit that protects your wellbeing.

Boundary language to practice:

"I'm not available for that."

"I need some time before I can respond."

"That doesn't work for me."

"I care about you and I'm not able to do this."

"I need to step away from this conversation."

A limit I have needed to set and haven't been able to:

What I would say using boundary language:

What my body feels when I imagine saying it:

What might actually happen (vs. what I fear):

EX
6.5

The Body as a Boundary Compass

Your body knows before your mind does. The tightening stomach, the held breath, the shoulders rising — these are your nervous system's first response to a crossed limit. Learning to read those signals is the foundation of healthy boundaries.

What does my body do when something feels wrong but I haven't named it yet?

.....

.....

.....

The last time I overrode that signal — what happened?

.....

.....

.....

What would it mean to trust that signal instead of overriding it?

.....

.....

.....

Daily Practice

ON THE DAILY

Healing from CPTSD happens in the daily, not the dramatic. It is the accumulated evidence of small choices made consistently over time.

EX
6.6

Your Daily Check-In

Use this structure every day — morning and evening. It takes less than five minutes. Consistency matters more than depth.

MORNING CHECK-IN

Polyvagal state (circle): Ventral / Sympathetic / Dorsal

Activation level (1–10):

Which part is most active today?

One regulation tool I will use today:

One boundary I will practice today:

EVENING CHECK-IN

Polyvagal state (circle): Ventral / Sympathetic / Dorsal

One moment I felt activated — what happened and what did I do?

One moment of positive emotion I noticed — where did I feel it?

One way I showed up for myself today:

One thing I want to bring to tomorrow:

EX
6.7

Weekly Reflection

The moment this week where I felt most regulated:

The moment this week where I felt most activated:

One pattern from my first map I noticed this week:

One moment where I chose differently than before:

One thing my nervous system is learning:

One thing I want to practice more next week:

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

What would it mean to make these daily practices non-negotiable — not as discipline, but as love for yourself?

PART SEVEN

The Corrected Map

Building new templates for love and safety

“The first map said: love is conditional. People leave. Safety is temporary. You are on your own. The corrected map says something I am still practicing believing. You are not on your own.”

A note before we begin

There comes a point in the work where understanding is no longer the frontier. The frontier becomes believing. Understanding doesn't automatically update the system. Evidence does — repeated, accumulated, embodied evidence that the new map is true. Keep going.

EX
7.1

The Somatic Check-In

Notice how different this check-in feels from the first time you did it. That difference is the work.

EX
7.2

Abandonment Depression

Pete Walker identifies abandonment depression as a core symptom of CPTSD — the flat, empty, hopeless state underneath the more visible symptoms of activation. It can feel like clinical depression but is actually accumulated grief of unmet childhood needs.

It can feel like: emptiness, flatness, loneliness even in company, a deep ache with no clear cause, the sense that nothing will ever really change. It is not weakness. It is grief that has been waiting to move.

Do you recognize this state? When does it most often show up?

What do you typically do when it arrives?

What would it mean to let yourself feel it rather than escape it?

What does the abandoned child underneath it most need?

EX
7.3

Auditing the First Map

Write the first thing that comes — not the answer you think you should give, but the one that actually lives in your body.

Love means:

People who love me will eventually:

When I am truly myself, people:

I am worthy of love when:

Safety feels like:

The most dangerous thing I could do in a relationship is:

I don't deserve:

Which belief has caused the most damage? How old were you when you learned it?

EX
7.4

Gathering Evidence for the New Map

The corrected map is built on actual, lived, embodied experiences that contradict the first map.

A time someone showed up consistently without eventually leaving:

A time I was fully myself and was not rejected:

A time I asked for what I needed and it was given:

A time safety turned out to be real rather than temporary:

A time I survived a conflict without it destroying the relationship:

A time I was loved on a bad day, not just a good one:

What would it mean to give these experiences equal weight to the ones that confirmed the first map?

EX
7.5

Mapping Your Window of Tolerance

Below the window — *numbness, dissociation, abandonment depression, shutdown*

When I am here I feel / My body signals this with / This happens when / What brings me back:

Above the window — *panic, rage, hypervigilance, overwhelm*

When I am here I feel / My body signals this with / This happens when / What brings me back:

Inside the window — *regulated, present, able to think and feel simultaneously*

When I am here I feel / My body signals this with / This happens when / What brings me back:

EX
7.6*Identifying Earned Security*

Three people who have contributed to your earned security:

1.

Name or description:

What your nervous system learned from them:

What they did that built safety:

2.

Name or description:

What your nervous system learned from them:

What they did that built safety:

3.

Name or description:

What your nervous system learned from them:

What they did that built safety:

Three promises you have kept to yourself recently:

What does keeping these promises tell you about who you are becoming?

EX
7.7

Writing the Corrected Map

Rewrite each belief as the direction you are choosing to move in — not an affirmation you believe fully yet, but an intention.

Original — Love means:

Corrected — Love can also mean:

Original — People who love me will eventually:

Corrected — People who love me are capable of staying:

Original — I am worthy of love when:

Corrected — I am worthy of love:

Original — Safety feels like:

Corrected — Safety can also feel like:

Original — The most dangerous thing I could do:

Corrected — The most courageous thing I could do:

Original — I don't deserve:

Corrected — I am learning to believe I deserve:

EX 7.8

A Letter to Your Future Self

Write to the version of yourself who kept going. The one who chose herself, imperfectly and repeatedly, over a long period of time.

Dear future me,

Closing Reflection

Return to the Somatic Check-In. Notice what has shifted since you began this section.

What is one thing you now know about yourself that you did not know when you opened this workbook? And what becomes possible now that you know it?

A FINAL NOTE FROM CARRIE

Pick up the pen.

You made it to the end of this workbook. That is not a small thing.

This work is hard. It asks you to look directly at the things you have spent years looking away from. It asks you to hold compassion and accountability simultaneously. It asks you to grieve. It asks you to name the shame. It asks you to go back for the parts of yourself you abandoned and offer them something they may never have received.

You did it anyway.

That is the corrected map drawing itself. One page at a time. One honest answer at a time. One moment of choosing to stay rather than flee, to feel rather than numb, to show up for yourself rather than disappear.

You are not healed. Neither am I. But we are healing. And healing, as I have learned the hard way and the only way, is enough.

“Pick up the pen. Your story isn’t finished yet. Neither are you.”

— Carrie

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