Somatic Exercises to Reset Your Trauma and Anxiety Response

Simple Body-Based Techniques to Heal Trauma Without Reliving It

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Bonus

Track and log your exercises with your free bonus, a **30-Day Somatic Reset Protocol Tracker.**

Scan the QR code below to gain access and log which exercises you completed, note where you felt tension or release, and track small shifts in how your body moves and feels.

Over weeks, these notes will become data, and that data tells a story about how far you've come. Use this tracker to stay honest with yourself, celebrate progress, and return to the work even when life gets in the way.

Introduction

There are so many solutions to managing trauma. You have yoga, breathwork, and meditation apps. EMDR, cognitive behavioral therapy, somatic experiencing. Books about the vagus nerve and polyvagal theory. Cold plunges, gratitude journals, and affirmations you say in the mirror every morning. Some of these have probably helped you already, at least a little, at least for a while.

Most of these fall into two categories: they either ask you to go back through what happened so you can process it, or they teach you how to cope better when symptoms show up. You learn breathing techniques for panic attacks, grounding exercises for dissociation, and strategies for getting through triggered moments, which, in all fairness, are valuable skills. Sometimes necessary, but coping isn't the same as releasing. Managing symptoms isn't the same as resolving them. Your tight shoulders, clenched jaw, and braced abdomen will still be there the next day, still holding onto something that happened years ago. You've just gotten better at living with it.

The other day I drove on the highway and felt the silence in the car was a little too heavy to carry for the distance. So I turned on the radio and up came a familiar song. A song that held beautiful but painful memories. Normally, when the song came on, I'd reach for the dial immediately and look for something else to play, but that day, feeling particularly brave, I let it play, and it didn't make me as sad anymore. I didn't feel like I was on the cusp of crying, and the memories that weren't even full memories, just sensations and fragments that my body held onto like evidence.

We are somatic beings, and somatic means ‘of the body’. We emote our way through life. Yes, in some instances, life or certain experiences teach us to bottle up, to hide the part of us that feels and is vulnerable. We learn early on (sometimes a little too early) that showing emotion is weakness, or inconvenient, or that our anger makes other people uncomfortable.

So we become experts at pushing it all down, and live from the neck up, to think our way through everything, to analyze and rationalize and explain away what our bodies are desperately trying to tell us. We don’t realize that all that pent-up emotion has to go somewhere; it doesn’t just evaporate into nothingness. It lives in our bodies and shows up as tension in the shoulders, or a clenched jaw, or an exhaustion that no amount of sleep can touch. Our bodies keep the score, as Bessel van der Kolk so perfectly named it, and they will continue to speak to us until we finally learn to listen.

I wrote this book because of three things:

1. I understand what it is like to live in the motions; to be alive but not really living in your body.

2. I want to help you understand your trauma, how it shapes and impacts you, and, through a series of simple, gentle somatic exercises, show you how to work with your body instead of against it.
3. I know what it's like to sit on the precipice of "I've tried everything and still feel like I'm drowning."

I know how exhausting it is to try and try and try only to feel like you're running on a treadmill that never stops, never gets you anywhere. I wrote this book because I've been there, in that desperate place where hope feels naive and giving up feels inevitable, and I want you to know that this approach is different. It asks less of you, not more. It meets you exactly where you are, even if where you are is exhausted and skeptical and barely holding on.

How to Use This Book

The format is pretty simple to follow and to understand. Start with Chapters 1 and 2, which explain why your body stays stuck and what somatic exercises do about it. You need this foundation first.

Chapter 3 helps you identify your specific tension patterns. Everyone holds trauma differently. You need to know your patterns before you can release them.

Chapters 4 through 7 contain the exercises. Do them in order: grounding and awareness, then release practices, then pandiculation, then targeted work for specific body regions. The sequence matters. You can't release what you can't feel.

Chapter 8 covers what to do when the work feels overwhelming or when you need to regulate your nervous system first. It provides basic techniques and points you toward our companion book, Vagus Nerve Reset, for deeper vagal regulation.

Chapter 9 gives you the 30-day protocol. Chapter 10 shows you how to continue.

Try not to skip around as each chapter builds on the next.

Your body has been waiting for you. Not to fix it or control it or force it into submission, but simply to come back. To listen. To move with it instead of against it. To permit it to finally, finally release what it's been carrying all this time.

So breathe... Press your feet into the floor (10 to 15 mins is all you need) and feel the ground beneath you. You're here. You're alive. And that's exactly where we begin.

Chapter 1: Why Your Body Stays Stuck

When I write by hand now, my letters slope dramatically to the right. This wasn't always true. Somewhere in my twenties, I started gripping the pen differently. Tighter, more controlled. My handwriting changed to accommodate that grip. For years, I thought, “This is just how I write now.” Then I took a calligraphy class and had to relearn how to hold the pen. Within weeks, my natural handwriting started to shift. The old pattern wasn't permanent. It was just practiced.

Your body works the same way.

Willpower alone can't scrub away what your body has been holding. You cannot think your way out of tight shoulders, a clenched jaw, or the way your body braces when someone raises their voice. Affirmations help with a lot of things, but they don't release muscles that have been contracted for years.

Trauma lives in your tissues. In the actual fibers of your muscles. In this way, your nervous system learns to respond when the world feels dangerous, and until we work with the body itself, until we teach it that releasing is safe, it keeps holding on.

We do, however, possess the power to change those patterns because they're learned. Just as my tight grip on the pen was learned. Your elevated shoulders are learned. Learned patterns can be unlearned.

The Disconnect Between Knowing and Feeling

Your brain consists of three main levels, namely the cortex (the thinking part), which processes language, logic, and time. This is the part that understands "that was ten years ago" or "I'm in my living room, not back there." Below that is the limbic system, which handles emotions and threat detection. And at the base is the brain stem, which controls automatic survival responses like heart rate, breathing, and muscle tension.

When you experience something traumatic, the experience bypasses your cortex entirely and gets encoded in the limbic system and brain stem as a pure sensation that manifests as a racing heart, tight muscles, shallow breath, and the feeling of danger. No words. No narrative. Just body memory.

So, while talking about the trauma might be helpful, it doesn't automatically release what's stored in your muscles and nervous system. You're basically using the cortex (words, understanding, timeline) to try to access information that never got stored there in the first place. It's like trying to delete a file from your computer by talking to your monitor.

Your muscles develop what's called sensory-motor amnesia. When you experience a threat, certain muscle groups contract to protect you. Your shoulders lift to protect your neck. Your psoas tightens to curl you into a protective ball. Your jaw clenches. If the threat is ongoing or the stress response never completes, your brain actually forgets how to send the "relax" signal to those muscles. They stay partially contracted, sometimes for years. This isn't psychological. It's neuromuscular. Your motor cortex has literally lost the pathway to release those muscles.

This is why you can understand your trauma completely and still feel it in your body. This “knowing” lives in one part of your brain. The feeling lives in your tissues. To bridge that gap, you need to work directly with the body using movement and sensation, alongside the words and understanding.

How Trauma Gets Stored in Muscles, Fascia, and Posture

The other day, I was thinking about how I stand. I caught my reflection in a store window and realized my left shoulder sits about two inches higher than my right. Has for years. I also noticed I was slightly twisted, my hips rotated to one side, and my weight shifted almost entirely onto my right leg. This isn't just bad posture I can correct by "standing up straight." This is my body holding a shape it learned during years of chronic stress.

What Actually Happens When Stress Hits Your Body

When you perceive danger, your sympathetic nervous system activates within milliseconds. Your hypothalamus signals your pituitary gland, which tells your adrenal glands to dump cortisol and adrenaline into your bloodstream. Your heart rate increases. Blood flow redirects from your digestive system to your large muscle groups. Your muscles contract, preparing you to fight or run.

Specific muscle groups activate in predictable patterns:

- Trapezius muscles pull your shoulders up toward your ears, protecting your neck
- PSOAS muscle (SO-az; the deep hip flexor that connects your spine to your legs) contracts to pull you into a fetal position
- Jaw clenches tight
- Abdominal muscles tighten
- Hands curl into fists

If you can complete the stress response (fight the threat, run away, shake it off afterward), these muscles release. The cortisol gets metabolized. Your parasympathetic nervous system kicks in and returns everything to baseline.

But if you can't complete the response? If you have to stay in that threatening situation, or if the stress is chronic, those muscles never get the signal to fully release.

The Fascia Factor

This happens in layers. Your muscles are wrapped in fascia, a web-like connective tissue that surrounds every muscle fiber, every organ, every structure in your body. Fascia has a property called plasticity, so it adapts to the shapes you hold most often. When you chronically hold tension in a particular pattern, your fascia literally remodels itself around that pattern. It thickens, becomes less pliable, and forms adhesions. This is why someone who's held their shoulders up for ten years develops fascia that's essentially glued in that position.

How Posture Changes Tell Your Story

Your posture changes as a direct result. These adaptations happen automatically:

- Contracted psoas pulls your lumbar spine into an exaggerated curve
- Tension on one side creates rotation through your spine and hips
- Tight chest muscles from the protective hunching of your shoulders forward
- Your upper back compensates by rounding more

These aren't postural choices you're making. These are structural adaptations to chronic muscle contraction.

This is why stretching only provides temporary relief. When you stretch a chronically tight muscle, you're pulling on a muscle that your brain still thinks needs to be contracted. The moment you release the stretch, your motor cortex sends the signal to contract again because that's the pattern it knows. You haven't changed the neurological pattern, just temporarily lengthened the tissue.

The trauma isn't stored as a memory in your muscles. That's not quite accurate. What's stored is a motor pattern, a learned response that your nervous system keeps repeating. Your brain associates certain situations, emotions, or sensations with the need to contract those muscles. So every time you encounter a trigger, even a subtle one you don't consciously recognize, your motor cortex fires off that old pattern. Shoulders up. Jaw tight. Breath shallow. Protection mode.

I can trace specific holding patterns in my body back to specific periods of trauma. My raised left shoulder? That developed during two years when I was constantly bracing for the next blow. My tight psoas? Years of freeze response when I couldn't fight and couldn't flee. My jaw? Decades of swallowing words I couldn't safely say.

Your body is telling your story in its posture, its tension patterns, and its restricted movement. The question is: are you listening?

Sensory-Motor Amnesia: When Your Brain Forgets How to Relax

In the 1970s, a philosopher and movement educator named Thomas Hanna identified a phenomenon he called sensory-motor amnesia (SMA). What he noticed was that people with chronic muscle tension were suffering from a loss of conscious control over their own muscles; it was like their brains had literally forgotten how to voluntarily relax certain muscle groups.

To understand how this works, you need to understand that every voluntary movement you make starts in your motor cortex (the part of your brain that controls movement). So, when you lift your arm, your motor cortex sends signals down through your spinal cord to the muscles in your shoulder and arm, telling them to contract. When you decide to lower your arm, it sends different signals telling those muscles to release.

But sensory-motor amnesia interrupts this process because the motor cortex adapts itself to fit the various states that it is exposed to for prolonged periods of time. It stops sending the "release" signal because it no longer perceives the contracted state as a problem. The muscle stays partially contracted even when you think it's relaxed. You've lost voluntary control, not because the muscle is damaged, but because your brain has lost the neural pathway to fully release it.

This isn’t something that you’ll be aware is happening, hence the "amnesia" part. The sensory feedback loop that would normally tell you "hey, this muscle is still contracted" has also been disrupted. So you walk around with your shoulders up by your ears, completely unaware that they're tense until someone points it out or you see yourself in a photo.

The Green Light and Red Light Reflexes

Hanna identified two primary patterns of chronic muscle contraction that develop in response to stress. He called them the "red light" and "green light" reflexes, and most of us have some combination of both.

The Red Light Reflex (Startle Pattern)

This is your body's withdrawal response to threat or fear. Think about what happens when you're startled:

- Shoulders pull up and forward
- Head juts forward
- Chest collapses inward
- Abdominal muscles tighten
- Breathing becomes shallow and high in the chest

This reflex protects your vital organs by curling you into a protective ball. It's the posture of someone bracing for impact. If you live with chronic anxiety, constant criticism, ongoing threat, or even just years of hunching over a computer, your body learns this pattern so well that it becomes your default posture. Your motor cortex forgets there was ever another way to hold yourself.

The Green Light Reflex (Action Pattern)

This is your body's response to demands for action, performance, or constant forward motion. It develops when you're always pushing, striving, going:

- Lower back muscles contract, creating an exaggerated arch in the lumbar spine
- Chest lifts and thrusts forward
- Head tilts back slightly
- Hip flexors tighten
- Back muscles become chronically tense

This is the posture of someone perpetually leaning into the next task, never resting. Athletes, performers, people in high-pressure careers, and anyone who learned early that rest equals failure often develop this pattern.

Most people don't have purely one pattern or the other. You might have a red light pattern in your upper body (tight shoulders, collapsed chest) and a green light pattern in your lower body (arched back, tight hip flexors). Your body tells the story of where you've been and what you've had to do to survive.

Why Your Current Strategies Aren't Working

A massage feels amazing, but it doesn't create lasting change because massage therapists can't change what's happening in your motor cortex. The moment you walk out of their office, your brain sends the same old signals to contract those muscles again, because that's the only pattern it knows.

The same goes for stretching. When you stretch a muscle that's held in sensory-motor amnesia, you're essentially fighting against your own nervous system. Your brain thinks that the muscle needs to stay contracted, so it resists the stretch. You might gain a little

temporary length in the tissue, but you haven't retrained the motor pattern. Within hours, your motor cortex contracts that muscle right back to where it was.

Even strength training doesn't solve this. You can build stronger muscles, but if those muscles are operating under faulty motor control, you're just creating stronger dysfunction. You'll be tight and strong instead of tight and weak, but you'll still be tight.

To release sensory-motor amnesia, you have to retrain your motor cortex and consciously re-establish the neural pathways that tell your muscles to contract AND release. This happens through a specific type of active movement that involves contracting the muscle fully, then slowly, consciously releasing it while paying attention to the sensation.

This is called pandiculation, and it's what we'll explore in the next section. It's the only technique that actually addresses the root cause of chronic muscle tension: the loss of cortical control. Not the muscle itself, but the brain's ability to control that muscle.

Your tight shoulders are a learned pattern, and anything learned can be unlearned.

Why You Feel "Wired but Tired”

Muscle contraction requires ATP, the fuel your cells use for energy. When your muscles remain in chronic low-grade contraction, they keep burning that fuel even when you think you're resting. The motor neurons keep firing at a low frequency, calcium levels stay elevated in the muscle cells, and the fibers remain partially engaged.

Your chronically tight shoulders are holding themselves up against gravity all day. That continuous isometric contraction restricts blood flow because the compressed vessels can't deliver oxygen efficiently. It also traps metabolic waste products like lactic acid because they can't clear out properly. You end up with muscles that are simultaneously overworked and undernourished, firing constantly but never getting what they need to sustain that work or recover from it.

This is why you're exhausted. Your body is spending energy to maintain a holding pattern that serves no current purpose. The fuel that should go toward healing, digestion, immune function, and actual rest gets diverted to keeping your shoulders up by your ears and your jaw locked tight.

You can't rest your way out of this state because even in sleep, your jaw will still clench, your shoulders still remain tight, and your muscles work through the night, draining the energy stores that should replenish during sleep.

This creates a cascade:

- Restricted blood flow means less oxygen reaches your tissues
- Tight fascia prevents proper lymphatic drainage
- Elevated stress hormones signal an ongoing threat
- Your nervous system can't downshift into deep, restorative sleep phases

You wake up tired because you worked all night. Just not the kind of work that accomplishes anything.

The Feedback Loop

Those contracted muscles send signals back to your brain that it’s still tense, ready, and braced, then your nervous system reads this as confirmation of danger. It maintains hypervigilance. Cortisol stays elevated. Your sympathetic nervous system refuses to stand down.

You feel on edge because your body insists there's a threat. You feel tired because maintaining constant readiness costs everything. Your immune system takes a hit. Your digestion slows. Your hormones go haywire. Your body prioritizes survival over repair, growth, healing, and rest.

Survival mode works beautifully for short bursts. It fails catastrophically when it becomes your default.

What your body needs is permission to actually release, and it needs the neural pathway to do so. You need to allow your body to finally, genuinely let go.

You know how they say an object in motion stays in motion? I say a body in tension stays in tension. Unless you give it a reason not to, or teach it something different. Your nervous system is running the same program it learned years ago, and it won't know that it’s safe enough to let go unless you deliberately tell it to.

In the next chapter, I am going to discuss what somatic exercises are, and I need you to forget everything you think you know about exercise. The understanding will help teach your brain to remember how to release what it's been holding. They work because they go straight to the source: not your tight muscles, but the neural patterns controlling those muscles. Let me show you exactly how.

Chapter 2: What Somatic Exercises Actually Are

So whenever we reject healing as something meant for us, we reinforce the idea that our bodies are problems that only ever ought to be managed and not systems that we can study and actually work with; nowhere does that show up more clearly than in how people react to somatic exercises the first time they try them.

You lift your shoulder an inch toward your ear, hold it there for three seconds, then lower it slowly while paying attention. That's it; that's the whole exercise. It requires nothing more from you than doing a tiny movement done with full awareness.

Where's the actual work in this, you wonder? Where's the part that feels like something is happening? This can't possibly address years of chronic shoulder tension because it’s too easy, too gentle, and borderline insulting to anyone who's tried everything else and suffered through deep tissue massage that left bruises or yoga poses that made them want to cry.

The next day, while you go look in front of the mirror, you notice something small, you realise that your shoulders have dropped. A week later, when someone asks if you got a haircut because something about you looks different. The change sticks because you retrained your brain to adopt new beliefs and to change how you carry yourself. That was the magic and magic of pandiculation.

The Origins of Somatic Movement

Somatic movement practices emerged from three independent practitioners who identified that chronic muscle tension originates in the nervous system, not in damaged or weak muscles. Their discoveries form the foundation of modern somatic work.

F.M. Alexander and the Alexander Technique (1890s)

Frederick Matthias Alexander, an Australian actor, developed chronic voice loss that medical professionals couldn't explain or treat. Through systematic self-observation using mirrors, he identified that he unconsciously pulled his head back and compressed his neck immediately before speaking. This habitual pattern, executed outside conscious awareness, created the vocal problems.

Alexander developed a method for releasing these habitual patterns through conscious inhibition and direction. His central principle: the primary control of the body depends on the dynamic relationship between the head, neck, and spine. When chronic tension distorts this relationship, the entire body compensates with inefficient movement patterns.

The Alexander Technique teaches awareness of habitual patterns and conscious release of unnecessary tension. It doesn't impose correct posture from the outside. It restores natural coordination by addressing faulty sensory perception and motor control.

Moshe Feldenkrais and Awareness Through Movement (1940s-1970s)

Moshe Feldenkrais, a physicist and martial artist, studied how the nervous system learns movement patterns. After a severe knee injury, he applied principles of neuroplasticity and motor learning to his own rehabilitation. Rather than forcing his body into prescribed exercises, he created thousands of small, exploratory movements that gave his nervous system new options for organizing around the injury.

Feldenkrais demonstrated that the adult nervous system retains the capacity to learn new motor patterns throughout life. His method, Awareness Through Movement, uses slow, gentle, often unusual movements to provide new sensory information to the motor cortex. The nervous system then reorganizes itself around more efficient patterns.

Key principle: the nervous system learns through experience and differentiation, not force or repetition. Small, conscious movements create more significant neural changes than strenuous exercise that reinforces existing patterns.

Thomas Hanna and Hanna Somatics (1970s-1990s)

Thomas Hanna, a philosopher who trained directly with Feldenkrais, synthesized somatic principles into a specific clinical method. He coined the term "sensory-motor amnesia" to describe the loss of voluntary motor control over chronically contracted muscles. His work identified predictable patterns of muscular holding that develop in response to stress, trauma, and repetitive activities.

Hanna developed pandiculation as the core technique for reversing sensory-motor amnesia. This three-step process involves voluntary contraction of the already-tight muscle, slow controlled release, and complete rest. Pandiculation actively engages the motor cortex, providing sensory feedback that allows the brain to reset the resting length of chronically contracted muscles.

His clinical work demonstrated that conditions typically attributed to aging, structural damage, or psychological factors often stem from learned neuromuscular patterns that can be reversed through motor re-education.

The Unified Discovery

These practitioners, working from different disciplines and continents, reached the same conclusion: chronic muscle tension reflects learned motor patterns stored in the brain, not structural problems in the muscles themselves. The motor cortex loses accurate sensory feedback about muscle state and maintains contraction as the new baseline.

Somatic practices work by re-establishing conscious cortical control over muscles trapped in involuntary contraction. They provide new sensory-motor experiences that allow the brain to update faulty patterns. This is why somatic work creates lasting change while approaches that work only on muscle tissue provide temporary relief.

Pandiculation – The Core Mechanism

Pandiculation is the voluntary contraction of a muscle followed by a slow, conscious release. This three-step process is the core mechanism that differentiates somatic exercises from every other approach to releasing muscle tension.

First, you voluntarily contract the muscle that's already tight. Not forcefully, not aggressively, but deliberately and with full awareness. If your shoulder is chronically elevated, you lift it even higher toward your ear under conscious control.

Second, you slowly release the contraction while paying close attention to the sensation of letting go. This isn't a sudden drop or collapse. It's a gradual, controlled lengthening that takes several seconds. Your attention stays focused on the physical sensation throughout the entire release.

Third, you rest completely. The muscle relaxes fully without any effort or engagement.

Why This Works When Stretching Doesn't

When you stretch a tight muscle, you apply external force to lengthen it. You pull the tissue, hold the position, breathe through discomfort. The muscle lengthens temporarily because you're physically forcing it to. But your motor cortex, the part of your brain controlling that muscle, isn't involved in the process. It still perceives the contracted state as normal. The moment you release the stretch, your brain sends the same signal it always sends: contract. The muscle returns to its habitual resting length within hours or days.

Pandiculation works differently because it engages your motor cortex directly. When you voluntarily contract the muscle under conscious control, you're activating the motor neurons that command that muscle. When you slowly release while paying attention, you're giving your sensory cortex detailed information about what relaxation feels like in

that specific muscle group. Your brain receives both motor output (the command to release) and sensory input (the feeling of releasing) simultaneously.

This sensory-motor feedback loop updates your motor cortex. Your brain learns what "relaxed" actually feels like in a muscle it has forgotten how to fully release. The resting length of the muscle resets because the neural pattern controlling it has changed, not just the tissue length.

The Natural Pattern

Watch a cat wake up from a nap. It doesn't stretch passively. It contracts its muscles fully, extending its legs and arching its back in a powerful contraction, then slowly releases and relaxes. This is pandiculation. Animals do it instinctively multiple times a day to reset muscle tone and maintain motor control.

Human infants pandiculate constantly. They stretch and yawn, contracting muscles throughout their bodies, then releasing fully. This natural movement pattern maintains healthy sensory-motor feedback and prevents the development of chronic tension.

Adults lose this instinct. We suppress yawns in meetings. We interrupt our natural stretch response to check our phones or get back to work. Over time, we stop pandiculating altogether. Our motor cortex loses the regular sensory feedback it needs to maintain accurate control over resting muscle length.

Active vs. Passive

The critical difference between pandiculation and stretching is active motor control versus passive lengthening.

In passive stretching:

- External force lengthens the muscle (gravity, your hands, a yoga pose)
- The motor cortex remains uninvolved
- The brain maintains its existing motor pattern
- The muscle returns to habitual tension once the external force is removed

In pandiculation:

- You voluntarily contract and release under conscious control
- The motor cortex actively participates in both contraction and release
- The brain receives new sensory-motor information
- The resting length resets because the neural pattern changes

This is why pandiculation creates lasting change. You're not forcing the muscle to lengthen against the brain's commands. You're teaching the brain a new command.

Every somatic exercise in this book uses pandiculation as its core mechanism. The movements may look different, target different muscle groups, and address different tension patterns. But they all work the same way: conscious contraction, slow release, complete rest. This simple three-step process retrains your motor cortex to release what it's been holding.

What Somatic Exercises Are NOT

The most common objection to somatic work is that it's just yoga repackaged with neuroscience jargon. The movements look gentle, often done lying down, sometimes incorporating breath awareness. On the surface, the resemblance seems fair. But the intention, mechanism, and outcome are fundamentally different.

Different Goal

Yoga aims to achieve specific external forms. Downward dog has a correct position: heels toward the floor, hips lifted, spine lengthened, arms straight. The goal is to move your body closer to that ideal form. Teachers adjust students' alignment. Props help you access the full expression of the pose. Progress means achieving positions you couldn't achieve before.

Somatic exercises have no target position. There's no ideal form your body should match. The goal is internal awareness of your own sensory-motor experience. You're learning what voluntary control feels like in muscles that have been operating on autopilot. Progress means increased sensitivity to your own movement patterns, not achieving external shapes.

Different Mechanism

In yoga, you stretch muscles to increase flexibility and range of motion. You hold positions to build strength and endurance. You flow through sequences to link breath with movement. The work happens in the muscle tissue itself. You're creating physical changes through mechanical stress on the tissues.

Somatic exercises retrain neural pathways. The mechanical load on the muscle is minimal. The work happens in your nervous system. You're creating changes in how your motor cortex controls the muscle, not in the muscle's physical structure. A somatic movement done with full awareness but minimal physical effort creates more lasting change than a strenuous stretch done while distracted.

Different Relationship to Discomfort

Yoga often encourages working through discomfort. "Breathe into the stretch." "Stay with the sensation." The edge of your flexibility is where growth happens. Discomfort signals that you're challenging your limits.

Somatic work avoids discomfort entirely. Pain signals that you're working against your nervous system's protective mechanisms. When muscles hurt, the motor cortex interprets this as confirmation that it should maintain defensive contraction. You can't retrain a pattern while triggering the threat response that created the pattern.

Somatic movements stay within your comfortable range. Small, gentle, often barely perceptible. The intensity comes from the quality of awareness, not the size of the movement.

Different Measures of Success

Yoga measures progress by increased flexibility, strength, balance, or by achieving more advanced poses. External, visible, measurable improvements. You can photograph your progress. Other people can see it.

Somatic progress is invisible from the outside. Your shoulder might move half an inch less than before, but you've regained voluntary control over muscles that were locked in involuntary contraction for years. You might not look different in a mirror, but you feel fundamentally different in your body. The marker of success is internal sensation, not external achievement.

The Attention Difference

This is the crucial distinction. In yoga, your attention goes to the pose. Am I aligned correctly? How deep can I go? Can I hold this longer? Your focus is on achieving or maintaining an external form.

In somatic exercises, your attention goes entirely to sensation. What does this feel like? Where do I sense tension? How does the quality of contraction change as I slowly release? There's no correct position to achieve. There's only the experience of your own neuromuscular system in this moment.

You could perform a somatic movement "perfectly" from an external perspective and get zero benefit if your attention isn't tracking the internal sensory experience. Conversely, you could do a movement that looks awkward or incomplete from the outside and completely retrain the motor pattern if your awareness stays focused on sensation throughout.

Many people try somatic exercises with a yoga mindset and quit within days. The movements seem too easy. There's no challenge, no burn, no satisfying stretch. They're waiting for it to feel like exercise, and it never does.

Somatic work doesn't feel like exercise because it isn't exercise in the conventional sense. It's neuromuscular re-education. The effort is mental, not physical. The challenge is maintaining focused awareness, not pushing through physical difficulty.

If you approach these practices trying to do them "right" or achieve a certain position, you'll miss the entire point. There's no right. There's only awareness. Your attention to sensation is what retrains your motor cortex, not the shape your body makes while you do it.

Why 10 Minutes a Day Is Enough

10 minutes a day is more than enough, and the science behind this is rather interesting. Your motor cortex doesn't learn through volume or intensity, but through focused attention. When you perform a movement with full awareness, your brain creates new neural pathways. But here's the thing: maintaining that level of awareness is mentally exhausting. Most people can track subtle sensations and consciously control slow releases for about 10 to 15 minutes before their attention starts to drift. Past that point, the movements become mechanical repetition, and mechanical repetition doesn't retrain motor patterns. Your brain needs clear sensory feedback, not mindless reps.

Motor learning happens in two distinct phases. First is acquisition, where you perform the movement and your brain registers new information. Second is consolidation, which happens after you stop practicing. Your motor cortex processes everything during rest periods, especially sleep. This is when the actual rewiring occurs. Pile on more practice time, and you overwhelm the system with input before it can integrate what it just learned. Athletes and musicians have known this for decades: short, focused practice beats long, distracted sessions every time.

The other factor is consistency. Neuroplasticity responds to regular signals. Practice daily, even briefly, and your brain recognizes that this matters and strengthens those pathways. Skip multiple days, and your motor cortex starts pruning what you built because the nervous system is ruthlessly efficient about eliminating what doesn't get used. Ten minutes you'll actually do every day beats an hour-long practice you abandon after a week. The exercises in this book are designed around this reality. Most take 5 to 10 minutes. A few full sequences run 15. None requires more than 20 because more time wouldn't improve the outcome.

Why Talk Therapy and Mindset Work Aren't Enough

We can't talk our way into healing, but what we can do is understand why we react the way we do, identify our patterns, process our memories, and build insight into our behavior. Talk therapy works from the top down. It engages your prefrontal cortex, the rational thinking part of your brain. You sit in a chair and describe your experience, analyze it, and make connections. This matters.

Understanding where your responses come from gives you context and helps you make sense of yourself. But understanding doesn't release what your body holds. You can know exactly why you flinch when someone raises their voice and still flinch every single time. You can spend years in excellent therapy, have every breakthrough, understand your trauma completely, and still walk around with your shoulders up by your ears and your jaw clenched tight.

This is the difference between top-down and bottom-up healing. Top-down approaches work with language, meaning, narrative, and insight. Bottom-up approaches work with sensation, movement, and direct physiological change. Your body doesn't speak the language of thoughts and words. It speaks the language of sensation and motor patterns. When you release physical holding patterns through pandiculation and sensory awareness, your nervous system receives new information through direct experience, not through thinking about experience. Both approaches are necessary. Talk therapy helps you understand. Somatic work helps you release. Together, they create lasting change that neither can accomplish alone.

The theory makes sense, and the science is solid enough, but what matters most is whether you'll do this work consistently enough for it to make a difference in your body. That requires knowing where you're starting from, what your nervous system can handle right now, and how to pace yourself so you don't burn out in the first week. Before you jump into the exercises, we need to talk about safety, readiness, and how to assess your own tension patterns. Because doing these movements correctly matters less than doing them sustainably.

Chapter 3: Before You Begin: Safety, Pacing, and Self-Assessment

I've come to notice that before I do anything, a felt sense of safety matters to me. Safety in the sense that I know what to expect, that I understand the rules, that I won't be ambushed by something I'm not prepared to handle. This is a nervous system that has spent years on high alert. You need to know the terrain before you walk into it.

Somatic work asks you to pay attention to your body, and for some people, that's the most unsafe thing they can imagine. Your body might be where the worst things happened. Where pain lives. Where memories you've spent years avoiding are stored in tissue and tension. The idea of deliberately turning your attention inward, of feeling what's there, can trigger every alarm system you have.

So before we get to the exercises, we need to talk about how to do this work without retraumatizing yourself. How to pace it so your nervous system doesn't shut down or spiral. How to assess where you're starting from so you're not trying to release decades of holding in week one. Because pushing through, powering past your limits, forcing yourself to feel everything all at once? That's not healing. That's just more trauma dressed up as self-improvement.

This chapter gives you the framework for doing somatic work safely. It helps you understand your current capacity, identify your tension patterns, and establish the conditions you need to actually benefit from these practices instead of getting overwhelmed by them.

How to Know If You're Ready

How do you know you're ready? I've asked this. So many other people have asked the same, and the honest answer is that you're probably never going to feel completely ready. Readiness isn't a feeling you wait for. It's a choice you make when you're stable enough to handle what might come up.

You'll know you're ready when

- you're not in an active crisis or immediate danger
- you have basic needs met: housing, food, some sense of physical safety
- you can get through most days without being completely overwhelmed
- you have at least one person you can reach out to if things get hard

- you're curious about your body, even if you're also scared of what you might find

This doesn't mean your life is perfect or you've resolved all your issues. It means you have enough ground under your feet to do exploratory work without falling apart.

Certain situations require stabilization before you begin somatic work on your own that includes:

- active suicidal ideation or self-harm urges
- severe dissociation, where you regularly lose time
- recent acute trauma (within the last few months)
- flashbacks that completely overwhelm your ability to function
- complete body numbness where you can't feel physical sensations at all
- active psychosis or mania
- unmanaged substance dependence

None of these means somatic work is off the table forever. They mean you need a trauma-informed therapist or counselor alongside this work, someone trained to help you establish basic safety and regulation first.

The work itself also shows you if you need to slow down. If you try a gentle exercise and feel completely numb, overwhelmed with emotion, or like you're leaving your body, that's information. It doesn't mean you're doing it wrong. It means your nervous system needs more support than this book alone can provide. A somatic therapist, trauma counselor, or body-based practitioner can help you build capacity gradually.

If you’re reading this book, you're ready enough. You're functional, maintaining daily life even while carrying chronic tension. You're not in a crisis. You're just tired of living this way. That's sufficient readiness to start with the gentlest practices and see how your system responds.

The Window of Tolerance

Your nervous system has its limits and operates at a baseline where it can process information and respond appropriately. A junction where it’s not too activated, or too shut down; it is merely present enough to be able to feel various sensations without overwhelm. This range is called your window of tolerance, and staying inside it is what makes somatic work effective instead of retraumatizing.

It’s like a river with two banks. One is hyperarousal: anxiety, panic, rage, overwhelm. Your heart races, your thoughts spin, everything feels too much, too fast, too intense. The

other is hypoarousal: numbness, shutdown, dissociation, collapse. You can't feel anything, can't think clearly, can't stay present. The river flowing between these banks is your window of tolerance. That's where healing happens.

Over time, when doing somatic exercises, this window expands. You reach the precipice of what you can handle and stay there briefly, then return to your center. You don't flood yourself or push through. You approach the edge, gather information, and back off. This is called titration, borrowing the chemistry term for adding small amounts gradually until you reach the right concentration.

To be able to tell that you're working within your tolerance, focus on the following signals:

- you can feel sensations in your body without feeling overwhelmed by them
- your breathing stays relatively even and steady
- you can think clearly enough to notice what's happening
- you feel some discomfort, but not panic or numbness
- you can stop the exercise and regulate yourself back to baseline relatively quickly

Signs you've gone outside your window (Hyperarousal)

- heart racing or pounding
- shallow, rapid breathing or holding your breath
- feeling like you need to escape or run
- thoughts spinning, can't focus
- intense emotion flooding in (rage, terror, panic)
- Shaking that feels uncontrollable and scary, rather than releasing

Signs You've Gone Outside Your Window (Hypoarousal)

- feeling completely numb or disconnected
- can't feel your body at all
- vision gets blurry or tunneled
- feeling like you're watching yourself from outside
- extreme fatigue or heaviness

- Thoughts get slow and foggy

What to Do When You Go Outside

The first thing is to stop the exercise because your nervous system is telling you that it's taken on a little more than what it can handle. Gently bring yourself back to the present. You can do this by scanning the room and focusing on five things that you can see. Plant your feet on the ground and feel the sensation of your feet on the floor. And run your fingertips along something that has texture to orient your nervous system to the thought that you are safe.

If you've gone into hyperarousal, you need to discharge that activation. Shake your hands vigorously, stand up, and march in place. Push against a wall. Give your body a way to complete the mobilization response.

If you've gone into hypoarousal, you need gentle activation. Splash cold water on your face. Do some gentle movement, like swinging your arms. Hum or make a sound. These wake your system back up without overwhelming it.

Titration in Practice

When you approach a somatic exercise, especially one targeting an area where you hold significant trauma, go slow. Do half the movement. Stay for half the suggested time. Notice what happens. If you stay inside your window, you can try a little more next time. If you go outside, you've learned where your edge is right now. That edge will shift as you build capacity.

Some days your window is wider. Some days it's narrower. Stress, sleep, what you ate, what happened at work, all of it affects your capacity. Don't assume today's window matches yesterday's. Check in at the start of each practice and adjust accordingly.

The goal isn't to have a wide window tomorrow. The goal is to gradually expand it over weeks and months by consistently working at your actual edge, not where you think your edge should be.

Body Mapping: Where Do You Hold Tension?

Your body tells a specific story through where it holds tension. Some people carry everything in their shoulders. Others clench their jaws so hard they crack teeth. Some have lower backs that feel like concrete. Your pattern is as individual as your fingerprint, shaped by your particular history, how you learned to protect yourself, and what you needed to survive.

Before you start releasing tension, you need to know where you're holding it. This seems obvious until you actually try to identify it. Most chronic holding patterns operate completely outside conscious awareness. You've carried them so long they feel normal. Your elevated shoulder, your forward head posture, your locked knees? You don't notice them anymore. Your brain has adapted to perceive the tension as your baseline.

Body mapping is the process of systematically identifying where you hold chronic tension. It's not about judgment or trying to fix anything yet. It's pure information gathering. Where does your body habitually contract? Which areas feel tight, restricted, numb, or painful? What patterns show up consistently?

common holding patterns include**:**

- clenched teeth, especially during sleep
- tight temples and forehead
- tension around the eyes
- difficulty fully opening your mouth
- shoulders elevated toward ears (upper trapezius)
- forward head posture
- tight muscles between the shoulder blades
- sensation of weight or pressure on the chest

Body Scan Exercise

Note: This body scan exercise is a foundation and is also a preview of another variation that you will find in Chapter 4.

1. Set aside 10 minutes when you won't be interrupted. Lie down on your back on a mat or carpeted floor. Arms at your sides, legs extended comfortably. Close your eyes if that feels safe, or keep them softly focused on the ceiling.
2. Start at your feet. Notice the sensation of your feet against the floor. Are your toes relaxed or slightly curled? Is your weight distributed evenly between your heels? Don't try to change anything yet. Just notice.
3. Move up to your calves and knees. Are your calves soft against the floor or slightly lifted? Are your knees locked or relaxed?

4. Notice your thighs and hips. Does one hip feel higher or more forward than the other? Can you feel both sitting bones making contact with the floor evenly?

5. Bring your attention to your lower back. Is there space between your lower back and the floor, and if so, how much? Can you feel your entire spine making contact with the floor, or are certain areas lifted away?

6. Notice your abdomen. Is your belly soft or held tight? Can you feel your breath moving your belly, or is your breathing restricted to your chest?

7. Move to your chest and upper back. Does your chest feel open or collapsed? Are your shoulder blades flat against the floor or lifted?

8. Notice your shoulders. Are they resting on the floor or lifted toward your ears? Is one higher than the other?

9. Bring attention to your neck. Does the back of your neck feel long or compressed? Is your head tilted to one side?

10. Notice your jaw and face. Are your teeth clenched or separated? Is your tongue pressed against the roof of your mouth or relaxed? Are your eyes squeezed shut or softly closed?

11. Take one more full scan from feet to head, noting the overall pattern. Don't try to relax anything yet. This is just information.

Creating Your Tension Map

After the body scan, write down or mentally note the areas where you consistently hold tension. Rank them by intensity if that's helpful. Some areas might feel extremely tight or painful. Others might feel moderately restricted. Some might feel completely numb or disconnected.

Your tension map will guide which exercises to prioritize in later chapters. If your primary holding pattern is elevated shoulders and a tight neck, you'll focus heavily on the shoulder and neck release exercises. If your psoas and lower back dominate, you'll spend more time on hip and spine work.

Your map will also change as you practice. Areas that feel numb initially might start registering sensation as your awareness increases. The tension you release in one area might reveal holding patterns in another area that were masked. Check in periodically and update your understanding of where and how you hold.

This map is your starting point. Now you know what you're working with.

Creating Your Practice Space and Mindset

Your practice space is wherever you have enough room to lie down. That's it. A yoga mat on the floor works. A carpeted area works. Even a rug in your bedroom. You don't need a dedicated meditation corner, a pristine studio, or any special setup. You need a flat surface where you can stretch out without hitting furniture.

What You Actually Need

- Enough floor space to lie down with arms and legs extended
- A yoga mat, thick towel, or carpeted floor (something with a little cushioning)
- Quiet enough to focus, though complete silence isn't necessary
- 10 to 15 minutes when you won't be interrupted

That's the entire list. No props, no special clothing, no equipment. Some exercises suggest a small pillow under your head if that's more comfortable, but you can use a folded towel. The simplicity is intentional. Barriers to starting make it harder to show up consistently.

When to Practice

Morning works well for many people. Your nervous system is relatively calm; you haven't accumulated the day's tension yet, and the practice sets a foundation for how you move through the rest of the day. But morning isn't magic. Evening works too, especially if you carry work stress in your body and need to release it before sleep.

The best time is whenever you'll actually do it consistently. If mornings are chaotic and evenings are your only quiet window, practice in the evening. If you can grab 10 minutes during lunch, do that. Consistency matters more than optimal timing.

The Right Mindset

Drop the idea that you're trying to accomplish something or fix yourself. You're exploring. You're gathering information about how your body currently holds tension and how it responds to gentle movement. Some days you'll notice a significant release. Some days, nothing obvious will happen. Both outcomes are fine. You're teaching your nervous system new patterns, and progress isn't linear.

Approach each session with curiosity rather than expectation. What do you notice today? Where do you feel tension? What happens when you slowly contract and release? The noticing itself is the work. Results follow eventually, but they're not something you force or chase.

What Not to Do

Don't practice when you're already overwhelmed, in crisis, or completely dysregulated. Somatic work requires enough baseline stability to track sensations. If you're in the middle of a panic attack or deep dissociation, this isn't the time. Stabilize first using whatever tools work for you, then practice when you're back inside your window of tolerance.

Don't push through pain. Stop if something hurts. Pain is your nervous system's way of telling you that it feels under threat, which defeats the entire purpose of these exercises. Adjust the movement, make it smaller, or skip that exercise entirely.

Don't multitask. No TV in the background, no checking your phone between movements. The quality of your attention is what creates neural change. Ten minutes of focused practice beats thirty minutes of distracted half-effort every time.

Your practice space doesn't need to be perfect. Your timing doesn't need to be ideal. You just need to show up consistently with enough attention to notice what's happening in your body. That's sufficient.

What to Expect – Sensations, Emotions, and Progress

Somatic work releases what your body has been holding, and sometimes what comes out surprises you. You might do a gentle shoulder exercise and suddenly feel warmth spreading down your arm. Or tingling in your fingertips. Or nothing at all for three weeks, then one day your jaw unclenches and stays that way. The process doesn't follow a predictable script.

You might feel warmth or heat spreading through the area you're working on, tingling, buzzing, or vibrating sensations, a temporary increase in tension before release (the muscle might feel tighter for a few minutes), or spontaneous trembling or shaking.

None of these sensations means something is wrong. They are simply signs your nervous system is processing and releasing. The warmth indicates increased blood flow to areas that were restricted. The tingling means nerves that were compressed are firing properly again. The trembling is your body completing stress responses it couldn't finish years ago.

Emotional Releases

Sometimes releasing physical tension releases emotion, too. You're working on your tight hips, and suddenly you're crying. Not because you're thinking about anything sad. Not because you remembered a specific trauma. Just tears coming up from somewhere deep and old. This happens because emotions get locked in along with the muscle contraction. When the holding pattern releases, the emotion that was stored with it can surface.

This doesn't happen to everyone. Some people do months of somatic work and never cry, never feel anything particularly emotional. Others have regular emotional releases. Both experiences are normal. If emotions do surface, let them move through. Cry if you need to cry. Feel anger if that's what comes up. Then let it pass. You don't need to analyze it or figure out where it came from. Your body is just clearing out old material.

Non-Linear Progress

Progress in somatic work doesn't move in a straight line. You might have a breakthrough one day where your shoulders drop, your breathing deepens, and you feel amazing. Then the next day, your shoulders are right back up by your ears, and you feel like you made no progress at all. This is normal. Your nervous system doesn't change permanently in one session. It needs repeated experiences of the new pattern before it fully integrates.

Think of it like learning a new language. Some days, the words flow easily. On other days, you can't remember basic vocabulary. You're not losing what you learned. Your brain is consolidating, and consolidation looks messy. The same principle applies to motor learning. Some days, your body remembers the new pattern easily. Other days, it defaults back to the old one. Keep practicing. The new pattern is still forming even when it doesn't feel like it.

Some Days Feel Harder

Your window of tolerance changes daily based on sleep, stress, hormones, what you eat, and how much you've been triggered lately. Some days, you can do a full practice and feel grounded and present. On other days, you start the same exercise and immediately feel overwhelmed or numb. This doesn't mean you're regressing. It means your capacity fluctuates, and that's completely normal for a nervous system that's been chronically stressed.

On hard days, do less. Shorter practice, gentler movements, or just the grounding exercises. Don't force it. Somatic work isn't about pushing through. It's about working within your actual capacity on any given day, which varies. Respecting your limits builds trust with your nervous system, and that trust is what allows deeper release over time.

What Progress Actually Looks Like

Real progress shows up in small, almost boring ways. You notice your shoulders aren't up by your ears during a stressful meeting. You sleep through the night without waking up with jaw pain. You take a full breath without thinking about it. Someone comments that you look more relaxed. These aren't dramatic transformations. They're subtle shifts that accumulate into significant change over weeks and months.

Don't measure progress by how you feel immediately after each practice session. Measure it by what changes in your daily life over time. Less chronic pain. Better sleep. More emotional capacity. Feeling more present in your body. Those are the markers that matter.

So much of what we know about the body is intellectual. We understand anatomy diagrams, can name muscles and bones, and read books about how trauma lives in tissue. But knowing about your body is completely different from actually feeling it, from being able to sense where you're holding tension and where you've gone numb. Before you can release anything, you need to develop that sensory awareness. You need to learn how to actually inhabit your body instead of just operating it from a distance like a drone pilot. The next chapter gives you the foundation exercises that build this awareness: grounding practices that help you feel connected to your physical self, and body sensing techniques that teach you to track what's actually happening inside. These aren't the dramatic release exercises yet. They're the necessary groundwork that makes those releases possible. You can't let go of what you can't feel.

Chapter 4: Foundation Exercises – Grounding and Body Awareness

You can't release what you can't feel. That's why you cannot do somatic work when you're feeling disconnected from your body. Someone tells you to relax your shoulders, and you have no idea if they're actually tense. You try to notice your breath and realize you can't tell if you're breathing into your chest or your belly or if you're barely breathing at all.

This disconnection came from survival. When your body became an unsafe place to be, when pain or trauma made inhabiting your physical self unbearable, you learned to leave. To live entirely in your head, operating your body like machinery you manage from a control room somewhere behind your eyes. Functional, but detached. Moving through the world without actually being in it.

The exercises in this chapter teach you how to come back and are structured in such a way that they facilitate the basic sensory awareness you need before any release work can happen. You learn to feel your feet on the floor, to notice the difference between a tense muscle and a relaxed one, to track sensations without immediately leaving when something uncomfortable shows up.

These foundation practices make everything else possible. Skip them because they seem too simple or boring, and you'll struggle with every exercise that comes after. They look easy. They feel almost too gentle to matter. But sensory awareness is the skill that allows pandiculation to work, that lets you track what happens when muscles contract and release, and that helps you stay present with your body long enough for actual change to occur.

Start here. Learn to feel your body again. The release work builds on this.

Why Grounding Comes First

Grounding means to feel connected to your physical body and the surface beneath you. It is the phenomenon that familiarises your subconscious with the felt safety of a moment, a space. Without it, every somatic exercise becomes destabilizing instead of regulating, and you teach yourself how to start to pay attention to your body and immediately float away, dissociate, or get overwhelmed by what you find there.

Anchors are used to keep things tethered in place; they function as roots do, so when you ground first, you establish a baseline of safety and presence. Your nervous system gets

the message that you're here, on solid ground, supported. This allows you to explore tension and sensation without immediately leaving your body or getting flooded.

I highly recommend that you not skip this step because you need to create some sort of container for yourself that makes everything else safe enough to attempt. Try to release your chronically tight psoas without grounding first, and you might trigger a freeze response, dissociate completely, or flood with panic. Ground yourself first, and your nervous system has a reference point to return to when things get intense.

When we complete an exercise, we'll start by grounding ourselves. Even after you've been doing somatic work for months. Even on days when you feel perfectly fine and stable. Grounding signals to your nervous system that you're intentionally entering body awareness, and it sets the conditions for whatever work follows. All you need is two minutes to feel your feet, to notice your breath, and to establish presence. Then move forward.

Exercise #1: Feet-to-Floor Awareness

This exercise teaches you to feel the connection between your feet and the ground. It sounds almost insultingly simple until you try it and realize you've been walking around for years without actually feeling your feet at all.

Standing Version

1. Stand with your feet hip-width apart. Don't adjust your posture or try to stand "correctly." Just stand however you normally stand.
2. Bring your attention to your feet. Notice where your feet make contact with the floor. Can you feel your heels? The balls of your feet? The outer edges? Your toes?
3. Notice if your weight is distributed evenly between both feet or if you're leaning more heavily on one side. Don't change it. Just notice.
4. Press gently down through your feet. Not hard, just enough to feel the floor pushing back against you. This is called the grounding force. The floor is always pushing back with equal pressure to what you give it, but most people never feel this.
5. Now notice the temperature. Are your feet warm or cool? Can you feel the texture of the floor through your shoes or socks? If you're barefoot, what does the surface feel like?

6. Shift your weight slightly forward so more pressure goes to the balls of your feet. Feel what that's like. Then shift your weight back toward your heels. Notice the difference. Return to the center.

7. Stay here for one to two minutes, just feeling your feet on the floor. When your attention wanders (it will), bring it back to the physical sensation of contact.

Seated Version

1. Sit in a chair with both feet flat on the floor. Don't cross your legs or tuck your feet under the chair.

2. Notice where your feet make contact with the floor. Can you feel your entire foot or just parts of it?

3. Press your feet gently into the floor. Feel the floor pressing back. Hold this gentle pressure for a few seconds, then release.

4. Notice your sit bones, the bones at the base of your pelvis that make contact with the chair. Can you feel both sit bones equally, or does one feel more weighted?

5. Press down through your feet again while simultaneously feeling the weight of your body on the chair. You're grounded through two points of contact now: feet and sit bones.

6. Stay here for one to two minutes, tracking the sensation of being supported by the floor and chair.

Exercise #2: The Body Scan

Most body scans you've encountered probably instructed you to relax each body part as you scanned through it. This one works differently; we are building on the foundation of the scan that we did earlier in Chapter 3. You're not trying to relax anything or fix anything. You're just noticing what's actually there. Tension, numbness, warmth, pressure, whatever exists in each area. It builds your capacity to observe your body without immediately trying to change it, which is essential for all the release work that comes later.

Setup

Lie on your back on a mat or carpeted floor. Arms at your sides, palms facing up or down, whatever feels natural. Legs extended, feet falling open naturally. If your lower back feels uncomfortable, bend your knees and place your feet flat on the floor.

Set a timer for 10 minutes so you don't have to track time.

The 10-Minute Body Scan

1. Close your eyes or keep them softly focused on the ceiling. Take three slow breaths without trying to change how you're breathing. Just notice the natural rhythm.

2. Bring your attention to your feet. Notice any sensation there. Tingling, numbness, warmth, coolness, pressure against the floor, nothing at all. Don't judge what you find. Just notice. Stay here for 30 seconds.

3. Move to your lower legs, calves, and shins. What do you notice? Are the muscles soft against the floor or slightly engaged? Can you feel both legs equally, or is one more present than the other? Notice for 30 seconds.

4. Bring attention to your knees and thighs. Are your knees locked or soft? Do your thighs feel heavy or light? Is there tension anywhere in this area? Just observe. 30 seconds.

5. Notice your hips and pelvis. Can you feel both hip bones making contact with the floor evenly? Is one side tighter or more restricted than the other? What about your sit bones? 30 seconds.

6. Move to your lower back and abdomen. Is there space between your lower back and the floor, and if so, how much? Is your belly soft or held tight? Can you feel your breath moving your abdomen, or does it stay still? Notice without changing. 45 seconds.

7. Bring attention to your mid and upper back. Which parts of your spine make contact with the floor? Which parts lift away? Can you feel your shoulder blades? One minute here.

8. Notice your chest. Does it feel open or collapsed? Can you sense your heartbeat? What happens in your chest as you breathe? 30 seconds.

9. Move to your shoulders and arms. Are your shoulders lifted toward your ears or resting on the floor? Is one shoulder higher than the other? What about your arms, are they heavy against the floor or slightly floating? Notice your elbows, forearms, and wrists. One minute.

10. Bring attention to your hands. Can you feel all ten fingers or just some of them? Are your hands curled or open? Warm or cool? 30 seconds.

11. Notice your neck. Does the back of your neck feel long or compressed? Is your head tilted to one side or centered? 30 seconds.

12. Move to your jaw and face. Are your teeth clenched or separated? Is your tongue pressed against the roof of your mouth or relaxed? What about your eyes, forehead, and temples? One minute here, as this is where many people hold significant tension.

13. Take one final scan from your feet all the way up to the crown of your head, noticing the overall pattern of sensation, tension, numbness, and presence in your body. One minute.

14. Wiggle your fingers and toes gently. Open your eyes. Roll to one side and rest there for a few breaths before sitting up.

Exercise #3: The Constructive Rest Position

Constructive Rest is a specific lying position that comes from the Alexander Technique. It allows your spine to release and lengthen naturally without any active effort on your part. Gravity does the work. Your muscles can let go because the position itself supports you. This is the default position for most exercises in this book because it creates optimal conditions for your nervous system to downregulate and your holding patterns to release.

Why This Position Works

When you lie flat on your back with your legs extended, your psoas muscle (the deep hip flexor) stays partially engaged to stabilize your lower back. When you bend your knees and place your feet flat on the floor, your psoas can fully release because your legs are supporting themselves. Your lower back can soften toward the floor. Your whole spine gets support from the ground beneath you, which signals to your nervous system that it can stop working so hard to hold you upright.

The position also prevents you from arching your back or tucking your pelvis, both of which engage muscles unnecessarily. Your body finds a neutral position where minimal muscular effort is required. This creates the conditions for sensory-motor learning. Your motor cortex can actually register what "relaxed" feels like because you're not fighting gravity or maintaining posture.

How to Set Up Constructive Rest

1. Lie on your back on a mat or carpeted floor. A firm surface works better than a soft bed because you need the feedback of the ground.

2. Bend your knees and place your feet flat on the floor, hip-width apart. Your feet should be close enough to your hips that your knees stay up without effort, but not so close that your legs feel cramped. Generally, your feet will be about 12 to 18 inches from your hips.
3. Let your knees rest against each other or keep them hip-width apart, whatever feels more stable. If your knees fall outward and you have to work to keep them up, bring your feet wider apart.
4. Place a small pillow or folded towel under your head if your head tilts back or your neck feels compressed. The goal is to have your forehead and chin roughly level, not tilted up or down. Most people need some support under their head. Start with something about two inches thick and adjust from there.
5. Rest your arms at your sides, palms up or down, whatever feels natural. Your arms should be a few inches away from your body, not pressed against your ribs.
6. Close your eyes or keep them softly focused on the ceiling.

Exercise #4: Sensing Micro-Movements

Most exercise operates on the principle that more effort equals more results. Lift heavier, stretch deeper, push harder. Somatic work operates on the opposite principle: less effort creates more awareness, and more awareness creates more change. This exercise teaches you to make movements so small they're almost invisible, because those tiny movements give your nervous system the clearest information.

Why Smaller Works Better

When you make a large, forceful movement, your nervous system has to recruit multiple muscle groups and coordinate a complex motor pattern. All that activity drowns out the subtle sensory feedback you're trying to access and alerts your brain about a loud, general signal, but misses the nuanced information about what's actually happening in individual muscles.

When you make a tiny, slow movement, you can track exactly what's happening. Which muscle initiates the movement? Where do you feel effort? What stays relaxed? This detailed sensory feedback is what retrains your motor cortex. Feldenkrais called this "learning to learn," and it requires moving small enough that you can pay attention to the quality of the movement rather than just accomplishing the action.

The Practice

1. Lie in a constructive rest position. Take a few breaths to settle.
2. Think about lifting your right shoulder toward your ear, but don't actually move it yet. Just imagine the movement. What would that feel like? Where would you sense effort?
3. Now lift your shoulder the smallest possible amount. We're talking millimeters, barely perceptible movement. So small that if someone were watching you, they might not even notice you moved.
4. Notice everything about this tiny movement. Where did the movement initiate? What muscles engaged? Did anything else in your body respond? Your neck, your jaw, your other shoulder?
5. Lower your shoulder back down just as slowly and minimally. Notice the lowering as carefully as you noticed the lifting.
6. Rest for a few breaths. Notice if anything feels different in your right shoulder compared to your left.
7. Repeat the micro-movement three to five times, each time making it as small and slow as you possibly can. You're not trying to stretch or strengthen. You're gathering sensory information.
8. Rest completely and notice the difference between your right and left shoulders. Often, the side you worked on feels longer, more relaxed, or more present, even though you barely moved it.
9. Now do the same micro-movement with your left shoulder. Tiny lift, notice everything, slow lower, rest. Repeat three to five times.
10. Compare both shoulders. What changed?

Exercise #5: Basic Somatic Breathing

With this exercise, you'll learn how to move breath through your body. You're not trying to breathe correctly or achieve a certain pattern. You're observing your natural breath and gathering information about where your body allows movement and where it restricts it. Those restrictions tell you where you're holding tension.

Why Breath Matters in Somatic Work

Your breath pattern reflects your nervous system state and your holding patterns. When you're chronically stressed, your breath gets shallow and high in your chest. When your psoas is tight, your diaphragm can't descend fully. When your jaw is clenched, your breath gets restricted. Noticing these patterns gives you concrete information about where tension lives in your body.

The goal here is natural diaphragmatic breathing, where your belly expands on the inhale and softens on the exhale. But many people have been breathing shallow chest breaths for so long that their body has forgotten what natural breathing feels like. This exercise helps you rediscover it without forcing.

The Practice

1. Lie in a constructive rest position. Place one hand on your chest and one hand on your belly.

2. Breathe naturally for a few cycles without trying to change anything. Just notice. Which hand moves more, the one on your chest or the one on your belly? Does your breath feel smooth or choppy? Deep or shallow?

3. Notice if you're holding your breath between inhales and exhales or if the transitions flow continuously.

4. On your next inhale, notice if your belly expands or if it stays flat. Don't force your belly to move. Just observe what happens naturally.

5. As you exhale, notice if your belly softens back toward your spine or if it stays rigid.

6. Bring attention to your ribs. Do they expand sideways as you inhale? Do your lower ribs move or just your upper chest?

7. Notice your back. Does your lower back press slightly into the floor as you inhale, creating gentle movement in your spine? Or does it stay completely still?

8. Check your shoulders. Do they lift toward your ears as you breathe, or do they stay relatively still? Shoulder movement during breathing usually indicates you're using accessory muscles instead of your diaphragm.

9. Notice your throat and jaw. Do they feel open and relaxed or slightly constricted?

10. Continue breathing naturally for two to three minutes, just observing where movement happens and where it doesn't.

These five exercises look and feel like nothing. You might've just spent twenty minutes lying on the floor, moving your shoulder a few millimeters, and wondering if this book is actually going to help or if you just wasted money on the wellness equivalent of watching paint dry. But here's what actually happened: you felt your feet on the ground, maybe for the first time in years. You noticed where your body has gone numb and where it's screaming. You stayed present with yourself for ten whole minutes without checking your phone or leaving entirely. That matters more than you think.

Everything that comes next requires that stable and steady foundation of what you just built. The next chapter teaches you how to actually let go. How to release muscles that have been holding for so long, you forgot they could do anything else. But you can't release what you can't feel, and now you can feel. That's the foundation. Everything else builds from here.

Chapter 5: Release Exercises: Shaking, Tremoring, and Discharge

If you've ever been on a game drive or a safari, you'll notice that animals tend to do this thing where they shake violently after a stressful encounter. A gazelle escapes a predator, and once it's safe, it stops running and literally shakes its entire body for several seconds. Its legs tremble, its muscles quiver, and then it's done. It goes back to grazing, like nothing happened. The stress response is completed. The activation is discharged. The nervous system reset to baseline.

Humans are the only animals that don't do this. We stop the shake, suppress the tremor, and hold it all in because shaking looks weak, feels embarrassing, or seems like a loss of control. When someone cuts us off in traffic, and our body wants to shake with adrenaline, we grip the steering wheel tighter and swallow it down. We get terrible news and our legs want to tremble, but we lock our knees and force ourselves to stand still. We survive something traumatic, and our whole body wants to discharge the activation through shaking, but we've been trained since childhood that shaking means you're falling apart.

So the activation stays, which means that the stress hormones circulate with nowhere to go. The muscular tension that prepared you to fight or flee never gets released. Your nervous system stays stuck in a state of partial activation, sometimes for years, because you never completed the natural discharge cycle your body was trying to initiate.

This chapter teaches you how to let your body do what it's been trying to do all along: shake it off. Tremor. Discharge the held activation through involuntary movement. It feels weird at first. It might feel vulnerable or out of control. But it's the most natural thing in the world. Your body already knows how to do this. You just have to stop preventing it.

Why Your Body Needs to Shake

When you experience stress or threat, your sympathetic nervous system floods your body with cortisol and adrenaline, which then spikes your heart rate and sends blood away from your digestive system and into your large muscle groups. Your muscles contract and prepare you to fight or run. This is the stress response, and it's designed to be temporary. You escape the danger, your body discharges the activation through physical action (running, fighting, shaking), and your parasympathetic nervous system kicks in to return everything to baseline.

Most modern stress doesn't allow for this kind of physical discharge. You can't run away from your demanding boss or fight your way out of financial pressure. You can't

physically escape a dysfunctional relationship, a pandemic, or systemic injustice. The threat is ongoing, or the situation doesn't permit a physical response. So your body activates for action, but never gets to complete that action. The stress hormones circulate. The muscular tension holds. Your nervous system stays revved up, waiting for a discharge that never comes.

This incomplete stress response is what creates chronic holding patterns. Your psoas stays contracted because it prepared you to run, but you never ran. Your shoulders stay elevated because you braced for impact that kept coming in different forms. Your jaw stays clenched because you couldn't say what you needed to say. The activation is still in your system, stored in your muscles, waiting to be released.

The TRE Model

David Berceli developed Tension and Trauma Releasing Exercises (TRE) based on the observation that mammals naturally discharge stress through involuntary shaking and tremoring. He noticed that people in war zones and disaster areas would spontaneously shake or tremor after traumatic events, and those who allowed this shaking tended to recover faster than those who suppressed it.

TRE uses specific exercises to fatigue the psoas muscle, which then triggers a natural tremor response. Once the tremoring starts, your body takes over. The shaking moves through your legs, pelvis, spine, and sometimes your whole body. This isn't a voluntary movement you're controlling. It's your nervous system discharging held activation through involuntary muscular contractions and releases.

The tremoring completes stress cycles that got interrupted months or years ago. Your body finally gets to shake off what it's been holding. The sympathetic activation discharges. Stress hormones are metabolized. Muscular tension releases. Your nervous system can return to a more regulated baseline because it's no longer carrying incomplete responses.

Why This Matters for Trauma

Trauma often involves a freeze response. You couldn't fight and couldn't flee, so your nervous system shut down into immobilization. The massive amount of energy mobilized for fight or flight got trapped in your body with nowhere to go. Tremoring allows that trapped energy to discharge even years later. Your body doesn't care that the traumatic event happened a decade ago. It still needs to complete the response.

Shaking also bypasses the thinking brain entirely. You don't have to talk about what happened. You don't have to revisit memories or process emotions. Your body handles

the discharge at a physiological level. The release happens in your tissues and nervous system, not in your narrative understanding of events. This is why tremoring can create relief even when you can't remember or don't want to discuss the trauma that created the holding in the first place.

Not All Shaking Is the Same

The tremoring you'll learn to initiate in this chapter is different from shaking caused by fear, cold, or low blood sugar. Fear-based shaking comes from an active threat and more sympathetic activation. The tremoring in TRE-style work comes from a safe, controlled environment where your nervous system finally has permission to discharge what it's been holding. One adds activation. The other releases it.

You'll know the difference by how you feel afterward. Tremoring that discharges trauma leaves you feeling calmer, more grounded, sometimes tired, but in a good way. Shaking from fear or overwhelm leaves you more activated and dysregulated. Context and safety determine which type of shaking you're experiencing.

Exercise #1: Intentional Shaking

Intentional shaking starts as a voluntary movement that can shift into involuntary tremoring if your nervous system feels safe enough to let go. You start by deliberately shaking your body, and if conditions are right, your body might take over and continue shaking on its own. This autonomous tremoring is your nervous system discharging held activation.

Setup

1. Stand with your feet hip-width apart in a space where you have room to move freely.

2. Unlock your knees slightly. Don't stand rigidly. Let your knees stay soft and bouncy.

3. Start with just two to three minutes for your first few sessions. You can gradually increase to five or seven minutes as your body builds tolerance.

4. Make sure you're in a private space where you won't feel self-conscious or interrupted.

The Practice

1. Start bouncing gently on the balls of your feet, with your heels lightly touching or just off the ground. Let your knees bend and straighten in a small, rhythmic bounce. This is the foundation movement.
2. Once you have a comfortable bounce going, start shaking your hands and arms loosely. Let them flop and swing. Don't control the movement. Let gravity and momentum move your arms around.
3. Continue the leg bounce while allowing the shake to move up into your shoulders. Let your whole upper body get loose and floppy.
4. Add your head if that feels safe. Let it wobble and shake gently. If this triggers dizziness or feels destabilizing, keep your head still and just shake your body.
5. Keep the bounce going in your legs. Your whole body should be shaking now; arms, torso, legs, all moving in a loose, uncontrolled way.
6. After a minute or two of voluntary shaking, you might notice the quality of the shake starting to change. It might become less smooth and more stuttery. Your legs might start trembling rather than bouncing evenly. This is the shift from voluntary to involuntary. Your nervous system is taking over.
7. If the tremoring starts, let it happen. Don't try to control it or make it look a certain way. Your body knows what it needs to do.
8. If the shaking stays entirely voluntary and controlled, that's fine too. You're still discharging activation. The involuntary tremoring might come later as your nervous system builds trust in the process.
9. Continue for your allotted time (two to seven minutes), then gradually slow the movement and come to stillness.
10. After you stop, stand still for 30 to 60 seconds and notice what you feel. Your legs might feel wobbly or warm. Your breathing might have changed. You might feel calmer or slightly energized.
11. Lie down in constructive rest (on your back, knees bent, feet flat on the floor) for at least two to three minutes to let your nervous system integrate what just happened.

Duration and Intensity Guidance

Start with two to three minutes. This seems short, but shaking is powerful, and your nervous system needs time to adjust to this level of discharge. Going too long, too soon can leave you feeling overstimulated or depleted.

Gradually increase by one minute every few sessions. Most people find five to seven minutes is sufficient for a daily practice. Some days you'll need less. Listen to your body.

Intensity should be moderate. You're not trying to shake as hard as possible. Think energetic but sustainable. If you're gasping for breath or your muscles are burning, you've gone too hard. Scale back.

Am I Doing It Right?

The most common concern with this exercise is whether you're doing it correctly. Here's how to know:

You're doing it right if you can sustain the movement for the intended duration without exhausting yourself. You're doing it right if you feel some kind of shift: warmth, tingling, emotional release, tremoring, or just a sense of discharge. You're doing it right if you feel calmer or more grounded afterward, even if you're also tired.

You're probably not doing it right if you feel more anxious or activated after than before. If you feel panicky or overwhelmed during the shaking, you've gone outside your window of tolerance. Stop, ground yourself, and try a shorter duration or gentler intensity next time.

The involuntary tremoring might not happen for weeks or months. That doesn't mean you're failing. The voluntary shaking still discharges activation. Your nervous system will shift into involuntary tremoring when it feels safe enough to let go of that level of control.

Safety Tips

- Stop immediately if you feel dizzy, lightheaded, or like you might faint.
- If you start to dissociate (feel far away from your body, vision gets blurry, feel disconnected), stop and ground yourself using feet-to-floor awareness.
- Don't shake if you're injured, have joint problems, or have medical conditions that make vigorous movement risky.
- If you have a history of seizures, consult your doctor before doing shaking practices.
- If you're pregnant, skip this exercise or get clearance from your healthcare provider.
- Always rest afterward; don't immediately jump into activity.

Exercise #2: The Wall Shake

It feels good to have something solid to lean against when you're trying to let go. The wall provides support so you can shake without worrying about balance or stability. This variation works well if you feel unsteady on your feet, if you're working with low energy, or if standing unsupported triggers anxiety. The wall becomes your anchor while your body does the release work.

Setup

1. Stand facing a wall, about arm's length away.

2. Place both palms flat against the wall at shoulder height or slightly lower, whatever feels comfortable.

3. Step your feet back slightly so you're leaning into the wall at a gentle angle. Your arms should be mostly straight but not locked.

4. Your feet should be hip-width apart with soft knees.

The Practice

1. Press gently into the wall through your hands. You should feel the wall pushing back, supporting your weight. This is your ground.
2. Bounce gently by bending and straightening your knees in small, rhythmic movements. Your hands stay on the wall for support.
3. Let the bounce travel up through your body. Your hips might start swaying. Your spine might undulate slightly.
4. Start shaking your hips and legs while keeping your hands pressed against the wall. The shake can be small or large, whatever your body wants.
5. Allow your torso to join the movement. Your upper body can shake while your hands maintain contact with the wall for stability.
6. If it feels safe, let your head move a little. Small nods or gentle side-to-side movements. If this feels destabilizing, keep your head still.
7. Continue for two to five minutes. The wall is there the entire time, giving you something solid to push against if you need it.

8. Notice if the shaking shifts from voluntary to involuntary. Your body might start trembling on its own. Let it happen while staying connected to the wall.
9. When you're ready to stop, gradually slow the movement and come to stillness. Keep your hands on the wall for another 30 seconds while you catch your breath.
10. Step away from the wall slowly and stand for a moment before lying down in constructive rest.

Modifications for Different Energy Levels

- **Low energy days:** Stand closer to the wall so you're leaning more heavily into it. Let the wall take more of your weight. Shake gently and slowly. Even two minutes is enough.
- **Moderate energy:** Use the position described above with a moderate lean. Shake with medium intensity. Three to four minutes.
- **Higher energy:** Step farther from the wall so you're barely leaning. Use the wall just for light touch and balance. Shake with more vigor and intensity. Five to seven minutes.
- **Recovery or illness:** Stand very close to the wall with forearms resting against it instead of just hands. Barely bounce. Just let your body have small, gentle tremors while heavily supported. One to two minutes maximum.

The wall provides proprioceptive feedback, which can help you feel safer and more grounded, which paradoxically allows deeper release. Some people who can't access involuntary tremoring while standing unsupported find that the wall's stability gives their nervous system enough safety to let go.

The wall also takes away the fear of falling or losing balance, which is a common block to full release. When your body knows it has support, it's more willing to surrender control.

Use this variation whenever standing shaking feels too vulnerable or unstable. There's no hierarchy here; the wall shaking isn't easier or less effective than standing shaking. It's just different support for the same release process.

Exercise #3: Neurogenic Tremoring (TRE-Inspired)

This is the core tremoring practice that has been adapted from TRE. You'll use specific positions to create gentle fatigue in your psoas and hip muscles, which then triggers involuntary tremoring. This tremor is different from the shaking exercises because you're

not making it happen voluntarily. Your nervous system initiates it once the conditions are right. Your job is to allow it, not control it.

This works because when you gently fatigue your psoas through specific positioning, the muscle can't maintain its chronic contraction pattern. As it starts to release, your nervous system may initiate tremoring as a way to discharge stored activation. The tremor usually starts in your legs and can spread through your pelvis, spine, and eventually your whole body. This is normal and safe when done correctly.

Setup

1. Lie on your back on a mat or carpeted floor. No pillows under your head for this exercise.
2. Make sure you have at least 15 minutes of uninterrupted time in a private space.
3. Start with just five to seven minutes of tremoring for your first few sessions, then gradually increase.

The Positioning Sequence

Step 1: Create Initial Fatigue

1. Lie on your back and bring your knees up so your feet are flat on the floor, hip-width apart.
2. Lift your hips off the floor into a bridge position. Hold this for 30 to 60 seconds. Your thighs will start to burn slightly. This is creating the fatigue you need.
3. Lower your hips back down and rest for a few breaths.

Step 2: The Tremor Position

1. Keep your feet flat on the floor, but bring them closer together, about four to six inches apart.
2. Let your knees fall open gently and then bring them back to touch each other or nearly touch. Your legs should form a diamond shape with your feet together or close, knees touching.
3. Now let your knees fall open again just slightly, maybe six to eight inches apart. Not wide open, just a moderate opening.

4. Your feet stay planted firmly on the floor. The weight is on the outer edges of your feet.

5. This position creates gentle tension in your inner thighs and psoas. Hold it and wait.

Step 3: Allow the Tremor

1. Stay in this position with your knees held at that moderate width apart. Don't move. Just hold and breathe.

2. Within 30 seconds to two minutes, you might start to feel small vibrations or shaking in your legs. This is the beginning of neurogenic tremor.

3. When the tremor starts, do nothing. Don't help it. Don't stop it. Don't try to make it bigger or more intense. Just allow whatever is happening.

4. The tremor might stay small and localized in your thighs, or it might spread to your pelvis, spine, and torso. Let it do whatever it wants to do.

5. Your breathing might change. You might sigh, yawn, or breathe more deeply. Allow that too.

How to Allow vs. Control

This is the hardest part: allowing without controlling. Your mind will want to either stop the tremor (because it feels weird or vulnerable) or make it bigger (because you think more is better). Neither helps.

Signs you're allowing:

- The tremor has its own rhythm; you're not creating
- The intensity varies on its own, getting stronger and weaker
- You feel like you're witnessing the tremor rather than doing it
- Your mind can wander, and the tremor continues

Signs you're controlling:

- You're consciously shaking your legs to keep it going
- The tremor stops the moment you stop trying
- The rhythm is steady and mechanical rather than variable
- You're holding your breath or tensing to maintain it

If you catch yourself controlling, just stop and wait. The authentic tremor will return if your body needs it to, or it won't. Either outcome is fine.

Adjusting the Intensity

If the tremor feels too intense or overwhelming:

- Bring your feet wider apart; this reduces the tension and calms the tremor
- Bring your knees closer together
- Place one or both feet flat and wide on the floor to stop the tremor completely
- Rest in a constructive rest position

If no tremor is happening:

- Bring your feet closer together
- Let your knees open a bit wider
- Hold the position longer; sometimes it takes three to five minutes
- Or accept that today your body doesn't need to tremor, and that's okay

When to Stop

Stop immediately if:

- You feel panicky, overwhelmed, or like you're losing control
- You start to dissociate or feel far away from your body
- The tremor becomes painful rather than releasing
- You feel nauseated or dizzy
- You've been tremoring for more than 15 minutes in a single session

Stop after your planned duration (five to 15 minutes) by:

1. Bringing your feet wider apart to slow the tremor
2. Extending your legs flat on the floor
3. Resting in constructive rest for at least three to five minutes

Safety Guidelines

- Never tremor for more than 15 minutes in one session, even if it feels good
- Always rest afterward. Don't immediately get up and go about your day
- If you have trauma history, start with just five minutes
- Don't force tremoring to happen. If your body doesn't initiate it, that's information
- Stay hydrated and don't do this on an empty stomach
- Skip this exercise if you're pregnant, have pelvic floor dysfunction, have had recent surgery, or have joint injuries in your hips or lower back
- If you have a seizure disorder, consult your doctor before attempting tremoring practices

Some sessions will produce strong tremors. Others will produce nothing. Your nervous system determines what it needs on any given day. Trust the process.

Completing the Stress Cycle Through Movement

Emily and Amelia Nagoski wrote about something in their book *Burnout* that completely changed how I understood stress. In the book, they explain that stress is a physiological cycle that has a beginning, middle, and end, so we really can't think our way out of it. Most of us never complete the cycle because we get stressed, deal with the stressor (finish the project, have the difficult conversation, handle the crisis), but our body never gets the indication from us that the threat is over.

Your body cannot distinguish between different types of stress. To it, running from a predator, sitting in traffic, or dealing with a passive-aggressive email from your boss are the same thing. So it does the same thing in all situations; it floods your system with Cortisol and adrenaline, then your muscles tense, your heart rate increases, and your body prepares for physical action. However, the stressors we deal with in a modern context rarely allow for physical action. You can't punch your laptop when it crashes right before a deadline or sprint away from financial pressure. So the activation just sits there, incomplete, waiting for a physical release that never comes.

Completing the stress cycle means giving your body the physical experience it's waiting for. You have to move the energy through and out. Not by resolving the stressor itself, but by discharging the physiological activation the stressor created. This is why you can solve every problem in your life and still feel anxious and tense. You dealt with the stressor but never completed the stress response in your body.

Simple Discharge Movements

These movements help complete stress cycles in the moment or after stressful events. They're quick, accessible, and you can do most of them anywhere.

Pushing Against a Wall

1. Stand facing a wall, arms extended, palms flat against the surface.
2. Push hard into the wall for 15 to 30 seconds like you're trying to move it. Engage your legs, core, and whole body.
3. This simulates the fight response your body wants to have. Your muscles get to push against resistance.

4. Release and shake out your arms. Notice if you feel any shift.

Shaking Out Your Hands

1. Stand with your arms loose at your sides.
2. Vigorously shake your hands and arms for 30 to 60 seconds like you're trying to fling water off them.
3. This is a quick discharge when you don't have time or space for full-body shaking.
4. Works well after a stressful meeting or phone call.

Stamping Your Feet

1. Stand and stomp your feet alternately into the ground with force. Like an angry toddler, honestly.
2. Do this for 20 to 30 seconds. Really let your feet hit the ground hard.
3. This grounds you while discharging the mobilization energy in your legs.
4. Particularly effective if you wanted to run away from something but couldn't.

The Full Body Squeeze and Release

1. Stand or sit and tense every muscle in your body at once. Clench your fists, scrunch your face, tighten your legs, everything.
2. Hold this total tension for five to 10 seconds.
3. Release everything suddenly and completely. Let your whole body go soft. Remember that this isn't pandiculation; the goal here is completing the stress cycle through contrast, not retraining motor patterns.
4. This creates the full arc of tension and release, mimicking what should happen naturally after stress.

Big Arm Swings

1. Stand with feet hip-width apart.

2. Swing your arms vigorously in big circles, forward and backward, crossing your body.
3. Continue for one to two minutes.
4. Gets your heart rate up briefly and moves energy through your upper body and torso.

The key principle is not to try to relax through these movements. You're trying to complete, and relaxation might come afterward, but the goal is discharge. Your body is activated for action, so give it action. Brief, physical, intense enough to move the energy through and out. Then it can settle naturally rather than staying stuck in that revved-up state waiting for a resolution that never comes.

Combine these quick discharge movements with the longer tremoring and shaking practices from earlier in this chapter. Sometimes you need a 30-second shake-out to get through your workday. Sometimes you need 10 minutes of full-body tremoring to release deeper holding. Both matter. Both complete stress cycles at different levels. Use what fits the moment and the intensity of activation you're carrying. Remember that this isn't pandiculation; the goal here is completing the stress cycle through contrast, not retraining motor patterns.

What to Do If Emotions Surface

I cannot tell you that you will be emotionally passive throughout these exercises. You might be. Some people do months of somatic work and never cry, never feel anger, never have an emotional release. They just feel their bodies softening and their tension decreasing. Other people, though, start shaking or tremoring and sob shortly thereafter.

This is a result of emotions that were stored away with the physical holding patterns. When your psoas contracted to protect you during trauma, fear contracted with it. When your jaw clenched to keep you from saying something dangerous, rage clenched with it. When your shoulders lifted to brace for the next blow, grief lifted with them. The emotion and the muscle tension became linked. So when the muscle finally releases, the emotion can release too.

What This Looks Like

Emotional releases during somatic work tend to be sudden and physical rather than thought-based. You'll be lying there, trembling and suddenly crying uncontrollably. The emotion moves through your body like a wave, peaks, and then passes.

This is different from emotional processing in therapy where you talk about feelings and work through them cognitively. This is your body clearing out material that's been stuck in your tissues. The emotion doesn't need a story or explanation. It just needs to move through and out.

How to Stay Present Without Suppressing

When emotion surfaces, your first instinct might be to stop it. To swallow the tears, clench your jaw, hold your breath, anything to shut it down. Don't. Let it move. Cry if you need to cry. Make noise if noise wants to come out. Your body is finally releasing something it's held for a long time. Stopping the release defeats the entire purpose.

At the same time, without dramatization, allow whatever wants to emerge without amplifying it. Think of yourself as a witness. The emotion is happening. You're present with it. You're neither pushing it away nor pulling it closer.

Keep breathing. This helps the emotion move through instead of getting stuck. And stay connected to your body. Feel your back against the floor, your feet on the ground. Notice the emotion in your chest, throat, belly, wherever it lives physically. This keeps you anchored in the present moment rather than spiraling into the story or memory.

When to Pause and Ground

If the emotion becomes completely overwhelming, if you feel like you're drowning in it or losing yourself entirely, pause. This is flooding, not release. Flooding retraumatizes. Release heals.

Signs you need to pause:

- you can't catch your breath
- you're dissociating or feeling far away from your body
- the emotion keeps intensifying with no peak or release
- you feel panicked rather than present
- you're hyperventilating or feeling faint

When this happens, stop the exercise immediately. Extend your legs flat on the floor or sit up. Use feet-to-floor awareness to ground. Look around the room and name five things you can see. Press your hands into the floor. Remind your nervous system that you're here, now, safe.

Wait until you feel more regulated before continuing or before attempting somatic work again. You found an edge that's too much right now. That's valuable information. Next time, work with less intensity or shorter duration.

The next chapter is where we get specific. Pandiculation. The technique that actually retrains your motor cortex to release muscles that have been contracted so long you forgot they could do anything else. The shaking you just learned discharges the backlog of activation your body's been carrying. Pandiculation reprograms the holding patterns themselves, so you stop creating new tension every time stress shows up. You need both. One clears out what's already there. The other changes how you respond going forward. Together, they give you a way out of the cycle you've been stuck in.

Chapter 6: Pandiculation Exercises – Retraining the Brain-Muscle Connection

I watched my nephew learn to write his name when he was five for a couple of weeks. He would grip the pencil so hard his knuckles would turn white. Every letter came out shaky and uneven because his entire hand was locked in tension, despite his teacher's urging him to relax his hand. It took months of practice before his brain learned that writing doesn't require that much force. The grip softened, and the letters smoothed out. Same task, completely different motor pattern.

Your body learned its holding patterns the same way through repetition under specific conditions. Fear, stress, threat, overwhelm, so your nervous system associated certain situations with certain muscular responses, and it practiced those responses so many times they became automatic. Now your motor cortex fires off those patterns without consulting you first.

So, we've gone through discharge work and cleared the emotional backlog. We taught ourselves the principles of staying grounded and brought you into your body, but neither one rewrites the motor program that keeps recreating tension every time your nervous system perceives a threat. That's what this chapter does.

Pandiculation is motor re-education and teaches your brain the movement equivalent of a looser pencil grip: less force, same function, better outcome. The technique works on the shoulders, jaw, lower back, hips, psoas, and anywhere chronic contraction has set up permanent residence.

Three steps. Every exercise. Contract deliberately, release with awareness, rest completely. Simple enough that it sounds like nothing. Specific enough that it changes everything for you.

The Pandiculation Protocol

Every pandiculation exercise in this chapter comprises the same three-step process. If you learn it now, you'll make things significantly easier for yourself because it's one you'll use repeatedly for various muscle groups. Skipping a step or rushing through it will lessen the effectiveness.

Step 1: Gently Contract the Target Muscle

You start by deliberately contracting the muscle that's already tight. This seems counterintuitive. Why would you tighten something that's already too tight? Because you need to engage your motor cortex voluntarily before you can retrain it.

When you consciously contract a muscle, you activate the motor neurons that control it. Your brain sends a clear signal: contract now. This wakes up the neural pathway between your motor cortex and that specific muscle. You're establishing conscious control over a muscle that's been operating on autopilot.

The contraction should be gentle, maybe 20 to 30 percent of your maximum effort. You're not trying to contract as hard as possible. You're trying to feel the contraction clearly. Big difference. If you tense too hard, you recruit neighboring muscles and muddy the sensory feedback. Keep it focused and moderate.

Hold the contraction for three to five seconds. Long enough to register what it feels like, not so long that the muscle fatigues.

Step 2: Slowly Release With Full Attention

This is the crucial step where the actual retraining happens. You release the contraction very slowly, taking at least five to eight seconds to go from contracted to fully relaxed. Your attention stays focused on the physical sensation throughout the entire release.

This slow, conscious release gives your sensory cortex detailed information about what letting go feels like. Your brain tracks the gradual decrease in muscle tone, the sensation of lengthening, and the feeling of tension dissolving. This sensory feedback updates your motor cortex's understanding of what "relaxed" means in this muscle.

If you release too quickly, your brain doesn't get this detailed information. The change happens too fast to register clearly. Slow is essential. Painfully slow, actually. Slower than feels natural. Fight the urge to rush.

Keep your attention internal during the release. Notice how the muscle feels as it lengthens. Where does the tension let go first? What does the sensation of releasing feel like in this specific area? This focused awareness is what creates new neural pathways.

Step 3: Rest and Notice

After the slow release, rest completely for at least 10 to 15 seconds. Let the muscle be totally passive. No effort, no engagement, nothing. Just rest.

This rest period allows your nervous system to integrate what just happened. Your motor cortex processes the new sensory information. The resting length of the muscle resets based on the feedback it just received. This integration is what makes the change stick.

During the rest, notice what you feel. Does the muscle feel different than before? Longer, softer, warmer? Do you notice a difference between the side you worked and the side you haven't? This noticing reinforces the learning.

Common Mistakes

- **Going too fast:** Slow down, the release alone should take five to eight seconds minimum.
- **Not contracting first:** Some people try to just relax the tight muscle without contracting it first. This doesn't engage the motor cortex. You have to voluntarily activate the muscle before you can voluntarily release it.
- **Contracting too hard:** You recruit too many muscles and can't track what's happening. Use gentle, focused contraction.
- **Not paying attention during release:** Your mind wanders, you think about your to-do list, and you rush through the movement mechanically. Attention is what creates the neural change. Stay present.
- **Skipping the rest:** You immediately move to the next repetition without pausing. Your nervous system needs time to process and integrate. Rest fully between repetitions.
- **Doing too many repetitions:** Three to five repetitions per muscle group is sufficient. More doesn't help. Your motor cortex learns from quality, not quantity.

The protocol works when you do it slowly, deliberately, with full attention to sensation. Treat each repetition like it matters, because it does. Your brain is learning. Give it clear information to learn from.

Exercise #1: The Arch and Flatten

This is the foundational pandiculation exercise for your lower back. It addresses the green light reflex, that chronic pattern of overarching and tension in your lumbar spine that develops from years of pushing forward, striving, never resting. If you have chronic lower back pain or feel like your lower back is constantly engaged, this exercise directly retrains the muscles causing that pattern.

Setup

1. Lie in constructive rest position: on your back, knees bent, feet flat on the floor hip-width apart, arms at your sides.

2. Make sure your lower back has some natural space between it and the floor. Don't try to flatten it or press it down. Just notice its natural position.

3. Take a few breaths to settle and bring your attention to your lower back.

The Movement

Phase 1: The Arch (Contraction)

1. Slowly and gently press your lower back down toward the floor by contracting your abdominal muscles. Your pelvis will tilt slightly as your lower back flattens.

2. Then reverse the movement: gently arch your lower back away from the floor by contracting your back muscles. Your pelvis tilts in the opposite direction. Your lower back lifts slightly off the floor.

3. This arching is the contraction phase. You're deliberately engaging the muscles that are probably already chronically tight. Hold this gentle arch for three to five seconds. Feel what it's like to voluntarily contract these muscles instead of them contracting automatically.

4. Coordinate with breath: inhale as you arch. Let the breath support the movement naturally.

Phase 2: The Release (Slow Flatten)

5. Now comes the crucial part. Very slowly release the arch and let your lower back return toward the floor. This should take at least five to eight seconds. You're consciously lengthening the back muscles, letting them soften.

6. Keep releasing until your lower back settles into a neutral position, not forced flat but naturally resting.

7. The release happens on the exhale. Let your breath guide the slow softening of your back muscles.

8. Pay close attention to the sensation as your back muscles lengthen. What does that release feel like? Where do you feel it most? Track the entire movement with your awareness.

Phase 3: Rest

9. Rest completely for 10 to 15 seconds. Let your lower back be totally passive. Notice what you feel. Does it feel different than before? Softer, longer, more relaxed?

10. Notice if your back settles more toward the floor now, or if the arch has decreased slightly.

Repetitions

Repeat this sequence three to five times total:

- Gently arching (contract back muscles, inhale)
- Slowly flattening (release back muscles, exhale)
- Resting and noticing

Each repetition gives your motor cortex more information about how to voluntarily release these muscles.

What You're Training

Your lower back muscles, particularly your erector spinae and quadratus lumborum, often stay chronically contracted from the green light reflex. You've been pushing, striving, arching forward for so long that your brain forgot how to let these muscles fully release. This exercise teaches voluntary release.

The arch isn't trying to increase your back flexibility. You're not stretching. You're contracting deliberately so you can then release deliberately. The motor cortex learns from the contrast between contracted and relaxed, and from the slow, conscious transition between the two states.

Common Variations

If you have very tight lower back muscles, your arch might be barely perceptible. That's fine. Even a tiny movement counts as long as you're doing it consciously and releasing slowly.

If you have a very flexible lower back, don't arch as far as you can. Use about 30 percent of your range. This isn't about achievement. It's about sensory-motor learning.

Use this exercise daily, especially if lower back pain or tension is one of your primary holding patterns. It's gentle enough to do even when your back hurts, and it directly addresses the motor pattern creating the pain.

Exercise # 2: The Side Bend

Most people don't hold tension symmetrically. One side of your body carries more than the other. Maybe your right shoulder sits higher. Maybe you lean slightly to the left when

you stand. Maybe one hip feels tighter or more restricted. This asymmetry develops from how you carry bags, how you sit at your desk, old injuries you compensated for, or even which side you slept on during childhood stress. The side bend exercise addresses these lateral holding patterns by pandiculating the muscles along the sides of your torso: your quadratus lumborum and obliques.

Setup

1. Lie in a constructive rest position: on your back, knees bent, feet flat, arms at your sides.
2. Notice if you feel any asymmetry right now. Does one side of your back make more contact with the floor? Does one hip feel higher or tighter?
3. You'll work one side at a time, then compare.

The Movement - Right Side

Phase 1: The Contract (Side Bend)

1. Slowly slide your right hand down toward your right foot, bending your torso to the right. Your right shoulder moves toward your right hip. The right side of your waist shortens.
2. This contracts the muscles on your right side. You're deliberately engaging your right obliques and quadratus lumborum.
   The movement is small, maybe sliding your hand two to four inches. You're not trying to reach as far as possible.
3. Hold this gentle contraction for three to five seconds. Feel what it's like in the muscles along your right side.
4. Your head stays centered on the floor. Don't let it roll to the side.

Phase 2: The Release (Return to Center)

6. Very slowly slide your hand back to the center, taking five to eight seconds for the return. You're consciously releasing and lengthening the muscles on your right side.
7. Pay attention to the sensation of those lateral muscles letting go. What does the release feel like? Where do you feel it most clearly?
8. Let your torso settle back to neutral, not forced but naturally centered.

Phase 3: Rest

9. Rest completely for 10 to 15 seconds. Let your right side be totally passive.

10. Notice what you feel on your right side. Does it feel different from your left? Longer, softer, more relaxed?

Repetitions - Right Side

Repeat the sequence three to five times on your right side:

- Slide right hand toward right foot (contract right side)
- Slowly return to center (release right side)
- Rest and notice

The Movement - Left Side

Now repeat the entire process on your left side:

1. Slide your left hand toward your left foot, contracting the left side muscles. Hold three to five seconds.

2. Slowly return to the center over five to eight seconds, releasing the left side muscles with full attention.

3. Rest for 10 to 15 seconds and notice.

4. Repeat three to five times on the left side.

Left/Right Comparison

After working both sides, lie still in constructive rest for a full minute and compare:

- Does one side feel longer than the other?
- Does one side of your back make more contact with the floor now?
- Which side released more easily during the exercise?
- Which side felt tighter or more resistant?

This comparison gives you valuable information about your asymmetrical holding patterns. The tighter side is where you carry more chronic tension. You might need to work that side more frequently or with more attention.

Addressing Asymmetry

If one side is significantly tighter than the other, you have options:

Work the tight side more: Do five repetitions on the tight side and three on the more relaxed side. This helps balance the asymmetry over time.

Work both sides equally: Some practitioners believe in always working symmetrically to let your nervous system self-correct. Three to five reps each side.

Follow your body's response: If working the tight side makes it more tense or painful, back off. Sometimes the tight side needs gentler, smaller movements.

There's no single right answer. Experiment and see what creates the most release and balance for your body.

Exercise #3: The Twist

Rotational movement gets locked down when trauma happens. Think about what your body does when you're under threat and can't escape: you curl inward, rotate slightly to protect your vital organs, and pull into yourself. This protective twisting becomes a holding pattern. One side of your torso stays slightly rotated forward, the other back. Your spine develops a subtle twist you don't even notice anymore. Your obliques and spinal rotators stay contracted on one side, inhibited on the other. This exercise releases that pattern and reintegrates upper and lower body rotation.

Setup

1. Lie in constructive rest position: on your back, knees bent, feet flat on the floor, hip-width apart.
2. Extend your arms out to the sides at shoulder height, palms facing up. This creates a T-shape with your body.
3. Notice if your spine already has any rotation. Does one shoulder blade press more into the floor than the other?

The Movement - Right Side

Phase 1: The Contract (Twist Right)

1. Keeping your knees together, slowly let both knees drop toward the right side. Don't force them all the way down. Go maybe halfway or less.

2. At the same time, turn your head to look left, opposite to your knees.
3. This creates a twist through your entire spine. Your lower body rotates right, your head rotates left, and your torso spirals between them.
4. You're contracting the rotational muscles on the left side of your body and the right side of your neck.
5. Hold this gentle twist for three to five seconds. Feel the spiral through your spine.
6. Keep both shoulders on the floor. Don't let your left shoulder lift off the ground.

Phase 2: The Release (Return to Center)

7. Very slowly bring your knees back to center, taking five to eight seconds. At the same time, slowly return your head to center.
8. Control the movement. Don't let gravity pull you back. You're consciously releasing the rotational muscles, unwinding the spiral gradually.
9. Pay attention to the sensation of your spine untwisting. What does that release feel like? Can you feel it traveling through different segments of your spine?
10. Notice your obliques, your spinal rotators, and your neck muscles all lengthening as you return to neutral.

Phase 3: Rest

11. Rest completely for 10 to 15 seconds with your knees up, head centered, body neutral.
12. Notice what you feel. Does your spine feel more settled against the floor? Does one side of your torso feel different?

Repetitions - Right Side

Repeat three to five times:

- Knees right, head left (contract rotational muscles)
- Slowly return to center (release with full attention)
- Rest and notice

The Movement - Left Side

Now reverse the direction:

1. Let your knees drop toward the left while your head turns right.
2. Hold the gentle twist for three to five seconds.
3. Slowly return to center over five to eight seconds, unwinding the spiral consciously.
4. Rest for 10 to 15 seconds.
5. Repeat three to five times on this side.

Exercise #4: The Spinal Wave

Your spine moves in segments, not as one rigid unit. Each vertebra should articulate independently, creating fluid wave-like movement from your tailbone to your skull. But chronic tension locks segments together. Parts of your spine move while other parts stay rigid. You end up with overly mobile areas, compensating for areas that won't move at all. The spinal wave teaches each segment to release and move independently, restoring natural articulation through your entire spine.

Setup

1. Lie in constructive rest position: on your back, knees bent, feet flat on the floor hip-width apart, arms at your sides.
2. Take a moment to sense your spine against the floor. Which parts make contact? Which parts lift away? Notice any areas that feel particularly rigid or stuck.
3. This movement starts at your tailbone and travels up through your spine like a wave moving through your entire back body.

The Movement

Phase 1: The Contract (Creating the Wave)

1. Press your tailbone gently into the floor by tilting your pelvis. This is the beginning of the wave.
2. Continue pressing your lower back toward the floor, segment by segment. Your lumbar spine flattens slightly.
3. Keep the wave moving upward. Press your mid-back toward the floor.
4. Continue through your upper back and shoulder blades.

5. Finally, gently lengthen the back of your neck, bringing your chin slightly closer to your chest.

6. The entire movement should take about five seconds as the wave travels from the tailbone to the skull. You're creating a gentle contraction that moves sequentially through your whole spine.

7. At the top, pause for a moment with your whole spine pressed gently toward the floor.

Phase 2: The Release (Reversing the Wave)

8. Now reverse the wave, starting from your head and traveling back down to your tailbone. This is the release phase, and it should take even longer, about eight to 10 seconds.

9. Start by releasing your neck. Let the back of your skull settle more heavily.

10. Release your upper back and shoulder blades, letting them soften toward the floor.

11. Release your mid-back, allowing any tension to drain away.

12. Release your lower back, letting it return to its natural arch.

13. Finally, release your pelvis and tailbone back to neutral.
    As the wave moves down, pay close attention to each segment releasing. Can you feel individual vertebrae letting go? Or do sections of your spine release as a block?

Phase 3: Rest

15. Rest completely for 10 to 15 seconds. Let your entire spine be passive.

16. Notice what you feel. Does your spine make more contact with the floor? Do certain segments feel softer or more mobile?

Repetitions

Repeat this wave three to five times:

- Wave up (contract from tailbone to skull)
- Wave down (release from skull to tailbone)
- Rest and notice

Each repetition should reveal more about where your spine moves freely and where it stays stuck.

Segmental Awareness

Most people discover they can't articulate their spine segment by segment. The wave moves through some areas smoothly and gets stuck in others. Common stuck points:

Mid-thoracic spine (between shoulder blades): This area stays rigid in many people, creating a flat spot in the wave. The movement jumps from lower back to upper back, skipping the middle entirely.

Cervical-thoracic junction (base of neck): Where your neck meets your upper back often locks up from chronic forward head posture. The wave stops here.

Lumbar spine: Some people have too much movement here, their lower back doing all the work while the rest of the spine stays immobile.

The goal isn't to force smooth movement. The goal is to notice where the wave flows and where it doesn't. That awareness is what allows your motor cortex to start releasing the stuck segments.

Creating Flow

As you practice this exercise over days and weeks, the wave becomes smoother. Segments that were locked start participating. The movement becomes more fluid, less mechanical. This happens because your motor cortex is relearning how to control individual spinal segments instead of moving your whole back as one unit.

The wave also integrates your entire back body. Your spine doesn't work in isolation. The muscles along your spine, your ribcage, and your pelvis all coordinate to create spinal movement. This exercise trains that coordination.

Breath Coordination

Once you're comfortable with the movement, add breath:

- Inhale as the wave moves up (contraction phase)
- Exhale as the wave moves down (release phase)

The breath supports the movement and helps deepen the release. Your diaphragm and spine work together. Coordinating them creates more natural, integrated movement.

Chapter 7: Targeted Release; Jaw, Shoulders, Psoas, and Hips

Everything I know about tension and how it stays lodged in specific places boils down to how the body communicates in different body parts. Tight jaws represent what you've swallowed, shoulders what you carried, psoas what you couldn't run from, and so forth.

You likely know yourself well enough now to understand your body's various reactions and why you feel the way you do, because of the pandiculation work from earlier.

This chapter looks a little deeper into four areas and four specific release protocols. You've been working generally with your spine and nervous system; now you're going after the exact muscles that contracted years ago and forgot how to stop.

To get the most out of this chapter, pick the area that screams loudest and start there. Work it daily until you can feel noticeable shifts, then maintain it while you address the next problem spot. Trying to release everything at once just dilutes your attention. One target at a time produces better results than scattering your focus across four areas, hoping something sticks.

The exercises here use everything you've learned so far, but apply it with precision to muscles that need concentrated work. Some respond quickly. Others take persistent daily practice before they budge. Stop waiting for your body to cooperate on your timeline. It'll release when the nervous system decides it's safe enough, not when you decide you're ready to be done with this.

The Jaw: Releasing the Clench

The jaw is where we hold back our words. It's the gate we slam shut when we want to scream but stay silent, when we bite our tongue instead of speaking our truth. The temporomandibular joint, where the mandible meets the skull, is essentially a pressure valve for everything we cannot or will not say. Over time, this suppressed expression calcifies into chronic tension, turning the jaw into a fortress of vigilance.

Why We Clench

Jaw tension is rarely about the jaw itself. It contains the "no" we couldn't say, the anger we swallowed, the tears we held back in a meeting. It's the physical manifestation of biting down on our authentic expression. When we live in states of chronic stress or hypervigilance, the jaw becomes the body's first responder. It tightens, preparing us for battle or silence, whichever survival demands.

The clenching often happens unconsciously. We wake with headaches, noticing our molars ache from grinding through the night. We realize mid-afternoon that our jaws have been locked for hours. This chronic contraction doesn't just affect the jaw; it sends tension radiating up into the temples, down through the neck, and across the shoulders. The body is a connected system, and the jaw sits at a critical junction.

The Muscles of Tension

Jaw tension is primarily governed by the masseter and the temporalis muscles. The masseter runs from your cheekbone to your lower jaw (place your fingers on your cheeks and clench your teeth, and you'll feel it bulge). It's one of the strongest muscles in the body relative to its size, capable of generating immense force, so when chronically tight, it creates that characteristic square-jawed appearance and radiating facial pain.

The temporalis is the fan-shaped muscle that spreads across your temple. To feel it working, place your fingers on your temples and open and close your mouth. When this muscle holds chronic tension, it contributes to tension headaches and that feeling of pressure around the head.

Exercises for Release

Exercise #1: External Masseter Release

1. Place your fingers on your cheeks where you feel the masseter muscle.
2. Apply gentle but firm pressure and make small circles.
3. Work from the bottom near your jawline up toward your cheekbones.
4. Breathe deeply.
5. When you find a particularly tender spot, pause there and breathe into it.
6. Don't force; let the muscle soften gradually under your sustained attention.

Exercise #2: Temporalis Release

1. Use your fingertips to press into your temples with moderate pressure.

2. Make slow circles, moving gradually across the entire temple area.

Many people carry surprising tension here without realizing it.

Exercise #3: Lion's Breath

This breathing exercise borrows from yoga but serves a different purpose here; you're using the exaggerated opening to break the jaw's holding pattern.

1. Inhale deeply through your nose.
2. Exhale forcefully through your mouth while simultaneously opening your jaw wide, sticking your tongue out and down toward your chin, and widening your eyes.
3. Make an audible "haaa" sound. It looks ridiculous, which is part of its power because it forces you to release control and let go.

Exercise #4: Intra-Oral Release

The most profound jaw release happens inside the mouth.

1. Wash your hands thoroughly.
2. Using your index finger, reach inside your mouth and locate your masseter muscle from the inside; it's the thick muscle along the inside of your cheek.
3. Press gently against it and hold. This internal access point allows you to release layers of tension that external massage cannot reach.
4. Move slowly along the muscle, pausing at points of tenderness.
5. Breathe.

This can be emotionally activating, and many people experience unexpected feelings or memories during intra-oral work. That's the suppressed expression beginning to surface. Let it.

Connecting to Neck and Shoulders

The jaw cannot release in isolation. As you work with jaw tension, bring awareness to your neck and specifically notice how releasing your jaw allows your neck to lengthen. Let your shoulders drop away from your ears. Often, as the jaw releases, you'll feel tension melting down through the neck and across the shoulder girdle like a waterfall.

Try this: Release your jaw, then gently turn your head side to side. Notice how much more range of motion you have. The freedom in your jaw creates freedom throughout the entire

upper body. This is the body's interconnected wisdom. Release one gate, and others begin to open.

Neck and Shoulders

We carry the world on our shoulders, not metaphorically, but literally. The neck and shoulder region is a repository for accumulated stress, the part of our bodies where we protect ourselves from a world that feels perpetually threatening. This armor is the gradual accumulation of thousands of small braces, the residue of countless moments when we pulled our shoulders up toward our ears and never fully let them down.

The Red Light Reflex

Thomas Hanna, founder of Hanna Somatics, coined the term "the red light reflex," which is a full-body startle response that gets frozen in our musculature. When we are in fear, shock, or any threat, our bodies reflexively contract forward by having the shoulders lift and round, jutting the head forward, and collapsing the chest. These postures are our body's protective mechanisms that are deeply ingrained in our nervous system.

In times of acute stress, this reflex is adaptive. What's most problematic is when the reflex never fully releases. We experience a near-accident while driving, and our shoulders stay elevated. We receive difficult news, and our neck stays rigid. We work at a computer for years with our heads craned forward, and the pattern becomes our new baseline. The temporary protection becomes permanent imprisonment.

The red light reflex creates a distinctive posture: shoulders rounded forward, head jutting ahead of the body's center line, upper back hunched. This position compresses the chest, restricts breathing, and sends constant danger signals to the brain. The body is literally frozen in a state of perpetual bracing for impact.

The Muscles That Hold Us Hostage

Three muscle groups primarily maintain this pattern of tension. Those include:

- **The trapezius** is the large, diamond-shaped muscle that spans from the base of your skull down to the mid-back and out across your shoulders. When chronically contracted, especially the upper fibers, it pulls the shoulders up toward the ears and creates that characteristic "carrying the weight of the world" sensation.
- **The levator scapulae** are the muscles that run from the upper inner corner of your shoulder blade up to the side of your neck. When tight, they create that specific pain point where the neck meets the shoulder, the spot everyone asks their partner

to massage. These muscles are the primary culprits in neck stiffness and limited rotation.

- **The suboccipital muscles** are a group of small, deep muscles at the base of the skull. Despite their size, they have an enormous influence on neck tension and headaches. They work constantly to hold your head up, and when chronically tight, they create a vice-like grip at the skull's base.

Exercises for Release

Here are three things I know about release: First, you cannot force a muscle to let go; you can only create conditions where it feels safe enough to soften. Second, the body responds to attention more than aggression; curiosity dissolves tension better than willpower ever could. Third, release is not a single event but a conversation between you and your nervous system, and like any worthwhile conversation, it requires patience, presence, and a willingness to listen to what emerges. With these principles in mind, approach the following exercises not as tasks to complete but as invitations to discover where you've been holding on.

Exercise # 1: Trapezius Release with Awareness

1. Stand or sit comfortably.
2. Bring your attention to your shoulders; notice where they are in space.
3. Now, exaggerate the tension: deliberately pull your shoulders up toward your ears as high as they'll go.
4. Hold for three seconds, really intensifying the contraction.
5. Repeat this three times, but on the last repetition, release in slow motion, taking ten full seconds to let your shoulders descend.

This slow release teaches your nervous system the pathway back to ease.

Exercise #2: Levator Scapulae Release

1. Sit tall.
2. Gently contract the right levator scapulae by lifting your right shoulder toward your ear while tilting your head slightly right. Hold for 3–5 seconds.

3. Slowly release over 8–10 seconds, letting your shoulder drop while your head returns to center.
4. Rest and notice. Repeat 3 times.
5. Switch sides.

Exercise #3: Suboccipital Release

1. Lie on your back. Interlace your fingers and place them at the base of your skull, where your skull meets your neck.
2. Allow the weight of your head to rest in your hands.
3. Very gently, use your fingertips to apply pressure to those suboccipital muscles while simultaneously making tiny "yes" nods with your head; barely perceptible movements.

This combination of pressure and micro-movement releases deep tension.

Exercise # 4: Slow Head Movements with Awareness

Speed is the enemy of release. Rapid movements allow us to bypass sensation and maintain our habitual patterns. Slow down radically.

1. Turn your head to the right as slowly as you possibly can; take a full 30 seconds to complete the rotation. Notice every micro-sensation: where does resistance begin? Where does the movement feel smooth? Where do you hold your breath?
2. Return to center with equal slowness, then repeat to the left.

This glacial pace forces your nervous system to pay attention and allows chronic holding patterns to surface and dissolve.

Exercise #5: Shoulder Shrugs with Pandiculation

Pandiculation is the process animals use naturally, that full-body stretch and yawn you see in cats and dogs. For shoulders, it involves conscious contraction followed by slow, controlled release.

1. Inhale and deliberately pull your shoulders up toward your ears, engaging the muscles fully.

2. Hold at the top for a moment.
3. Then, and this is crucial, release in extreme slow motion over 8-10 seconds, feeling every millimeter of the descent.
4. At the bottom, let your shoulders settle even lower than their starting position. The slow release is where the reprogramming happens. Your nervous system learns that it's safe to let go.
5. Repeat five times, breathing fully throughout.

The Psoas; Where Fight-or-Flight Lives

Your psoas is a deep hip flexor muscle that runs from your lower spine through your pelvis to the top of your thigh bone. It's the only muscle that connects your spine to your legs, which makes it central to nearly every movement you make. When you walk, run, sit, or stand, your psoas is involved. But more importantly for trauma work, your psoas is the muscle that contracts when your body prepares to run or curl into a protective position.

Some people call it the "muscle of the soul," which sounds overly poetic until you realize how much emotional holding happens here. When you're afraid and can't escape, your psoas contracts to pull you into a fetal position. When you're constantly stressed, your psoas stays partially engaged, ready to run even though you're sitting at your desk. When you experience trauma and freeze instead of fleeing, that impulse to run gets trapped in your psoas as chronic contraction. Years later, your psoas is still tight, still holding onto the flight response you never got to complete.

A chronically tight psoas pulls your lower back into an exaggerated arch, compresses your hip joint, restricts your breathing because it attaches to your diaphragm, and creates that constant feeling of bracing in your core. Releasing your psoas can feel like finally exhaling after holding your breath for years.

Constructive Rest for Passive Release

The simplest way to begin releasing your psoas is to lie in the constructive rest position and do absolutely nothing. This isn't laziness. It's strategic positioning that allows gravity to do the work.

Exercise #1: Psoas Passive Release

1. Lie in constructive rest: on your back, knees bent, feet flat on the floor, hip-width apart.

2. Make sure your feet are positioned close enough to your hips that your knees stay up without effort. If your legs have to work to stay up, bring your feet closer.
3. Let your knees rest against each other or keep them hip-width apart, whichever feels more stable and requires less muscular effort.
4. Rest your arms at your sides or on your belly.
5. Close your eyes and just lie here for 10 to 20 minutes. No movement, no active release, just rest.
6. Your psoas will gradually release on its own because it doesn't have to work in this position. Your legs are supported. Your spine is supported. Gravity pulls everything toward the floor.
7. Notice your breath. As your psoas releases, your breathing often deepens because your diaphragm has more room to descend.
8. After 10 to 20 minutes, roll to your side and rest there for a minute before slowly sitting up.

This passive release works best as a daily practice, especially before bed. The position signals your nervous system to downregulate, which allows your psoas to soften.

Active Psoas Pandiculation

For more direct retraining of your psoas, use active pandiculation that contracts and releases the muscle deliberately.

Exercise #2: Psoas Pandiculation

Setup

1. Lie on your back with both legs extended flat on the floor.
2. You'll work one leg at a time.

Phase 1: The Contract

3. Slowly slide your right heel along the floor toward your hip, bending your knee. This contracts your right psoas.
4. Continue sliding until your foot is flat on the floor with your knee bent, similar to the constructive rest position.

5. Hold this position for three to five seconds. Feel the contraction in the front of your right hip and deep in your pelvis.

Phase 2: The Release

6. Very slowly slide your foot back down, extending your leg again. This should take eight to 10 seconds.
7. Control the movement the entire way. Don't let your leg just fall. You're consciously releasing your psoas, lengthening it gradually.
8. Pay close attention to the sensation in the front of your hip and deep in your core as the muscle lengthens.

Phase 3: Rest

9. Rest with both legs extended for 15 to 20 seconds.
10. Notice what you feel in your right leg and hip compared to your left. Does the right leg feel longer? Does it rest more heavily on the floor?

Repetitions

11. Repeat three to five times on your right leg.
12. Then switch to your left leg and do three to five repetitions.
13. After working both sides, rest with both legs extended for a full minute and compare the sensations.

The Supine Release Position

This variation provides more support and allows deeper release for people with very tight psoas muscles.

Exercise #3: Supported Psoas Release

Note: This exercise uses passive stretching rather than pandiculation. When the psoas is severely contracted, it can be too guarded or tender to respond to the active muscle engagement that pandiculation requires; the nervous system simply won't allow it. In these cases, gentle sustained stretch under gravity can create just enough slack in the tissue for pandiculation to become possible in subsequent sessions.

1. Lie on your back at the edge of your bed or a couch so your hips are near the edge.
2. Bring both knees toward your chest and hold them there with your hands.
3. Keep your left knee pulled to your chest while slowly lowering your right leg off the edge of the bed. Let it hang down toward the floor.
4. The weight of your hanging leg gently stretches your right psoas while your left knee stays pulled up, protecting your lower back.
5. Breathe deeply and hold this position for 60 to 90 seconds. You should feel a stretch in the front of your right hip and deep in your pelvis.
6. This is passive stretching, not pandiculation, but it's effective for extremely tight psoas muscles that need longer, gentler release.
7. Slowly bring your right leg back up, then switch sides. The left leg hangs while the right knee stays pulled to the chest.
8. Hold for 60 to 90 seconds on this side.

Connecting Psoas Release to Breath

Your psoas attaches to your diaphragm through connective tissue. When your psoas is chronically tight, it restricts your diaphragm's ability to descend fully on the inhale. This is why people with tight psoas often breathe shallowly into their chest instead of deeply into their belly.

As you practice psoas release, pay attention to your breath. Notice if your breathing deepens and moves lower into your abdomen. This is a sign your psoas is releasing and giving your diaphragm more room to function.

You can also use breath to support psoas release:

- Inhale as you contract (slide your foot up in the pandiculation)
- Exhale as you release (slide your foot down)
- The exhale helps the psoas lengthen and softens your entire core

What to Notice After

After psoas work, notice:

- Does your lower back feel flatter against the floor?
- Do your legs feel longer or heavier?

- Has your breathing changed or deepened?
- Does your belly feel softer or less braced?
- When you stand, does your pelvis feel more neutral instead of tilted forward?

Psoas release is cumulative. Each session creates small changes that build over weeks. If you've held tension here for years, give yourself months of consistent practice. The psoas holds deep survival patterns. It releases slowly because letting go of that protective contraction feels vulnerable at a primal level. Be patient. Your body will release when it feels safe enough.

The Hips

Your hips are where you store what you can't process anywhere else. When your upper body is too defended, when your jaw won't release, and your shoulders won't drop, the tension travels down and gets locked in your hips. Your hip flexors, rotators, and glutes become a holding tank for everything you've been carrying. This is why people cry in hip openers during yoga. The emotion isn't in the muscle tissue itself, but the chronic contraction keeps the feelings contained. When the holding pattern releases, what you've been stuffing down there can surface.

The hips are also where your body stores stability. When the world feels chaotic and unpredictable, when you can't control what's happening around you, your hips lock down to create some sense of structure and grounding. Tight hips give you the illusion of being held together when everything else is falling apart. But that rigidity comes at a cost. You lose mobility, your gait becomes restricted, your lower back compensates, and you feel disconnected from your pelvis and legs.

Gentle Hip Circles

This exploratory movement wakes up all the muscles around your hip joint and teaches them they can move in multiple directions.

Exercise #1: Hip Circles

1. Lie on your back with your left leg extended flat on the floor.
2. Bend your right knee and lift it so your thigh is perpendicular to the floor, knee bent at 90 degrees. Your shin is parallel to the floor.
3. Slowly circle your right knee in small circles. Your thigh bone is rotating in your hip socket.

4. Make the circles tiny at first, maybe three to four inches in diameter. Notice which parts of the circle feel smooth and which feel sticky or restricted.
5. Circle five times clockwise, then five times counterclockwise.
6. Gradually make the circles larger if your hip allows it. Don't force a range you don't have.
7. After 10 circles total, lower your right leg and rest with both legs extended for 30 seconds.
8. Notice the difference between your right and left hips.
9. Repeat on the left side: left knee up, circle five times each direction.
10. After working both sides, rest and compare.

These circles aren't stretching. They're exploring the available range of motion and waking up the rotator muscles around your hip. Over time, the sticky spots in the circle smooth out as your motor cortex remembers how to control rotation.

Supine Figure-Four with Pandiculation

This position targets your hip rotators and glutes while keeping you safe on the ground.

Exercise #2: Figure-Four Release

Setup

1. Lie on your back with both knees bent, feet flat on the floor.
2. Cross your right ankle over your left thigh just above the knee, creating a figure-four shape with your legs.
3. Flex your right foot to protect your knee.

Phase 1: The Contract

4. Gently press your right knee away from you while simultaneously pulling your left thigh toward your chest with your hands. This creates a stretch in your right hip rotators and glutes.
5. Hold this position for three to five seconds. You're contracting the muscles that pull your knee toward your body while stretching the external rotators.

Phase 2: The Release

6. Very slowly release the pressure, taking eight to 10 seconds to let your right knee move back toward your chest and your left thigh move away.
7. Control the entire movement. Notice the sensation in your right hip as the rotators gradually release.

Phase 3: Rest

8. Uncross your right ankle and place both feet flat on the floor again.
9. Rest for 15 to 20 seconds and notice what you feel in your right hip compared to your left.

Repetitions

10. Repeat three to five times on the right side.
11. Then switch: left ankle crosses over right thigh, repeat three to five times.

Pigeon Pose Alternative

Traditional pigeon pose is too intense for many people and can trigger knee pain or hip strain. This gentler version gives you the same hip opening with more control and awareness.

Exercise #3: Supported Pigeon

1. Start on your hands and knees.
2. Bring your right knee forward and place it behind your right wrist. Your right shin angles across the mat.
3. Extend your left leg straight behind you.
4. Lower yourself down onto your forearms or all the way to the floor, whatever depth allows you to breathe and stay present.
5. Instead of holding this as a stretch, use it for sensory awareness. Notice where you feel sensation in your right hip. Is it sharp or dull? Surface or deep? Does it change as you breathe?
6. Stay for 60 to 90 seconds, breathing and noticing rather than pushing deeper.

7. To come out, press into your hands and bring your left knee forward to meet your right.

8. Rest in child's pose (sitting back on your heels, torso draped forward) for 30 seconds.

9. Switch sides: left knee forward, right leg extended back.

The goal in this version is awareness, not achievement. You're not trying to fold deeper or get your chest to the floor. You're tracking sensation and teaching your hip how much release it can tolerate right now.

What to Notice After Hip Work

After releasing your hips, notice:

- Do your legs feel longer or more connected to your pelvis?
- Does your lower back feel different?
- Has your stride changed when you walk?
- Do you feel more grounded through your legs?
- Did any emotions surface during the work?

Hip release can feel vulnerable because you're opening the container you've used to hold everything in. If emotions come up, let them. Your hips are finally releasing what they've been storing. That's the whole point.

Integration

Your body doesn't work in isolated parts. Tight shoulders affect your neck, which affects your jaw, which affects your breathing, which affects your psoas, which affects your hips. Everything connects. When you release one area but ignore the others, the tension just migrates. Your shoulders drop, but your jaw picks up the slack. Your hips open, but your lower back compensates. Real release requires addressing the whole system, not just the parts that hurt the loudest.

This is called the kinetic chain. Movement and tension travel through your body in predictable patterns. When one link in the chain locks up, the links above and below it have to work harder. Your tight psoas pulls on your lower back, which makes your mid-back rigid, which restricts your shoulder movement, which creates neck tension, which tightens your jaw. Or it works in reverse: chronic jaw clenching travels down through your neck into your shoulders, creating a cascade of compensation all the way to your hips.

You've been working on individual regions in this chapter. Now you need to connect them. This whole-body flow moves through all the major holding areas in sequence, teaching your nervous system that release can happen everywhere at once, not just in isolated pockets.

Exercise #1: Whole-Body Integration Flow

This takes about 10 minutes and connects the jaw, shoulders, spine, psoas, and hips in one continuous practice.

1. Jaw Release (1 minute)

Lie in constructive rest. Open your mouth wide, hold for three seconds, then slowly close it while paying attention. Rest. Repeat three times.

2. Shoulder Pandiculation (1 minute)

From the same position, lift your right shoulder toward your ear, hold for three seconds, and slowly lower over eight seconds. Rest. Repeat three times, then switch to the left shoulder.

3. Spinal Wave (2 minutes)

Stay in constructive rest. Create the wave from tailbone to skull (five seconds up), then reverse it, skull to tailbone (eight seconds down). Rest. Repeat three times.

4. The Twist (2 minutes)

Knees together, drop to the right while the head turns left. Hold three seconds, slowly return to the center over eight seconds. Rest. Repeat three times, then switch directions.

5. Psoas Pandiculation (2 minutes)

Extend both legs flat. Slide right heel up toward hip (contract psoas), hold three seconds, slowly slide back down (release) over 10 seconds. Rest. Repeat three times each leg.

6. Hip Circles (2 minutes)

Right knee up, circle five times clockwise and five counterclockwise. Lower, rest, notice. Repeat with the left leg.

Moving as an Integrated System

As you move through this sequence, notice how releasing one area affects the others. When your jaw softens, do your shoulders drop slightly? When your psoas releases, does your lower back settle more toward the floor? When your hips open, does your breathing deepen?

These connections aren't coincidental. Your fascial system wraps everything in continuous sheets of connective tissue. Tension in one area pulls on the fascia, which transmits that tension to distant areas. Release in one area allows release elsewhere because the whole system is interconnected.

The integration flow teaches your nervous system to coordinate release across multiple regions simultaneously. Instead of tightening your jaw while releasing your shoulders, or bracing your hips while your spine softens, your whole body learns to let go together.

When to Use This Flow

Use the whole-body integration flow at least twice a week, even as you continue working on specific problem areas daily. It prevents compensation patterns from developing and reminds your system how to function as one coordinated whole rather than fragmented parts fighting each other.

After several weeks of targeted work on individual regions plus regular integration practice, you'll notice the releases become more complete and lasting. Your body stops playing whack-a-mole with tension, moving it from place to place. Instead, your overall holding decreases because the system is releasing together.

Chapter 8: When You Need More Than Movement

Movement is the cheapest form of medicine there is. It's free, accessible, doesn't require a prescription or insurance approval, and your body already knows how to do it. The exercises in this book work. They retrain your motor cortex, discharge stored activation, and release chronic holding patterns that have been locked in your tissues for years. For many people, somatic movement is enough. They practice consistently, their tension decreases, their pain resolves, and their nervous system regulates. They get their bodies back.

Movement alone, however, won't be enough because trauma affects multiple systems simultaneously, and sometimes those other systems need direct intervention too. This is hardly an indication that the work you've been doing was ineffective; it means you need more tools. Movement addresses the muscular and motor control aspects of trauma. But trauma also dysregulates your autonomic nervous system, disrupts your vagal tone, affects your gut-brain connection, and creates inflammatory responses. These systems need their own interventions, and this chapter will point you toward them.

I'm not going to teach you vagus nerve exercises or breathwork protocols or polyvagal theory here. That's what the companion book Vagus Nerve Reset is for. But I will tell you when to recognize that you've hit the limits of what movement can do on its own, what those other interventions look like, and how to know if you need professional support alongside this work. Because healing isn't one-size-fits-all, and admitting you need more help isn't failure. It's an accurate self-assessment.

The Autonomic Nervous System Basics

Your autonomic nervous system runs in the background of everything you do. You don't consciously control it. It manages your heart rate, digestion, breathing, temperature regulation, and all the automatic processes that keep you alive. This system has two branches that work like a gas pedal and brake pedal, and understanding them explains why some days, you can do somatic work easily, and other days you can't even start.

Sympathetic: The Gas Pedal

Your sympathetic nervous system activates you. It's responsible for the fight-or-flight response. When this branch kicks in, your heart rate increases, your breathing gets faster and shallower, blood flows away from your digestive system to your muscles, your pupils

dilate, and you sweat. Your body is preparing for action, for survival, for dealing with a threat.

This activation is supposed to be temporary. See danger, respond to danger, danger passes, activation decreases. But when you live with chronic stress or unresolved trauma, your sympathetic nervous system can get stuck in the on position. You walk around in a constant state of low-level activation. Your body treats a work deadline the same way it treats a physical threat. Everything becomes urgent. Everything requires mobilization.

People stuck in sympathetic dominance feel anxious, restless, can't sit still, have racing thoughts, startle easily, and struggle to sleep. Their bodies are revved up constantly, with nowhere to go.

Parasympathetic: The Brake Pedal

Your parasympathetic nervous system calms you down. It's responsible for rest, digestion, repair, and recovery. When this branch is active, your heart rate slows, your breathing deepens, blood flow returns to your digestive system, and your muscles relax. Your body shifts into healing mode.

The parasympathetic system has two parts. The ventral vagal branch creates safe social engagement and calm presence. This is the state where healing happens, where you can connect with others, where you feel grounded and at ease. The dorsal vagal branch creates shutdown and collapse. This is the freeze response, immobilization, the feeling of being checked out or numb.

People stuck in dorsal vagal shutdown feel disconnected, numb, exhausted, and can't motivate themselves to do anything. They might sleep too much or dissociate frequently. Their bodies have given up trying to activate and instead collapsed into immobilization.

Signs You're Too Activated for Somatic Practice

When your sympathetic nervous system is running too high:

- You can't stay still long enough to lie down and focus.
- Your thoughts race, and you can't track the exercise instructions.
- The slow pace of somatic work feels unbearable; you want to move faster.
- You feel agitated or irritable when trying to do gentle movements.
- Your heart races, or your breathing stays rapid even when lying down.
- Any sensation feels too intense and triggers panic.

If you notice these signs, you need to downregulate before attempting somatic work. Take a walk, do vigorous shaking, push against a wall, engage in any activity that discharges some of that activation. Then, once you're calmer, try the somatic exercises.

Signs You're Too Shut Down for Somatic Practice

When you've dropped into dorsal vagal freeze:

- You can't feel your body at all; everything is numb.
- You dissociate when you try to focus on physical sensation.
- You feel completely disconnected, like you're watching yourself from outside.
- Your energy is so low that you can't engage actively with the movements.
- You fall asleep immediately when you lie down.
- The exercises feel impossible because you can't access enough activation to do them.

If you're in shutdown, you need gentle activation first. You can splash cold water on your face, do some light movement like marching in place, hum or make sounds, and get your system to wake up slightly. Then attempt the somatic work from a more regulated state.

The Goal Is the Middle Zone

Somatic work happens in the ventral vagal zone, where you're calm, present, and engaged. Not too activated, not too shut down. Some days you're naturally in this zone and practice goes smoothly. On other days, you need to regulate yourself into this zone before you can practice effectively.

Learning to recognize your state and adjust accordingly is part of the work. You're not failing when you can't practice because you're too dysregulated. You're accurately assessing your capacity and making the smart choice to regulate first. The exercises in the next section will help you shift your state when movement alone isn't enough.

Quick Regulation Techniques

Look, sometimes you lie down to practice, and your body laughs at you. Your nervous system is either sprinting laps or completely flatlined, and the idea of doing slow, gentle pandiculation feels about as realistic as asking a hurricane to please calm down. You need your state to shift before movement work can even begin.

These aren't the full vagal nerve protocols or complex breathing patterns. Those live in the companion book. These are the fast, dead-simple things you can do in five minutes to get yourself regulated enough that somatic practice becomes possible. Think of them as the on-ramp to the actual work.

Exercise #1: Orienting to the Room

Your nervous system gets stuck in dysregulation partly because you've lost connection to where and when you are. You're still back there in the threat, or you're spinning about the future, but you're not here. Orienting brings you back.

1. Sit or stand wherever you are. Slowly look around the room without moving your head at first. Just let your eyes wander.
2. Now turn your head. Look behind you. Actually see what's there instead of just glancing.
3. Look up at the ceiling. Notice where the walls meet, any cracks, or texture.
4. Look down at the floor. What color is it? What's the texture?
5. Find five things you can see and name them, silently or out loud. Blue chair. Wooden table. Green plant. White wall. Black lamp.
6. What can you hear right now? Name one sound.
7. What can you physically feel? Your feet on the ground, your back against something, the air temperature.

That's it. Stupid simple. But it works because you're activating your senses and telling your brain: we're here, in this room, right now. Not back there. Here.

Exercise #2: Extended Exhale Breathing

Your exhale is wired directly to your calming system. Making it longer than your inhale signals to your nervous system that it's time to slow down. No complicated counts, no holding your breath until you're dizzy.

1. Sit with your feet on the floor.
2. Breathe in through your nose for four counts.
3. Breathe out through your mouth for six to eight counts. The exhale just needs to be longer. Don't obsess over exact numbers.
4. Pause naturally at the bottom before your next inhale. Don't force it.
5. Do this five to 10 times.

Your heart rate should slow. Your shoulders should drop a little. If this makes you feel worse or lightheaded, stop immediately. It works for most people, but not everyone. Use something else if this isn't your thing.

Self-Touch for Co-Regulation

Touch releases oxytocin and tells your body someone's here, you're safe. Turns out you can give yourself this signal.

Exercise #3: Hand on Heart

Place your right hand over your heart, left hand on top. Feel the warmth. Feel your heartbeat if you can find it. Take five slow breaths with your hands there. Add gentle pressure if that feels good.

This tricks your nervous system into thinking someone safe is touching you. Your body responds to your own touch the same way it responds to comfort from someone else.

Exercise #4: Self-Hug

Cross your arms over your chest, each hand on the opposite shoulder. Give yourself a gentle squeeze like you're hugging yourself. Hold it for 30 to 60 seconds while breathing slowly. You can stroke down your arms if that feels soothing.

Feels ridiculous the first time you do it. Works anyway.

Before You Practice

Check your state before you lie down for somatic work. Too wound up? Orient to the room or do extended exhales. Too shut down? Skip the exhales and use self-touch to bring yourself back into your body. Too numb? Do some light movement first, then try these.

Give yourself five minutes to shift your state. Then try the somatic exercises. They'll actually work instead of just frustrating you, because you're starting from a place where learning is possible instead of a place where your nervous system is screaming or checked out entirely.

When Somatic Work Feels "Too Much"

There's a moment some of you will hit where the somatic work stops being helpful and starts feeling dangerous. You're lying there doing a gentle psoas release, and suddenly

you can't breathe. Or you're tremoring and you feel like you're going to fly apart. Or you start a shoulder pandiculation, and you're not in your body anymore, you're watching yourself from the ceiling. This is your nervous system telling you it's overwhelmed, and you need to listen.

This doesn't mean you're doing it wrong. It means you found an edge your system can't handle right now. The trauma stored in that area is bigger than your current capacity to process it. That's not failure. That's information.

What Overwhelm Looks Like

Panic: Your heart races, you can't catch your breath, you feel like you need to run or scream or get out of your body right now. The gentle exercise triggered a survival response, and now you're in full threat mode even though you're lying safely on your living room floor.

Dissociation: You feel far away from your body, like you're floating above yourself or watching through a foggy window. The room might look different, your vision gets blurry or tunneled, and sounds feel distant. You've left your body because being in it felt too dangerous.

Flooding: Emotion crashes over you in waves that don't stop. You're sobbing or shaking, and it keeps intensifying instead of peaking and releasing. You feel like you're drowning in sensation and emotion with no way to regulate it.

All three of these mean stop immediately. Not in a minute, not after you finish the exercise. Now.

How to Back Off and Ground

The moment you recognize overwhelm, stop the movement. Open your eyes if they're closed. Sit up if you're lying down. Physical position change helps interrupt the spiral.

Use the orienting technique from the previous section. Look around the room. Name five things you can see. This brings you back to the present time and place instead of being stuck in the activation or memory.

Press your feet into the floor or press your hands into a wall. Hard. Physical pressure gives your nervous system concrete sensory information that grounds you in your body.

Splash cold water on your face. The temperature change activates your dive reflex and can interrupt panic or dissociation quickly.

Call someone safe if you have that person. Hearing a familiar voice or having someone talk you through grounding can help when you can't do it alone.

The Pendulation Concept

Peter Levine, who developed Somatic Experiencing, talks about pendulation: the natural rhythm of moving between activation and settling, between touching the difficult material and returning to safety. Healthy nervous system processing happens in this oscillation, not in sustained intensity.

When you do somatic work, you should pendulate. Touch the edge of sensation or emotion, feel it briefly, then back off and ground. Go back in, feel a little more, back off again. This gradual approach allows your system to process without flooding.

If you're staying in the intense sensation for minutes at a time without breaks, you're not pendulating. You're flooding yourself. That retraumatizes instead of heals.

Build in intentional pauses. Do two minutes of release work, then two minutes of grounding. Back and forth. This teaches your nervous system that it can touch the hard stuff and survive; that activation doesn't mean permanent overwhelm.

What This Means Going Forward

If you get overwhelmed during an exercise, that exercise is too much for you right now. Don't try to power through it tomorrow. Either work with a somatic therapist who can help you titrate it properly, or put that exercise aside for a few weeks and work on other areas.

Your capacity will increase over time. What feels overwhelming today might be manageable in three months after you've built more regulation skills and your window of tolerance has expanded. But you can't force that expansion by flooding yourself repeatedly. You build capacity through successful experiences of touching the edge and backing off, not through drowning in it over and over.

Somatic work should challenge you gently, should feel vulnerable sometimes, emotional occasionally, intense in moments, but it should never feel dangerous or uncontrollable. If it does, you need more support than this book alone can provide.

Going Deeper with Vagal Regulation: The Companion Book

This book teaches you how to release what's locked in your muscles and retrain the motor patterns keeping you stuck. That's real work. It matters. For a lot of you, it's going to be exactly what you need. But some of you are going to do everything in this book,

release years of holding, get your psoas to finally soften, drop your shoulders away from your ears, and still wake up every morning with your heart racing. Still feel like you're braced for impact even though your body is physically more relaxed than it's been in years.

The companion book, Vagus Nerve Reset, is where all the vagal nerve stuff lives. I didn't include it here because this book needed to stay focused on movement and motor retraining. But that book covers everything else: polyvagal theory explained like you're talking to a friend who actually wants to understand it, not like you're reading a neuroscience textbook. Specific techniques that stimulate your vagus nerve directly: cold exposure, humming practices, the physiological sigh that can stop a panic attack in 90 seconds, and breathing patterns like 4-7-8 that activate your parasympathetic system on demand.

It goes into the gut-brain connection and why your digestive issues might be tangled up with your anxiety. It explains the anti-inflammatory pathway and why chronic stress makes your whole body hurt. It shows you how to track heart rate variability if you want actual data on whether your vagal tone is improving. And it gives you a full 28-day program to systematically rebuild your nervous system's capacity to regulate.

Why You Might Need Both

Somatic work clears out the backlog. It releases the muscle patterns you've been holding for years. Vagal work prevents new buildup and gives you moment-to-moment regulation skills.

You can release every muscle in your body, but if your vagus nerve can't signal safety to your brain, you'll just recreate the tension. Your nervous system will keep treating normal life like a threat because it doesn't have the capacity to downregulate. On the flip side, you can do all the vagal exercises in the world, but if your muscles are sending constant threat signals to your brain because they're chronically contracted, you're fighting an uphill battle.

They work together to release the physical holding, so your baseline tension drops, and they build vagal capacity so you can handle stress without immediately locking back up. You're not just managing symptoms anymore. You're actually changing how your system operates.

If you've been practicing the exercises in this book for a month and your physical tension is better, but you still feel anxious all the time, add vagal work. The muscles are releasing, but your autonomic nervous system needs help.

If you can't even get yourself regulated enough to start somatic practice most days because you're either too wired or too shut down, start with the vagal book first. Build some baseline capacity, then come back to movement.

If you're dealing with serious trauma history, chronic illness, PTSD, or any of the big stuff, you probably need both at once. They'll support each other. Neither one alone is going to be enough. You can use both of these as they accommodate different parts of the body and nervous system that have forgotten how to feel safe.

Chapter 9: The 30-Day Somatic Reset Protocol

It takes approximately 21 days to build a new habit, or so the internet keeps telling you. Except that number comes from a plastic surgeon in the 1960s who noticed his patients took about three weeks to get used to their new noses, which has absolutely nothing to do with rewiring your nervous system or retraining decades-old motor patterns. Real habit formation takes longer. Real neural change takes consistency over time, not a magic three-week window.

But 30 days? That's long enough to see real shifts if you actually show up. Long enough for your motor cortex to start remembering how to release muscles it forgot it could control. Long enough to build the daily practice into your routine so it stops feeling like one more thing you're supposed to do and starts feeling like the thing that makes the rest of your day manageable.

You've learned the foundation exercises, the release work, the pandiculation protocol, and the targeted practices for your specific holding patterns. You have all the tools now. What you don't have is a clear plan for how to use them consistently. That's what this chapter gives you: a structured 30-day protocol that takes you from wherever you are right now to a place where somatic practice is just what you do, like brushing your teeth or making coffee, except this one actually changes how you live in your body.

The protocol starts gently and builds gradually. Week one focuses on grounding and awareness because you can't release what you can't feel. Week two adds basic pandiculation to retrain your motor patterns. Week three introduces targeted work for your specific problem areas. Week four integrates everything and establishes the practice you'll maintain after the 30 days end.

Some of you will see dramatic changes in the first week. Your shoulders will drop, your sleep will improve, pain you've carried for years will start to ease. Others won't notice much until week three, and then suddenly everything shifts. Both timelines are normal. Your nervous system moves at its own pace, and that pace doesn't care about your expectations or your impatience.

Thirty days won't fix everything. It won't erase decades of trauma or resolve every holding pattern you've ever developed. But it will give you enough experience with these practices to know they work, to feel the difference in your body, to build the capacity to keep going after the protocol ends. That's the actual goal here: not perfection in 30 days, but enough momentum that you don't stop on day 31.

How to Use This Protocol

This protocol requires 10 to 20 minutes daily. That's it. Not an hour, not 45 minutes of perfect practice in ideal conditions. Ten to twenty minutes, most days, in whatever space you have available. If you can't commit to that, you're not ready for this yet. Come back when you are.

When to Practice

Morning works best for most people. Your nervous system is relatively calm, you haven't accumulated the day's stress yet, and the practice sets a foundation for how you move through the next 12 hours. But morning isn't sacred. If evenings are your only quiet window, practice then. If you can grab 15 minutes during lunch, use that time.

The key is consistency of timing. Pick a time slot and protect it. Your nervous system learns through repetition, and repetition requires showing up at roughly the same time each day. Your body starts anticipating the practice, preparing for it, which makes the work more effective.

What to Do If You Miss a Day

Life will get in the way of things and interrupt your flow. In that case, remind and anchor yourself to the principle that one day doesn't ruin anything. Missing three days in a row means you need to reassess your commitment or your timing.

When you miss a day, don't try to make it up by doing double the next day. Just pick up where you left off. The protocol is cumulative but not fragile. One missed session doesn't erase your progress.

If you're consistently missing days, the problem is either your timing (the slot you chose doesn't actually work) or your commitment (you're not ready to prioritize this yet). Adjust your timing or be honest about whether now is the right time to start.

How to Track Progress

Don’t attempt to overcomplicate things for yourself; keep it simple. At the end of each practice session, write down three things:

- what you practiced (which exercises)
- what you noticed (any changes in tension, sensation, emotion)
- how you feel overall (better, worse, same, different)

All of this requires approximately two minutes and gives you concrete data about what's working. After 30 days, you can look back and see patterns you wouldn't remember otherwise.

What Counts as Success

Success isn't achieving perfect relaxation or releasing all your tension. Success is showing up most days and paying attention while you're there. Success is noticing small changes you would have missed before: your shoulders sitting slightly lower, your breath moving deeper into your belly, your jaw unclenching for the first time in years.

Some days the practice will feel amazing, and you'll get off the floor feeling transformed. Other days, you'll feel nothing obvious and wonder if you're wasting your time. Both count as success if you stayed present and followed the protocol.

Flexibility Within Structure

The protocol gives you specific exercises for each week. Follow them. Don't skip ahead because you're impatient or think you know better. The sequence is designed to build progressively.

That said, if an exercise triggers overwhelm or pain, skip it and do the alternative listed. If your body needs more time on week one's practices before moving to week two, take that time. The structure exists to guide you, not to torture you.

You can adjust the duration. If 10 minutes is your max capacity right now, do 10 minutes. If you have 25 minutes and want to do more, add an extra repetition or two to each exercise, but don't exceed 25 minutes total. More isn't better. Consistent and focused is better.

What to Do If Something Isn't Working

If an exercise consistently makes you feel worse (more tense, more anxious, more dysregulated), stop doing it. Check the modifications section for that exercise or substitute with a gentler option from an earlier week.

If the entire protocol feels too much, you might need more nervous system regulation before you're ready for this level of release work. Go back to Chapter 8 and work with the regulation techniques, or start with the companion book Vagus Nerve Reset before returning to this protocol.

If nothing is changing at all after two weeks, you're probably not paying enough attention during the exercises. Slow down. Notice more. The movements are simple, but they

require focused internal awareness to work. You might be going through the motions mechanically without the sensory attention that creates neural change.

Week 1: Foundation and Awareness (Days 1-7)

Week one is about feeling your body again. Not changing it, not fixing it, just noticing what's actually there. You're building the baseline awareness that makes all the later work possible. If you rush past this week because it seems too simple, you'll struggle when the intensity increases. Stay here. Learn to track sensation. Build the habit of showing up.

Total daily time: 10-12 minutes

Day 1: Getting Started

Focus: Establishing your practice space and baseline awareness.

Exercise #1: Feet-to-Floor Awareness (3 minutes) Standing version.

- Just notice where your weight falls, don't try to change anything.

Exercise #2: The Body Scan (10 minutes) Full scan from feet to head.

- Notice any tension, numbness, or sensation without judgment.

What to track: Where do you hold the most tension? Where do you feel numb or disconnected?

Day 2: Deepening Awareness

Focus: Adding grounding through position.

Exercise #1: Feet-to-Floor Awareness (2 minutes)

- Try the seated version at your practice space.

Exercise #2: Constructive Rest Position (3 minutes)

- Just lie here and notice what settles on its own. No active work yet.

Exercise #3: The Body Scan (8 minutes)

- Slightly shorter scan, focus on the areas that felt most significant yesterday.

What to track: Does constructive rest feel restful or uncomfortable? What wants to release naturally in this position?

Day 3: Micro-Movements

Focus: Learning that small movements create awareness

Exercise #1: Feet-to-Floor Awareness (2 minutes) Standing or seated, your choice.

Exercise #4: Sensing Micro-Movements (5 minutes) Work both shoulders using the protocol from Chapter 4. Remember: smaller is better.

Exercise #3: Constructive Rest (5 minutes) Rest and notice if the shoulder work created any changes.

What to track: Could you feel the micro-movements? Did one shoulder feel different from the other after working it?

Day 4: Breath Awareness

Focus: Noticing where breath moves (or doesn't)

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #5: Basic Somatic Breathing (5 minutes) Lie in constructive rest and observe your natural breath. Where does it move? Where does it stay stuck?

Exercise #4: Sensing Micro-Movements (5 minutes) Both shoulders again. Notice if your breathing changes after shoulder work.

What to track: Where does your breath move naturally? Chest, belly, back, ribs, or nowhere?

Day 5: Integration Day

Focus: Combining what you've learned so far

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Body Scan (5 minutes)

- This is a shorter version where you’re focusing on your primary holding areas.

Exercise #3: Micro-Movements (3 minutes) Shoulders.

Exercise #4: Basic Somatic Breathing (3 minutes)

- Notice how all the practices affect your breath.

What to track: Does your body feel different on Day 5 than it did on Day 1? Even subtly?

Day 6: Building Capacity

Focus: Slightly longer practice to build stamina

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Constructive Rest (3 minutes)

Notice what releases passively now that you've been practicing.

Exercise #3: Micro-Movements (4 minutes)

- Shoulders, but add in a few micro-movements with your neck. Tiny head turns or tilts, same principle.

Exercise #4: Basic Somatic Breathing (3 minutes)

What to track: Is 12-13 minutes feeling manageable or exhausting? Adjust Day 7 timing accordingly.

Day 7: Week One Review

Focus: Assess what you've learned and what needs more attention

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Full Body Scan (10 minutes)

- Compare this to your Day 1 scan. What's different? What's the same? Which areas have softened? Which are still holding?

What to track: Write down the biggest changes you've noticed this week and also note areas that haven't changed at all.

Week One Checkpoint

When you get to the end of this week, you should have:

- established a consistent practice time and space.

- built the consistency of showing up daily (or most days).
- developed a better awareness of where you hold tension.
- noticed some small changes, even if they're subtle.
- identified your primary holding patterns for targeted work ahead.

If you're not feeling any of this yet, repeat week one before moving forward. The foundation matters more than the timeline. If you've got the foundation solid, you're ready for week two, where actual release work begins.

Week 2: Pandiculation and Re-education (Days 8-14)

Week two is where the actual retraining begins. You've built awareness of where you hold tension. Now you're going to teach your motor cortex how to release it. This week introduces the core pandiculation exercises that retrain your brain's control over chronically contracted muscles. The work gets more active but stays gentle. You're still moving slowly, still paying close attention, still prioritizing awareness over achievement.

You'll keep some of the foundation practices from Week 1 because grounding never stops being important. But you're adding the three-step pandiculation protocol: contract, slow release, rest. This is where motor learning happens. Your shoulders might start dropping without you thinking about it. Your lower back might settle toward the floor more easily. These aren't dramatic transformations. They're subtle shifts that accumulate.

Some people hit Week 2 and feel immediate relief. Others feel temporarily worse as their body starts reorganizing around new patterns. Both are normal. Your nervous system is adjusting. Give it time.

Day 8: Introducing Pandiculation

Focus: Learning the arch and flatten pattern

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Constructive Rest (2 minutes)

- Settle in and notice your baseline today.

Exercise #3: The Arch and Flatten (5 minutes)

- Three to five repetitions. This teaches your lower back muscles how to release the chronic arch from the green light reflex. Focus on making the release phase slow.

Exercise #4: Body Scan (5 minutes)

- Notice if your lower back feels different after the arch and flattening work.

What to track: Could you feel the slow release? Did your lower back settle more toward the floor?

Day 9: Adding Lateral Release

Focus: Addressing side-to-side holding patterns

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (4 minutes)

- Three repetitions to warm up your spine and remind your nervous system of yesterday's work.

Exercise #3: The Side Bend (6 minutes)

- Three to five reps each side. This addresses the asymmetry most people carry, releasing the quadratus lumborum and obliques that pull you to one side.

Exercise #4: Constructive Rest (3 minutes)

- Rest and notice if one side of your back makes more contact with the floor now.

What to track: Which side holds more tension? Does one side release more easily than the other?

Day 10: Rotational Patterns

Focus: Releasing the trauma reflex through twisting

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (3 minutes)

- Two to three reps as warm-up.

Exercise #3: The Twist (7 minutes)

- Three to five reps each direction. This unwinds the protective spiral pattern your spine learned during trauma. Knees one way, head the other, slow unwinding on the release.

Exercise #4: Basic Somatic Breathing (3 minutes)

- Notice if your breath moves more evenly through both sides of your ribcage after releasing rotational holding.

What to track: Does your spine feel more centered? Do both shoulders press evenly into the floor now?

Day 11: The Spinal Wave

Focus: Segmental movement through your entire spine

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Spinal Wave (8 minutes)

- Three to five waves. This teaches each vertebra to move independently instead of your spine moving as one rigid block. Notice which segments move smoothly and which stay stuck.

Exercise #3: Micro-Movements (3 minutes)

- Shoulders, to maintain the awareness work from Week 1.

Exercise #4: Constructive Rest (3 minutes)

What to track: Where does the wave get choppy? Can you feel individual vertebrae, or does your spine move in blocks?

Day 12: Integration of All Four

Focus: Combining the pandiculation patterns

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (3 minutes)

- Two to three reps. Your spine moves forward and back.

Exercise #3: The Side Bend (3 minutes)

- Two to three reps each side. Your spine moves laterally.

Exercise #4: The Twist (3 minutes)

- Two to three reps each direction. Your spine rotates.

Exercise #5: The Spinal Wave (3 minutes)

- Two waves. Your spine moves sequentially through all segments.

Exercise #6: Constructive Rest (3 minutes)

- After moving your spine in every direction, notice how it settles now.

What to track: How does your whole spine feel after working it in all these directions?

Day 13: Deepening the Work

Focus: Longer holds, more attention to the slow release

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (5 minutes)

- Four to five reps. Make the release phase even slower, eight to 10 seconds. The slowness is what retrains your motor cortex.

Exercise #3: The Spinal Wave (5 minutes)

- Three to four waves. Focus on smoothing out the segments that felt stuck earlier this week.

Exercise #4: Body Scan (5 minutes)

- Notice overall changes from Day 8 to now.

What to track: Is the slow release getting easier? Can you track sensation more clearly than you could six days ago?

Day 14: Week Two Review

Focus: Assessing motor learning progress

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (3 minutes)

- Notice how automatic this pattern is starting to feel.

Exercise #3: The Side Bend (3 minutes)

- Check if the asymmetry between sides has decreased.

Exercise #4: The Twist (3 minutes)

- See if the rotational pattern releases more easily now.

Exercise #5: The Spinal Wave (3 minutes)

- Notice if more segments participate in the wave.

Exercise #6: Constructive Rest (3 minutes)

- Full rest and comparison to where you started two weeks ago.

What to track: What's changed in your baseline tension? What areas still need work?

If at any point, you experience overwhelm, flooding, or consistent panic during the exercises, go back to Week 1 and spend more time building regulation capacity. If everything feels fine but you're not noticing any changes yet, you might not be slowing down enough during the release phase. The magic happens in those eight seconds of conscious letting go.

Week three introduces targeted work for your specific problem areas. You'll take what you've learned about pandiculation and apply it directly to the places where you hold the most chronic tension.

Week 3: Release and Discharge (Days 15-21)

Week three brings active discharge into your practice. You've built awareness in Week 1 and retrained basic motor patterns in Week 2. Now you're adding shaking and tremoring to release stored activation, plus targeted work for your specific problem areas. This is where things can get intense. Emotions might surface. Old activation might discharge through tremoring. Your body is finally releasing what it's been holding.

Go slow this week. If something feels like too much, back off and ground yourself. You're not racing to finish the protocol. You're building sustainable change.

Day 15: Introducing Active Discharge

Focus: Learning intentional shaking

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (3 minutes)

- Three reps to ground through your spine before adding activation.

Exercise #3: Intentional Shaking (5 minutes)

- Start with just two to three minutes if this is your first time shaking. This discharges sympathetic activation and completes stress cycles your body never finished.

Exercise #4: Constructive Rest (8 minutes)

- Rest longer after shaking. Your nervous system needs time to integrate the discharge.

What to track: How did shaking feel? Awkward? Liberating? Did you notice warmth, tingling, or emotional release?

Day 16: Discharge Plus Jaw Release

Focus: Targeting jaw tension after discharge work

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Intentional Shaking (4 minutes)

- Slightly longer than yesterday as your body adjusts to the practice.

Exercise #3: Jaw Release (7 minutes)

- Work through the jaw pandiculation exercises from Chapter 7. Your jaw holds what you couldn't say. Release it deliberately.

Exercise #4: Constructive Rest (5 minutes)

- Notice if your jaw stays relaxed or if it wants to clench again immediately.

What to track: Does your jaw feel different after directly working with it? Does it soften or resist?

Day 17: Shoulder Work

Focus: Releasing shoulders that carry everything

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Side Bend (3 minutes)

- Two to three reps on each side as warm-up.

Exercise #3: Shoulder Pandiculation (8 minutes)

- Detailed work from Chapter 7 targeting elevated shoulders, forward-rounded shoulders, and neck tension. Your shoulders carry the weight of responsibility. Teach them to let go.

E**xercise #4:** Intentional Shaking (3 minutes)

- Brief shaking after targeted work to discharge any activation that surfaced.

Exercise #5: Constructive Rest (4 minutes)

What to track: Do your shoulders sit lower now? Can you feel the space between your ears and shoulders that wasn't there before?

Day 18: Psoas and Hip Flexors

Focus: Releasing where fight-or-flight lives

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: The Arch and Flatten (3 minutes)

- Prepare your lower back for psoas work.

Exercise #3: Psoas Pandiculation (8 minutes)

- Active psoas release from Chapter 7. This is where the impulse to run got trapped. Move slowly and pay attention. Strong emotions might surface here.

Exercise #4: Constructive Rest (7 minutes)

- Longer rest after psoas work. This area holds deep survival patterns that need integration time.

What to track: Does your lower back feel flatter against the floor? Did emotions come up during psoas work?

Day 19: Hip Opening

Focus: Opening the container where everything gets stored

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Hip Circles (4 minutes)

- Exploratory movement to wake up all the rotators around your hip joint.

Exercise #3: Figure-Four Release (8 minutes)

- Work both sides. Your hips hold what you couldn't process anywhere else. Expect potential emotional release here.

Exercise #4: Intentional Shaking (3 minutes)

- Discharge anything that surfaced during hip work.

Exercise #5: Constructive Rest (3 minutes)

What to track: Did your hips feel vulnerable or resistant? Did emotions surface when working in this area?

Day 20: Integration and Full Discharge

Focus: Combining targeted work with full-body release

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Choose Your Primary Area (5 minutes)

- Work the area where you hold the most tension: jaw, shoulders, psoas, or hips. Focus where your body needs it most.

Exercise #3: Intentional Shaking (5 minutes)

- Longer shaking session now that your body is familiar with the practice.

Exercise #4: Neurogenic Tremoring (5 minutes)

- If you feel ready, try the TRE-inspired tremoring from Chapter 5. If not, continue with intentional shaking instead.

Exercise #5: Constructive Rest (5 minutes)

- Full integration of the discharge work.

What to track: How does your whole body feel after combining targeted release with full discharge?

Day 21: Week Three Review

Focus: Assessing what's shifted and what still needs attention

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Body Scan (10 minutes)

- Full scan comparing to Day 1 and Day 14. Which areas have released significantly? Which are still holding?

Exercise #3: Intentional Shaking (5 minutes)

- Notice if shaking feels more natural and less effortful than it did on Day 15.

Exercise #4: Constructive Rest (5 minutes)

- Notice your overall baseline compared to three weeks ago.

What to track: What are the biggest changes you've noticed this week? Did emotional releases happen? Which targeted area responded most to the work?

Week 4: Integration and Personalization (Days 22-30)

Week four is where you stop following a prescribed routine and start building your own practice. You've learned foundation exercises, pandiculation protocols, discharge techniques, and targeted release for specific areas. Now you get to decide what your body needs each day based on your current state. This is the transition from structured protocol to sustainable practice.

Some days you'll need more grounding. Other days, you'll need active discharge. Some days your shoulders will scream for attention while your hips feel fine. Learning to assess your needs and choose accordingly is the skill that makes this work last beyond 30 days.

Day 22: Building Your Foundation Routine

Focus: Creating a baseline practice you'll use daily

Exercise #1: Feet-to-Floor Awareness (2 minutes)

- This always starts your practice and is a non-negotiable element.

Exercise #2: Choose One Foundation Practice (5 minutes)

- Body Scan, Constructive Rest, or Micro-Movements. Pick based on what you need today. Scattered and anxious? Body scan. Exhausted? Constructive rest. Numb and disconnected? Micro-movements.

Exercise #3: Choose One Spinal Pandiculation (5 minutes)

- Arch and Flatten, Side Bend, Twist, or Spinal Wave. Work on what feels tightest or most restricted today.

Exercise #4: Choose One Discharge Practice (5 minutes)

- Intentional Shaking or Neurogenic Tremoring. Release stored activation.

Exercise #5: Constructive Rest (3 minutes)

- Always end with rest because that's a fundamental aspect of integration work. What to track: How did it feel to choose your own practices? Did you pick what you actually needed or what you thought you should do?

Day 23: Targeted Focus Day

Focus: Deep work on your primary holding area

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Brief Spinal Warm-Up (3 minutes)

- One or two pandiculation exercises to prepare your spine.

Exercise #3: Deep Work on Primary Area (10 minutes)

- Jaw, Shoulders, Psoas, or Hips. Spend extended time on wherever you hold the most chronic tension. Multiple repetitions, slow releases, full attention.

Exercise #4: Constructive Rest (5 minutes)

- Longer integration after deep targeted work.

What to track: Did going deeper into one area create more release or more overwhelm? Adjust tomorrow accordingly.

Day 24: Discharge and Movement

Focus: Active release through full-body work

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Intentional Shaking (7 minutes)

- Longer shaking session to discharge accumulated stress from the week.

Exercise #3: Whole-Body Integration Flow (8 minutes)

- Move through the jaw, shoulders, spinal wave, psoas, and hips briefly. Touch each area, connecting the full system.

Exercise #4: Constructive Rest (3 minutes)

What to track: Does moving through multiple areas in one session feel integrating or scattered?

Day 25: Gentle Regulation Day

Focus: Low-intensity practice when you're depleted or overwhelmed

Exercise #1: Feet-to-Floor Awareness (3 minutes)

- Take extra time grounding today.

Exercise #2: Constructive Rest (10 minutes)

- Just rest. Let passive release happen without active work.

Exercise #3: Basic Somatic Breathing (5 minutes)

- Gentle breath awareness without pushing for change.

Exercise #4: Micro-Movements (2 minutes)

- Tiny shoulder movements, only if you have the capacity.

What to track: Can you honor low-capacity days without judging yourself for not doing more?

Day 26: Building Your Personal Protocol

Focus: Designing the practice you'll maintain after Day 30

Exercise #1: Feet-to-Floor Awareness (2 minutes)

- Your non-negotiable anchor.

Exercise #2-4: Choose Three Practices (15 minutes total)

- Pick one foundation practice, one pandiculation exercise, and one discharge or targeted release based on what's worked best for you over the past 25 days. This is your template.

Exercise #5: Constructive Rest (3 minutes)

What to track: Does this combination feel sustainable? Could you do this most days without burnout?

Day 27: Testing Your Protocol

Focus: Running your personal protocol again to confirm it works

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2-4: Repeat Yesterday's Choices (15 minutes)

- Do the same three practices you chose on Day 26. See if they still feel right or if you need adjustments.

Exercise #5: Constructive Rest (3 minutes)

What to track: Does this protocol address your primary needs? What would you change?

Day 28: Addressing What's Left

Focus: Working with the areas that haven't shifted much

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Body Scan (5 minutes)

- Identify which areas are still holding significant tension despite three weeks of work.

Exercise #3: Targeted Work on Resistant Area (10 minutes)

- Deep focus on the area that's been most resistant to release. Jaw still clenched? Shoulders still elevated? Psoas still rigid? Work there specifically.

Exercise #4: Constructive Rest (5 minutes)

What to track: Some areas resist longer than others. That's normal. Note what still needs consistent attention going forward.

Day 29: Full Integration Practice

Focus: Combining everything you've learned

Exercise #1: Feet-to-Floor Awareness (2 minutes)

Exercise #2: Spinal Pandiculation (5 minutes)

- Choose two: Arch and Flatten, Side Bend, Twist, or Spinal Wave.

Exercise #3: Targeted Release (5 minutes)

- Your primary holding area.

Exercise #4: Intentional Shaking (5 minutes)

Exercise #5: Constructive Rest (5 minutes)

What to track: Does this feel like a complete practice that addresses your whole system?

Day 30: Assessment and Moving Forward

Focus: Evaluating 30 days of progress

Exercise #1: Feet-to-Floor Awareness (3 minutes)

- Notice how different this feels from Day 1.

Exercise #2: Full Body Scan (15 minutes)

- Complete scan comparing to Day 1, Day 14, and Day 21. What's changed? What's the same? Which practices created the most shift?

Exercise #3: Brief Movement Check (5 minutes)

- Do a few movements from each category (foundation, pandiculation, discharge, targeted) and notice which ones your body responds to most.

What to track: Write a detailed assessment. What decreased? What improved? What still needs work? Which practices will you maintain daily? Which will you use as needed?

The 30-day protocol gave you structure. Now you have the skills to continue without it. Some days you'll practice longer. Some days, shorter. The consistency matters more than the duration. Keep showing up. Keep listening to your body. Keep releasing what you've been holding.

Daily Tracking Template

Tracking your practice keeps you honest and helps you notice changes you'd otherwise miss. Your progress won't be linear, and there will be periods where you'll feel worse than when you started. Tracking shows you the patterns underneath the day-to-day fluctuations.

DAILY PRACTICE LOG

Date: _____ Time: _____ Duration: _____

Exercises Done:

1. _____
2. _____
3. _____
4. _____

What I Noticed: Physical sensations: _____

_____

Emotions: _____

_____

Areas of tension: _____

Areas of release: _____

Overall State After Practice:

_____

Notes:

_____

_____

_____

WEEKLY REVIEW (Complete every 7 days)

Week of: _____

What changed this week physically?

What changed emotionally or mentally?

Which exercises helped most?

Which exercises triggered overwhelm or resistance?

What do I need more of next week?

Recognizing Non-Linear Progress

Progress doesn't look like steady improvement. It looks like this:

Week 1: Notice some release, feel hopeful.

Week 2: Feel worse. More aware of the tension you'd been ignoring. Old pain surfaces. Think you're doing it wrong.

Week 3: Sudden shift. Something releases. Then plateau.

Week 4: Incremental improvements you almost don't notice until you look back at Week 1 notes.

Your nervous system reorganizes in waves, so there will be breakthrough days followed by days where everything feels stuck again. The stuck days don't erase progress. They're part of integration.

What Actually Indicates Progress:

- You catch yourself releasing tension automatically during the day without consciously trying
- Your baseline tension on a bad day now is lower than your baseline on a good day three weeks ago
- You notice holding patterns forming and can release them before they become chronic
- Your window of tolerance expands, and things that would have sent you into panic or shutdown now just feel uncomfortable
- You have more capacity for physical and emotional sensation without flooding
- Your sleep improves even if other symptoms haven't fully resolved
- You feel more connected to your body, even when it's uncomfortable

Track the small things. They accumulate into big changes you won't notice unless you're writing them down.

Chapter 10: Beyond the 30 Days; Making This a Lifestyle

The most significant lesson that has stuck with me about motion is that progress happens in small bouts of action taken consistently over time, not in dramatic overhauls or perfect execution. You don't transform your relationship with your body in 30 days. You don't undo decades of holding patterns with one month of practice. What you do in 30 days is build enough momentum that stopping feels harder than continuing. You prove to yourself that this works. You feel enough difference that going back to how you were before becomes unthinkable.

Now you're standing at the precipice of the end and likely wondering, “What next?” You have to decide for yourself what sustainable practice looks like, how to maintain what you've built, how to keep showing up when the novelty wears off, and this becomes just another thing you do.

It’s easy to quit once the initial excitement fades or when it gets busy. You miss a few days, then a week, then you realize it's been three months since you last practiced, and all the tension has crept back in. You're right back where you started, maybe even worse, because now you're carrying the weight of having failed at something you knew would help.

Making somatic work a lifestyle means it stops being a project with a beginning and end. It becomes part of how you take care of yourself, like brushing your teeth or eating food. Some days you do more, some days you do less, but you don't just stop because the official program ended. This chapter shows you how to build that kind of sustainability, how to adapt your practice as your life changes, and how to keep going even when progress feels invisible.

Your Personal Maintenance Practice

The minimum effective dose is the smallest amount of practice that maintains your progress. If you start to go below it, you will start losing what you built. Stay at or above it, and you hold steady or continue improving. Five minutes a day is the standard amount of time that people need daily to maintain some form of consistency. Less than that and you're not giving your nervous system enough information to remember the new patterns. Ten minutes is better. Twenty minutes a few times a week, plus five to 10 on other days, is ideal.

The 5-Minute Minimum Practice

Use this on exhausted, overwhelmed, or time-crunched days. Five minutes is better than nothing.

1. Feet-to-Floor Awareness (1 minute)
2. One Pandiculation Exercise (3 minutes)
   Pick the one that addresses your primary holding area: Arch and Flatten for lower back, Side Bend for lateral tension, shoulder work, jaw release, psoas, or hips.
3. Constructive Rest (1 minute)

The 10-Minute Standard Practice

Your daily baseline when you have normal time and energy.

1. Feet-to-Floor Awareness (2 minutes)
2. One Foundation Practice (3 minutes)
   Body Scan if you need awareness. Constructive Rest for passive release. Micro-Movements if you're numb.
3. Two Pandiculation Exercises (4 minutes)
   One for your spine (Arch and Flatten, Side Bend, Twist, or Spinal Wave). One for your primary tension area.
4. Constructive Rest (1 minute)

The 20-Minute Full Practice

Do this three to four times per week when you want to go deeper.

1. Feet-to-Floor Awareness (2 minutes)
2. Foundation Practice (5 minutes)
   Full Body Scan or extended Constructive Rest.
3. Two to Three Spinal Pandiculation Exercises (6 minutes)
   Work your spine in multiple directions. Rotate through different combinations.
4. Targeted Release (5 minutes)
   Deep work on your primary holding area with multiple repetitions.

5. Constructive Rest or Discharge Practice (2 minutes)
   End with integration rest, or do brief shaking if you're carrying stress.

Adapting Based on Your Day

Your practice should flex based on your current state:

High-stress days: Add discharge work before pandiculation exercises.

Low-energy days: Stick to a 5-minute minimum or extend Constructive Rest.

High-capacity days: Go for the 20-minute practice.

Pain flare-up days: Focus exclusively on the area that's hurting.

Numb or disconnected days: Prioritize foundation practices like Body Scan and Micro-Movements.

Build Your Personal Template

Write down your three practice versions to remove decision fatigue:

My 5-Minute Practice:

1. _____
2. _____
3. _____

My 10-Minute Practice:

1. _____
2. _____
3. _____
4. _____

My 20-Minute Practice:

1. _____
2. _____
3. _____
4. _____
5. _____

The Non-Negotiables

The only truly non-negotiable element is Feet-to-Floor Awareness at the start. Everything else can flex based on time and capacity, but you always begin by grounding. That one to two minutes anchors you in your body and signals to your nervous system that you're shifting into somatic awareness.

Beyond that, your practice is yours. Build it around what actually works for your body, your schedule, and your specific holding patterns. The best maintenance practice is the one you'll actually do consistently, not the most comprehensive one that looks perfect on paper.

Quick Resets for Specific Situations

Our triggers are the places where we need somatic tools the most, and they're usually the places where we have the least time, privacy, or capacity to use them. You're not going to lie down on your office floor for 10 minutes of pandiculation when your boss just criticized you in front of the team. You're not going to do a full body scan in your car after a fight with your partner when you need to drive home. You need quick resets that work in real situations with real constraints.

These mini-routines take one to three minutes and target specific triggers and can be done discreetly in most settings. They won’t necessarily create the deep release you get from full practice, but they prevent acute stress from accumulating into chronic holding. They complete the stress cycle in the moment, so it doesn't get stored in your tissues.

Before a Stressful Meeting or Presentation

Your nervous system is activated in anticipation. Ground and regulate before you walk in.

1. Feet-to-Floor Awareness (30 seconds)
   Stand or sit with feet flat. Press down and feel the floor pushing back. This grounds you in your body instead of spinning in your head.

2. Extended Exhale Breathing (1 minute)
   Inhale for four counts, exhale for six to eight. Five to 10 breaths. This activates your parasympathetic nervous system and calms the activation.

3. Shoulder Drop (30 seconds)
   Lift both shoulders toward your ears, hold for three seconds, then slowly release them down your back over five seconds. Do this twice. Releases the bracing pattern that happens before a perceived threat.

Total time: 2 minutes. Do this in the bathroom, your car, or right before you walk into the room.

After Conflict or Difficult Conversations

Your body mobilized for fight, but you couldn't discharge it. Complete the cycle.

1. Push Against a Wall (30 seconds): Find any wall. Push hard with your hands like you're trying to move it. Engage your whole body. This gives your muscles the resistance they were preparing for during conflict.
2. Shake Out Your Hands (30 seconds): Vigorously shake your hands and arms like you're flinging water off them. This discharges the activation in your upper body.
3. Stamp Your Feet (30 seconds): Stomp your feet alternately into the ground with force. This grounds you and discharges energy from your legs.
4. Extended Exhale (30 seconds): Three to five long exhales to signal to your nervous system that the threat is over.

Total time: 2 minutes. Can be done in a stairwell, parking lot, or any semi-private space.

During Sleeplessness or Middle-of-the-Night Anxiety

Your nervous system is activated when it should be resting. Help it downregulate.

1. Constructive Rest in Bed (lie on your back, knees bent, feet flat on mattress): Press your feet gently into the mattress. Feel the support beneath you. One minute.
2. The Spinal Wave (lying down): Do two to three very slow spinal waves. This sequentially releases your entire back body and signals rest mode. Two minutes.
3. Basic Somatic Breathing: Notice where your breath moves. Don't force it deeper; just observe it for one to two minutes until it naturally slows.

Total time: 4-5 minutes. Staying in bed keeps you in rest mode instead of fully waking up.

In Moments of Acute Overwhelm or Panic

Your sympathetic nervous system has spiked. Interrupt the spiral immediately.

1. Orienting to the Room (30 seconds): Look around. Name five things you can see. One thing you can hear. One thing you can physically feel. This brings you into the present moment.

2. Feet-to-Floor Awareness (30 seconds): Press your feet down hard. Feel the ground. You're here, now, safe enough.

3. Hand on Heart (1 minute): Place both hands over your heart. Feel the warmth. Gentle pressure. This self-touch activates your social engagement system and signals safety.

4. Extended Exhale (1 minute): Long exhale until your heart rate starts to slow.

Total time: 3 minutes. Can be done anywhere, even in a bathroom stall if you need privacy.

At Your Desk During Work Stress

You're sitting for hours, accumulating tension, and can't leave your workspace.

1. Seated Feet-to-Floor (1 minute): Feet flat on floor. Press down. Feel your sit bones on the chair. Ground through two points of contact.

2. Shoulder Micro-Movements (1 minute): Lift one shoulder slightly toward your ear, hold three seconds, and slowly lower. Repeat three times on each side. Releases upper body holding without anyone noticing.

3. Jaw Release (30 seconds): Open your mouth slightly, let your jaw hang loose, and gently move it side to side. Releases the clenching that happens during concentration and stress.

Total time: 2.5 minutes. Completely discreet. Looks like you're just shifting in your chair.

In Your Car After a Triggering Situation

You need to discharge before driving, but you're in a confined space.

1. Grip the Steering Wheel (30 seconds): Squeeze the steering wheel as hard as you can. Hold for 10 seconds, then slowly release. Gives your hands something to grip instead of staying clenched.

2. Push Into the Seat (30 seconds): Press your back into the seat and your feet into the floor. Push hard. This grounds you and discharges some activation.

3. Shake in Your Seat (1 minute): Shake your upper body, arms, and hands vigorously while staying seated. Discharge what you can in the space you have.

4. Extended Exhale (1 minute): Before you drive, breathe. Five to 10 long exhales until you feel settled enough to focus on the road.

Total time: 3 minutes. Do this before you drive, not during.

Combining Somatic Work with Other Modalities

Somatic exercises, when combined with other healing modalities create an extremely powerful healing container. Layer them together, and they will complement each other when done in the right order.

Somatic Work and Talk Therapy

These two work beautifully together, but they address different layers. Talk therapy processes the narrative, identifies patterns, and builds insight. Somatic work releases what's stored in your body. Neither one alone is complete for most people with trauma.

Do somatic practice before therapy sessions when possible. Ten minutes of grounding and pandiculation help you stay present in your body during the session instead of dissociating when hard topics come up. Your therapist will notice the difference.

Some therapists incorporate somatic techniques directly into sessions. If yours doesn't, but you want that, look for someone trained in Somatic Experiencing, Sensorimotor Psychotherapy, or EMDR. These modalities combine talk and body work.

Somatic Work and Yoga

Yoga stretches and strengthens, while somatic work retrains motor control. They're different mechanisms, even though both involve movement on a mat.

Do somatic exercises before yoga if your primary issue is chronic tension and holding patterns. Pandiculation retrains your nervous system to release, and then yoga can work with muscles that actually know how to lengthen. Doing yoga first on chronically tight muscles just fights against your motor patterns.

If your yoga practice is already working well for you, keep it. Add five to 10 minutes of somatic work before class or on non-yoga days to address areas yoga doesn't reach.

Somatic Work and Massage

Massage provides temporary relief by manually lengthening tight muscles. Somatic work creates lasting change by retraining the motor patterns causing the tightness. Use both.

Get a massage when you need immediate relief or can't access certain areas yourself. Do somatic work consistently to retrain your nervous system so you need massage less frequently.

Best sequence: somatic practice after massage. The manual work releases some holding, then pandiculation teaches your brain to maintain that release instead of contracting again immediately.

Somatic Work and Meditation

Meditation builds awareness of mental patterns. Somatic work builds awareness of physical patterns. Both train attention and presence.

Do grounding exercises before meditation if you struggle to settle. Feet-to-Floor Awareness and Constructive Rest prepare your nervous system for stillness. Meditating in a dysregulated state often just reinforces the dysregulation.

Some people prefer body-based meditation practices like body scans over breath-focused meditation. If sitting still and watching your breath makes you more anxious, work somatically instead. It's still mindfulness, just through movement.

What to Do First

The principle, in general, is to get yourself to a regulated state, then do the deeper work.

If you're too activated or shut down, use quick regulation techniques before anything else. If you're in your window of tolerance, start with brief somatic grounding, then move into whatever other practice you're doing.

The combination that works depends on your specific needs. Experiment. Notice what sequence leaves you feeling most regulated and present. That's your answer.

When to Seek Professional Support

Capacity is an important thing. It's the thing that takes you from barely surviving to actually living, from managing symptoms to resolving them at the root. There will be times and instances where your capacity is too narrow to safely do the work on your own,

and when you conduct that self-assessment and get to the conclusion that you can no longer go at it alone, don’t shame yourself for it.

In this book, I have given you the self-regulation tools you need; tools to help ground yourself, tools designed for release, to retrain motor patterns, and discharge activation. There are other kinds of trauma, like complex PTSD, dissociative disorders, or severe nervous system dysregulation, that require more than a book can provide.

You will know when self-practice isn’t enough when:

- you consistently flood, dissociate, or panic during the exercises despite working within your window of tolerance
- you can't regulate yourself back to baseline after practices trigger you
- you have no window of tolerance; you're either completely numb or completely overwhelmed, with no middle ground
- suicidal ideation, self-harm urges, or severe depression surface during or after somatic work
- you can't tell the difference between past and present when trauma material comes up
- you've experienced severe abuse, violence, or ongoing trauma that this book doesn't address

All of this will tell you that your nervous system is more in need of someone who is trained enough to provide the kind of sturdy scaffolding that you need.

You can do self-regulation while in trauma therapy, but you can't do trauma processing safely alone with a book. Know which one you need. Using professional support is a way to get to the level of care your nervous system actually requires.

When we hold space for things, be that emotions or sensations or the uncomfortable reality of what our bodies have been carrying, we create room for newness to take root. Not perfect, healed, glamorous, overly romanticized newness, but the kind of newness that gives you significantly more breathing room than you’d previously allowed yourself to have. Newness that makes you less tight, less defended, and more able to actually live instead of just surviving in a body that feels like a prison.

Conclusion

No one and nothing should ever convince you that healing work is not worth it, that desiring a sense of ease and that feeling of “at homeness” in your own body and your own life is somehow selfish or indulgent or a luxury you can't afford. You deserve to live without chronic pain. You deserve to wake up without your jaw already clenched, one where you move freely and with ease, with an infectious kind of renewed optimism, without feeling like you’re carrying the weight of the whole world on your shoulders.

I gave you the tools that you need, resources to sustain and carry you throughout your healing journey, and protocols that will retrain various parts of your nervous system to not perceive everything and everyone around you as a threat.

I do still want you to remember, though, that tools are useless if they aren’t used. Don’t make tension a personality trait or chronic pain feel like it is inevitable. We were not born anxious; anxiety isn’t something that we have to manage forever; it is a learned behaviour. Something that our bodies learnt to do to keep us safe.

From here onwards, it is a matter of whether you'll keep going, or show up tomorrow and the day after that, even when it feels like nothing is changing, even when life gets chaotic, or when you're tired, and the last thing you want to do is lie on the floor and pay attention to your body.

Your body has brought you up until this point in your life because it’s pretty good at keeping you alive, but you deserve to experience more of what it means to be a being in a body, a being with a body... Living. Thriving. Making the most of being a person who feels and can do things.

You're worth it. The work is worth it, and the version of you that exists on the other side of consistent practice (that calmer, more grounded, less defended, more present side) is waiting.

Go find them.

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