

## **Program for Stichting Emovere Masterclass & Case Consultation (intervisie)**

**Location: Landgoed Zonneoord, Ede**

**October 28–29, 2026 by Vanessa Blackstone**

### **Wednesday Oct 28: Full-Day PRT Masterclass (group A en C)**

**Approximate time: 9:00 – 17:00 / lunch: 12:30 – 13:30**

#### **1. Deepening the Understanding of Neuroplastic Symptoms**

We will begin by exploring how chronic symptoms can become learned danger responses in the brain and nervous system. This section includes the roles of fear, attention, prediction, memory, stress physiology, and symptom amplification.

We will also discuss how symptoms can be completely real and still influenced by nervous system interpretation. This is especially important when working with complex clients whose symptoms do not always fit neatly into a “structural versus neuroplastic” framework.

Topics will include:

- a. pain neuroscience and nervous system danger responses
- b. predictive coding and symptom expectations
- c. how the brain uses past experience to anticipate threat
- d. symptom amplification
- e. how the nervous system can “turn up the volume” on symptoms
- f. understanding neuroplastic symptoms without dismissing the client’s lived experience

#### **2. Fear, Preoccupation, and the Symptom Cycle**

This section will focus on how fear keeps symptoms reinforced, both directly and indirectly. We will look at the ways clients can become caught in loops of monitoring, checking, bracing, researching, avoidance, reassurance-seeking, perfectionism, and pressure to “do recovery correctly.”

The goal is to help participants understand these patterns as protective rather than pathological, while also learning how to help clients move out of fear-based symptom cycles.

Topics will include:

- a. how to help clients relate to symptoms with less fear
- b. fear of movement
- c. fear of flare-ups
- d. body monitoring and checking
- e. reassurance loops
- f. over-efforting in recovery
- g. perfectionism and the pressure to get PRT “right”

### 3. Practical Application: Somatic Tracking, Emotions and Protective Parts

This section will focus on how to apply PRT in the room with clients. This will go beyond a basic explanation of somatic tracking and discuss the clinical nuance of helping people relate to sensations with curiosity, neutrality, and safety, without turning the practice into another form of symptom monitoring.

We would also explore how emotional avoidance, urgency, self-criticism, overthinking, perfectionism, and bracing can function as protective patterns. Vanessa will include examples of how to work with these patterns without shaming the client or making them feel like they are the problem.

Topics will include:

- a. somatic tracking and nervous system safety
- b. how to guide somatic tracking without increasing pressure
- c. emotional processing within PRT
- d. parts and protective patterns (IFS)

### 4. Experiential Practice and Tangible Teaching Tools

Experiential practice, small-group or pair discussions and short movement/grounding moments will be included throughout the program, so participants can feel the work from the inside, not only understand it conceptually. This may include a somatic tracking exercise, a “dropping in” practice, applying a tool to their own experience or an exercise focused on fear, bracing, or symptom preoccupation.

Vanessa also likes to make this work tangible through clinical examples, analogies, humor, and tools from **The Pain Reprocessing Therapy Workbook**, so participants leave with language and resources they can return to after the training.

## Thursday October 29 – Morning (group A, B & C)

### Continued Masterclass / Clinical Integration

**Approximate time: 9:00 – 12:30 / lunch: 12:30 – 13:30**

The **morning of October 29th will be followed by all groups together** – which will focus on “*Clinical Integration and Common Stuck Points in PRT*”. This morning will provide deeper teaching and at the same time will act as a bridge to the more practitioner-focused applied case consultation (in Dutch: *intervisie*) in the afternoon.

Topics will include:

- common stuck points in PRT
- building buy-in without pushing belief
- working with doubtful, skeptical, frightened, or highly medicalized clients
- exploring the self-blame of pain being labeled as “neuroplastic”
- working with clients who intellectually understand the model but do not feel safe in their bodies

- how to know when to educate, slow down, track sensations, explore emotions, or focus on regulation, pacing the work based on the client's nervous system
- integrating tools from The Pain Reprocessing Therapy Workbook
- participant questions and discussion

**After lunch, group A will leave and group B and C will stay to dive deeper into the clinical cases they emailed to Stichting Emovere in advance. From the peer group consultations (intervisie), themes will arise that will be discussed and commented on by Vanessa Blackstone.**

## **Thursday October 29 – Afternoon group (B & C)**

Case Consultation (intervisie)

**Approximate time: 13:30 – 17:30**

The second half of the day is **intended for professionals already using PRT concepts and tools in practice**. They will be asked to send in advance to Stichting Emovere their own anonymized active cases, clinical questions, or stuck points from their own work. We would look at how to conceptualize cases through a PRT lens and discuss practical next steps.

The goal is to deepen the understanding and applying PRT tools directly to real clinical examples by case consultation together with peers, learning from other practitioners, from the group discussions and feedback provided by Vanessa Blackstone.

We would use the cases to connect back to PRT concepts and tools, including fear, prediction, symptom amplification, protective patterns, emotional processing, somatic tracking, buy-in, pacing, and clinical decision-making.

Topics may include:

- live conceptualization through a PRT lens
- identifying what may be reinforcing fear or symptoms
- discussing how to build safety and buy-in
- choosing between psycho-education, somatic tracking, emotional work, regulation support, or behavioral change
- practical language, reframes, and intervention ideas
- group discussion of clinical stuck points

## **Vanessa Blackstone's teaching Style and Approach**

Vanessa's teaching style is a mix of education, clinical storytelling, experiential practice, humor, personal experience and real-time application. She likes the work to feel scientifically grounded, clinically useful, and deeply human.

She tends to go in depth into the brain and nervous system mechanisms behind symptoms, while also focusing on what this work actually feels like for clients who are scared, frustrated, doubtful, or exhausted from trying to recover.

A major emphasis in her teaching style is making the work tangible. Vanessa will use clinical examples, analogies, guided practice, discussion, and case consultation to help participants understand how PRT can be applied with nuance rather than used as a rigid protocol.

She feels it is important to clearly educate that PRT is not simply about telling people their symptoms are neuroplastic. It is about helping the brain and nervous system update their sense of threat, helping clients relate differently to sensations, and supporting them in building safety, confidence, emotional capacity, and freedom from fear-based symptom cycles.