

**The Exhausting Vigil:**  
*Releasing Trauma's Hold on the Hypervigilant Mind*  
**Video Course**  
Dr Janina Fisher

Video Course  
CPD hours: 6



Online video access remains available for 1 year or 3 years from the date you receive the video course, depending on the ticket type.

*Sleepless nights spent replaying conversations.*

*Decisions weighed and reweighed until action feels impossible.*

*Relationships strained under the burden of imagined slights and anticipated betrayals.*

Overthinking can appear deceptively benign — a mind working overtime. But beneath the calm surface, a foaming, tumultuous ocean churns: an internal world governed by fear, catastrophic predictions, and relentless self-surveillance. **What we call chronic rumination is not an excess of thought. It is the mind's desperate attempt to substitute control for trust** — to impose order where the body remains frozen in a hypervigilant state, unable to feel safe **enough to surrender or to rest.**

Following trauma, neurobiological changes in the brain affect the amygdala, hippocampus, and prefrontal cortex — regions responsible for fear processing, memory, and executive functioning. These changes disrupt the prefrontal cortex's capacity to regulate and stay anchored in the present. As a result, clients may experience chronic hypervigilance, panic attacks, and emotional dysregulation — symptoms that contribute to the development of trauma-based disorders. In an unconscious attempt to regain safety and control, many turn to obsessive rumination or mental rehearsals of danger. **But with their minds constantly preoccupied, overthinking clients often find it nearly impossible to engage fully in the therapeutic process.**

*"Unless we recognise overthinking as a survival strategy — not a cognitive flaw — therapy risks colluding with the very vigilance it seeks to soften."*

**As we try to help the client stop thinking and start feeling, we can appear to be nonprotective bystanders who don't see the danger that awaits.**



Clinical research increasingly reveals the hidden architecture of these thought patterns.

Hyperactivation of the brain's default mode network and disruptions in neuroception (Porges, 2011) leave survivors of overwhelming life experiences trapped in cycles of cognitive vigilance, reliving the past in a bid to predict and prevent future harm.

Yet traditional approaches — cognitive restructuring, reassurance, exposure — often falter.

They address the surface noise without reaching the survival-driven urgency underneath.

**Therapeutic empathy may be welcome, but we may end up addressing the surface noise without reaching the survival-driven urgency underneath.**

To intervene effectively, therapists must stabilise the internal protector parts that drive overthinking, restore somatic trust, and reestablish safety in the here and now.

### **Reframing the Clinical Challenge**

When overthinking is viewed merely as resistance or pathology, therapy risks reinforcing the client's internal siege.

**When we see it instead as an act of protection — a mind working to compensate for a body that no longer signals safety — we can intervene at the root.**

**To intervene effectively, therapists must first help clients to see these fear-based patterns as survival responses held by protector parts that still feel endangered years and decades later. By helping clients observe their overthinking as a survival strategy, we validate the parts that drive overthinking and reassure them that they have been heard. When overthinking is understood as a part, the client's relationship to these patterns begins to change organically.**

This rare opportunity to train with Janina Fisher, the internationally acclaimed trauma specialist, offers a new map for navigating chronic overthinking — grounded in her pioneering **Trauma-Informed Stabilization Treatment (TIST) approach**.

Drawing on decades of experience in somatic tracking, mindfulness-based interventions, and a deep understanding of parts dynamics, Janina will demonstrate how we can help clients break free from the tyranny of relentless mental exhaustion — not by challenging their thoughts, but by meeting the terror that sustains them **and helping them gently release the fears** so that clients can experience safety and repose in the here and now.

The events may be over, but haunting feelings and body memories rarely dissipate on their own; they are more likely to transform into unceasing rituals trapping the traumatised mind in an exhausting dance between past trauma and destructive future predictions. This complicated interplay between traumatic experiences and chronic overthinking is a complex phenomenon that develops or intensifies in the aftermath of traumatic events.

**Through TIST, clinicians can learn to identify and stabilise overthinking parts, track cues of their mounting cognitive overwhelm, and gently reconnect the parts to an embodied survivor with the courage to come to us for help.**

### **What Participants Will Explore**



This training offers a systematic, clinically grounded approach:

◆ **Understanding the Neurobiology of Overthinking:**

How trauma-altered activation of the brain's default mode network fuels self-referential rumination, and why conventional cognitive techniques often intensify rather than resolve the spiral.

◆ **Tracking Protector Parts in Real Time:**

How to recognise somatic and relational cues that signal overthinking protectors at work — and how to respond with strategic stabilisation rather than confrontation.

◆ **Differentiating Trauma-Based Ruminations from Obsessive-Compulsive Patterns:**

Why distinguishing survival-driven hypervigilance from OCD is critical to formulating effective interventions.

◆ **Stabilising the Internal System with TIST Techniques:**

Practical methods for building alliances with protector parts, fostering internal collaboration, and reducing the mind's burden of relentless vigilance.

◆ **Interrupting Cognitive Spirals Through Somatic Anchoring:**

Techniques for catching mental spirals as they form, using breathwork, grounding movement, and relational regulation to reestablish a sense of safety.

◆ **Restoring the Capacity for Presence and Spontaneity:**

Tools for helping clients transition from compulsive anticipation to embodied engagement with the present moment — restoring their capacity for trust, decision-making, and relational intimacy.

### A Clinical Illustration

*Consider Elena (not her real name):*

*Each therapy session would end with hours of obsessive mental replay. Had she revealed too much? Was the therapist secretly judging her? Had she missed some subtle cue that spelled rejection?*

What at first glance appeared to be social anxiety revealed a deeper dynamic: **a protector part prepared for threat and** desperately scanning for signs of danger in every interaction.

Rather than challenging Elena's interpretations or offering cognitive reassurance, the therapeutic focus was shifted. **Through careful mindful tracking of somatic and cognitive themes, TIST-based stabilisation techniques allowed Elena to relate to the vigilance as a signal from the protector part that all was not well inside.**

**Being heard — not argued with, but listened to and respected — allowed the protector part to relax its vigilance bit by bit. As the protector part came to trust that she would listen to it, she could share what she knew about the therapist and therapy.**

The work was not about "stopping the overthinking."

It was about **giving Elena a way to relate to her internal system of trauma-related parts, sharing her confidence that safety no longer depended on endless prediction and self-surveillance.**

It was about changing the terms on which her mind had been asked to survive.



The precise strategies and nuanced interventions that made this possible will be explored in depth during the training.

#### **By the End of This Training, Participants Will Be Able To:**

- ✓ Articulate how trauma reorganises cognitive functioning **through neurobiological changes driving hypervigilant rumination.**
- ✓ Differentiate trauma-driven overthinking from primary obsessive-compulsive processes using clinical assessment strategies.
- ✓ Identify and stabilise overthinking protector parts using TIST **techniques.**
- ✓ Implement real-time somatic interventions to interrupt cognitive spirals before emotional escalation occurs.
- ✓ Foster embodied safety through grounding, movement, and relational co-regulation techniques.
- ✓ Support clients in rebuilding internal trust and presence, enhancing spontaneity, decision-making, and relational resilience.

#### **Who Should Attend**

This training is designed for:

- Psychotherapists, psychologists, and counsellors working with clients trapped in cycles of chronic rumination, worry, decision paralysis, or self-sabotaging analysis.
- Clinicians seeking a trauma-informed, **integrated approach to cognitive hyperactivity and mental spiralling grounded in somatic techniques.**
- Mental health professionals interested in blending TIST, mindfulness, and somatic interventions for deeper, more sustainable therapeutic outcomes.

#### **Why This Opportunity Is Unique**

A pioneering figure in trauma psychotherapy and the architect of Trauma-Informed Stabilisation Treatment (TIST), Janina's influence on the field has been profound — shaping contemporary understandings of trauma, parts work, and somatic integration.

This webinar offers more than theoretical learning: it is an opportunity to experience her clinical insight, precision, and depth firsthand — to engage directly, ask questions, and refine therapeutic skills under the guidance of a true master clinician.

**Spaces are strictly limited. Early booking is strongly recommended.**

#### **About the speaker**

**Janina Fisher, Ph.D.** is a licensed clinical psychologist in private practice; Assistant Educational Director of the Sensorimotor Psychotherapy Institute; an EMDRIA Approved Consultant and Credit Provider; former president of the New England Society for the Treatment of Trauma and Dissociation; and a former instructor, Harvard Medical School. An international writer and lecturer on the treatment of trauma, she is the co-author with Pat Ogden of *Sensorimotor Psychotherapy: Interventions for Attachment and Trauma* and author of *Healing the Fragmented Selves of Trauma Survivors: Overcoming Self-Alienation and Transforming the Living Legacy of Trauma*. Dr Fisher lectures and teaches nationally and internationally on topics related to the integration of the neurobiological research and newer trauma treatment paradigms into traditional therapeutic modalities. For more information, go to [www.janinafisher.com](http://www.janinafisher.com).



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