

Breath, Body, and Being: Psychisme in Contemplative and Therapeutic Practices

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Abstract

Breath and embodied practices have been central to contemplative traditions and therapeutic modalities across cultures for millennia. This review investigates how the ****interplay of breath, body, and mental experience—collectively informing psychisme—****functions within both contemplative and clinical contexts. Drawing on neurobiological research, psychological trials, and traditional mind-body practices, we elucidate mechanisms by which breath regulation and somatic awareness influence emotional regulation, self-awareness, and well-being. Key concepts such as **interoception** and **respiratory vagal stimulation** help bridge ancient practices like pranayama and modern interventions like mindfulness-based stress reduction, showing shared mechanisms involving autonomic balance and neural integration. Empirical findings indicate that breath-centered practices reduce stress, anxiety, and depression, and enhance attentional and interoceptive capacities. We also review clinical applications—including PTSD and chronic pain interventions—and address methodological challenges in research synthesis. By situating breathing as both a **physiological and experiential anchor of psychisme**, this review advocates for integrative frameworks that unite contemplative wisdom with evidence-based therapeutic practice.

Keywords

breathwork, embodied cognition, contemplative practices, psychisme, interoception, yoga pranayama, mindfulness, therapeutic breathing, mind-body integration

1. Introduction: Psychisme, Breath, and Embodied Being

Human experience is profoundly embodied; sensations, affect, identity, and awareness are grounded in the **body's lived experience**. Breath—not merely a physiological process—serves as a **bridge between body and mind**, making it central to contemplative traditions and contemporary therapeutic practices. Practices such as pranayama in yoga and mindful breathing in meditation use conscious breath regulation to influence emotional states, cognitive focus, and autonomic function, thereby shaping psychisme—the dynamic interplay between psychological life and the body.

Modern science increasingly recognizes that breathing patterns do more than maintain metabolism: they affect neural processing, autonomic balance, and emotion regulation. Two broad research streams converge here: (1) contemplative science, which explores how

meditative and breath practices shape mental experience, and (2) clinical psychophysiology, which investigates therapeutic applications of breathwork. Together they form a multifaceted portrait of how **breath, body, and being** intertwine.

2. Historical and Cultural Roots of Breath-Centric Practices

Across cultures breath has been central to contemplative and healing traditions. In **Buddhist meditation**, the *Ānāpānasati* (mindfulness of breathing) practice harnesses awareness of inhalation and exhalation as a vehicle for cultivating presence and insight into mind and body. In yoga, **pranayama** describes a variety of controlled breathing techniques aimed at regulating prana (life force) and “settling” the nervous system—an idea recently supported by neuroscientific research showing effects of breath control on autonomic and brain function. Emerging Western practices such as modern **breathwork** draw on both traditional and contemporary therapeutic paradigms, using stylized breathing patterns to influence mental and emotional states.

These cultural practices emphasize that breath is not just air flow but a **somatic anchor for psychological transformation**.

3. Neurophysiology of Breath and Embodiment

3.1 Interoception and Neural Integration

Interoception—the sensing of internal bodily signals such as heart rate, respiration, and visceral states—forms the foundation of embodied experience. Neuroscientific research shows that contemplative practices that attune individuals to bodily sensations enhance **interoceptive awareness**, which correlates with emotional regulation and reduced psychological distress. Mechanistically, controlled breath influences the **autonomic nervous system (ANS)**—specifically the balance of sympathetic and parasympathetic activity—thereby affecting stress responses and emotional states.

3.2 Respiratory Vagal Stimulation Model

A theoretical framework known as **respiratory vagal nerve stimulation (rVNS)** proposes that regulated breathing physically stimulates the vagus nerve, enhancing parasympathetic tone and promoting relaxation, emotional balance, and improved physiological homeostasis.

This model bridges contemplative practice with neurophysiological mechanisms: slow, sustained breathing patterns produce vagal activation that supports calmness and stability.

4. Breath, Meditation, and Cognition: Empirical Evidence

4.1 Mindfulness and Emotional Regulation

Mindfulness meditation, which typically includes an emphasis on breath awareness, has been widely studied and shown to improve emotional regulation, decrease stress, and enhance attentional regulation. Meta-analytic evidence indicates that mindfulness practices significantly increase self-reported interoceptive awareness across diverse populations, a capacity that contributes to psychological resilience.

Furthermore, clinical trials comparing breathing-based meditation and cognitive processing therapy for conditions like PTSD find that breath-centric practices can yield significant symptom reductions, highlighting their potential therapeutic efficacy.

4.2 Anxiety, Stress, and Breathwork

Systematic reviews and meta-analyses show that **breathwork**—deliberate regulation of breathing patterns—consistently reduces self-reported stress levels compared to control conditions, with small-to-medium effect sizes.

Acute interventions combining embodied techniques with breath attention have also been shown to reduce state anxiety, suggesting that breathing interventions can quickly alter the embodied experience of stress and emotion.

5. Embodied Practices Beyond the Breath

While breath is central, contemplative practice often integrates the **whole body**—posture, movement, and sensory awareness—to shape psychisme.

5.1 Movement and Somatic Awareness

Dance and movement-based mindfulness practices engage the body in motion to cultivate present-moment awareness and emotional regulation. These embodied practices enhance self-regulation and interoception, extending breath-focused work into active bodily engagement.

5.2 Full-Body Contemplative Practices

Traditional practices like Tai Chi, Qi Gong, and somatic yoga combine breath with slow, deliberate movement. These integrated mind-body systems leverage **sensorimotor feedback**, attention, and breath pacing to influence emotional and cognitive states, demonstrating the synergy between breath and bodily being.

6. Clinical Applications: Breath and Somatic Therapies

Breath-centered practices are increasingly utilized as **complementary therapeutic modalities**.

6.1 Chronic Pain and Stress-Related Disorders

Approaches such as Breathworks and mindfulness-based pain management specifically integrate breath awareness with cognitive and somatic practices to help individuals cope with chronic pain, stress, and illness.

6.2 Psychological Disorders and Resilience

Breath-focused meditation forms part of evidence-based interventions (e.g., mindfulness-based cognitive therapy) that have been shown to reduce depressive symptoms and improve emotion regulation across clinical populations.

For populations with anxiety and PTSD, integrating breathwork into therapy can help modulate physiological arousal and facilitate engagement with traumatic memories in a regulated, embodied context.

7. Mechanisms Underlying Breath-Centered Psychisme

7.1 Autonomic Regulation and Vagal Tone

Conscious breathing techniques that slow respiratory rates and increase exhalation time promote enhanced **parasympathetic activity** via vagal pathways. This shift supports calm physiological states that underlie emotional regulation.

7.2 Predictive Coding and Experience

Interoceptive predictive coding models suggest that contemplative attention to breath reduces prediction errors between expected and actual bodily sensation, fostering a more coherent body-mind experience and reducing psychological distress.

By attending to the breath and internal sensations non-judgmentally, individuals **recalibrate mistaken body–mind signals** that contribute to anxiety and dysregulation.

8. Challenges and Directions for Future Research

8.1 Methodological Issues

Despite growing evidence, several methodological issues persist: variability in intervention types, dose and duration inconsistencies, and reliance on subjective outcomes. Future research should employ standardized protocols and objective physiological measures alongside self-report.

8.2 Integrative Frameworks

Integrative models that combine contemplative, neurophysiological, and biopsychosocial perspectives are needed to fully articulate how breath and embodied practices reshape psychisme. Longitudinal and cross-cultural studies promise deeper insights into the embodied lived experience.

8.3 Ethical and Cultural Considerations

Adapting traditional practices into clinical contexts requires cultural sensitivity and ethical application. Awareness of potential adverse effects—such as those occasionally reported with intensive meditation retreats—is essential for safe practice.

9. Conclusion

Breath, body, and being are inextricably linked in contemplative and therapeutic practices that shape psychisme. Conscious breathing, whether in meditation, yoga, or clinical breathwork, engages embodied neurophysiology and subjective experience to regulate emotion, enhance interoception, and support mental health. The evidence supports a model in which breath functions as a **gateway between physiology and psychological experience**, providing practitioners and clinicians with a tangible mechanism for cultivating well-being and embodied presence.

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