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SOMATIC DIALOGUE AS A MECHANISM OF NEUROPHYSIOLOGICAL REGULATION

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Abstract

Somatic dialogue is proposed as an integrative mechanism of neurophysiological regulation, defined as the dynamic interaction between internal verbal processing and interoceptive bodily awareness. Based on recent concepts of embodied cognition, interoception, and autonomic regulation, the paper suggests that the coupling between inner speech and bodily sensation constitutes a functional mechanism for modifying automatic physiological and behavioral responses. Synthesizing the existing literature on inner speech, interoceptive processing, and autonomic regulation, the analysis constructs a conceptual model in which somatic dialogue operates as a bidirectional regulatory system. Internal verbal processes function as top-down modulators of physiological states, while interoceptive signals provide bottom-up feedback that continuously reorganizes cognitive appraisals and affective responses. Directed embodied awareness is proposed as a means of reducing autonomic nervous system hyperactivation, establishing physiological safety, and restructuring automatic response patterns. The framework positions regulation as a trainable and measurable capacity, accessible through the structured completion of activation–recovery cycles. The proposed model integrates verbal-cognitive mechanisms within a structured body–mind regulatory process, providing theoretical grounding for applied methodologies such as the Somatic Reset Method™ (SRM) that operationalize these principles within structured, sequential regulation programs. Somatic dialogue is therefore presented as a conceptual foundation for applied, body-focused interventions addressing stress regulation and the development of adaptive self-regulation capacity.

Keywords: Somatic dialogue, inner speech, embodied cognition, autonomic nervous system regulation, interoceptive awareness, internal verbal processing.

Introduction

Human emotional and behavioral regulation has historically been framed in cognitive models that emphasize the role of cognitive processes such as appraisal, reasoning, and decision-making. But contemporary approaches to embodied cognition complicate this understanding by emphasizing the integral place of bodily processes and sensorimotor experience in cognition [10; 15; 18]. Not just a passive receptacle of cognitive commands, however, the body plays an active role in producing perception, emotion, and action within this paradigm.

A key concept within this paradigm shift is interoception as an indication of internal physiological states. Interoception has been proposed as a fundamental driver of emotional and affective life experiences along with self-regulation, due to its continuous feedback on physiological state [8]. According to Khalsa et al. (2018), the brain combines information within several internal systems (including cardiovascular, respiratory, visceral) in a dynamic form that can be used to impact emotional and behavioral behavior [8].

Concurrently, studies focusing on inner speech underscore inner verbal processing as a pivotal mechanism of self-regulation. Inner speech reflects human ability to make sense of experiences, control behavior, and control response behaviors via internal language [1]. Recent research also shows that self-talk is related to self-regulation, attentional control, and mindfulness-oriented processes [13].

Nonetheless, this phenomenon of interpenetration between internal verbal processes and bodily awareness has not been widely conceptualized within a unified paradigm. Current models tend to portray cognition and somatic processes as a dual system rather than integrated parts. That the interaction between physiological state and cognitive interpretation gives rise to emotional and behavioral response is especially relevant, thus limiting these possibilities.

This gap exists, and thus this article aims to explore somatic dialogue as an integrative interplay between inner speech and interoceptive awareness. The central proposition is that the conscious, structured coordination of internal language with bodily sensation constitutes a neurophysiological regulatory mechanism capable of modifying default response patterns. It is proposed that somatic dialogue reduces hyperactivation of the autonomic nervous system and establishes physiological safety (a construct consistent with polyvagal theory as developed by Porges (2022)), thereby enabling regulation as a trainable and transferable capacity rather than a situational outcome [11]. This theoretical framework directly informs applied methodologies that operationalize these principles within structured practice — among them, the Somatic Reset Method™ (SRM), developed through 15 years of personal somatic practice and study, combined with 4 years of structured delivery across individual, group, and organizational contexts. The SRM applies somatic dialogue principles within a six-phase sequential regulation program, positioning physiological engagement as the primary access point for attentional and cognitive change.

Through this regulatory process, individuals can shift from reactive, automatic response patterns toward more adaptive and regulated functioning. The purpose of this study is threefold: (1) to integrate current theoretical perspectives of embodied regulation into a unified conceptual framework; (2) to present a model of somatic dialogue as a structured integrative regulatory system; and (3) to establish its applicability as a theoretical foundation for applied body-based interventions that treat regulation as a trainable and measurable capacity.

Literature Review

1. Embodied Cognition as the Integrative Framework

Somatic dialogue is rooted in the concept of embodied cognition, which holds that cognition is inextricably tied to bodily and environmental experiences [10; 15; 18]. According to this conceptual background, cognition is not simply a static set of abstract mental operations but also reflects the constantly changing interplay between brain, body, and physical environment.

The 4E approach—embodied, embedded, enacted, and extended—also reinforces that mental processes are not independent of physiological and situational conditions [10]. This viewpoint is important for rethinking regulation in relation to a distributed process in which bodily signals actively impact the production and shaping of perception, emotion, and behavior.

But embodied cognition simply proposes that in the abstract body and mind must be connected, while also failing to give details of how cognitive and physiological mechanisms interact in real-time to modulate regulation. This limitation calls for a further investigation of interoception and internal cognitive processes as operational agents of embodied regulation.

2. Interoception and Predictive Models of Regulation

Interoception has also taken on a central role in the study of the physiological aspect of emotional and cognitive events. Khalsa et al. (2018) conceptually describe interoception as an overall multidimensional system that encompasses the sensing, interpretation, and integration

of internal bodily signals in several physiological areas [8]. Neural networks then continuously receive these signals and assimilate them into the subjective experience process as well as the behavioral processes that lead to those sensory signals.

Crucially, interoception is dynamic and predictive, not passive. Seth (2013) describes interoception as an interoceptive inference process, in which the brain estimates physical states and changes those predictions according to sensory clues [14]. This is consistent with Barrett's (2017) theory of constructed emotion, which holds that emotions are not innate and inalterable biological reactions but are built by the interplay of interoceptive signals and cognitive categories [2].

Recent work further develops this view. Barrett et al. (2025) emphasize the role of emotional experience emerging from dynamic predictive or integrative processes by which bodily signals are coupled with conceptual knowledge, underlining the importance of interoception in adaptive responses [3]. Similarly, Fermin et al. (2022) suggest a hierarchical structure in the insula allowing for higher-order cognitive processes to interact with interoception, while continuous interaction occurs between bottom-up sensory input and top-down regulation.

Farb et al. (2015) apply a theoretical framework to evidence-based approaches and found that, for interoceptive awareness and emotional regulation, contemplative practices produce improvements in well-being [4]. They found that greater sensitivity to bodily states may mean more adaptive responses to stress and emotional stimuli.

These perspectives together characterize interoception as a dynamic, predictive, and integrative system linking physiological states to cognitive and emotional processes. While these models highlight the essential role of bodily awareness within this regulatory system, their implications for understanding the ways in which cognitive processes—in particular, language-based systems—work with the regulation of physical sensations are less clear.

3. Inner Speech as a Mechanism of Cognitive Regulation

Inner speech is a key cognitive strategy for making sense of and controlling one's experiential world and behaviors. Alderson-Day and Fernyhough (2015) view inner speech as a sophisticated phenomenon including self-reflection, planning, and emotional regulation [1]. It operates as an internalized dialogue between perception and action.

There is also new empirical evidence that inner speech is strongly linked to self-regulatory measures and attentional control. Racy and Morin (2024) demonstrate that self-talk correlates significantly with mindfulness, self-concept clarity, and regulatory capacity, suggesting that internal verbalization plays a critical role in shaping both cognitive and emotional processes [13].

Although inner speech is recognized as important, it receives most of its research attention within cognitive paradigms, with very little consideration given to its interaction with bodily processes. This is a significant gap because cognition operates in continuous context with physiology.

This lack of an integrative standpoint restricts the exploration of how internal verbalization may shape, or be shaped by, physiological signals.

4. Autonomic Regulation and Physiological Safety

The autonomic nervous system (ANS) is a critical regulator of physiological responses through which we make responses to both internal and external stimuli. Disorders of ANS lead to high levels of stress and anxiety and increased maladaptive behavioral phenotypes [7].

Polyvagal theory presents a wide-angle view on the physiological states–behavior connection. Porges (2022) refers to physiological safety, arguing that adaptive function relies on the nervous system maintaining a regulated level of arousal [11]. When physiological safety is impaired, people are prone to reactive and defensive responses.

Therapeutic methods that center on the body similarly strengthen the role of interoception in autonomic modulation. Price and Hooven (2018) show that increased

sensitivity to bodily cues through the interoceptive system promotes adaptive responses that facilitate emotional regulation [12]. Similarly, Kuhfuß et al. (2021) demonstrate how somatic experiencing techniques can mitigate physiological hyperarousal, emphasizing the role of body-based interventions [9].

These results underscore the significance of bodily awareness in the regulation of autonomic activity. However, they primarily focus on bottom-up processes and do not fully account for the role of cognitive mechanisms in modulating physiological states.

2.5. Emotion Regulation as an Embodied Process

Emotion regulation has typically been defined as the cognitive process of modifying emotion through reappraisal as well as suppression strategies [6]. Although successful, however, these tactics often overlook the influence of physical processes on emotional experience.

Recent studies show that successful regulation necessitates some cross-coupling of cognitive and physiological systems. Mindfulness-based methods that are focused on awareness of bodily sensations have been proposed to enhance emotional regulation and alleviate stress [16]. Tsur et al. (2016) also show that body awareness is related to emotional clarity and authentic behavior, which suggests that embodied awareness will increase adaptive functioning [17].

Farb et al. (2015) reinforce this perspective by showing that interoceptive awareness mediates the relationship between contemplative practice and emotional health [4]. Such findings suggest that, rather than merely supporting regulation, bodily knowledge is in fact a critical and integral component of effective regulation.

6. Synthesis and Conceptual Gap

To sum up, interoception, inner speech, and autonomic regulation are key components in self-regulation, as shown in the literature reviewed here. Yet, these domains remain fragmented and are hardly integrated across cognitive and physiological perspectives.

More specifically, current models emphasize either:

- Bottom-up regulation (interoception, somatic therapies), or
- Top-down regulation (cognitive control, inner speech),

with insufficient consideration of their interaction. This split in perspective generates a conceptual void, as we lack evidence of how cognitive and bodily processes co-regulate behavior in the moment.

Herein, this work fills this gap by exploring somatic dialogue as an integrative approach that is explicitly linked to both inner speech and interoceptive experience.

Within this framework:

- Inner speech acts as a top-down regulatory mechanism, influencing the interpretation of bodily signals
- Interoception provides bottom-up feedback that shapes cognitive and emotional performance
- Together, they interact as a dynamic self-regulating feedback loop under autonomic modulation

This theoretical context builds on established theories of embodied cognition and predictive processing by positioning language as an active control mechanism at the interface of physiological processes. In this sense, somatic dialogue is more than a theoretical synthesis; it represents a new perspective that reconceptualizes self-regulation as a dynamic interplay between cognition and physiology (See Figure 1).

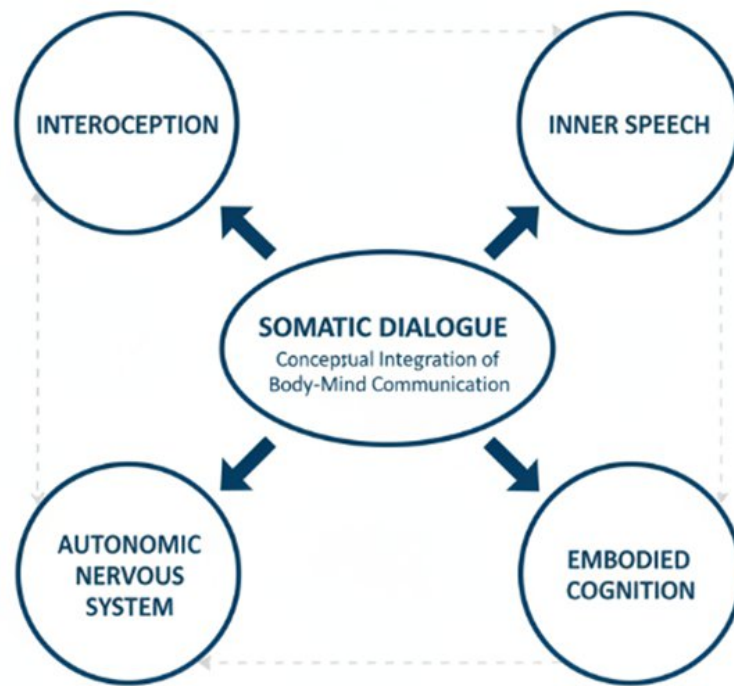


Figure 1. Theoretical Integration Map

Methodology

The research employed in this study is conceptual-analytical in nature, meaning that it is based on the design principles of theoretical frameworks to build a valid grounding for Somatic Dialogue as a mechanism of neurophysiological regulation. This research is grounded in the tradition of theory-building (integrative synthesis), in which existing knowledge domains are structured and reviewed in a systematic manner and then constructed into a new conceptual framework.

The methodological approach is based on the structured theoretical integration of four areas of focus: (1) interoceptive processing and predictive regulation [5; 8; 14], (2) inner speech and self-regulatory cognition [1; 13], (3) autonomic nervous system regulation and physiological safety [7; 11], and (4) embodied and contemplative approaches to emotional regulation [4; 12]. The choice of these domains was linked to their shared explanatory relevance for interacting cognitive and physiological processes.

The analysis was sequential in nature, consisting of three phases. In the first step, a comparative conceptual analysis was conducted across the selected theoretical frameworks, covering a wide range of phenomena while prioritizing bidirectional regulation, predictive processing, and embodied awareness. Second, cross-domain abstraction of these mechanisms allowed functional relations between internal verbal processes and interoceptive signaling to be identified. Third, these relationships were combined into a single conceptual framework, culminating in the Somatic Dialogue Model (See Table 1).

This proposed model understands regulation as an iterative reciprocal process, with inner speech functioning as a top-down modulatory system and interoceptive awareness as a bottom-up feedback loop that continuously reorganizes cognitive and emotional activity (See Figure 2).

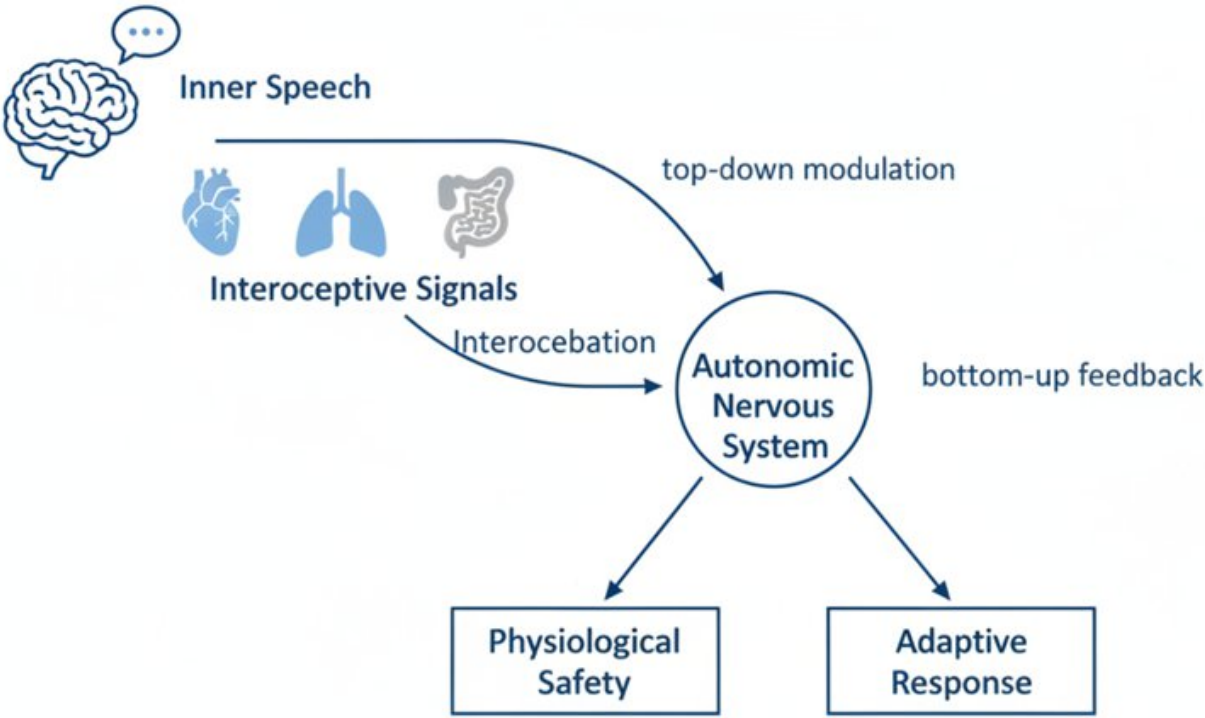


Figure 2. Core Model Visualization

Table 1. Core Components of the Somatic Dialogue Model

Component	Functional Role	Direction of Influence	Supporting Literature
Inner Speech	Internal verbal processing for interpretation, cognitive restructuring, and self-regulation	Top-down	Alderson-Day & Fernyhough (2015); Racy & Morin (2024)
Interoception	Perception and integration of internal bodily signals across physiological systems	Bottom-up	Khalsa et al. (2018); Fermin et al. (2022)
Predictive Processing	Integration of cognitive models with bodily signals to construct emotional experience	Bidirectional	Barrett (2017); Barrett et al. (2025); Seth (2013)
Embodied Cognition	Theoretical framework linking cognition to bodily states and environmental interaction	System-level	Newen et al. (2018); Varela et al. (2016); Shapiro & Spaulding (2024)
Autonomic Nervous System	Regulation of physiological arousal and behavioral readiness	Output system	Porges (2022); Hall et al. (2023)

Physiological Safety	Stabilized autonomic state enabling adaptive and flexible behavior	Outcome	Porges (2022)
Contemplative & Mindfulness Processes	Enhancement of interoceptive awareness and attentional regulation	Modulatory (bottom-up + top-down)	Tang et al. (2015); Farb et al. (2015); Tsur et al. (2016)
Body-Oriented Therapeutic Mechanisms	Applied somatic regulation through awareness and processing of bodily states	Bottom-up (applied)	Price & Hooven (2018); Kuhfuß et al. (2021)
Emotion Regulation Frameworks	Cognitive and affective strategies for modifying emotional responses	Top-down (traditional)	Gross (2015)

Findings

The analysis revealed a number of core patterns which confirmed that somatic dialogue might be a tool of neurophysiological regulation. The first was a consistent observation that interoceptive processing serves as a foundation for emotional and physiological regulation. It has been shown that bodily signals are continuous and embedded within cognitive processes; therefore, they influence perception and behavior [2; 8].

Second, inner speech emerges as an important site of cognitive control and self-regulation. Internal verbal processes were found to aid in the reinterpretation of experiences as well as in learning how to modulate emotional effects [1; 13].

Third, the autonomic nervous system is highly responsive to cognitive and emotional states. Maladaptive patterns are closely linked to dysregulation, whereas regulation correlates with feelings of physiological safety [7; 11].

Fourth, interventions based on body-oriented and mindfulness paradigms consistently show that increased awareness of bodily states helps individuals regulate their emotions and reduce physiological arousal [12; 16].

Finally, the combination of these results suggests that cognitive and physiological processes function within a coordinated regulatory framework. However, available models do not explicitly account for the interaction between inner speech and interoception as a distinct mechanism. These findings provide the empirical and theoretical foundation for the Somatic Dialogue Model.

Discussion

In this study, we suggest that somatic dialogue is a specific mechanism of neurophysiological regulation that arises through the interaction between inner speech and interoceptive awareness. Combining evidence from interoceptive neuroscience, embodied cognition, and cognitive regulation reinforces the view that self-regulation cannot be adequately explained through either purely cognitive or purely physiological models. Rather, regulation appears to emerge from the ongoing bidirectionality of these systems.

A key result of this framework is the reconceptualization of inner speech as not just a cognitive apparatus but a functional regulator of physiological states. The literature suggests that inner speech contributes to planning, self-reflection, and emotional modulation [1; 13]. Nonetheless, in the Somatic Dialogue Model, inner speech assumes a more structurally robust role as a top-down modulatory mechanism, able to shape interoceptive inference. This aligns with predictive processing accounts, suggesting that cognitive processes generate interpretive

frameworks that shape the perception of bodily signals [2; 14]. In this regard, internal verbalization does not merely depict experience; it actively co-produces it.

Interoception, by contrast, serves as a complementary bottom-up regulatory pathway, continuously informing cognitive processes about the physiological state of the organism. As Khalsa et al. (2018) demonstrate, interoceptive signals are integrated across multiple bodily systems and are pivotal in shaping affective experience [8]. Fermin et al.'s (2022) hierarchical model further supports this interaction, proposing that interoceptive signals are processed through networks that interface with higher-order cognition [5]. Within the proposed model, these signals function as constraints on cognitive interpretation, limiting both overly abstract and maladaptive cognitive patterns from dominating regulatory processes.

When it comes to regulating the autonomic nervous system, the interplay between these top-down and bottom-up mechanisms becomes especially significant. Dysregulation of the autonomic nervous system is consistently linked to increased stress reactivity and maladaptive behaviors [7]. The Somatic Dialogue Model proposes that the coupling of inner speech and bodily awareness can help alleviate such dysregulation by aligning cognitive appraisals with physiological states. This aligns with the concept of physiological safety in polyvagal theory [11], where adaptive functioning depends on a regulated level of arousal that supports engagement rather than defensive responses.

The findings of this study suggest that such states can be facilitated through somatic dialogue, enabling individuals to actively modulate both cognitive interpretation and somatic awareness. In particular, linking verbal processing with interoceptive attention may reduce sympathetic overactivation and promote parasympathetic regulation, thereby enhancing behavioral flexibility and adaptability.

This model builds on existing approaches in embodied cognition by addressing a key gap: the role of language as an active regulatory mechanism. While embodied and contemplative frameworks emphasize bodily awareness [4; 16], they often underrepresent the influence of internal verbal processes. Conversely, cognitive models of emotion regulation tend to overlook the embodied nature of emotional experience [6]. Somatic dialogue bridges this divide by conceptualizing regulation as a coordinated interaction between linguistic and physiological systems.

This integrative perspective also provides a more nuanced understanding of how automatic behaviors and emotional responses are shaped. According to the theory of constructed emotion, emotional experiences are actively generated through the integration of interoceptive signals and conceptual knowledge [3]. Within this framework, somatic dialogue can be understood as a mechanism that directly influences this construction process (See Figure 3). By altering the relationship between inner speech and bodily sensation, individuals may reshape predictive models and, consequently, modify habitual patterns of response.

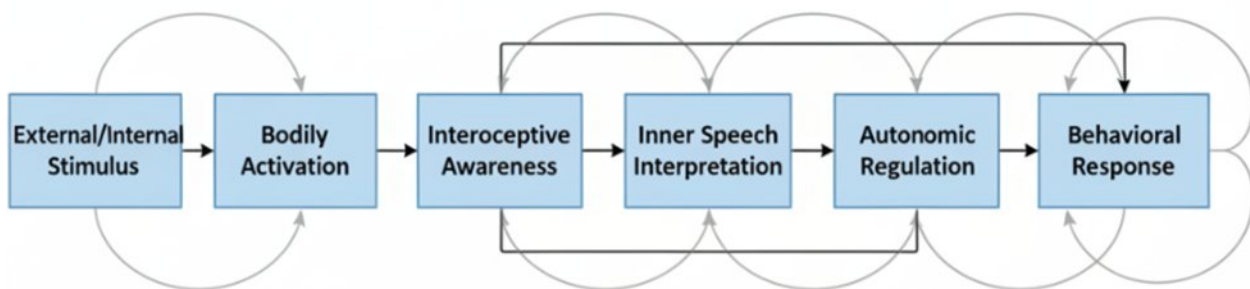


Figure 3. Process Flow of Regulation

From an applied perspective, these findings have important implications for both body-based and cognitive-behavioral interventions. Approaches that explicitly integrate verbal reflection with interoceptive awareness — such as guided internal verbalization during structured somatic attention — may enhance regulatory outcomes beyond what is achievable when these domains are addressed in isolation. This is supported by research on body-based interventions demonstrating that increased interoceptive awareness is associated with reduced physiological hyperarousal [9; 12]. The Somatic Dialogue Model further proposes that incorporating structured internal verbalization into sequential somatic practice — organized as complete activation–recovery cycles — could amplify these effects by ensuring that physiological, attentional, and cognitive processes are addressed within a unified regulatory sequence rather than in parallel. This principle is operationalized within applied frameworks such as the Somatic Reset Method™ (SRM), which positions the body as the primary access point for regulatory change and structures each session as a complete, sequential cycle from physiological activation through full integration, treating regulation as a trainable capacity with measurable outcomes across attentional, emotional, and cognitive domains.

The primary contribution of this study is the formalization of somatic dialogue as a unified regulatory mechanism that integrates top-down and bottom-up processes within a single conceptual framework. In contrast to traditional models that treat cognitive and physiological regulation as parallel or loosely connected, this approach conceptualizes them as components of a structured, interactive loop. It advances existing models of embodied regulation by explicitly embedding internal verbal processing within the architecture of neurophysiological regulation (See Table 2).

Table 2. Comparison with Existing Approaches

Approach	Focus	Limitation	Contribution of Somatic Dialogue
Cognitive Emotion Regulation [6]	Cognitive strategies	Limited embodiment	Integrates bodily feedback
Interoceptive Models [8]	Bodily awareness	Weak cognitive integration	Adds structured verbal modulation
Polyvagal Theory [11]	Autonomic states	Descriptive, not procedural	Provides actionable mechanism
Mindfulness Approaches [16]	Awareness	Non-specific mechanisms	Introduces structured interaction
Somatic Dialogue (Author)	Cognitive–somatic integration	—	Unified bidirectional regulatory model

Overall, the Somatic Dialogue Model provides a comprehensive framework for understanding self-regulation as an emergent property of cognitive–physiological interaction. By integrating insights from multiple theoretical domains, it offers both a conceptual advancement and a practical foundation for future research and intervention design.

Conclusions

This article introduced somatic dialogue as a conceptual mechanism of neurophysiological regulation characterized by the structured interaction of inner speech and

interoceptive awareness. The analysis demonstrated that cognitive and physiological processes operate within a single interconnected architecture in which top-down and bottom-up systems interact dynamically, and that this interaction can be deliberately engaged to develop regulation as a trainable and measurable capacity.

The findings indicate that somatic dialogue reduces autonomic hyperactivation, establishes physiological safety, and enables the structured modification of automatic behavioral patterns through the completion of activation–recovery cycles. By integrating principles of embodied cognition, interoception, and cognitive regulation, the model extends existing theoretical frameworks and provides a new operational perspective on self-regulation as a dynamic, bidirectional process.

Crucially, the Somatic Dialogue Model establishes the theoretical groundwork for applied interventions that treat regulation as a structured, sequential, and measurable process. Applied methodologies such as the Somatic Reset Method™ (SRM) — developed through 15 years of personal somatic practice and study and 4 years of structured delivery across individual, group, and organizational contexts — operationalize these principles within a complete regulatory architecture, demonstrating that the theoretical mechanisms described in this model can produce consistent, replicable outcomes in practice. Further empirical research is needed to provide quantitative validation of the model and to support its broader application across clinical, therapeutic, and organizational contexts.

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