

Breathing practices

Choosing Whether Breath Attention Fits

Adults and teens 13+ | 10 to 15 minutes

Attention to breathing is optional. Some people find it useful; others feel more anxious, dizzy, trapped, or uncomfortable. You do not need deep breaths, breath holding, a set rhythm, or closed eyes. This page helps you choose whether to try ordinary breath awareness or another focus.

Choose a recent, manageable example. Write, draw, or discuss your answers. Skip anything that does not fit; this page is not a diagnostic assessment.

Keep breathing ordinary

If you choose to try, briefly notice breathing without making it deeper, slower, or different. Keep a comfortable position and stop if attention increases discomfort. You can focus on an external object instead, or skip practice entirely.

Let the response guide you

No calming result is required. If breathing symptoms are new, severe, or concerning, seek appropriate medical attention rather than assuming stress. Ask a clinician about suitability when respiratory, cardiac, panic, or trauma-related concerns affect practice.

1. Would you prefer ordinary breath attention, an external focus, or no exercise today?

2. What position, setting, or stop signal would support your choice?

3. What did you notice, and did the practice become uncomfortable?

4. What alternative or professional question would be useful next time?

Clinical use and adaptation

Do not prescribe forced slow breathing, breath holds, hyperventilation, or a universal rhythm through this page. Consider panic, dissociation, respiratory and cardiac conditions, and medical red flags. Respect refusal and avoid equating breath control with successful regulation.