

Ontological Addiction Theory:

Life as a Meditative Practice of Growth and Insight

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- I. Introduction
- II. Ontological Addiction
- III. Empirical Support
- IV. Treatment
- V. Conclusions

■ Abstract

Ontological addiction theory (OAT) is a metaphysical model of human suffering which asserts that human beings are 1. inclined to construct and become addicted to flawed beliefs concerning the manner in which they exist, and that 2. these beliefs can become maladaptive, leading to range of functional impairments. The theoretical underpinnings of OAT derive from Buddhist theory, metaphysics and to a lesser extent clinical psychology, with a central view being that all phenomena, including the self, do not manifest independently or inherently. By synthesizing the theoretical and empirical contributions to OAT from the past decade, the present paper provides an updated perspective on how the theory continues to evolve. A

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further aim of the paper is to further outline and evaluate the path to treating ontological addiction, which involves phases of 1. becoming aware of the self, 2. deconstructing the self, and 3. reconstructing a dynamic and non-dual self. It is concluded that these treatment phases highlight the underlying assumption in OAT that although suffering is a fundamental aspect of the human condition, life itself can be lived as a practice of meditation, with each moment reflecting an opportunity for growth, insight and spiritual transcendence.

Keywords ● Ontological addiction theory, Suffering, Mental Illness, Attachment, Emptiness

I . Introduction

Ontological Addiction Theory (OAT) is a model of human suffering which asserts that human beings are inclined to form flawed beliefs concerning the manner in which they think they exist, and that these beliefs can become addictive, leading to functional impairments and mental illness.¹⁾ OAT is based on insights from Buddhist philosophy, metaphysics and to a lesser extent clinical psychology, and was first proposed to help foster effective assimilation of Buddhist practices and principles into Western applied settings, including within clinical, occupational and educational domains.²⁾

1) Shonin et al.(2016).

2) Shonin et al.(2013).

By synthesizing successive developments of OAT over the last decade as delineated in three papers by Shonin et al³⁾ and Van Gordon et al,⁴⁾ the present paper provides an updated reflection on the philosophical and empirical underpinnings of OAT, including evaluating its fit with established models of addiction. A further aim of the paper is to outline and evaluate the path to treating ontological addiction, based on phases of 1. becoming aware of the self, 2. deconstructing the self, and 3. reconstructing a dynamic and non-dual self. More specifically, although suffering is a fundamental aspect of the human condition, the present paper seeks to highlight a key component of OAT philosophy, which is that life itself can be lived as a practice of meditation, with each moment reflecting an opportunity for growth, insight and spiritual transcendence.

II. Ontological Addiction

Ontological addiction refers to an individual's addiction to the belief that they inherently exist as an independent and autonomous entity and has been defined as “*the unwillingness to relinquish an erroneous and deep-rooted belief in an inherently existing ‘self’ or ‘I’ as well as the ‘impaired functionality’ that arises from such a belief*”.⁵⁾

In terms of onset, ontological addiction symptoms are asserted to arise progressively, with the initial manifestation typically occurring after

3) Shonin et al.(2013); Shonin et al.(2016).

4) Van Gordon et al.(2018).

5) Shonin et al.(2013), 64.

the development of a sense of selfhood in childhood.⁶⁾ Typically, there is an intensification of symptoms during adulthood, that remain persistent unless treatment is instigated. The functional consequences of ontological addiction are understood to involve the mind “turning-in” on itself such that addiction to selfhood obstructs clarity of perspective and reasoning competency. A disproportionate focus on the “self” also impairs ability to observe and become aware of the present moment.⁷⁾

According to Shonin et al⁸⁾ and Van Gordon et al,⁹⁾ the key components of the aforementioned definition can be understood as follows:

1. Deep-rooted belief

OAT asserts that human beings are prone to forming consuming and deep-rooted beliefs that they inherently exist as a discreet independent self. In certain respects, this is similar to the concept of core beliefs within cognitive behavioral therapy,¹⁰⁾ which reflect entrenched beliefs that are often not recognized by the individual yet significantly affect how they interpret the world.¹¹⁾ However, over and above their usage within CBT, according to OAT deep-rooted beliefs depict a much more pervasive form of core belief. Indeed, according to Buddhist thought, after death the most subtle aspect of a person's mind or consciousness is eventually reborn within another physical or non-physical form.¹²⁾ The precise rebirth an individual

6) Van Gordon et al.(2018).

7) Van Gordon et al.(2018).

8) Shonin et al.(2016).

9) Van Gordon et al.(2018).

10) CBT; Wells(1997).

11) Shonin et al.(2016).

is attracted to is understood to be influenced by whichever cognitive and behavioral response patterns were most dominant during the individual's current and prior lives.¹³⁾ According to Shonin et al, “these embedded patterns of thinking and behavior leave an imprint on an individual's mind-stream that becomes prominent after death and propels the innermost aspect of consciousness towards (or away from) a particular rebirth”.¹⁴⁾ This results in sentient lifeforms being born with a latent tendency to cling to a self and to formulate *deep-rooted beliefs* that they exist in the inherent sense of the word.

2. Inherently existing self or I

Models of the self in Western psychology range from those that posit a self that is concrete and which exists as a discrete entity, to those that assume a more fluid self-schema.¹⁵⁾ Nevertheless, regardless of whether one examines, for example,¹⁶⁾ humanistic formation of *self-worth*, *self-image*, and *ideal-self*, social psychological models of a relational self,¹⁷⁾ Jung's notion that the self cannot be confined to a given location in time or space, or poststructuralist debates on the self-concept (e.g., Gergen, 2009), most established models of self in Western psychology are locus-orientated in one form or another, and therefore assert or imply the self intrinsically exists.¹⁸⁾

12) Sogyal(1998).

13) Van Gordon et al.(2016).

14) Shonin et al.(2016), 661.

15) Shonin et al.(2016).

16) Rogers(1959).

17) Smith & Mackie(2007)

Although for most people belief in the existence of a definite “self” or “I” is likely to be reassuring on both a conscious and sub-conscious level, the existence of such an “I” entity is logically implausible. This is because without exception, phenomena do not exist as separate discreet entities but arise only in dependance on countless causes and conditions. Taking the human body as an example, its existence relies on the air and wind, animals and plants, rain and water, the sun, gravity and innumerable other factors. If any one of these conditions is not present, the human body no longer exists. The fact that all phenomena are fundamentally interconnected to the point of being boundless means that they are of the nature of “non-self” or “emptiness” and do not exist independently.¹⁹⁾ However, for the same reasons that all phenomena are empty of a self that intrinsically exists, it can also said that phenomena are “full” of all things, based on the premise that the whole implies the one and the one implies the whole.²⁰⁾

3. Unwillingness to relinquish and impaired functionality

The terms *unwillingness to relinquish* and *impaired functionality* refer to the addictive component of ontological addiction, and the associated negative consequences. OAT asserts that by believing in their independent and inherent existence, individuals augment their sense of self to the extent that they relate to themselves as the centerpiece in a world in which all other lifeforms and phenomena are peripheral.²¹⁾ According to

18) Van Gordon et al.(2016).

19) Nhat Hanh(1992).

20) Shonin et al.(2016).

21) Van Gordon et al.(2018).

Van Gordon et al, “each time an individual relates to the world and its phenomena as peripheral to themselves, belief in selfhood is reaffirmed and this elicits rewards in the form of a more secure sense of self”.²²⁾ OAT asserts that self-concept is reinforced even when negative experiences arise as these strengthen an individual's view that there exists a discrete “I” or “self” that can experience pain or pleasure depending upon their interactions with external people, objects and places.²³⁾

According to Van Gordon et al, belief in a self that intrinsically exists can facilitate an addiction feedback loop due to the encoding of subsequent self-belief constructs each time the individual acquires affirmative feedback that its endeavours in the service of “self” are necessary. Efforts to further the interests of the self might include, for example, trying to accumulate wealth, improving one's reputation, and/or eliminating harms or perceived threats. While such endeavours might be seen as tantamount to living a normal life, they are understood to become maladaptive if motivated by the belief that the self independently and intrinsically exists. This means that the individual suffering from ontological addiction invariably undertakes activities with only a self-orientated and superficial regard for the other individuals and “external” phenomena they interact with.²⁴⁾

In terms of how ontological addiction can impair functionality, Van Gordon et al²⁵⁾ assert that in conjunction with flawed beliefs concerning how the self and reality exist, selfish ego-driven behaviours cause individuals to become attached to themselves as well as to external objects, people, and

22) Van Gordon et al.(2018), 893.

23) Van Gordon et al.(2018).

24) Van Gordon et al.(2018).

25) Van Gordon et al.(2018).

experiences. Attachment in this context has been defined as “the over-allocation of cognitive and emotional resources towards a particular object, construct, or idea to the extent that the object is assigned an attractive quality that is unrealistic and that exceeds its intrinsic worth”.²⁶⁾ However, because the “self” is an imputed construct, no level of desirable circumstances will culminate in lasting happiness.²⁷⁾ Van Gordon et al explain this as follows:

having finally acquired the sought-after commodity, person, or situation ... dissatisfaction will gradually reemerge and new commodities or experiences will then be allocated a level of appeal such that they substitute the former objects of attachment ... Attachment is a thirst that can never be quenched and it leads to psychopathology determinants such as fatigue, sleep impairment, ruminative thinking, resentment and stress.²⁸⁾

According to OAT, another reason why self-centredness is maladaptive relates to the principle of impermanence, which refers to the fact that phenomena do not remain indefinitely and are in a constant state of transience.²⁹⁾ Therefore, endeavours to preserve selfhood can only ever result in temporary happiness and inevitably precipitate as suffering because as explained in the Buddhist teachings: (i) all that is acquired will be lost (e.g., wealth), (ii) that which comes together must dissipate (e.g., relationships), (iii) that which rises to a high position will fall to a low position (e.g., fashions and regimes), and (iv) that which is created will be

26) Shonin et al.(2014), 126.

27) Shonin et al.(2016).

28) Van Gordon et al.(2018), 893.

29) Shonin et al.(2016).

destroyed (e.g., the human body).³⁰⁾

According to Shonin et al and Van Gordon et al, ontological addiction meets each of the six criteria delineated in Griffiths'³¹⁾ components model of addiction, which maps onto the criteria for addictive behaviour in the Diagnostic and Statistical Manual of Mental Disorders (5th Edition). According to Griffiths, a genuine form of addiction will always have component features of (i) salience, (ii) mood modification, (iii) tolerance, (iv) withdrawal, (v) conflict, and (vi) relapse. Examples adapted from Shonin et al³²⁾ and Van Gordon et al³³⁾ of how ontological addiction meets these criteria are as follows:

1) ***Salience***: belief in a discrete 'I' construct dominates thoughts, feelings, and behaviours, and becomes important to the degree that the individual with ontological addiction is unable to relate to the belief as something that is separate from themselves.

2) ***Mood modification***: belief in an intrinsically existing 'self' results in craving for objects, situations and experiences that are believed to advance the interests of the self. Acquiring such objects, situations, or experiences elicits temporary feelings of happiness, satisfaction and elation.

3) ***Tolerance***: increasing levels of immersion in self-centred emotions,

30) Wallace(2001).

31) Griffiths(2005).

32) Shonin et al.(2016).

33) Van Gordon et al.(2018).

discursive thinking patterns, and worldly affairs are required to sustain and further augment the erroneous belief in inherent existence.

4) *Withdrawal symptoms*: any suggestion of transcending selfhood is regarded as a threat and repelled.

5) *Conflict*: belief in an intrinsically existing ‘self’ results in attachment to objects, situations, and experiences that are understood to advance the interests of the self. Conversely, not acquiring such objects, situations or experiences elicits aversion in the form of intrapersonal and intra-psychic conflict.

6) *Relapse*: ego-driven cognitive-behavioural processes rapidly re-establish themselves following efforts to undermine addiction to selfhood.

III. Empirical Support

An Ontological Addiction Scale was recently developed with theoretical underpinnings based on Griffiths' aforementioned components model of addiction and the Buddhist “eight mundane concerns”. The latter of which comprises 1. Feeling pleased or delighted due to having money and/or material possessions, 2. Feeling disappointed, upset or angry due to losing possessions or not acquiring them, 3. Feeling pleased when praised or approved of by others, 4. Feeling upset or dejected when criticised or subjected to disapproval, 5. Feeling pleased due to having a good reputation,

6. Feeling dejected or upset due to having a bad reputation, 7. Feeling delighted when experiencing sense pleasures, and 8. Feeling dejected and upset by unpleasant sensory experiences. In the initial validation study, ontological addiction was positively correlated with a range of mental health measures, such as depression, anxiety and self-esteem.³⁴⁾

As part of completing the scale, respondents are asked to reflect on the extent to which ego governs their choices, thoughts and behaviours. More specifically, in the 12-item short-form version, respondents are asked to use a 5-point Likert scale (0=Never, 4=Always) to rate how often the following statements have applied to them during the last year:

- 1) Felt you needed to receive more attention or affection from a person you care about?
- 2) Thought about how you could avoid experiencing discomfort?
- 3) Felt uplifted when you were praised?
- 4) Felt good when you experienced fewer challenges?
- 5) Felt you needed to do better in order to avoid shame or humiliation?
- 6) Felt an increasing need to occupy yourself to avoid being on your own?
- 7) Found it hard to accept your mistakes and shortcomings?
- 8) Found it hard to overcome rejection?
- 9) Felt low when you were criticised?
- 10) Felt inferior to others?
- 11) Stopped being kind to somebody you care about because they offended you?

34) Barrows et al.(2022).

12) Felt worried about not being recognised after having acted in others' interests?

Van Gordon et al recommend that in addition to targeting the components of addiction, treatment approaches should aim to weaken attachment to selfhood and therefore help reduce the loci upon which conceptual and emotional baggage can accumulate.³⁵⁾ This is consistent with research showing that non-attachment mediates the relationship between meditation and reductions in both somatic and psychological fibromyalgia symptoms.³⁶⁾ Reduced attachment to self is also correlated with (for example) (i) lower subjective perception of distress as well as better somatic and psychological health more generally,³⁷⁾ (ii) increased acceptance, mindfulness, self-compassion, eudemonic and subjective wellbeing,³⁸⁾ (iii) increased prosocial behaviour,³⁹⁾ and (iv) lower levels of psychological distress and chronic pain.⁴⁰⁾

Furthermore, an intervention known as Meditation Awareness Training (MAT), which teaches selflessness and accepts the key assumptions of OAT, has been shown to be a beneficial treatment for individuals suffering from (for example) (i) work addiction,⁴¹⁾ sex addiction,⁴²⁾ gambling addiction,⁴³⁾ fibromyalgia,⁴⁴⁾ and stress, anxiety, and depression,⁴⁵⁾ MAT

35) Van Gordon et al.(2018).

36) Van Gordon et al.(2017a).

37) Pande & Naiku(1992).

38) Sahdra et al.(2010).

39) Sahdra et al.(2015).

40) Van Gordon et al.(2017a).

41) Shonin et al.(2014a); Van Gordon et al.(2017b).

42) Van Gordon et al.(2016a).

43) Shonin et al.(2014b).

has also been shown to improve work-related wellbeing and job performance in middle managers⁴⁶⁾ as well as improve civic engagement in clinical samples.⁴⁷⁾ Furthermore, qualitative studies of MAT have demonstrated that participants associate engaging in emptiness meditation techniques with the undermining of maladaptive egoistic constructs as well as improvements in psychological and spiritual wellbeing.⁴⁸⁾

In respect of mechanisms of action, Van Gordon et al assert that cultivating an experiential understanding of emptiness helps to foster a view of reality that is more accurate and functionally adaptive than the normal mode of perceiving. This is in line with the transtheoretical model of behaviour change⁴⁹⁾ which asserts that the metacognitive effects of emptiness and related forms of training facilitate ease of movement in behavioural change. More specifically, Van Gordon et al state the following:

A less pronounced sense of self fosters clarity of perceptive and cognitive processes and allows the individual to construct a sense of self that is dynamic, inseparable from its environment, and that is ‘full’ and complete due to experiencing that all things are ‘empty’ ... In other words, when the sense of selfhood – which is the locus upon which emotional and conceptual ‘baggage’ can accumulate – becomes less pronounced, both psychological flexibility and psychological wellbeing begin to increase.⁵⁰⁾

44) Van Gordon et al.(2017a).

45) Van Gordon et al.(2014).

46) Shonin et al.(2014c).

47) Van Gordon et al.(2016b).

48) Shonin et al.(2014); Shonin & Van Gordon(2015); Van Gordon et al.(2016b).

49) Prochaska et al.(1995).

50) Van Gordon et al.(2018), 894.

IV. Treatment

Shonin et al have proposed the following phasic pathway as a treatment for ontological addiction: (i) becoming aware of the self, (ii) deconstructing the self, and (iii) reconstructing a dynamic and non-dual self.

1. Becoming Aware of the Self

The treatment of ontological addiction focusses on undermining an individual's deep-rooted belief that they inherently exist. However, as part of this process, it is first necessary that the individual becomes aware of the fact that they have constructed a belief self along with the various attributes of this imputed self.⁵¹⁾ Consequently, the first phase of treating ontological addiction is concerned with improving self-awareness and on helping individuals realize the fact that there are no plausible grounds upon which it can be asserted that they exist intrinsically as a discrete “self” entity. For most people, the implausibility of selfhood will be a difficult notion to digest.⁵²⁾ Consequently, a degree of psycho-education focusing on the logic and principles of emptiness is recommended at the start of treatment.⁵³⁾

Another important element of this first phase of treatment is becoming proficient at cultivating meditative awareness. Consequently, meditative techniques used throughout this initial treatment phase are typically more concentration-based (i.e., rather than insight-based).

51) Shonin et al.(2016).

52) Van Gordon et al.(2016).

53) Shonin et al.(2013).

Concentrative meditation is understood to facilitate the development of self-awareness, including awareness of the movements of both body and mind.⁵⁴⁾ Mindfulness serves an important role in this context by helping to regulate concentration to ensure that it remains focused and meditative in aspect.⁵⁵⁾ A principal objective is for the individual to cultivate the capacity to maintain a degree of meditative awareness outside of formal seated meditation sessions. According to Shonin et al, key considerations for effective concentrative meditation are as follows:⁵⁶⁾

- 1) The aim should be to introduce meditative awareness into daily life and the living environment.⁵⁷⁾
- 2) Seated meditation sessions of excessive duration should be discouraged.
- 3) Breathing can be used as an attentional referent to anchor concentration in the present moment.
- 4) Whilst maintaining awareness of breathing, meditative attention should be directed, in successive order, towards the body, feelings and mental processes (e.g., thoughts, perceptions, self-centered beliefs and cognitive-behavioral responses, attachments, etc.).
- 5) The primary objective is to observe phenomena (e.g., sights, sounds, feelings and thoughts, etc.) as they enter the attentional sphere. Phenomena should be permitted to endure as objects of awareness until such time as they naturally exit the attentional sphere.

54) Dalai Lama & Berzin(1997).

55) Shonin et al.(2016).

56) Shonin et al.(2016).

57) Lomas et al.(2017).

6) Over exertion, including forced breathing, should be discouraged.

The overall objective of concentrative meditation is to introduce tranquility into the body, and “breathing space” into the mind. Feelings of meditative tranquility should be encouraged yet attachment to them should be discouraged. If meditative tranquility arises, it should be treated as an observable phenomenon and as with all other sensory or psychological experiences, related to as an object of meditative awareness.

2. Deconstructing the Imputed Self

The intention of Phase One of the treatment process is to create the appropriate conditions for uprooting maladaptive ego-centered core beliefs by fostering familiarity with the various attributes of the imputed self. The process of deconstructing or uprooting the imputed self is the focus of Phase Two, which unfolds based on both *indirect* and *direct* psycho-spiritual techniques.⁵⁸⁾

1) Indirect techniques

During Phase Two of treating ontological addiction, the individual is taught to foster and practice spiritual competencies including generosity, patience, loving-kindness, ethical awareness, compassion and death awareness.⁵⁹⁾ The purpose of which is to indirectly undermine ego-attachment, and therefore complement the action of meditative techniques

58) Shonin et al.(2016).

59) Shonin et al.(2016).

that are intended to directly target self-addiction (see below).

These spiritual competencies have each been the subject of empirical enquiry and to different degrees have been shown to improve psychological wellbeing mental health. For example, compassion and loving kindness-meditation have been shown to increase activity in areas of the brain linked with the regulation of neural emotional circuitry (e.g., post-central gyrus, anterior insula, inferior parietal lobule, amygdala and right temporal-parietal junction).⁶⁰⁾ Increased regulation of neural emotional circuitry is understood to help modulate descending brain-to-spinal cord noxious neural inputs,⁶¹⁾ and may offer a rationale as to why some individuals experience improvements in pain intensity and pain tolerance following compassion and loving-kindness meditation.⁶²⁾ Loving-kindness and compassion meditation have also been shown to enhance implicit and explicit affection towards unknown and known others, and to thus improve social-connectedness and prosocial behavior.⁶³⁾ In turn, greater social connectedness can exert a protective influence over adversity as well as associated feelings of isolation and low sense of purpose.⁶⁴⁾

2) Direct techniques

Breath awareness and meditative tranquility as referred to above are known to slow down autonomic and psychological arousal.⁶⁵⁾ This, in turn,

60) Keyzers(2011).

61) Melzack(1991).

62) Shonin et al.(2015).

63) Leiberg et al.(2011).

64) Shonin et al.(2015); Shonin et al.(2016).

65) Shonin & Van Gordon(2015).

permits thoughts, feelings and sensory processes to be identified and meditatively explored on an individual basis.⁶⁶⁾ This meditative investigation of phenomena is an important aspect of Phase Two of the treatment, and the contemplative technique taught to individuals to directly investigate “selfhood” is known as *vipassanā* (Pāli), or insight meditation. However, it should be noted that *Vipassanā*, which translates as “superior seeing”, is often incorrectly referred to in the scientific and popular Buddhist literature as having the same meaning as mindfulness.⁶⁷⁾

Based on the way *vipassanā* meditation is taught and conceptualized in the treatment of ontological addiction, the technique involves capturing and refining the attentional focus cultivated during concentrative meditation (i.e., treatment Phase One) in order to direct it in a very specific and deliberate manner.⁶⁸⁾ As explained by Shonin et al, insight meditation is best practised following a prior period of concentrative meditation:⁶⁹⁾

The reason for this is because the tranquilization of body and mind that occurs during concentrative meditation helps to introduce focus and perceptive clarity into the mind ... During *vipassanā* meditation, this attentional focus is then directed in order to try to identify the causes, intrinsic properties, and absolute nature of a given phenomenon. More specifically, the technique involves attempting to locate the ‘selfness’ of the object of meditation and of the meditator more generally. When *vipassanā* meditation is practised correctly, the individual begins to realize that it is impossible to identify an intrinsically existing self within either themselves or an external object ... Consequently, the

66) Van Gordon et al.(2016).

67) Van Gordon et al.(2015); Shonin et al.(2016).

68) Shonin et al.(2016).

69) Shonin et al.(2016).

deep-rooted core beliefs that sustain ontological addiction begin to be undermined.

3. Reconstructing a Dynamic and Non-Dual Self

Although removing attachment to self is the objective of the final phase of treatment, this should not be confused with not caring for self. Indeed, the idea is not to eliminate any form of identification with a self but to remove attachment to a wrong view of self. However, it should be remembered that while non-self is a helpful therapeutic concept that describes an experience or state of spiritual realization, it can never fully embody that state or experience.⁷⁰⁾ In other words, non-self is a construct of subject-object (i.e., self-other) conceptualization and as such, it is still a low-level expression of ontological addiction that must ultimately be relinquished. When both the concepts of self and non-self are discarded, an individual can then abide as “true self”, which encompasses both the individual and the whole.⁷¹⁾

Consequently, “deconstructing the self” in this manner should not in any way be confused with a form of dissociative experience (e.g., depersonalization/derealization disorder), which would likely result in harmful consequences. Indeed, for an individual to function effectively, they need to understand that society considers them to be a distinct person, and that certain roles and behaviors are required of them. According to Shonin et al:

70) Shonin et al.(2016).

71) Shonin et al.(2016).

the self that the individual reconstructs during ... is one that, having realized it is empty of intrinsic existence, is comfortable with assuming a self-identity for the purposes of effectively functioning in the world. In comparison with the self that was present at the onset of treatment, this ‘newly constructed self’ is a much more fluid and dynamic entity ... the newly constructed “self” regards itself as a deeply interconnected entity that is inseparable from the conditions, people, and phenomena around it.⁷²⁾

This increased awareness of prevailing environmental and psychological conditions can give rise to *phenomena feedback effect* (PFE), which reflects an ability to reciprocally communicate and transact with the present moment in real time.⁷³⁾ PFE is asserted to increase an individual's ability to anticipate how particular circumstances might unfold due to the individual knowing that they, and the situations in which they find themselves, are inseparable and continuously changing.⁷⁴⁾ In other words, relating to the self and all phenomena as unfixed transient entities fosters a capacity to work with, and stay abreast of, the present moment.⁷⁵⁾

The dynamic and non-dual self that arises during Phase 3 of the treatment is understood to have greater perceptive clarity because due to not being attached to the idea that they exist intrinsically, individuals can reduce the amount of “me”, “mine” and “I” that they allocate to work and life engagements.⁷⁶⁾ According to Shonin et al this means that they are:

better able to ‘see the big picture’, and are less likely to be preoccupied

72) Shonin et al.(2016), 668.

73) Shonin et al.(2016).

74) Shonin & Van Gordon(2015); Shonin et al.(2016).

75) Shonin et al.(2016).

76) Shonin et al.(2016).

with their own agenda and entitlements. Furthermore, by reducing ego-centric beliefs and behaviors, there no longer exists a substantial 'self' that can be (for example) offended, let down, cheated, or traumatized. In other words, there is no longer a fixed locus upon which maladaptive cognitive-affective states can assemble, and the newly constructed and dynamic 'self' thus liberates itself from the various functional impairments associated with ontological addiction.⁷⁷⁾

V. Conclusions

Compared to established western psychological models of self and human suffering, OAT reflects an alternative perspective of how underlying beliefs concerning selfhood are shaped and reified, and how these can then impact health, personal growth and psycho-spiritual perspective. Consistent with traditional Buddhist teachings, emerging research findings suggest that addiction to the belief in an independently and inherently existing self, known as ontological addiction, is positively correlated with negative health consequences.⁷⁸⁾ According to OAT, this is because selfish egoistic beliefs inevitably cause the mind to contract, thus limiting a person's capacity for compassion and spiritual growth.⁷⁹⁾ However, despite the pervasive and chronic nature of ontological addiction, the OAT model and associative supporting research indicate that ontological addiction can be overcome using meditation techniques as part of treatment phases involving: 1. becoming aware of the self, 2. deconstructing the self, and 3.

77) Shonin et al.(2016).

78) Barrows et al.(2022).

79) Shonin et al.(2016).

reconstructing a dynamic and non-dual self. These treatment phases highlight the underlying assumption in OAT that although suffering is a fundamental aspect of the human condition, life itself can be lived as a practice of meditation, with each moment reflecting an opportunity for growth and insights.

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■ 한글요약

존재론적 중독 이론

- 성장과 통찰의 명상 실천으로서의 삶

윌리엄 벤 고든

존재론적 중독 이론(OAT)은 인간이 느끼는 고통에 대한 형이상학적 모델로, 인간은 1) 인간으로서 존재하는 방식에 대해 그릇된 믿음을 구성하고 그것에 중독되는 경향이 있으며, 2) 이러한 믿음은 사회 부적응으로 이어져 다양한 기능 장애로 이어질 수 있다고 주장한다. OAT의 이론적 기반은 불교 철학, 형이상학, 그리고 일부 임상심리학을 기반으로 자아를 포함한 모든 현상은 독립적 또는 내재적으로 나타나지 않는다는 견해를 중심으로 한다. 본 논문은 지난 10년 동안 OAT에 대한 이론적, 실증적 증거를 종합하여, 이 이론이 어떻게 지속해서 발전하고 있는지에 대한 최신 관점을 제공하고자 한다. 더 나아가 본 논문은 1) 자아의 인식, 2) 자아의 해체, 3) 역동적이고 비이중적인 자아의 재구성을 포함하는 존재론적 중독을 치료하기 위한 과정을 더욱 상세히 서술하여 평가하고자 한다. 이러한 치료 과정은 고통이 인간의 본질에 있어 필수적이긴 하나 삶 자체가 명상 실천의 하나로 성장, 통찰 및 영적 초월의 기회를 제공한다는 OAT의 근본 전제를 강조한다.

주제어 ● 존재론적 중독 이론, 고통, 정신질환, 애착, 공허감

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