



Toward Greater Clarity in Defining and Understanding Nonattachment

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Abstract

Nonattachment is a key positive element of several psychotherapeutic approaches, including mindfulness-based interventions. However, it has been defined in the academic literature largely as a construct of negation, whereby one should *not* become attached to objects, people, or experiences. This approach may foster resistance to nonattachment in general through confusion associated with what it means along with uncertainty in how to practise it as there are currently no evidence-based courses or clear guidelines. Furthermore, there is currently no empirical exploration of interventions that are specifically nonattachment-based in terms of their value in applied settings.

The purpose of this paper is to propose an affirmative, action-based definition of nonattachment in order to improve understanding and implementation. A further objective is to provide examples of exercises within existing therapeutic modalities through which nonattachment may already be cultivated and to use the example of post-traumatic stress (PTS) as a focus area to discuss the potential value and implications of using nonattachment in a clinical context. Four psychotherapeutic approaches currently applying nonattachment-based concepts including Acceptance and Commitment Therapy, Dialectical Behavioural Therapy, Compassion-Focussed Therapy, and Mindfulness are critically assessed for ways in which they cultivate nonattachment, using symptoms of PTS as an example.

Based on existing therapeutic and contemplative practices that embody nonattachment principles, as an affirmative definition we propose that nonattachment involves the intentional practices of acceptance, letting go, deep presence, opening to a universally interconnected self-schema, and perceptual distancing from stimuli and response. An affirmative understanding of what nonattachment is, along with a targeted approach to its cultivation, may facilitate a clearer pathway toward the predictive and intervention outcome value of nonattachment in applied settings.

Keywords Nonattachment · Mindfulness · Post-traumatic stress · Acceptance and Commitment Therapy · Dialectical Behavioural Therapy · Compassion-Focussed Therapy

The term *attachment* typically carries a positive connotation in Western psychology (Sahdra et al., 2010), where it relates to the ways in which we are tended to in infancy and childhood, along with the resulting ways we engage in the world around us as adults. This classic or Western attachment theory is an evolution of psychoanalytic thinking in which the importance of relational models is emphasised, and mother-infant interaction guidelines are offered (Schneider, 1991). This differs substantially from the way *attachment* (Sanskrit: *rāga*, *upādāna*) is used in Eastern contemplative traditions in which it is viewed as negative and worthy of intentional avoidance. While these two concepts convey different areas

of thinking, the label of *attachment* they both carry may be a cause for confusion. Buddhist writings view attachments as mental afflictions of exaggerated positive and filtered negative qualities such that the object under consideration cannot be clearly contemplated (Sahdra et al., 2010). The Eastern definition of attachment implies “grasping or clinging (to a mistakenly reified self-image, another person, attractive objects, or the physical world), which is thought to cause suffering” (Sahdra et al., 2010, p. 116) and should thus be avoided through cultivation of its antonym, *nonattachment* (Sanskrit: *vairāga*, also translated as renunciation).

The current paper focuses on nonattachment in the Eastern sense, a quality referring to the ability to release, let go, surrender, allow, and accept. There exist discrepancies between historical and emerging perspectives on nonattachment where the former offered guidance verging on

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asceticism, and renunciation of all goods, and even family to attain the enlightened and nonattached state of nirvana (Burlley, 2014). Conversely, more emergent perspectives of nonattachment involve a flexible way of relating to experiences such that an individual can release attachment to how things ought to be, and instead, fully engage with how they actually are (Sahdra et al., 2010). To date, the academic literature on nonattachment has defined it largely by focusing on what it is not. For example, the introduction of a scale to measure nonattachment entailed a definition of negation such that nonattachment “refers to the subjective quality of not being stuck or fixated on ideas, images, or sensory objects and not feeling an internal pressure to acquire, hold, avoid, or change” (Sahdra et al., 2010, p. 118). Later descriptions continued a negation-centred approach, such as by contextualising nonattachment as an ability to flexibly interact with experience without the need to control or avoid unpleasant aspects (Sahdra et al., 2015, 2016).

Although definitions with some affirmative elements have been proffered, they are largely paralleled by negations. Sahdra et al. (2010) offer a definition of nonattachment that entails psychological flexibility and nonreactivity. Ho et al. (2022) expand on this description of nonattached individuals suggesting that they are actively engaged in, caring, and responsive to the present *without* “falling into self-aggrandizement or self-degradation” (Sahdra et al., 2010, p. 118). This approach to defining nonattachment may account for some measure of ambiguity as to its true meaning as it can be difficult to navigate the fine line between too much and not enough (Sys et al., 2024). A recent study exploring resistance to nonattachment found that along with general conceptual ambiguity, there may be a balancing act involved in its cultivation or adoption such that “one must be open, but not too open” (Tremblay & Van Gordon, 2023, p. 17). There is also scope for confusion in terms of how nonattachment can be compatible with socioemotional contemplative techniques such as compassion, where on the surface the former might suggest letting go or distancing from others while the latter implies the opposite. However, in Buddhist thinking, unconditional love can only arise within a relationship dynamic that recognises the futility of trying to cling onto things that are ultimately impermanent and subject to death. In other words, from a Buddhist perspective, nonattachment helps us make the most of the relatively short amount of time we have available to spend with loved ones and to see and love them for who they really are, which includes appreciating their transient nature.

Consequently, some scholars argue that nonattachment does not capture the full meaning of the concept as it has traditionally been rendered in Eastern contemplative traditions, where it is associated with internal freedom and a willingness to let go of attempts to control experiences (Whitehead et al., 2018a). For example, in traditional Buddhist

contexts, nonattachment is also deemed to be a function of generosity (i.e. the absence of clinging to possessions) and renunciation. In the case of the latter, Yeshe Lama (2001) explains that renunciation is a form of definitive emergence that “involves detaching ourselves from those sticky habits of attachment that hold us back from experiencing our fullest human potential” (p. 41). Additionally, Buddhism also emphasises the importance of compassionate deeds (*karuṇā*), which is not only incompatible with the idea of aloofness but also requires active engagement and caring about the world around us (Hong & Shogenji, 2023). Nonattachment, in its translation, does not appear to have carried forward this same emphasis (Sahdra et al., 2015). This nuance of nonattachment necessarily entailing compassion underscores a difficult balancing whereby the idea is to release and accept, but not to the point of withdrawal.

There is a growing corpus of research detailing the salutary effects of becoming more nonattached. These include benefits to psychological functioning as well as mental health (Ju & Lee, 2015; Sahdra et al., 2016; Tran et al., 2014). For example, nonattachment has been negatively associated with (1) stress and emotional regulation (Sahdra et al., 2010); (2) anxiety and depression (Bhambhani & Cabral, 2016); and (3) suicide ideation (Lamis & Dvorak, 2014). In addition, nonattachment has been positively associated with improved relationship harmony (Wang et al., 2016) and prosocial behaviours including kindness and empathy (Sahdra et al., 2015). Nonattachment has also yielded positive outcomes in the treatment of chronic pain conditions such as fibromyalgia (Van Gordon et al., 2017) and is asserted to facilitate the recovery and restorative phases of grieving (Wada & Park, 2009). Furthermore, nonattachment is related to improvements in wisdom, self-actualisation, and self-transcendence (Whitehead et al., 2020). Nonattachment also bears functional overlap with mindfulness, as letting go is a primary target of mindfulness practice, which has been linked to adaptive functioning (Feng et al., 2016; Kabat-Zinn, 1990; Sahdra et al., 2010). Overall, current research provides promising evidence for the benefits of becoming more nonattached (Whitehead et al., 2018b).

People appear to score higher in nonattachment in later stages of life (Whitehead et al., 2018a), which has been speculated as a function of the combination of cognitive (focussed on acceptance and resolution of challenging experiences) and experiential (focussed on growing wisdom) pathways. Additionally, adopting a self-reflective and open approach in response to difficult life experiences may positively impact the cultivation of nonattachment (Whitehead et al., 2018a). Within the psychological literature, there is no concrete guidance on how to become nonattached, although there is a wealth of research dedicated to how to practise a related construct, namely mindfulness (Baer et al., 2006; Kabat-Zinn, 1990).

Nonattachment is correlated with, but empirically distinct from, mindfulness (Sahdra et al., 2016). However, further concept conflation may be a function of overlap within the definitions of mindfulness and nonattachment. While there are many (sometimes conflicting) definitions of mindfulness (Lecuona et al., 2020), one delineation asserts that it comprises five key factors: (1) observing—attending to internal thoughts, feelings, and experiences; (2) describing—being able to articulate these observations to a certain extent; (3) acting with awareness—responding to present stimuli with awareness; (4) nonjudging—refraining from assignation of right or wrong to one’s internal experiences; and (5) non-reactivity—intentional withholding of habitual reaction toward internal experience (Baer et al., 2006). Nonattachment involves a significant overlap with all of these, but perhaps most clearly with Factors 4 and 5. To date, there is no robust empirically supported clarification of the causal relationship between mindfulness and nonattachment. However, it is likely that the practice or performing of mindfulness may be conducive to the embodiment of nonattachment (Sahdra et al., 2016).

This differentiation between *practicing* mindfulness (an action or verb) and *embodying the quality* of nonattachment (an abstract noun), while helpful in construct differentiation, may give rise to further confusion. More specifically, it may be easier to understand how to do something than how to be something. Nonattachment (the abstract noun) may be used in the literature as a verb, such as *being* nonattached or *practicing* nonattachment but is not accompanied by a nonattachment-based stress reduction course, for example. Mindfulness is more widely understood as a verb even when it is delivered as an abstract noun. For example, in hearing “I am mindful of the issue”, it is generally understood that one is *being* mindful of the issue. However, in hearing “he is nonattached”, it is not clear whether the subject is *being* nonattached, or has a pre-existent embodiment of nonattachment. Treating nonattachment as an abstract noun may be an important nuance in the noted resistance to its adoption (Tremblay & Van Gordon, 2023). Personal development directed at cultivating higher levels of nonattachment may seem a less attractive pursuit if it is conceived as a quality one simply embodies. A quality, in this context, may be comparable to a trait. Traits have been traditionally conceptualised as somewhat static qualities that are difficult to alter (Bleidorn et al., 2021). This makes both clarity of definition and guidance for cultivation particularly important.

Guidance on the cultivation of nonattachment remains somewhat elusive in the academic literature despite research suggesting that the practice of mindfulness (Sahdra et al., 2016), and employment of cognitive and experiential pathways (Whitehead et al., 2018a), may be conducive to its adoption. Furthermore, it is likely that therapies already employing exercises targeting constructs close to

nonattachment such as acceptance and commitment therapy, dialectical behaviour therapy, compassion-focussed therapy, and mindfulness-based interventions already engender non-attachment processes. However, there is a need to systematically appraise the way these therapeutic modalities integrate such nonattachment practices as part of formulating a working contextualisation of nonattachment that focuses more on what it is rather than what it is not.

This paper’s overarching aim is to clarify understanding of nonattachment by working to emphasise an affirmative contextualisation of the construct. However, to facilitate the formulation of such a contextualisation, the paper first appraises existing key evidence-based clinical approaches that appear to bear some definitional or functional overlap with nonattachment, in order to identify exercises and mechanisms which may lead to its cultivation (whether in an intentional or unintentional way). The therapeutic modalities of focus in this context include:

1. Acceptance and Commitment Therapy (ACT), specifically the mindfulness and acceptance process
2. Dialectical Behaviour Therapy (DBT), specifically wise-mind and decentering
3. Compassion-Focussed Therapy (CFT), specifically the universality of suffering
4. Mindfulness-Based Interventions (MBIs)

Additionally, throughout the paper, post-traumatic stress (PTS) is used as an example focus area to explore the value, considerations, and implications of utilising nonattachment in clinical settings.

Example Focus Area: Post-traumatic Stress

The Substance Abuse and Mental Health Services Administration (SAMHSA, 2014) defines trauma as arising from a harmful event(s) experienced by an individual that has lasting adverse effects on well-being. PTS symptoms are unique amongst mental health challenges by virtue of the external or environmental trigger required for their onset. SAMHSA (2014) states that the nature of the traumatic event should be considered along with the individual’s experience of it. These two distinct elements of a traumatic experience, the event itself and the individual’s experience of it, make PTS a good example for exploring the potential clinical applications of nonattachment because while individuals cannot control external events, they may be able to influence their own responses to them. PTS symptoms frequently include a profound sense of helplessness, often from an event(s) during which a person experiences a significant loss of control (Salcioglu et al., 2017). Nonattachment, denoted specifically by an absence of attempts to control (Whitehead

et al., 2018a), may therefore yield meaningful benefits in this context. Nonattachment brings a full engagement with experiences as they are, along with a release of the need for them to be any other way. It entails acceptance, surrender, and a flexible way of engaging with reality (Sahdra et al., 2015). In trauma contexts, this enhanced mental flexibility may yield meaningful impact on subsequent symptoms, and therapeutic modalities commonly used for PTS symptom interventions in applied settings may already be cultivating nonattachment outcomes, including those appraised in the following sections of this paper. However, it should be noted that currently, there is no research dedicated to cultivating nonattachment in applied settings for specific use in a PTS (or any other clinical) context.

Acceptance and Commitment Therapy and Nonattachment

There are six core processes within ACT which can be organised into two groupings (Hayes et al., 2006). The first grouping of mindfulness and acceptance process includes acceptance, cognitive defusion, contact with present experience, and self as context. The second grouping, behaviour change process, includes values and committed action (Hayes et al., 2006). The four elements of the mindfulness and acceptance process arguably provide a workable behavioural definition of mindfulness (Fletcher & Hayes, 2005). Here, acceptance is taught as a substitute for experiential avoidance (Hayes et al., 2006). Considerable overlap with an affirmative definition of nonattachment as active awareness and embracing of internal thoughts, emotions, or experiences without a need to alter in any way can be observed here. Indeed, if acceptance is a true experiencing of events as they are, without defence (Hayes & Wilson, 1994), then the implication of a negation in effort to alter, avoid, or escape from them follows (Soler et al., 2021). Along similar lines, grasping, clinging, or feeling a need to may correspond with the absence of acceptance (Soler et al., 2021). That is, acceptance and nonattachment may be two sides of the same coin. If the positive depiction of this idea is acceptance, then the negative depiction may be nonattachment. ACT offers methods of engaging with internal experiences as they are, in their full form, both positive and negative. Acceptance is encouraged to enhance values-based action (Hayes et al., 2006) which echoes traditional Buddhist teachings of dependent origination in which all events can have causes either within or outside of our control (Hong & Shogenji, 2023). We are not encouraged to avoid valuing external things or people but rather to understand their ultimate impermanence, and in doing so, become able to value them even more truly (Hong & Shogenji, 2023). This broader contextualisation of engagement with life events in Buddhist teaching overlaps with elements of cognitive defusion.

As a core tenet of ACT, cognitive defusion works toward modifying interaction with internal experiences by generating contexts in which their negative contributions are diminished (Hayes et al., 2006). The individual is guided toward contextualising their internal experiences differently instead of trying to alter the experience itself. An example of this might be to differentiate between “I am a bad person” and “I am experiencing the thought that I am a bad person”. This method acts to undermine the quality or intensity of the experience to decrease its influence on the individual, and their attachment to its reality or truth (Hayes et al., 2006). This connects with elements of nonattachment through an intentional commitment toward allowing internal experiences to be as they are without trying to change the experience itself. Divergence can be noted in the intentional re-contextualising of the experience in cognitive defusion which does not appear to form part of the nonattachment process, despite the necessity of ongoing contact with present experience.

Contact with present experience entails non-judgemental engagement with internal and external events in real time (Hayes et al., 2006). In ACT, this is thought to facilitate a more direct experience with the world such that outcome actions might become more consistent with values. An example of a tool used to facilitate this process is labelling, in which an individual is encouraged to deliver non-judgemental commentary on ongoing thoughts, feelings, or experiences (Hayes et al., 2006). This present-focussed approach appears in nonattachment literature whereby the nonattached individual is actively engaged in moment-to-moment awareness with an active and deep caring, and ability to respond to events as they present themselves (Ho et al., 2022). Additionally, non-judgemental intention overlaps with nonattachment in which withholding assignation of good or bad to experiences is a foundational element (Sahdra et al., 2010).

Lastly, self-as-context encourages understanding of self as a vessel for experiences or knowledge instead of the content within them (Hayes et al., 2006). Understanding the world through this lens may foster an attitude of awareness of the flow of experiences through the vessel of self without a need to attach to them in any way. This idea parallels non-attachment to self (NTS), in which fixation on an independent or de-contextualised self is understood as an underlying aspect of individual suffering (Shonin et al., 2016; Van Gordon et al., 2018). The relinquishing of attachments to self as a separate and static concept does not require detachment, or removal of self, but rather encourages engagement with self-concept without rigidity, or fixation (Whitehead et al., 2021; Yang et al., 2018). These core factors, along with those of the behaviour change process, all work to target psychological flexibility. Psychological flexibility is the ability to remain connected with present experiences, see internal events as mere internal events, have a strong sense

of direction in life, and pursue what is meaningful (Bean et al., 2017). ACT treatment outcomes are said to be mediated through increases in psychological flexibility (Bean et al., 2017), which in turn are positively associated with adaptive functioning (Howell & Demuynck, 2021). This may be particularly relevant in the example of PTS where improved psychological flexibility is consistently shown to mitigate trauma symptoms (Boykin et al., 2020; Dutra & Sadeh, 2018; Flanagan & Troup, 2022; Molavi et al., 2020; Richardson & Jost, 2019). Additionally, experiential avoidance, as targeted by both the practice of engagement with the present moment in ACT and nonattachment, has been found to be the most strongly related element of ACT processes to post-traumatic stress disorder (PTSD) symptom severity (Grau et al., 2020). Nonattachment encompasses both enhanced psychological flexibility (Whitehead et al., 2018a) and reduced experiential avoidance (Deits-Lebehn et al., 2019). The implication then is that cultivating nonattachment may be a more direct route to PTS symptom management. Although ACT offers exercises specifically dedicated to mitigation of experiential avoidance, the cultivation of psychological flexibility is theorised more as a function of all six elements of the ACT framework. Here, we see definitional overlap in elements of ACT, and nonattachment, along with examples of the ways ACT exercises may functionally cultivate increases in nonattachment, which may be useful in PTS contexts, as well as in applied settings more generally.

Dialectical Behaviour Therapy and Nonattachment

Originally developed for application in borderline personality disorder contexts, DBT is known for its focus on opposites (dialectics) and balancing acceptance and change-oriented strategies (Görg et al., 2019). One of the target outcomes of DBT is *wise mind* which refers to the integration of the emotional and rational mind (Linehan, 2015). This integration entails being fully present, acknowledging, and validating (much like the first two of the five elements of mindfulness) experiences without being overwhelmed by them, and using reason to guide decisions through full connectivity to both internal experience and rational aspects of a situation (Linehan, 2015). DBT trains skills designed to interrupt, and modify automatic appraisals, and patterns of behaviour (Görg et al., 2019). This links with components of nonjudgement and nonreactivity found in the acceptance element of mindfulness (Lindsay & Creswell, 2017), which is theorised to account for the reduction of negative affective experiences in MBIs.

An important distinction exists between the nonjudgement and nonreactive components of DBT and mindfulness and those of nonattachment. In nonattachment, a broader

quality associated with the process of letting go of unhelpful internal experiences, and a general neutrality between clinging and aversion, is asserted to be cultivated by a mindful, present-focussed awareness of events in one's field of consciousness (Desbordes et al., 2015). This differentiation underscores the difficulty of cultivating nonattachment when its definition is represented in the abstract versus as an action to adopt. Although this will be discussed in greater detail later, it bears consideration in the context of the nonjudgement and nonreactivity components DBT works to target. It may be that skills training associated with these components yields increases in being nonattached. That is, DBT training targeting nonreactivity and nonjudgement may support the affirmative verb-based process of cultivating nonattachment. Examples of skills targeting nonreactivity include the "river of acceptance", a visualisation exercise involving placing internal experiences into a river and allowing them to be washed away, and body scan meditations. Examples of skills targeting nonjudgement include mindful observation and describing without judgement.

Returning to the example of PTS, research indicates support for the efficacy of DBT (Bohus et al., 2013; Steil et al., 2011). There is some debate about the efficacy of DBT for the commonly reported PTS symptom of anger (Görg et al., 2019); however, the persistence of this particular symptom may reflect the reallocation of the subject of anger from internal (self) to external (other person or event) (Kleim et al., 2013), which may be a function of nonattachment-to-self (NTS). In learning how to re-organise self-concept or detach from self as the subject of experience versus a witness of it, a person may be able to mitigate some of the symptoms of PTS. For example, one study found that "because self-concept is often characterised by trauma related emotions like shame, guilt, self-hate or disgust, many patients have difficulties dealing with themselves in a sympathetic and self-valuing manner" (Görg et al., 2019, p. 765). Therefore, NTS may be a crucial contributor to PTS symptom prediction and mitigation.

DBT does not explicitly emphasise NTS but contains skills training which may enhance its adoption. For example, the emotion regulation module of DBT targets enhanced understanding and improved management of emotions. Skills focussed on decoupling intense emotions from rash or dangerous behaviours are taught. Through this process, individuals can learn to label and regulate emotions, which can further support outcomes associated with nonjudgement. Additionally, the mindfulness component of DBT training which teaches individuals to observe internal experiences without over-identifying with them or judging them as positive or negative may support decentring, in which one can hold a more objective and detached perspective toward these experiences (Linehan, 1993). Furthermore, as posited by self-verification theory (Swann, 2012), people

may strongly identify with representations of internal experiences which can create confusion about representations of self. This confusion has been termed the “Delusion-of-Me” (Soler et al., 2021), and closely parallels the self-as-content (different from self-as-context above) construct seen in ACT in which internal experiences and content *become* the self through over-identification. Attachment to the construct of self is posited as the source of much suffering (Gu, 2021), and may be somewhat alleviated by decentering. Decentering carries significant overlap with themes of acceptance and nonattachment. Indeed, these themes have been found to be psychometrically similar, despite definitional nuances (Soler et al., 2021). The implication follows that training in one of these facets may train all three (Soler et al., 2021).

In applied settings, decentering has been negatively associated with higher levels of depression (Fresco et al., 2007) and may fully mediate the effects of Mindfulness-Based Stress Reduction (MBSR) on anxiety (Hoge et al., 2015). Decentering may have a positive impact on symptoms of dysphoria, panic, anhedonia, and certain types of narcissism (Naragon-Gainey & DeMarree, 2017). However, there does not appear to be existing research dedicated to the direct relationship between decentering and symptoms of PTSD. However, in addition to significant functional and definitional overlap, we can see a therapeutic implication that exercises in wise mind, emotional regulation, decoupling, and decentering may already be targeting nonattachment.

Compassion-Focused Therapy and Nonattachment

CFT is a multi-modal psychotherapeutic intervention organised around three affect regulation systems: threat system, drive system, and soothing affiliative system (Gilbert, 2009). Compassion is modelled to participants through specific skills including psychoeducation, mindfulness, emotional regulation, connection with values, and life goals (as in DBT), and exploration of self-criticism and shame (Gilbert, 2009). CFT’s focus on challenging self-criticism, which can involve attachment to harsh or negative self-evaluations, can teach participants to reduce self-critical thoughts, fostering nonattachment to these harmful thought patterns. This may be helpful for people suffering from PTSD who frequently assume blame or experience feelings of worthlessness (van der Kolk, 2015). CFT’s operationalisation of compassion also promotes an embracing of vulnerability, and imperfections without judgement, which may reduce attachment to things as they should be, or perfectionism (Gilbert & Van Gordon, 2023).

Uniquely, CFT also offers training in compassion specifically for the *inner critic* (Gilbert, 2009). Through psychoeducation, stimulation of positive affect processing, and a variety of attentional directing exercises, participants can cultivate a more compassionate, nurturing inner

voice, thereby reducing attachment to the negative messaging of the existing automated or habituated inner critic. These exercises appear to reflect an emphasis on self-compassion, which may be a distinct, albeit related, construct from compassion (Neff & Pommier, 2013; Strauss et al., 2016). Self-compassion is said to consist of three principal components: (1) kindness, (2) mindfulness, and (3) common humanity (Neff, 2003). Common humanity is heavily emphasised in Buddhist teachings on compassion (Strauss et al., 2016), and provides a lens of interconnectedness with the universe such that whether suffering occurs internally (self), or externally (another), one can identify with the impact, and understand it as a function of the human condition and connection to all versus only one’s own experiences. This is part of the Buddhist Four Noble Truths: (1) Life is full of suffering; (2) this suffering has a cause; (3) it is possible to stop suffering; and (4) there is a path to extinguish suffering (Aich, 2013). More specifically, according to Buddhist teachings, suffering is caused by attachment, and can essentially be alleviated by following the Buddhist Eightfold Path (i.e., the fourth Noble Truth), which involves understanding attachments as the source of suffering and how to become free of them (Aich, 2013).

In this vein, and consistent with traditional perspectives, attachments constitute a violation of the laws of nature and the universe (Burley, 2014). When we superimpose onto externals our needs or expectations of what, who, or how they should be, we risk ignoring the impermanence of everything in existence, along with our fundamental connection to it. Self-compassion then is the true essence of nonattachment in its recognition of interconnectedness and the fleeting existence of all matter, internal and external events, relationships, and other beings. Here is another example of the positive depiction of a construct (self-compassion), and its negative correlate in nonattachment. A self-compassionate individual accepts, allows, and maintains full presence with what is, without being held back in any way by what could or should be. One practical implication of this is in frequently reported PTSD symptoms of rumination, or anxiety, whereby an erroneous schema of a separately existing self may be indicative of a deficit in the element of common humanity, which may be addressed through training in self-compassion. This parallels the idea of NTS which, as discussed, can have negative mental health outcomes, and may be targeted by exercises in cognitive defusion. This also links with over-identification risks identified by Soler et al. (2021) in their delusion-of-me research, which may be targeted through exercises in decentering. Here, we see overlap with affirmative positioning of nonattachment through self-compassion, along with CFT-focussed exercises, such as those designed for cognitive defusion, which may already be targeting cultivation of nonattachment.

Mindfulness-Based Interventions and Nonattachment

Mindfulness has been described as purposefully attending to the present moment without judgement or impulsive reaction (Kabat-Zinn, 1990; Sahdra et al., 2016). As previously described, the operational definition generally includes components of observing, describing, acting with awareness, nonjudging, and nonreactivity (Baer et al., 2006). Although mindfulness bears significant overlap with nonattachment, particularly through nonjudgement and nonreactivity (constructs of negation), they are shown to be separate constructs (Sahdra et al., 2016). Several studies have found outcomes specific to nonattachment which could not be attributed to mindfulness (Joss et al., 2020; Ju et al., 2015; Klein & Robinson, 2019; Sahdra et al., 2016). However, nonattachment is consistently one of the most salient correlates of mindfulness, and is frequently found to mediate its effects (Feng et al., 2016; Montero-Marin et al., 2016; Tran et al., 2014; Whitehead et al., 2018a). Nonattachment has also been posited as merely a functional outcome (abstract noun) of practising mindfulness (Grossman & Van Dam, 2011). However, in a study specifically designed to test construct overlap, Sahdra et al. (2016) found that mindfulness (as tested by the Five Facet Mindfulness Questionnaire [FFMQ]; Baer et al., 2006) and nonattachment (as measured by the Nonattachment-to-Self Scale [NAS-7]; Whitehead et al., 2018a) were empirically distinct.

MBIs, represented under the umbrella of present-centred approaches, offer an alternative to traditional treatment modalities such as Cognitive Behavioural Therapy (CBT), Pharmacotherapy, Psychotherapy, and Exposure Therapy (Boyd et al., 2018) and may be especially relevant to PTS treatment. Present-centred approaches to trauma treatment are said to encourage nonjudgement and acceptance of inner experiences as they occur in the present moment (Boyd et al., 2018). This is important because intentional redirection from past trauma to present experience may foster capacity for attentional control and mitigate biases toward trauma-based stimuli (Lang et al., 2012). Furthermore, a mindful approach to cognitive tasks may diminish rumination which can reduce anxious arousal and anhedonia; both characteristic of PTSD (Lang et al., 2012). Practicing nonjudgement may also facilitate a willingness to engage with trauma-related content on one's own terms, which can lead to a decrease in avoidance (Lang et al., 2012). Indeed, avoidance, as represented by behaviour patterns such as emotional numbing and thought suppression, has been conceptualised as the antithesis of mindful behaviour (Follette et al., 2006). MBIs targeting PTS symptoms have also used metta meditations, in which

participants intentionally work toward adoption of kindness and compassion toward self and others through exercises such as imagining particular emotional states (Boyd et al., 2018). One practical implication is that in PTS contexts where emotional states like anger, shame, guilt, and anhedonia are prevalent, the ability to flexibly move into alternative emotions may be particularly valuable.

Mindfulness has also been researched as a protective factor in the mitigation of PTS symptom onset (Boughner et al., 2016; Boyd et al., 2018; Dahm et al., 2015). Cultivation of a mindful attention to the present strengthens attentional control, which may reduce unintended attentional biases toward trauma-related stimuli. Additionally, the non-judgemental outlook fostered by mindfulness may support a willingness to engage with trauma-related stimuli, mitigating avoidance, which has been propounded as the antithesis of mindfulness (Follette et al., 2006).

The describing, acting with awareness, and nonjudging elements of mindfulness are shown to mediate the association between childhood and lifetime trauma exposure and PTS symptoms (Boughner et al., 2016). Research indicates that the ability to describe emotional events has been negatively correlated with hyperarousal scores (Kalill et al., 2014). Additionally, nonreactivity to inner experiences has been directly associated with reduced PTS symptoms, along with a reduction in hyperarousal and re-experiencing scores (Kalill et al., 2014). This is supported by findings that higher levels of mindful nonreactivity mediated PTS symptoms in veterans after high combat exposure (Nassif et al., 2019).

Nonreactivity is addressed in the traditional Buddhist conceptualisation of nonattachment in which it can be observed as “psychological flexibility (lack of fixation), nonreactivity (even mindedness), more quickly recovering from upsets, allowing, releasing, supporting others’ capacity to choose, and a sense of ease” (Sahdra et al., 2010, p. 118). That is, being nonattached may present itself through the observable quality of nonreactivity. A certain amount of nonreactivity development is known to occur naturally through adolescence (Galla et al., 2020), which parallels the known increases in nonattachment with advancing age (Mahlo & Windsor, 2021; Whitehead et al., 2018a). Nonreactivity, defined within mindfulness as intentional withholding of habitual response to internal experiences, may require a certain degree of interoception. However, interoception, which appears to be an important mechanism in the efficacy of MBIs (Williston et al., 2021), appears to have limited overlap with nonattachment. If there is overlap, it is likely that of pure awareness instead of any triggered response as a result. Cultivation of interoception, or embodiment, may initially be unhelpful in PTS contexts as physiological cues may be appraised as negative (Gibson, 2019). However, learning to relate to and regulate signals of hyperarousal or

stress are mindfulness skills that can reduce these responses in the long run, and help people respond in a more adaptive way (Williston et al., 2021). Although nonattachment involves a present-focussed awareness of inner experiences, there is no prescribed attuning to bodily cues or intentional work toward adaptive regulation as a practice. In fact, nonattachment may entail neutrality in accepting these cues or triggers as they present themselves, or working to recontextualise one's reliance on physiological cues to become less driven by them (Hong & Shogenji, 2023).

This divergence in elements of the constructs of mindfulness and nonattachment may serve as additional support for their independence; recall the distinction between the mindfulness-based approach to nonjudgement and nonreactivity, and that of nonattachment, which entails a broader quality associated with the process of letting go of unhelpful internal experiences, and a general neutrality between clinging and aversion. Here, we find another tangible tool in the arsenal of mindfulness: here are actual instructions for how to practise interoception (Weng et al., 2021) as well as the steps associated with embodiment (Kinsella & Smith, 2021). The same cannot be said for nonattachment in its conceptualisation as an ethereal quality of negation, antithesis of fixation, or by not feeling a need to alter, control, hold, or avoid. We currently have no guidebook on how to not be an abstract noun. This is important because of the implications of benefits from cultivation of nonattachment in applied settings.

Summary of Nonattachment Mechanisms in Psychotherapeutic Approaches

Salutary outcomes have been frequently observed in existing research on ACT, DBT, CFT, and MBIs in PTS contexts (Hayes et al., 2006; Görg et al., 2019; Boyd et al., 2018; Irons & Lad, 2017). As part of the delivery of ACT, the tools designed to support acceptance may also be targeting nonattachment (Soler et al., 2021). Exercises in cognitive defusion may bolster nonattachment through intentional awareness and commitment to broader contexts. This broad-based approach to engaging with life experience is the important distinction offered by Desbordes et al. (2015) in their differentiation between withholding judgement, or reactivity in specific situations, and adopting a general attitude of neutrality as a *modus operandi*. Practices offered as ways to improve contact with present experience may also be targeting nonattachment through their focus on nonjudgement. There is also a certain amount of overlap between the self-as-context element of the mindfulness and acceptance process, and NTS; the broader contextualisation of self as connected to all, and as a conduit for experience instead of the detached, and independent subject of it. Fixation on self

can be detrimental and yield negative mental health outcomes (Mor & Winquist, 2002), while releasing the idea of a separate and static self can have a significant impact on individual suffering (Lama, 2009). Here, a neutral position of nonjudgement and open acceptance of experiences is key, as seen in the example of PTS where the individual's experience is as much a part of symptom onset as the external trigger itself (SAMHSA, 2014). Therefore, NTS may have a valuable role to play in PTS interventions and may be cultivated via the same exercises designed to target cognitive defusion.

In a similar vein, nonattachment, self-compassion, and decentring have been shown to act as the most significant modulators in decoupling psychological constructs commonly noted in PTS contexts (Roca et al., 2021). Nonattachment and self-compassion act to modulate the relationship between psychological distress and rumination leading to speculation that nonattachment can foster changes in self-perception (Roca et al., 2021). This is important in PTS contexts where the element of common humanity may be lacking, and can potentially be mitigated through adoption of a schema of interconnectedness and neutrality (i.e., NTS). CFT exercises targeting self-criticism and challenging of the inner critic may be particularly helpful for NTS through enhanced understanding of the transient nature of thoughts, feelings, and emotions, and through learning to view self as more than the isolated or independent sum of these experiences.

DBT offers skills training to modify automatic appraisals and behaviour patterns (Görg et al., 2019), which parallels nonjudgement and nonreactivity, and forms a substantial part of the practice of nonattachment (Lindsay & Creswell, 2017). This skills training is theorised to exert benefits by increasing conscious decision making through full connectivity to experiences (Linehan, 2015). This is important in PTS contexts due to the documented, often profound, lack of control experienced by people reporting PTS symptoms (Daniels et al., 2020; Frazier et al., 2004; van der Pijl et al., 2020). Training on how to reintroduce intention and conscious control of response into a situation, especially a response more deeply connected with personal values (as upheld in ACT), could yield meaningful impact in PTS interventions. In line with traditional teachings on nonattachment, this may include an emphasis on the impermanent nature of things, along with a broadening of external elements to which one might form attachments so that when, inevitably, we encounter suffering due to a change in one of these elements, we have more widely allocated in our love, compassion, and even attention, which may mitigate suffering (Sanskrit: *Dukkha*; Hong & Shogenji, 2023).

DBT also has a module specifically dedicated to emotion management, cultivated through mechanisms such as identifying and labelling emotions to create distance between

the emotion itself and the individual's experience of it. For example, in the emotion management module, participants learn about the function and purpose of emotions along with factors that may impact their own emotional experiences. Participants are encouraged to explore emotions as informative, providing important insight into their own ever-changing values, needs, and relationship dynamics. This invokes elements of NTS in which incongruence between experience and self-concept is lessened by a flexible and fluid view of self (Whitehead et al., 2018a). Here, observation of an experience or emotion can be de-coupled from an automatic judgement or reaction to the observation. NTS has been shown to account for significantly more variance than self-compassion in psychological distress and well-being measures in people experiencing at least mild level symptoms of depression (Whitehead et al., 2021). The reverse is true for people with low levels of depression where self-compassion has been shown to be a more significant mediator of symptoms (Whitehead et al., 2021). While relevant to the example of PTS due to the frequent comorbidity of depression and PTSD (Radell et al., 2020), this may also indicate value in operationalisation for depression. People suffering from classic PTS symptoms such as shame, guilt, or negative self-concept may feel averse to self-compassion (Whitehead et al., 2021), despite its known benefits (Gilbert, 2009). It may also be that self-compassion simply does not fit with one's self-concept in PTS contexts (Whitehead et al., 2021), meaning NTS may be met with less resistance than self-compassion approaches. Therefore, NTS might reflect a good first step in the cultivation of self-compassion. Research has shown that despite initial aversion to self-compassion, it is typically eventually associated with positive outcomes, including more positive outlooks in general (Lawrence & Lee, 2014). Indeed, releasing attachment to self and working toward a neutral schema of self as contextually connected to everyone and everything else in experience may be practised in the gap between a psychological event and the individual's response to it. This requires deep presence, and intention, which is possible through the focus on emotional regulation strategies provided in CFT and DBT approaches.

As discussed, although mindfulness and nonattachment may bear a substantial amount of overlap (Sahdra et al., 2016), research has found that important outcomes predicted by nonattachment are not mirrored by mindfulness (Joss et al., 2020; Ju et al., 2015; Klein & Robinson, 2019). Perhaps the consideration offered by Sahdra et al. (2016) of originality in nonattachment is not as important as that of utility. Due to documented overlap in constructs with other modalities, along with existing evidence for the unique and promising indications of clinical utility, arguably the most important consideration is clarity in terms of what nonattachment is and how we can practise it.

In this regard, practices within ACT most likely to mirror the practice of nonattachment are those targeting cognitive defusion, which parallels NTS, and those designed to maximise acceptance and engagement with present experiences. Practices within DBT most likely to mirror the practice of nonattachment are those targeting automatic appraisals (non-judgement) and behaviour patterns (nonreactivity). Additionally, CFT exercises, such as identification and labelling of emotions, may foster NTS through the degree of separation between an inner experience and construct of self. This appears to promote re-training of the self-concept such that a new schema of self as more universally interconnected may be adopted, and NTS may be a valuable pre-cursor to more successful adoption of self-compassion. Mindfulness exercises paralleling these areas of focus may also serve to reinforce their successful adoption.

An Affirmative Contextualisation of Nonattachment

Based on the traditional Buddhist contextualisation, and the above outlined appraisal of four key therapeutic modalities bearing functional or definitional overlap with nonattachment, we would argue that as an affirmative verb, nonattachment is an intentional practice entailing elements of (1) acceptance, (2) letting go, (3) applying deep presence, (4) adoption of a more universally interconnected self-schema, and (5) cultivating perceptual distance in respect of both experiences as they happen and one's response to them. These construct elements can be organised to further understanding of nonattachment in the following ways:

1. Acceptance in nonattachment entails an active embracing of experiences without defence, as well as attuning to the impermanence of everything, including self, to facilitate a more direct experience with the world so that actions might become more consistent with values.
2. Letting go (or releasing) in nonattachment involves noticing a hold on something such as clinging to the positive or avoiding the negative, and releasing the need to categorise internal experiences as positive or negative. Instead, the intention is to let things be what they are, understand that they have no inherent goodness or badness, and in this way re-anchor into agency as part of appreciating that not all events or actions require a reaction.
3. Applying deep presence in nonattachment entails using mindfulness-based strategies to strategically manage attention whereby processes such as cognitive defusion, self-compassion, decentring, and creating perceptual distance between stimulus and response become more

accessible. This means attending to inner experiences to notice present-moment events and practising agency. Nonattachment also means deep presence to a degree that can support a better understanding of interconnectedness, particularly through nonattachment to self.

4. Adopting a more universally interconnected self-schema in nonattachment involves understanding of the human condition such that suffering and existence generally are understood in a more universal context, avoiding pitfalls of the delusion-of-me. This includes the impermanent nature of everything, as well as attuning to the fallacy of separation from the universe.
5. Cultivating perceptual distance between experiences as they happen as well as our reactions to them in nonattachment entails intentionally working to reframe our understanding of stimulus and response not only in terms of reactivity but also in terms of subject versus witness of experience, which may be accessible through exercises such as decentering and decoupling.

Engaging in these actions, already being operationalised to different extents in some contemporary therapeutic approaches, may lend itself to the first guide for adopting nonattachment in Western culture and applied settings, in which contemplative lifestyles may be less culturally abundant than Eastern contexts. Research has indicated that nonattachment can also be cultivated through mindfulness, which may be one of the mechanisms through which mindfulness exerts its benefits (Sahdra et al., 2016). Due to the substantial overlap with exercises offered by modalities of ACT, DBT, CFT, and MBIs, it is reasonable to consider that nonattachment may also be one of the mechanisms through which these approaches exert their benefits. Targeting nonattachment in a clear, practical, and affirmative way has important implications in many applied settings, including PTS where it has been identified as a more significant factor in symptom reduction than mindfulness (Joss et al., 2020).

Symptoms of PTS are known to include intrusive thoughts, avoidance, and negative changes in cognitions and mood, and impact arousal and reactivity (Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, 2013). Therefore, exercises designed to target emotional regulation, or stabilisation, may be particularly important for PTS populations. Amygdala activation, or onset of fight or flight mode brought on by environmental triggers, may be impacted by these practices through the reallocation of attention to the present, and intentional positioning of self as a vessel for inner experiences instead of a product of them. Research on the variance in who experiences PTS symptom onset after trauma traditionally has focussed largely on individual differences (Ozer & Weiss, 2004). Emotion dysregulation has been shown as both a significant predictor of and important treatment target for PTS symptoms (Pencea et al., 2020), which could be impacted by the practice of nonattachment. Additionally, recent research has identified the importance of psychological flexibility

in the mitigation of PTS symptom severity (Schramm et al., 2020). Psychological flexibility, a key indicator of nonattachment and a known outcome of ACT and mindfulness processes (Bean et al., 2017; Doorley et al., 2020; Sahdra et al., 2010; Webb et al., 2016), also appears to be a key predictor of and important treatment target for PTS (Schramm et al., 2020). An important theoretical implication here is that as a key predictor of symptom onset, if emotional dysregulation and psychological flexibility can be targeted and improved, then so may symptoms. Furthermore, several of the exercises discussed in the forgoing may not require an intensive level of public resources for cultivation, which is an important practical implication. For example, metta meditations, visualisations, and decentering exercises could be practised in one's own space and time, without the need for the cost or personal supervision of a mental health practitioner. For these reasons, an affirmative definition for the purpose of construct clarification is an important evolution in the potential for expanded utilisation and embodiment of nonattachment.

Conclusion

This paper has offered an affirmative definition of nonattachment which acknowledges historical perspectives and supports a view of application consistent with emerging perspectives. Utilising existing exercises in related psychotherapeutic modalities which appear to target elements of nonattachment may facilitate a clearer pathway toward both its predictive and intervention outcome value. This targeted use of existing evidence-based activities and exercises which may already be cultivating nonattachment offers an important contribution to the field of knowledge of how we might *do* nonattachment. Future research could consider using this approach to generate a preliminary outline of a nonattachment-based training programme for use in PTS contexts, and in applied settings more generally.

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Declarations

Conflict of Interest The authors declare no competing interests.

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