Recovery from Infidelity
Paul David, Ph.D.

“The infidelity is not in the sex... but in the secrecy. It isn’t whom you lie with. It’s whom you lie to.”
Frank Pittman
Private Lies

After the devastating discovery of infidelity, intense emotions and recurrent crises are the norm in intimate relationships. The good news is that the majority of couples cannot only survive infidelity, but as researcher John Gottman (2012) has found, many couples can recover and develop stronger relationships as a result of therapy.

Infidelity is one of the primary reasons couples seek therapeutic help (Subotnik & Harris, 2005). A striking paradox is that while studies of married people indicate that the vast majority disapprove of infidelity, studies also show that that approximately 25% of wives and 50% of husbands had experienced extramarital intercourse (Glass, 2003).

When emotional affairs and sexual intimacies without intercourse are included, the incidence of infidelity increases by approximately 15-20% for married people (Glass, 2003). Furthermore, when the higher levels of infidelity in cohabiting and other committed relationships are taken into consideration (Hertlein, Wetchler, & Piercy, 2005), a conservative estimate is that approximately 75% of these couples will break their agreement for sexual or emotional exclusivity during the lifetime of their relationship.

Definitions

Historically, infidelity was defined as violating an agreement of sexual exclusivity between partners married, cohabiting, or otherwise in a committed relationship (Hertlein, Wetchler, & Piercy, 2005). More recently, the definition of infidelity has expanded beyond the criterion of sexual intercourse to include such behaviors as cybersex, sexting, compulsive use of pornography, physical intimacy (such as kissing), and emotional intimacy with another person outside of the primary relationship. At its very core, infidelity is now thought of as any behavior that breaks the relational agreement that two partners have made between one another (Lusterman, 1998).

Causes & Types

The causes of infidelity are complex and varied. While affairs are more likely to take place in troubled relationships (Gottman & Silver, 2012), they occur in happy ones as well (Glass, 2003). The interpersonal reasons partners typically provide for their unfaithfulness include loneliness, lack of affection, and sexual frustration. Although the unfaithful partner may not be getting enough from the relationship, it is just as likely that the unfaithful partner is not giving enough (Glass, 2003).
Multiple affairs may indicate an addiction to sex, love, or romance. Love and romance addicts are driven by the passion of a new relationship. Sexual addicts are compulsively attracted to the high and the anxiety release of sexual orgasm (Carnes & Carnes, 2010). But such release comes with a price—feelings of shame and worthlessness. In contrast, philanderers who perceive sex as an entitlement of gender or status take advantage of opportunities without guilt or withdrawal symptoms (Glass, 2003).

Emotional attachments range from casual sex and "one-night stands" to long-term love affairs. Casual sexual involvement occurs more in men, whereas emotional involvement without sex is more common among women (Gottman & Silver, 2012). An emotional affair differs from a platonic friendship in three basic ways: First, there is greater emotional intimacy than in the primary relationship; second, there is sexual attraction and chemistry between the two parties; and third, secrecy and deception are employed to maintain the relationship (Glass, 2003). Internet affairs, which cause relational distress despite lack of actual physical contact, exemplify emotional affairs. However, combined-type affairs in which intercourse occurs within a deep emotional attachment usually have the most disruptive impact.

Vulnerabilities leading to infidelity are often linked to relational problems (e.g., avoidance of conflict, fear of intimacy) or life cycle changes (e.g., transition to parenthood, empty-nest) (Gottman & Silver, 2012). Some dissatisfied partners begin an affair as a way of exiting from an unhappy relationship. More frequently, however, the history of the relationship is re-written to justify an ongoing affair. As Glass (2003) points out, it is unreasonable to compare a forbidden love affair that is maintained by romantic idealization with the routine familiarity of a long-term relationship.

**The Impact of Discovery**

It is common for both partners to experience depression (including suicidal thoughts), anxiety, and/or a profound sense of loss following the initial disclosure. The reactions of the betrayed partner resemble the post-traumatic stress symptoms of the victims of catastrophic events (Glass, 2003; Gottman & Silver, 2012).

Common reactions to the loss of innocence and shattered assumptions include obsessively pondering details of the affair; continuously watching for further signs of betrayal; and physiological hyperarousal, flashbacks, and intrusive images. The most severely traumatized are those who had the greatest trust and were the most unsuspecting. Unfaithful partners may fear that they will be punished forever for the betrayal while they grieve for the lost dreams associated with the affair (Lusterman, 2005).

**Treatment & Recovery**

Along with domestic violence, couple therapists consider infidelity as one of the most challenging problems to treat (Gordon, Baucom, & Snyder, 2005). Not surprisingly, there are a myriad of approaches in the clinical literature for the treatment of infidelity.
The clinical approach I have found most useful is based on an interpersonal trauma model primarily drawn from the work of Glass (2003) and Gottman (2012).

**Therapeutic Direction.** The first issue to be addressed in therapy is clarifying whether the purpose of treatment is rebuilding the relationship, resolving ambivalence about whether to remain together, or separating in a constructive way. One partner may want to reconcile while the other partner is still ambivalent or has decided to leave.

When the ambivalence is pervasive (and it often is), then a series of conjoint and individual sessions can help sort out the involved concerns. At this juncture, assisting the couple in assessing the likelihood of future betrayal can be initially helpful in the decision making (Gottman & Silver, 2012), and if the ambivalence persists, then helping the couple step back and assess the viability of their relationship can be a useful means of addressing the ambivalence (Doherty, 2011).

**Stages of Treatment.** If the decision is to rebuild the relationship, the treatment format is primarily a conjoint one with the first stage of treatment focusing on establishing safety and addressing the painful emotions involved. Understanding the vulnerabilities for the infidelity and telling the story of the affair comprise the middle stage. Integrating the meaning of the affair into the present and moving on into the future is the final stage of healing and forgiveness.

As Glass (2003) points out, a wall of secrecy in the relationship and a window of intimacy in the affair usually characterize these triangles. Reconstructing the relationship requires reversing the walls and windows by erecting a wall with the affair partner and a window of honesty with the betrayed partner.

**Establishing Safety.** Recovery cannot begin until contact with the affair partner is terminated. Stopping an affair does not mean just ending the sexual aspects of the relationship. All personal discussions, coffee breaks, and phone calls must also be stopped. When the affair partner is a co-worker, the contact must be strictly business, and necessary or unplanned encounters must be shared with the spouse in order to rebuild trust (Glass, 2003).

**Atonement.** Atonement is a major step in the healing process. This involves the unfaithful partner repeatedly being able to express heartfelt remorse and taking full responsibility for the hurt he or she has caused. Atonement cannot take place if the unfaithful partner makes excuses or insists that the betrayed partner take partial blame for the infidelity. Furthermore, atonement requires that the betrayed partner work at not shutting the door on forgiveness. If he or she gets caught up in hurt and anger, the couple will not be able to move forward in their relationship (Gottman & Silver, 2003).

**Telling the Story.** A guiding principle of recovery is that disclosures and discussions about the infidelity will enhance healing (Vaughn, 2003). However, a destructive process of interrogation and defensiveness never promotes healing, even if the answers are truthful. The initial discussions often resemble the adversarial interaction
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between a detective and a criminal, but with the help of the therapist, these discussions can evolve from a truth-seeking inquisition to a more open-minded process of information seeking (Glass, 2003).

Simple facts such as who, what, where, and when can be answered during the early stages of treatment to relieve some of the pressure for information. It is preferable to delay complex questions about motivations and sexuality until later in the therapeutic process. In these later discussions, Gottman (2012) correctly cautions disclosing specific details about the sexual relationship so as to limit the obsessive rumination that can trigger or exacerbate posttraumatic stress in the betrayed partner.

**What Went Wrong.** Once the basic facts about the infidelity are established and a sense of truthfulness is re-established, both partners need to arrive at an understanding of why the infidelity took place in the relationship. General explanations such as “We were going through a bad patch” or “We were spending too much time apart” are not sufficient enough. Both partners need to fill in the details to these explications. For example, the unfaithful partner might address why he or she began to invest less in the relationship and became less dependent on getting his or her needs met through it. Likewise, the faithful partner might explore if he or she noticed anything awry in the relationship; and if he or she was aware of something askew, the faithful partner might discuss what he or she specifically noticed. By addressing these and related concerns, the couple can develop a mutual explanation of what went wrong so that they will be able to take steps to prevent future occurrences of infidelity (Gottman & Silver, 2012).

**Forgiveness.** After arriving at a joint understanding of what went wrong, the couple starts exploring what they can do to improve their relationship. In these discussions, care needs to be taken to avoid blaming the betrayed partner for deficiencies in the relationship; but at the same time, he or she must be willing to cooperate in addressing these deficiencies and building a more viable relationship.

As a result of these discussions, the unfaithful partner demonstrates his or her interest and dedication to putting the relationship first. From this experience, the betrayed partner begins to regain trust and is willing to forgive the unfaithful partner. However, this does not mean the unfaithful partner is fully absolved; rather, it means that the betrayed partner is willing to make a good faith effort in putting aside his or her resentments and in working to improve the relationship (Gottman & Silver, 2012).

**Reestablishing Intimacy.** A key aspect of the recovery process is that the couple reestablish their sexual relationship. Often the betrayed partner doesn’t want to risk feeling close again. But as Gottman (2012) stresses, the relationship can’t really begin again until this aspect of their intimacy is reinstated.

**Signs of Recovery.** When the couple has worked through the infidelity, the following changes in the relationship are likely to have occurred: (1) the vulnerabilities for the infidelity are understood and have been addressed; (2) the couple has developed trust,
commitment, mutual empathy, and shared responsibility for change; and (3) the couple is stronger and more intimate.

References