

A QUALITATIVE EXPLORATION OF THE PROCESS OF RECOVERING FROM AN
AFFAIR

By

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ABSTRACT

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Infidelity is one of the most commonly cited reasons for divorce and is associated with a variety of negative consequences such as financial burden, emotional distress, and sexual dissatisfaction. It is also perceived by therapists as being one of the most difficult issues to treat. Yet, there is limited prior research on the process of recovering from an affair, particularly from the perspective of those who have experienced it. In this project, couples who experienced an affair and stayed together post discovery were recruited to participate. Using a qualitative approach, participants completed a semi-structured interview, and thematic analysis was used to analyze the data. Study one relied on attachment theory to better understand the role of the attachment bond in the process of recovering from an affair. Participants' perceptions of the ways in which each dimension of the attachment bond was involved in the process of recovery was analyzed. Study two examined the influence of one's role in the affair on the process of recovering from the affair. Both similarities and differences in the experiences of injured versus involved partners were examined. Implications of both studies and directions for future research are discussed.

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To my family and to my husband,
thank you for always believing in me.

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TABLE OF CONTENTS

LIST OF TABLES	ix
CHAPTER 1: INTRODUCTION TO THE STUDY	1
Statement of the Problem	1
Theoretical Framework	3
Attachment theory	3
Gaps in Current Research	6
Consideration of real-life events	6
Inclusion of both partners	6
Recovery from an affair	7
Qualitative research	7
Theoretical framework	8
The Present Study	8
Research questions	9
CHAPTER 2: LITERATURE REVIEW	10
Infidelity	10
Terminology and typologies	10
Risk factors	11
Demographic	11
Interpersonal	13
Consequences of infidelity	16
Recovery from an Affair	17
Intervention	19
Attachment Theory	21
Measurement and classification system	21
Two approaches to measurement	21
History of measurement	22
Romantic Relationships	23
Attachment injury	23
Recovery from an affair	25
CHAPTER 3: METHODOLOGY	27
Research Design	27
Procedures	27
Sampling	29
Recruitment strategy	29
Inclusion criteria	29
Instruments	30
Demographics	30
Measure of attachment	30
Interview	31

Data Analysis	31
Study one	31
Study two	32
Standards of Quality	32
Trustworthiness.....	32
Validity	32
Reflexivity.....	33
APPENDICES	34
APPENDIX A: Recruitment Flyer.....	35
APPENDIX B: Consent Form	36
APPENDIX C: Demographic Form.....	38
APPENDIX D: Experiences in Close Relationships Questionnaire.....	41
APPENDIX E: Semi-Structured Qualitative Interview	43
CHAPTER 4: STUDY ONE.....	46
Examining the role of the attachment bond in the process of recovering from an affair	46
Abstract	46
Introduction.....	46
Affair Recovery	47
Attachment Theory	48
Attachment Theory and Affair Recovery	49
Present Study	50
Method	50
Procedures.....	50
Participants.....	51
Measures	53
Demographics	53
Attachment style	53
Interview	53
Data Analysis	54
Results.....	54
Availability	54
Closeness.....	55
Communication.....	56
Dependability.....	58
Responsiveness	60
Discussion.....	61
Clinical Implications.....	64
Directions for Future Research	65
Limitations	65
Conclusion	66
APPENDICES	67
APPENDIX A: Table 4.1 Availability.....	68
APPENDIX B: Table 4.2 Closeness.....	69
APPENDIX C: Table 4.3 Communication	70
APPENDIX D: Table 4.4 Dependability	71

APPENDIX E: Table 4.5 Responsiveness.....	72
CHAPTER 5: STUDY TWO.....	73
The impact of the role in the affair on the recovery process	73
Abstract.....	73
Introduction.....	73
Present Study	75
Method	76
Procedures.....	76
Participants.....	77
Measures	78
Demographics	78
Interview	78
Data Analysis.....	79
Results.....	80
Decision to Recommit to the Relationship	80
Injured partner.....	80
Involved partner	81
Relationship Dimensions	83
Injured partner.....	83
Involved partner	85
The Healing Process	87
Injured partner.....	87
Involved partner	90
Discussion.....	93
Clinical Implications.....	97
Directions for Future Research	98
Limitations	99
Conclusion	99
APPENDICES	100
APPENDIX A: Table 5.1 Decision to Recommit to the Relationship	101
APPENDIX B: Table 5.2 Relationship Dimensions.....	103
APPENDIX C: Table 5.3 The Healing Process.....	106
REFERENCES	110

LIST OF TABLES

Table 4.1 Availability	68
Table 4.2 Closeness	69
Table 4.3 Communication.....	70
Table 4.4 Dependability.....	71
Table 4.5 Responsiveness	72
Table 5.1 Decision to Recommit to the Relationship	101
Table 5.2 Relationship Dimensions	103
Table 5.3 The Healing Process	106

CHAPTER 1: INTRODUCTION TO THE STUDY

Statement of the Problem

One in five couples report infidelity as the primary cause of divorce, making it the most frequently cited reason for the dissolution of marriages (Amato & Previti, 2003). It is also one of the most common and devastating forms of interpersonal betrayal, often leading to emotional distress and financial burden (Crouch & Dickies, 2016; Foster & Misra, 2013; Omarzu, Miller, Schultz, & Timmerman, 2012; Rachman, 2010). Acts of infidelity are associated with symptoms of depression, anxiety, and posttraumatic stress disorder (PTSD), and with the onset of violence in relationships (Couch, Baughman, & Derow, 2017; Wang, King, & Debernardi, 2012).

Historically, infidelity has been described as one of two distinct types: 1) *emotional infidelity*, defined as emotional involvement with and strong affection for another person that includes the investment of time and attention without the knowledge of one's partner, and 2) *sexual infidelity*, defined as engaging in sexual behaviors outside of a relationship when the rules of that relationship prohibit it (Buss, Larsen, Westen, & Semmelroth, 1992; Guitar et al., 2017; Reis & Sprecher, 2009). These definitions hinge on the concept of monogamy whereby engaging in any type of romantic connection with another person, whether emotional or sexual, is considered a violation of that relationship. The literature also considers the possibility that infidelity encompasses both an emotional and sexual connection, which has been referred to as *relational infidelity* (Reis & Sprecher, 2009). Additionally, it is important to understand the role that each partner plays in infidelity. The partner who is having the affair is referred to as the *involved partner* (Moultrup, 2003), while the partner not having the affair is referred to as the *injured partner* (Gordon, Baucom, & Snyder, 2004; Olson, Russell, Higgins-Kessler, & Miller, 2002).

Infidelity damages the security and trust between partners and has been conceptualized by clinicians as an attachment injury (Johnson, 2002; Schade & Sandberg, 2012). An attachment injury is a perceived abandonment, betrayal, or breach of trust by an attachment figure that occurs during a critical moment of need or a time of intense vulnerability (Johnson, Makinen & Millikin, 2001). An injury such as infidelity threatens the attachment security by destroying the basic capacity to trust and activating the injured partner's attachment needs and fears (Johnson, 2005; Schore, 2003). Conceptualizing infidelity as an attachment injury provides a theoretical basis for understanding the significant impact on the primary relationship and the mechanisms that aid couples in the process of recovery.

Over 50% of couples that experience infidelity will seek therapy in an attempt to maintain the relationship (Peluso & Spina, 2008). There has been limited research on the process of recovering from an affair, so much so that there are no reliable statistics on the percentage of partners who choose to stay together after the discovery (Allen & Atkins, 2012). One concern is the lack of understanding about the mechanisms that lead to recovery, which is important for informing clinical practice. There has been some research examining the factors that motivate couples to stay together, including the way in which the affair was discovered, the level of motivation on the part of the involved partner to end the affair, and the fear of failure from the dissolution of the relationship (Abrahamson, Hussain, Khan, & Schofield, 2012; Afifi, Falato, & Weiner, 2001; Diblasio, 2000). Additional research is needed to provide a more comprehensive understanding of couples' motivations to remain together after the discovery of an affair and the mechanisms through which couples heal.

Theoretical Framework

Attachment theory. Attachment theory was developed by John Bowlby, and has been expanded by others through extensive research. Bowlby was initially interested in learning more about parent-child relationships and did so by observing children who were separated from their parents, with a specific focus on examining the emotional response of the child at the time of separation. He discovered a predictable sequence of reactions that is believed to reflect inherent attachment needs (Bowlby, 1973). From this research, Bowlby concluded that the attachment relationship serves as a secure base for the child to engage in exploration of the surrounding world, while knowing that the parent(s) will remain present and responsive to the child's needs (Bowlby, 1988). Ainsworth and colleagues (1978) developed a three-category system for classifying attachment based on Bowlby's theory of parent-child interactions. According to this system, a secure attachment is developed when a caregiver is sensitive and responsive to an infant's cues and needs. When a caregiver is slow or inconsistent in responding to the infant's cues and regularly interferes with desired activities, the infant develops an insecure-anxious attachment. When a caregiver is slow or inconsistent in responding to the infant's cues and consistently rejects attempts at physical contact, the infant develops an insecure-avoidant attachment.

Bowlby also believed that attachment relationships remain important through adulthood and later impact other close relationships such as with romantic partners. Over time, the romantic partner becomes the primary attachment figure for which one desires closeness in order to foster feelings of support, safety, and security (Fraley & Davis, 1997; Hazan & Zeifman, 1999; Main, 1990). In the late 1980s, Hazan and Shaver conducted empirical studies to test Bowlby's theory on the importance of attachment throughout the lifespan. Hazan and Shaver (1987) applied the

three-category model of parent-child attachment developed by Ainsworth and colleagues (1978) to the study of romantic love. Participants were asked to choose which of three descriptions, associated with secure, anxious, and avoidant attachment representations, best described their feelings in romantic relationships. The results were similar to those found by Ainsworth and colleagues (1978) in that 56% of the sample were classified as having a secure attachment, 19% were classified with an insecure-anxious attachment, and 25% were classified with an insecure-avoidant attachment. These results further supported the claim that one's romantic attachment in adulthood is heavily influenced by prior experiences with attachment figures (Dubá, Kindsvatter, & Lara, 2008)

Adults rely on a romantic partner to be a secure base by detecting requests for support, correctly interpreting these requests, and responding in an appropriate and timely manner (Crowell, Gao, Pan, & Waters, 1997; Waters & Cummings, 2000). Individuals look to their partners to be a source of safety and comfort during times of stress, illness, or when one feels threatened. By being available and responsive, the romantic partner acts as a secure base so that the individual feels more comfortable handling these adverse situations and exploring the surrounding world (Fraley & Shaver, 2000; Waters & Cummings, 2000). Individuals seek out romantic relationships that meet their attachment needs and continuous activation of the attachment system contributes to the individual's working model of the primary relationship (Feeney, 1999; Mikulincer & Shaver, 2007). When an individual perceives a partner as available and responsive to his or her needs, the individual feels more secure in the relationship, thus fostering a *secure* attachment relationship (Main, 1990). Secure adults describe their partners as available, supportive, cooperative, and sensitive, all of which are associated with high levels of trust, commitment, interdependence, and relationship satisfaction (Crowell & Owens, 1998;

Kirkpatrick & Davis, 1994; Mikulincer, 1998). Individuals with a self-reported secure attachment style are attracted to relationships characterized by mutual support, healthy interactions, and feelings of comfort and safety in reaching out to one's partner (Lapsley, Varshney, & Aalsma, 2000). In contrast, when an individual does not experience the partner as attuned and available during times of need, the individual finds it much more difficult to feel supported and secure in that relationship. With repeated exposure to this lack of security, the individual may develop an underlying fear of rejection or may become emotionally distant from the partner. Both of these patterns of behavior are reflective of an *insecure* attachment, for which individuals tend to experience similar, unresolvable conflicts across multiple relationships (Main, 1990). An insecure-anxious attachment is characterized by a preoccupation with the availability of one's partner and a tendency to overinvest in the relationship. An insecure-avoidant attachment is characterized by the rejection of intimacy and closeness and a general discomfort with a partner's bids for closeness (Crowell & Owens, 1996; Shaver & Mikulincer, 2005).

During times of stress in a relationship, the attachment system plays a key role in how individuals cope (Morgan & Shaver, 1999) and one's attachment representations influence the patterns, outcomes, and overall satisfaction of that relationship (Hazan & Shaver, 1994). In addition, attachment has been found to significantly influence one's attitude towards and behaviors of infidelity and impacts the frequency and type of affair that one is likely to have (Brennan & Shaver, 1995; Allen & Baucom, 2004). Individuals who self-report high levels of relationship insecurity were found to be more likely to engage in infidelity (Bogaert & Savada, 2002; Weiser, 2012). A self-reported avoidant attachment style is associated with more favorable attitudes towards infidelity and a higher likelihood of engaging in infidelity (DeWall et al., 2011; Parker & Campbell, 2017). The influence of the attachment system on the frequency and type of

infidelity has been well supported in the literature, however, its influence on the decision to maintain the relationship (Morgan & Shaver, 1999) and the processes of recovery (Schade & Sandberg, 2012) have been underexplored.

Gaps in Current Research

Consideration of real-life events. Prior research commonly uses vignettes or hypothetical situations to assess attitudes and beliefs about infidelity. These studies tend to have large sample sizes and often do not include individuals who have actually experienced infidelity (Bendixen, Kennair, & Grontvedt, 2017; Brogdon, Fitzwater, & Johnson, 2006; Cann & Baucom, 2004; Shackelford, Buss, & Bennett, 2002). In a sample of undergraduate students, Harris (2003) did not find a relationship between the responses to real and hypothetical infidelity.

Inclusion of both partners. Infidelity occurs within a couple relationship and significantly impacts both partners. Research studies that only collect data from one partner are limited in their ability to present a coherent picture of the experience (Subotnik & Harris, 1999; Vaughn, 2003). Studies on the consequences of infidelity, including psychological distress, emotional distress, and symptoms of mental illness, tend to focus on injured partners only (Allen et al., 2005; Couch et al., 2017; Wang et al., 2012). In addition, research on the factors that contribute to staying together after the discovery of an affair has primarily included the injured partner (Afifi et al., 2001; Clark, 2003). The lack of attention to the experiences of involved partners is a gap in the literature. Some studies on the process of recovery from an affair have included both injured and involved partners, however, these participants are not from the same relationship and therefore couples' experiences of this process are not fully understood

(Abrahamson et al., 2012; Olson et al., 2002). Blow and Hartnett (2005a) suggest that studies include both partners in data collection and analysis to enhance the validity of this research.

Recovery from an affair. A specific focus on the process of recovering from an affair occupies a small proportion of the research studies conducted on the topic of infidelity. While infidelity is a leading cause of the termination of relationships, many couples choose to stay together after the discovery of an affair. Researchers have proposed models of forgiveness (Fife, Weeks, & Stellberg-Filbert, 2013; Gordon, Baucom, & Snyder, 2000), which is considered to be an important element of the recovery process (Olmstead, Blick, & Mills, 2009). In addition, research on recovering from an affair has used both quantitative data to assess the effectiveness of interventions (Atkins, Eldridge, Baucom, & Christensen, 2005; Atkins, Marín, Lo, Klann, & Hahlweg, 2010; Gordon et al., 2004; Greenberg, Warwar, & Malcom, 2010; Makinen & Johnson, 2006; Marín, Christensen, & Atkins, 2014) and qualitative data to understand the experiences of partners following disclosure (Abrahamson et al., 2012; Olson et al., 2002). More research is needed on the interactional processes of couples following the disclosure of an affair (Olson et al., 2002).

Qualitative research. Qualitative research methods focus on gaining a greater understanding of participants' experiences by providing rich, thick descriptions of the meanings they assign to these experiences (Gillham, 2000; Miles, Huberman, & Saldana, 2013). There has been limited qualitative research on infidelity and affair recovery. Treas and Giesen (2000) used face-to-face interviews to explore the reasons for sexual exclusivity among married and cohabitating couples. Omarzu and colleagues (2012) collected qualitative data via an Internet survey from a sample of involved partners asking them to describe the reasons for the affair and the patterns of interaction that were present in the primary relationship at the time of the affair,

which may have contributed to the motivation to seek an extradyadic relationship. Another study used face-to-face interviews to assess for risk of sexually transmitted diseases (STDs) of injured partners based on the sexual behaviors of the involved partner (Pulerwitz, Izazola-Licea, & Gortmaker, 2001). With a focus on affair recovery, Olson and colleagues (2002) used phone interviews to explore the interactional and emotional processes among couples after the disclosure of an affair. Abrahamson and colleagues (2012) used a narrative approach to analyze in-depth interviews with individuals who had remained together with their partner after experiencing infidelity.

Theoretical framework. Attachment theory is one of the most commonly used theories to understand adult romantic relationships (Fraley, 2002), however, few studies have examined the associations between attachment and infidelity. Attachment styles have been linked with the likelihood of engaging in infidelity, specific types of affairs, and the motivation to seek out an extradyadic relationship (Allen & Baucom, 2004; Bogaert & Savada, 2002; DeWall et al., 2011; Weiser, 2012). Attachment-informed interventions, such as Emotionally Focused Therapy (Johnson & Greenberg, 1985), have also been found to be effective in resolving attachment injuries, such as infidelity (Greenberg et al, 2010; Makinen & Johnson, 2006). More research on the factors that influence infidelity and the process of recovery, such as attachment style, is needed in this literature (Blow & Hartnett, 2005b).

The Present Study

The present study aimed to build on previous studies of affair recovery with two separate, but interrelated aims: 1) to understand the role of the attachment bond in the process of recovering from an affair, and 2) to explore the process of recovering from an affair from the perspective of one's identified role in the affair as either the injured or the involved partner. This

qualitative research makes a significant contribution to the current literature and provides valuable insight into the process of recovering from an affair.

Research questions.

1. What is the role of the attachment bond in the process of recovering from an affair?
2. How does one's role in the affair influence the individual's experience of the process of recovery?

CHAPTER 2: LITERATURE REVIEW

Infidelity

Terminology and typologies. Infidelity is defined as *a betrayal of the implied or stated commitment regarding intimacy, including both sexual and emotional fidelity to one's partner* (Fife, Weeks, & Gambescia, 2008). There are many terms that are used interchangeably in the literature, such as affair, cheating, extradyadic relationship, and extramarital involvement, all of which are considered acceptable synonyms for infidelity (Weiser, Lalasz, & Weigel, 2014).

There are also several existing typologies. Pittman (1987) identified four common patterns in affairs: 1) one-night stand, 2) romantic affair, 3) structural infidelity, and 4) habitual

philandering. Similarly, Lusterman (1998) thought infidelity could be conceptualized as a brief encounter, an ongoing relationship with one person, or a series of extradyadic relationships.

From this, he proposed eight different types of affairs: 1) life crisis affair, 2) entitlement affair, 3) sexual affair, 4) exploratory affair, 5) tripod affair, 6) sexual addiction affair, 7) retaliatory affair, and 8) exit affair. Subotnik and Harris (2005) believed that in addition to capturing the duration and frequency, typologies would be most clinically relevant if they described different reasons for infidelity. They proposed the following reasons 1) unfulfilled expectations, 2) unrealistic ideas about love and marriage, 3) need for attention, 4) boredom, 5) unavailable spouse, 6) lack of sexual desire, 7) poor-risk partners, 8) family affairs, 9) affair with a purpose, 10) homosexual affair, and 11) exit affair. One major criticism of these typologies is the lack of a theory-driven conceptualization of infidelity. Woolley and colleagues (2010) used attachment theory as a guide to develop a framework based on the assumption that threats to the emotional security in a relationship predispose couples to negative interaction patterns that underlie their basic attachment needs and deficits in their relationship. From this perspective, they proposed the

following typologies: 1) the protest affair, 2) the “come and get me” affair, 3) the burned out affair, 4) the romantic fantasy affair, 5) the hedge fund affair, 6) the power player affair, and 7) the compulsive affair.

Risk factors. Researchers have examined a variety of risk factors associated with engaging in infidelity. These factors fall into three general categories: demographic, interpersonal, and personality (Mark, Janssen, & Milhausen, 2011). This review will focus on demographic and interpersonal factors, as these are more closely related to the scope of the present study.

Demographic. Some of the most commonly researched demographic risk factors are gender, education level, income, and religious beliefs. Gender is arguably the most commonly studied risk factor for infidelity (Jackman, 2015; Mark et al., 2011). Significant differences between men and women have been found for both frequency and type of infidelity. Men are more likely to engage in infidelity, report more favorable beliefs about infidelity, and are more likely to engage in sexual affairs that lack an emotional connection, as compared to their female counterparts (Allen & Baucom, 2004; Atkins, Baucom, & Jacobson 2001; Brennan & Shaver, 1995; Wiederman, 1997). This may be due to differing views of infidelity based on cultural socialization factors (Glass & Wright, 1985), which also contribute to differences in justifications for infidelity. Men are more likely to cite intense sexual attraction, whereas a woman is more likely to provide the justification that she has fallen in love (Glass & Wright, 1992). This can also influence how men and women respond to infidelity when it does occur such that men report a more difficult time forgiving a partner for sexual infidelity and a greater likelihood of terminating the relationship following an act of sexual infidelity, both in comparison to instances of emotional infidelity (Shackelford et al., 2002). With that said, more

recent research has provided support for a narrowing of this gender gap (Barta & Kiene, 2005; Kato, 2014), which is especially true of emotional infidelity (Allen et al., 2005).

Research studies have reported mixed results on the predictive value of education level and income (Munsch, 2012), which may be because it is difficult to tease apart these variables. However, there is some evidence to support that individuals with higher education levels are more likely to have an affair (Atkins et al., 2001; Blow & Hartnett, 2005; Whisman & Snyder, 2007). One plausible explanation for this finding is the correlation between education level and employment, where the work environment has been found to present more opportunities to engage in extradyadic relationships (Allen et al., 2005; Atkins et al., 2001; Mark et al., 2011; Treas & Giesen, 2000). One study found rates of up to 50% of individuals who have had an affair reported meeting the extradyadic partner at work (Wiggins & Lederer, 1984). There is also some support for the association between income and infidelity such that individuals with a higher income are more likely to have an affair (Atkins et al., 2001; Blow & Hartnett, 2005; Munsch, 2015), however, other studies have not found income and infidelity to be associated (Jackman, 2015; Mark et al., 2011). Researchers may also need to consider the intersection of gender and financial earning, in order to have a more clear understanding of the ways in which income predicts infidelity. Munsch (2015) found that men who are breadwinners have a higher likelihood of engaging in infidelity, while breadwinning women are less likely to do so.

Religion is a significant predictor of infidelity (Allen et al., 2005; Atkins & Kessel, 2008; Burdette, Ellison, Sherkat, & Gore, 2007; Mattingly, Wilson, Clark, Bequette, & Weidler, 2010; Whisman, Gordon, & Chatav, 2007) where individuals with no religious affiliation report a greater likelihood to engage in infidelity (Burdette et al., 2007; Mattingly et al., 2010); however, results are mixed when examining differences across religious denominations (Allen et al., 2005;

Burdette et al., 2007). Individuals who attend religious services several times per week are roughly 66% less likely to have an affair as compared to those who never attend (Burdette et al., 2007). This may be due to the fact that the couple is attending service together where religious attendance is a sign that the couple shares similar values and there is greater exposure to the importance of fidelity in marriage (Atkins & Kessel, 2008; Atkins et al., 2005). In addition, those who view the Bible as a sacred text are significantly less likely to cheat (Burdette et al., 2007; Esselmont & Bierman, 2014).

Interpersonal. Interpersonal risk factors include: 1) relationship and sexual satisfaction, 2) the type of affair, and 3) prior exposure to infidelity. A number of studies examining relationship satisfaction as a predictor of infidelity have reported mixed results (Mark et al., 2011), however, some researchers have found this to be a powerful predictor such that individuals who are highly satisfied are less likely to have an affair (Atkins et al., 2001; Buss & Shackelford, 1997; McAlister, Pachana, & Jackson, 2005; Previti & Amato, 2004; Shaw, Rhoades, Allen, Stanley, & Markman, 2013). In addition, relationship dissatisfaction is one of the main justifications of behavior for those who have cheated on their partners (Emmers-Sommer, Warber, & Halford, 2010). Research has consistently demonstrated a strong correlation between relationship satisfaction and sexual satisfaction (Breznyak & Whisman, 2004; Byers, 2005; Sprecher, 2002), however, given the different types of infidelity, it is important to consider both of these variables as unique predictors. A rewarding sexual relationship is associated with a lower likelihood of infidelity (Campbell, 2009; Dabrowski, 2010; Liu, 2000; Waite & Joyner, 2001), whereas a decrease in the frequency of sex may put a couple at higher risk for infidelity (Jefferson, 2012). In a retrospective study, Allen and colleagues (2005) found that 42% of individuals who had cheated reported low levels of sexual satisfaction. Examining this

association with both dating and married couples, Turliuc and Scutaru (2013) found a significant negative relationship between sexual satisfaction and infidelity with both emotional and sexual components, such that those with lower levels of sexual satisfaction in the primary relationship were more likely to have an affair. There were no significant differences found for likelihood to have a sexual versus an emotional affair.

Studies examining different types of affairs have produced mixed results. Some prior research found that sexual infidelity is viewed more negatively than emotional infidelity (Brogdon et al., 2006; Harris, 2003). In addition, an injured partner in a sexual affair is less likely to forgive the involved partner, as compared to an emotional affair (Bendixen et al., 2017). This is especially true when the sexual affair occurs with someone whom their partner had a prior romantic relationship with (Cann & Baucom, 2004). Other studies have reported emotional infidelity to be the more distressing type (Buss, 2000; Carpenter, 2012; Harris, 2002). These mixed results could be due to inherent differences in gender, as men and women who cite different reasons for engaging in infidelity may also view each type of infidelity differently (Brase, Adair, & Monk, 2014; Taggler & Jeffers, 2013; Urooj, Haque, & Anjum, 2015). Researchers have also explored infidelity that encompasses both a sexual and emotional connection and found that this type poses the greatest threat to the primary relationship and the individual well-being of the injured partner (Glass & Wright, 1985; Reis & Sprecher, 2009; Thompson, 1984).

Prior exposure to affairs is another risk factor to consider. One type of exposure is intergenerational, which refers to individuals who witness infidelity in their parents' relationship. Human beings learn about relationships from their family members first (Weiser, 2012) and these early experiences have a significant impact on one's expectations for and beliefs about

future relationships (Doucet & Asteline, 2003). Research continually supports the impact of family of origin experiences on romantic relationship outcomes in adulthood (Doucet & Aseltine, 2003; Tallman, Gray, Kullberg, & Henderson, 1999). When examining individuals with a family history of infidelity, there is a significantly higher likelihood for the individual to also pursue romantic interests outside of the primary relationship (Lusterman, 2005) or be in a relationship with a partner who pursues extradyadic relationships (Hunyady, Josephs, & Jost, 2008). This finding may be particularly true when there is a parent-child gender match such that males who report their fathers engaging in infidelity are significantly more likely to do so as well (Havlicek, Husarova, Rezacova, & Klapilova, 2011; Platt, Nalbone, Casanova, & Wetchler, 2008). A couple of plausible hypotheses for this association are: the witnessing of infidelity as a child shapes one's expectations and behaviors in future romantic relationships (Brown, 2001) and in general, these individuals experience more difficulty in maintaining high-quality, monogamous relationships (Lusterman, 2005).

It is also important to consider an individual's personal history with infidelity, which includes those who have been unfaithful in the past with the current and/or a prior partner as well as those who have experienced unfaithfulness from the current and/or a prior partner. One's personal experiences with infidelity have been shown to shape one's attitudes towards it (Blow & Hartnett, 2005b; Wiederman, 1997). Although this association appears to be underexplored in the literature, some research has found individuals who have had a prior affair are more likely to cheat again in the future (Adamopoulou, 2013). Sharpe and colleagues (2013) examined attitudes toward infidelity by exposing participants to a series of vignettes and having them respond to questions of acceptability and forgiveness based on each one. Results showed that both men and women with a prior history of infidelity reported the unfaithful vignette character to be

forgivable and the behavior to be more acceptable when there was gender alignment between themselves and the character. When drawing comparisons between groups, those who identify as an injured partner have a significantly greater likelihood of reporting jealousy and distress in response to hypothetical infidelity (Edlund, Heider, Scherer, Farc, & Sagarin, 2006; Sagarin, Becker, Guadagno, Nicastle, & Millevoi, 2003) and identifying both sexual and emotional acts of infidelity to be as equally damaging (Berman & Frazier, 2005; Harris, 2003).

Consequences of infidelity. In addition to identifying predictive factors of infidelity, it is also important to consider the consequences of this when it does occur. One of the most obvious consequences is the termination of the relationship (Amato & Previti, 2003; De Graaf & Kalmijn, 2006; Negash, Cui, Fincham, & Pasley, 2014; Sweeney & Horwitz, 2001), which has been estimated to occur among over 50% of couples who experience an affair, however, more exact prevalence rates are unknown (Allen & Atkins, 2012). Along these lines, infidelity can result in a significant financial burden for the individual and the family (Crouch & Dickies, 2015). A closer look at the experiences of both injured and involved partners supports feelings of jealousy, anger, disappointment, guilt, and shame (Becker, Sagarin, Guadagno, Millevoi, & Nicastle, 2004; Eaves & Robertson-Smith, 2007; Foster & Misra, 2013; Hall & Fincham, 2009; Sweeney & Horwitz, 2001; Omarzu et al., 2012). For the injured partner, infidelity has also been associated with symptoms of anxiety, depression, PTSD, suicidal ideation, violence, and emotional distress (Allen et al., 2005; Couch et al., 2017; Wang et al., 2012), for which these symptoms may be more severe for women as compared to men (Becker et al., 2004; Miller & Maner, 2008). In addition, injured partners of those engaging in sexual affairs report feeling lower levels of sexual desire and sexual satisfaction, as well as a decline in frequency of sex with the current partner (Grov, Gillespie, Royce, & Lever, 2011; Manning, 2006). Significant

negative consequences of acts of infidelity are supported in the literature and therefore it is important to focus on the processes of healing and recovery.

Recovery from an Affair

A decision to remain in the relationship is not necessarily indicative of the individual's viewpoint on infidelity nor does it demonstrate a complete resolve of the couples' issues that preceded or surfaced as a result of the affair. Researchers on this topic have explored some of the factors that increase the likelihood that a couple will remain together. The way in which the affair was discovered and the involved partner's commitment to the primary relationship after the discovery are both cited as important factors to consider. A situation in which one partner "catches" the other in the act is more likely to move towards terminating the relationship, as compared to having a partner who openly discloses the affair (Afifi et al., 2001). When the involved partner can commit to ending the affair and recommit to the monogamy of the primary relationship, couples are also more likely to stay together (DiBlasio, 2000). In addition, couples have reported that the sharing of children, property, and an investment in the relationship as well as a fear of failure if the relationship ends are contributing factors to maintaining the relationship (Abrahamson et al., 2012). Although these factors increase the likelihood of staying together, most couples experience significant challenges and frequent stressors in their relationship after the discovery of an affair, and as they are working on maintaining the relationship.

Clark (2013) examined specific factors that contribute to healing from an affair in a sample of married, injured partners. Quantitative analyses concluded that factors such as communication, empathy, and forgiveness, were significantly, positively correlated with recovery from the affair and greater marital satisfaction. Using a qualitative approach, Olson and colleagues (2002) conducted semi-structured interviews with married individuals about their

experiences after the disclosure of an affair. Thirteen interviews, including two involved partners and 11 injured partners, were used in the analyses. Researchers conducted open coding and applied thematic analysis techniques to discern patterns in the data, which supported a three-stage model of experiences: 1) *roller coaster* describes the emotional intensity of the injured partner, 2) *moratorium* includes the injured partner's meaning making, and 3) *rebuilding trust* involves taking responsibility, commitment, communication, and forgiveness. Abrahamson and colleagues (2012) applied a narrative approach with a postmodern framework to conduct in-depth interviews with individuals who had experienced an affair and were still together two years after the discovery. Interviews from seven participants, including five involved and two injured partners, were transcribed and analyzed using a combined approach of thematic analysis and plotline analysis. Analyses revealed key themes in maintaining the relationship, including motivation to stay together, treasuring acts of kindness, making meaning of the affair, and social support. While these studies make an important contribution to understanding the experiences of infidelity and the process of recovery, the focus on just one partner reflects a significant limitation of this research (Blow & Hartnett, 2005a).

In order to have a comprehensive understanding of the process of recovering from an affair, it is important to consider the experiences of both partners. Bird and colleagues (2007) explored the process of recovery in a sample of two couples that had both sought therapy in response to infidelity. A structured interview and completion of the Dyadic Adjustment Scale (DAS; Spanier, 1976), a measure of marital functioning, were administered to both partners together. A qualitative interpretive approach to analysis was used and supported a three phase model of healing: 1) seeking expert assistance, 2) regaining control, increasing emotional openness, and rebuilding trust, and 3) forgiveness. Staples (2010) used a semi-structured

interview with both partners together, in a sample of three couples that reported therapy to be helpful in the recovery process. Interviews were transcribed and analyzed using a grounded theory protocol with a sequence of open, axial, and selective coding. Results identified two main themes in the process of recovery: rebuilding trust and managing emotions, both of which were achieved through forgiveness, a change in perspective, improved communication, and the influence of therapy.

Intervention. Several stage theories have been applied to recovering from an affair in which all couples experience a series of steps on their journey to restabilize the relationship. Spring (1996) suggests the following three stages: 1) both partners normalize their feelings, 2) the couple decides whether they want to recommit to their relationship or terminate it, and 3) if both partners decide to recommit to the relationship, they must undertake the process of rebuilding it. This process of rebuilding involves ending the extradyadic relationship, earning back trust, communicating pain, engaging in sexual intimacy, and forgiving the person who had the affair. Forgiveness can be defined as a reduction in the chronic, negative affect toward the transgressing partner, accompanied by a more balanced view of the relationship and relinquishing the desire for revenge (Gordon, Hughes, Tomcik, Dixon, & Litzinger, 2009; Hall & Fincham, 2006). Therapists who work with these couples report the significant role of forgiveness and the importance of providing psychoeducation to couples about the process of recovery (Olmstead et al., 2009). One model of forgiveness identifies a set of precursors, which are tasks that the couple must accomplish before forgiveness is possible (i.e. establish appropriate relationship boundaries), as well as a four-factor model of empathy, humility, commitment and hope, and apology (Fife et al., 2013). Another forgiveness-based intervention model focuses on dealing with the impact of the affair, finding meaning, and moving on, which

has been successfully applied to help couples navigate the process of recovering from an affair (Gordon et al., 2000, 2008; Valdez, 2015).

It is important for clinicians and researchers alike to possess knowledge of current approaches to recovering from an affair and established treatments to intervene with these couples. Gordon and colleagues (2004) proposed a treatment model guided by an interpersonal trauma framework, the use of cognitive-behavioral strategies, and a three-stage model of forgiveness. This model was used to intervene with couples ($N = 6$) who reported infidelity in their relationship and results demonstrated that these couples were less emotionally and relationally distressed and the injured partners reported greater forgiveness at the end of treatment. A randomized controlled trial was conducted using this same treatment model with 89 couples randomly assigned to either the treatment or control group. Hierarchical linear modeling was used to analyze dyadic data from the couples in the treatment group. Results supported a significant decrease in anxiety scores for both partners and a significant decrease in depression scores for involved partners only. Neither partner reported a significant change in relationship satisfaction as a result of the treatment (Kroger, Reibner, Vasterling, Schutz, & Kliem, 2012). Traditional behavioral couple therapy (TBCT; Jacobson & Margolin, 1979) was used to intervene with couples ($N = 134$) with marital problems, of which a small subset ($n = 19$) reported infidelity in their relationship before treatment began. Compared to the rest of the sample, couples with infidelity began treatment more distressed but did not show statistically significant differences by the end of treatment, which suggests that this may be an effective model for recovering from an affair (Atkins, Yi, Baucom, & Christensen, 2005). Similar results were found in a community-based sample of couple therapy where insignificant differences were found between affair and non-affair couples at the end of treatment and six month follow-up

(Atkins et al., 2010). Marín and colleagues (2014) followed a group of couples who experienced an affair over the course of five years after treatment and assessed the following outcomes: divorce, relationship satisfaction, and marital stability. There was a significant association between divorce and marital instability found in the positive direction, meaning that those who reported greater instability were also more likely to be divorced. For those who remained married, couples who did and did not experience infidelity did not significantly differ in marital stability or relationship satisfaction and both groups reported a significant increase in relationship satisfaction over time. Even with some support for the effectiveness of established interventions, the looming question of how best to help couples in the process of recovering from an affair still remains. A better understanding of the experiences of the recovery process for these couples will inform the development of or adaptation of treatment models.

Attachment Theory

Measurement and classification system.

Two approaches to measurement. There are two main approaches to measuring attachment style: observational coding and self-report. The argument over which measurement type “best” captures the construct of attachment has been a long-standing debate in the field (Fraley, 2002). Some have suggested that these measures are not inherently better than one another, but that each taps into different, albeit valid, aspects of adult working models of attachment relationships (Fortuna & Roisman, 2008). With this, researchers have been primarily concerned with ensuring that both measurement types yield the same results in attachment classifications. Results from a meta-analysis of ten studies comparing these measurement types found a small empirical overlap ($r = .09$) according to Cohen’s (1992) criteria, meaning that there is little similarity in the ways that these two measurement types are identifying different

categories (i.e. secure vs. insecure) of attachment (Roisman et al., 2007). Bernier and Matthe-Gagne (2011) replicated these findings with again a small (range $r = -.11 - .08$) overlap between an interview and a self-report measure of attachment.

History of measurement. The first objective instruments for measuring attachment were developed based on interactions with the primary caregiver. Mary Ainsworth's Strange Situation is an observational coding scheme of caregiver-infant interactions in which researchers are particularly interested in the infant's response when being reunited with the caregiver (Ainsworth et al., 1978). Another well-known objective measure, the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1996), is an 18 question, structured interview tool that asks individuals to discuss their attachment experiences and is believed to target attachment related needs that are below one's level of conscious awareness. The AAI is often considered the gold standard interview measure for attachment (Winston, Yaseen, Zhang, & Galynker, 2013).

Through empirical research on the application of attachment theory to adult romantic relationships, Hazan and Shaver (1987) developed the Love-Experience Questionnaire, which is a subjective measure of attachment style that asks participants to self-select the attachment representation (i.e. secure, avoidant, or anxious) that best describes their feelings in relationships. A description of each attachment representation is provided to participants. For example, secure attachment is described as, "I find it relatively easy to get close to others and am comfortable depending on them and having them depend on me. I don't often worry about being abandoned or about someone getting too close to me" (p. 515). When compared with participants' descriptions of the primary romantic relationship, secure individuals describe the relationship as happy and trusting, and report having the ability to provide and accept help from their partner. Avoidant individuals report a fear of intimacy, experience many fluctuations in their emotions,

and often feel jealous. Likewise, anxious individuals experience fluctuations in emotion and jealousy, in addition to obsessing over their partner and having a strong desire for reciprocation.

In the late 1990s, Brennan, Clark, and Shaver (1998) conducted a factor analysis of attachment dimensions in hopes of constructing a more concise model of romantic attachment. A large sample (N=1,086) of undergraduate students self-identified into one of four attachment categories and responded to 323 attachment-related items with results showing strong correlations among 60 attachment dimensions with 62% greater than 0.5. Next, they conducted a principal components analysis of the 60 dimensions, which resulted in two factors that together accounted for 62.8% of the variance. The factors were termed *avoidance* (top three scales on this factor: avoidance of intimacy, discomfort with closeness, and self reliance) and *anxiety* (top three scales on this factor: preoccupation, jealousy/fear of abandonment, and fear of rejection) and are commonly cited dimensions in self-report measures to date (Fraley, Waller, & Brennan 2000; Hazan & Shaver, 1987; Wei, Russell, Mallinckrodt, & Vogel, 2007). They used these results to develop a self-report measure of attachment known as the Experiences in Close Relationship (ECR; Brennan, Clark, & Shaver, 1998) questionnaire, which is considered to be the best validated and most widely used self-report measure (Bernier & Matte-Gagne, 2011).

Romantic Relationships.

Attachment injury. Johnson and colleagues (2001) describe a series of emotional and relational responses that occur after infidelity is discovered: 1) the injured partner will often use trauma language when describing the affair and will speak in life and death terms, 2) the injured partner will also express feelings of isolation and abandonment resulting from a breach of trust in the relationship, and 3) the couple will engage in a pattern of refusal to be vulnerable followed by feelings of anger and withdrawal behaviors. To address this specific type of relational

stressor, the Attachment Injury Resolution Model (AIRM; Greenberg & Johnson, 1988) was developed as a part of Emotionally Focused Therapy (EFT; Johnson & Greenberg, 1985), an attachment-informed approach to couple therapy. The AIRM assumes that the attachment injury is disclosed at the end of the de-escalation phase in EFT when the injured partner is invited to risk being vulnerable with the involved partner in hopes of creating a new emotional interaction (Makinen & Johnson, 2006). The model consists of four phases and eight steps that the couple moves through to resolve the attachment injury. The first phase is the *attachment injury marker* consisting of 1) the injured partner describes the injury and 2) the involved partner responds in a way that discounts, denies, or minimizes the injury. In the second phase, *differentiation of affect*, 3) the injured partner stays in touch with the injury while identifying the significance of it, and 4) the involved partner begins to understand the importance of this. *Reengagement* is the third phase, consisting of 5) the injured partner allowing the involved partner to witness vulnerability by expressing fear around the loss of the attachment bond while 6) the involved partner becomes more emotionally engaged and acknowledges responsibility. The fourth and final phase of *forgiveness and reconciliation* occurs when 7) the injured partner asks the involved partner for the comfort and caring that was unattainable at the time of the injury and 8) the involved partner responds in a caring way which aids in healing the hurt that originally resulted from the injury (Johnson & Greenberg, 1988; Johnson, 2004; Millikin, 2000). Researchers have validated this model by comparing couples who have resolved the attachment injury with those who have not, where findings support the resolved couples to be more affiliative, as demonstrated by self-disclosure, expressing needs, and affirmative statements, and also exhibit deeper levels of experiencing. In addition, resolved couples displayed significantly fewer hostile responses toward one another as compared to the unresolved couples (Johnson & Makinen, 2006;

Zuccarini, Johnson, Dalgleish, & Makinen, 2013). In a three year follow up study of couples who received the AIRM, results demonstrated the maintenance of improved dyadic adjustment, trust, and forgiveness along with a decline in the severity of the attachment injury (Halchuk, Makinen, & Johnson, 2010).

Recovery from an affair. Attachment theory was built on the premise that early experiences with caregivers inform a view of relating to oneself, others, and the world (Furman & Flanagan, 1997). From this perspective, infidelity is viewed as a threat to the adult attachment system, which must be addressed if the relationship is going to survive, and ultimately thrive (Johnson et al., 2001). Klacsmann (2007) administered quantitative measures in a sample of injured partners and found that insecure attachment was significantly associated with lower levels of trust and forgiveness and a greater likelihood of shattered assumptions of relationships. One's romantic attachment representations impact perceptions of the affair and its associated consequences, which lend support for the appropriateness of conceptualizing recovery from an attachment perspective. In addition, attachment theory is relevant to understanding the significance of a secure bond in adult romantic relationships (Hazan & Shaver, 1987). In a sample of eight couples, Haines (2011) administered a semi-structured interview with each partner separately to gain a better understanding of their experiences of infidelity from an attachment perspective. The interview probed for each partner to describe attachment experiences from the primary relationship and also from their relationships with their own parents. In addition, participants completed self-report attachment measures that were used to enhance the researcher's description of the participants. Interviews were analyzed using a constant comparative methodological approach (Glaser, 1978) and revealed the following themes: 1) insecure attachment relationships with parents, 2) a lack of communication and

emotional connection in the romantic relationship prior to the affair, and 3) the impact of the infidelity, which included broken trust, a stronger marriage, and self improvement. In addition, forgiveness was a reoccurring theme in the process of recovery that was aided by the presence of social support, counseling, and spirituality. Attachment should be more widely considered in infidelity research (Blow & Hartnett, 2005b) and these findings support using an attachment-informed framework to explore couples' experiences of infidelity and affair recovery. Empirical research on the AIRM, found that couples who identified as resolved by the end of couple therapy were found to be significantly more affiliative and have achieved deeper levels of experiencing than the unresolved couples (Makinen & Johnson, 2006). Resolved couples were also found to have increased trust and improved dyadic adjustment at three year follow up (Halchuk et al., 2010). These results are possible through the healing of the attachment injury and facilitating forgiveness, so that the therapist can more easily facilitate positive interactions, reinforce comfort, and re-define the attachment bond, all of which contribute to changing the couple's trajectory towards dissolution of the relationship (Makinen & Johnson, 2006; Schade & Sandberg, 2012). In addition, resolved couples, as compared to non-resolved, at the conclusion of couple therapy have been shown to follow the specific steps of the AIRM more closely (Naaman, Pappas, Makinen, Zuccarini, & Johnson-Douglas 2005), which supports the use of attachment-informed interventions.

CHAPTER 3: METHODOLOGY

Research Design

Qualitative research methods are used to understand a phenomenon in its naturally occurring context so participants' voices can be heard through the meanings they assign to their experiences (Gillham, 2000; Miles et al., 2013). Researchers may choose to use a qualitative approach for a variety of reasons, including: 1) to carry out an investigation where other methods are not practical, 2) to investigate a situation that little is known about, and 3) to find out what really happens for a group of people from their own perspective (Gillham, 2000), all of which are directly applicable to this research. Qualitative research has been underutilized in studies of infidelity (Haines, 2011), especially for those focused on recovering from an affair. Qualitative studies often include gathering and analyzing interviews from participants (Creswell, 2013). In this study, participant responses to semi-structured interview questions were used to address the research questions.

Procedures

Prior to beginning recruitment or any data collection approval from the Institutional Review Board was obtained. After expressing interest in participating in this research, individuals were contacted over the phone to ensure that all of the inclusion criteria, which are described in more detail below, were met. Each individual then received an overview of the study procedures, including the time commitment and use of audio recordings. If both partners indicated a willingness to participate, they were asked to select one of the following formats: 1) a 120 minute in person meeting to complete all paperwork and the interview or 2) the paperwork sent as password protected files via email to be completed and returned and a 90 minute block of time scheduled to complete the interview. The second format option used Zoom video-

conferencing technology, which gave participants the option to either enable the camera function allowing the researcher and participant to interact face-to-face, or disable the camera function allowing neither person to be able to see the other. Phone interviews have previously been used in studies on affair recovery as a way to increase anonymity and create more comfort in discussing this sensitive topic (Haines, 2011; Olson et al., 2002). By offering two options within the second format, each participant was able to choose which format was most comfortable for them, as some participants inherently preferred to complete the interview face-to-face, but their geographical location limited the feasibility of the in-person format. In addition, each partner selected a pseudonym, which was used to track participation throughout the study. All data were collected separately from each partner and no information was shared with the other partner. Due to the sensitive nature of this topic, it was important to assure participants that their identity would not be directly connected to their data (Blow & Hartnett, 2005a) and also that the interviews would be done separately to ensure safety and comfort in discussing this very difficult and potentially triggering topic (Haines, 2011).

Participants who selected the in-person format were given directions to a confidential space on the university's campus. When the participant arrived, the researcher reviewed the consent form, including the options to refuse to answer any questions and stop the interview at any time. The limits of confidentiality were reviewed and the sensitivity of the topic was acknowledged in order to create safety and openness in the interview. To protect the identities of participants, a signature was not required on the consent form and therefore participants verbally declared their consent to participate in the study. Each participant completed a demographic questionnaire, a quantitative assessment of attachment style, and a semi-structured interview focused on the process of recovering from the affair. Several of the interview questions were

selected for the analyses in the present study (see highlighted questions in Appendix E). After completion of all paperwork and the interview, each participant was given a resource list and was compensated \$50 for their participation. Participants who preferred to complete the interview via Zoom engaged in the same procedures as the in-person participants, except that the paperwork and referral list were sent via email and the compensation was mailed to each participant after completion of participation.

Sampling

Recruitment strategy. A purposive sampling approach was used as it is recommended in qualitative research to select participants that will best aid the researcher in understanding the problem (Creswell, 2003). This study recruited 10 couples, or 20 individuals, who had experienced infidelity and stayed together following the discovery of the affair. Participants were recruited via an advertisement sent to licensed mental health professionals across the United States as well as through posts on various social media sites, blogs, and listservs. The advertisement included a description of the study, inclusion criteria, and contact information. The investigators excluded any of their own clients as well as couples that they know personally from participating, in order to eliminate potential bias (Haines, 2011).

Inclusion criteria. There were several inclusion criteria for this study. First, the couple must have experienced infidelity in their relationship defined as *a sexual and/or emotional act that is outside of the primary relationship and constitutes a breach of trust and/or agreed upon boundaries of the relationship in terms of emotional or sexual exclusivity*. This definition encompasses all types of infidelity, includes non-married and same sex couples, and provides flexibility in determining what constitutes a breach of trust or boundaries, all of which fill existing gaps in the literature (Blow & Hartnett, 2005a). In addition to the occurrence of

infidelity, the couple must have met the following: 1) in a long-term, committed relationship, 2) both partners are willing to participate, 3) both partners are over the age of 18, and 4) both partners speak, read, and write in English.

Instruments

Demographics. The demographic form (see Appendix C) was used to gather basic demographic information, including information about the current relationship (i.e. relationship status and relationship length) and the affair that occurred (i.e. length of the affair and point of discovery). This form also gathered information about the participant's religiosity. Data from this questionnaire was used to provide detailed descriptions of the participants, including the primary relationship in which the infidelity occurred. This information was also considered in the discussion of the results, including limitations of the study and future directions for research.

Measure of attachment. The Experiences in Close Relationships (ECR; Brennan et al., 1998; see Appendix D) is a 36-item self-report measure of romantic attachment style that is considered to be the best validated and most widely used measure of attachment (Bernier & Matte-Gagne, 2011). The ECR assesses attachment based on the dimensions of low to high anxiety and avoidance. Sample items from the anxiety subscale include, "I worry about being abandoned" and "I get frustrated when my partner is not around as much as I would like." Sample items from the avoidance subscale include, "Just when my partner starts to get close to me I find myself pulling away" and "I find it difficult to allow myself to depend on romantic partners" (Brennan et al., 1998; pp. 70-71). The ECR is scored by adding all of the items on the anxiety and avoidance subscales separately, including those that are reverse scored (range = 18 – 126 for each scale respectively), and calculating the average for each subscale. Higher scores indicate attachment anxiety or avoidance while lower scores are representative of more

attachment security (Fraley et al., 2000). The ECR was included in study one only for descriptive purposes.

Interview. A semi-structured interview (see Appendix E) was constructed in an attempt to better understand the experience of affair recovery from the perspectives of those who had experienced it. Prior conceptualizations of romantic relationships rooted in attachment theory (Hazan & Shaver, 1987; Johnson, 2016; Wei et al., 2007; Van Epp, 1997) were used to identify the interview questions for study one. These questions explored the role of the following dimensions of the attachment bond: availability, closeness, communication, dependability, and responsiveness. Prior research on affair recovery (Abrahamson et al., 2012; Bird et al., 2007; Clark, 2013; DiBlasio, 2000; Olson et al., 2002; Staples, 2010) was used to identify the interview questions for study two. These questions pertained to the decision to recommit to the relationship, dimensions of the relationship impacted by the affair (i.e. rebuilding trust), and the process of healing (i.e. communication, forgiveness).

Data Analysis

Thematic analysis is a tool used to identify, analyze, and interpret themes as they emerge from qualitative research. It is a flexible method of data collection and can be applied across a variety of theoretical approaches (Braun & Clarke, 2006). Data analyses for both studies were guided by Braun and Clarke's (2006) six-step framework for thematic analysis: 1) become familiar with the data, 2) generate initial codes, 3) search for themes, 4) review themes, 5) define and name themes, and 6) produce the report. This framework has been used with prior research on infidelity (Clarke, Braun, & Wooles, 2014; Moller & Vossler, 2015; Vossler & Moller, 2014) and affair recovery (Abrahamson et al., 2012; Olson et al., 2002).

Study one. A deductive approach was used for the analysis in study one allowing the

data to be guided by participants' responses to specific questions about the process of recovering from an affair that were informed by attachment theory. Participants' responses to five interview questions, each pertaining to one of the dimensions of the attachment bond (availability, closeness, communication, dependability, and responsiveness), were reviewed and initial codes were generated. From these initial codes, themes and subthemes were identified and named. Quotes from participants were selected to demonstrate each theme or subtheme.

Study two. Participants' responses to the interview questions pertaining to the decision to recommit to the relationship, relationship dimensions, and the healing process, were analyzed first for injured partners and then for involved partners. Initial codes were generated and then grouped into common themes separately for injured and involved partners. Quotes from participants were selected to demonstrate each theme.

Standards of Quality

Trustworthiness. Trustworthiness is achieved when the findings of a study are credible and transferrable. This is a pillar of qualitative research that can be achieved through the use of multiple data sources and conducting an external audit of the results, in order to eliminate the inherent bias of the researcher (Lincoln & Guba, 1985). This study used three instruments for data collection: the demographic questionnaire, a measure of adult romantic attachment, and the semi-structured interview, all of which were administered to both partners. An expert in the field in attachment theory and couple relationships served as an auditor to validate the themes that emerged from the analyses. In addition, an audit trail, a record of the steps taken throughout the study (Carcary, 2009), was conducted in order to improve the dependability and confirmability of the results (Lincoln & Guba, 1985).

Validity. Validity in qualitative research begs the question of the credibility of both the

description of the data and the given explanation (Janesick, 1994). In order to ensure accuracy of description, this researcher employed a process of member checking that is often used to ensure a level of quality in the research (Lincoln & Guba, 1985). After each interview was transcribed, the participant was contacted and given the opportunity to review the transcript for accuracy. The transcript was shared via email as a password protected file. Of the 20 participants, 15 chose to review the transcript and three made changes.

Reflexivity. Qualitative research can be further enhanced by the process of self-reflection that is engaged in by the researcher throughout the duration of the study (Creswell, 2013). The process of reflexivity is at the heart of qualitative research and is defined as the way in which the researcher critically monitors and understands his or her role in all stages of the research process (Daly, 2007). Journal entries were used to document the experience of each of the interviews as well as the processes of transcribing and coding the data. These entries were then used to reflect on the researcher's position in the study and the potential impact of this position on the results. In addition to being a Caucasian female, the researcher is also a clinician. Interviews for research versus therapeutic practice call for different positions of the researcher and also follow different paths of inquiry (Daly, 2007). Burck (2005) recommends approaching these interviews from a position of curiosity in hopes of better understanding, as opposed to changing someone's personal experiences. A combined approach of remaining aware of positionality and documenting experiences supported a process of reflexivity that further enhanced this qualitative research.

APPENDICES



*Resiliency Processes in Couples Who Have Experienced an Affair**

Researchers at Michigan State University are looking to interview couples who have experienced an affair in their relationship, attended therapy in response to the affair, and have stayed together. Couples must be in a committed relationship and have terminated therapy. Participation includes an individual interview with each partner lasting 1-1½ hours and some brief paperwork. Participants will be compensated \$50 for their time.



Interested couples should contact:

Erica Rouleau-Mitchell (Study Coordinator)

Email: infidelitystudymSU@gmail.com

Or Phone: 219-237-4220

**For the purpose of this study, an affair is defined as "a sexual and/or emotional act that is outside of the primary relationship and constitutes a breach of trust and/or agreed upon boundaries of the relationship in terms of emotional or sexual exclusivity."*

APPENDIX B: Consent Form

Informed Consent Form

Resiliency Processes in Couples Who Have Experienced an Affair

Dear Research Participant,

You are invited to participate in a research study through Michigan State University entitled, “**Resiliency Processes in Couples Who Have Experienced an Affair**”. The purpose of this study is to understand how couples who have experienced an affair in their relationship and stayed together, found a way to heal. A richer understanding of these processes will help those who work with couples provide more effective and comprehensive services. There are several potential benefits to participating in this study. First, participants will have an opportunity to reflect on the strengths of their relationship. Second, participation in this study will benefit other couples who have experienced an affair in their relationship.

As with any research, there are potential risks associated with participating in this study. Participants may experience discomfort when discussing issues related to their relationship or the affair. If this discomfort continues for an extended period, please contact the Principal Investigator, Dr. Tina Timm, using the contact information listed below. A resource list of professional resources will also be provided to every participant as a courtesy.

Participation in this research project requires an hour to an hour-and-a-half long interview. The interviewer(s) will ask questions about your relationship, the affair, and your experiences post-affair. Your participation in this study is voluntary and you may decide to stop participating at any time without penalty. It is your right to refuse to answer any particular question you do not want to answer during the course of the interview.

All interviews will be audio recorded and transcribed. The audio recording will be destroyed and the transcription of the audio-recording will not include information that could identify the study participants. These recordings are solely for purposes of data collection and will not be disseminated in any way. Your consent to the audio recordings is essential for participation in the study. The data collected for this research study will be protected on a password protected computer or in a locked file cabinet on the campus of Michigan State University for a minimum of three years after the close of the project. Only the appointed researcher's and the Human Research Protection Program (HRPP) will have access to the research data. Participants' names and identifiable information will be stored separately from study data. Your confidentiality will be protected to the maximum extent allowable by law. Only members of the research team will analyze the data collected from this study. In addition, researchers may use anonymous data for publications and/or conference presentations. By agreeing to participate in this study, you are also agreeing for anonymous data to be used in the capacities described above.

There are no costs to your participation in the study. Each participant will each receive a \$50 gift certificate for participation in each interview.

If you have concerns or questions about this study, such as scientific issues, how to do any part of it, or to report an injury, please contact the researcher (Tina Timm, Ph.D., LMSW, Principal Investigator, School of Social Work, 655 Auditorium Dr., 220 Baker Hall, East Lansing, MI 48824, Phone: (517) 432-7112, E-mail: timmt@msu.edu or Adrian Blow, Ph.D., LMFT, Phone: (517) 432-7092, E-mail: blowa@msu.edu).

If you have questions or concerns about your role and rights as a research participant, would like to obtain information or offer input, or would like to register a complaint about this study, you may contact, anonymously if you wish, the Michigan State University's Human Research Protection Program at 517-355-2180, Fax 517-432-4503, or e-mail irb@msu.edu or regular mail at 4000 Collins Road, Ste. 136, Lansing, MI 48910.

Your participation in the interview indicates that you voluntarily agree to participate in this research study.

You will be given a copy of this form to keep.

APPENDIX C: Demographic Form

Participant Pseudonym: _____

1. Age:

2. Gender:

3. Relationship Status:

4. How long have you been in this relationship? _____(years)

This study defines an affair as “a sexual and/or emotional act that is outside of the primary relationship and constitutes a breach of trust and/or agreed upon boundaries of the relationship in terms of emotional or sexual exclusivity.”

Keeping this definition in mind:

5. Have **you** ever had an affair while in *this* relationship?

☐

Yes

☐

No

5a. How long did it last?

5b. When was the affair discovered by or disclosed to your partner?

6. Has your **current partner** ever had an affair while in *this* relationship with you?

☐

Yes

☐

No

6a. How long did it last?

6b. When was the affair discovered by you or disclosed by your partner?

Select one answer for questions 7-11, unless otherwise noted:

7. How would you best describe the area where you live?

- ☐ Rural
- ☐ Urban
- ☐ Suburban
- ☐ Small Town

8. Which of the following best describes your race? (Check all that apply)

- ☐ American Indian or Alaskan Native
- ☐ Asian or Pacific Islander
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Caucasian
- ☐ Other (please specify) _____

9. What is your highest level of education?

- ☐ Some High School
- ☐ High School Diploma/GED
- ☐ Some College
- ☐ Associate's Degree
- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ Doctorate

10. What is your current employment status?

- ☐ Employed full-time
- ☐ Employed part-time
- ☐ Currently unemployed – Looking for work
- ☐ Currently unemployed – Not looking for work (e.g., stay at home mom or dad)
- ☐ Retired

11. Approximate gross household income:

- ☐ Less than \$15,000
- ☐ \$15,001-\$20,000
- ☐ \$20,001-\$30,000
- ☐ \$30,001-\$40,000
- ☐ \$40,001-\$50,000
- ☐ \$50,001-\$75,000
- ☐ \$75,001-\$100,000
- ☐ \$100,001-\$200,000
- ☐ More than \$200,000

12. Number of children (including biological, adopted, stepchildren, etc.): _____

12a. Please list the ages of your children: _____

Religion/Spirituality:

	Not at all				Very
How religious would you say you are?	1	2	3	4	5
How spiritual would you say you are?	1	2	3	4	5
How important was religion in your home when you were growing up?	1	2	3	4	5
How often do you usually attend religious/worship services?	1	2	3	4	5

APPENDIX D: Experiences in Close Relationships Questionnaire

Instructions: The following statements concern how you feel in romantic relationships. We are interested in how you generally experience relationships, not just in what is happening in a current relationship. Respond to each statement using the following scale:

1	2	3	4	5	6	7
Strongly Disagree			Neutral			Strongly Agree

1. I prefer not to show a partner how I feel deep down.	1	2	3	4	5	6	7
2. I worry about being abandoned.	1	2	3	4	5	6	7
3. I am very comfortable being close to romantic partners.	1	2	3	4	5	6	7
4. I worry a lot about my relationships.	1	2	3	4	5	6	7
5. Just when my partner starts to get close to me I find myself pulling away.	1	2	3	4	5	6	7
6. I worry that romantic partners won't care about me as much as I care about them.	1	2	3	4	5	6	7
7. I get uncomfortable when a romantic partner wants to be very close.	1	2	3	4	5	6	7
8. I worry a fair amount about losing my partner.	1	2	3	4	5	6	7
9. I don't feel comfortable opening up to romantic partners.	1	2	3	4	5	6	7
10. I often wish that my partner's feelings for me were as strong as my feelings for him/her.	1	2	3	4	5	6	7
11. I want to get close to my partner, but I keep pulling back.	1	2	3	4	5	6	7
12. I often want to merge completely with romantic partners and this sometimes scares them away.	1	2	3	4	5	6	7
13. I am nervous when partners get too close to me.	1	2	3	4	5	6	7
14. I worry about being alone.	1	2	3	4	5	6	7
15. I feel comfortable sharing my private thoughts and feelings with my partner.	1	2	3	4	5	6	7
16. My desire to be very close sometimes scares people away.	1	2	3	4	5	6	7
17. I try to avoid getting too close to my partner.	1	2	3	4	5	6	7
18. I need a lot of reassurance that I am loved by my partner.	1	2	3	4	5	6	7

19. I find it relatively easy to get close to my partner.	1	2	3	4	5	6	7
20. Sometimes I feel that I force my partners to show more feeling and more commitment.	1	2	3	4	5	6	7
21. I find it difficult to allow myself to depend on romantic partners.	1	2	3	4	5	6	7
22. I do not often worry about being abandoned.	1	2	3	4	5	6	7
23. I prefer not to be too close to romantic partners.	1	2	3	4	5	6	7
24. If I can't get my partner to show interest in me, I get upset or angry.	1	2	3	4	5	6	7
25. I tell my partner just about everything.	1	2	3	4	5	6	7
26. I find that my partner(s) don't want to get as close as I would like.	1	2	3	4	5	6	7
27. I usually discuss my problems and concerns with my partner.	1	2	3	4	5	6	7
28. When I'm not involved in a relationship, I feel somewhat anxious and insecure.	1	2	3	4	5	6	7
29. I feel comfortable depending on romantic partners.	1	2	3	4	5	6	7
30. I get frustrated when my partner is not around as much as I would like.	1	2	3	4	5	6	7
31. I don't mind asking romantic partners for comfort, advice, or help.	1	2	3	4	5	6	7
32. I get frustrated if romantic partners are not available when I need them.	1	2	3	4	5	6	7
33. It helps to turn to my romantic partner in times of need.	1	2	3	4	5	6	7
34. When romantic partners disapprove of me, I feel really bad about myself.	1	2	3	4	5	6	7
35. I turn to my partner for many things, including comfort and reassurance.	1	2	3	4	5	6	7
36. I resent it when my partner spends time away from me.	1	2	3	4	5	6	7

APPENDIX E: Semi-Structured Qualitative Interview

KEY: Questions highlighted in yellow were used in Study 1. All of the questions under The Recovery Process subheading (highlighted in green) were used in Study 2.

I will be asking you a series of questions pertaining to your romantic relationship and the process of recovering from an affair. As a reminder, you can skip any questions that you would like and can also take a break at any time, just let me know.

History of Affairs

This first set of questions pertains to your prior exposure to affairs.

1. To your knowledge, has anyone in your immediate family of origin (i.e. parents, grandparents, siblings, etc.) experienced an affair in their own romantic relationship?
 - a. If so, who? What can you tell me about the affair?
 - b. What was your perception of the affair?
2. Have you ever experienced an affair in a previous romantic relationship, either with yourself as the person who had the affair or as the partner of someone who had an affair?
 - a. If so, tell me a little bit about that affair.

The Affair

This next set of questions pertains to your current relationship and the affair that occurred.

1. Tell me about how you and your partner met.
2. At what point in your relationship did the affair happen?
3. Can you briefly summarize the affair?
4. How would you describe your relationship at the time of the affair?
5. Was there anything else going on in your life that you think put the relationship at risk?
6. When was it discovered or disclosed? How?
7. How did the affair end?
8. **Injured partners only:** how would you describe your reaction to the affair after it was discovered?
9. **Injured partners only:** how did you decide what level of detail to ask about?
10. Did you tell anyone about the affair?
 - a. If no, why not?
 - b. If yes, who was it and what about that was helpful or not helpful?

The Recovery Process

Now I am going to ask you about the process of recovering from the affair.

1. Did you ever consider ending the relationship with your current partner? Why or why not?
 - a. What were the factors that made you decide to stay?
2. What are characteristics of yourself that contributed to your desire to remain in the relationship?
3. What are characteristics of your partner that contributed to your desire to remain in the relationship?
4. What did you do to begin building safety and trust again in your relationship? (**Dependability**)
5. What did you do to regain feelings of closeness in your relationship? (**Closeness**)
6. Sometimes things happen that remind you of the affair. Did that happen to you?
 - a. If so, what did you do when that happened?
7. During the healing process, how did you decide what you needed most?
 - a. Was your partner available to meet your needs? If so, how? (**Availability**)
8. After an affair, some people find themselves needing comfort from their partners, while other people need space.
 - a. How did your partner respond to your need for comfort? (**Responsiveness**)
 - b. What was your experience of this?
9. What were the most helpful things your partner did or said to help heal the relationship?
10. What were the most helpful things you did or said for your partner to help heal the relationship?
11. During the healing process, some people may need more conversation over time than others.
 - a. What worked for you? (**Communication**)
12. What role did forgiveness play in the healing process?
13. What impact did the affair have on sex in your relationship?
 - a. What role did sex play in the healing process?

Therapy and Other Resources

Next I will ask you about your use of therapy and other resources during the process of recovery.

1. Tell me about what resources you used to recover from the affair.
2. Tell me about your experience of therapy.

- a. How long did you go?
 - b. What was most helpful?
 - c. What was least helpful?
3. Did you read any books on affair recovery?
- a. If yes, which ones?
 - b. What was most helpful about them?
 - c. Least helpful?
4. Did you use the internet as a resource?
- a. If so, what was most helpful to you?
 - b. Least helpful?
5. What advice do you have for other couples who are experiencing this?
6. What advice do you have for professionals working with couples after an affair?

Personal Growth

Finally I want to ask you about any personal growth that you have experienced.

- 1. Describe how you grew as a couple.
- 2. Describe how you think you grew as an individual as a result of the experience.
- 3. What have you come to understand as the reasons for the affair?
 - a. Did this change over time? In what way?
- 4. Tell me about your relationship now.

That concludes all of the specific questions that I have for you. Is there anything else that you think is important for me to know about what helped or hurt the healing process?

Debriefing Questions

Thank you for taking the time to complete this interview. I am now going to ask you a couple of questions pertaining to your experience of this interview and provide you with resources.

- 1. What was it like for you to complete this interview?
- 2. Do you have people that you can talk to if needed?
- 3. Would you feel comfortable returning to your therapist if you need help?

****Provide list of resources.**

CHAPTER 4: STUDY ONE

Examining the role of the attachment bond in the process of recovering from an affair

Abstract

Infidelity is associated with a variety of negative consequences, and over 50% of couples who experience infidelity seek out therapy. The use of an established theory to understand the mechanisms that allow couples to heal after an affair has been limited. The primary aim of this study was to use attachment theory as a guiding framework to understand the process of affair recovery from the perspective of those who have experienced it. Participants completed a semi-structured interview and a measure of romantic attachment style. Thematic analysis was used to analyze participants' responses to interview questions designed to reflect five dimensions of the attachment bond. Four of the five dimensions of the attachment bond were identified as being important to the recovery process, whereas participants' perceptions of responsiveness to needs for comfort were more varied. Implications of the findings and future directions for research are discussed.

Introduction

Infidelity is one of the most frequently cited reasons for the dissolution of marriages (Amato & Previti, 2003). One in five couples report this as the primary cause of divorce, as it often leads to emotional distress, financial burden, and sexual dissatisfaction (Crouch & Dickies, 2016; Foster & Misra, 2013; Grov et al., 2011). Individuals may experience symptoms of anxiety, depression, PTSD, suicidal ideation, and relationship violence following the discovery of an affair (Allen et al., 2005; Couch et al., 2017; Wang et al., 2012). Over 50% of couples who experience infidelity will seek therapy in an attempt to maintain the relationship (Peluso & Spina, 2008) and couple therapists report that this is one of the most difficult relationship issues

to treat (Whisman, Dixon, & Johnson, 1997). Infidelity damages the security and trust between partners and has been conceptualized as an attachment injury (Johnson, 2002; Schade & Sandberg, 2012). An attachment injury is a perceived abandonment, betrayal, or breach of trust by an attachment figure that occurs during a critical moment of need or a time of intense vulnerability (Johnson et al., 2001). An injury such as infidelity threatens attachment security by destroying the basic capacity to trust and activating the injured partner's attachment needs and fears (Johnson, 2005; Schore, 2003). Previous research using an attachment theory framework to gain a better understanding of infidelity (Haines, 2011; Klacsmann, 2007) and to inform treatment (Johnson, 2005) has been scarce. There is a significant need for research that provides insight into the role the attachment bond plays in the process of recovering from an affair.

Affair Recovery

Affair recovery involves both the interactional and emotional processes that occur between partners following the discovery of an affair (Olson et al., 2002). In a sample of married partners whose spouse had an affair, also known as injured partners, Clark (2013) found that factors such as communication (i.e. open and honest; discussing details of the affair; genuine apology), empathy, and forgiveness, were significantly, positively correlated with recovery from the affair and greater marital satisfaction. Olson and colleagues (2002) conducted semi-structured interviews with two involved (i.e. the partner who had the affair) partners and 11 injured partners after the disclosure of an affair and found that rebuilding trust, a significant step in the healing process, includes taking responsibility, increased commitment, improved communication (i.e. more frequency; discussions about the future of the relationship), and forgiveness. Abrahamson and colleagues (2012) interviewed five involved and two injured partners all of who were still with their partner two years after the discovery. Analyses revealed

that factors such as being motivated to stay together, treasuring acts of kindness, making meaning of the affair, and social support, were all significant in the process of recovery.

Research including both partners from the same couple is limited. Bird and colleagues (2007) explored the process of recovery with two couples who had sought therapy in response to infidelity. Results revealed a three phase model of healing: 1) seeking expert assistance, 2) regaining control, increasing emotional openness, and rebuilding trust, and 3) forgiveness. In a sample of three couples, Staples (2010) identified two main themes in the process of recovery: rebuilding trust and managing emotions, both of which were achieved through forgiveness, a change in perspective, improved communication (i.e. expression and validation of feelings; accountability), and the positive influence of therapy.

Attachment Theory

Attachment theory was developed by John Bowlby who believed that the parent-child attachment relationship developed in infancy continued to effect relationship dynamics through adulthood (Bowlby, 1988). In adulthood, the romantic partner becomes the primary attachment figure for which one desires closeness in order to foster feelings of support, safety, and security (Fraley & Davis, 1997; Hazan & Zeifman, 1999; Main, 1990). Hazan and Shaver (1987) conducted an empirical study of attachment theory that indicated adults rely on their romantic partner to be a secure base by detecting requests for support during times of distress, correctly interpreting these requests, and responding in an appropriate and timely manner (Crowell et al., 1997; Waters & Cummings, 2000). By being available and responsive, the romantic partner acts as a secure base for the individual during difficult situations; the support offers relief and the partner then returns to exploring the world, or autonomy (Fraley & Shaver, 2000; Waters & Cummings, 2000).

Individuals seek out romantic relationships that meet their attachment needs and continuous activation of the attachment system contributes to the individual's working model of the primary relationship (Feeney, 1999; Mikulincer & Shaver, 2007). Individuals who seek partners who are available (i.e. present to respond to needs), responsive (i.e. listening, understanding, and meeting needs), and dependable (i.e. consistent and reliable), and engage in relationships characterized by closeness (i.e. mutual need fulfillment) and positive communication (i.e. mutual self-disclosure) experience a *secure* attachment bond (Collins & Feeney, 2000; Cutlip, 2013; Johnson, 2016; Main, 1990; Van Epp, 1997). Adults who experience secure attachment bonds with their partners describe them as available, supportive, cooperative, and sensitive, all of which are associated with high levels of trust, commitment, interdependence, and relationship satisfaction (Crowell & Owens, 1998; Kirkpatrick & Davis, 1994; Mikulincer, 1998). In contrast, when an individual does not experience a partner as available, dependable, or responsive during times of need, the individual finds it much more difficult to feel supported and secure in that relationship. With repeated exposure to an unresponsive partner, the individual may develop an underlying fear of rejection or may become emotionally distant from the partner, which can foster an *insecure* attachment style (Main, 1990). An insecure-anxious attachment style is characterized by a preoccupation with the availability of one's partner and a tendency to overinvest in the relationship, whereas an insecure-avoidant attachment style is plagued by feelings of discomfort with a partner's bids for closeness (Crowell & Owens, 1996; Shaver & Mikulincer, 2005).

Attachment Theory and Affair Recovery

Infidelity is viewed as a threat to the adult attachment system, which must be addressed if the relationship is going to survive, and ultimately thrive (Johnson et al., 2001). During times of

stress in a relationship, the attachment system plays a key role in how individuals cope (Morgan & Shaver, 1999) and one's attachment representations influence the patterns, outcomes, and overall satisfaction of that relationship (Hazan & Shaver, 1994). In a sample of injured partners, insecure attachment was significantly associated with lower levels of trust and forgiveness and a greater likelihood of shattered assumptions of relationships following the discovery of an affair (Klacsman, 2007). Haines (2011) interviewed each partner separately to better understand the participant's attachment experiences from childhood and how their attachment experiences in the primary romantic relationship were affected by infidelity. Participants described insecure attachment relationships with their parents. They also described a lack of communication and emotional connection in the romantic relationship prior to the affair and that the infidelity led to self-improvement and ultimately a stronger marriage.

Present Study

The present study sought to expand on prior research exploring the process of affair recovery from the perspectives of those who have experienced it. Guided by attachment theory, the primary aim was to examine the role of the attachment bond in the process of recovering from an affair. This qualitative study contributes to the current literature through its inclusion of both partners and the application of a theoretical framework to an underexplored relational phenomenon that significantly impacts the dissolution of relationships.

Method

Procedures

Prior to starting data collection, approval for this study was obtained from the Institutional Review Board at a university in the Midwestern region of the United States. Participants were recruited across the United States through therapists who were contacted via

email and networking sites and through postings on social media sites, blogs, and listservs. Prior to participation, each participant was contacted via phone to confirm that they met the following inclusion criteria: 1) experienced an affair in their current romantic relationship defined as “a sexual and/or emotional act that is outside of the primary relationship and constitutes a breach of trust and/or agreed upon boundaries of the relationship in terms of emotional or sexual exclusivity,” 2) in a long-term committed relationship, 3) both partners must be over the age of 18, 4) both partners must be willing to participate in the study, and 5) both partners must read, speak, and write in English. Each partner selected a pseudonym that was used to track participation throughout the study and all data collection was completed individually. Participants were given a copy of the consent form to review and verbal consent was obtained. Participants chose amongst one of the following three options for completing the semi-structured interview: 1) in person (dependent upon geographical location), 2) over the phone, or 3) via video conferencing. Participants who completed the interview in person also completed the paperwork in that format, whereas participants who completed the interview through another means were able to access and complete the paperwork via a secure file sharing system. Each participant was provided a list of resources and compensated with a 50 dollar gift card. The semi-structured interviews were audio recorded and transcribed. After the transcripts were complete, participants were given the opportunity to review it in order to ensure that the data are accurate (Lincoln & Guba, 1985). Out of the 20 total participants, 15 chose to review their transcript and three made changes.

Participants

Participants in this study were individuals who had experienced at least one affair in their current relationship and have chosen to stay in a relationship with their current partner. A total of

10 heterosexual couples, or 20 individuals, participated in this study, including an equal number of males (n=10) and females (n=10). The mean age of participants was 41.32 years old, with a range of 22 to 62 years old. A majority of participants (80%) were married (n=16), while the remaining 20% were in a dating relationship (n=4). The average relationship length was 15.78 years, ranging from one to 39 years. A majority of participants (80%) had children (n=16) with the number of children ranging from one to seven and the age of the children ranging from two to 32 years old. On average, the affairs lasted 9.75 months, with a range of time of one day to three years (n=19), and one participant chose not to answer. For time since discovery, 10% of the participants' affairs were discovered in the last 6 months (n=2), 5% about one year prior (n=1), 35% about two years prior (n=7), 10% about three years prior (n=2), 10% about five years prior (n=2), and 10% more than 10 years prior (n=2); 20% of participants chose not to answer this question (n=4). Participants' self-reports of attachment style produced an average score on the anxiety subscale of 63.7 (range = 25 – 102) reflecting more anxiety in participants' perceptions of romantic relationships, while the average score on the avoidance subscale was 50.1 (range = 30 - 90) reflecting more security on this dimension of participants' perceptions of romantic relationships. A majority of participants (65%) identified as Caucasian (n=13), 10% identified as Black or African American (n=2), 10% identified as Asian or Pacific Islander (n=2), and 15% identified as mixed race or other (n=3). A little less than half (45%) of participants lived in a suburban area (n=9), 20% lived in an urban area (n=4), 15% lived in a small town (n=3), and 20% lived in a rural area (n=4). Participants responded to four items on religiosity and spirituality, each on a 5 point Likert scale from 1(not at all) to 5 (very). The means across all four items ranged from 2.60 to 3.30 . Income varied amongst participants with 10% reporting a gross annual household income less than \$30,000 (n=2), 40% reporting an income between \$30,000

and \$100,000 (n=8), and 50% reporting an income greater than \$100,000 (n=10). Education also varied with 5% having earned a high school diploma/GED (n=1), 5% completed some college (n=1), 20% earned an associates degree (n=4), 45% earned a bachelors degree (n=9), and 25% earned a masters degree (n=5). A majority of participants (80%) were employed full time (n=16), with 5% employed part time (n=1), 5% retired (n=1), and 10% unemployed (n=2).

Measures

Demographics. The demographic questions collected basic demographic information as well as information about the current relationship (i.e. relationship status, relationship length) and the affair that occurred (i.e. length and point of discovery). A couple of questions pertaining to religiosity were also included on this form.

Attachment style. The Experiences in Close Relationships (ECR; Brennan et al., 1998) was included in this study for descriptive purposes only. The ECR is a 36-item self-report measure that assesses attachment based on the dimensions of low to high anxiety and avoidance and is considered to be the best validated and most widely used measure of attachment (Bernier & Matte-Gagne, 2011). The ECR is scored by adding all of the items on the anxiety and avoidance subscales separately including those that are reverse scored (range = 18 – 126 for each scale respectively) and calculating the average for each subscale where higher scores indicate attachment anxiety or avoidance while lower scores represent more attachment security (Fraley et al., 2000).

Interview. A semi-structured interview was constructed to better understand the process of recovering from an affair. The interview was constructed based on attachment theory. Specifically, conceptualizations of romantic love rooted in attachment theory (Hazan & Shaver, 1987; Johnson, 2016; Wei et al., 2007; Van Epp, 1997) were used to identify five of the

interview questions used in this study. The questions explored the following dimensions of the attachment bond: availability, closeness, communication, dependability, and responsiveness.

Data Analysis

Data were analyzed using Braun and Clarke's (2006) version of thematic analysis, a method that was used in prior studies of the process of affair recovery (Abrahamson et al., 2012; Olson et al., 2002). Thematic analysis is a tool used to identify, analyze, and interpret themes as they emerge from qualitative interviews and is a flexible method of data collection and can be applied across a variety of theoretical approaches (Braun & Clarke, 2006). These authors used a deductive approach allowing the data to be guided by the participants' responses to specific questions about the process of recovering from an affair, informed by attachment theory. Braun and Clarke's (2006) six-step framework was used to guide the analysis of the data: 1) become familiar with the data, 2) generate initial codes, 3) search for themes, 4) review themes, 5) define and name themes, and 6) produce the report. Participants' responses to five interview questions, each pertaining to one of the dimensions of the attachment bond, were reviewed and initial codes were generated. From these codes, themes and subthemes were identified and named. Quotes from participants were also selected to demonstrate each theme.

Results

The themes that emerged from the thematic analysis are described below, organized by each dimension of the attachment bond. A table outlining the themes (in order of frequency of participants' responses), subthemes, and providing specific examples for each dimension of the attachment bond is included at the end of this chapter (see Appendices A - E).

Availability. This dimension of the attachment bond taps into participants' perceptions of how their partner was available to meet their needs. Participants identified communication as

being one of the primary ways in which their partner was available to meet their needs as one participant said, “He’s very receptive...what do you need me to do, how can I help you?”

Participants specifically said that their partner’s ability to truly listen to their needs and for them to feel heard was essential to meeting their needs. Participants also said that being very in tune with their needs was important. One participant explained:

Now it's just so, I mean it's so different we're both so different, he's able to read my expressions or, sometimes he knows even before I say anything, the holidays are hard the holidays have always been hard and so like this past Christmas he was very receptive to what I needed, what do you need me to do, how can I help you, that sort of stuff, where in the past he hadn't been.

Being in tune also involved recognizing how unmet needs contributed to the affair and being mindful of preventing this from happening again in the future as one participant said, “Trying to understand you know why, maybe have a better understanding of why I did it.” In addition, participants said that their partner’s commitment to the healing process was essential to meeting their needs. This commitment was reflected in taking responsibility for the affair and/or what lead to it, attending therapy, and taking the lead on moving the couple through the process of healing. In reference to taking the lead on the healing process, one participant described, “And then all of the other stuff was also his idea...like getting the [phone] app...going to therapy...finding support groups, that stuff was all his idea.”

Closeness. This dimension taps into the ways in which couples regained closeness in their relationship, something that is assumed to have been lost or altered as a result of the affair. Overwhelmingly participants identified spending more time together as the primary way in which they regained closeness and that it was essential to prioritize this. One participant said:

We started going on dates, and had picnics, and we would sit out back and listen to the birds, and have a fire, and we would just make time for each other, that's such a big deal, it really is.

Participants explained that they also started doing more activities together, which included both renewing a commitment to activities that they used to do together as well as finding new activities that they enjoyed. One participant described:

After the second affair happened one of the things we said we would do was blog together again, so that was something to feel close, and also he wanted us to spend more time at night together when we're apart like playing video games, we both are really in to video games so we've been finding more video games that we can play together, and also we've been doing more things like watching different shows together that we enjoy...those are some of the things that we've done to try and feel close.

In addition, participants identified communication as a key avenue for regaining feelings of closeness, which was also a primary way in which participants felt their partners were available to meet their needs. Participants described this communication as checking in with each other more often, being more open with one another, a greater willingness to share their feelings with each other, more honesty, and having conversations about the affair. Participants also said that just having more conversation in general than they previously had helped them to feel closer to one another, as one participant stated, "A lot of that was talks, late night talks, talking for hours."

Communication. During the interview it was acknowledged that some people may need more conversation at certain times and less at other times, and participants were asked what worked well for them. This dimension taps into talking about the affair and how this

communication impacted their process of recovery. In comparison to the first two dimensions, the responses to this question varied more and resulted in four major themes: lots of conversation, talking about the affair, scheduling specific times to talk, and talking with others. Participants said that having a lot of conversation was helpful to them, which included more conversation with their partner in general than they had prior to the affair, having multiple conversations on the same topic, and being more intentional in talking about the future of the relationship. One participant described:

Definitely conversation helps, not necessarily about whatever had happened just like conversations about where we are and where we're going, you know the big picture type questions and having those more regularly to make sure that we're still on the same page, I think that's important and I think that's definitely one thing that we've learned from this whole experience that we want to take moving forward.

Participants also said that talking about the affair was essential to the healing process. Specifically they found it helpful to be able to ask questions about the affair and talk about what lead to the affair, which was also identified by participants as a way in which they felt their partners were available to meet their needs. In addition, participants said that it was important that the topic of the affair was always open for discussion. One participant explained:

We still talk about it, we talk about it all the time, well not all the time, but we talk about it whenever I want to talk about it, I was never told you know I don't want to talk about this anymore, we're over it, let it go, you know we just talk about it.

Furthermore, participants found it helpful to schedule specific times to talk, especially as the conversations related directly to the affair. Many participants reflected on using therapy as a consistent time to talk each week, which was beneficial because therapy was a safe space and

removed some of the pressure to talk about it constantly throughout the week. One participant said, “Really just going to therapy and having time set aside to actually talk about it...not having to like constantly talk about it.” Finally, participants felt that it was helpful to talk to others, specifically those who also had experience with infidelity. One participant stated:

I have a friend who’s wife cheated on him and left him, so that definitely helped, it’s being able to relate to people that lets you know that you’re not in this world alone, that affairs happen to a ton of people...so conversations with people who have been through it and then can empathize and definitely people who went through it and worked it out.

Dependability. This dimension taps into the participant’s ability to depend on their partner, which was addressed through understanding how the couple rebuilt safety and trust in their relationship. Similar to the communication dimension, participants’ perceptions of this varied and also resulted in four themes: therapy, communication, check-ins, and having access to everything. Overwhelmingly participants spoke to the important role that therapy played in helping them to rebuild safety and trust in their relationship. This was a reoccurring theme as participants also identified therapy as being a safe space in which they could schedule specific times to talk about the affair and their relationship. One participant explained:

You know we really started putting in the work and you know through individual therapy, couples therapy...one of our counselors mentioned closing the windows, closing the doors, you know focusing on each other and our own well-being not only as individuals but as a couple.

Participants also said that communication, including attentive listening and having conversations about the affair, were important for rebuilding safety and trust. This was another reoccurring theme as participants identified attentive listening as being important for meeting

their needs and having conversations about the affair as an important part of the communication dimension. In addition, participants said that being more open with each other was important as one participant described, “We revealed everything, as much as could be revealed.” Furthermore, having more transparency by both partners in the relationship was essential, as this was something that was often lacking in the relationship prior to the affair. In addition, participants talked about their use of check-ins to increase dependability in the relationship. Check-ins were described by participants in a variety of ways including touching base with their partners more frequently throughout the day, letting them know where they were going and when they would be back, and providing an itinerary of their events when they would be apart for longer periods of time. Check-ins were identified as being especially important when connected to the context of the affair, for example when the involved partner had an affair with a co-worker and then was going on a business trip. Participants also discussed the importance of following through with what they said they would do or where they would be. One participant said:

I would check in like if I had clients cancel and I’m going to be in a different part of town, I would let him know and kind of just to try to rebuild that trust of when I say I’m gonna be somewhere that’s where I’m gonna be.

Finally, participants believed that giving the partner who did not have the affair access to everything so that they could monitor the activity and location of the partner who had the affair was an important first step in rebuilding safety and trust in the relationship. Many participants facilitated this through their cell phones as one participant described, “There was an app that he downloaded on his phone so that I could see every incoming and outgoing text message, picture, phone call...the app records everything.” Participants acknowledged that this was an important tool for helping them to start rebuilding trust in their relationship but that they primarily utilized

this in the initial aftermath of the discovery of the affair and once that some trust had been rebuilt they no longer felt it was necessary to use this.

Responsiveness. This dimension taps into participants' perceptions of their partners' responsiveness to their needs, in this case specifically their need for comfort. Similar to the prior two dimensions, participants' experiences of responsiveness were varied. On the one hand, participants said that their partners were attentive as one participant described, "If I wanted him there, he was there, and if I didn't want him there, he gave me space...he was very attentive." Being attentive often involved the use of physical touch which participants found comforting, as one participant said, "He would hold me, it was really a big part of the reason why things are going so well is because he was able to kind of just hold me through it." Participants also reflected on the constant availability of their partners to provide comfort, as one participant explained, "She would be there for me you know whenever I needed it." On the other hand, participants described their partners as not being responsive to their needs for comfort as one participant stated:

I would say not so much, he was very focused kind of on his own needs, which I don't blame him, but it was really focused on kind of his needs and definitely caused a lot of arguments just as far as I didn't feel that I either had the space I needed at times or the closeness I needed at other times.

Participants also described their partners as being distant, which made it nearly impossible for them to provide comfort. This lack of responsiveness was something that participants said primarily occurred in the immediate aftermath of the discovery of the affair and acknowledged that this was something that they desired and wished that their partners had been able to do more consistently throughout the recovery process.

Discussion

An attachment theory lens was used to explore how five dimensions of the attachment bond (availability, closeness, communication, dependability, and responsiveness) aided in the process of recovering from an affair. Examining five dimensions of the attachment bond allowed for a closer examination of how each of these important facets of attachment contributed to the process of recovery. Overall, participants valued each dimension of the attachment bond as making an important contribution to the healing process. There was a lot of synergy in the way that participants talked about the dimensions of availability, closeness, communication, and dependability, with several themes occurring across multiple dimensions.

As a dimension of the attachment bond itself, communication played an important role in the healing process through frequent conversation, a willingness to talk about the affair, the ability to set aside specific times to talk, and the support found through talking to others who had also experienced infidelity. When discussing the affair, participants found it most beneficial to be able to ask questions and to have the topic of the affair always be open for discussion (Timm & Blow, 2018). The ability to talk about and understand what led to the affair was also a reoccurring theme as participants felt their partners were also available to meet their needs through this. Participants also experienced their partners as being available through communication, including both inquiring as to how best to meet the others' needs and attentive listening. In addition, participants found that more communication including more openness, more frequent sharing of feelings, and checking in with each other more often, to be important for regaining feelings of closeness in their relationship. Similarly, attentive listening, more openness, full transparency, and more frequent check-ins were reoccurring themes as these were important for rebuilding safety and trust in the relationship and ultimately feeling like they could

depend on their partner. Communication has been previously studied in the infidelity and affair recovery literature. Specifically, communication has been found to be a precipitating factor for infidelity (Haines, 2011), which may make communication after the discovery of an affair incredibly challenging, however, it has also been found to be essential to recovering from an affair (Clark, 2013; Haines, 2011; Olson et al., 2002; Staples, 2010).

A commitment to the healing process, including the use of therapy, is another reoccurring theme across multiple dimensions of the attachment bond. Being committed to healing, described as being open to talking about the affair, demonstrating transparency, and regularly attending therapy, was important for being available to meet each others' needs and has been supported by prior studies of affair recovery (Bird et al., 2007; Olson et al., 2002; Staples, 2010). A commitment to healing was also reflected in the communication dimension, as talking about the affair, including what lead to it and the ability to ask questions, were essential for healing and have been supported by prior research (Bird et al., 2007; Clark, 2013; Olson et al., 2002). Therapy was one way in which participants rebuilt safety and trust in their relationships and over time felt more comfortable depending on their partner, which has been supported by prior research (Bird et al., 2007; Staples, 2010). Therapy also aided in communication by providing the couple with protected time to talk to one another about the affair and their relationship. In addition, therapy helped couples learn the best ways to start to rebuild trust in their relationship, including specific tools that they could use, as this was something that couples recognized as important but felt very unsure about how to do this following the discovery of the affair.

Participants' perceptions of the dimension of responsiveness were more varied. While some participants said their partners were always available and attentive and used physical touch to provide comfort, others perceived their partners as more distant and unresponsive to their

needs for comfort. The lack of responsiveness was described as resulting from a preoccupation with one's own needs, which inhibited their ability to recognize and respond to the pain of the other. This theme was present for both participants who had an affair and those who did not, with both acknowledging that this was an important aspect that they felt like was missing for them early on in the healing process. The examination of this dimension of the attachment bond in previous studies of affair recovery has been limited. Haines (2011) found that participants acknowledged the importance of emotional responsiveness in the healing process, including being emotionally available and responding appropriately to emotions expressed by one's partner, but similarly to the present study, the importance of this in the healing process varied amongst participants.

While receiving comfort from a romantic partner during a time of intense stress is reflective of a secure attachment bond, this may not always be possible on the part of either partner after the discovery of an affair. Partners who had the affair may experience anger and inevitable distance from their partners and therefore may have a hard time recognizing or understanding their partners' need to be comforted by them. On the contrary, partners who did not have the affair are likely experiencing a flood of negative emotions and may not be able to recognize their partner's pain and need for comfort. Along with the results from Haines' (2011) study, these findings normalize this variation in experiences for both partners. Despite being an important dimension of the attachment bond, the lack of consistency in responsiveness for both emotional needs and comfort does not seem to be at the forefront of the healing process, which is important for couples and the therapists working with them to know.

During times of relationship stress, the attachment system plays a key role in how individuals cope (Morgan & Shaver, 1999) and one's attachment representations influence the

patterns, outcomes, and overall satisfaction of that relationship (Hazan & Shaver, 1994).

Individuals with an anxious attachment style tend to be more preoccupied with the availability of their partner, have a greater fear of rejection and abandonment, and have a tendency to overinvest in the relationship (Brennan et al., 1998; Crowell & Owens, 1996; Shaver & Mikulincer, 2005). Participants in this study reported a more anxious attachment style, which could have affected their decision to remain together after the discovery of the affair, as they fear being abandoned by their partner if the relationship were to end and have a strong desire to put all of their efforts into fixing the relationship. Participants reported less avoidance, or more security, which reflects their comfort with intimacy, closeness, and depending on their partners for support (Brennan et al., 1998; Crowell & Owens, 1996; Shaver & Mikulincer, 2005).

Closeness and dependability are dimensions of the attachment bond that were identified as important in the healing process, which could be influenced by participants inherent comfort level with these aspects of their romantic relationship.

Clinical Implications

Participants reflected on the usefulness of therapy as creating a safe space and helping them to set aside time for difficult conversations regarding the affair. Couples should consider seeking help from a professional, such as a therapist or counselor, in order to help them foster safety around communication about the affair as well as to improve general communication strategies, which may be beneficial throughout the process of healing. While attending therapy was one way that partners demonstrated their commitment to the healing process, other ways that partners demonstrated this commitment were through their willingness to talk about the affair, be transparent, and give the partner who did not have the affair access to everything. While some couples may be hesitant to seek out therapy in response to the discovery of an affair, these

findings can help couples start to think about things that they can do initiate the process of healing.

Directions for Future Research

Few previous studies have used attachment theory as a framework for exploring the process of recovering from an affair. While the findings from this study reveal the value of using attachment theory to understand the recovery process, more research is needed to further explore the role of the attachment bond in this process. In this study, communication was not only identified as a complex dimension but also cut across multiple other dimensions of the attachment bond in the process of recovery. Future research should conduct a more in depth exploration of the role of communication to better understand exactly how this dimension of the attachment bond influences the process of recovery. Another important consideration was the influence of attachment style on the ways in which participants experienced the recovery process. Future research should use a more accessible and less time consuming format, such as an online survey, to further explore the relationship between one's attachment style and the dimensions of the attachment bond in the recovery process.

Limitations

Despite addressing significant gaps in the affair recovery literature, this study had some limitations. First, there was variability in the length and number of affairs, which influenced partner's perceptions of the recovery process and specifically the dimensions of the attachment bond. For instance, one participant talked about never losing feelings of closeness in their relationship due to the briefness of her partner's affair, while others reported more lengthy affairs. Second, all of the couples in this study identified as heterosexual, with the majority of participants having earned at least a bachelors degree, and about half reporting a household

income greater than \$100,000 per year, which impacts the generalizability of results. Third, while the results of the ECR did reflect higher attachment anxiety as compared to attachment avoidance, the sample mean was not too far above the median for the anxious subscale, thus reflecting a general attachment security amongst the sample. As the presence of the dimensions of the attachment bond are thought to reflect security in the relationship, greater security in one's attachment style could influence their perception of these dimensions in the recovery process. It may also be possible that those experiencing more security in their relationship were more likely to participate in this study.

Conclusion

Infidelity significantly impacts the relationships of many couples, often resulting in the dissolution of that relationship. A general lack of understanding of the affair recovery process impacts a couple's ability to navigate this process effectively. The findings of this study provide support for using attachment theory as a guide to understand the process of affair recovery with a focus on the role of the five dimensions of the attachment bond in the recovery process. Themes of communication and a commitment to the healing process cut across several of the dimensions of the attachment bond, including availability, closeness, communication, and dependability, all of which are important for healing. A comprehensive understanding of and expectations for the recovery process are beneficial to those who are experiencing it.

APPENDICES

APPENDIX A: Table 4.1 Availability

Table 4.1 Availability

Themes	Subthemes	Examples
Communication	Listening	“He’s very receptive...what do you need me to do, how can I help you?”
In Tune	Contributors to the affair	“Try to understand you know why, maybe have a better understanding of why I did it.”
Committed to Healing		“And then all of the other stuff was also his idea...like getting the [phone] app...going to therapy...finding support groups, that stuff was all his idea.”

APPENDIX B: Table 4.2 Closeness

Table 4.2 Closeness

Themes	Subthemes	Examples
Time Together	Doing activities together	“We started going on dates...we would just make that time for each other.”
Communication		“A lot of that was talks, late night talks, talking for hours.”

APPENDIX C: Table 4.3 Communication

Table 4.3 Communication

Themes	Subthemes	Examples
Lots of Conversation		“So you know having multiple mini conversations or sometimes conversations that were five hours long.”
About the Affair	Questions	
	Always open for discussion	“I mean we still talk about it...we talk about it whenever I want to talk about it.”
	What lead to it	
Scheduling Time	Therapy	“Really just going to therapy and having time set aside to actually talk about it...not having to like constantly talk about it.”
Talking to Others		“It’s being able to relate to people that lets you know that you’re not in this world alone, that affairs happen to a ton of people.”

APPENDIX D: Table 4.4 Dependability

Table 4.4 Dependability

Themes	Subthemes	Examples
Therapy		“We really started putting in the work you know through individual therapy and couple therapy.”
Communication	Openness	“We revealed everything, as much as could be revealed.”
	Transparent	
Check Ins	Follow through	“When I say I’m going to be somewhere that’s where I’m gonna be.”
Access to Everything	Phone tracker	“There was an app that he downloaded on his phone so that I could see every incoming and outgoing text message, picture, phone call...the app records everything.”

APPENDIX E: Table 4.5 Responsiveness

Table 4.5 Responsiveness

Themes	Subthemes	Examples
Attentive	Physical touch	“If I wanted him there he was there and if I didn’t want him there he gave me space...he was very attentive.”
Did Not Respond	Distant	“I would say not so much...he was very focused on his own needs.”
Always Available		“She would be there for me you know whenever I needed it.”

CHAPTER 5: STUDY TWO

The impact of the role in the affair on the recovery process.

Abstract

Infidelity is a common form of betrayal that is associated with a variety of negative consequences (i.e. financial burden, emotional distress, sexual dissatisfaction) and is one of the most frequently cited reasons for divorce. Few studies have aimed to understand what motivates couples to stay together after the discovery of an affair and what mechanisms help them to heal, from the perspective of both partners. This study sought to expand on the current literature by exploring the impact of one's role in the affair, as either the injured or involved partner, on the process of recovery. A semi-structured interview was used as the primary tool for data collection and thematic analysis was used to analyze the data separately for injured and involved partners. Both partners identified similar motivations for maintaining the relationship as well as similar mechanisms for rebuilding safety and trust. They also both acknowledged the importance of communication, forgiveness, and therapy in the healing process. On the contrary, partners experienced uniquely different responses to their needs for comfort as well as how they responded to reminders of the affair. An in depth understanding of the recovery process is beneficial for both couples experiencing it and therapists who are supporting them through it.

Introduction

Infidelity is a common form of betrayal and is associated with negative consequences including financial burden, emotional distress, and sexual dissatisfaction (Crouch & Dickies, 2016; Foster & Misra, 2013; Grov et al., 2011). After the discovery of an affair, individuals report feelings of jealousy, anger, disappointment, guilt, and shame (Becker et al., 2004; Omarzu et al., 2012). The partner who had the affair is referred to as the *involved partner* (Moultrup,

2003), while the partner who did not have the affair is referred to as the *injured partner* (Gordon et al., 2004). Injured partners may experience symptoms of anxiety, depression, PTSD, suicidal ideation, and relationship violence following the discovery of an affair (Allen et al., 2005; Couch et al., 2017; Wang et al., 2012), which may be more severe for women as compared to men (Becker et al., 2004; Miller & Maner, 2008).

Infidelity is one of the most frequently cited reasons for divorce (Amato & Previti, 2003), however, a decision to remain in the relationship is not necessarily indicative of the individual's viewpoint on infidelity, but instead reflects other facets of the relationship as well as individual characteristics. When the involved partner openly discloses the affair as opposed to the injured partner having to “catch” them in the act of cheating, the injured partner is more likely to want to remain in the relationship (Afifi et al., 2001). When the involved partner can commit to ending the affair and recommit to the monogamy of the primary relationship, couples are also more likely to stay together (DiBlasio, 2000). In addition, couples have reported that the sharing of children, property, and an investment in the relationship, as well as the fear of failure from the dissolution of the relationship, are all contributing factors to maintaining the relationship (Abrahamson et al., 2012).

Affair recovery goes beyond just the decision to stay together and involves both the interactional and emotional processes that occur between partners following the discovery of an affair (Olson et al., 2002). In a sample of married, injured partners, Clark (2013) found that factors such as increased communication, empathy, and forgiveness, were positively correlated with recovering from the affair and greater marital satisfaction. Olson and colleagues (2002) conducted semi-structured interviews with two involved partners and 11 injured partners after the disclosure of an affair and found that rebuilding trust, a significant step in the healing

process, includes taking responsibility, increased commitment, improved communication, and forgiveness. Abrahamson and colleagues (2012) interviewed five involved and two injured partners all of whom had maintained their romantic relationship two years after the discovery of an affair. The key factors of the recovery process were the couple's motivation to stay together, treasuring acts of kindness, making meaning of the affair, and social support.

Previous research has explored the experiences of both partners within the same dyad. Bird and colleagues (2007) explored the process of recovery with two couples that had sought therapy in response to infidelity and identified a linear three phase model of healing: 1) seeking expert assistance, 2) regaining control, increasing emotional openness, and rebuilding trust, and 3) forgiveness. In a sample of three couples, Staples (2010) found the most important factors in healing were rebuilding trust and managing emotions, both of which were achieved through forgiveness, a change in perspective, improved communication, and the influence of therapy. Using attachment theory as a guide, Haines (2011) interviewed eight couples and found that improved communication and increased emotional connection helped to restore the attachment bond, rebuild trust, and strengthen their marriages.

Present Study

The present study sought to expand on prior research exploring the process of affair recovery from the perspectives of those who have experienced it. The primary aim was to explore the impact of one's role in the affair, as either the injured or involved partner, on the process of recovery. This qualitative study contributes to the current literature through its use of dyadic data and examination of similarities and differences in the process of recovery from an affair based on one's role in the affair, for which no known studies have previously done.

Method

Procedures

Approval for this study was granted from the Institutional Review Board at a university in the Midwestern region of the U.S. prior to starting data collection. Participants were recruited through therapists via email and networking sites as well as more directly through posts on social media sites, blogs, and listservs. Each participant who expressed interest in the study was contacted via phone to confirm that they met the inclusion criteria: 1) experienced an affair in their current romantic relationship defined as “a sexual and/or emotional act that is outside of the primary relationship and constitutes a breach of trust and/or agreed upon boundaries of the relationship in terms of emotional or sexual exclusivity” in which one partner identified as the involved partner while the other identified as the injured partner, 2) in a long-term committed relationship, 3) both partners must be over the age of 18, 4) both partners must be willing to participate in the study, and 5) both partners must be able to read, speak and write in English. All data collection was completed individually and each partner was asked to select a pseudonym that was used to track participation throughout the study. Participants reviewed the consent form and verbal consent was obtained. Participants were given one of three options for participation in the study: 1) in person (dependent upon geographical location), 2) over the phone, or 3) via video conferencing. Participants who chose the in person format completed both the paperwork and the interview in a private research space on the university’s campus. Participants who elected one of the other formats accessed and completed the paperwork via a secure file sharing system and then completed the interview either over the phone or via video conferencing. At the end of the interview, each participant was provided a list of resources and compensated with a 50 dollar gift card. The interviews were audio recorded and transcribed. After the transcripts were prepared,

each participant was given the opportunity to review it in order to ensure that the data was accurate (Lincoln & Guba, 1985). Out of the 18 participants, 13 chose to review their transcript and three participants made changes.

Participants

Participants in this study were individuals who had experienced at least one affair in their current relationship, identified as either the injured or the involved partner in the affair(s), and had chosen to stay in a relationship with their current partner. A total of 9 heterosexual couples, or 18 individuals, participated in this study. The mean age of participants was 39.3 years old, with a range of 22 years old to 54 years old. A majority of participants (78%) were married (n=14), while the remaining 22% were in a dating relationship (n=4). The average relationship length was 13.25 years, ranging from one to 35 years. A majority of participants (78%) had children (n=14) with the number of children ranging from one to seven and the age of the children ranging from two to 28 years old. An equal number of participants identified as the injured (n=9) and the involved (n=9) partner. On average, the affair(s) lasted about 10 months, with a range of time of one day to three years (n=17), and one participant chose not to answer. A small proportion (11%) of the affairs were discovered in the last six months (n=2), 6% about one year prior (n=1), 39% about two years prior (n=7), 11% about three years prior (n=2), and 11% about five years prior (n=2), while 22% of participants chose not to answer this question (n=4). A majority of participants (61%) identified as Caucasian (n=11), 11% identified as Black or African American (n=2), 11% identified as Asian or Pacific Islander (n=2), and 17% identified as mixed race or other (n=3). One half of the participants lived in a suburban area (n=9), 22% lived in an urban area (n=4), 17% lived in a small town (n=3), and 11% lived in a rural area (n=2). Participants responded to four items on religiosity and spirituality, each on a 5 point

Likert scale from 1(not at all) to 5 (very). The means across all four items ranged from 2.44 to 3.17. Income varied amongst participants with 11% reporting a gross annual household income less than \$30,000 (n=2), 33% reporting an income between \$30,000 and \$100,000 (n=6), and 56% reporting an income greater than \$100,000 (n=10). Overall the sample was highly educated with all having earned a college degree and more specifically 22% earned an associates degree (n=4), 50% earned a bachelors degree (n=9), and 28% earned a masters degree (n=5). A majority of participants (83%) were employed full time (n=15), with 6% employed part time (n=1), and 11% unemployed (n=2).

Measures

Demographics. The demographic form collected basic demographic information including information about the current relationship (i.e. relationship status, relationship length) and the affair(s) that occurred (i.e. length and point of discovery). A couple of questions pertaining to religiosity were also included on this form.

Interview. A semi-structured interview was constructed to explore the process of recovering from an affair. Informed by prior research on affair recovery (Abrahamson et al., 2012; Bird et al., 2007; Clark, 2013; DiBlasio, 2000; Olson et al., 2002; Staples, 2010), questions pertaining to the decision to recommit to the relationship, the dimensions of the relationship directly impacted by the affair (i.e. rebuilding trust), and the process of healing (i.e. communication, forgiveness) were included in the interview. The decision to recommit to the relationship was captured with the following questions: 1) what were the factors that made you decide to stay with your current partner?, 2) what are characteristics of yourself that contributed to your desire to remain in the relationship?, and 3) what are characteristics of your partner that contributed to your desire to remain in the relationship? Relationship dimensions were assessed

with the following questions: 1) what did you do to begin building safety and trust again in your relationship?, 2) what did you do regain feelings of closeness?, 3) how was your partner available to meet your needs?, 4) how did your partner respond to your need for comfort?, and 5) what impact did the affair have on sex in your relationship? The healing process was explored through the following questions: 1) what did you do when things happened that reminded you of the affair?, 2) how did you decide what you needed most?, 3) what worked well for you in terms of conversation?, 4) what role did forgiveness play?, 5) what role did sex play?, 6) what were the most helpful things that your partner did or said?, and 7) what were the most helpful things that you did or said?

Data Analysis

Data were analyzed using Braun and Clarke's (2006) version of thematic analysis, of which prior studies examining the process of affair recovery have used a similar approach (Abrahamson et al., 2012; Olson et al., 2002). Thematic analysis is a tool used to identify, analyze, and interpret themes as they emerge from qualitative research and is a flexible method of data collection that can be applied across a variety of theoretical approaches (Braun & Clarke, 2006). Braun and Clarke's (2006) six-step framework was used to guide the analysis of the data: 1) become familiar with the data, 2) generate initial codes, 3) search for themes, 4) review themes, 5) define and name themes, and 6) produce the report. Initial codes were generated from responses to questions in the interview script pertaining to the recovery process and themes were identified based on these codes. This process was completed first for the data from interviews with injured partners followed by the data from the interviews with involved partners.

Results

The themes that emerged are described below, organized by category and role in the affair. A table for each category of questions displaying the themes (in order of frequency) and specific examples for each role in the affair is also included at the end of this chapter (see Appendices A - C).

Decision to Recommit to the Relationship

Injured partner. Having children was a reoccurring theme across participants' responses to this question, as this was a factor that they believed connected them to their partner and despite the affair, this motivated them to want to recommit to the relationship. One participant said, "We have a family and we have a history and our children mean, you know, everything." The decision was also based on love and a genuine caring for their partner, along with having a connection and shared interest in activities that they felt was unique. One participant explained, "We connect on so many different levels and I don't think I could find that with someone else." In addition, the commitment that they had made to the relationship was important. Participants felt that through marriage or other means they had made a commitment to their partner, which motivated them to want to work through the infidelity that had occurred. One participant stated, "I knew that when I said for better or for worse that worse would actually come and that I didn't get to decide what the worse was, I only had to deal with it."

Injured partners identified their commitment, stubbornness, strength, and faith as primary characteristics. For commitment, participants described themselves as having a desire to carry out things that they had started. One participant described, "I took my marriage vows very seriously, he broke his vows, but I still felt very committed to mine." Stubbornness was described as a desire to not give up on the relationship and viewing oneself as a strong person,

which was reflected in their ability to work through the pain caused by the infidelity. Participants also talked about their commitment to their faith and religion as an important characteristic. One participant explained, “My faith allowed me to stay in the relationship, and a big part of that is just that I didn’t feel like I had permission from God to leave the relationship.”

Participants described their partners as kind and caring, as taking responsibility, as being committed, and as loving. Despite having an affair, participants felt that their partners were genuinely kind and cared about them a lot. They also identified the importance of taking responsibility for the affair as one participant explained, “He never one time blamed me.” Another important characteristic was the partner’s commitment to the relationship, despite how this may have been reflected by the infidelity. One participant said, “He makes a lot of sacrifices to make this marriage work.” Finally, participants described their partners as loving and that despite the affair their partners were able to show them that they really loved them.

Involved partner. Participants spoke to characteristics of their partner that they identified as important and valued, and even some that were viewed differently as a result of the affair. One participant explained, “I came through therapy to realize that those are qualities [in my partner] that I actually really value.” Participants also spoke about the commitment that they felt as well as other difficulties that they had experienced in the relationship such as, “We had been together for a really long time and we have been through a lot of stuff together, a lot of hard times.” Similar to injured partners, recognizing the love they had for their partner and the children they shared together were also important factors.

Involved partners identified the following characteristics of themselves: loyal, stubborn, faith/religion/spirituality, and loving and caring. Participants viewed themselves as being loyal to their partners and to their relationship, despite the lack of loyalty that was displayed by the

infidelity. Similarly to injured partners, involved partners identified as being stubborn and that this motivated them to want to work on the relationship. One participant simply stated, “I didn’t want to accept defeat.” Similarly, involved partners identified their faith/religion/spirituality as a defining characteristic and that through this they felt a strong obligation to remain in the relationship. One participant explained, “I come from a very religious, conservative family, so just the fact that you never leave, no matter what.” Involved partners also described themselves as loving and caring, despite the fact that these characteristics may not have been being communicated through the affair, they felt that these were core characteristics of themselves.

Participants described their partners as caring, stable, and strong. Despite the affair, involved partners felt that their partners still cared about them as one participant described, “She’s very caring...she will help you in any way she can.” Participants also focused on their partner’s ability to provide stability to the relationship moving forward. Finally, participants described their partners as strong, which was reflected in their commitment and desire to work on the relationship. One participant said, “She’s not willing to give up.”

Overall, when deciding to recommit to the relationship, themes of children and love for one’s partner, being stubborn and having a strong commitment to faith/religion/spirituality, and having a caring partner were important for both injured and involved partners. Only injured partners identified a connection, shared interests, and a commitment to the relationship as being important factors. Injured partners additionally described themselves as being committed and strong, while they perceived their partners to be committed, loving, and able to take responsibility for the affair. Only involved partners said that general characteristics of their partner and their relationship history were important factors. Additionally, involved partners

described themselves as loyal, loving, and caring, while they perceived their partners to be stable and strong.

Relationship Dimensions

Injured partner. Increased communication, specifically more frequent check-ins, was essential for rebuilding trust as one participant explained, “He was more attentive to making sure I knew where he was and what he was doing.” Having access to everything including their partner’s phone, passwords, geographical location, etc. that could be accessed whenever they wanted to was extremely important, however, participants did acknowledge that this was something that they needed a lot in the beginning of the recovery process but less so as they began to be able to trust their partners again. One participant said, “There was an app on his phone so that I could see every incoming and outgoing text message, picture, phone call...and it has a location tracker.” Prioritizing more quality time together was important for injured partners to be able to slowly begin to feel safe and build up a higher level of trust. Participants also talked about the essential role that therapy played as the therapist’s office was viewed as a safe space where they could have difficult conversations that helped to rebuild trust in their relationship.

To regain feelings of closeness, participants described opportunities for connection such as spending more time together, spending more time with each other’s social circles, and connecting on a deeper level. One participant described, “I think that, seeing him more, making the effort to see him more was a big part of that...I also starting bringing him around my family more.” In addition, communication involved more frequent and open conversation. One participant said, “We talked about everything, it was constant communication.”

Injured partners described the ability of their partners to meet their needs through active involvement in the recovery process, which demonstrated a commitment to healing and to the

relationship, and really helped to meet their needs after the discovery of the affair. One participant explained, “I told him he needed to go to individual therapy and he did...and couples therapy weekly, and we each had a book we were reading.” Increased communication was another way that injured partners felt their needs were being met as for many couples communication had drastically decreased before and during the affair.

There was an overwhelming theme of responsiveness as injured partners described how their partners responded to their needs for comfort. Although this did not reflect every participant’s experience, the majority described their partners as willing to give comfort when they asked for it including physical touch, communication, and reassurance of the relationship. One participant described, “Very responsive...she knows that I was hurt...she worked very hard to try and make it right and try to give me what I needed to feel like I was loved.”

When describing the impact that the affair had on sex in their relationship, a variety of themes emerged: improved, hurt it, roller coaster, and none. Participants said that the affair improved their sexual relationship as it forced them to talk more openly about sex, which created a deeper connection. They also said that the affair hurt their sexual relationship in a variety of ways from a complete lack of desire to have sex after the discovery of the affair to sex being the part of the relationship that is still a work in progress. Many participants described a roller coaster where their sexual relationship fluctuated over time as a result of the affair. One participant said, “You know in the beginning we had crazy sex and then it totally tapered off and then I did not want him anywhere near me for a while.” Some participants also said that the affair did not have any impact on their sexual relationship, many of whom felt like their sexual relationship was not a catalyst for their partner having an affair.

Involved partner. When asked about rebuilding safety and trust, involved partners echoed three of the same themes identified by their counterparts: communication, therapy, and having access to everything, however, they discussed these themes in a different way. Involved partners found that their willingness to be more open and share more with their partner was essential to rebuilding safety and trust. One participant said, “You know sometimes it’s pretty easy for me to be kinda closed off, so I think I tried to be more open with what was going on with me.” Involved partners said therapy was an avenue for learning how to help their partners to trust them again, a process they felt very unsure about prior to starting therapy. Participants also talked about their willingness to give their partners access to everything as one participant explained, “I think it did build trust that I was willing to, you know have full transparency with my laptop, on my phone, I was willing to have that.”

Similar to the themes expressed by injured partners, involved partners identified conversation and time together as important to regaining feelings of closeness. Conversation was described as the involved partner’s willingness to open up more and to talk about the affair whenever the injured partner wanted to. One participant explained, “I began to open up more and just express how I feel more and um, willing to talk about the affair with her.” Spending more time together also allowed partners to feel closer to one another and was something that many said had drastically decreased before and during the affair. One participant said, “I’ve just made a real concerted effort to be there, to be there with her and do things with her.”

Involved partners said communication was important to meeting their needs as their partners were listening to and hearing the needs that they were expressing. One participant described, “She was listening...she was truly listening to what I was saying to her.” Participants also needed to feel like they could depend on their partners to be there for them and demonstrate

a commitment to the relationship. One participant provided a specific example of this, “He had gotten a full time job that he’s been able to keep...so he’s proving dependable in that way.”

As compared to injured partners, involved partners experiences of their partners’ responses to their needs for comfort were more varied. Some participants described their partners as dismissive, while others described them as available, and some specifically focused on communication as being an important way that their partners provided comfort. Participants who described their partners as dismissive reflected on their role in the affair and that the injured partner was too consumed with their own pain to be able to offer comfort. One participant said, “I would say not so much, he was more focused on his own needs.” Participants who described their partners as available focused on their partner’s ability to see that they were also hurting. One participant explained, “She was accommodating, I think that she tried her hardest...she was there when I needed her.” Participants described communication as the partner’s ability to listen and communicate in a way that demonstrated that both partners were responsible for healing the relationship, which provided a lot of comfort for involved partners.

Themes varied for the impact of the affair on sex in their relationship similarly to injured partners. Participants said that the affair did not have any impact on their sexual relationship as one partner stated, “I would say pretty minor, it didn’t decrease or increase afterwards.” Participants also described the impact as negative at first, many of whom identified that they stopped having sex following the discovery of the affair. Additionally, participants said that it improved sex in their relationship focusing on the ability to be more intentional and feel more connected through sex. One participant said, “It’s far better with us than it’s ever been.”

Overall when considering the relationship dimensions involved in the healing process, there was a lot of overlap in the ways in which both partners perceived the rebuilding of trust and

safety including communication, therapy, and giving the injured partner access to everything. Both partners also identified that communication was important for regaining feelings of closeness and being available to meet each others' needs. In addition, both partners identified that the affair both had no impact and improved their sexual relationship. Injured partners only said that more time together was important for rebuilding trust, increased opportunities for connection helped to regain closeness, and that being actively involved in the recovery process was how their partners were available to meet their needs. They experienced their partners as being very responsive to their needs for comfort and additionally thought that the affair hurt and created a roller coaster effect on their sexual relationship. Involved partners only identified more time together as helping to regain closeness, their partners being dependable and taking responsibility as helping to meet their needs, and the affair having a negative impact on their sexual relationship at first. In addition, involved partners experienced their partners as both available and dismissive to their needs for comfort as well as using communication to provide needed comfort.

The Healing Process

Injured partner. When reminded of the affair, injured partners said that they would lash out at their partners, placing blame on them for the affair. They also described being very overwhelmed by the emotions that they experienced, including anger, frustration, and sadness. Participants would also respond to the trigger by simply acknowledging that it was there, which was described as allowing themselves to feel all of the emotions without trying to move past it too quickly. One participant said, "I just allow myself to fully acknowledge that I'm being triggered...and it's there - that it exists and it's okay." In addition, participants said that they

became very distant from their partners, as the trigger was a clear reminder of the pain and the hurt that their partner caused and they needed some time alone to process that.

During the healing process, injured partners identified that going to therapy and acknowledging that healing was a process was how they decided what they needed most. Therapy gave them a chance to really think about what they needed and also provided a safe space to share their needs with their partner. Participants also said that figuring out what they needed was a learning process, admitting that they did not know what they needed right away or that sometimes this changed over time. One participant explained, “Trial and error...you know learning what I needed from him.”

Participants acknowledged that conversation was an important part of the healing process with themes of lots of conversation, openness to talk about the affair, and conversations with others. Injured partners reflected on the importance of frequent conversations in the healing process, sometimes talking for hours, or discussing the same thing over and over again. Participants also described a contract between themselves and their partner that the topic of the affair was always open for discussion, whenever either partner wanted to talk about it and for any length of time, which was essential to their healing. One participant said, “We talk about it whenever I want to talk about it, I was never told you know I don’t want to talk about this anymore.” In addition, participants found conversations with others to be helpful in the healing process, particularly with those that were also healing from an affair or who had experienced an affair and had healed from it, as both could empathize with their situation.

Participants also described forgiveness as a very important process for healing. Participants acknowledged that forgiveness was a necessary step in the healing process and without the ability to forgive their partner they would not have been able to stay in the

relationship. One participant explained, “If I can’t forgive him then there’s no reason to even be married.” Participants also talked about forgiveness as an ongoing and complicated process, some of whom are still working on fully forgiving their partner. One participant said, “I will tell you that it’s still a process it’s not something that - okay I forgive you - let’s move on.”

Participants said that sex was a positive contributor to healing the relationship and that through this their sex life had improved. One participant explained, “I think our sexual relationship now is more mutually satisfying and I think that has allowed for healing.”

Participants also acknowledged that having sex made them feel desired and wanted by their partners, which was something that they were previously unsure about as a result of the affair. One participant described, “For me, it was to make me feel good about myself and to make me feel wanted.” In addition, participants said that sex helped with connection and meeting each other’s needs, which was something that was missing from the relationship prior to the affair.

Participants said that the most helpful things from their partners was a commitment to healing, honesty, and apologies. In order to heal, both partners had to be fully committed to the recovery process and so knowing that their partner was all in was essential. Participants also valued their partner’s ability to be honest with them as one participant explained, “He has been very honest in anything I ask him to tell me.” In addition, the partner’s apologies were necessary for healing as one participant described, “He has apologized profusely.”

Participants believed that the most helpful things that they did were that they stayed in the relationship, understood what lead to the affair, and believed in the relationship. Having both partners stay in the relationship was a necessary first step to the healing process. One participant said, “I stayed! I frickin stayed, and I had every reason and then some to leave, every reason in the world to leave.” Participants also felt that their ability to understand what lead to the affair

helped the healing process as it signified a commitment to work on weaker areas of the relationship to prevent affairs from happening again. In addition, participants described their belief in their partner and the relationship as essential. One participant shared, “You know I’ve told her, I don’t believe she’s gonna have [another affair], that she’s committed to me.”

Involved partner. When reminded of the affair, participants in this role felt that it was most helpful to reach out to others or to simply redirect the thoughts. Reaching out to others, including their partner, helped them to acknowledge and process the trigger. One participant explained, “I call my partner and say hey I just had this feeling and although that may be a hard conversation, it’s always worth it in the end.” Participants also described a strong desire to redirect the thoughts by thinking about something else all together or reminding themselves of the negative parts of their relationship with the affair partner.

Similarly to injured partners, involved partners overwhelmingly said that therapy was an essential tool to decide what they needed most. Participants described therapy as a safe space where they could talk through their needs, as they felt that their needs were often viewed as less of a priority in the relationship. One participant described, “Well, I think counseling helped with that...I spent a lot of time working with the counselor to talk through what I needed.”

Involved partners also acknowledged the importance of conversation in the healing process with themes of frequent conversation, talking about what lead to the affair, and setting aside time to talk. Similar to injured partners, involved partners shared the importance of lots of conversation, both related and unrelated to the affair, as essential for healing. Talking about what lead to the affair was also an important part of the healing process, as these participants wanted their partners to understand why the affair occurred and what could be done to avoid affairs in the future. One participant explained, “Talking about what played into it for me, the betrayal that

I felt from him.” Participants also explained that when it came to talking about the affair, they preferred structure around the timing of the conversations, which often meant saving the conversation for the next therapy session. One participant said, “Having time to set aside to actually talk about it but not having to constantly talk about it.”

Similar to injured partners, involved partners acknowledged the essential role that forgiveness, on both sides of the relationship, played in the healing process with themes of big, able to move forward, a process, and forgiving myself. Participants acknowledged that forgiveness was incredibly important as one participant described, “It’s 100% of the reason why we’re still together today.” Participants also focused on forgiveness as occurring early on in the healing process and as a catalyst for being able to heal the relationship. Just like injured partners, involved partners acknowledged forgiveness as a process, describing it as slow and occurring in stages. In addition, participants talked about the ability to forgive themselves for having the affair and for the hurt that it caused as being just as important as their partner forgiving them.

Involved partners said that sex as a means to heal the relationship was more important for their partners than it was for them. One participant explained, “I think she lost a lot of confidence in herself due to what I did so she feels more secure you know when we have sex.” Participants also described sex as a means to build closeness in the relationship that was lost as a result of the affair. In addition, participants acknowledged sex as essential to the healing process and that it was important to continuing to move forward.

Participants said that the most helpful things from their partners were their reassurance that they value the relationship, communication, and acknowledging their own responsibility in helping to heal the relationship. Participants described their partner’s commitment to the relationship and the process of healing as one of the most helpful things as one participant

described, “Just being honest about wanting to work on things and um you know giving our relationship a chance.” Their partner’s willingness to communicate with them, including listening to their needs, was also extremely helpful. In addition, acknowledgment by their partner that both people were responsible for healing the relationship was essential as one participant explained, “We got to a spot of him recognizing...we both have hurt each other...it’s on both of us to heal from it, it’s not just on me as the person who had the affair to make our relationship work.”

Participants described their own commitment to the healing process, reassurance of the relationship, and reminders of love as the most helpful things that they did to contribute to the healing process. Participants said that after the discovery of the affair their partners were uncertain as to their commitment to the healing process and so making this clear was essential. Participants also felt like their ability to reassure their partners of their commitment to the relationship was very important. One participant said, “Letting her know that I wanted to be in this relationship with us from now on...making sure she knew that I was committed to her and nobody else.” Finally, participants reminding their partners that they loved them and the things that they loved about them was another important contribution.

Overall, there was less overlap in the ways in which injured and involved partners experienced the process of healing in comparison to the other two categories. Both partners identified therapy as helping them to decide what they needed most, said that lots of conversation worked well for them throughout the healing process, perceived forgiveness as an important process, and felt that sex played an important role in the healing process. In response to reminders of the affair, injured partners acknowledged the trigger, lashed out at their partners, became distant from their partners, and became emotionally flooded whereas involved partners

were more likely to reach out to their partners and others and redirect their thoughts. For injured partners, lots of conversation included having the affair be always open for discussion and having conversations with others, while involved partners said that talking about what lead to the affair and setting aside time to talk worked best for them. Involved partners only reflected on their process of self-forgiveness in addition to needing their partner to forgive them. Injured partners only reflected on how sex made them feel desired by their partners whereas involved partners felt that sex was more important for their partners in the healing process than it was for them. For injured partners, the most helpful things that they did to contribute to the healing process were believing in the relationship, understanding what lead to the affair, and ultimately being willing to stay, whereas they perceived their partners' commitments to healing, honesty, and apologies as being most helpful. For involved partners, the most helpful things that they did was being committed to the healing process and reminding them how much they loved them, whereas they perceived their partners' communication and responsibility to the healing process to be most helpful. In addition, they identified that both their own and their partner's reassurance of the relationship were extremely helpful for healing.

Discussion

This is the first study to qualitatively explore the similarities and differences of the injured and involved partners in the process of recovering from an affair. The decision to recommit to the relationship after an affair was influenced by various factors as well as individual characteristics. Common amongst all participants were the love and care that they had for their partners, the families that they had built, and their children, which aligns with prior findings (Abrahamson et al., 2012). Both partners also identified an enduring commitment to the relationship including having a long history together and developing a strong connection. In

addition, involved partners said that they recognized important characteristics in their partner that they had undervalued during the affair. Common characteristics of both partners were committed, stubborn, strong, loving, caring, and faith/religion/spirituality. Both injured and involved partners described themselves as stubborn, which made them not want to give up on the relationship. Their commitment to faith/religion/spirituality also made them want to stay with their partner and work on the relationship. Both injured and involved partners described the other as caring, a characteristic that they truly valued in their partner. Also, both partners identified the injured partner as strong, described as a desire to not give up and power through the healing process. In addition, both partners described the involved partner as loving, evidenced by their ability to demonstrate their strong love for their partner despite the affair. Finally, injured partners described both themselves and their partners as committed to the relationship and doing whatever it takes to maintain the relationship.

The relationship dimensions explored were safety and trust, closeness, availability to meet needs, responsiveness to comfort, and sex. There was a lot of overlap in the ways that both injured and involved partners talked about rebuilding safety and trust in their relationship. The biggest theme was communication, described as being more open and checking in more frequently with one another, which has also been found in previous studies (Olson et al., 2002). Another common theme was the injured partner having access to everything, including passwords, phone activity, and a location tracker (Timm & Blow, 2018), however this was most useful to injured partners immediately following the discovery of the affair. Also, going to therapy together provided a safe space to process the affair and receive guidance on the best ways to rebuild trust, which has been previously integrated in to models of healing from affairs (Bird et al., 2007; Staples, 2010). Both injured and involved partners identified communication

as important for regaining feelings of closeness and also being available to meet each other's needs. The ability to open up more and talk about everything fostered feelings of closeness while more frequent communication and active listening demonstrated an availability to meet each other's needs. Communication has been identified in previous research as being an important part of the recovery process (Bird et al., 2007; Clark, 2013; Staples, 2010). Overwhelmingly injured partners felt that their partners were responsive to their need for comfort, while involved partners had mixed experiences. Some involved partners reported that their partners were dismissive of their need for comfort, which may be expected given the hurt that was caused by the involved partner through the affair. This also reflects the typical response by others to each partner after the discovery of an affair, with the injured partner receiving more consoling and comfort while the involved partner tends to be pushed away and criticized, especially in the immediate aftermath of the discovery (Abrahamson et al., 2012; Olson et al., 2002). There was also variability in how injured and involved partners viewed the impact that the affair had on sex in their relationship. Both partners said that in some cases the affair did not have any impact on their sexual relationship, identifying that the frequency did not change as a result of the affair. Both partners also identified some improvements in their sexual relationship, as they believed that the affair provided an opportunity for greater connection. Injured partners reported that the affair hurt their sexual relationship overall due to the betrayals and continued difficulty in rebuilding trust, while involved partners felt there was a negative impact such as a complete lack of sex in the relationship, but only for a little while after the discovery of the affair. In addition, injured partners frequently described the impact on sex as a roller coaster with a lot of ups and downs throughout the recovery process (Timm & Blow, 2018).

Facets of the healing process were also explored including responding to triggers, identifying needs, conversation, forgiveness, sex, and contributions from each partner. In contrast to many of the themes for the first two categories, there were no similarities between injured and involved partners in their responses to things that reminded them of the affair. Injured partners identified more tension in the relationship with their partner, such as lashing out and becoming distant, which has been found in previous studies (Olson et al., 2002), whereas involved partners reported that they would often reach out to their partner for support. Another distinct difference is that injured partners tended to acknowledge the trigger, which included processing the overwhelming flood of emotions, whereas involved partners tended to distract themselves by thinking about something else. Both injured and involved partners identified therapy as an essential part of deciding what they needed most (Bird et al., 2007; Staples, 2010; Timm & Blow, 2018), stating that therapy helped them to process their own feelings so that they could clearly ask their partners for what they needed. Despite infidelity being viewed by couple therapists as one of the most difficult issues to treat (Whisman et al., 1997), therapy was a significant part of the healing process for many couples in this study, thus an understanding of how healing is facilitated through therapy can help therapists to feel more confident in working with these couples. In terms of conversation, both injured and involved partners identified that lots of conversation was a necessary part of the healing process, including having the topic of the affair as always open for discussion and having conversations about what led to the affair, both of which have been previously found in the literature (Clark, 2013; Olson et al., 2002; Timm & Blow, 2018), as well as talking to others that had been through it. Both injured and involved partners identified forgiveness as an essential part of the healing process, which has been well supported by prior research (Bird et al., 2007; Clark, 2013; Olson et al., 2002; Staples, 2010),

and that forgiveness itself was a process. In addition, involved partners discussed the importance of forgiving themselves for the affair (Olson et al., 2002). Both injured and involved partners identified that sex played an important role in the healing process including creating more closeness and helping the injured partner to feel desired. In addition, involved partners said that although sex aided the healing process, they felt that it played a bigger role for their partners than for them. Both partners identified that the involved partner's commitment to healing, including an immediate end to the affair and willingness to seek help through therapy, was extremely helpful in the healing process, as has been supported in previous research (Afifi et al., 2001; DiBlasio, 2000). Both partners also acknowledged that healing the relationship would take input from both of them, including recognizing how each partner contributed to the state of the relationship prior to the affair and believing in their ability to make changes to prevent affairs from happening in the future. Furthermore, involved partners felt that reassurance of the relationship from both partners was important to the healing process.

Clinical Implications

While over 50% of couples who experience infidelity will seek therapy, therapists report this as one of the most difficult issues to treat (Whisman et al., 1997). Both partners identified therapy to be helpful in deciding what they needed most in the recovery process and giving them the tools to begin rebuilding safety and trust. Being actively involved in the recovery process, including attending therapy, was identified by both partners as being one of the most helpful things that they both did to help heal the relationship. Participants also identified communication as essential to healing, including rebuilding safety and trust, regaining feelings of closeness, and being able to meet each others' needs. For many of the couples in this study, communication in their relationship had declined prior to the affair, and therapy helped them figure out how to re-

establish this and also provided a structured time to talk about the affair and their relationship. In addition, both partners said that giving the injured partner access to everything was essential to rebuilding safety and trust, but that this was most important in the immediate aftermath of the discovery of the affair, and was not continuously used as a means to check up on one's partner once some trust had been rebuilt. Furthermore, both partners identified forgiveness as a process and for involved partners they also needed to go through the process of forgiving themselves. Understanding the recovery process from the perspective of both partners can provide therapists with some important insights for working with these couples.

Directions for Future Research

This was the first known study to examine the experiences of injured and involved partners in the process of recovering from an affair. While the sample size was sufficient for the qualitative approach that was used, understanding the recovery process from a larger and more diverse group of couples would enhance the generalizability of results. In addition, having a study format that is more easily accessible to potential participants would allow researchers to set more specific inclusion criteria, such as controlling for the number of affairs experienced and the time since the discovery of the affair, which would again contribute to the generalizability of results. Future research should use the findings from this study to transform the essential aspects of the recovery process into quantitative questions that could be answered in an anonymous online survey, which would allow for a better understanding of the recovery process from a larger sample of couples who have experienced it. One common finding from this study was the influential role that therapy played for both partners in the recovery process, however, the specific mechanisms by which the therapists were most helpful needs further attention. Future

research should conduct an in depth exploration of the role that therapists play in the process of recovering from an affair, which could greatly benefit those who are working with these couples.

Limitations

Despite addressing gaps in the infidelity literature, this study had limitations. First, the time since discovering the affair ranged from six months to five years, which lead to variability in participants' recall of the specific details of the recovery process. While some participants shared very detailed accounts of the discovery and recovery process, others commented that it had been a long time since the affair and therefore struggled to fully recall specific details. Second, all of the couples were heterosexual, highly educated with the majority having earned at least a bachelor's degree, and had a high household income, with over half reporting an annual income greater than \$100,000. This impacts the generalizability of results and also limits the ability to further explore how differences in sexual orientation influence the process of recovering from an affair.

Conclusion

Infidelity affects a significant number of couples across the United States, but the mechanisms by which couples work to heal from this is not well understood. An in-depth exploration of the process of recovering from an affair highlighted both similarities and differences in the experiences of injured versus involved partners. An understanding of affair recovery from this perspective can benefit both the couples who are experiencing it as well as the professionals who are working with couples during this difficult time.

APPENDICES

APPENDIX A: Table 5.1 Decision to Recommit to the Relationship

Table 5.1 Decision to Recommit to the Relationship

Question	Injured Partner		Involved Partner	
	Themes	Examples	Themes	Examples
<i>What were the factors that made you decide to stay with your current partner?</i>	Family & Children	"We have a family and we have a history and our children mean, you know, everything."	Characteristics of my Partner	"I came through therapy to realize that those are qualities that I actually really value."
	Love & Care for Partner	"I love him more than I thought I did."	Relationship History	"We had been together for a really long time and we have been through a lot of stuff together, a lot of hard times."
	Connection & Shared Interests	"We connect on so many different levels and I don't think I could find that with someone else."	Love	"I still loved her."
	Relationship Commitment	"I knew that when I said for better or for worse that worse would actually come and that I didn't get to decide what that worse was, I only had to deal with it."	Children	"A huge factor was that we had [number] kids together."
<i>What are characteristics of yourself that contributed to your desire to remain in the relationship?</i>	Committed	"I took my marriage vows very seriously, he broke his vows, but I still felt very committed to mine."	Loyal	"You know, I stay committed to things."
	Stubborn	"I'm kind of a stubborn person, I don't give up on things...I'm someone who just sticks it out."	Stubborn	"I didn't want to accept defeat."

Table 5.1 (cont'd)

<i>What are characteristics of your partner that contributed to your desire to remain in the relationship?</i>	Strong	"I just wanted to power through and be strong."	Faith/Religion/Spirituality	"I come from a very religious conservative family, so just the fact that you never leave, no matter what."
	Faith/Religion	"My faith allowed me to stay in the relationship and a big part of that is just that I didn't feel like I had permission, from God, to leave the relationship."	Loving & Caring	"Even with what happened I think that um, you know I think I do a lot to show her that I love her."
	Kind & Caring	"He's also the kindest he's so, he's really good to me."	Caring	"She's very caring...she will help you in any way she can."
	Taking Responsibility	"He never one time blamed me."	Stable	"I'd say the biggest is stability...emotional stability...financial stability, kind of just all around."
	Committed	"He makes a lot of sacrifices to make this marriage work."	Strong	"She's not willing to give up."
	Loving	"The way in which she loves, um it's very different, it's very intense."		

Note: the themes for each partner are listed in order of frequency; the bold font signifies themes reported by both partners.

APPENDIX B: Table 5.2 Relationship Dimensions

Table 5.2 Relationship Dimensions

	Injured Partner		Involved Partner	
Question	Themes	Examples	Themes	Examples
<i>What did you do to begin building safety and trust again in your relationship?</i>	Communication	“He was more attentive to making sure I knew where he was and what he was doing.”	Communication	“You know sometimes it’s pretty easy for me to be kinda closed off, so I think I tried to be more open with what was going on with me.”
	Access to Everything	“There was an app that he downloaded on his phone so that I could see every incoming and outgoing text message, picture, phone call...and it has a location tracker.”	Therapy	“We really needed some guidance with that so we started going to counseling.”
	More Time Together	“The other part was just, being more intentional about spending quality time together.”	Access to Everything	“I think it did build trust that I was willing to, you know have full transparency with what, you know on my laptop on my phone, I was willing to have that.”
	Therapy	“We got straight into therapy.”		
<i>What did you do to regain feelings of closeness in your relationship?</i>	Increased Opportunities for Connection	“Making the effort to see him more was a big part of that, I also started bringing him around my family more.”	Conversation	“I began to open up more and just express how I feel more and um, be willing to talk about the affair with her.”

Table 5.2 (cont'd)

	Communication	"We talked about everything, it was constant communication."	Time Together	"I've just made a real concerted effort to be there, to be there with her and do things with her."
<i>How was your partner available to meet your needs?</i>	Active Involvement in Recovery Process	"I told him he needed to go to individual therapy and he did...and couples therapy weekly, and we each had a book we were reading."	Communication	"She was listening...she was truly listening to what I was saying to her."
	Communication	"By communication...you know talking to me during the day and texting me during the day and calling me during the day...and you know, filling me in."	Dependable	"He has gotten a full time job that he's been able to keep...so he's proving dependable in that way."
			Taking Responsibility	"She recognized you know what had happened and what contributed to what had happened and recognized that there were moments [before the affair] when I really needed her and she wasn't there."
<i>How did your partner respond to your need for comfort?</i>	Responsive	"Very responsive...she knows that I was hurt...she worked hard to try and make it right and try to give me what I needed to feel like I was loved."	Dismissive	"I would say not so much, he was very focused on his own needs."

Table 5.2 (cont'd)

<i>What impact did the affair have on sex in your relationship?</i>			Available	"She was accommodating, I think that she tried her hardest...she was there when I needed her."
			Communication	"It really comes down to listening, I mean she truly was listening and not getting defensive, not brushing me off or blaming me."
	Improved	"It's actually made it better...I think we're connected on a different level."	None	"I would say pretty minor...it didn't decrease or increase afterwards."
	Hurt It	"It has hurt it severely because of the other parts of our relationship that are missing from the betrayals that I have had from a trust standpoint."	Negative at First	"It effected it tremendously...we stopped having sex."
	Roller Coaster	"You know in the beginning we had like I said crazy sex and then it totally tapered off and then I did not want him anywhere near me for a while."	Improved	"It's far better with us than it's ever been."
	None	"It did not really have an impact on our sex life."		

Note: the themes for each partner are listed in order of frequency; the bold font signifies themes reported by both partners.

APPENDIX C: Table 5.3 The Healing Process

Table 5.3 The Healing Process

Question	Injured Partner		Involved Partner	
	Themes	Examples	Themes	Examples
<i>What did you do when things happened that reminded you of the affair?</i>	Lashed Out	"I go straight to you're guilty."	Reached Out to Others	"Call my partner and say hey I just had this feeling and although that may be a hard conversation, it's always worth it in the end."
	Emotionally Flooded	"I usually process a little bit of anger a little bit of frustration a little bit of sadness."	Redirected the Thoughts	"Stopping the thoughts, redirecting and coming to the reality of it's like that's not what you actually want."
	Acknowledged the Trigger	"I just allow myself to fully acknowledge that I'm being triggered...that it's there, that it exists, and it's okay."		
	Distant from Partner	"Usually the result is that I'm really distant for a couple of days."		
<i>During the healing process, how did you decide what you needed most?</i>	Therapy	"I think just through my own process with therapy."	Therapy	"Well I think counseling helped with that...I spent a lot of time working with the counselor to talk through what I needed."

Table 5.3 (cont'd)

	Learning Process	"Trial and error...you know learning what I needed from him."		
<i>During the healing process, what worked well for you in terms of conversation?</i>	Lots of Conversation	"Talk talk talk talk, yeah talking a lot...allowing me to ask again and again and again."	Lots of Conversation	"Definitely conversation, I mean the more talking about it the better for me."
	Always Open to Talk About the Affair	"We talk about it whenever I want to talk about it, I was never told you know I don't want to talk about this anymore."	Talking About What Lead to the Affair	"Talking about what played into it for me, the betrayal that I felt from him."
	Conversations with Others	"Conversations with people who have been through it and then can empathize."	Setting Aside Time to Talk	"Having time set aside to actually talk about it but not having to like constantly talk about it."
<i>What role did forgiveness play in the healing process?</i>	Very Important	"If I can't forgive him then there's no reason to even be married."	Big	"It's 100% of the reason why we're still together today."
	A Process	"I will tell you that it's still a process it's not something that okay I forgive you let's move on."	Able to Move Forward	"It played a large role...I instantly began to see you know the healing process begin to happen."

Table 5.3 (cont'd)

<i>What role did sex play in the healing process?</i>			A Process	"I think the process of forgiveness was slow and kind of like in chunks."
			Forgive Myself	"I had to do some forgiving as well."
	Positive	"I think our sexual relationship now is more mutually satisfying and I think that has allowed for healing."	Bigger Role for My Partner Than for Me	"I think she lost a lot of confidence in herself due to what I did so she feels more secure you know when we have sex."
	Made Me Feel Wanted	"For me it was to make me feel good about myself and to make me feel wanted."	Closeness	"It built that closeness again."
<i>What were the most helpful things your partner did or said to help heal the relationship?</i>	Important	"I think it was a really important one for sure you know in the beginning being able to meet each other in ways we hadn't in so long."	Helped Us Heal	"It progresses our healing and where we are going each time."
	Committed to Healing	"Immediately ending the affair and being will to go and get help."	Reassurance of the Relationship	"Just being honest about wanting to work on things and giving our relationship a chance."

Table 5.3 (cont'd)

<i>What were the most helpful things that you did or said to help heal the relationship?</i>	Honesty	"He has been very honest in anything I ask him to tell me."	Communication	"I would say the conversations you know she was willing to sit down and listen."
	Apologized	"He has apologized profusely."	Both Responsible for Healing the Relationship	"When we got to a spot of him recognizing...we both have hurt each other...it's on both of us to heal from it, it's not just on me as the person who had the affair to make our relationship work."
	Stayed	"I stayed! I frickin stayed, and I had every reason and then some to leave, every reason in the world to leave."	Commitment to the Healing Process	"My strong commitment, my willingness to jump right in like with starting therapy."
	Understood What Lead to the Affair	"Trying to understand him...and asking, like how do we get back to how it was before."	Reassurance of the Relationship	"Letting her know that I wanted to be in this relationship with us from now on...making sure she knew that I was committed to her and nobody else."
	Believed in Us	"You know I've told her, I don't believe she's gonna have [another affair], that she's committed to me."	Reminders of Love	"Telling her that I love her...telling her the things that I love about her."

Note: the themes for each partner are listed in order of frequency; the bold font signifies themes reported by both partners.

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