

Marital Infidelity: Relational Family Therapy Perspective on Adult Detachment

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The purpose of this article is to show the affective side of the marital infidelity as it could be traced through therapeutic process in relational marital therapy. Relational family therapy is based on the notion of mutuality of affect and transgenerational transmission of affect dysregulation. In the article we present a couple therapy in which we address the affective mutuality of the dynamic of infidelity and uncover the deep shame and fear that lies at the core of that dynamic. In the therapeutic process of the couple therapy a certain turning point in the emotional flow of the process, namely the onset of sadness, occurred through recalling of painful childhood memory of physical abuse and neglect. We argue that the onset of deep sadness created a safe enough environment for the couple in which they could start mourning detached relationships in their families of origin and thus prepared the ground for the verbalization of the affects of fear and shame.

KEYWORDS *mutual affect, fear, shame, affect regulation, marital infidelity, relational family therapy*

The purpose of the article is to offer an approach to understanding and treating infidelity using relational family therapy. Through the case study we track the underlying affective dynamic of infidelity and changes in the emotional flow between partners and therapist. By the therapist's interventions based on her recognition of deeply seated affects, which were addressed in

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the supervisory relationship, she helps create a new regulation of previously dysregulated unconscious mutual affect.

One of the most painful and also a quite common source and result of marital distress is the crisis of infidelity. “Infidelity is a sexual and or emotional act engaged in by one person within a committed relationship, where such an act occurs outside of the primary relationship and constitutes a breach of trust and violation of agreed-upon norms (overt and covert) by one or both individuals in that relationship relation to romantic/emotional or sexual exclusivity” (Blow & Hartnett, 2005a, pp. 191–192). The consequences of such acts are undeniably harmful—often devastating—to individuals and relationships, and its repercussions present significant treatment challenges. The study of Whisman, Dixon, and Johnson (1997) showed extramarital affairs were the second ranked problem that brought couples to the therapy. Only physical abuse was ranked as having a more negative impact.

Infidelity represents a significant injury to the trust in the relationship; as such, treating infidelity is very different from treating a “simple communication issue” (Blow & Hartnett, 2005b, p. 230). Is recovery possible? In our view, infidelity as a violation of basic trust is best understood as attachment injury and as severe relational trauma. For the betrayed partner, such an unperceivable and unbearable experience will mutilate the fundamental structure of the self and upset and demolish the basic tenets that earlier provided soundness and security. It will destroy the three key suppositions needed for emotional survival: that the world is well intentioned, that there is a meaning to life, and that we are worth living for (Janoff-Bullman, 1992). Relational trauma is certainly one of the most hurtful and devastating of traumas (Johnson, 2004). It is a painful and violent experience of betrayal, endured alongside the closest of people, such as parents, partners, and close friends. Relational trauma of betrayal reaches to the very core of secure attachment; it destroys the basic capacity to trust and the basic criteria for distinguish between secure and nonsecure (Schore, 2003). It causes the complete emotional undermining of the betrayed partner, who is forced to ask himself or herself again without getting any answers: “What do I feel?” “What do I think?” “Is there anything in myself I could rely on?”

On the other side of the relationship, the unfaithful partner is usually not capable of integrating painful affects and will thus deflect awareness away from his or her internal emotional states. First of all, he or she will fail to feel emotions such as fear, shame, and pain. In this respect, marital infidelity can be seen as a form of behavior that enables this type of deflection of awareness. That is why disclosure of infidelity is an important, if not essential, component of healing for couples affected by infidelity (Atkins, Eldridge, Baucom, & Christiansen, 2005). Sincere and sensitive disclosure is the first sign of acknowledging the undermining of the partner and arresting the ongoing turmoil. It is also a first step toward understanding what happened.

It has been constantly noted that by infidelity one partner causes the distress of unworthiness, loneliness, and humiliation he or she feels inside in the other partner, instead of speaking about it. In the instance of “communicating” through marital infidelity, partners are left defenseless on a bodily level; as opposed to intellect and reason, the body can never deny what it feels. That is why the undermining is so ultimate and devastating: The feeling that something is not right and that one cannot trust one’s feelings and intuition anymore will remain at the bodily level as a feeling of emptiness, anxiety, and exhaustion, even physical illness, never quite acquiring conscious meaning (Kompan Erzar, Simonič, & Poljanec, in press). Healing from infidelity thus means not only to integrate these states of being with their respective meanings but to establish a repeated access to the core of one’s fear, shame, and anxiety in a safe relational environment. This will in turn provide the partners with a new experience of being in a relationship and a new form of secure attachment. Marital infidelity thus comes to be seen by both partners as the starting point of a long process of ever-growing intimacy. Couples who were in therapy and openly dealing with infidelity changed at comparable or faster rate than other distressed couples who were in therapy (Atkins et al., 2005).

RELATIONAL FAMILY THERAPY IN TREATING INFIDELITY

The therapeutic process, as relational family therapy understands it, is not a process that is meant primarily to fix emotional dynamics, but rather it aims to establish and enable the regulation of underlying dysregulated affects. It is based on two basic assumptions. First, it assumes that affective dynamic in relationships is mutual. Mutuality means that emotions and affects do not belong to individuals but represent individual reactions to deep-seated mutual affects that are not only mutual but mutually regulated, thus forming the bond: “Affects [. . .] are deeply unconscious, mutual, systemic and intergenerational bonds, imprinted in our bodies, which tend to resurface in intimate relationships over and over again, until an emphatic and verbalized regulation is found for them” (Erzar & Kompan Erzar, 2006, p. 245). In therapy the tracing of affective dynamic enables access to the recognition of disparate emotions. Furthermore, acknowledgment of these respective emotions allows for the regulation of primary affects, which otherwise act, via undifferentiated anxiety and fear, as the driving force behind dysfunctional and destructive behavior (Cozolino, 2002; Gostečnik, 2004; Kompan Erzar, 2001). It is the essential part of the idea of mutual affect that affects seek a solution of their internal dysfunctionally regulated states and that they tend to autoregulate through relationships. The research on romantic love ostensibly pointed out that the more desperate the search for partner, the less regulated and less verbalized the affects (Erzar & Kompan Erzar, 2006).

Second, we assume that forms of insecure attachment in adult relationships are co-created, which applied to infidelity means that the affair marks a moment in the relationship when partners established enough safety in their relationship so that the next step toward intimacy between them would be more vulnerable than the affair. In this vein, we hypothesize that an affair is not only the re-creation of the old patterns of relating but also the first step toward searching a new and safer relationship. We believe that such a violation of basic trust is not necessarily the last stage of the development of the relationship but rather the first sign that it is time to develop new deeper and broader security in the relationship and in oneself.

In relational family therapy the therapist focuses on tracing the mutual affect. Although the localization of mutual affect is by definition impossible, for a neutral observer the recognition may be facilitated by nonverbal signs and by dialogues in which affective states are attributed by speakers to the theme of discourse and not to themselves. For the therapist, however, mutual affects remain hard to recognize: It is often only with the help of supervision that the therapist comes to terms with what she or he thought were problems and affective states not emanating from therapy with clients. The fixation or crystallization of mutual affect in therapy often paralyzes the therapist's efforts to verbally regulate emotions and forces her or him to use unconscious defensive strategies such as labeling, rationalization, distancing, or diagnosing. In actual life situations, mutual affects are usually autoregulated by addictive behaviors, relationships characterized by irresistible "fatal attraction," and romantic love affairs (Erzar & Kompan Erzar, 2008). If the therapist wants to regulate these behaviors, she or he needs to come in touch with the affective side of the attachment injury of the couple; first of all by asking herself or himself how I am attached to this couple and how they form attachment bonds to me. We believe that, because individuals find themselves in partner relationships in which the same affective structure of attachment and regulation of affect can be found behind similar or opposing defense mechanisms, long-term improvements in couple relationships can only be effectuated if the therapist does something to change the underlying insecure attachment.

REGULATION OF AFFECT IN THE COUPLE'S RELATIONSHIP (DYNAMIC OF INFIDELITY)

In the following excerpts of the therapy we present a couple struggling with extramarital affairs on both sides of the relationship. In early sessions, immense amounts of fear and obstruction could be felt between them. As demonstrated in the therapy transcription, the partners regulated their distress in the relationship through extramarital affairs. In the case presented the affairs served to regulate the basic affects of shame and fear. Initially,

the partners were extremely brutal, spiteful, and insulting to each other. To connect with the fear and shame would necessitate that they confront their distress; this being too unbearable, the emotions got acted out with a discontinuance of contact, in this particular instance through extramarital affairs. In wanting to help the partners fundamentally change the emotional pattern of their relationship, they must first be capacitated, through the therapeutic process, to develop the ability of recognizing their emotions (Croyle & Waltz, 2002).

The couple attended therapy once a week for 3 months. Each of the 12 therapy sessions lasted 1 hr. Regarding all the events and circumstances presented by the couple, the therapist pursued and addressed primarily the emotions that were present thereof. Therapy was thus directed at recognizing the emotional dynamics of the rough exchanges and at increasing the capacity to recognize emotions, especially so as to accept the feeling of fear, uncover shame, and feel the pain. Each partner demonstrated a much reduced capacity to consciously confront his or her respective painful emotions. The therapist tried to address and expand on the emotions caught in the ambiance of the couple relationship by submitting to the emotional dynamics and recognizing the emotions in herself, as they were activated alongside another. After the first few sessions the therapist began to feel more and more fear, causing her to become frozen and engulfed in the therapeutic sessions. In the supervisory relationship, the therapist faced the notion of fear and frostiness and thus gained some new insight and acquired security. With the newly acquired security from the supervisory relationship the therapist was again able to help the couple facing their frozen relationship. With the aid of the therapist, the partners could gradually begin to experience and recognize first the sadness and despair and then the fear and deep-set shame that had inundated their relationship.

The first therapy sessions are charged with rough affects (hate, rage, anger, horror). The emotional dynamics are limited to the struggle of power and denial. The partners thus toss rage, hate, and anger back and forth, neither of them prepared to accept responsibility. The level of anxiety and distress in the face of these rough affects remains unaltered.

Th (therapist): What does it mean to have a wife, what does it mean to have a husband, and what does it mean to have a family? These are the basic ABCs and you two are going to have to start somewhere. If you two want to stay together, you're going to have to begin talking together, working together . . .

H (husband): It's about time.

W (wife): Yeah, and instead of doing it he rather competes with our child and accuses me of considering our child as more important than him . . .

Th: I don't know how that makes you feel that you accuse your wife of such things. Let's just stop a little, and you too ma'am. Let's withhold all this indignation and say something else, something about yourselves. It's a risk. It's easier to accuse each other of what you do to each other than to say: I feel utterly betrayed.

H: It probably means that you have to come clear on things with yourself and tell yourself that you're worth enough not to do things like that.

W: Yeah, but the way things are with the two of us is that you say: I've cleared things up with myself. Now you do it too. Have you?

H: Well, have you after all your relationships?

W: Look who's asking if I've cleared things up with myself! Have you?

At this point the therapist interrupts the couple's open conflict and sets the basic boundaries. The husband resists and the couple reinitiates throwing accusations at each other. This enraged the therapist and as she struggled with the rage that could not be verbalized, she became desperate and reluctant to proceed with the therapy feeling that it is humiliating to have to fix the boundaries again.

Th: Either there is an affair or there is not. But let's just for today establish whether there will be another or not. Will there be another affair or not? Have you two decided to stop having affairs?

W: It's been a year already and I haven't gone back to having an affair. And now I'm supposed to just believe what he says, when I know that he went straight back to his?

Th: Have you two decided to stop having affairs for your own selves? Because neither of you deserves it?

H: Like I said, I'm clear on these things a long time already.

Some weeks later, in the middle of the therapeutic process the wife gradually begins to accept responsibility and consequently come to terms with her shame. As there seems to be no resolution at the interpersonal level, and the source of the shame and rejection cannot be delimited, the therapist begins searching for the intergenerational roots of these affects. From where is the disbelief that you are worthy of a relationship? From where is the deep-seated rejection? The therapist addresses the disgust and explores rejection.

Th: And then you let yourself do it and the men reject you?

W: Yes. Just like my husband.

Th: Where does that come from?

W: I don't know.

Th: What were things like in your childhood home? Who are the men in your family, in your world?

W: Well, there's my dad, who . . . I guess he's not much of a man, more a drunk, just not the kind that makes a racket. And my parents also had my brother. There's 8 years between the two of us. And because it was only a few months after he was born that they both had to be at work and because my mom didn't really get along too well with her mother-in-law, my mom gave my brother to her mom to take care of while she went to work. And then 8 years later I was born.

Th: Did your brother grow up with your grandmother?

W: Yeah he grew up there. He was there for those 8 years. And then after those 8 years, when I was born, my grandmother, the mother-in-law, my dad's mother, I guess she was a bit evil, she threatened to do something to me, as a baby, I don't know what. But luckily my parents got some apartment and that's when we moved into the apartment we're now in.

Th: Your brother too?

W: It's sort of a taboo to talk about it in our house, I don't know why . . . It would have been logical that my parents take their child with them, but because he was already 8 years old and had started going to school there, it was decided that he finish it there too. So every weekend we would go to my grandmother's for visits and to help . . . He just simply never came home to live with us.

Th: Did he want to live with you?

W: I don't know.

Th: And you always lived with your parents . . . And there must have been a strong feeling of guilt.

W: Yes.

Th: Do you feel it?

W: Yes, of course I feel it. Because . . . We never were like a brother and sister. He liked me, but there was always this coldness felt between myself and him.

Th: How much did you miss him?

W: I don't know if I missed him. I just got used to living that way.

This last sentence describes very accurately the way the wife now misses and pines for her husband, although she cannot speak of it. And she feels guilty whenever she pines to have him near her. To redeem herself of the guilt she feels, she lets him take advantage of her. At this point of the therapy the therapist felt the deep buried longing for secure connection and also the pain and terror covering it. For the first time in the therapeutic process an atmosphere of sadness seated the therapeutic room and the dynamic of the therapy became more vulnerable and genuine.

Th: There is a deep wound here . . . a rejection . . . a fear was probably felt whenever you, sir, just left. And it was most likely experienced by your wife as deeply stressful whenever you left. But I don't know how much the two of you could talk about it.

H: Well, I guess she probably didn't feel me that way. She probably missed having me let her know . . . I never did really give much merit at home. I never praised her . . . I mean; I did praise her, but probably a lot more to my friends and colleagues . . .

Th: So, it was more that you boasted with her than praised her directly.

H: That's right, not her directly.

Th: And she felt totally disregarded.

H: Yes, of course.

Th: But that's not what you intended. What were the dynamics like between the two of you? Who were the women in your world? How does your wife fit in to your world of women? What do the women in your world do? What were things like in your childhood home? You have a mother . . . any sisters?

H: My mother was a housewife. There's my brother from the first marriage. And my sister was born first in this marriage. And then me; I was the third child, the second from this marriage.

Th: Are you the last?

H: No. And then there's a younger daughter, 3 years younger. My mother used to work, but then she quit working and stayed home. My mother has incredibly positive attitude and she's so loving; well, as much as she can afford to be. My dad's an alcoholic, a dictator who maltreated everyone around him.

Th: Was he violent?

H: Incredibly violent, and aggressive . . .

Th: Did you have to run very often?

H: Yeah, quite a bit.

Th: So where did you run to?

H: Well, out of the house as long as that was possible. Otherwise, into our room, into bed, under the bed . . .

Th: Did he reach you there?

H: Yeah, he got us there too.

Th: You were caught like a mouse in a mouse trap.

H: Yeah . . . I remember when we used to come home from school; we'd throw off our school bags and then run right outside. Firstly, because we had to avoid our dad. If he was home, he was asleep, because he was drunk. And then when he woke up in the evening, he'd go on drinking. There was never a good time to be home. When he was sleeping we had to be quiet, and even when he was awake, because he'd be drinking and we were just bothersome.

That's why it was nice to be outside. We played a lot and we had our friends . . .

Th [*begins to sense the pain and tries to verbalize it*]: So it was good among friends, but not so good at home.

H: Yes. There were always friends, and we played a lot, whether it was winter or summer.

Th: Is that the distress then? When children were born in your house, you had to leave home when it was time for you to be a father. So you chose to leave.

As the husband's need to leave his loved ones and test in this way whether he still belongs to them or not comes to the fore, the therapist now addresses the basic need to trust and to be trusted.

Th: Tell us why that's so hard for you to believe.

H: I don't know. I don't know why.

Th: What's different now, that allows you to believe? What has changed that your wife can now believe?

H: I think she can confirm that there was a time when I was the way that she wanted me to be.

Th: That means that you were diligently at home?

H: Yes.

Th: And that you didn't go out? What did you feel? What did your wife feel?

H: I think that she felt everything she could have felt from me. There was nothing more I could have given her. How she felt though wasn't dependent on me, rather on her.

Th: Ma'am, do you believe him?

W: Yes, I began to believe him, but then when he said that in between he hooked up with a . . . I told him a couple of times that I can't live with an empty shell.

This is where the attachment injury opens up all the way to the end. The wife becomes ill after this session (later she had a surgery). The husband attends the final session alone and in addressing the affairs comes in touch with his shame and sadness. The illness of his wife obviously helped to awaken in him the danger of losing her permanently.

Th: What is different now so that there won't be any more affairs? Do you still doubt?

H: I can almost definitely say that as far as I'm concerned, it won't happen again. Because when I look back on it now, it seems that with these acts of mine and my way of thinking, I also caused something very terrible.

- Th: What do you feel when you speak of these exploits? How do you feel talking about it at all?
- H: Shame right now. I don't know. I'm trying to somehow understand it, I don't know . . .
- Th: What did you feel when you stopped? It had to be something incredibly powerful.
- H: It just seemed like it didn't matter to me whether I told her or not. Well, we didn't know how to talk to each other anyway, or at least that's what it seemed like to me. She said things to me, about what she didn't approve of or like, but I guess I didn't know how to listen or to hear her. I didn't know how to find the right relationship with her. I probably isolated myself too much. Whatever she did was just never worth enough. And it was the same for me too: I never really got what I wanted from her, the attention and the tenderness. I don't know . . . I guess that's why eventually it just boiled down to: Why should I pay any heed to the limits if she obviously doesn't care what I'm like anyway?
- Th: So why did you isolate yourself?
- H: Well, precisely because I never got a sense of confirmation or approval. Maybe I was looking elsewhere for it, thinking that at least elsewhere I know how to seduce some other . . .
- Th: What did you then feel when you finally decided that it just can't go on any longer like this? What was it that you felt when you acknowledged this and said "enough"? What was there? Because it was what you felt there that brought you back. That's why you are here today. And when you figure out what it was, you will finally know that nothing will ever make you go back.
- H: Oh yeah, well, that was when I found out about her affair.
- Th: What did you feel then? What was there?
- H: When she told me, everything just begin tumbling down.
- Th: What begins tumbling down?
- H: My whole life.
- Th: And what did that feel like?
- H: It felt like . . . Hello! What were we even living? How could we even live like that? And I didn't only feel shame, but I felt utterly despondent, so low-down . . . How could I . . .
- Th: Truly disgusting.
- H: Disgusting too, yes, it was also disgust. I said to myself: This just can't be how could we . . .
- Th: How could you go so far down, all the way to the bottom . . . ?
- H: Yes. It's horrifying. And to top it all off, we were extremely rude to each other and we said things to each other, things that should never even be spoken.
- Th: And those words were just one more thing that disunited.
- H: Of course. Why did we have to live a lie for so many years?

In the final session the husband recognizes and acknowledges his pain. At this point the process of remodeling the fundamental feelings of rejection and abandonment can begin. As soon as the access to the fundamental emotions of rejection (sadness and shame) was established, the dynamics between the couple changed. No longer was there any room for “unnoticed” affairs. Nonetheless, there’s a need for more therapeutic work with this couple. In the therapy described previously only the first phase of resolving an affair was accomplished in which the depth and painfulness of the betrayal became felt and verbalized.

CONCLUSION

We could say that the first drop of empathy toward the deep pain buried under the detached relationship brought the relationship back to the point where it began to freeze. As we have said before, when more intimacy and closeness would cause more vulnerability than partners could safely afford, the pattern of dysfunctional relating keeps repeating itself. To acquire a more secure relationship, the partners would need to start building the trust anew. For the therapist the turning point happened when she became angry with the couple, feeling that again and again she could address the same issue of basic boundaries and responsibility and not get anywhere. When she found secure ground in the relationship with the supervisor, she could persevere and found new empathy toward the couple. We could end with the following phrase: Affects would not be regulated until they could be felt and acknowledged in a relationship that is sincere and mutually vulnerable as in the supervisory relationship.

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