The Complex Case of Marital Infidelity: An Explanatory Model of Contributory Processes to Facilitate Psychotherapy

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Marital infidelity is one of the most difficult problems to treat in psychotherapy. Although this topic has received theoretical, empirical, and clinical attention, an explanatory model of infidelity’s (EMI) contributors that considers universal, lifelong involuntary, and volitional processes, has not been examined. In this model, we recognize how early appearing phenomena, such as habituation/dishabituation, perception, quality of attachment, deficits in executive functions and empathy, and short-term mating strategies may contribute to this risk. We link the selected early processes to problems associated with marital infidelity, such as boredom, perception of opportunities, unmet emotional needs, impulsivity, deficits in empathic responding, and habitual casual sex. We examine relevant supporting evidence, and end by recommending that clinicians consider these universal, lifelong processes in the treatment of infidelity.

Clinicians often witness the intense emotions that marital infidelity provokes, in stark contrast to the often weak justifications for having an affair. Rationalizations such as, “it just happened” (Pittman, 1989) are used repeatedly. It seems that although extra-marital involvement is ultimately volitional, involuntary processes may increase its risk. Due to the uniqueness and diversity of problems faced by these couples, an explanatory model of infidelity’s (EMI) contributors that considers universal, lifelong processes is proposed, to
increase our insight about proclivities toward and functions of extra-marital affairs in heterosexual couples (see Martell & Prince, 2005, for information on same-sex couples).

AN EXPLANATORY MODEL OF INFIDELITY (EMI)

As noted, the risk for infidelity may be exacerbated by the activation of volitional and involuntary processes. In this model, behaviors that remain beneath awareness are considered related to implicit memory, and those that can be recalled and consciously controlled, akin to explicit memory. The importance of developmental processes that begin in infancy, continue in early childhood, and culminate in adolescent sexual experimentation is stressed, as these early appearing phenomena have the potential to exert durable effects on later development.

Implicit memory is present even before birth, when there is no recollection of events or of the self over time, and it continues to have life-long influence on perceptions and feelings about internal and external events. At about 2 to 3 years of age, due to maturation of the brain, explicit memory and a sense of self (consciousness) appear, facilitating recall of autobiographical narratives and events (Siegel, 1999). At the onset of puberty, sexual experimentation may impact later mating strategies (Schmitt, 2005). It is during these early years that normative, but also idiosyncratic, cognitive, and affective responses develop, permeating development, including the potential for extra-marital involvement. The selection of early appearing implicit (habituation/dishabituation, perception, and attachment) and explicit processes (cognitive executive functions, empathy, and short-term mating strategies) was based on similarities between these constructs and problems observed in couples presenting with infidelity, such as boredom (Reissman, Aron, & Bergen, 1993), opportunity (Atkins, Baucom, & Jacobson, 2001), unmet emotional needs (Allen & Baucom, 2004), impulsivity (Atkins, Yi, Baucom, & Christensen, 2005; Shackelford, Besser, & Goetz, 2008), deficits in empathic responding (Bird, Butler, & Fife, 2007), and experimentation with casual sex (Grello, Welsh, & Harper, 2006). The components of the model are reviewed first, followed by supporting evidence. Based on the EMI’s dimensions, the review ends with assessment and therapeutic recommendations for couples with infidelity problems.

IMPLICIT PROCESSES

Habituation/Dishabituation

One of the earliest appearing infant cognitive developments is attention. Researchers (see Lamb, Bornstein & Teti, 2002) often observe how infants
attend to a stimulus that remains available, eventually no longer perceiving it as novel or new. This process is called habituation, when infants appear to create a neural model or internal representation that can later be used as a basis for comparisons. Stimuli discrepant from the habituated neural model usually trigger enhanced responses, or dishabituation. A stimulus perceived as novel, requires more cognitive processing than a familiar one (Sirois & Mareschal, 2004). Over the course of habituation, there is a shift from a familiarity preference to a novelty preference (Fantz, 1964), albeit relatively briefly, as novelty responses disappear after repeated testing. Habituation is considered a basic form of learning that has been observed in a broad range of species (Sirois & Mareschal, 2004). Moreover, habituation/dishabituation patterns continue to be observed in adulthood (see, for example, McDowd & Oseas-Kreger, 1991), decreasing the processing of extraneous information, but only when such information is “fixed and predictable” (Langley, Overmier, Knopman, & Prod’Homme, 1998, p. 354).

**Boredom**

Boredom, which is similar to habituation, often has been cited as a reason for infidelity, as extensive evidence indicates that the spouse’s novelty erodes after a period of cohabitation or marriage (Gigy & Kelly, 1992; Kamp Dush, Taylor, & Kroeger, 2008; Reissman et al., 1993). In addition, relationship length has consistently emerged as a robust predictor of extra-marital involvement (see Fair, 1978; Atkins et al., 2001). Recent data from the Study of Marital Instability over the Life Course (N = 1,998) (Kamp et al., 2008) indicate that virtually all married couples reported a decline in marital satisfaction over time, albeit smaller in couples that express high- (41%) or moderate- (38%), instead of low- (21%) marital satisfaction.

**Perception**

The second emergent cognitive process discussed is perception. As visual acuity improves and perception becomes accurate, infants become more and more efficient at perceiving the environment and opportunities for action. According to Gibson (1991), perceptual improvement allows infants to learn and differentiate the characteristics, attributes, and gradations of constant environmental stimulation. This developmental gain allows them to extract information from the environment and consider its affordances. Affordances are what an environment offers or provides for an organism; they are opportunities for action. The ability to detect environmental “affordances” is crucial for exploration and learning. Perceptual competence optimizes in adulthood, allowing for quick assessment of situations that may
afford a reward or goal satisfaction, including opportunities for emotional or sexual gratification, which may be in the form of extra-marital involvement.

**Opportunity**

In *Breakdown of Will* (see Ainslie, 2005), a work based on forty years of empirical research and theoretical deductions, Ainslie proposed that most individuals have conflicting desires and they tend to choose alternatives that seem most salient in a particular context at a specific moment in time. Ainslie’s (2005) work presents evidence that both humans and nonhuman animals temporarily prefer options that pay off quickly rather than richer but slower paying alternatives. Infidelity studies show that being apart from the partner facilitates opportunities for extra-marital involvement, especially in the workplace (Atkins et al., 2001; Treas & Giesen, 2000).

**Attachment and Exploration**

The third and final early-appearing implicit process discussed is attachment. *Attachment*, defined as proximity to the caretaker, maximizes the survival of the child in terms of access to food, learning opportunities, socialization, and protection from predators. Bowlby (1988) proposed that while attachment is a system that provides young children with protection and security, the *exploratory* system allows for discovery of the environment. According to Ainsworth (1972), “the dynamic equilibrium between these two behavioral systems is even more significant for development (and for survival) than either in ‘isolation’” (p.118). The attachment-exploration systems continue to be observed in adulthood (Bowlby, 1988), and their equilibrium seems to define a secure attachment style. In adulthood, attachment quality has been investigated in terms of internal working models (Bartholomew & Horowitz, 1991) that influence existing interpersonal relationships. Comparably, exploration has been studied as “self expansion” or a “fundamental motivation to expand potential efficacy (the resources, perspectives, and identities available to achieve one’s goals)” (Aron, Steele, Kashdan, & Perez, 2006, p. 388). Self-expansion is achieved in close relationships, as the attributes of the partner can become incorporated into the self (Aron et al., 2006).

**Unmet emotional needs**

Clinicians often find that the affair’s purpose is to alleviate, often unsuccessfully, unmet intimacy needs (Brown, 2007) and a sense of growing apart (Gigy & Kelly, 1992). Insecurely attached adults are seemingly in a state of disequilibrium, showing combinations of anxiety over abandonment
and avoidance of closeness, and often become extra-maritally involved (see Allen & Baucom, 2004; Brennan & Shaver, 1995). Numerous studies in the United States and abroad (see Schmitt, 2005) have found that insecurely attached individuals tend to engage in short-term mating strategies. Conversely, couples who achieve self-expansion through their relationship, augment not only their perspectives and resources, but also their identities, resulting in decreased susceptibility for infidelity (Lewandowski & Ackerman, 2006).

**EXPLICIT PROCESSES**

**Cognitive Executive Functions**

The first early-appearing explicit process reviewed is cognitive executive function. The ability to self-regulate and engage in conscious decision-making depends on neurological developments, such as maturation of the brain, that start prenatally and continue into adulthood. Frontal cortical regions of the brain develop during the first few years of life, mediating consciousness and continuing to undergo rapid experience-dependent development until adulthood (Siegel, 1999). As a result of such maturation of the brain, cognitive executive functions allow for engagement in “independent, purposive, and goal-directed behavior” (Busch et al., 2005, p. 171). One cognitive executive function of interest in our study of infidelity is behavioral inhibition or the ability to deter or postpone an action (Barkley, 1997).

Barkley (1997) defines behavioral inhibition as the capacity to: (a) suppress a prepotent response, (b) delay a continuing response, and (c) defend a delay period from intrusions and competing responses. Individuals with behavior inhibition deficits have problems regulating affect, motivation, and arousal (Barkley, 1997). Deficits in behavioral inhibition can increase the probability of marital infidelity.

**Impulsivity.** Men with marital problems have reported that the disinhibiting effects of problematic drug or alcohol use have led them to have extra-marital affairs (Atkins et al., 2005). Similarly, spouses with personality styles high in impulsivity and inability to delay gratification (see Shackelford et al., 2008) have been found to be at risk for infidelity. Specifically, impulsivity problems and inability to delay gratification are present in personality styles low in conscientiousness and agreeableness, which are, in turn, strong predictors of extra-marital involvement (Shackelford et al., 2008).

**Empathy.** The second explicit early appearing affective process reviewed is empathy. Empathy emerges in toddlerhood, when children begin to appreciate that other people are different, though it is difficult for toddlers to understand the mental states of others. By 2 to 3 years, advances in the development of the self facilitate understanding of others’ perspectives
and allow children to sympathize with others (Aksan & Kochanska, 2005). Empathy continues to improve in older childhood and adolescence, where cognitive refinement is reached, as evidenced by the emergence of abstract thinking and perspective taking. The development of empathy requires that children be exposed to empathic models that engage in affectionate parenting practices and emphasize the feelings of others (Barnett, King, Howard, & Dino, 1980). The development of empathy may also depend on exposure to at least a few distressing childhood experiences, as having these experiences has been found to foster empathic responding in adulthood (Barnett & McCoy, 2001).

**Deficits in Empathic Responding.** Empathic responding has been defined as perspective-taking ability (the capacity to cognitively understand the psychological perspective of another), or empathetic concern (the capacity to feel compassion and concern for others’ adversity) (Busby & Gardner, 2008). Individuals with these deficits often perceive their committed relationships as unsatisfactory over time (Busby & Gardner, 2008), increasing their marital maladjustment, and their risk for infidelity (Shackelford et al., 2008). Furthermore, individuals with personality styles that show low concern for others (Barta & Kiene, 2005) frequently become extra-maritally involved.

**Short-term Mating Strategies.** The last explicit construct reviewed in EMI is short-term mating. At the onset of puberty, adolescent transition to adulthood often entails a period of *moratorium* (Erikson, 1963) or exploration, as part of a quest for a solidified identity. This period of experimentation encompasses all areas of adolescent development, including their emergent sexuality. Short-term mating is common during this period (Paul, McManus, & Hayes, 2000). Sexual gender differences emerge, as evolutionary findings show that males of all cultures, and especially those high in mate value, pursue short-term mating strategies more than females. However, in highly stressful cultures, both males and females engage in short-term mating at a similar rate. This finding has been robustly linked to insecure attachments that arise from unstable parenting (see Schmitt, 2005).

**Casual Sex.** The Centers for Disease Control and Prevention (CDC, 2008) report that, in 2007, 47.8% of U.S. high school students acknowledged to having had sexual intercourse. The college culture facilitates casual sex, or “a hookup,” defined as “a sexual encounter, usually lasting only one night, between two people who are strangers or brief acquaintances” (Paul, McManus, & Hayes, 2000, p. 76). The longer adolescents have engaged in sexual behaviors, the more likely they are to have casual sex (Grello et al., 2006), resulting in that behavior becoming a part of a normative process as they enter adulthood. Indeed, approximately 70–85% of sexually active adolescents (12–21 years) admit to having had casual sex in the past year (see Grello et al., 2006).
Illustration of the EMI

The following scenario illustrates the effects of these processes on the risk for marital infidelity. Habituation settles in after several years of marriage or cohabitation. If there are opportunities to meet other people, such as in the work place, dishabituation may ensue, manifesting as a renewed interest in a novel person. This interest may quickly wane over time in securely attached individuals. In contrast, when internal working models of attachment are insecure, unmet emotional needs may increase curiosity about the new person. Opportunities to act upon these feelings may be embraced almost automatically, such as flirting in ordinary conversation or unwittingly spending more time with an attractive co-worker. Additional problems in behavioral inhibition (having an impulsive personality style), lack of empathy for the spouse/partner, and a history of habitual casual sex, exacerbate this risk. In this case, all the implicit and explicit processes reviewed were described. However, couples with problems of infidelity present varied and sometimes unique issues; the effects of one or different combinations of EMI factors may be observed. In spite of the need for individualized treatment, a careful assessment of these processes will provide clinicians with a broader perspective about the couple’s problems and an additional repertoire of treatment components.

CONCLUSIONS AND PRACTICE RECOMMENDATIONS

In couple’s therapy, understanding the reviewed concepts is useful in facilitating healing and forgiveness, as well as helping to decrease the probability of a repeat affair. This approach would provide education and understanding to help the betrayed partner to preserve self-esteem, as the affair is more likely to be understood as the result of a contribution of naturally occurring processes, personal characteristics of the offender, and high-risk contexts. This method also may attenuate guilt in the offender, providing a sense of understanding and control, allowing the couple to make beneficial changes, facilitating hope, forgiveness, and reconstruction. In general, it is recommended that therapists first thoroughly assess each partner. This evaluation would include an assessment of the couples’ functioning, a careful examination of the partners’ attachment and personality styles, sexual history, and any pre-existing conditions, such as alcohol or substance abuse that may require auxiliary treatments.

Assessment

In addition to their initial clinical interview, we recommend that therapists assess the couples’ functioning with the Dyadic Adjustment Scale (Spanier,
1976), a relatively short instrument (32 items) that measures dyadic consensus, satisfaction, cohesion, and affective expressions. This scale includes items that tap into the couples’ finances, recreation, friends, religion, sex, career decisions, and so on, providing a good overview of their functioning level. Next, the couples’ attachment style can be assessed with the *Adult Attachment Questionnaire* (AAQ; Simpson, 1990), that measures (a) the tendency to avoid or withdraw from closeness and intimacy, and (b) level of anxiety over abandonment. It would also be beneficial to evaluate the couples’ personality profile, with the NEO Five Factor Inventory (NEO FFI; Costa & McCrae, 1992), that captures levels of openness to experience, conscientiousness, extraversion, agreeableness, and neuroticism.

**Application of the EMI in Therapy**

The EMI can be applied as an adjunctive approach to existing treatments for infidelity. The *first phase* of treatment will focus on *psychoeducation* about the most pervasive findings in the literature reviewed, such as a strong trend toward decline in marital satisfaction over time. Educating the couple about habituation and how it may have contributed to extra-marital involvement may be helpful both prospectively and to ameliorate the wounded partner’s pain, as the “other” may not necessarily be better but different, due to a general human tendency to notice differences and respond to novelty. Knowledge of the couple’s specific attachment styles, personality styles, and attitudes toward casual sex, also can help in detecting areas of friction or detachment. In turn, this information can be used proactively to stimulate growth and therapeutic change. It is at this phase that a renewed commitment to the relationship is required, starting with the decision to terminate the affair.

The partner who had the affair may be truly sorry and willing to change. If the decision to terminate the affair is made abruptly, it may have a higher success rate (see, for example, Peters, Hughes, Callas, & Solomon, 2007). However, decisions made under highly affective states sometimes underestimate “preferences and behavioral inclinations” (Loewenstein, 2005, p. S49). If, before the affair, there were unresolved problems in the marital relationship, the decision to re-commit may be made under conditions of uncertainty, which require a subjective, probabilistic assessment that things will work out this time (Kellogg, 2007). Unfortunately, this tentative stance may result in periods of break-ups followed by reconciliations (Tuft, 2000) in the process of ending the affair. Because of the delicate state the marital relationship is in, the treatment proposed requires several phases to target core problems and foster a healthy and enjoyable relationship.

The *second* phase of *treatment* requires a slightly different treatment for each partner. The betrayed partner needs to achieve a delicate balance
between exposure to the traumatic events and self-care, and it is vital that the offending partner becomes supportive during this time. Promoting empathy, warmth, and acceptance, using elements of Relationship Enhancement Therapy (RE; Guerney, 1991) may facilitate conflict resolution and self-change. Because anger may be an inevitable result of infidelity, it is essential to allow it to be safely expressed in therapy, as it can help in the process of forgiveness (Enright, 2001). Suggesting homework assignments from the well researched work, *Forgiveness is a Choice* (Enright, 2001), may facilitate this process. In addition, Behavioral Couples Therapy (BCT) (Jacobson & Margolin, 1979) techniques also are suited to this phase, as this treatment is efficacious in treating couples with moderate to severe problems. Specifically, behavioral exchange, communication, and problem solving techniques, enhanced by relaxation and visualization, can be used at this time.

Once the betrayed partner feels less victimized, the couple enters into a third phase of treatment, in which both partners explore their interactional styles, to improve the overall quality of their relationship. Emotionally Focused Therapy (EFT; Johnson, 1996) is an efficacious treatment valuable in this phase to stabilize the couple’s attachment style. EFT’s techniques target and respect individual needs for personal space and allow for the uncovering of primary emotions (e.g., fear or hurt), which are usually masked by defensive emotions (e.g., anger). The therapist acts as a secure base to be used by the partners in exploring a softer, more vulnerable way of relating, to de-escalate their conflicts. At this stage, it is also beneficial to foster self-expansion, rekindling the couple’s desire to re-acquaint themselves with each other. Therapists can then provide education regarding the benefits of maintaining a sense of freshness and newness in the relationship, making recommendations that would satisfy exploratory urges and desire for excitement and variety, in activities enjoyed with the partner (Gottman, Coan, Carrere, & Swanson, 1998; Reissman et al., 1993). Once the couple shows readiness to move forward, therapists can recommend gradual demonstrations of affection, and they can model and foster frequent, lively and humorous interactions (Gottman et al., 1998).

At the termination/relapse prevention phase, it is crucial to re-visit how the problems started and in which contexts, to analyze antecedents and consequences of infidelity. This approach would help to minimize the probability of their re-occurrence in the future, assisting the couple in becoming mindful of the human tendency to respond to temporary options that pay off quickly, albeit with potentially disastrous consequences. Mindfulness techniques, as in Acceptance and Commitment Therapy (ACT; Hayes, Strosahal, & Wilson, 1999) can be useful in observing without judgment the thoughts, feelings, and situations that conduced to infidelity, while committing to act on behaviors congruent with clear values that preserve the committed relationship. These interventions provide education about universal human tendencies, insight about individual and couple vulnerabilities and deficits,
and the means to change maladaptive behaviors. They provide tools to help prevent a recurrence and bring relief to couples suffering from the painful emotional consequences of infidelity.

REFERENCES


