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Once the early infidelity couples therapy work of attending to the betrayed partner’s devastation has begun, once the betraying partner’s earnest commitment to the long-term love relationship (LTLR) has been affirmed, and once the initial assessment of the LTLR and of the type of infidelity have been accomplished, the work of rebuilding the LTLR’s intimacy structure needs to commence. This work is defined by two major related goals: significantly increasing three intimacies (as outlined in the previous chapter) functioning and reestablishing trust as a given in the LTLR. The accomplishment of these two therapy goals results in the creation of a LTLR that is so strong in its intimacy that it is infidelity proof.

The paths to achieving these two longer-term infidelity therapy goals are intertwined. Reestablishing a high level of trust in the LTLR is enabled by a combination of growth in the three intimacies in the relationship over time as well as by the consistent integrity and trustworthy behavior of the betraying partner displayed over time.

Periodically, mistrust and suspicion will erupt in the betrayed partner. At times frustration in the betraying partner’s continued lack of trust arises. Incidents may need to be reviewed and worked through in therapy. Trust-building guidelines need to be revisited and adjusted, and the importance of the betraying partner’s transparency often needs to be reiterated. The fragile, slow process of rebuilding trust needs to be closely attended to.
by the therapist and repeatedly and openly discussed without hesitation throughout the therapy.

But the principal role of the couples therapists in the midphase of therapy with infidelity couples is to keep them focused on their work to increase their three intimacies functioning, both as individual partners and as a couple.

Every partner and every couple is different, but all partners and couples in this type of therapy need to be challenged to increase their self intimacy (SI) and their conflict intimacy (CI) early in therapy. The Emotional Self Awareness (ESA) exercise and the Initiator and the Inquirer (I-to-I) exercise are the main tools we use to accomplish this.

To help partners develop SI we assign them a conceptually simple exercise, the ESA exercise (Solomon & Teagno, 2006), consisting of three questions to be asked of oneself:

1. What emotion(s) am I feeling right now?
2. What situation or perception is causing me to feel this emotion?
3. What, if anything, can I do about this causal situation to take good care of myself?

We tell clients to perform this exercise two to three times a day, but we tell them not to spend much time on it, 30 seconds to 5 minutes at most, so that it will not become a burdensome task that they will lose motivation to perform. The key is that the individual check in with the self day after day for very short bursts of time. We suggest they share their affective insights with their partners; emotional self-disclosure is one of the most powerful ways to enhance intimacy between couples, and such sharing also can lead to increased self-understanding.

At first, some clients have trouble remembering to do the ESA exercise. In Western society we tend to be so externally focused and so cognition centered that consciously choosing to focus on one’s stream of affect can be quite foreign. So we suggest they use a mnemonic device to help them get in the habit of doing ESA. It is worth noting that continued resistance to doing ESA is a strong sign that the third deal breaker applies to the partner failing to perform this work on self.

Another common problem that male clients in particular have with ESA is they report an inability to answer the first question; they are unsuccessful in achieving awareness of any emotions in the moment, or if they do become aware of affect they have trouble knowing what emotion(s) it is. We tell them that it is just like going to the gym and building up their strength, akin to doing low weight (the very short amount of time they are to spend on ESA), high reps (multiple times a day, every day) body-building work. The key is to persevere; if they do not give up, both their level of emotional awareness and their emotional discriminative abilities will get stronger, guaranteed.
When practicing ESA many people will often stop at familiar feelings like anger or anxiety. They think that these are the only feelings they have. We challenge them to look beneath the more familiar or “comfortable feelings” for more vulnerable feelings like fear, hurt, and so forth.

We tell clients that if they engage in ESA work daily for the next couple of months, their SI will be dramatically increased and they and their relationship will be transformed. Indeed, we find this simple exercise to be the single most powerful tool we give clients in improving their individual emotional well-being. And that of course impacts their LTLR, especially since the extent they are capable of being intimate with their partner is limited by their intimacy with self: how can one partner “know” the other if he or she does not know him- or herself?

One of the empowering effects of increasing SI is the heightened ability it affords each partner to be able to self-comfort. Self-comfort is defined as the individual’s ability to bring ease to oneself when experiencing tension, fear, or perceived emotional threats. It enables LTLR partners to decrease their emotional reactivity so that they can continue to think, decide, and respond rather than reflexively react. The therapist needs to encourage infidelity couples therapy partners to practice self-comfort, particularly since in the face of the devastating pain of betrayal emotional regression repeatedly occurs and limits the partners’ ability to achieve or maintain CI while increasing the chances of destructive, hurtful conflict. Self-comforting skills include doing the ESA exercise, sharing one's experience with the partner, reminding oneself “It’s not about me,” and taking a time out.

Although most SI work is done outside the office, most of the Relationship Institute (TRI) infidelity couples therapy sessions consist at least partially of I-to-I exercise time so as to build CI in the couple. This work is the cornerstone of therapy success with these couples. When, after a period of weeks or a few months, the couple attains a fair degree of facility at the I-to-I exercise, it is important to have them practice it at home between sessions. That is the point when we often see couples really start to progress rapidly in rebuilding their LTLR. Taking the I-to-I home, bringing it into their day-to-day lives, is transformative both in creating greater intimacy and in catalyzing growth in trust.

At the beginning of infidelity couples therapy the therapist helps the couple in their struggle to speak constructively to each other about the infidelity. This is about catharsis, trust, and insight. As the therapy progresses the focus needs to move from the infidelity relationship to the LTLR. The weaknesses of the LTLR are exposed and the tools to shore up those weaknesses need to be placed in the couple’s hands, session after session. Only when their facility at wielding the tools of SI and CI is greatly enhanced does their LTLR have a chance of flourishing.
A sure sign that this is happening is when affectional feelings begin to reemerge. As discussed earlier, when the dark side of a couple’s passion (CI) begins to be openly wrestled with and worked through, the light side of their passion (affection intimacy [AI]) will begin to thrive. So when the infidelity couple has made substantial progress in growing their SI and CI, the therapist considers starting to work with them on their AI.

Helping them to assess the AI structure of their relationship is useful here. The therapist can have each partner rate both him- or herself and his or her partner in the four types of AI. Having them share their ratings with each other and talk about them can be very powerful. Often partners are completely unaware of which of the four types of AI is most meaningful to their partner, that most makes them each feel loved and important. So helping them to draw this type of AI map of their LTLR can have a great impact on helping them to learn where they need to make extra AI efforts. Assigning AI homework can be useful in this process.

Summary of General Treatment Guidelines

- Work assiduously to avoid any appearance of favoritism for either partner.
- Establish early and clearly that the partner who engaged in infidelity is alone responsible for it.
- Focus the work of therapy on the couples’ conflict process, not on conflict resolution.
- Avoid prematurely focusing on rekindling AI.
- The most effective infidelity couples therapists have achieved LTLR stage three experience in their own lives and have worked through their own infidelity experiences and issues.
- The two major tasks of infidelity couples therapy are assisting the couple heal from the shattering effects of the infidelity and helping them build a healthy and stable intimacy structure in their LTLR.
- There are three major infidelity couples therapy jobs confronting the therapist at the outset of therapy:
  1. Dealing with the betrayed partner’s devastation,
  2. Determining the betraying partner’s earnestness,
  3. Assessment of the LTLR and of the infidelity.
- The longer-term work of helping the couple rebuild their LTLR’s intimacy structure so as to achieve LTLR health and minimize the chances of a reoccurrence of infidelity is defined by two related goals:
  1. Significantly increasing three intimacies functioning,
  2. Reestablishing trust as a given in the LTLR.
Specific Treatment Guidelines for Each Infidelity Type

This section will provide an overview of the general treatment guidelines we use in working with all infidelity couples on rebuilding the intimacy structure of their LTLR after an infidelity. But how we work with these couples is greatly impacted by which one of the three infidelities the betraying partner engaged in.

Infidelity of Fear

Of the three types of infidelity, we have found that successful treatment of infidelities of fear couples depends on change from the betrayed partner the least. Although the betrayed partner has a role in helping to create the changes necessary so that the partner never again commits an infidelity of fear, that change is much more about the betraying partner than it is about the relationship with his or her partner.

The work of the betraying partner is primarily to acknowledge the deep fear that is driving him or her, whichever of the three fears (commitment, intimacy, worthiness) it is. Then that partner has to work it through, deal with it, unmask the false beliefs about him- or herself and about love relationships that it is based on, and replace these with healthier beliefs. The betraying partner’s fear will never completely disappear, but by confronting this fear and wrestling with it, he or she will become stronger and the fear will become weaker. If the betraying partner has enough courage to do this work, the fear will lose its strength to control him or her; it will no longer have the power to drive the person to betray.

As the betraying partner works on him- or herself, he or she needs to include the partner in the process by being self intimate with both him- or herself and his or her partner. The betraying partner needs to talk with his or her partner about this fear. This practice pushes at both SI and CI as it raises the tension and challenges both partners to differentiate.

The therapist’s role in this process is to provide a “holding frame” for the couples work. As you guide the betraying partner to confront his or her fears and discuss them, you also support him or her. You will simultaneously support the betrayed partner to hear his or her partner’s reality without getting defensive. This partner will need to be able to self-comfort just as the other partner will need to do the same as his or her level of fear is activated. The betraying partner will be expecting to be criticized, attacked, or humiliated.

Infidelity of Fear Case Example  This first case presentation exemplifies the type of work the TRI therapist conducts during the first session of infidelity couples therapy as well as some of the dynamics evidenced by an infidelity of fear couple. Transcribed dialogue alternates with
bracketed comments, which illustrate the assessment methods being utilized, explicate the therapist’s thoughts, and gives reactions to material presented. Some sections of dialogue are summarized for the sake of brevity.

Joan and Suzy have been together 10 years and have been registered domestic partners for 9 of those years. The therapist had seen Joan individually for several sessions after the couple had worked with a different couples therapist for three sessions. Joan came to therapy after Suzy cut off their relationship and saw this therapist’s colleague briefly for individual therapy as she tried to decide how to deal with the betrayal. Neither felt the previous couples therapy was helpful in clarifying their decisions or dilemmas.

**Therapist**: Suzy, as you know I have met with Joan for three months so I would like to start with you and ask you what is the most pressing thing for you to learn today in this meeting?

**Suzy**: You know about Joan's betrayal with our mutual friend. I am devastated and have decided that the relationship is over. I believe that she has always lied to me and continues to lie. But I wanted to come in because Joan keeps asking me to give us another chance and promises that she wants to change. I have read your book and if I decide to work on the relationship or not, I want to learn to take better care of myself and figure out how we got to this place. I thought we had a loving, strong and committed relationship! I don’t understand how this happened!

**T**: You're feeling the devastation of the betrayal and while a part of you feels that Joan and the relationship won’t change, another part of you wants to understand how you could have felt so strong and good in the relationship while Joan was feeling differently and you did not sense this. What you would like to learn is how you two got to this place and how you did not see it as it happened. Is that right?

**S**: Yes. I am confused, hurt, untrusting, and devastated.

**T**: And, for good reasons; not only have you been betrayed by the person you have loved and created a life with for 10 years, but it seems your instincts did not help you out?

[Therapist normalizes client's deep hurt and confusion.]

**S**: I guess so or maybe I did not pay enough attention until too late.

**T**: So another part of you also wonders if your instincts might have worked, but you did not listen? You’d like to learn how to better hone your instincts?

[Suzy’s ambivalence is normal for the betrayed partner. She wants to protect herself by leaving the relationship but her investment and love]
for Joan still exists, so that part of her wants to explore the possibility of the relationship continuing. Conflict avoidance is likely as well as low SI and CI. Note that she is focused on what she did not see or intuit, but has not yet noted her partner’s role in withholding the expression of her feelings. Possible dynamic is that Suzy avoids Joan’s feelings, becoming a “lie invitee” (Bader, Pearson, & Schwartz, 2000). Low CI]

S: Maybe. I thought that our loss of sexuality was normal; that all couples lose this after 10 years and we’re both going through menopause. I thought Joan and I saw this the same way. [turning to Joan] When I asked you if it was a problem, you said it wasn’t. You would still tell me you loved me. Why?

J: I do still love you. I’m sorry. But things were not always good between us. We both knew that.

[Therapist notes that Joan has not offered Suzy comfort or taken ownership for her part in the hurt. While this is not unusual when the betrayal is being spoken of it may indicate Joan’s limited ability to take responsibility, and a limited ability to be empathetic.]

T: [Redirects Joan to self-disclose and “tests” her SI and capacity for CI with her partner.] Joan describe to Suzy when your loving feelings started to change and what you were feeling that contributed to these changes.

J: I felt like my opinions were dismissed over big things. When I disagreed with your reasoning I felt you did not pay attention. I did not like what became priorities in our life and that kept happening. I felt alone and empty.

[Joan is fairly vague about her emotions, indicative of low SI as she places more weight on Suzy’s actions that her own.]

T: Suzy, would you tell Joan what you heard her say; just summarize?

[Suzy does and then Therapist asks her what she is curious about that keeps the focus on Joan’s experience. Therapist is doing early indirect teaching of the I-to-I to assess clients’ abilities to assume each role and to assess for each partner’s struggle with the roles, giving an indication of their level of symbiotic vs. differentiated functioning.]

S: Joan, how long did you feel dismissed and what did you do when you felt that way?

J: I have felt that way for the past 6 years. I tried to speak up and get you to listen, but when you did what you wanted anyway, I just went along with things because I hate to argue.
T: So would it be fair to say that when you felt dismissed you had other feelings that grew and became stronger over time but you did not voice them to Suzy?

J: Yes.

S: Why didn’t you tell me? I want to know how you feel! I’d rather fight over those things than this: an affair! Look what has happened! I don’t know if I can ever trust you again and why should I?

[Long pause. Therapist lets the tension sit in the room. Suzy is clearly angry, hurt, and desperate and indirectly asking for succor and some explanation. Joan is clearly uncomfortable, and does not respond to her partner’s request. Therapist waits.]

J: Maybe we can’t fix this. [Conflict avoidant response, attempting to get Suzy to back off.]

S: Maybe we can’t.

[Long pause]

T: Suzy, you stated that what you want from this meeting is to stand up for yourself and know how you and Joan got to this place of possibly ending your relationship over an infidelity. What have you learned about yourself so far? [Therapist wants to return to test Suzy’s commitment to self-evaluation and sticking to her stated goals. Is she more symbiotic with Joan that she recognizes?]

S: I have learned that I am really hurt and angry. I don’t really want to listen to her reasons for the affair. Is that wrong? [Client has heard and acknowledged her feelings, indicating some SI and ownership for how her reaction affects her partner.]

T: Joan, what are your thoughts about your partner’s question? [Therapist is testing to see if Joan can or wants to soothe her partner, to test her empathic capacity, get a sense of whether she can take responsibility for the pain inflicted and see if Joan can assume a more self-defined vs. reactive position with Suzy.]

J: I can understand that you don’t want to hear my complaints about our relationship. I did not tell you what was going on for me. I should have, but when you get mad at me I stop talking. I am sorry that I have hurt you, but there are things about the relationship that I did not like.

[Joan’s capacity for ownership appears to be limited; possible presence of the third deal breaker. Her level of SI and CI are also compromised by her fear. She has difficulty making space for her partner’s feelings by suspending her own.]
T: I hear the pain and discomfort you have both been experiencing and especially Suzy’s pain at learning about the infidelity. Joan it sounds like you’re caught between wanting to hear the pain you’ve caused Suzy and wanting to talk with her about the uncomfortable feelings you have had in the relationship over the past 6 years. And, for you Suzy, you want to talk with Joan about your pain, yet you are not prepared to hear about her feelings yet. I imagine that this dilemma reflects some of what you two have struggled with over the years, each wanting to be heard, but not knowing how to have the conversation without an argument or resentment. Is that accurate?

[Both nod yes.]

T: What I can offer each of you is a safe place to discuss Suzy’s intense pain over your infidelity, Joan, and a way to hear each other’s feelings about the relationship now and in the past. I will teach you both how to deal with your differences, tension, and pain successfully so that you can each learn more about yourself and your partner. If you are both willing to commit to working in therapy for 3 months to do the hard work that it takes to deal with the deep hurt, the real anger, and the fears that are dominating your relationship right now and that actually have been percolating for a number of years, by the end of 12 weeks you will both have a clearer sense of what you are personally capable of regarding forgiving the other, taking responsibility for your own part in the difficulties, and then determining if you want to continue to invest time, love, and growth to reconstructing this relationship. Does that interest you?

[Therapist introduces to clients the time frame and contract for the therapy work. Therapist is not shrinking from labeling the work difficult and giving a realistic time period that will require stamina and personal work on the part of each partner. Differentiation is underscored by the therapist’s talk of learning more about self rather than reinforcing focusing on the partner’s commitment and effort. Also included is “informed consent” about the fact that after 12 weeks each can be clearer in her thinking and no promise is made that all will be corrected, but that the decision making will continue. This is an example of holding the tension while creating hope and a safe place where new ways of communicating can occur.]

[Both say yes.]

T: I look forward to seeing you both next time. I admire your desire to understand your relationship and the hurts and stuck spots you
have both struggled with. It says a great deal about both of you that you are here, trying to save your relationship, rather than doing the easy thing, which would be to just give up and run away from the pain and the hard work of healing these deep wounds. I appreciate the opportunity to help you both develop the skills that will make you each feel stronger and become more of the partner you each aspire to be. In preparation for that meeting I have some handouts for each of you. They talk about assumptions I make about how relationships change and grow [TRI, Assumptions for Relationship Growth, 2007], what each of you will need to do to prepare for each session [The Couples Institute, How to Get the Most from Couples Therapy, 2007], some immediate homework that helps you each learn how to be more aware of your feelings [TRI, Emotional Self Awareness Exercise handout, 2007] and a questionnaire for each of you about the history of your relationship [TRI, Couples Intake Questionnaire, 2007]. I often include readings and homework as part of therapy; are you both motivated to follow through on assigned homework?

[Therapist establishes that there will be teaching as well as therapy and that the commitment to work on self exists both inside and outside the office. All along, the therapist is measuring each partner’s ability to keep her word to self and her partner. Therapist is also putting responsibility for the sessions and relationship work squarely in the laps of the clients.]

**Developmental Assessment of the Relationship** This couple came out of sweet symbiosis as their differences and tensions over how to spend money and leisure time emerged. Neither woman knew how to discuss and work through these differences successfully. Soured symbiosis appeared early as the couple avoided their differences (conflict avoidant CI style), not knowing how to resolve them in a successful way.

**Three Intimacies Assessment** Both partners struggle with low SI and very limited CI. AI is significantly compromised. They generally have a conflict avoidant style. As Suzy became more frustrated, she viewed Joan as selfish and unreliable. Joan, in turn, viewed Suzy as rigid and demanding. And, in response to Suzy’s expressions of frustration and anger, Joan withdrew with resentment that remained unexpressed. As a result of their impaired CI, their AI dramatically decreased.

**Infidelity Diagnosis** This turned out to be an infidelity of fear. Joan has a history of previous infidelities and may have flirted or been inappropriate
with others. What later became clear to be her fear of unworthiness is signaled by her talk of feeling empty. Despite her ambivalence about recommitting to Suzy and her expressed desire to end her relationship with the other woman, she could not face the idea of being alone. Her “cut off” relationship with her dad when she was younger reinforces a struggle with worthiness. Her especially significant avoidance of conflict and preference for giving up (though resentfully) reinforce her need to be with someone, presumably to have a sense of self, at “any” cost.

Possible Deal Breaker The third deal breaker appears to be most likely applicable of the three. Both partners’ strong conflict avoidance and lack of accountability for their contribution to the relationship weaknesses are poignant.

Outcome The third deal breaker did become the death knell for the relationship. In the end, no matter the work on CI and SI, Joan would not do the work to face her fears. She was unable to find the courage to develop a clearer, more honest sense of self and hold that self in relation to Suzy. She would not admit to Suzy that she was still communicating with the other woman. Eventually Suzy made the decision to end the relationship because there was no indication that Joan was earnest in her effort to grow and rebuild the relationship. Joan then chose to return to the other woman and the sweet symbiosis and conflict avoidance of that relationship rather than challenge herself to tolerate and accept the normal tension and differences of a LTLR. She chose ephemeral symbiotic intimacy over the immediate uncomfortable tension and discomfort that could eventually bring stable, resilient intimacy.

Specific Treatment Guidelines for Infidelity of Fear Couples

- Successful treatment of these couples depends the most on change in the betraying partner.
- The primary work of the betraying partner is to acknowledge and work through whichever of the three deep-seated fears (commitment, intimacy, or worthiness) motivated the betrayal(s), replacing the false beliefs the fear is based on with healthier, more emotionally mature beliefs about self and LTLRs.
- Work on increasing the betraying partner’s SI is vital to this work, enabling the betraying partner to become fluent in emotional self-awareness, both with self and with the LTLR partner.
- The therapist works to provide a holding frame for these couples, both pushing and supporting the two partners in their work on SI and CI.
Infidelity of Loneliness

With infidelity of loneliness couples, work on developing great CI is the key to eliminating the loneliness that overtook the LTLR and powered the betrayal. However, SI work is also important here. The betraying partner’s personal work is to become reliably self intimate since it was his or her weak SI that allowed the loneliness to grow unchecked to the point that it came to overwhelm and control him or her, leading to the infidelity. So this partner must fully commit to work on building up his or her SI, not only so that he or she becomes highly aware of what emotions he or she is feeling, but also so that he or she becomes able to and does talk with the partner about those emotions, whether good or bad. If the betraying partner does not do this he or she is setting him- or herself up for another infidelity of loneliness in the future.

Concurrently, the betrayed partner must work on his or her self to become a partner who serves to create a sense of safety in the LTLR so that the partner can reliably share his or her feelings. The betrayed partner must expand his or her expectations of a love relationship to include separateness and disappointment and must come to be able to accept and respect the range of emotions his or her partner’s newfound SI enables him or her to share with the partner, and vice versa.

This then leads to the therapist having to address the low CI that led to the growth of distance between the couple. This is what gave birth to the loneliness that enabled the infidelity. The therapist assists the couple in closing the gap between the two of them by guiding them through the process of facing and overcoming their differences.

This is accomplished by focusing the infidelity of loneliness couple on developing strength in CI so they can work through the great deal of hurt, disappointment, and resentment that have piled up between them not only as a result of the infidelity, but just as if it had not happened. After all, it was the couple’s inability to deal constructively with and resolve those negative feelings that sowed the seeds of the loneliness that led to betrayal. These negative feelings from the past have to be dealt with. Much like with an infected wound, in order to heal, the couple has to clean out the pain, the fears, and the anger that have been festering in their LTLR.

Then the healing will begin and the loneliness will start to fade as both partners begin to feel the stirrings of their love reawakening as they begin to experience real, mature intimacy with their long-lost partner. As the infidelity of loneliness couple learns through this process of building a solid three intimacies structure in their LTLR, the real antidote to loneliness for the betraying partner specifically and both partners in general is the rediscovery that the person that each fell in love with is still there and still loves them. Through the achievement of strong SI and CI, infidelity of
loneliness couples can reawaken their AI, recapture their connection, and deepen it. That is what happens when a couple becomes truly intimate.

*Infidelity of Loneliness Case Example* This case presentation illustrates midphase CI work with an infidelity of loneliness couple. Stu and Chelsea have been married 8 years and have two children ages 3 and 6. They have been using the I-to-I format since the second therapy session to develop greater CI. This is the eighth session and each partner is asked to choose an I-to-I developmental goal before they begin their discussion in the I-to-I format. Chelsea has offered to be the initiator on the topic of being more honest with Stu about the affair. Stu agreed to be the inquirer.

**Chelsea:** My goal is number 5: to think about what is bothering me and why before I speak. I know that I start to talk and then the dam opens and I am all over the place and end up accomplishing nothing for myself or in our communication. I need to talk about my affair.

**Stu:** My goal as the inquirer is number 8: To remain calm, not take it personally and continue to think productively and ask more questions. This may be a challenge as we discuss the affair, but I’m going to push myself.

**C:** Since we started working on the relationship in therapy I found great relief in being able to be honest with you. I feel less fearful and lighter. I have been scared to be brutally honest. Scared of your anger and I have not wanted to hurt you more. But I am feeling safer and some hope for more honesty. I think before I could not be honest because I knew you did not trust me and rightly so, but I would get frustrated and hopeless when I would tell you the truth and you would not believe me.

**S:** You’re feeling safer so that’s allowing you to be more honest. In the past you were afraid of my reaction and of hurting me. You also stopped yourself from being honest because I would not believe you were telling me the truth. Is that right?

**C:** Yes. I also think that early in our relationship I tried to talk with you about my negative feelings about your mother and we’d always get in a fight and I’d feel shut down, frustrated, and eventually hopeless. So I think I have just continued that pattern in our relationship. I stopped trying to change things; I stopped trusting that we could improve.

**S:** Because we could not make any progress about my mom, you thought we couldn’t make any progress in other areas of our relationship and especially about the affair?
C: Yes
S: You have kept your feelings to yourself, so how has that made you feel inside?

[Instead of reacting emotionally, Stu is pushing himself to ask Chelsea about her feelings and how her actions affect her sense of self and her feelings.]

C: I have felt confused, angry, disappointed, hopeless, and I guess I decided that especially because of the affair, I had no right to talk about all these feelings since I had devastated you.
S: You have had many negative feelings, but decided that you had no right to share them because you had been unfaithful.
C: Right now I feel ready to talk with you about these feelings. I also feel proud of myself for coming clean and I feel excited and hopeful that I can change, and maybe we can.
S: You are feeling optimistic, proud, and excited.
C: I have missed being able to talk with you. I really appreciate your help listening to me.

[Therapist notes that Chelsea also wanted to discuss the affair but has avoided that subject. Using the soft moment to help them stretch themselves into more difficult terrain the therapist pushes the following:]

Therapist: Stu can you summarize for your wife what she started with and what she has said so far?
S: You wanted to organize your thoughts and feelings before you spoke; you are wanting to be more honest about the affair than you have been in the past, and you want to speak honestly and not worry about whether or not I am able to believe you.
C: Yeah, I guess I need to get focused and talk about the affair. First, before I do that I want to say that I do not want to hurt you more than I already have. You have been asking why I did what I did and I want to answer your questions to help you decide if you can forgive me.

T: Are you wanting to know if Stu is ready to hear this?
C: Yes. Is that okay with you Stu?
S: I have no choice because if I don’t hear it I will only wonder, but I believe that hearing it will help me, as you said decide, see if I can get over this. I do believe that you have not continued to have contact with Pete, but I am not sure I believe what you tell me about the past. So, I am ready to listen.
C: Okay, here goes. For many years I have felt single, lonely, frustrated, and angry over our differences regarding your mother. I felt unprotected and not understood by you. Over time and no resolution
I began to focus more on the kids and then I got in touch with how depressed I was. When I got into individual therapy I learned that I had been struggling with depression since I was a kid. I started to focus on myself, work, and the kids and did not feel I had the energy to also deal with the marriage.

S: Can I tell you what I heard because you have said a lot of things?
C: Yes.
S: Since the problems with my mother and our arguments about this you have felt frustrated, angry, and essentially single. Oh, and unprotected by me. You then put your energy into the kids and work, but then you realized that you felt very depressed. You got into therapy and then the focus was on trying to understand and fix the depression. You did not have the energy for the marriage.
C: Yes, that sounds accurate, but I hear how I shut you out. I think I had given up on us and any changes. By the time I met Pete I was already emotionally out of the marriage. I did not look for an affair. I found myself feeling alive on the one hand, but also not depressed, but guilty and ashamed of myself. I didn’t even admit the affair to my therapist.
S: You shut me out but had also given up on our marriage. I really want to react to this, but I won’t. [He recalls his goal and due to the work they’d already done on CI in their previous sessions, he is able to not take it personally (so far) and ask more questions.] You did not look for an affair, but it made you feel good even though you also felt guilty and ashamed.
C: Yes.
T: Stu, is there anything Chelsea said that you’re curious about, that you’d like to ask her about that keeps the focus on her and her feelings?
S: Let me think; there’s so much. If you knew it was wrong why did you do it anyway?
T: Stu, can you ask that in a more open way that helps Chelsea learn about herself?
S: How did you make it okay with yourself to meet him, kiss him, then have a sexual relationship? [He has opened up the question, actually asked a more difficult question that requires she consider her motivation and conflicting feelings.]
C: I no longer had romantic feelings for you. I decided our marriage was over and I did not think that you would find out. I hate saying that out loud. I don’t want to hurt you and I don’t like what this says about me.
S: You kept telling yourself that our marriage was over and you believed I would never know.
C: Yes.
S: When did you decide that you did not love me anymore and did you try to tell me?
C: I tried to tell you one Christmas when we were arguing over your mother again. But the truth is I assumed you knew by the way I was acting. I was avoiding you, avoiding being sexual with you, and we fought a lot.

[Therapist notes Chelsea’s past ambivalence about pushing herself to ask for more from herself or her husband.]

S: This is hard! You think because it was clear to you that it was clear to me. I will never understand if you knew it was wrong how you did it anyway! You lived in a fantasy that only you knew about. That’s unfair to me and us and our kids!

[Stu loses differentiation in the face of his understandably strong emotions concerning her infidelity and reacts defensively, turning the conversation to his reality instead of staying with his wife’s reality. This is an example of losing the ability to be “curious, not furious” in conflict.]

C: This is why I don’t talk to you. You punish me for telling you the truth. I don’t want to hurt you. You wanted answers. I am trying to tell you how I did what I did. I don’t expect you to agree with me or say it is okay. I know I did the wrong thing. I will always regret this and not like myself for this. I am sorry. I am very, very sorry for hurting you.

[Therapist notes that Chelsea became reactive and lost her focus but was able to recover to talk about her feelings and refocus on her objective while tolerating his negative feelings.]

S: I don’t think this conversation helps. Maybe I am not ready to hear this. Maybe I don’t want to know who you were back then and who you became. I can’t get past the hurt and betrayal.

[Stu has some self-awareness in knowing he is breaking from the role, is able to express his feelings and own his limitations and challenges while also challenging his partner to withdraw from the conversation. He uses some intimation while really needing to ask for soothing and help. His fear of asking for more from his wife is normal at this point in therapy.]

[Therapist waits to see if Chelsea can continue to calm her reactivity to his hurt and angry feelings and if she can continue to offer him succor but not at her own expense. Therapist also waits to see if Stu]
can self-soothe, return to the inquirer role, and tolerate hearing the answers to his questions.]

[Long pause. Chelsea starts to pout, appears to feel defeated while Stu appears to feel sorry for himself and defeated.]

T: This is hard and painful work for both of you. The truth is difficult but as you both have previously stated, it is essential to know in order to heal and make the difficult decisions that stand before you both. Chelsea, is there something you want to ask Stu about his pain?
C: What can I do to help you? I want to help you with this.
S: I don’t know that there is anything you can do now. I don’t know if I can hear this.

[Therapist notes that Stu is at a crossroads: to stay stuck in certain pain or to stretch himself to experience his pain, fear, and hurt while remaining open to his wife and even let her (who hurt him) offer him reassurance.]

[Long pause]

T: Stu, right now you stand at a crossroads; can you define it?

[Therapist pushes him toward his I-to-I goal to continue to think.]

S: I’m stuck between just hurting and protecting myself against Chelsea hurting me anymore or hearing what she’s done and why and risking more hurt. I think that’s it.

T: Does it look that way to you, Chelsea?

[Therapist is pushing clients to use each other as a resource; indirectly teaching them to push past their old survival skill of withdrawing and relying only on self.]

C: You want to understand what I did, but can’t imagine being able to do that without feeling more hurt … and anger?
S: Yeah, I am fighting, getting more and more angry with you.
C: I think that you’re going to feel angry and I am going to have to learn how to handle your anger without withdrawing.
S: Hmmm … [He’s thinking about what she’s offered.]

T: I think this is a good place to stop. Chelsea, how did you do sticking with your goal as an initiator?

C: I think I got off track a couple of times, but I feel really good about being able to hear Stu’s anger and not withdraw. I tried to organize my thoughts and feelings better rather than just reacting.

T: Stu, how did you do with your goal?
S: I had a hard time. Early on I was able to get back on track, but at the end I just couldn't.

T: You both struggled as anyone would with such difficult topics. You both stretched yourselves. You are trying to build trust after so many years of living separately while together, living without sharing, without being able to wrestle with your differences and arrive together at solutions that work. You both worked hard. This is and will continue to be a difficult topic. You both tried to recover. You both worked earnestly. You both did better than you would have done just a few weeks ago.

T: Take the developmental I-to-I handout home. I call it the “Roadmap to Emotional Maturity.” My suggestion is that you set goal number 5 for both the initiator and inquirer as your default setting for productive discussions. That means, as either of you recognize that you are not able to stay in a conversation in a productive way, that you tell your partner and ask to table the discussion for an hour, until the evening or to “sleep on it.” This is not done as a threat but a means to protect the relationship and “do no harm.” And I’d like you to formally do the I-to-I exercise twice before I see you next week, for at least 20 minutes each time.

T: Lastly, I recommend that you let this discussion percolate for 24 hours before returning to the discussion. Use that time to think about what you said and what you heard. Think about what you can do better and where you want this conversation to go.

*Developmental Assessment of the Relationship*  They dated 1 year and lived together almost 2 years before marrying. They have been married for 7 years. Both report the first 2 years as being “issue free” as they enjoyed each other’s company, had a good connection, and a good, frequent sex life. They enjoyed a wonderful period of sweet symbiosis but brought little experience with effective CI. Consequently, the couple has become entrenched in a conflict avoidant cycle that has them arrested within soured symbiosis. The first disillusionment or sustained tension and growth pull toward CI involved in-law difficulties for Chelsea. Both partners cite this as the beginning problem that has never been resolved and eventually pulled them apart. So while the couple did have a healthy period of sweet symbiosis, little or no development toward successful differentiation has been accomplished since their entrance into stage two, soured symbiosis.

*Three Intimacies Diagnosis*  Chelsea has been low in SI while Stu is somewhat more developed in this area, but mostly limited to the expression of his negative emotions. Chelsea is stuck in an anger cycle, feeling victimized.
and blaming her partner. She is mostly unaware of her more vulnerable feelings and needs, and does not know how to express them to Stu.

Therefore, they are locked into a low CI, conflict avoidant pattern not knowing how to effectively navigate the sharing of their emotions. So by default they do not bring up their negative feelings, hoping that by ignoring them they can minimize the hurt feelings and the tension between them. Unfortunately, the long-term result is the ever-growing distance between them, the resulting backdrop of resentments and loneliness, as well as a gnawing feeling of resignation. AI has become significantly lower over the years as the resentments growing out of their CI have been poisoning and weakening their caring for each other.

**Infidelity Diagnosis**  Chelsea has had an infidelity of loneliness fueled by the growing distance in the relationship and her sense of separateness. Chelsea’s inability to be more emotionally self-aware or self intimate made her vulnerable to an affair. She felt increasingly separate and alone in her marriage and did not have enough SI to push her to take effective action that would have been congruent with her values and marital commitment to combat her loneliness.

While she did not seek an affair, the reawakening of feelings with Pete became too alluring for her to resist. To make it “okay” for her to be unfaithful, she convinced herself that by the time she was attracted to Pete her marriage was already over. This is a common self-justification in infidelities of loneliness. We find that in many infidelity of loneliness cases the love is not in fact dead, but has been starved by the lack of SI and CI and the resulting loss of AI. As a consequence of this weakening of love and how it is “covered over” by the buildup of negative emotion toward the partner and so not readily felt, it is easy for the betraying partner to convince him- or herself that the love is gone, and therefore the infidelity is “justified.” In other infidelity of loneliness cases, the love actually has been starved “to death.” But this usually takes at least 7 to 10 years of being stuck in stage two for love to truly be gone.

**Possible Deal Breaker**  The second deal breaker ended up applying to Stu and Chelsea; the loss of their love was caused by negligence on the part of both partners. Interestingly, we find that when the second deal breaker applies to a couple, dooming their LTLR, it is more common that their love died as a result of the “starvation” of love caused by conflict avoidance than by the “murder” of their love caused by the abuses of hostile dependent conflict process.

**Outcome**  Currently this couple has decided to separate. Stu has moved toward divorce proceedings. He is unable to accept, tolerate, and rebuild trust.
in Chelsea. She reinforces his fear by struggling to hold on to herself when he
gets angry and instead withdraws from him. She often takes his anger person-
ally and expresses ambivalence about the relationship. The couple has remained
in individual therapy and stayed in touch with the marital therapist.

Specific Treatment Guidelines for Infidelity of Loneliness Couples

- Therapeutic work on developing strong CI is the key to eliminating
  the loneliness that overtook the LTLR and powered the betrayal.
- The betraying partner must work to become reliably self inti-
  mate, as her lack of true acknowledgment of her loneliness led to
  the infidelity.
- The betrayed partner must work on SI and CI to help create a sense
  of safety in the LTLR.
- The betrayed partner must expand his expectations of his LTLR to
  include separateness and disappointment.
- Transforming their low CI to high CI enables the couple to work
  through the hurt, disappointment, and resentment that has grown
  between them over the years and that led to the betrayal.
- With the growth in CI there follows a growth in AI that the ther-
  apist needs to foster and guide.

Infidelity of Anger

Much like with an infidelity of loneliness couple, tailoring the therapy to
the needs of the infidelity of anger couple centers on both of the partners
developing greater CI as well as on the betraying partner overcoming his
or her low SI. But in these couples, the betraying partner must commit to
work on growing SI particularly in regard to how he or she handles anger
and the emotions of hurt and disappointment, which are what fuels the
rage. He or she has to develop in-the-moment awareness of these emotions
(ESA exercise) and then practice talking with the partner constructively,
in a nonblaming way about them (I-to-I exercise).

The infidelity of anger betraying partner must do the hard SI work
necessary to identify and work through the pain and anger he or she has
built up from the past. Doing this personal work will enable him or her
to change the fundamental motivational stance in the LTLR from one of
individual survival to one of relationship survival. It will also transform
his or her experience of love, from being mostly about his or her own safety
to being about intimacy and willing vulnerability. Only after the betray-
ning partner does these things will he or she be safe from being hijacked by
anger in the future. Only then will the danger of the anger controlling him
or her, causing the person to act out for revenge, be eliminated.

The therapist also must work with the couple to develop CI around
past and present issues in the relationship. It is essential that the therapist
challenge the couple to change their toxic communication style, whether it is hostile dependent or the conflict avoidant style. This task is especially challenging for the betraying partner, who will reflexively see, interpret, or experience the betrayed partner’s words as attacking. The betrayed partner has to learn to overrule his or her individual survival reflexes. The infidelity of anger betraying partner will need the therapist’s help to pull him or her back from withdrawing or attacking.

The therapist is teaching these couples a new behavior that feels very foreign and dangerous to them: one of observing, suspending one’s views, being empathetic while having separate though unrepresented or unvoiced thoughts and feelings in the moment. This is a challenging emotional and psychological task for both partners. The therapist needs to be strong and clear in his or her thinking to be able to effectively understand what each partner needs in order to differentiate, self-define, and be present, especially with the latent if not overt hostility that these couples bring into therapy.

The therapist guides the infidelity of anger couple through this process toward becoming adept at dealing with their negative feelings as a team. Instead of reacting to them in an attacking, defensive way or in an avoidant, minimizing, or “brush it under the rug” way, they will come to do so openly and constructively, with each taking responsibility for his or her part in the problems and each expressing caring and regret for the pain caused to the partner. When the couple has achieved this ability, anger will no longer have the power to hijack their LTLR by causing an infidelity of anger. Anger will no longer be the enemy. Anger will no longer be in control of the betraying partner. Their ability to be intimate will prove to be more than a match for any anger, hurts, or disappointments that arise.

Infidelity of Anger Case Study  Terry and Debbie have been married for 22 years and have one young adult child. This couple had been in to see this therapist 5 years previous to this because of marital problems related to their parenting style differences. During previous therapy with this therapist the couple was willing to do some work to rebuild a marital connection. Debbie had reported in the therapy that Terry had “hit” on women since they were first married. He denied this. Debbie let the subject drop, and once the acute relationship pain was decreased, the couple left therapy. At the last session, the therapist suggested that though they were feeling relieved since the crisis had passed, the therapist did not believe that they had enough skills to achieve the conflict process resilience that they would need down the road.

The couple returned after 5 years because Debbie discovered that Terry had been using the services of prostitutes. She had previously suspected that he had been sexually inappropriate with other women, an allegation he denies. She learned about the prostitutes when she discovered a receipt.

When she confronted him he denied it, but as she continued to press him, he eventually admitted to these betrayals. She did a lot of research and discovered his use of Craig’s List to meet women. He admits to the prostitutes, but denies the other accusations. The couple had briefly seen three other therapists over the past 10 years, and Debbie reports that they have told her they believe Terry has had multiple affairs.

This I-to-I dialogue takes place in a session during the later midphase of therapy after the couple had been practicing the I-to-I both inside and outside the sessions, using the developmental I-to-I goals, and having agreed to a list of trust-building behaviors.

**Debbie:** I have something I would like to work on; it’s my continued lack of trust in you and that I find it difficult to have tough discussions with you. Is that okay if we work on this?

**Terry:** I think things have been going better, but if you want to talk about this, it’s okay.

*Despite his anxiety about the topic he is willing to push himself.*

**D:** While we were on our vacation there were a couple of times when I felt hurt by what I saw as your insensitivity to me. For example, when you took photos of topless women in France and I told you I did not like it, you got angry at me and we had an argument. I want to be able to bring up these topics and talk them out.

*She is doing a good job with emotional self-awareness, demonstrating improved self-differentiation and a willingness to be conflict intimate.*

**T:** You were hurt by the photos I took and felt I was defensive and did not listen to your feelings. You want us to be able to discuss these things without an argument.

**D:** Yes, and I want to know that my sensitivity to feeling embarrassed or being reminded of your unfaithfulness is also important to you. I don’t necessarily think that you’ll do something inappropriate with women, but I need you to keep in mind my hurt, fear, and fragile trust.

*She is questioning his earnestness in rebuilding trust and she is willing to ask him to help her with this.*

**T:** So, it’s not so much the photo taking, but that I did not think about how my actions might affect you. You want to know that I think about how I have hurt your trust of me. Is that right?

*Expressed, ongoing awareness of the hurt he has caused, and willingness validate his partner’s pain are both powerful ways to rebuild his integrity as well as her trust in him.*
D: Yes. I guess if you would keep in mind how things might affect me and if I bring up a hurt that it will matter to you enough to listen, care about the affect, and want to help me feel more secure. I want to trust you again, but I worry that you think that because we are still together that this issue is over. It will take time for me and I need you to be patient with me as well as help me with this by staying aware of my insecurity and sensitivity.

[Debbie is doing a good job asking for help, being vulnerable to her partner while holding on to herself.]

T: I am sorry that I took the photos; I forgot to consider your feelings. I will do better. I have a hard time revisiting my mistakes, and I wonder if you will ever forgive me or if this will constantly come up and you’ll never be able to let it go.

[Terry is demonstrating differentiation with empathy and not losing a sense of self and is able to be both self intimate and conflict intimate by bringing up his concerns about his partner’s possible limitations.]

D: It sounds like you are having trouble trusting me and my ability to forgive you. You also have trouble being reminded of your hurtful actions. Did I get that right?

[This couple is able to move between the roles of initiator and inquirer with ease, an advanced skill. She is also able to be empathetic to his emotional sensitivities as well as her own.]

T: Yes.

D: I admit that I have obsessed over the prostitutes. I think I have because over the years I have suspected you of cheating because I have seen you behave too sexually with other women when I have been present. When I have asked you about this, you always sloughed it off and said I was crazy. But now I know more of the truth so my obsessing is probably my way of trying to deal with the truth and protect myself by not ignoring again my instincts. Does that make sense to you?

[Debbie is remaining aware of more vulnerable feelings and continues to bring up difficult issues while not blaming her spouse. She is questioning the value of obsessing and its limitations.]

T: It does, but at the same time I have known you to get angry and not be able to forgive.

[He is able to empathize and recap while simultaneously raising his concerns and increasing the tension.]
D: That’s fair. I guess I will have to figure out when I am obsessing to check out my instincts and when I am obsessing out of fear or to punish you out of my insecurity. Will you trust me and help me do that?

[She continues to share the fruits of her self intimacy and asks for assistance without asking her partner to give up a part of himself; differentiation and individuation are maintained. A differentiated connection is requested.]

T: I’d like to say unequivocally yes, but I can’t promise that I won’t get defensive and impatient sometimes. But I will try to remind myself that I have caused you pain and that you aren’t meaning to lash out at me.

D: That would help me a lot to rebuild my faith in you, see you as earnest in wanting to change to be true to me, to improve the relationship, and help me to trust my instincts.

T: I am sorry that something I did that was so selfish continues to cause you pain. It is hard for me to see how much, how often, and how deeply my stupid choices continue to hurt you. I appreciate you struggling with this, staying with me and our marriage, and again I promise that I am committed to you and to us. I will keep working on myself.

D: I appreciate your words. They help me.

Developmental Assessment of the Relationship  Terry and Debbie dated for 2 years when they met in their mid-20s. Both described the early years as fun. Sweet symbiosis seems to have been positive but marred early on by her suspicions that he was not completely honest with her. They also struggled with his career and limited money early in the marriage. They were not able to stay mutually supportive in the face of these stressors, and soured symbiosis occurred early in the relationship while both minimized its presence. As a result they have never been able to move beyond stage two.

Three Intimacies Assessment  Both have had low SI and ineffective CI. In spite of this, their AI has remained fairly strong; it appears to have been the bond between them. Both partners have been locked in a competitive, untrusting relationship with each other. As Debbie became angrier at Terry’s inappropriate actions with women and his lack of support toward her regarding the raising of their daughter, she became stuck in a hostile dependent cycle with him. Terry viewed his wife as rigid, neurotic, and angry, and he admitted to staying away from home to avoid her and the relentless arguments. She would make openly disparaging remarks about
him while he would behave with other women in ways that were disrespectful of his marital relationship.

**Infidelity Diagnosis**  Terry’s history of inappropriate interactions with women, the current involvement with prostitutes, and his indirect expressions of anger toward Debbie suggest an infidelity of anger. In the course of therapy he spoke of his expectations that his wife should agree with him, that life at home should be easy. He acknowledged his expectation that arguments and tension should be mostly nonexistent in marriage, and that eventually he began to see his wife as purposely hurting him and defying his requests. His early family history includes a hostile, competitive father and a fearful, compliant mother. For her part, Debbie comes from a family that did not discuss problems, but that could be very biting and indirect with their anger.

**Outcome**  This couple came to therapy locked in an angry, attack and defend hostile dependent conflict process pattern. Debbie was devastated, relieved, and angry with Terry when his infidelities were revealed. Terry was embarrassed, relieved, and defiant. While she wanted to save the marriage, he was more ambivalent. He stated that he did not want to save the marriage if it did not improve. He stated in later therapy sessions that a turning point for him was seeing and feeling the depth of Debbie’s pain and hurt. As she stopped leading with her anger and spoke more about her sense of loss and hurt, he was able to hear that she did love him. With that he recalled his love and connection with her and started to examine his selfishness and how he had let his passive anger determine his choices. This couple continues to work in therapy and reports that their marriage is more loving, connected, and genuine than it has ever been.

**Specific Treatment Guidelines for Infidelity of Anger Couples**

- Working with these couples to help them build strong CI is central.
- The therapist must challenge both partners to work to leave behind their entrenched toxic conflict process pattern, whether it be hostile dependent or conflict avoidant.
- The betraying partner must also be focused on overcoming his low SI, particularly in regard to how he or she handles anger and the emotions of hurt and disappointment, which are what fuel the rage.
- This SI work must also delve deeply into the past, where the source of most of the anger and the maladaptive defenses used to deal with it lies.
- The therapist must assist in this SI work, since this will enable the couple to change the fundamental motivational stance in the LTLR from one of individual survival to one of relationship survival.
Conclusion

In the end, TRI infidelity couples learn that the secret to success in a LTLR is true intimacy. For the therapist who is called upon to assist the couple whose LTLR has been imperiled by infidelity, it is vital to make the struggle to build a sound intimacy structure into the couple’s relationship central to the therapeutic work of recovering from infidelity.

At TRI we erect that structure upon the pillars of the three intimacies using the blueprints provided by the TRI model of LTLRs and our infidelity typology. We find that the true intimacy afforded by strength in the three intimacies allows the love of the infidelity couple partners to once again flow and be returned in its fullness. It enables them to thrive as a couple in spite of the past infidelity and buttresses them against future relationship breakdowns in the face of the inevitable challenges that await them as they travel through life together. As such, we have found that this approach to infidelity couples therapy empowers the therapist to effectively meet the challenges of this daunting work by providing both a model that brings clarity to chaos as well as powerful clinical tools with which to help the couple recover intimacy after infidelity.

References

The Couples Institute. (2007). How to get the most from couples therapy handout. www.thecouplesinstitute.com