

Helping Couples Work Toward the Forgiveness of Marital Infidelity: Therapists' Perspectives

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The purpose of this qualitative study was to explore how therapists treat infidelity and work toward forgiveness with couples presenting with extramarital involvement. Ten licensed marital and family therapists were interviewed. Major categories, themes, and subthemes were generated from open, axial, and selective coding analyses. Participating therapists described treating marital infidelity and incorporating forgiveness sequentially. Infidelity treatment included assessing family of origin and relationship history, and discussing mutual acceptance of responsibility. When working toward forgiveness, therapists described: (a) assessing client understanding, (b) psychoeducation, (c) clarification, (d) client languaging, and (e) time. Implications for research and treatment are discussed.

INTRODUCTION

Couples seek and enter therapy for a number of reasons. One area of prominent concern is when one or both partners have engaged in acts of infidelity. Extramarital involvement has been the topic of a great deal of research (see Blow & Hartnet, 2005a, 2005b). According to a study by Whisman, Dixon, and Johnson (1997), clinicians ranked extramarital affairs as the third most difficult therapeutic problem to treat and was second (after physical abuse) as having a damaging impact on relationships. Given

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the difficulty with which therapists rate the treatment of infidelity and its perceived detrimental impact, additional research on how therapists treat extramarital relationships is of great import.

Forgiveness, in the broader process of the treatment of infidelity, has received even less attention than the treatment of infidelity. Although research on the therapeutic use of forgiveness has increased (Baskin & Enright, 2004), its wider application to the treatment of infidelity has been addressed by only one empirical study, in which a wider, multitheoretical model of the treatment of extramarital involvement was explored (Gordon, Baucom, & Snyder, 2004). Given the limited attention of forgiveness in the treatment of marital infidelity, this study sought to explore, in greater depth, clinicians' experiences of helping couples work toward forgiveness when infidelity has occurred.

FORGIVENESS IN INFIDELITY TREATMENT

Infidelity

In one of the most thorough reviews of infidelity research (Blow & Hartnett, 2005a, 2005b), it was reported that the extent to which extramarital involvement takes place in married relationships is inconclusive. Although an in-depth review of Blow and Hartnett's findings is beyond the scope of this paper, the results of their review showed that infidelity research has measured infidelity type, frequency of extramarital involvement, length of affairs, and time between last infidelity encounter in different ways, making it difficult to identify the true incidence and prevalence rates of infidelity. However, their review has important implications for couples therapists. That is, therapists who profess competence in treating couples should be prepared to effectively treat couples presenting with infidelity.

Little research has addressed the difficulty of treating infidelity. Whisman, Dixon, and Johnson (1997) surveyed couples therapists from various disciplines about the extent and difficulty of treating a myriad of potential couple presenting issues. They found that infidelity was among the top three most difficult treatment issues. Thus, research has identified that infidelity is a prevalent issue in married relationships, though there is inadequate knowledge on the treatment of infidelity (Atkins, Baucom, & Jacobson, 2001) and couples therapists perceive it as a challenging treatment issue (Whisman, Dixon, & Johnson, 1997).

In a recent review of the infidelity literature, Dupree, White, Olsen, and LaFleur (2007) identified a variety of ways therapist address marital infidelity in therapy. From this review they found several important themes related to the treatment of infidelity. These themes included treatment engagement, assessment, interventions, treatment adherence, relapse prevention, cultural considerations, and ethical dilemmas (see Dupree, White, Olsen, & LaFleur, 2007, p. 332 for a summary of themes). Their review provides a thorough

and succinct tool for couples therapists wishing to ethically and effectively treat couples presenting with infidelity.

At present, only two studies exist specifically testing the treatment of infidelity. These studies include Atkins, Eldridge, Baucom, and Christensen (2005) and Gordon, Baucom, and Snyder (2004). The study by Atkins, Eldridge, Baucom, and Christensen (2005) focused on couples who disclosed infidelity as a part of a larger research project testing the differences between traditional couples behavioral therapy and integrative behavioral couples therapy. In their study, 19 couples had issues related to infidelity, although five of the couples did not disclose the infidelity to their partners. Thus, infidelity treatment was couched in treatment of the couple's other presenting problems, rather than focusing exclusively on the infidelity. Findings for these 19 couples indicated that therapists across the study were not consistent in the amount of time spent treating infidelity, couples who addressed the infidelity were more distressed than couples who did not address the infidelity, relationship change was similar for infidelity and non infidelity couples, and the couples that did not disclose infidelity when it had occurred noticeably lacked improvement.

In the other study, Gordon, Baucom, and Snyder (2004) tested an integrative model developed by the authors for the treatment of infidelity. In their model, treatment is divided into three different stages. Each stage includes cognitive, affective, and behavioral components. Stage one focuses on dealing with the impact of the infidelity. Stage two addresses the exploration of the context of the infidelity and finding meaning. Stage three includes a summarization of the first two stages and then "moving on." It is within stage three that forgiveness becomes prominent.

Findings from their study include decreases in depression and post-traumatic stress related to the affair for the noninvolved partner as well as decreases for the noninvolved partner in global marital distress scores. They also found increases in empathy, trust, commitment, and improvement in overall scores on a forgiveness measure. At follow up, all couples in their study were still together.

In only one of these two studies (Gordon, Baucom, & Snyder, 2004) the concept and process of forgiveness was introduced and incorporated. Due to the destructive nature of infidelity and its far reaching effects, it seems important to understand how therapists incorporate forgiveness when addressing infidelity. The intent of the present study is to understand how therapists incorporate forgiveness when treating couples presenting with infidelity.

Forgiveness

Research exploring forgiveness has gained increased attention empirically. Much of the research has explored the usefulness of forgiveness in an individual, clinical, or group setting (Al-Mabuk, Enright, & Cardis, 1995; Coyle &

Enright, 1997; Freedman & Enright, 1996; Hebl & Enright, 1993; McCullough & Worthington, 1995; McCullough, Worthington, & Rachal, 1997). Although these studies have shed light on the beneficial aspects of forgiveness and its utility in a clinical setting, none have addressed forgiveness with couples dealing with infidelity. Theory and research on forgiveness has identified several important forgiveness-related interventions that can be applied to couples presenting with infidelity.

LANGUAGING FACTORS

A review of the forgiveness literature found that only one study has examined languaging effects on clients' acceptance of forgiveness as a component of therapy. Butler, Dahlin, and Fife (2002) found that the ways in which therapists' language forgiveness to their clients may affect client willingness to accept forgiveness as an aspect of treatment. For example, languaging forgiveness in a way that would promote greater benefit to the person who had committed the offense would likely decrease the treatment acceptability of forgiveness. Their study included a non-clinical sample rating the treatment acceptability of forgiveness based on various vignettes about domestic violence treatment. Implications for their study suggest that forgiveness, as a component of therapy, is more readily accepted when therapists language forgiveness as being personally beneficial to the injured partner rather than being beneficial to the offender in the relationship. Thus, the way therapists language forgiveness could either open or close clients toward forgiveness as a part of therapy.

PSYCHOEDUCATION

Theory and research on forgiveness have suggested that educating clients about forgiveness may be an important part of treatment. Enright and the Human Development Study Group (1991) provide a thorough discussion of what forgiveness is—and is not—in light of various theories on forgiveness. Thus, therapists need to be prepared to discuss the meaning of forgiveness with clients. A prototype analysis conducted by Kearns and Fincham (2004) found that lay persons agree with researchers that forgiveness includes cognitive, emotional, and behavioral processes. However, they also found that some of the lay persons in their study viewed condoning, excusing, and reconciliation as central components of forgiveness. Kearns and Fincham suggest that to increase the likelihood of forgiveness, therapists should be prepared to discuss the differences between forgiveness and other similar, but different, concepts.

Another important part of psychoeducation is providing resources for clients about forgiveness. This may include books or internet sites

that discuss the process of therapy, its potential benefits, and differences between forgiveness and similar constructs. Clients may also need to be educated about timing of forgiveness, mainly that forgiveness is a process that takes time and will not likely happen overnight.

TIMING

Little research exists on the placement of forgiveness in therapy. Gordon, Baucom, and Snyder's (2004) model places forgiveness and the decision to reconcile (a concept distinct from forgiveness) at the end of stage three. Contrary to their placement of forgiveness, Glass (2002) suggests that after the first session with a couple presenting with infidelity, therapy with the couple should be openly labeled as one of the following: marital; reconciliation; separation; or ambivalence. Thus, Glass places the decision to reconcile (not forgive) at the outset of treatment.

In light of the limited research on the topic of forgiveness of marital infidelity, this qualitative study provides an enriched description of this process as incorporated by clinicians. The description of this process is important given that research suggests that forgiveness (not necessarily reconciliation) is viewed as optimal for couples experiencing marital infidelity (Hall & Fincham, 2006).

METHODS

Participants

Ten licensed marital and family therapists (LMFTs) participated in a structured interview concerning their treatment of married couples presenting with the problem of infidelity. A registry of members belonging to a city extension of the American Association of Marriage and Family Therapy in a southeastern state was obtained from a board member of this association. The obtained registry originally contained the names, phone numbers, and e-mail addresses of 62 LMFTs. From this registry, a convenience sample of therapists was obtained based on the following criteria: (1) the therapist must be a licensed marital and family therapist and (2) must have treated couples presenting with infidelity.

Participants in the study ($n = 10$) ranged in age from 50 to 72. Therapists' clinical experience ranged from 16 to 50 years. All participants were LMFTs. In addition, one therapist was also a licensed psychologist, one therapist received a master's degree in social work (MSW), and one therapist had an MSW and was also a licensed clinical social worker. Five therapists were in private practice, one practiced in an agency setting, one practiced in agency and private practice, one was retired, and two participants did not respond to this question. A majority of participants ($n = 6$) were male as compared to female ($n = 4$). Participant race was largely Caucasian ($n = 9$), with one

therapist being Chinese/Puerto Rican. The majority of participants' religious affiliation was Christian ($n = 6$), followed by no religious affiliation ($n = 4$). Total *approximate* number of cases treating marital infidelity ranged from 12 to 500.

Procedure

Participants were contacted initially by phone, e-mail, or both, based on the registry's identifying information for the prospective sample. After excluding current students, all LMFTs practicing within an hour of the research center were called or e-mailed to recruit them for participation in the study. Of the therapists contacted, 13 responded with a willingness to participate. Ten therapists were invited to participate in an interview regarding their approach to treating marital infidelity. The three remaining therapists were unable to participate in the study due to time constraints. One of the researchers met each participant at a location that was convenient for the participant. After obtaining informed consent and filling out a brief demographic questionnaire, the interviewer asked exploratory questions specifically about forgiveness as it pertains to treatment of couple infidelity. Interviews lasted between 30- and 60-minutes and were audio recorded, transcribed, and coded. For the purposes of this study, we focus on participant responses to the following question: "In your therapeutic experience, what do you feel are the important components that you employ when working toward forgiveness with couples whom you have treated for marital infidelity?" Participants were at liberty to respond by stating that forgiveness was not incorporated in the treatment of infidelity, if such was the case.

Transcription and Data Analysis

After each participant was interviewed, the audio tapes from the interviews were transcribed. Steps were taken to decrease the likelihood of introducing bias into the transcription and coding of the interviews. The first step taken was to have each interview transcribed by the researcher who conducted the interview. This was done to ensure transcriptions were as complete as possible, as those interviewers were more able to understand particular parts of interviews considered inaudible by other interviewers. Second, after interviews were transcribed, analysis was conducted by multiple researchers to avoid biases that might result from only one individual performing the analysis (Patton, 1990). Analysis of the interview data was conducted using the grounded theory method of open, axial, and selective coding. Though the purpose of the study was not to generate theory, the open, axial, and selective coding process allows for the generation of themes and subthemes providing greater depth of understanding on the study topic.

OPEN CODING

One copy of each transcription was given to two other researchers to code. Interviews were not coded by the same researcher who had conducted the interview. The open coding process refers to “the process of breaking down, examining, comparing, conceptualizing, and categorizing data” (Strauss & Corbin, 1990, p. 61). Each interviewer examined transcriptions line-by-line looking for words or series of words that were consistently and repeatedly mentioned.

AXIAL CODING

After each researcher had openly coded the transcriptions, the identified words and series of words were then categorized into themes and sub-themes. Prior to convening as a research team, each researcher identified major themes and subthemes and their connections resulting from the open coding process. Pure grounded theory methodology includes a suspension of preconceived notions of the data by researchers. This suspension is difficult given the researchers’ knowledge of the literature on forgiveness. Thus, we allowed this knowledge to provide direction and give shape to data analysis, a form of theoretical sensitivity that gave rise to the creation of themes and relationships between these themes (Strauss & Corbin, 1990). Thus, the forgiveness literature was used as a starting place for the generation of themes (Dupree, White, Olsen, & LaFleur, 2007; Enright et al., 1991; Fincham, Hall, & Beach, 2006; Wade & Worthington, 2005). When the research team convened, comparisons were made concerning each identified theme and subtheme. Discrepancies were addressed by returning to the original interviews for evidence supporting or negating the inclusion of the theme under discussion. Themes were not included until all researchers had reached consensus.

SELECTIVE CODING

At the time of meeting as a research team, selective coding took place by establishing the core categories and their connection with other categories (Strauss & Corbin, 1990). Two major categories were established with major themes and subthemes connected to these two major, sequential categories.

RESULTS

Several findings resulted from the qualitative interviews. When asked specifically what therapists felt were central components of their approach to

forgiveness and treating infidelity, therapists tended to discuss infidelity and forgiveness in a sequential manner. Therapists suggested that certain aspects of the infidelity be addressed before working toward forgiveness. A number of recurrent themes emerged regarding the treatment of the infidelity. These included family of origin issues, relationship history assessment, and mutual acceptance of responsibility for both partners. Critical themes and subthemes concerning forgiveness of marital infidelity that emerged from the data analysis included assessing an understanding of forgiveness, psychoeducation, clarity, and time. The results of the analysis will be presented in two sequential categories, (1) infidelity and (2) forgiveness.

Category 1: Components of Therapist Treatment of Infidelity

THEME 1: FAMILY OF ORIGIN

One of the first and most salient components identified by therapists was the need to assess the influence of family of origin on the infidelity. In particular, therapists were interested in whether or not infidelity had occurred in the family of origin. One therapist stated, "I listen for family of origin issues that arise as I do genograms. I try to locate if there have been affairs in the family of origin." Participants suggested that performing family of origin assessments helps identify attitudes and beliefs about infidelity and what may have facilitated the cognitive, behavioral, or emotive processes that led one partner, or both, to committing an affair. Another therapist further clarified the importance of assessing for infidelity in the family of origin:

... find out their background and what infidelity means to them personally. If they've grown up in a family where this was a tragedy in their own family or if this happened with a best friend where this is a huge betrayal.

Thus, as this therapist indicates, occurrence of infidelity in one's family of origin might profoundly impact his or her attitudes toward infidelity and forgiveness in his or her own romantic relationship. Therapists viewed such information as essential guides to determining their subsequent approaches to forgiveness.

THEME 2: RELATIONSHIP HISTORY

Before working towards forgiveness of marital infidelity, participants suggest that two important aspects of relationship history need to be assessed: (1) the etiology of infidelity and (2) whether the extramarital affair was a one time incident or is a pattern in the relationship.

Subtheme 1: Etiology of infidelity. In terms of etiology of the infidelity, one therapist identified how crucial it was to discover why the affair had occurred. "I try to get a sense of the history of the relationship and how the infidelity came to be. My working assumption is that it is a symptom of something not okay in the relationship." Based on this therapist's response, a component of addressing infidelity is gaining a clear understanding of what had been taking place in the relationship to produce an extramarital affair. Another therapist said,

With the person who has been unfaithful, I would get as much understanding as I could of the circumstances; what they've been through, and try to get a feeling of if they understand the impact of what they have done and if they are repentant.

This therapist suggests that an affair isn't something that just happened, but that there were deeper problematic elements of the couple's relationship that precipitated the affair.

Subtheme 2: Patterns of infidelity. A second imperative aspect of the relationship history reported by participants is to assess the pattern of infidelity, such as whether it was a recurring event or a onetime occurrence. Assessing history of infidelity in the current relationship may be crucial, as forgiveness of previous acts of infidelity may have taken place without therapist assistance. Repeat offenses may make the possibility of forgiveness more difficult, and as one therapist implies, may be sending a message to the unfaithful spouse that infidelity is acceptable.

Your spouse is unfaithful to you and you may even want to let it go but then the theory is if I let it go then that means it was okay and I'm okaying it with him and so he'll do it again.

Participants implied that forgiveness of infidelity may be unwise, and even unsafe, if the therapist does not have a thorough understanding of the history of infidelity.

THEME 3: MUTUAL ACCEPTANCE OF RESPONSIBILITY

Participating therapists reported that a third aspect of working through infidelity before forgiveness can take place is helping both partners accept mutual responsibility for their own contributions to the extramarital affair. As one participant suggested:

The number one thing is that the person who has been unfaithful acknowledges their part in the unfaithfulness and that they acknowledge the right of their partner to have feelings related to the infidelity. That

acceptance of responsibility, I think, is real important. It's a critical piece of being able to forgive and the person who has been offended needs to be able to express and have their feelings acknowledged.

This therapist suggests that it is vital for the partner that has had an affair not only admit to the act, but also be willing to accept her or his partner's feelings about the offense.

From a systems theory perspective, it may also be vital for the offended partner to recognize his or her contributions to the affair.

An affair doesn't happen in isolation. There are two people that contribute to the affair, but the person who is hurt does not necessarily see that initially, so they have to come to a point where they recognize [that]. The intervention is to help them see how their behavior or their issues contributed to the void in the marriage and that void in some ways contributed to the spouse or partner going outside the marriage to get their needs met.

As indicated by this therapist, a key component of working through the extramarital affair is helping both partners see how they both created an atmosphere in the relationship that precipitated the occurrence of infidelity. Acceptance of mutual responsibility is associated with the need for therapists to assess the etiology of the affair, and this acceptance of responsibility may be facilitated through an assessment of relationship history.

Category 2: Components of Forgiveness of Infidelity

THEME 1: UNDERSTANDING FORGIVENESS

Therapists emphasized the importance of gaining an understanding of their clients' view of forgiveness. This often included being aware of the client's definition of forgiveness, and trying to use the terms their clients used.

I have to word very carefully what I think forgiveness is and some of my assumptions about forgiveness as I'm approaching the couple with any ideas they have. I also have to look very closely to what they might mean by forgiveness. It could be very different from what I mean by forgiveness. I tend to use their language rather than my own when I start talking about forgiveness.

Participants suggested that discussing the topic of forgiveness requires a great deal of sensitivity, understanding, and acknowledgement on the part of the therapist and that therapists come to treatment having an understanding of their own views and conceptualizations of forgiveness. In so doing, therapists may overcome the potential disregard for how clients

view forgiveness (and avoid the potential complications that might arise from such disregard). Also, the therapist may be more likely to utilize client language and address misunderstanding about forgiveness.

THEME 2: PSYCHOEDUCATION

It became evident from the interviews that an important component of forgiveness of marital infidelity was providing psychoeducation to both partners in the relationship. The participants suggested that two critical aspects of the psychoeducation of forgiveness were (1) helping clients understand that forgiveness is a process and (2) facilitating client understanding of misconceptions regarding forgiveness.

Subtheme 1: Understanding the process of forgiveness. In order to help couples with the forgiveness of extramarital relations, it was critical that the therapist educate clients about the process in which both partners would be engaging.

Probably the very first thing to do is explain to them what [forgiveness] means because many couples don't have a concept of forgiveness, or they think saying "I'm sorry" is enough and then one of the other partners doesn't think it. So talking about that and then also talking about the process of what they are going to go through.

For this therapist it seemed critical to not only help clients with an understanding of forgiveness, but also to help them understand what would be involved in the forgiveness process. One important avenue of educating clients about the forgiveness process that was salient in therapist interviews was utilizing books or literature. Helping both partners to understand the process of forgiveness can help address misunderstandings of forgiveness.

Subtheme 2: Addressing misunderstandings about forgiveness. Dispelling misunderstandings was a second salient component of psychoeducation concerning forgiveness. According to the therapists, not only was it critical to understand how clients view forgiveness, but it was also important to help both partners understand the difference between forgiveness and other commonly associated processes (such as reconciliation, condoning, or excusing). One recurring example involved making the distinction between forgiveness (an intrapersonal process) and reconciliation (an interpersonal process):

Reconciliation and forgiveness are two different processes. And we often think, 'well if I forgive I have to reconcile.' . . . you can forgive a scoundrel but you don't have to reconcile with them. You can forgive an errant

spouse but that doesn't mean you have to go back to them. [These are] two different issues often thought of as one issue.

Therapists emphasized the importance of clarifying that forgiveness and reconciliation are not the same, and that, in fact, they can be two very different processes. When forgiveness is confused with a significantly different concept, clients may be working toward a goal different from that which they had originally intended.

THEME 3: CLARITY

When working toward forgiveness with a couple dealing with infidelity, participants reported that it is imperative to have a clear understanding of two important areas: (1) the couple's wants and needs and (2) forgiveness language.

Subtheme 1: Clarifying couples' wants and needs. The first area that must be clarified is the couple's wants and needs. When an extramarital affair has impacted a couple's relationship, the therapist must assess the couple's desires for the future of the relationship. It is also critical to know each partner's individual wants and needs. As one therapist suggested, this assessment must be carried out early in the forgiveness process:

I first assess the state of the marriage and what people really want because I want to be really clear about what people want. Usually . . . if couples come in and there's been infidelity, I assume that by being here that [they] probably want to work through this in some way, so I try to assess that first and see what it is they want.

According to the therapists, this clarification is crucial because some couples may want to work through the forgiveness process and reconcile, while others may want to forgive and not remain married. An imperative aspect of helping couples work toward forgiveness is to first make sure that forgiveness is a process in which both partners would like to engage.

Subtheme 2: Clarifying languaging of forgiveness. A second area participants identified that must be clarified are terms or forgiveness language. It is difficult to come to an understanding of how clients view forgiveness without first gaining clarification on the language they use to describe it. Couples may come to treatment for infidelity wanting to forgive, but may be calling it by different names. One or both partners may have a different word for forgiveness, which may also differ from the therapist's language. It is vital that the couple and therapist be on the same page in terms of having a clarified use of language for the forgiveness process.

I'm going to use the words as much as possible that they are using. And, after I get a clarification of what it means to them. So I 'can't let it go', I 'can't get over it', I 'can't forgive' her or him, 'I'm angry as hell and I don't know what is going to happen'. All these statements are statements that have a deeper meaning. So in good therapy, one of the first things is you need to get these meanings clarified.

THEME 4: TIME

Perhaps one of the most pervasive themes throughout the interview process was one of time. Two aspects of time that participants consistently discussed in relation to forgiveness of marital infidelity included: (1) the process of forgiveness requires time and (2) the topic of forgiveness should not be approached until the couple is ready.

Subtheme 1: Forgiveness takes time. To help couples move toward forgiveness of an extramarital affair, the therapist must understand that forgiveness requires time and is not a process that can happen overnight. One therapist described the way in which clients may view forgiveness and the time it takes to forgive.

You have to do it [forgive] immediately, or it has to be done within a time frame like you need to do it now, this month. Well, that's kind of unrealistic. I think you have the client work with that, that maybe forgiveness doesn't have to come in six or eight weeks. Forgiveness is a process and maybe a long-term process.

Therapists repeatedly commented on the importance of considering the fact that there are two individuals in the relationship, and that the partners might be in two different places, possibly lengthening the time forgiveness takes.

I think that you can't have a program that fits each couple. I mean, it's different depending on the individual's own circumstances. With some people it may take a long time to get through the emotional part of it. Again, I would not put a certain time limit or a certain, what I call 'stamped out' program on it.

Subtheme 2: Therapist timing of forgiveness. Participants suggested that the therapist be sensitive to the couple in terms of the timing of forgiveness interventions as well. When working with couples dealing with such a sensitive and potentially explosive topic, moving too quickly to forgiveness could be detrimental to the couple. One participant stated, "I listen for if forgiveness is a possibility, but I'm reluctant to move too quickly in that direction until I'm clear and they are clear what the forgiveness would be for." This therapist highlighted the significance of waiting for, and assessing,

whether it would even be useful to work toward forgiveness in the couple's relationship. Another therapist emphasized this point:

They want to hold onto the fact that it was offensive and it was wrong and so they don't want to forgive in the sense that it didn't happen. They want to forgive with a sense of 'reconciling' or 'learning from it' or 'letting it go' and figuring out a different way to make things better. I think you have to be real careful with forgiveness because forgiveness is an issue that comes way late in the game. You can't suggest forgiveness early on because people will blow up.

As implied by this therapist, part of practicing in an ethical manner involves recognizing the clients' readiness for forgiveness and waiting until the clients are ready before suggesting the option of forgiveness. Again, therapists—or clients—wanting to move too quickly to, or through, forgiveness could negatively impact a delicate relationship after an affair.

DISCUSSION

This study sought to provide greater insight about the process of incorporating forgiveness in the treatment of infidelity. Based on the interviews of the 10 therapists participating in this study it appears that forgiveness is closely tied to the treatment of infidelity, although these therapists described treating infidelity and then introducing forgiveness in a sequential manner.

For therapists in this study, assessing infidelity in both partners' family of origin was a component of the treatment of infidelity. In Dupree, White, Olsen, and LaFleur's (2007) content analysis of the literature of infidelity treatment, discussing family of origin was a part of the assessment process. They suggest that, in so doing, therapists help guide clients to focus more on process rather than content where infidelity is concerned. This finding is not a surprise given that assessment of family of origin is a part of the assessment process for marital and family therapists, particularly those that follow a Bowenian family therapy model (McGoldrick, & Gerson, 1985).

The therapists in this study also suggested the need to perform a relationship assessment. By doing a relationship assessment, the therapist will gain an understanding of the relational dynamics that might have precipitated the occurrence of infidelity as well as get a sense of whether the offense was a onetime event, or an ongoing affair. Dupree, White, Olsen, and LaFleur (2007) also discuss relationship assessment as one aspect of the clinical treatment of infidelity. By assessing the relationship history, therapists can gain insight as to whether or not forgiveness is safe in the current

relationship, one of several relationship variables of which therapists should be aware (Wade & Worthington, 2005) when considering the incorporation of forgiveness.

Mutual acceptance of responsibility is closely linked to what Gordon, Baucom, and Snyder (2004) describe in their multitheoretical model of infidelity treatment. In stage two of their model, couples explore the contextual factors that might have led to an instance of infidelity. In so doing, each partner gains a clearer picture of the state of the relationship when the infidelity occurred, and how each may have contributed to the precipitation of the extramarital involvement. It is important to note that this does not absolve the involved partner from responsibility for making the choice to engage in an extramarital relationship.

Psychoeducation about forgiveness and its process was one of the major themes suggested by the therapists in this study. Discussion of what forgiveness is and is not, as well as the process of forgiveness, fits with previous forgiveness literature (Enright et al., 1991; Kearns & Fincham, 2004; Wade & Worthington, 2005). Based on the findings of this study, educating clients about the meaning of forgiveness and its process will help guide the direction of treatment and avoid confusion of forgiveness with similar terms such as condoning, forgetting, and reconciliation.

Therapists participating in this study suggested that clarity is an important part of facilitating the forgiveness process. Clarity, in terms of the couple's wants and needs, and the use of forgiveness language, were two specific areas in which forgiveness could be facilitated. Clarification is important to help provide direction for therapy. For example, one partner might want to reconcile, while the other has no intention of remaining in the relationship. The therapist who has clarified wants and needs will help clients avoid confusion of forgiveness and reconciliation and can help facilitate the forgiveness process while waiting to make a decision about reconciliation until the end of treatment (see Gordon, Baucom, & Snyder, 2004). Clarification of forgiveness language, suggested by these therapists, fits with research by Butler, Dahlin, and Fife (2002). They suggest that therapists should language forgiveness in a way that will be beneficial to the individual (in this case the noninvolved partner) rather than couching it in beneficial terms to the relationship or the involved partner.

Possibly the most pervasive theme suggested by study participants was time. It appeared that time was critical in terms of helping clients see that forgiveness takes time. Time was also critical in relation to the therapist's decision of when to even broach the topic of forgiveness. Some clients may feel that forgiveness is an overnight process or should happen quickly. The forgiveness literature suggests that therapists discuss with clients the necessity of time when one is forgiving (Fincham, Hall, & Beach, 2006). Participants also suggest the need to be sensitive to timing issues when bringing up forgiveness with couples experiencing infidelity. This finding fits with Gordon,

Baucom, and Snyder (2004) and is somewhat contrary to Glass (2002). Timing is an area that has received limited attention in forgiveness research. These therapists suggest that cognizance and sensitivity should be included when determining when to have a discussion about the forgiveness of infidelity.

Limitations

One limitation of the study is the sample selection. The therapists were obtained via a convenience sample of a fairly homogenous group of therapists. Although the nature of the study—being qualitative—precludes a generalization of the findings, the study could have been strengthened by selecting a sample that is more representative of the AAMFT body of therapists or a less homogenous sample, which would have provided additional findings not available among the participant population used.

The study's second limitation is also related to the sample. Naturally, the small, homogeneous nature of the sample minimizes the generalizability of the findings. However, rather than attempt to make any overarching conclusions about all therapists' approach to forgiveness in treating marital infidelity, the purpose of this study was to use the experiences of a few therapists to generate ideas for discussion and further research on the use of forgiveness (discussed in greater detail below). Future researchers might wish to determine whether these findings can be duplicated with a more diverse sample.

A third limitation of the study lies in the interviewing methods of the study. The participants were asked to respond to the questions based on their recollection of cases in which they had treated marital infidelity. The results, then, are susceptible to common errors of recall, such as placing greater emphasis on techniques used in the most recent cases, over- or underestimating the prevalence or effectiveness of certain techniques, or simply forgetting to include certain dimensions that they felt were important to forgiveness work. These possibilities may have been increased by the fact that the clinicians did not receive prior notice of the topic of the interview and, therefore, did not have extended time to reflect upon their answers.

Finally, with qualitative studies comes the difficulty of condensing vast amounts of information into an efficient number of themes and subthemes. Though several precautions were taken to ensure that the chosen themes and subthemes accurately represent the information provided by the participants, the possibility remains that these themes do not fully capture the essence of the information as originally intended by the participants. The researchers did not conduct follow up interviews with the participants to verify the major themes and subthemes yielded from the data analyses. Thus, participants could neither confirm nor disconfirm whether the themes were in alignment with what the participants were articulating in their interviews. Therefore,

participants had no way of validating that their ideas were accurately represented in the study.

Implications and Future Research

The utility of the study lies in the potential guidance of clinicians when working with couples presenting with infidelity and desiring to engage in the forgiveness process. Participants in this study provide greater depth concerning the sequential treatment of infidelity and incorporating forgiveness. Their descriptions shed light on various interventions used in the treatment of extramarital involvement as well as commonly used means of both introducing and facilitating the process of forgiveness. Current and future therapists may potentially utilize the ideas presented here to get a sense of other therapists' approaches to treating infidelity and methods of promoting forgiveness in a sensitive and timely manner.

This study provides insight into areas of which therapists should be aware when incorporating forgiveness. Mainly, that clients will likely have differing conceptualizations of forgiveness than that of the therapist and that these conceptualizations may potentially interact. For example, when a client's conceptualization of forgiveness includes forgetting whereas the therapist's conceptualization includes a need to reconcile; the language used when discussing forgiveness could potentially influence the willingness to forgive; that clients may have misunderstandings about forgiveness and that a clarification of these misunderstandings might increase the likelihood of forgiveness; and that couples may come to the therapy room with a different forgiveness timetable than the therapist. As therapists attend to these critical elements, the treatment of infidelity and the use of forgiveness may help create better outcomes for couples.

As described in the literature review, research on infidelity treatment and incorporating forgiveness is limited. Future research could focus on whether the treatment of infidelity and discussing forgiveness come sequentially, as described in this study, or if it is more of an intertwined process. Additional research can address whether some psychoeducational aspects of forgiveness, such as bibliotherapy, are more useful to clients than others, such as having the therapist educate clients on the topic.

CONCLUSION

Infidelity is a couples problem that has far reaching and often damaging effects. As such, it is one that therapists find difficult to treat in therapy. Although research on the topic of infidelity and working toward forgiveness is limited, this study helps provide a thicker description of the process and interventions some therapists use while helping

couples work through the wake of infidelity and move towards a place of forgiveness.

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