INFIDELITY:
BEYOND THE LENS OF ADDICTION

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Important Background Information

Causes of Infidelity:
- Evolutionary Biology Perspective
- Sociological Perspective
- Psychological Perspective

Group Factors Related to Infidelity

Clinical Formulation
THE PHENOMENON OF INFIDELITY

- The phenomenon of infidelity has been in existence since the beginning of recorded human history and possibly earlier.
- Infidelity is a prevalent and cross-cultural human behavior.
- The devastating impact on the dyads it affects and the social groups to which they belong was significant enough to warrant the development of laws, codes of conduct, and religious taboos to discourage its occurrence.
Fact #1: Infidelity Is More Common than You Think:
- In 41% of marriages, one or both spouses admit to infidelity, either physical or emotional.
- 74% of men and 68% of women say that they would have an affair if they knew they would never get caught.
- Therapist surveys have identified extramarital sex as a common reason (46% of cases) given for seeking treatment.

Fact #2: Many Affairs Are Born in the Workplace:
- 36% of men and women admit to having an affair with a co-worker.

Fact #3: Infidelity Is a Clinically Challenging Issue that Clinicians Are Ill-Prepared to Treat:
- A survey of U.S. therapists revealed that therapists view infidelity as one of the most difficult therapeutic issues to treat, and its impact is seen as the second most damaging to the client’s relationship.
- A recent survey of MFTs found that a large majority of those sampled (74%) felt their training programs had inadequately prepared them to deal with infidelity disclosure and treatment.
WHAT CAUSES INFIDELITY?

Lenses to Examine the Etiology of Infidelity:

- Evolutionary Biology perspective
- Sociological perspective
- Psychological perspective
What Causes Infidelity?

**Evolutionary Biology Perspective:**

- Infidelity as a normal human behavior that is reflective of our adaptation to the pressures caused by the biological differences in reproductive strategies between males and females.

- For males, sexual variety and frequency of sexual encounters is the best strategy for ensuring genetic success.

- In contrast, females opt for monogamous mating strategies due to the long gestation period and the need for reliance on a partner who can provide the necessary resources needed for the survival of the offspring.

- Proponents state that sexual behavior is driven by the need to assure genetic success. This means that any behaviors related to sexuality, such as infidelity are also going to be influenced by that drive.
WHAT CAUSES INFIDELITY?

Support for the Evolutionary Biology Perspective:

- **Prevalence rates:** different rates of infidelity prevalence between males and females.

- **Differences in reaction to types of affairs:** infidelity response studies have shown that men tend to be more jealous of physical affairs while women tend to be more jealous of emotional affairs. An explanation for the difference between males and females has been attributed to the fact that male worries are about the legitimacy of the parental link to the offspring while female worries were attributed to concerns about the male partner’s level of investment in the relationship and the future reliability of that investment.

- **Differences in how males and females conceptualize and define infidelity:** females list higher numbers of affectionate behaviors such as hugging and holding hands in the category of infidelity behavior, while males tend to list higher numbers of physical sexual activities like touching genitals and intercourse as infidelity behavior.

- **What are your thoughts about this perspective?**
WHAT CAUSES INFIDELITY?

Sociological Perspective:

- **Socialization**: Females are socialized to put everyone’s needs ahead of their own, and males are socialized to avoid vulnerability. This type of socialization makes it difficult for females to express needs in the relationship and makes it difficult for males to successfully address the conflicts caused by the inability to meet those needs.

- **Power disparity**: Infidelity is the byproduct of the power disparity that individuals experience within the relationship as a result of societal processes related to sociological factors like race, gender, income education, etc. The power disparity creates a “top dog” and “underdog” dynamic in which the top dogs are hesitant to show vulnerability out of the fear of being seen as weak, and the underdogs are hesitant to express their needs out of the fear of causing conflict. This leads to an environment that is not conducive to intimate and healthy cohabitation.

- **External processes**: Infidelity is also influenced by individual cultural norms and socioeconomic factors in their immediate environment.
WHAT CAUSES INFIDELITY?

Psychological Perspective:

▪ Infidelity as a Symptom of Relationship Dysfunction
▪ Infidelity as a Symptom of Mental Health Issues and Individual Dissatisfaction
WHAT CAUSES INFIDELITY?

Relationship Dysfunctions:

- Unmet emotional and physical needs due to:
  - **Incompatibility**: Dissimilarity between partners can lead to dissatisfaction in the relationship, which often leads to seeking the extradyadic interactions with better-suited partners.
  - **Poor communication**: Without effective communication skills, individuals are unable to express their needs in the relationship.
  - **Poor conflict resolution**: A common dyadic factor contributing to infidelity is the hopeless view about resolving relationship conflicts.
  - **Overwhelmed with life stressors and Failure to recognize and adapt to changes.**
What Causes Infidelity?

Relationship Dysfunctions:

- Unmet emotional and physical needs due to:
  - Level of investment: There are many factors that can influence the partner’s level of investment in the relationship, such as attachment level, relationship satisfaction, motivation behind seeking the relationship, maturity, etc. The level of investment in a relationship can either serve as a risk or protective factor for infidelity in the dyad.
  
- Equality: According to Social Exchange Theory, relationships’ survival between individuals is contingent on their ability to exchange the shared resources which cannot take place without reciprocity. Partners who feel that they are under-benefited in the relationship may resort to infidelity to restore balance and equality in the relationship. Partners may also resort to cheating because they feel “less than” due to their limited contribution to the relationship to reassert one’s usefulness.
WHAT CAUSES INFIDELITY?

Mental Health Issues and Individual Dissatisfaction:

- **Bipolar I and II**: Excessive involvement in activities that have a high potential for painful consequences.

- **Personality Disorders**:
  - **Antisocial personality disorder**: fail to adhere to social norms and rules, are deceitful and lie often to achieve personal gains, and are impulsive and exhibit a reckless disregard for the safety of others.
  - **Borderline personality disorder**: instability in self-image, relationships, affect, and impulse control. They are usually engaged in extreme efforts to avoid real or imagined abandonment.
  - **Histrionic personality disorder**: attention seeking behavior and excessive emotionality.
  - **Narcissistic personality disorder**: feelings of grandiosity, the consistent need for admiration, and a lack of empathy to others.

- **Gender dysphoria**: “A marked incongruence between one’s experienced/expressed gender and assigned gender.”

- **Paraphilic disorder**: Individuals struggling with paraphilic disorders often resort to infidelity to fulfill their taboo sexual desires.
Mental Health Issues and Individual Dissatisfaction:

- **Addiction:**
  - **Sex addiction:** defined sex addiction as the preoccupation with sex which often includes an intense sexual drive. A sex addict’s thoughts are dominated by sexual activity
  - **Pornography addiction:** pornography can lead to sexual infidelity through two main effects: alteration of attitude about infidelity, and the compare-and-contrast effect.
  - **Substance addiction:** the physiological impact of substance abuse on the individual’s cognitive and impulse control faculties, both of which have been linked to the etiology of infidelity.
WHAT CAUSES INFIDELITY?

Mental Health Issues and Individual Dissatisfaction:

- **Child Sexual Abuse (CSA):**
  - CSA is a common phenomenon with a prevalence rate that ranges between 13%-32% in females and 5%-14% in males. The frequency, severity, and length of exposure to CSA determines the significance of the adverse impact on CSA survivors’ future ability to initiate and maintain healthy interpersonal relationships.
  - CSA exposure can lead to distorted sexual images and premature sexual knowledge, both having been linked to premature and high-risk behavior during adolescence and maladaptive sexual behaviors in an adult’s life.
  - A national survey of married American females revealed that CSA survivors are four times more likely to be engaged in affairs in comparison to non-CSA survivors (Whisman, 2006).

- **Psychological distress:** defines psychological distress as the unpleasant emotional states that impact our level of functioning and our ability to perform the daily tasks needed to live a healthy life. major events like job loss, family, death, medical illness, new transitions. Participants with depleted self-control are more likely to cheat.

- **Self-esteem, self-acceptance, and self worth.**
Sex Differences:

- Cultural script theory states that sex, and the gender identity associated with it, guides how we form attachment and romantic relationships. For example, females are encouraged from an early age to focus on emotional connectedness; however, males are socialized to focus on the physical and sexual aspects of the relationship.

  - **Differences in prevalence rates:** some studies show that prevalence rates of infidelity are significantly higher in males than females. Such studies found that being a male increased the likelihood of cheating by 79%. Other studies show that the prevalence rate of infidelity in females was significantly higher than males: 31% vs. 24%. Other studies suggest prevalence rate disappears with participants over the age of 40.

- What do you see in your clinical practice, and what do you think is the cause of the inconsistency in findings?

- **Differences in motivation behind engaging in affairs:** Studies indicate that females tend to pursue affairs due to relationship dissatisfaction, while males pursue affairs to fulfill the desire for excitement. In contrast, males’ motivations for infidelity stem from the sense of entitlement while a female’s motivation stems from disappointment caused by failing to experience the romantic ideals as well as rebellion against the constriction caused by the gender inequality experienced in the relationship.

- Do you believe that this is true?
Sex Differences:

▪ Differences in conceptualization and attitudes about infidelity: females tend to list a wide range of non-sexual behavior under the category of what is considered as infidelity behavior in comparison to males. Furthermore, males tend to have a more accepting attitude toward infidelity behavior as well as a willingness to engage in this behavior in comparison to females.

▪ What do you think is the reason for such differences, and how can these differences effect the therapeutic intervention and clinical formulation?

▪ Differences in reactions to infidelity: Surveys show males tend to be more upset about the discovery of a sexual affair, while females tend to be more upset about emotional affairs. But both sexes report feeling a greater threat if the affairs involved a third party who was an ex-romantic and/or sexual partner to the unfaithful partner.

▪ Is this consistent with what you observe in clinical practice? What is the explanation for such differences?
GROUP FACTORS RELATED TO INFIDELITY IN THE LITERATURE

Socioeconomic Status:

- **Income level:**
  - The literature has mixed findings about the correlation between income and infidelity.
  - Findings from the analysis of the Ashley Madison website data revealed that couples with children and single-earning males are more likely to engage in infidelity in comparison to couples with similar incomes.
  - Couples with similar income levels have a higher aggregated total which leads to less financial stress. Furthermore, the similarity of income is indicative of compatibility and equality in the relationship, which has been seen as a protective factor against infidelity.

- **Education:**
  - The literature review shows inconsistent findings regarding the influence of education on the probability of engaging in infidelity behavior.
  - The role of education should be examined through a partner’s intellectual compatibility, earning contribution, and views about sexuality.
GROUP FACTORS RELATED TO INFIDELITY IN THE LITERATURE

Socioeconomic Status:

▪ Occupations:
  ▪ Recent studies highlight that the unique demands of certain occupations as well as the specific workplace culture might be a contributing factor to infidelity behavior.
  ▪ Occupations with a high risk for infidelity share the following components: frequent travel, exposure to trauma, long stressful hours, and unhealthy work environment.

▪ Place of residence:
  ▪ Place of residence contributes to infidelity in many ways, but the most salient effect can be seen in the demographic distribution that directly impacts the number of available spousal alternatives. Sex ratio differences between males and females play an instrumental role in increasing access and opportunities for infidelity behavior.
  ▪ People who live in large cities and urban areas are more likely to engage in infidelity. Chohaney and Panozzo (2016) explain that this could be attributed to the liberal social values associated with living in a big city which, at times, include unconventional sexual values.
  ▪ This is why you need to gather this history about your clients to have a better understanding of the different factors related to the affair.

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GROUP FACTORS RELATED TO INFIDELITY IN THE LITERATURE

Other Factors:

- **Relationship status:**
  - The relationship status of the dyad influences the probability of infidelity through two main factors: level of investment in the relationship and the level of stress experienced in the relationship.
  - The rate of couples engaged in infidelity is higher among dating couples than their married and/or engaged counterparts.
  - If this is true, wouldn’t the majority of your infidelity clients be ones who are not engaged or married?

- **Religiosity:**
  - Partners who report a high level or religiosity report fewer incidents of infidelity behavior.
  - Closeness to God and involvement in the religious community increases their commitment to fidelity to their partners.
  - An interesting study showed that religious dyads are more likely to seek divorce after the discovery of an affair in comparison to non-religious dyads.
GROUP FACTORS RELATED TO INFIDELITY IN THE LITERATURE

Other Factors:

▪ Race and ethnicity:
  ▪ The racial and ethnic variation of prevalence rates can be attributed to the various impact of cultural norms and sex ratios of the ethnic and racial groups.
  ▪ Regarding the cultural norms, ethnic and racial membership in groups that adopt accepting views of infidelity is more likely to increase the probability of engaging in infidelity behavior.

▪ Sexual Orientation:
  ▪ Unfortunately, the existing body of literature regarding romantic relationships is often centered around heterosexual relationships with mono-normative values.
  ▪ Historically, LGBTQ populations have been excluded from such studies, and the few times they were included, the byproduct was reinforcing mono-normative values and practices of a monogamist, heterosexual population.
  ▪ Are there any unique challenges you can think of regarding infidelity work with members of the LGBTQ community?
Data Needed for Clinical Formulation:

▪ Past and current mental health issues:
  ▪ DSM5 dx
  ▪ Past trauma
  ▪ Self-esteem, self-worth, and self acceptance
  ▪ Current support system

▪ Socioeconomic status:
  ▪ Income level
  ▪ Education
  ▪ Occupations
  ▪ Place of residence
CLINICAL FORMULATION

Data Needed for Clinical Formulation:

- **Cultural background:**
  - Religiosity
  - Race
  - Ethnicity
  - Cultural identity

- **Family of Origin Culture:**
  - Relationship models associated with primary caregiver
  - History of abandonment and trauma
  - Exposure to infidelity within the family system
  - Impact of family of origin on relationship worldview and adult attachments
Family of Origin Culture:

- **Video #1**
  - Married, Latino couple in early 40’s.
  - Been together for 15 years.
  - Multiple emotional and sexual affairs, the most recent took place 2 months ago
VIDEO #1

https://drive.google.com/open?id=1xAqX4xnGSksZN5TTs94Q1buNylSHRafH
EXERCISE YOUR BRAIN

**Family of Origin Culture:**

How has this couple’s family of origin culture contributed to their recent incidents of infidelity?
CLINICAL FORMULATION

Data Needed for Clinical Formulation:

- Sexual health and identity:
  - Sexual Orientation
  - Any performance, desire, pain conditions
  - Menopause/Andropause
  - Hormone therapy

- Major life events (positive or negative):
  - Diagnosis of a major medical issue
  - Newborn
  - Promotion
  - Death of a family member or a major loss
**CLINICAL FORMULATION**

**Data Needed for Clinical Formulation:**

- **Past relationships’ history:**
  - How many long-term past relationships they both had
  - How and why these relationships ended
  - Was there any infidelity involved, and how was it handled?
  - How did the past experience shape their view about relationships?

Opportunity to provide empathy if you find out about previous traumatization and reframe that it is not about the betrayed.
**EXERCISE YOUR BRAIN**

**Past Relationship History and Clinical Formulation:**

- **Video #2:**
  - Bi-racial couple in late 30s.
  - Been together for 4 years.
  - Started the relationship with one another via an affair.
  - Both were engaged in multiple mixed affairs that took place 3 years ago.
VIDEO #2

https://drive.google.com/open?id=1oA_N8_AJl9Z_WbSSIXPh7Rd_tNgDzcf
EXERCISE YOUR BRAIN

Past Relationship History and Clinical Formulation

- How have past relationships contributed to the couple’s recent incidents of infidelity?
Data Needed for Clinical Formulation:

- **Current Relationship:**
  - What were the circumstances that led to starting the dyad relationship?
  - How and why did the relationship progress to the point of exclusivity?
  - What are some of the significant events and milestone in the couple’s relationship, and how did these events impact the relationship?
  - Were there any significant events that impacted the couple’s level of satisfaction in the relationship?
  - How were these issues handled?
CLINICAL FORMULATION

Data Needed for Clinical Formulation:

- **Relationship Dynamics:** How does the couple fare in the following areas:
  - Compatibility
  - Communication
  - Conflict Resolution
  - Managing Life Stressors and Adapting to Change
  - Level of investment
  - Equality

Be aware of how you collect history. Don’t share your clinical guesses and don’t make it predetermine the cause. This is simply context from which you can interpret the story. Differences between assessment and exploration.
Areas of Risk Assessment Should Include the Following:

- Current and past suicidal/homicidal ideation assessment
- History of psychiatric hospitalization and mental health treatment
- Past and current use of psychotropic medication
- Past and current use of drugs and alcohol
- Current medical conditions that need and require frequent treatment and monitoring
- History of incarceration or trouble with the law
- History of domestic violence