

A Family Affair: Examining the Impact of Parental Infidelity on Children Using a Structural Family Therapy Framework

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Abstract Infidelity has a permeating impact on social systems, but no system is more impacted by infidelity than the nuclear family. This paper examines the impact of parental infidelity on the family using a structural family therapy (SFT) framework. Conceptualizing and treating infidelity from an SFT approach provides a systemic understanding of how interactions between the parental units about infidelity impact parent–child dynamics. Clinical recommendations are outlined for couple and family therapists to help families find healthy and adaptable ways to create and maintain structures that minimize the harmful impact of infidelity on the family system.

Keywords Parental infidelity · Structured family therapy · Boundaries · Children

A sizeable minority of couples report having engaged in infidelity while married. Estimates range from 2 to 33 %, depending on the particular data source used (Allen et al. 2008, 2012; Atkins et al. 2001; Whisman et al. 2007; Whisman and Snyder 2007). The literature on couples therapy however, suggests these rates may be conservative. Infidelity is one of the most commonly reported presenting problems in couples therapy and one of the most difficult problems to treat (Doss et al. 2004; Fife et al. 2008; Moller and Vossler 2014).

The prevalence of infidelity is concerning given its link to numerous deleterious outcomes. Interpersonal conflict, family disruption, violence, psychological distress (Amato and Hohmann-Marriott 2007; Cano and O’Leary 2000; Levine 2005; Lusterman 2005; Scheinkman 2005; Snyder 2005) are all consequences of infidelity. Moreover, divorce rates are significantly higher among married couples that have experienced infidelity. A recent analysis of three clinical infidelity studies conducted by Marin et al. (2014) revealed that 53 % of infidelity cases ended in divorce within 5 years of couples therapy, compared with 23 % of cases where infidelity was not reported.

Not surprisingly, the consequences associated with infidelity extend beyond the intimate partner dyad. An estimated 11–21 % of individuals with children commit infidelity (Spence 2012; Weigel et al. 2003). Parents who are unable to effectively cope with infidelity expose their children to increased conflict (Blodgett Salafia et al. 2013) in addition to trauma and grief like symptoms (Dean 2011). Parental infidelity can also engender feelings of guilt, anxiety, fear, worry, depression, shock, and aggression in children; all of which can inhibit healthy emotional development (Ablow et al. 2009; Blodgett Salafia et al. 2013; Dean 2011; Lusterman 2005). Despite, the sizeable practice of infidelity among the parental population and its impact on children (Duncombe and Marsden 2004; Levine 2005; Nogales 2009; Platt et al. 2008) there are a pronounced lack of clinical studies and recommendations for how to treat families dealing with infidelity (for an exception, see Lusterman 2005). To bridge the gap in the literature, the current article will focus on conceptualizing and treating parental infidelity using structural family therapy (SFT), an approach that for decades has been used to successfully treat families presenting with a wide array of stressors.

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Defining Infidelity

In this article the act of infidelity is defined as engaging in an emotional or sexual relationship with a secondary partner. The definition extends to individuals engaged in cybersex infidelity (also referred to as cyberaffair); a growing form of online infidelity that can be injurious to couples in committed relationships (e.g., Fincham and Beach 2010; Parker and Wampler 2003). Despite notable differences between emotional and sexual infidelity (Blow and Hartnett 2005; Buunk and Dijkstra 2004), there is considerable evidence to show the analogous impact both can have on relationships (Negash et al. 2013). Either form of infidelity is often considered a severe transgression and violation to the commitment in a relationship and may evoke a myriad of feelings for both partners including, but not limited to, betrayal, disappointment, shame, guilt, and sadness (Fife et al. 2008; Hall and Fincham 2005). Additionally, both emotional and sexual infidelity are significantly associated with relationship dissolution (Negash et al. 2013) and can have deleterious implications on the family (Nemeth et al. 2012). Given the similarities in consequences between emotional and sexual infidelity the term parental infidelity is used in this article to encompass emotional and sexual infidelity. Furthermore, despite how infidelity is originated and impacted by the intimate partner dyad (i.e., adult romantic relationship) and the interplay between the intimate partner and parental dyad (Young et al. 2009), the objective of this paper is to highlight the impact of infidelity on the children. Therefore, as opposed to examining infidelity in the context of the intimate partner dyad, this article will focus on the parental dyad and parent–child dyad or subsystems.

Parental Infidelity and Children/Adult Children

Despite the lack of empirical research linking parental infidelity to children and adult children, existing research suggests the need to protect children from the implications of parental infidelity across the life-course. Accordingly, the following sections highlight some of the potential immediate and long-term intra- and inter-personal consequences associated with parental infidelity among children.

Young Children Versus Adolescents

The impact of parental infidelity on children can vary based on the child's gender, age, and even culture (Lusterman 2005). Children's state of cognitive and emotional development during this sensitive period may inhibit or perpetuate the exercise of unilateral loyalties,

parentification, and feelings of blame, betrayal, and abandonment (Duncombe and Marsden 2004). Unlike young children and pre-adolescents, adolescents may be less likely to blame themselves when exposed to parental infidelity (Duncombe and Marsden 2004). Despite not blaming themselves, adolescents may still have difficulty processing the causes and implications of parental infidelity. Accordingly, their confusion could turn to fear, which they may subsequently internalize.

Unlike adolescents, young children and pre-adolescents may not issue a moral-value on the infidelity and thus, may be less likely to experience feelings of betrayal. Younger children who are more likely to be informed of the infidelity may feel neglected and fear that their parents no longer love them (Duncombe and Marsden 2004). Adolescents with developed cognitive abilities may be more inclined to place responsibility onto one parent and exercise unilateral loyalties and create dysfunctional triads that can continue through adulthood. Brown (1991) suggests that an overburdened adolescent often adopts a parentified role. The added pressure of caring for the parent who did not commit infidelity may elicit feelings of resentment and anger toward the parent who did commit infidelity. An adolescent with a parentified role may feel compelled to control all aspects of their environment. "Infidelity robs children of childhood and the joys of completely trusting the most important authority figures in their lives" (Wardle 2002, p. 127).

Sexual Development

Human sexuality expands over a long and complicated continuum throughout the course of the life span. Sexuality is composed of and influenced by a number of factors including biological disposition, culture, family-of-origin, and even socio-economic status (e.g. Kaplan 1983; Leiblum 2007; Schnarch 1991). Kaplan (1974) stated that "the intense pleasure of sexuality makes it a powerful and ubiquitous force in human existence, it is also readily associated with fear and guilt and thus highly vulnerable to the establishment of conflict" (p. 146). Any normative experience of fear and guilt children experience from their sexual development may be exacerbated if they learn of a parent's sexual infidelity. Consequently, this may shift the child's sexual response system either temporarily or long-term, depending on the family of origin's condition before, during, and after the discovery of infidelity (Wardle 2002).

Schnarch (1991) noted that a rupture in parents' sexual relationship is often noticed by children and subsequently impacts the child's erotic map. Adolescents' experiences of infidelity may be compounded by their efforts to cope with

their emergent sexuality (Duncombe and Marsden 2004). More recently, Pearman (2010) found that children and adolescents exposed to parental infidelity experienced both cognitive and emotional shifts (e.g. shame, guilt, sadness, etc.) that subsequently influenced the development of abnormal and distorted sexual scripts and schemas as they got older (Pearman 2010). The formation of negative sexual schemas has been associated with the development of rigid sexual expression, heightened anxiety during sexual activity, and sexual avoidance (i.e., Andersen and Cyranowski 1994; Andersen et al. 1999; Cyranowski and Andersen 1998).

Adult Children's Romantic Relationships

Despite the paucity of research on the impact of infidelity on young children and adolescents, there is growing research examining the impact of parental infidelity on adult children's romantic relationships (see Pearman 2010; Platt et al. 2008). Consistent with this, therapists treating couples dealing with infidelity describe how "the 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" (Olmstead et al. 2009, p. 55).

Using a sample of adult children whose parents committed infidelity Nogales (2009) found that 80 % of participants' attitudes toward love and relationship were influenced by their parent's infidelity. The same study also found that 70 % of participants reported that their parent's infidelity had inhibited or reduced their ability to trust their romantic partners. Trust plays a vital role in the establishment and maintenance of healthy and satisfying relationships. Gottman (2011) states, "Happier couples, for whom trust was not missing, described the concept of trust as the mysterious quality that somehow created safety, security, and openness for both of them" (p. 39). Trust also impacts one's willingness to safely explore their sexuality (Gottman 2011). Among adult children exposed to parental infidelity, a weakened or non-existent sense of trust may inhibit their ability to experience a heightened sense of sexual curiosity and limit their willingness to accept guidance and support from romantic partners. Individuals who experience less trust in their relationship are more likely to engage in infidelity (Cramer et al. 2000). Consistent with this, adult children exposed to infidelity in their childhood are more likely to engage in infidelity within their own romantic relationships (Fish et al. 2012; Nogales 2009; Platt et al. 2008). Overall, the mere presence or absence of parental infidelity alone may not determine whether or not children experience the negative outcomes described.

A SFT Framework

The tenets of SFT suggest that families function by the way they are organized and that problem behaviors and interactions within families are created and resolved systemically. From a structural perspective, a family is organized into subsystems. For subsystems to operate effectively it is imperative to keep appropriate interpersonal boundaries between the different members of the family and subsystems (Nichols and Schwartz 2001). Boundaries are invisible barriers that regulate interpersonal contact. Stressors in the family, such as infidelity, can disrupt the family structure and produce dysfunctional boundaries; which can evoke deleterious individual relationship outcomes and lead to further disruption or fractures in the family (Winek 2010). For instance, the effects of infidelity on the intimate partner subsystem can generate an environment where one or both partners withdraw support, withhold affection, and avoid communication (Schade and Sandberg 2012). Instead of turning towards their partner, individuals may turn to their children, relatives, and friends for support and to make sense of the infidelity (Olson et al. 2002). Subsequently, this response may contribute to isolation and conflict between family members.

When families experience difficult and non-normative events, family interactions can change radically (Segrin and Flora 2005). Infidelity is one of a myriad of events that can negatively alter the family system; however the extent to which infidelity engenders betrayal, shame, disillusion, and loyalty conflicts throughout family warrants a closer look at how infidelity influences the family structure. That said, not all families are impacted by events, such as infidelity, in the same way. Infidelity can result in conflict, divorce, but bring some couples closer (Reibstein 2013). According to Platt et al. (2008) the way families organize themselves when parental infidelity is exposed leaves a large imprint on adult children. Some families are able to reorganize themselves to protect their members from the harmful impact that infidelity can have on the system. This reorganization allows them to heal quickly and even grow strong. Conversely, the path to healing can be complicated, painful, and prolonged if families are unable to adapt to changes in the system (e.g., growing conflict between the parents; physical and emotional distance between the parents) once infidelity is exposed (Levine 2005; Mark et al. 2011; Snyder 2005). Thus, some families may never fully recover from parental infidelity. Targeting family structural patterns may minimize the impact of parental infidelity on parental dyads and subsequently children. That said, parental infidelity may be a result of preexisting ruptures in the family structure or a catalyst of them. Either way families are vulnerable to ongoing problems in the family if they are

unable to repair ruptures in the structure once the infidelity has been exposed.

Diffused Boundaries

According to SFT, boundaries can become pathological when they are either diffused (leads to enmeshment) or rigid (leads to disengagement; Minuchin 1974). In the context of infidelity parents who adopt diffused boundaries around discussions of infidelity typically over-inform their children and leave them feeling overwhelmed. Some children may develop feelings of disillusionment and question whether or not they ever really knew the parent that committed the infidelity (Dean 2011). Further, the challenge for children may lie not only with being aware of the infidelity firsthand, but also with the subsequent formation of loyalty conflicts, developmentally inappropriate parent–child boundaries, and pathological alliances (Duncombe and Marsden 2004; Sori 2007). Siblings may split their loyalties to different parents, dissolving the child subsystem (Minuchin 1974; Sori 2007). Sometimes a child may side with the parent who committed the infidelity (typically the child closest to the parent prior to the infidelity) as a way to protect them from the ridicule and judgment of other family members and relatives. Conversely, “some children react angrily against the parent whose behavior threatens the integrity of their family, their world” (Wardle 2002, p. 112). Additionally, children may become parentified when either parent burdens them with disclosure of developmentally inappropriate information. Diffused generational boundaries may have grave implications on children’s behaviors (Minuchin 1974). Children may experience trouble establishing a sexual identity and have reduced self-esteem (Wallerstein and Kelly 1980; Westfall 1989). Additionally, their ability to use the flexibility (i.e., to negotiate roles and adapt to change) needed to build and maintain intimacy in their adult relationships may be compromised.

Rigid Boundaries

Imbalance in the family system that stems from stressors may also evoke family members to adopt rigid boundaries (Blodgett Salafia et al. 2013; Cano and O’Leary 1997; Lusterman 2005; Minuchin 1974; Sori 2007). Rigid boundaries around the discussion of infidelity may result in children feeling under-informed and isolated. Under-informed children may never get to ask questions related to the infidelity, either because the parents deemed it inappropriate, embarrassing, or unimportant to provide some or any explanation (Lusterman 2005). However, children do not necessarily have to be directly told about the infidelity to be affected by it. They can pick up the discord from

subtle social and behavioral cues. Children who sense hostility and secrecy between parents can become considerably distressed (Minuchin and Fishman 1981). Children may discover that there is an issue between their parents, because it is impeding either or both parent’s ability to function effectively as a parental subsystem (Duncombe and Marsden 2004). Minuchin (1974) argued that this drastic change in parental roles results in the parents’ inability to separate their parental and spousal functions, thus causing confusion, chaos, and pathological alliances within the family system.

Under-informed children may become burdened by unresolved feelings that stem from avoiding the discussion of infidelity (Brown 1991). Some children may draw their own conclusions about the reasons for their parents changing relationship and blame themselves for their parent’s conflict; which consequently can increase their internalizing and externalizing problems (Ablow et al. 2009; Fosco and Grych 2010; Grych et al. 2004). While it seems reasonable to refrain from informing children about parental infidelities, some disclosure is needed to create clear boundaries within the parent–child subsystem. Disclosure does not have to be explicit to be informative (Minuchin 1974). In most cases, it is in the best interest of the child to only be apprised of necessary information and reassured that the conflict is neither his nor her fault, nor is it their responsibility to fix it (Brown 1991; Weeks et al. 2003).

Rigid Triads

Children sometimes become involved in a dysfunctional structure called a rigid triad (Minuchin 1974), wherein two members of a system stand against another member. A rigid triad occurs in several forms. In triangulation, each parent attempts to inadvertently get the child to join in a cross-generational alliance against the other parent (Minuchin 1974). Older children in particular are more likely to be involved when the parents are engaged in hostile conflict (Davies et al. 1996). When parental infidelity occurs, children may become involuntarily entangled in an ongoing power struggle, wherein they become leverage. Parental infidelity can spark considerable conflict and evoke both parents to engage in a reciprocal blaming process that polarizes them (Gordon et al. 2005). Children’s desire to protect and maintain loyalties to both parents leave many children triangulated for long and painful periods of time.

Coalitions, which are less transparent and arguably more voluntary form of rigid triads, occur when two members of a family oppress a third member of a family by forming a rigid dyadic alliance. In families distressed by infidelity, parents (usually the partner who did commit the infidelity) may attempt to draw children into coalitions against the

other parent (Brown 1991). Children may be assigned inappropriate roles within the family, such as acting as a messenger between their parents (Duncombe and Marsden 2004). In other cases parents may knowingly force their children into a cross-generational coalition to punish the parent who committed the infidelity. Regardless of parents' intentions, the consequences of coalitions can create greater conflict in the family and have negative cognitive and emotional consequences on children (Fincham et al. 1994). Coalitions with the parent who did not commit infidelity may make it difficult for children to empathize with the parent who did commit the infidelity. Thorson (2009) found that a lack of empathy can impede forgiveness towards the parent and healing from the infidelity (Thorson 2009). The author also found that children who were unable to forgive the offending partner after the infidelity were more likely to report being less satisfied with the parent as adults (Thorson 2009).

Clinical Implications

Treatment Unit

Treating Families

Despite having problems in their intimate partner or parental dyad many couples use the metaphor of the problem child when entering family therapy (Young et al. 2009). This is likely due to detouring—a form of a rigid triad wherein the child serves to maintain the illusion of a stable intimate partner subsystem (Minchin 1974). They do so by shifting their focus away from their relationship problems and towards their child's behavior problem(s).

In general, children may become delinquent in school, engage in physical fights, experience depressive symptoms, alcohol use, etc. because of conflict in the intimate partner or parental dyad (Harold et al. 2004). Similarly, in the context of parental infidelity, children may find ineffective ways to cope with the partner conflict that either stems from or is perpetuated by the infidelity (Wardle 2002). Given these negative child outcomes, it is not uncommon for families to focus on the child's problem rather than the underlying conflict contributing to the child's outbursts. When families enter therapy complaining about their child's internalizing or externalizing problem(s) therapists should assess the family structure and how the family contributes to and maintains the problem (Micucci 2006). More specifically therapists should assess for how a child's presenting problem maintains homeostasis in the family. Infidelity creates and perpetuates preexisting instability for many couples and engenders them to withdraw communication. Engaging in a united effort to help their child gives

parents a reason to act as a team again and gives them a reason to avoid dealing with the problems in their intimate partner subsystem. That said, despite the family's role in engendering or maintaining the child's presenting problem therapists must be careful not to disrupt the family system too quickly or harshly by having them focus their attention on underlying systems that maintain the presenting problem (Young et al. 2009).

Therapists who suspect the family is holding onto a family secret, such as parental infidelity, are encouraged to meet with the parents privately to assess their relationship further. Some parents may admit to infidelity, but may be unwilling or uncomfortable discussing the infidelity (especially if the infidelity was not identified by the family as the presenting problem). "To focus on problems of intimacy when the presenting problem is the child (even if the therapist suspects that the parents' relationship is part of the problem) would be to communicate to the family members that the therapist does not understand and value the problem as they see it" (Young et al. p. 405). Thus, therapists should adhere to the clients' boundaries and refrain from discussing the infidelity. Therapists should join with the parents by validating their concerns or hesitations and remind them of the importance of assessing and working with the whole family as a way to treat what they describe as the presenting problem. Despite focusing on the presenting problem (i.e., the problem child) however, therapists can still help restructure the family to the extent that it helps the family get unstuck so that they can work through the infidelity. For instance, therapists may help couples work as a team within their parental subsystem to help see their child through their internalizing or externalizing problem. Successfully working together to parent their child may provide parents incentive to collaborate more within the parental subsystem as a means to deal with other problems, including infidelity.

Other scenarios should also be considered. Some couples may not be very willing to discuss the infidelity in conjoint couples therapy, but may bring it up in family sessions. In such instances therapists should model clear boundaries in session by advocating for couples instead of family sessions, at least for a period of time. Alternatively, some parents who enter therapy with their child as the presenting problem may quickly agree to participate in conjoint couples therapy. No matter how easy or difficult it may be to convince couples to participate in conjoint couples therapy, therapists should also reassure couples of the benefits of working on the parental relationship as a means to help treat the whole family. In couples therapy therapists should work to strengthen the parental subsystem and set clear boundaries between the parent-child subsystem so as to avoid overexposing children to information

regarding how the infidelity is being processed in the parental subsystem.

Treating Couples

In couples therapy infidelity is typically addressed in the context of the partner dyad instead of the parental or parent–child dyad (Jeanfreau et al. 2014). Although couples therapy can be beneficial for couples experiencing infidelity, forgiveness and healing can take time. During that time many couples adopt or maintain family structures that have adverse consequences on all members of the family. Utilizing a systemic perspective when working with couples through infidelity provides a broader understanding of its full impact on the family and allows for the family to work as a unit (Dean 2011). More specifically, we recommend a SFT approach in couples therapy to help couples to reorganize their families into positions that can help them manage and heal their relationships after the discovery of infidelity.

Breaking up coalitions between parents and children helps parents establish clear boundaries between the parent and parent/child subsystems. This provides parents more opportunity to be mutually accommodating and interdependent; which consequently can improve the quality of their romantic relationship (Dalglish et al. 2014; Johnson 2013; Young et al. 2009). Thus, in addition to minimizing children’s exposure to the pain and suffering associated with parental infidelity, addressing parental infidelity from a SFT lens may also have the added benefit of improving intimacy between partners (Young et al. 2009). Studies that show a negative link between intimacy in one’s primary relationship and infidelity (Millner 2008) also suggests that promoting intimacy by restructuring the intimate partner and parent dyad may also help couples heal from infidelity and may reduce the risk of repeated incidences of infidelity.

Interventions

Since clients typically determine the initial unit of treatment therapists should be prepared to treat either the parental unit alone or the family. The SFT interventions in the following sections are recommended for therapists working with either unit of treatment. The recommendations are drawn from the first author’s clinical experience working with couples and families struggling to rebuild their relationships after parental infidelity is exposed. While these interventions proposed in this article are not comprehensive or unique to dealing only with parental infidelity, they do provide a snapshot of the structural landscape through which to treat parental infidelity.

Joining

A fundamental aspect of SFT is for therapists to take a non-judgmental position when joining with the couple or family (Winek 2010). When working with couples where infidelity is present taking a non-judgmental position will be especially important to help couples be open and move towards change (Scheinkman 2005). When joining the family system the therapist may alternate between times of aligning with the system as a whole to aligning with various subsystems (Minuchin 1974). In aligning with various aspects of the system, the therapist works to insure that each member of the family feels understood by demonstrating empathy, listening, and displaying general interest in the family (Hoffman 1981). The therapist can also demonstrate how to balance closeness and distance within the family around issues geared towards varying subsystems. When working with infidelity, joining through alignment with the varying subsystems could aid in encouraging the family to address the issue of infidelity from a family systems perspective rather than isolating treatment to an issue that has the effect of ignoring the impact of the infidelity on the family system.

When all members of the system are present the therapist could align with the sibling subsystem by playfully highlighting the idea that the problem may reside within the parental subsystem. This way the therapist can begin unbalancing the system so as to try to move towards some conjoint couples work. For instance the therapist may say, “so, you were finally successful in getting your parents to come to therapy.” Similarly the therapist can return the focus to the parent subsystem by asking the parents, “How are you able to focus on your relationship with so much attention placed on your child?” These statements have the effect of unbalancing the system as the focus shifts from one perceived problem area to the possibility of other areas of focus.

Countertransference is identified as positive or negative feelings a therapist may experience while working with clients (Peluso and Spina 2008). Oftentimes countertransference is linked to a therapist’s past personal experience. Not surprisingly, therapists who experience negative countertransference because of their own personal experience with infidelity (i.e., was the child of a parent who committed infidelity, or as an adult was the offending or non-offending partner) may find it difficult to effectively join with clients (Peluso and Spina 2008). Therapists who do not effectively join with clients have difficulty successfully implementing directives used to restructure the family (Minuchin 1974). Thus, to help families adopt structures that help them find functional ways to deal with parental infidelity therapists must be careful to guard against countertransference.

Maintenance

Treatment should be based on the structure of the system rather than on the presenting problem (Winek 2010). Thus, to best understand the existing family structure therapists may benefit from engaging the family through maintaining certain structures and/or patterns (Minuchin 1974). Maintenance has the effect of demonstrating support and respect for the system, which helps therapists gain acceptance and influence within the family. With regards to infidelity, it may be important for the therapist to begin their work by building rapport with the partner committing the infidelity if that partner is in the position of head of household. In so doing, the therapist is maintaining the family structure that places the client who committed the infidelity at the top of the family hierarchy. The use of maintenance in this way allows the therapist a way into the system that is not perceived as a direct threat to the family hierarchy (Brown and Christensen 1999). Clinicians should be mindful of the potential resistance from clients when they attempt to preserve the family hierarchy. Subsequently joining with all members of the family may reduce members of the family from further resistance.

Showing empathy and understanding without interfering with rules of the family is another form of maintenance (Hoffman 1981). For instance, therapists should be mindful of how much empathy they show the partner believed to be betrayed by the infidelity, relative to the offending partner. Albeit difficult sometimes, especially if issues of countertransference arise, it is important that therapists show empathy and express validation for the offending partner. However, while showing empathy the therapist should be careful not to send the message that the offending partner is not responsible for the infidelity. Taking this approach to handling the infidelity is similar to Fife et al. (2013), where they suggest examining the relationship context in an effort to facilitate understanding and forgiveness around the infidelity. This examination often highlights the infidelity as a symptom of relational issues, which in turn may help therapists experience and express empathy for each member of the system. Consequently, this may also balance therapists' alliances with each member of the system and reduce any immediate threat to the existing family structure.

Boundary Making

Setting clear boundaries can be critical for families experiencing parental infidelity and is essential to the therapeutic process. In many ways infidelity is a violation of the boundaries in the partner subsystem (Cravens et al. 2013). At the outset of treatment a boundary around the partner subsystem should be established that dissolves the

alignment the offending partner has with the extra-marital partner (Fife et al. 2013). Establishing this boundary at the outset of treatment focused on infidelity may allow the therapist to help the couple begin the work of reestablishing trust in the relationship.

Therapists use boundaries to discern interaction processes that they believe should be open to certain family members, but closed to others. Under circumstances where the parents or children address the infidelity in session therapists are encouraged to set boundaries by meeting privately with the parental unit to assess their relationship in the context of the infidelity more carefully. Meeting with varying members of the family system may have the effect of highlighting to the family that each system is distinctly different; which may help facilitate the reorganization of the system.

Blocking

Some parents may want to share considerable details about the infidelity in the presence of their children. The therapist's goal is to help promote clear boundaries between the parent/child subsystems so that the family can find adaptive ways to cope with and work through the infidelity. More specifically, in family sessions where children are included in discussions about the infidelity (e.g. when the adolescent is considered old enough to cognitively and emotionally process the infidelity) therapists should exercise boundary making by blocking. The primary objective of blocking is to weaken and eliminate rigid triads and to help establish clear boundaries between the parent/child hierarchies.

Therapists may use the blocking techniques by rearranging themselves or their clients (i.e., to break up coalitions) in the therapy room or by asking children to leave the room so that they can meet with the parents alone (i.e., to help make a distinction between the parent and parent/child subsystems). To break up coalitions between parents and children parents must work to rebuild trust with each other. The process of rebuilding trust after infidelity is discovered typically starts when the partner who committed the infidelity admits responsibility for betraying his or her partner and genuinely acknowledges the feelings of pain or fear that their partner is experiencing related to the infidelity. This is not to suggest that the partner who committed the infidelity is not entitled to their own pain or that they too do not experience difficulty trusting their partner (Nogales 2009). However, the stigma of infidelity and the threat it creates to the commitment in the relationship typically dictates that the person who committed the infidelity be the first to try to earn back the trust of their partner and children. In the context of family therapy, the therapist may block either the offending partner or non-offending partner from putting the children in a triangle or

from exercising a coalition with children in session by directing the parents to sit closer to one another in session.

Similarly, therapists may have children reposition themselves so that they are not sitting between their parents. Therapists may also exercise the blocking technique when either parent engages in a detailed discussion about the infidelity or when the discussion of the infidelity results in escalating partner conflict. For instance, therapists may instruct the parents to uniformly direct the children to leave so that ‘the adults can work on adult issues’. This is especially important among preadolescent children who may be too young to understand infidelity and its impact.

Monitoring and limiting information about the infidelity can be useful in therapy (Fife et al. 2013). Thus, therapists are recommended to use blocking when clients (usually the non-offending partner) ask for considerable details about the infidelity or repeatedly ask their partners to respond to questions about the infidelity that were already asked and answered.

Tracking

Tracking is an accommodation technique, in which, “the therapist deliberately adopts the symbols of the family’s members’ communication...and amplifies these in communication with the family” (Rasheed et al. 2011, p. 234). When tracking, therapists ask open-ended questions, reflect back the content and feelings discussed, and provide feedback to the family (Brown and Christensen 1999). Therapists should exercise caution when tracking the infidelity so as to avoid getting immersed in content discussions about the infidelity (Peluso and Spina 2008; Brown 2013).

While tracking, a manner in which the therapist may respond to the family is through the use of metaphors. Brown and Christensen (1999) stated that the use of metaphors allows families to see infidelity from a different perspective and helps them develop more process rather than content oriented insight. A therapist may engage in tracking by listening for cues that are indicative of diffused boundaries. For instance, the therapist may utilize metaphors to illustrate how the diffused boundaries impact the system by referring to the infidelity as an *uninvited guest* that enters the system. Thus, by aiding the couple in addressing the diffused boundary the couple is also aided in addressing the infidelity. Rather than focus on the infidelity, the infidelity can be viewed as a symptom of the diffused boundaries in the couple relationship. Again, the therapist should exercise caution when tracking the infidelity. Albeit important, therapists should not get immersed in content discussions about infidelity (Brown and Brown 2002; Peluso and Spina 2008). With regards to working with the family unit, metaphors may also provide children

an easier way to talk about problems indirectly (Gil 1994), especially when the problem is as controversial and complex as infidelity.

Mimesis

In using mimesis the therapist adopts the non-verbal styles present in the family (Brown and Brown 2002; Gladding 2002). These can be very subtle. For example, slowing the rate of speech to match the family speech pattern. A more obvious example may be a therapist dressing down by removing his or her blazer if a family comes in wearing casual clothing. Mimesis can also be used to align with only one member of the family (Brown and Christensen 1999), usually the partner least invested in therapy. In the context of infidelity, this may be either partner; for each partner may be struggling to commit to the relationship as well as to therapy (Fife et al. 2013). The least invested partner may be the one experiencing the most shame and guilt, often the partner who committed the infidelity (Fife et al. 2007). Conversely, the non-offending partner’s feelings of betrayal and anger may leave him or her too emotionally flooded to see therapy as useful. Therapist may mimic aspects of the offending partner to get that person more engaged in therapy. For example, the therapist may withdraw from the non-offending partner by moving further away from him or her during session; thus encouraging the offending partner to demonstrate empathy by moving closer to support his or her partner.

Fife et al. (2013) suggest the importance of providing empathy and humility as part of moving the couple towards forgiveness after infidelity has occurred. The therapist can also aid the couple in employing empathy and humility by mimicking the increased closeness that is likely to come from each partner softening. Couples who can emotionally soften toward one another are more likely to reduce blame and take responsibility for the behaviors (Bird et al. 2007). Helping couples develop and maintain genuine empathy toward one another when infidelity has occurred can, however, be long and complex, especially if partners are consumed with shame, anger, and stuck in a cycle of blame. To this end, mimicking may be used to help couples develop softer feelings, but it’s unlikely to deepen those softer feelings. Thus, mimicking should be used in combination with other techniques to help couples navigate the long and often challenging road toward healing from infidelity.

Reframes

Therapist’s use reframes to help clients shift their perception of the problem from one that is narrow to one that creates new possibilities and viewpoints (Gladding 2002;

Hoffman 1981). Through the use of reframing the family becomes able to see a negative situation with very little hope of change as something that is more manageable and hopeful. Reframing is also important in changing the family structure (Gladding 2002).

When working with infidelity the use of reframes will aid the family in considering alternative explanations of the infidelity. Addressing the structural foundation behind the infidelity rather than focusing solely on the symptom treats more than the infidelity and provides an opportunity for the couple to address issues that may have engendered the infidelity (Brown and Brown 2002). An increase in blame and a reduction of empathy before and after infidelity occurs is not uncommon. Therapists who use reframing can reduce blame and improve empathy among couples (Brown and Brown 2002). By aiding the couple in making sense of the situation from a position that is free from blame and allows movement towards each other thus strengthening the couple subsystem. This can improve the couples' ability to show more compassion and tolerance towards one another in the process of examining the relational precursors (Weeks et al. 2003) and consequences of the infidelity. Fife et al. (2008) found that a systemic reframe allowed couples to, "approach healing in a constructive, non-blaming manner" (319).

Enactment

In using enactments, the therapist asks the family to demonstrate an interaction rather than describe the interaction (Brown and Christensen 1999; Nichols 2008). A goal of enactment is for the problem to be solved in therapy by creating an opportunity for the family to discuss the problem (Winek 2010) and to have a different interaction while discussing a familiar problem. An example of an enactment would be to have the couple discuss the infidelity. During the enactment the therapist should observe how each partner interacts, regulates their behaviors, and the role of the infidelity within the sequence of transactions between family members and subsystems (Brown and Christensen 1999). The therapist's observation of the enactment may be used as a diagnostic tool for identifying structural issues that exist that maintain the problem of parental infidelity in the family. As discussed above, the therapist may work with the parent subsystem to restructure the boundary around the parent subsystem and to protect the system from future threats.

Therapist could also use enactments to demonstrate to parents how the current circumstances around the infidelity are impacting their children (Peluso 2007). For example, a couple may be asked to act out a conversation about the infidelity that would typically occur when the children were home (either in the presence of the children or when

the children were in a separate room). A play enactment may also be used. Children may use puppets to explain to parents how they feel about the conflict between the parents. The information gained from either of these enactments can then be used to direct the family towards new ways of responding to the infidelity and towards restructuring the system.

Future Research

A limitation of the current paper is that it does not consistently demarcate treatment recommendations by age. Consistent with Snyder (2005) we believe that the variability in responses to parental infidelity (i.e., by age, gender, type of infidelity, pre-infidelity family structure) should be carefully examined so that clinicians may identify what the best treatment practices are for families faced with parental infidelity. This speaks to a larger issue. Although the impact of infidelity on families has been documented, empirical research in the area is scarce. Rigorous quantitative and qualitative studies are needed in future research to provide a more comprehensive understanding of the impact and treatment of parental infidelity. That said, like with any body of research there are limitations with collecting data on parental infidelity. Most accounts on the impact of parental infidelity come from adults (parents or adult children), not from children (Thorson 2009). The lack of data on young children's experiences of their family relationships (for an exception, see Ablow et al. 2009) may be attributed to the absence of developmentally appropriate and adequate self-report methodologies. As such, it is important for researchers to find sensitive and safe ways to gather information on emotional and cognitive experiences of children from children directly.

The family structure between parents and children changes considerably when an adult child leaves the home. This is not to say that individuals exposed to parental infidelity as young adults and older adults are not impacted by parental infidelity, but that the topic requires a different discussion. Future studies should examine how adult children exposed to parental infidelity in adulthood are impacted by the infidelity. This area of research may be especially important given the temporal distance between discovering the infidelity and the adult child's own romantic relationships. With regards to the interventions described in this article, clinicians should be mindful of the unit of treatment when working with families dealing with infidelity and be prepared to manage other issues that are likely to be present (e.g. depression, anger, hostility). A thorough application of SFT techniques in the context of parental infidelity requires further clinical investigation.

Consistent with this, interventions that are based on specific units of treatment should be more thoroughly developed. Overall, the objective of the article is to provide an understanding of how to use a SFT approach to conceptualize and to a lesser extent treat parental infidelity. The interventions proposed are not a comprehensive strategy or a one size fits all approach.

Conclusion

The intergenerational impact of infidelity on children calls for therapeutic treatment practices that consider all members of the nuclear family. Conceptualizing and treating infidelity from a structural family approach provides a systemic understanding of how interactions between couples can have a significant and lasting impact on their children. Utilizing the approach also helps families reorganize themselves into structures that help them work through and heal from the infidelity together.

References

- Ablow, J. C., Measelle, J. R., Cowan, P. A., & Cowan, C. P. (2009). Linking marital conflict and children's adjustment: The role of young children's perceptions. *Journal of Family Psychology, 23*, 485–499. doi:10.1037/a0015894.
- Allen, E. S., Rhoades, G. K., Stanley, S. M., Loew, B., & Markman, H. J. (2012). The effects of marriage education for army couples with a history of infidelity. *Journal of Family Psychology, 26*, 26–35. doi:10.1037/a0026742.
- Allen, E. S., Rhoades, G. K., Stanley, S. M., Markman, H. J., Williams, T., Melton, J., & Clements, M. L. (2008). Premarital precursors of marital infidelity. *Family Process, 47*, 243–259. doi:10.1111/j.1545-5300.2008.00251.x.
- Amato, P. R., & Hohmann-Marriott, B. (2007). A comparison of high-and low-distress marriages that end in divorce. *Journal of Marriage and Family, 69*, 621–638. doi:10.1111/j.1741-3737.2007.00396.x.
- Andersen, B. L., & Cyranowski, J. M. (1994). Women's sexual self-schema. *Journal of Personality and Social Psychology, 67*, 1079.
- Andersen, B. L., Cyranowski, J. M., & Espindle, D. (1999). Men's sexual self-schema. *Journal of Personality and Social Psychology, 76*, 645–661. doi:10.1037/0022-3514.76.4.645.
- Atkins, D. C., Baucom, D. H., & Jacobson, N. S. (2001). Understanding infidelity: Correlates in a national random sample. *Journal of Family Psychology, 15*, 735–749. doi:10.1037/0893-3200.15.4.735.
- Bird, M. H., Butler, M. H., & Fife, S. T. (2007). The process of couple healing following infidelity: A qualitative study. *Journal of Couple & Relationship Therapy, 6*, 1–25. doi:10.1300/J398v06n04_01.
- Blodgett Salafia, E. H., Schaefer, M. K., & Haugen, E. C. (2013). Connections between marital conflict and adolescent girls' disordered eating: Parent-adolescent relationship quality as a mediator. *Journal of Child and Family Studies, 22*, 1–11. doi:10.1007/s10826-013-9771-9.
- Blow, A. J., & Hartnett, K. (2005). Infidelity in committed relationships II: A substantive review. *Journal of Marital and Family Therapy, 31*, 217–233. doi:10.1111/j.1752-0606.2005.tb01556.x.
- Brown, E. (1991). *Patterns of infidelity and their treatment*. New York: Brunner/Mazel.
- Brown, J. H., & Brown, C. S. (2002). *Marital therapy: Concepts and skills for effective practice*. Practice Grove, CA: Brooks/Cole.
- Brown, E. M. (2013). *Patterns of infidelity and their treatment*. Philadelphia, PA: Brunner-Routledge.
- Brown, J. H., & Christensen, D. N. (1999). *Family therapy: Theory and practice*. Practice Grove, California: Brooks/Cole.
- Buunk, B. P., & Dijkstra, P. (2004). Gender differences in rival characteristics that evoke jealousy in response to emotional versus sexual infidelity. *Personal Relationships, 11*, 395–408. doi:10.1111/j.1475-6811.2004.00089.x.
- Cano, A., & O'Leary, K. D. (2000). Infidelity and separations precipitate major depressive episodes and symptoms of non-specific depression and anxiety. *Journal of Consulting and Clinical Psychology, 68*, 774–781. doi:10.1037/0022-006X.68.5.774.
- Cano, A., & O'Leary, K. (1997). Romantic jealousy and affairs: Research and implications for couple therapy. *Journal of Sex and Marital Therapy, 23*, 249–275. doi:10.1080/00926239708403931.
- Cramer, R. E., Manning-Ryan, B., Johnson, L. M., & Abraham, W. T. (2000). Gender differences in subjective distress to emotional and sexual infidelity: Evolutionary or logical inference explanation? *Current Psychology, 20*, 327–336. doi:10.1007/s12144-001-1015-2.
- Cravens, J. D., Leckie, K. R., & Whiting, J. B. (2013). Facebook infidelity: When poking becomes problematic. *Contemporary Family Therapy, 35*, 74–90. doi:10.1007/s10591-012-9231-5.
- Cyranowski, J. M., & Andersen, B. L. (1998). Schemas, sexuality, and romantic attachment. *Journal of Personality and Social Psychology, 74*, 1364–1379. doi:10.1037/0022-3514.74.5.1364.
- Dalgleish, T. L., Johnson, S. M., Burgess Moser, M., Lafontaine, M. F., Wiebe, S. A., & Tasca, G. A. (2014). Predicting change in marital satisfaction throughout emotionally focused couple therapy. *Journal of Marital and Family Therapy*. doi:10.1111/jmft.12077.
- Davies, P. T., Myers, R. L., & Cummings, E. M. (1996). Responses of children and adolescents to marital conflict scenarios as a function of the emotionality of conflict endings. *Merrill-Palmer Quarterly, 42*, 1–21. doi:10.1353/mpq.2005.0012.
- Dean, C. J. (2011). Psychoeducation: A first step to understanding infidelity-related systemic trauma and grieving. *The Family Journal, 19*, 15–21. doi:10.1177/1066480710387487.
- Doss, B. D., Simpson, L. E., & Christensen, A. (2004). Why do couples seek marital therapy? *Professional Psychology: Research and Practice, 15*, 608–614. doi:10.1037/0735-7028.35.6.608.
- Duncombe, J., & Marsden, D. (2004). Affairs and children. In J. Duncombe, K. Harrison, G. Allan, & D. Marsden (Eds.), *The state of affairs: Explorations in infidelity and commitment* (pp. 187–201). Mahway, NJ: Lawrence Erlbaum Associates Inc.
- Fife, S. T., Weeks, G. R., & Gambescia, N. (2007). The intersystem approach to treating infidelity. In P. Peluso (Ed.), *Infidelity: A practitioner's guide to working with couples in crisis* (pp. 71–97). Philadelphia, PA: Routledge.
- Fife, S. T., Weeks, G. R., & Gambescia, N. (2008). Treating infidelity: An integrative approach. *The Family Journal: Counseling and Therapy for Couples and Families, 16*, 316–323. doi:10.1177/1066480708323205.
- Fife, S. T., Weeks, G. R., & Sellberg-Filbert, J. (2013). Facilitating forgiveness in the treatment of infidelity: An interpersonal

- model. *Journal of Family Therapy*, 35, 343–367. doi:10.1111/j.1467-6427.2011.00561.x.
- Fincham, F. D., & Beach, S. R. (2010). Marriage in the new millennium: A decade in review. *Journal of Marriage and Family*, 72, 630–649. doi:10.1111/j.1741-3737.2010.00722.x.
- Fincham, F. D., Grych, J. H., & Osborne, L. N. (1994). Does marital conflict cause child maladjustment? Directions and challenges for longitudinal research. *Journal of Family Psychology*, 8, 128–140. doi:10.1037//0893-3200.8.2.128.
- Fish, J. N., Pavkov, T. W., Wetchler, J. L., & Bercik, J. (2012). Characteristics of those who participate in infidelity: The role of adult attachment and differentiation in extradyadic experiences. *American Journal of Family Therapy*, 40, 214–229. doi:10.1080/01926187.2011.601192.
- Fosco, G. M., & Grych, J. H. (2010). Adolescent triangulation into parental conflicts: Longitudinal implications for appraisals and adolescent-parent relations. *Journal of Marriage and Family*, 72, 254–266. doi:10.1111/j.1741-3737.2010.00697.x.
- Gil, E. (1994). *Play in family therapy*. New York: Guilford Press.
- Gladding, S. T. (2002). *Family therapy: History, theory, and practice*. New Jersey: Pearson Education.
- Gordon, K. C., Baucom, D. H., & Snyder, D. K. (2005). Treating couples recovering from infidelity: An integrative approach. *Journal of Clinical Psychology*, 61, 1393–1405. doi:10.1002/jclp.20189.
- Gottman, J. M. (2011). *The science of trust: Emotional attunement for couples*. New York: WW Norton & Company.
- Grych, J. H., Raynor, S. R., & Fosco, G. M. (2004). Family processes that shape the impact of interparental conflict on adolescents. *Development and Psychopathology*, 16, 649–665. doi:10.1017/s0954579404004717.
- Hall, J., & Fincham, F. D. (2005). Self-forgiveness: The stepchild of forgiveness research. *Journal of Social and Clinical Psychology*, 24, 621–637. doi:10.1521/jscp.2005.24.5.621.
- Harold, G. T., Shelton, K. H., Goeke-Morey, M. C., & Cummings, E. M. (2004). Marital conflict, child emotional security about family relationships and child adjustment. *Social Development*, 13, 350–376. doi:10.1111/j.1467-9507.2004.00272.x.
- Hoffman, L. (1981). *Foundations of family therapy: A conceptual framework for systems change*. New York: Brunner/Mazel.
- Jeanfreau, M. M., Jurich, A. P., & Mong, M. D. (2014). Risk factors associated with women's marital infidelity. *Contemporary Family Therapy*, 36, 327–332. doi:10.1007/s10591-014-9309-3.
- Kaplan, H. S. (1974). *The new sex therapy: Active treatment of sexual dysfunctions*. New York: Brunner/Mazel.
- Kaplan, H. S. (1983). *The evaluation of sexual disorders: Psychological and medical aspects*. New York: Brunner/Mazel.
- Leiblum, S. (2007). *Principles and practices of sex therapy* (4th ed.). New York: Guilford Press.
- Levine, S. (2005). A clinical perspective on infidelity. *Sexual & Relationship Therapy*, 20, 143–153. doi:10.1080/14681990500113203.
- Lusterman, D. (2005). Helping children and adults cope with parental infidelity. *Journal of Clinical Psychology*, 61, 1439–1451. doi:10.1002/jclp.20193.
- Marin, R. A., Christensen, A., & Atkins, D. C. (2014). Infidelity and behavioral couple therapy: Relationship outcomes over five years following therapy. *Couple and Family Psychology: Research and Practice*, 3, 1–12. doi:10.1037/cfp0000012.
- Mark, K. P., Janssen, E., & Milhausen, R. R. (2011). Infidelity in heterosexual couples: Demographic, interpersonal, and personality-related predictors of extradyadic sex. *Archives of Sexual Behavior*, 40, 971–982. doi:10.1007/s10508-011-9771-z.
- Micucci, J. A. (2006). Helping families with defiant adolescents. *Contemporary Family Therapy*, 28, 459–474. doi:10.1007/s10591-006-9018-7.
- Millner, V. S. (2008). Internet infidelity: A case of intimacy with detachment. *The Family Journal*, 16, 78–82. doi:10.1177/1066480707308918.
- Minuchin, S. (1974). *Families and family therapy*. Cambridge, MA: Harvard University Press.
- Minuchin, S., & Fishman, H. C. (1981). *Family therapy techniques*. Boston, MA: Harvard University Press.
- Moller, N. P., & Vossler, A. (2014). Defining infidelity in research and couple counseling: A qualitative study. *Journal of Sex and Marital Therapy*. doi:10.1080/0092623x.2014.931314.
- Negash, S., Cui, M., Fincham, F. D., & Pasley, K. (2013). Extradyadic involvement and relationship dissolution in heterosexual women university students. *Archives of Sexual Behavior*, 43, 531–539. doi:10.1007/s10508-013-0213-y.
- Nemeth, J. M., Bonomi, A. E., Lee, M. A., & Ludwin, J. M. (2012). Sexual infidelity as trigger for intimate partner violence. *Journal of Women's Health*, 21, 942–949. doi:10.1089/jwh.2011.3328.
- Nichols, M. P. (2008). *Family therapy: Concepts and methods* (8th ed.). Massachusetts: Pearson Education.
- Nichols, M. P., & Schwartz, R. C. (2001). *The essentials of family therapy*. Boston: Allyn and Bacon.
- Nogales, A. (2009). *Parents who cheat. How children and adults are affected when their parents are unfaithful*. Florida: Health Communication.
- Olmstead, S. B., Blick, R. W., & Mills, L. I. (2009). Helping couples work toward the forgiveness of marital infidelity: Therapists' perspectives. *The American Journal of Family Therapy*, 37, 48–66. doi:10.1080/01926180801960575.
- Olson, M. M., Russell, C. S., Higgins-Kessler, M., & Miller, R. B. (2002). Emotional processes following disclosure of an extramarital affair. *Journal of Marital and Family Therapy*, 28, 423–434. doi:10.1111/j.1752-0606.2002.tb00367.x.
- Parker, T. S., & Wampler, K. S. (2003). How bad is it? Perceptions of the relationship impact of different types of internet sexual activities. *Contemporary Family Therapy*, 25, 415–429. doi:10.1023/A:1027360703099.
- Pearman, M. M. (2010). The effect of parental infidelity on an adult child's sexual attitudes. (Unpublished thesis). Purdue University, Indiana.
- Peluso, P. R. (2007). *Infidelity: A practitioner's guide to working with couples in crisis*. New York: Routledge.
- Peluso, P. R., & Spina, P. (2008). Understanding infidelity: pitfalls and lessons for couples and counselors. *The Family Journal*, 16, 324–327. doi:10.1177/1066480708323282.
- Platt, R. L., Nalbone, D. P., Cassanova, G. M., & Wetchler, J. L. (2008). Parental conflict and infidelity as predictors of adult children's attachment style and infidelity. *American Journal of Family Therapy*, 36, 149–161. doi:10.1080/01926180701236258.
- Rasheed, J. M., Rasheed, M. N., & Marley, J. A. (2011). *Family therapy models and techniques*. Los Angeles: Sage.
- Reibstein, J. (2013). Commentary: A different lens for working with affairs: using social constructionist and attachment theory. *Journal of Family Therapy*, 35, 368–380. doi:10.1111/j.1467-6427.2011.00562.x.
- Schade, L. C., & Sandberg, J. G. (2012). Healing the attachment injury of marital infidelity using emotionally focused couples therapy: A case illustration. *The American Journal of Family Therapy*, 40, 434–444. doi:10.1080/01926187.2011.631374.
- Scheinkman, M. (2005). Beyond the trauma of betrayal: Reconsidering affairs in couples therapy. *Family Process*, 44, 227–244. doi:10.1111/j.1545-5300.2005.00056.x.
- Schnarch, D. M. (1991). *Constructing the sexual crucible: An integration of sexual and marital therapy*. New York: WW Norton & Company.
- Segrin, C., & Flora, J. (2005). *Family communication*. Mahwah, NJ: Lawrence Erlbaum Associates Inc.

- Snyder, D. K. (2005). Treatment of clients coping with infidelity: An introduction. *Journal of Clinical Psychology, 61*, 1367–1370. doi:[10.1002/jclp.20186](https://doi.org/10.1002/jclp.20186).
- Sori, C. F. (2007). An affair to remember: Infidelity and its impact on children. In P. R. Peluso (Ed.), *Infidelity: A practitioner's guide to working with couples in crisis* (pp. 247–276). New York, NY: Taylor & Francis Group.
- Spence, A. M. (2012). *Adult children's accounts of parental infidelity and divorce: Associations with own infidelity, risky behaviors, and attachment*. (Unpublished doctoral dissertation, University of Colorado).
- Thorson, A. R. (2009). Adult children's experiences with their parent's infidelity: Communicative protection and access rules in the absence of divorce. *Communication Studies, 60*, 32–48. doi:[10.1080/10510970802623591](https://doi.org/10.1080/10510970802623591).
- Wallerstein, S., & Kelly, J. B. (1980). Effects of divorce on the visiting father-child relationship. *The American Journal of Psychiatry, 137*, 1534–1539. doi:[10.1176/ajp.137.12.1534](https://doi.org/10.1176/ajp.137.12.1534).
- Wardle, L. D. (2002). Parental infidelity and the 'no-harm' rule in custody litigation. *Catholic University Law Review, 52*, 81–132. <http://ssrn.com/abstract=397660>
- Weeks, G. R., Gambescia, N., & Jenkins, R. E. (2003). *Treating infidelity: Therapeutic dilemmas and effective strategies*. New York: WW Norton & Company. doi:[10.1111/j.1467-6427.2006.00340_2.x](https://doi.org/10.1111/j.1467-6427.2006.00340_2.x).
- Weigel, D. J., Bennett, K. K., & Ballard-Reisch, D. S. (2003). Family influences on commitment: Examining the family of origin correlates of relationship commitment attitudes. *Personal Relationships, 10*, 453–474. doi:[10.1046/j.1475-6811.2003.00060.x](https://doi.org/10.1046/j.1475-6811.2003.00060.x).
- Westfall, A. (1989). Extramarital sex: The treatment of the couple. In G. R. Weeks (Ed.), *Treating couples: The intersystem model of the Marriage Council of Philadelphia* (pp. 163–190). New York: Brunner/Mazel.
- Whisman, M. A., Gordon, K. C., & Chatav, Y. (2007). Predicting sexual infidelity in a population-based sample of married individuals. *Journal of Family Psychology, 21*, 320–324. doi:[10.1037/8093-3200.21.2.320](https://doi.org/10.1037/8093-3200.21.2.320).
- Whisman, M. A., & Snyder, D. K. (2007). Sexual infidelity in a national survey of American women: Differences in prevalence and correlates as a function of method of assessment. *Journal of Family Psychology, 21*, 147. doi:[10.1037/0893-3200.21.2.147](https://doi.org/10.1037/0893-3200.21.2.147).
- Winek, J. L. (2010). *Systemic family therapy from theory to practice*. Los Angeles: Sage.
- Young, T. L., Negash, S. M., & Long, R. M. (2009). Enhancing sexual desire and intimacy via the metaphor of a problem child: Utilizing structural-strategic family therapy. *Journal of Sex and Marital Therapy, 35*, 402–417. doi:[10.1080/00926230903065971](https://doi.org/10.1080/00926230903065971).

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