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**FACILITATING FORGIVENESS IN THE TREATMENT OF INFIDELITY:  
AN INTERPERSONAL MODEL**

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*Abstract*

*This article presents a unique clinical model of forgiveness developed specifically for use in the treatment of infidelity. The model focuses on forgiveness as a central component of the process of healing for couples who desire relationship reconciliation following an affair. Infidelity causes significant damage for couples and results in a loss of trust and relationship stability. However, couples can become reunified and trust may be restored as couples work through the process of forgiveness. Forgiveness is facilitated as therapists and clients focus on four unifying factors: empathy, humility, commitment, and apology. Specific steps are outlined for therapists to help them guide clients through the process of forgiveness. The clinical application of the model is illustrated with a brief case example.*

## Introduction

The desire to be in a committed loving relationship remains strong for adults in contemporary Western societies. In the United States marriage rates continue to remain very high, with 90% of adults marrying at some point in their lives. In addition to marriage, many couples seek intimacy and support through dating, non-marital committed relationships, or cohabitation (Seltzer, 2004). Being in a committed relationship creates a sense of belonging, and the devotion and loyalty associated with such relationships tend to facilitate feelings of stability and security (Weeks, Gambescia, & Jenkins, 2003; Worthington, 1998).

Committed relationships typically include a stated or implied promise of sexual and emotional loyalty between partners. Sexual and emotional fidelity contribute to relationship stability and help define the relationship as unique and exclusive. However, the desired comfort and stability can quickly be disturbed or even shattered by destructive, hurtful, or offensive actions by one or both partners (Gottman, 1994). Infidelity is one such action that can be extremely damaging. Infidelity is defined as a violation of relationship commitment in which sexual and/or emotional intimacy is directed away from the primary relationship without the consent of one's partner (Fife, Weeks, & Gambescia, 2007). Infidelity may be broadly conceptualized by clients to include not only the other relationship, but the secrecy, lies, risk of importing disease, and placing the partner in harm's way. Such a betrayal may undermine a relationship's stability and security, resulting in confusion, loss of trust, and tremendous pain.

Infidelity has both individual and relationship consequences. Affairs are considered by many experts to be one of the most damaging events for a relationship, second only to physical abuse (Whisman, Dixon, & Johnson, 1997). Infidelity typically causes severe relationship instability, precipitates a loss of trust and increased conflict, and undermines a couple's sense of togetherness and shared identity (Agnew, Van Lange, Rusbult, & Langston, 1998; Glass, 2002). Extramarital affairs often result in separation and divorce (Weeks & Treat, 2001). In addition to the harmful effects on the relationship, infidelity can have serious individual consequences. The betrayed partner may experience depression, rage, feelings of abandonment, a sense of rejection, lowered self-esteem, loss of confidence, and symptoms of PTSD (Cano & O'Leary, 2000; Glass, 2002; Schneider, Corley, & Irons, 1998). Unfaithful partners may also experience emotional struggles related to the events that have transpired, such as guilt, anger, embarrassment, and depression.

In spite of the tremendous upheaval brought on by infidelity, many couples choose to work on their relationship for the purpose of staying together. Couples attempting to heal from the infidelity and rebuild their fractured relationship may turn to marital and couples therapists for help. As many as 50% of couples seeking therapy have encountered infidelity either in the past or present (Weeks et al., 2003). Research on the effectiveness of infidelity treatment is scarce (Snyder & Doss, 2005). However, the few studies that have targeted this challenging problem indicate that clients experience significant benefits from treatment (Atkins, Eldridge, Baucom, & Christensen, 2005; Gordon, Baucom, & Snyder, 2004; Kessel, Moon, & Atkins, 2007). Given the negative effects of infidelity and the considerable chance of relationship demise, the importance of effective treatment is clear.

One essential aspect of treatment and healing for couples who have experienced infidelity is forgiveness. Both clients and therapists agree that forgiveness is a significant part of individual and relationship healing after a severe interpersonal betrayal (Fenell, 1993; Gordon & Baucom, 1999). The ability to ask for and to give forgiveness has also been reported by spouses to be one of the factors most influential to overall marital satisfaction and durability (Fenell, 1993). In cases of infidelity, relationship healing and reconciliation cannot occur without forgiveness. The

relationship may endure in the absence of forgiveness, but it will not be completely restored to health. The purpose of this article is to present a unique clinical model of forgiveness for use in the treatment of infidelity.

### **Forgiveness and Therapy**

Theoretical and empirical research on forgiveness has increased significantly during the past two decades (Baskin & Enright, 2004; Legaree, Turner, & Lollis, 2007). Studies show that forgiveness is helpful for people who are trying to overcome deep emotional pain resulting from interpersonal injuries or injustices they have experienced (Baskin & Enright, 2004). For example, forgiveness can facilitate healing in cases of parental love deprivation (Al-Mabuk, Enright, & Cardis, 1995), betrayals in marriage (Gordon et al., 2004), and incest (Freedman & Enright, 1996). When treatment includes forgiveness, clients experience an increase in hope, self-esteem, self-forgiveness, and positive thoughts toward the transgressor and a decrease in anger, anxiety, grief, negative thoughts and feelings, and depression (Coyle & Enright, 1997; Fitzgibbons, 1986; Harris et al., 2006). Forgiveness is also considered to be beneficial to the establishment of meaningful relationships, increased self-acceptance, and the development of better ways of expressing anger (Fitzgibbons, 1986).

Research indicates that forgiveness is a critical factor in marriage relationships and other family relationships. Individuals and families with the ability to request and grant forgiveness for significant interpersonal mistreatment are more likely to experience satisfying family relationships and emotional and physical health (Battle & Miller, 2005). Fincham, Hall and Beach (2005) indicate that forgiveness is positively correlated with several aspects of marital relationships such as intimacy, affect, attributions, and marital satisfaction. They also suggest that levels of forgiveness are likely to predict marital conflict, psychological aggression, and behaviour toward the partner following an offense.

Despite the significance of forgiveness in close relationships and the recognition of its clinical usefulness, therapists often fail to utilize forgiveness in treatment (Butler, Dahlin, & Fife, 2002; Gordon & Baucom, 1998). One reason for this is the common association of forgiveness with religion and spirituality (Gordom, Baucom, & Snyder, 2000). Psychotherapy professionals, including marriage and family therapists, have historically distanced themselves from religious and spiritual matters (Fife & Whiting, 2007). It may be that some clinicians are uncomfortable incorporating forgiveness in therapy because they associate it with the realm of religion and spirituality, rather than recognizing it as a central aspect of healing for many clients. However, forgiveness is a human phenomenon that is relevant for religious and non-religious clients alike (Legaree et al., 2007; Weeks et al., 2003).

Another reason for the limited use of forgiveness in therapy may be the difficulty therapists and clients have defining it. Forgiveness may be defined in numerous ways, and a misunderstanding of it by clients or clinicians can hinder the healing process in therapy. Clients and clinicians may erroneously understand forgiveness to mean accepting, excusing, condoning, forgetting, denying, or requiring reconciliation (Butler et al., 2002). Such misunderstandings may keep clients and clinicians from engaging in forgiveness work that is critical to individual and relationship healing. Furthermore, many clients fail to recognize that they, as the givers of forgiveness, are the ones most likely to benefit from it (Case, 2005).

A variety of useful definitions are available, and clinicians may need to help clients understand what forgiveness is and how it can help them with healing. Forgiveness has been defined as an individual decision characterized by the voluntary release of negative attitudes and feelings toward an offender and the demonstration of kindness toward the offender that he or she has no reason to expect (Baskin & Enright, 2004; DiBlasio, 1998; Freedman & Enright, 1996).

Simon and Simon (1990) add that “forgiveness is freeing up and putting to better use the energy once consumed by holding grudges, harbouring resentments, and nursing unhealed wounds” (p. 19). Forgiveness decreases the injured persons’ need for punishment and revenge (Baskin & Enright, 2004) and helps free them from burdens of anger and resentment toward the offender. Such definitions characterize forgiveness as an individual and psychological phenomenon. In contrast, others have emphasized the interpersonal nature of forgiveness in their definitions, such as Spring (2004) who argues that “forgiveness is essentially interpersonal” (p. 123). McCullough, Worthington, & Rachal (1997) suggest that forgiveness is a modification in the motivational state of both partners, leading to the reduction of relationship-destructive behaviour and increased relationship-healing responses. Accordingly, forgiveness may increase the probability of reconciliation between marital partners in cases of infidelity (Fincham et al., 2005).

The therapy literature includes several broad models of forgiveness designed to help clinicians in their work with clients (for reviews see Baskin and Enright, 2004; Gordon, Baucom, and Snyder, 2005). There are also some general models for the treatment of infidelity, some of which include forgiveness as a component of treatment (Gordon & Baucom, 1998; Gordon et al., 2004). However, few models of forgiveness intervention have been specifically developed for the purpose of facilitating healing from infidelity (Case, 2005). Clinicians are expected to take the general models of forgiveness and adapt them to the unique issues related to infidelity. However, infidelity is one of the most difficult presenting problems for couple’s therapists, and many clinicians have not received specialized training in the use of forgiveness in the treatment of infidelity. Consequently, therapists are often uncertain about how to help clients navigate this difficult process.

In this article we present an interpersonal model of forgiveness intervention that is intended specifically for use with couples who are seeking treatment for infidelity. We regard forgiveness as an interpersonal process, rather than a single event. We agree with Gordon and Baucom (1998) that forgiveness is an interaction between the forgiving person, the offending person, and the relationship between them. Forgiveness facilitates affective, cognitive, and behavioural changes for both the unfaithful and the betrayed partner (Gordon Baucom, & Snyder, 2000). In this light, our model presents aspects of forgiveness relevant for both the betrayed partner and the partner who engaged in the affair.

Infidelity constitutes a significant relationship betrayal (Gordon et al., 2004), and a couple’s trust has been damaged and their sense of stability and connection has been shaken. While some relationships end up dissolving as a result of infidelity, those couples who desire reconciliation and healing must be guided through a process of forgiveness for true reconciliation and renewal to be possible. Ultimately, forgiveness helps couples heal relationship wounds, renew attachment security, and rebuild a sense of unity, resulting in significant changes at the core of the relationship (Butler, Harper, & Seedall, 2009). The interpersonal model of forgiveness helps restore couples to a state of togetherness by requiring them to work as a couple through the forgiveness process.

Forgiveness is facilitated by helping clients focus on four important unifying factors: empathy, humility, commitment, and apology (McCullough, 2000; Worthington, 1998). These unifying factors help the couple regain trust, solidarity, and connection, which were lost when the boundaries of the committed relationship were violated. Many couples who successfully work through forgiveness report that their relationships emerge stronger from the work required for healing (Weeks et al., 2003). Working through these unifying factors towards forgiveness helps couples develop new purpose and new meaning for their relationship which encompasses

and eventually transcends the affair (Table 1).

### **Precursors to Forgiveness**

We do not regard our model of forgiveness as a comprehensive approach to treating infidelity, but rather as a central part of the treatment process. However, the ground must be suitably prepared for the seeds of forgiveness to take root. Therefore, we will briefly describe important precursors to forgiveness before presenting a detailed description of the model. Space limitations as well as the primary focus of this paper permit us only brief descriptions of these important steps that may help clients prepare to work through forgiveness. Clinicians may refer to Fife et al. (2007); Glass (2002); Snyder, Baucom, and Gordon (2007); and Weeks et al. (2003) for broad models of infidelity treatment that provide more detailed clinical descriptions of the precursors as well as additional aspects of treatment for infidelity.

#### *Commitment to Treatment*

In order for a couple to heal from an affair, partners may go through a long and demanding process. This process requires both commitment and patience. Couples may come to therapy with low or unequal levels of commitment, and it may be difficult for one or both partners to decide whether or not they want to stay in the relationship. Some may conclude that leaving the relationship will save them from further pain, and they may end the relationship before giving therapy a chance (Weeks, et al., 2003). However, partners ending a marriage after an affair may enter subsequent relationships only to encounter problems very similar to the ones in their previous marriage (Gordon et al., 2004). It may be helpful at the beginning of treatment for therapists to acknowledge that commitment to the relationship may be difficult at this point and ask clients instead if they are willing to make an initial commitment to therapy, with the actual decision about commitment to the relationship being postponed until both partners can make an informed choice outside the context of the current emotional crisis. It is also helpful at the start of treatment for therapists to provide a “road map” for therapy that helps clients understand the process and steps that lead toward healing (Bird, Bulter, & Fife, 2007).

#### *Crisis Management*

During the initial therapy sessions for infidelity, crisis management is often necessary. Couples may be overwhelmed with feelings of depression, anxiety, shame, and rage, which make direct interactions difficult (Gordon et al., 2004). These emotions should be normalized as reactions which are to be expected in the couple’s current situation (Cano & O’Leary, 2000). Therapists may utilize “shielded enactments” to facilitate the expression and understanding of emotions between partners when emotions are particularly intense (Butler & Gardner, 2003, p. 314). Shielded enactments enable the expression of emotions by funnelling communication through the therapist until the clients are able to speak directly to each other in a constructive manner. As soon as possible, therapists should facilitate direct communication between partners (Butler & Gardner, 2003). Therapists can begin coaching couples in empathic listening so that they can begin to understand the emotional experience of each other, which is an important part of the healing process.

In the initial crisis phase, betrayed partners often express a “need to know” (Weeks & Treat, 2001). Yet an excessive preoccupation with the details of the affair may hinder the process of healing for the betrayed partner and the couple. In order to help clients move from obsessive fact-finding behaviours to more healing behaviours, therapists may need to monitor and limit such questioning. Certain facts about the affair should be shared. However, to save the betrayed partner from further pain, this information should be limited to the identity of the extramarital partner, the duration of the affair, and the frequency and location of meetings (Weeks & Treat, 2001). If necessary, a more thorough assessment of the affair can be conducted through

individual sessions with the unfaithful partner. In these sessions, grief about the loss of the extramarital relationship may be addressed, if necessary.

The causative factors for an affair are beyond the scope of this particular paper. Weeks et al. (2003) have conducted an extensive review of the individual, relational, and intergenerational aspects involved in why partners have affairs. In some cases, the affair stems from individual pathology, while in others it results from relational factors such as low marital/sexual satisfaction. A comprehensive assessment must be done in order to assess the factors contributing to the affair.

#### *Examine the Relationship Context*

In addition to ascertaining clients' commitment to work on the relationship and managing the emotional crisis the couple is going through, therapists should review the couple's relationship prior to the affair in order to identify individual and relational factors which may have been associated with the betrayal. Most cases of infidelity occur in a relational context in which the primary relationship is suffering, and the affair may be a symptom of the relationship problems. However, although partners may be unhappy in the primary relationship, therapists must be clear with clients that this does not justify infidelity (Gordon et al., 2004). The exploration of the context of the affair can provide couples with an opportunity to gain a deeper understanding of each others' behaviours, thoughts, and feelings, thereby facilitating empathy between them (Gordon et al., 2004). It also opens the door for both partners to seek forgiveness, as each may have contributed in some way to the suffering relationship. Both partners must be willing to accepting responsibility for the harm they may have done to the relationship (Spring, 2004).

In the minds of some, an affair is viewed as a way to stabilize the marriage by importing something that is missing. In those rare clinical cases, where the affair can be highly compartmentalized, it may actually work to stabilize things. However, in the vast majority of cases we see the affair drains and further de-vitalizes the relationship. It is our contention that the affair is likely to have an adverse affect on the relationship, especially when the partner is aware of it. Even in cases where the affair is largely a response to marital conflict, dissatisfaction, or other relational factors, telling betrayed partners that they somehow share responsibility for the affair early in treatment is a grave mistake. The first strategy is to let couples know that nothing excuses an affair. We believe the partner who had the affair should have found a better way of coping with the factors that lead to the affair. Once the therapy has moved beyond the beginning phases of treatment, therapists can begin to explore the reasons for the affair and the relational context in which it occurred.

#### *Establish Boundaries*

One of the more predominant effects of extramarital affairs is a loss of trust. In order for betrayed partners to be able to trust again, their sense of safety and security must be improved (Gordon et al., 2004). Therapists should support betrayed partners in expressing guidelines and boundaries they would like to have for interactions within the couple as well as with others (Gordon et al., 2004). The marriage's potential cannot be effectively assessed, nor can the couple effectively work toward healing, if there is an ongoing affair. The offending partners must commit to cease all contact with the affair partner in order for trust to be rebuilt. If any contact occurs, intentionally or accidentally, the betrayed partner should be informed. These incidences should also be discussed during the next couple session. In this way the partner who had the affair can provide evidence of his or her trustworthiness and accountability.

#### *Defining Forgiveness*

As couples make a commitment to therapy, move past the initial crisis stage, begin to

listen empathically and communicate constructively, and establish a degree of stability and safety in the relationship, they may be prepared for a conversation about forgiveness. Forgiveness is a highly idiosyncratic phenomenon which has to be defined and discussed with couples in order to prevent misunderstanding. As mentioned above, forgiveness does not mean to forget, excuse, or condone the offense, and therapists should be aware of potential confusion about forgiveness, as this may interfere with clients' engagement in the therapy process (Butler et al., 2002). Therapists should facilitate discussion between partners so that they can understand the way in which each of them defines forgiveness. When clients struggle with the idea of forgiveness, therapists can assist by clarifying what forgiveness is and offer more helpful definitions for their consideration. It should be pointed out to clients that forgiveness does not absolve the offending partner of responsibility for his or her actions, but it can help relieve both partners of burdensome emotions that preclude individual and relationship healing. Being clear on the meaning of forgiveness can do much to alleviate any resistance clients may have to the concept.

### **Facilitating Forgiveness**

Once couples have developed a definition of forgiveness that is acceptable to them, they are prepared to move forward with forgiveness in treatment. This is facilitated as therapists and couples concentrate on four unifying factors: empathy, humility, commitment, and apology (McCullough, 2000; Worthington, 1998). This model emphasizes the relational nature of forgiveness and the interlinked, systemic nature of the unifying factors. In other words, empathy, humility, commitment, and apology have a reciprocal and generative effect such that the actions of one partner may have a soothing effect and may facilitate movement in the other. Furthermore, the unifying factors are not necessarily sequential steps, but may be engaged in simultaneously depending upon the clients' readiness. Additionally, the approach assumes that couples have thoughtfully evaluated their relationship and that both partners have expressed a commitment to the relationship and a desire to reconcile and rebuild. Although we do not believe that reconciliation is required for forgiveness to occur, we do believe that forgiveness is a necessary aspect of reconciliation, when this is desired by couples.

#### *Empathy*

Empathy is a primary assisting factor leading to forgiveness (see also Coyle & Enright, 1997; McCullough et al., 1997; Spring, 2004). Empathy entails a shift in attention from one's own experience toward the experience of one's partner (Waldron & Kelley, 2008) and "an active effort to understand another person's perception of an interpersonal event as if one were that other person" (Malcolm & Greenberg, 2000, p. 180). Earlier, we defined forgiveness as a motivational change which includes an increased desire for more positive relational contact and a decrease in retaliatory impulses. Both of these can be facilitated through the development of empathy (Fincham et al., 2005; McCullough et al., 1997). Furthermore, empathy opens the door for couples to begin reconnecting and bridging the chasm that results from infidelity.

Empathy may, however, be difficult to accomplish for couples who have experienced an affair. Both partners are often consumed with their own emotions after the affair has been revealed. However, a prolonged preoccupation with their own internal experiences may only increase the distance between partners. Therefore, it is important for therapists to facilitate empathy for the purpose of decreasing emotional distance and promoting healing.

Therapists should begin with the unfaithful partner by coaching them in non-defensive, empathic listening. The infidelity has brought deep pain and suffering, and the offending partner needs to sincerely seek to understand the negative experience of his or her partner. Hearing the pain and anger of the betrayed partner can be difficult, and there is a tendency for clients to

become defensive during empathy exercises. However, it is important to reduce defensiveness early on so that unfaithful partners can be open, acknowledge their wrongdoing, accept responsibility for the betrayal, and experience empathy for their partner. Feeling empathy for the pain that one has caused will eventually help the guilty party express remorse and offer a genuine apology (Weeks et al., 2003).

When exploring the relational context of the affair, therapists should help betrayed partners develop empathy as well. Both partners are likely to have experienced pain and sorrow in the relationship, and a mutual understanding of the other's experience can promote increased unity and healing. Therapists may invite the betrayed member to reflect on the pain and sorrow their partner may have experienced in the relationship. They, too, may have experienced disappointments and unmet longings for connection and intimacy in the relationship. Recognizing the pain and suffering of another can have a softening effect for couples. The experience and expression of empathy may provide an important healing balm for the respective wounds that partners have experienced.

Another way to promote empathy is to ask couples to recount the situation from each other's point of view (Worthington, 1998). Here it may be useful to utilize circular or reflective questions to invite partners to consider the other's viewpoint (Boscolo, Cecchin, Hoffman, & Penn, 1987; McGee, Del Vento, & Bavelas, 2005). Doing so can help partners shift from seeing each other as bad or malicious to seeing them as vulnerable or imperfect, which can be helpful in the development of empathy (Worthington, 1998). To this end therapists may find it beneficial to use emotionally focused techniques during conjoint sessions to work with partners in exploring and understanding each other's vulnerabilities and emotional experiences (Johnson, 2004).

The experience and expression of empathy often has a reciprocal effect for couples. As one partner experiences empathy from the other, he/she is likely to experience softening and increased empathy in return. For example, as the unfaithful partner communicates understanding of the pain he or she caused with the affair, betrayed partners may begin to soften in their expression of anger or intense questioning. In turn, offending partners may experience a decrease in defensiveness as they feel their partners being more empathic and less focused on expressing pain or resentment. With the mutual expression of empathy, partners may become more patient and open to each other's experience, thus facilitating deeper emotional connection and healing.

### *Humility*

Although clients may begin to cognitively and emotionally recognize the suffering that each other has gone through, empathy alone is not sufficient for forgiveness and healing. Helping clients develop genuine humility can help clients continue moving forward on the path of forgiveness. In many cases of infidelity treatment, offending partners may attempt to rationalize their behaviour and avoid taking responsibility for their actions. They may also become defensive when questioned about what they did, what they were thinking, or the damage they have caused. Defensiveness, rationalizations, and dodging responsibility by the unfaithful partner are likely to create a significant therapeutic barrier. Forgiveness is not likely to progress in such cases. However, through humility, the offending partner can learn to accept responsibility for the affair and for the hurt they caused. Instead of responding defensively to their partner's anger or pain, they can help move the process of forgiveness and healing forward by developing a more respectful and humble attitude.

If offending partners struggle with or is unwilling to accept responsibility for their actions, we suggest encouraging them to first confess and acknowledge fault for smaller parts of the betrayal (e.g., the initiation and/or acceptance of lunch dates, phone calls, or intimate conversations). These smaller confessions can increase humility and make it easier to take full

responsibility for one's behaviour. Therapists may need to coach clients in verbalizing responsibility for their actions so that their admissions do not come across as minimizing or rationalizing their behaviour. Humbly accepting responsibility for one's behaviours is an essential part of the forgiveness process, and this phase of treatment can provide an important rehearsal opportunity for the offending partner in preparation for a genuine apology later in the therapeutic process.

Similar to empathy, increasing humility in the betrayed spouse is a sensitive topic and should be approached with care. Clinicians can help facilitate humility by sensitively inviting these clients to reflect on two different common human experiences. First, therapists may ask the injured partners to remember a time when they acted contrary to their own beliefs of right and wrong or did something that was hurtful to their partner. Accepting responsibility for their own misbehaviour may help increase their understanding of their partner as human—not innately bad or cruel but rather imperfect and fallible (Gordon & Baucom, 1998). In this way, therapists can assist betrayed spouses in the creation of a more positive conceptualization of their partners as individuals similar to them in their human imperfection. At the same time, therapists should be careful not to suggest to the injured client that they are like the unfaithful spouse or that they would have acted in a similar way. Secondly, therapists may invite clients to reflect on their own experience of “forgiveness” by others. In other words, have them consider times in which others were generous to them and forgave them for some mistreatment or wrongdoing. This can facilitate increased humility and a greater openness to forgiving their partner.

When unfaithful partners humbly accept responsibility for their actions and express sorrow and empathy for the pain their behaviours have brought, it can have a softening effect on betrayed partners, and vice versa. The reciprocal effects of humility help couples grow together, rather than apart, as there is less need for them to remain in a defensive position or to feel a need to retaliate. Instead, they can begin to identify with their partner's need to be forgiven and find the motivation necessary to extend forgiveness (Worthington, 1998).

#### *Commitment and Hope*

For couples working together in therapy, forgiveness is most likely to occur when both partners desire reconciliation and when the couple is willing to put forth a unified effort to facilitate healing. Commitment to the relationship is highly significant for the success of the forgiveness process because partners' level of commitment and hope for the future will influence their present behaviours and the decision to forgive (Waldron & Kelley, 2008). Relationship commitment engenders a willingness to make sacrifices for the overall good, and forgiveness of infidelity is a significant act of sacrifice for the good of the relationship. Therefore, in order for healing and reconciliation to occur, the therapist must help clients increase their commitment to the relationship and their hope for the future.

Relationship commitment includes emotional and psychological attachment, a long-term perspective on the relationship, the intent to continue in the relationship, and cognitive interdependence (i.e., a sense of togetherness and identification as a couple, not just two separate individuals) (Agnew & Gephart, 2000; Agnew et al., 1998). These aspects of commitment are reciprocally related, and treatment can focus on enhancing any of them as a means of building commitment. Even the *desire* to keep the relationship together, despite limited hope of success, can provide a starting point for healing.

In some cases partners may have a hard time finding the commitment and hope necessary for forgiveness. After an affair has been discovered it may be difficult for partners to remember the good times in their relationship and feelings of love they have toward each other. Therapists can ask couples to reflect on times of past closeness and connection, common interests and

desires, positive memories, and investments made in the relationship. Even early in treatment when commitment and hope may be low, it is helpful to ask couples about the beginning of their relationship and what attracted them to each other. Such discussions of good times, memorable events, and positive feelings could also be the focus of homework assignments for the couple.

Along with increasing commitment, building up hope is also critical to the forgiveness process. A couple's sense of hope is often connected to common goals and dreams that tie them together, and a discussion of these is particularly helpful in facilitating increased hope for the future. Such goals might include raising healthy children, financial and professional goals, and enjoying retirement together. Therapists should encourage couples to consider the goal of developing a relationship that transcends the infidelity and emerges stronger than before. Envisioning a new and improved relationship often leads to an increase of hope and commitment, which may be complemented by increases in unity and willingness to apologize and forgive.

### *Apology*

Infidelity typically causes a serious breach in partners' relational well-being and their identity as a couple. In order for relationship healing to occur, infidelity cannot be merely tolerated or endured. Forgiveness plays a critical role in the process of healing and reconciliation. However, betrayed partners may not want to take a chance on being wounded again, and forgiveness may appear too risky or even unwise, especially if it is erroneously confounded with condoning or permissiveness. In most cases, it requires extraordinary courage for partners to decide to forgive. Working on the unifying factors described above helps the roots of forgiveness grow and sets the stage for a genuine apology.

Apologizing is a critical step for relationship healing and reconciliation after an affair. Specifically, apologies help soothe the wounds caused by infidelity, increase trust, and resolve the power imbalances resulting from infidelity by establishing a sense of safety and control in the injured spouse (Fitness, 2001; Gordon & Baucom, 1998). Apologies must not be taken lightly or rushed into. A genuine apology requires significant effort and preparation. Through partners' efforts to develop and express empathy, humility and accountability for one's actions, couples may develop a profound empathic connection, which provides an important foundation for a genuine apology.

Numerous apologies may have already been offered, but therapists and clients may plan for a specific session in which partners come prepared to apologize and ask for forgiveness (Case, 2005). Prior to facilitating an apology, the therapist must be clear that the unfaithful partner understands the damage caused by his or her behaviour, is truly sorry for the offense, and is committed to remain faithful (Fitness, 2001; Steiner, 2000). This can be ascertained by observing partners' efforts to acknowledge responsibility for their behaviour and communicate empathy, understanding, and remorse for the harm they have done. An apology is more than saying, "I'm sorry." A genuine apology is grounded in an empathic understanding of the damage that has been done by one's actions and includes an honest acknowledgment of wrongdoing, sincere expression of sorrow and regret, a pledge to be faithful, and a commitment to do whatever is necessary to help facilitate healing from the pain and damage caused by the affair (Couch, Jones & Moore, 1999; Fincham, 2000; Fitness, 2001; Flanagan, 1992; Gold & Weiner, 2000; Spring, 2004; Worthington, 1998).

During the apology the unfaithful partner should express sincere remorse, be specific and straightforward, and only address his or her own behaviour (Mitchell, 1989; Spring, 2004). Some partners may experience difficulty offering a genuine apology in this manner and may undermine the effectiveness of the apology by being vague, offering excuses, minimizing their behaviour,

being self-protective, becoming defensive, or being coercive and manipulating. Moreover, unfaithful partners are likely to have made multiple apologies already; however, until they accept responsibility for their behaviour, acknowledge the extent of the hurt caused, and are able to express true sorrow; their apologies are likely to remain unsuccessful. Therefore, it is helpful for therapists to explore with clients why previous apologies were unsuccessful and collaborate on making them more effective.

An apology can be a deciding event during forgiveness work, and the expression of empathy and remorse is highly important for the apology to be accepted. Preparation for the apology is important and sometimes requires individual sessions with the unfaithful partner. It is critical that betrayed partners feel that the other is truly sorry for the damage that has been done to the relationship. When they sense this, injured partners may feel safe to forgive, believing it is less likely for a remorseful spouse to engage in another affair (Gordon & Baucom, 1998).

If sincerely offered, an apology that includes an expression of sorrow and emotional distress by the unfaithful partner over his or her damaging actions will likely invite softening and increased empathy from the betrayed spouse (Fincham, 2000; Fitness, 2001; Gold & Weiner, 2000; Worthington, 1998). Empathy arising from a genuine apology affects the betrayed partner favourably by mitigating anger, decreasing motivation toward retaliation, decreasing the need to maintain distance from the unfaithful partner, and increasing motivation toward conciliatory behaviours (Darby & Schlenker, 1982; McCullough et al., 1997). A single apology may not be sufficient, as it may take some time for betrayed partners to accept the apology or trust the sincerity of it. Therefore, therapists may need to normalize this and encourage the unfaithful partner to be patient and apologize genuinely more than once (Spring, 2004).

#### *Difficulties and Potential Barriers to Forgiveness*

Forgiveness is often a long and difficult process. Events in daily life may trigger memories of the betrayal. Recurring feelings of anger, sadness, resentment, and insecurity are common but may nonetheless seem like setbacks for couples and may leave them feeling that much of their work has been in vain. However, lingering feelings of betrayal and hurt are common in cases of infidelity. Therapists should assist couples in working through perceived setbacks, letting them know that these experiences are normal and usually decrease with time.

It is common for partners who engaged in infidelity to be impatient with the pace of forgiveness. They want to move quickly past the affair and “move on” to rebuilding the relationship. They may become frustrated with their partner’s recurring grief, anger, and demands for accountability. However, impatience can be a significant barrier to forgiveness and healing. In such cases, therapists should remind the offending partner and assure the betrayed partner that forgiveness requires time and patience. Specifically, therapists should redirect unfaithful partners toward empathic understanding of their partner’s struggles and remind them that impatience will likely come across as insensitivity and a lack of support, which may foster further resentment in the betrayed partner and obstruct forgiveness and healing.

Couples may also find it difficult to know when forgiveness has been completed. Therapists should help clients understand that forgiveness is a process, rather than a one-time event. Individuals and couples may move through forgiveness work at different rates, depending on their unique characteristics and circumstances. Betrayed partners may feel that they have forgiven the other, only to find painful, bitter, or angry feelings emerging again. Reminders of the betrayal and persistent feelings of anger or sadness may leave both partners feeling discouraged and unsure if forgiveness is possible. Therapists must frequently remind clients of the natural course of forgiveness, explaining that it takes place in small steps with occasional setbacks. Forgiveness is an ongoing and recurring choice, and couples may be

required to work through the steps of forgiveness several times.

Apart from these challenges with forgiveness, there are other factors which may interfere with forgiveness and delay resolution for couples. Weeks et al., (2003) have identified a number of factors that can interfere with or serve as obstacles to promoting forgiveness and have discussed how to deal with each of these barriers. These obstacles include narcissism, shame, accusatory suffering, anger, and fear that infidelity may happen again (Worthington, 1998). Of course this list is not exhaustive and the clinician must be aware of the myriad of other factors that can make facilitating forgiveness difficult. The ability to acknowledge responsibility and to develop empathy, humility, and commitment are likely to be adversely influenced by these individual factors, making the realization of forgiveness especially difficult (Fife et al., 2007). Therefore, it is highly important for therapists to recognize and address these obstacles as soon as possible. Sometimes individual therapy is required to work through these issues. In other cases it may be necessary to help the other partner understand that forgiveness will never be granted or received due to some of these factors. When the second situation occurs, the outcome of therapy for the couple's relationship is uncertain.

Finally, it is possible that the unfaithful partners are not willing to engage in the process described above. They may not desire to work on empathy and humility, choosing instead to avoid feeling their partners' pain and refusing to accept responsibility for their actions. In such cases, true reconciliation and relationship healing may be significantly impaired. But this does not preclude the injured partner from being able to forgive and become unburdened from the pain and anger that may have accompanied the betrayal. Forgiveness does not require reconciliation, nor does it require an interest by the other party. Forgiveness can be achieved independently, and therapists should consider the guidelines provided by some of the individually-focused models of forgiveness when working with clients in this situation (see Baskin and Enright, 2004; Gordon et al., 2005).

### **Case Example**

Ryan and Amanda (names have been changed and identifying information has been excluded) sought therapy after Ryan admitted to having several sexual encounters with prostitutes. Amanda reported that she had noticed on a few occasions several hundred dollars being withdrawn from their bank account one day and then being replaced the next. Ryan lied about the money claiming that it was for a payment on his work vehicle. After being confronted further by Amanda, Ryan confessed that he had been using the money for sex and then replacing it with money from the company that was supposed to go toward the truck payment. At the beginning of treatment, Amanda indicated that they were attending therapy to see if the relationship was worth saving and whether reconciliation was even possible.

Amanda and Ryan experienced reactions quite typical of couples seeking therapy for infidelity. The first few sessions involved addressing the emotional turmoil that surrounded the revelation of infidelity. Amanda said that she still had feelings of love for Ryan, but she felt terribly betrayed and deceived by her husband, and she expressed feelings of deep hurt and anger toward him. The therapists validated her experience by expressing empathy for her and the painful emotions she was feeling. Ryan expressed shame and remorse for his behaviour but found the constant questioning from Amanda difficult to handle. Here, it was essential for the progress of therapy to assist Ryan in being understanding, non-defensive, and patient with his wife. The therapist also spent time assessing Ryan and Amanda's relationship prior to the infidelity. They indicated that their relationship had been deteriorating over the past two years, with greater emotional and physical distance being felt by both of them.

After several discussions with Ryan and Amanda about their relationship and possible

reasons to stay together, both expressed a desire to save the marriage and work on forgiveness and healing. Several sessions were spent specifically on the process of forgiveness. Forgiveness work began with a discussion of what forgiveness meant to them. Amanda and Ryan each acknowledged the importance of forgiveness for both individual and relationship healing. However, the notion of forgiveness was difficult for Amanda because she felt that forgiving Ryan was like letting him off the hook for his behaviours and the pain she continued to feel. After discussing alternative meanings and clarifying the concept of forgiveness with Ryan and Amanda, she felt comfortable to move forward with forgiveness in therapy.

Therapy then moved to an increased focus on empathy as the therapist helped Ryan listen to his wife in a compassionate, non-defensive way. Specifically, Ryan was coached in empathic listening, which helped him understand more fully Amanda's emotional experience and enabled him to communicate this understanding to her along with sorrow for the pain that she was experiencing. As Amanda felt understanding and remorse from Ryan, she began to soften toward him. The couple also explored the relationship context of the infidelity. Both recognized that their relationship was suffering long before the betrayals occurred and that both had contributed to the distance between them. As Amanda recognized her own shortcomings, she came to see that Ryan was not malicious or bad, but rather fallible. As Ryan felt understanding from Amanda, he was also better able to be patient and understanding with her.

Although both felt they were making progress, Ryan needed some help in taking responsibility for his actions. In some sessions he tried to minimize his behaviours or make excuses for what he did. However, after spending some time on humility-increasing interventions, Ryan became more honest about what he had done. Through questioning and coaching by the therapist, Ryan acknowledged and accepted responsibility for his actions. Amanda, in turn, began to sense his sincerity. She was even able to express that "we all make mistakes at times or do things we wished we'd never done" and admitted on her own that she too had made mistakes in life.

As Ryan and Amanda experienced more positive emotional connection, the therapist facilitated experiences that brought increased commitment and desire to stay together. It was particularly helpful for them to talk to each other in session about the early history of their relationship, the things that attracted them to each other, and the positive memories they had together. This was followed up with an assignment to review picture albums together and talk about memorable times as a couple. These experiences enhanced Ryan and Amanda's sense of togetherness and identity as a couple. They reminded them of the many good times they had shared and increased their desire to work things out. In later sessions, they talked more about the goals they had as a couple and as a family. Ryan and Amanda reported that these positive experiences brought increased hope that they could heal. The renewed sense of hope brought an increased effort on each of their parts to nourish their relationship further, which resulted in a growing closeness, connection, and motivation to forgive.

The positive growth in Ryan and Amanda's relationship helped prepare them for a meaningful apology from Ryan and the ability to extend forgiveness by Amanda. Although Ryan had apologized many times before, the changes in his behavior, the couple's focus on unifying factors, and their increased closeness prepared them for a more meaningful apology by Ryan. Earlier attempts to apologize were seen by Amanda as Ryan merely trying to relieve himself of guilt and pushing her to "just get over" the infidelity. The genuine apologies which he offered as they worked through the process of forgiveness were accepted as sincere and had a softening and healing effect on Amanda. Ryan again acknowledged the wrongfulness of his behaviours and expressed deep remorse for the pain that he had caused her. He pledged his commitment to her

and promised never to betray her again. With the renewed commitment and sincere investment in the relationship that Amanda had seen in Ryan, she was able to accept his apology and extend forgiveness to him. Although there were moments in which hurt and anger resurfaced, the healing, renewing effects of forgiveness helped them endure brief setbacks and continue to move forward in their marriage.

### **Conclusion**

The discovery of an affair presents a major crisis for couples in committed relationships. The betrayal and the subsequent emotional experiences of both partners have significant consequences for both individual and relational well-being, making infidelity one of the most difficult presenting problems to treat in couple's therapy. The approach to forgiveness intervention presented above offers a framework for therapists working with clients who are dealing with this complicated situation.

As previously stated, forgiveness is not regarded as sufficient for reconciliation, nor is the model a comprehensive approach to treating infidelity. Rather, it is one part of a larger therapeutic process. The precursory steps before forgiveness help couples prepare to embark on forgiveness work and will likely make the process of forgiveness less difficult and its success more likely. It is important to point out that even after forgiveness has occurred, it is essential for couples to continue working on nourishing their relationship and preventing future betrayals. Therapists need to be flexible and collaborative with couples in order to tailor treatment to their specific needs which will make a successful outcome more likely.

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### **Table 1: Forgiveness Model**

#### Precursors to Forgiveness

- Encourage a commitment to treatment
- Help couple manage initial crisis
- Examine the relationship context prior to the infidelity
- Help couples establish appropriate relationship boundaries
- Defining forgiveness: clarify clients' definitions and clear up misunderstandings

#### Facilitating Forgiveness: Four Unifying Factors

- Empathy
  - Learn non-defensive, empathic listening
  - Develop mutual understanding of each other's experience
  - Verbal expression of understanding
  - Begin to develop a view of partner as imperfect and fallible, rather than innately bad or cruel
- Humility
  - Decrease rationalization and blaming
  - Take responsibility for one's actions and acknowledge the damage that was done
  - Express sorrow for pain the other has experienced
  - Reflect on own forgiven-ness
- Commitment and Hope
  - Focus on desires to keep the relationship together
  - Review past good memories, closeness and connection, and positive feelings
  - Reflect on shared goals and dreams
- Apology
  - Honest acknowledgment of wrongdoing
  - Sincere expression of sorrow and regret
  - Pledge to be faithful
  - Commitment to do whatever is necessary to help facilitate healing from the pain and damage caused by the infidelity
  - Ask for forgiveness

## References

- Agnew, C. R., & Gephart, J. M. (2000). Testing the rules of commitment enhancement: Separating fact from fiction. *Representative Research in Social Psychology*, 24, 41–47.
- Agnew, C. R., Van Lange, P., Rusbult, C. E., & Langston, C. A. (1998). Cognitive interdependence: Commitment and the mental representation of close relationships. *Journal of Personality and Social Psychology*, 74, 939–954.
- Al-Mabuk, R. H., Enright, R. D., & Cardis, P. A. (1995). Forgiveness education with parentally love-deprived late adolescents. *Journal of Moral Education*, 24, 427–444.
- Atkins, D. C., Eldridge, K. E., Baucom, D. H., & Christensen, A. (2005). Behavioral marital therapy and infidelity: Optimism in the face of betrayal. *Journal of Consulting and Clinical Psychology*, 73, 144–150.
- Baskin, T. W., & Enright, R. D. (2004). Intervention studies on forgiveness: A meta-analysis. *Journal of Counseling and Development*, 82, 79–90.
- Battle, C. L., & Miller, I. W. (2005). Families and forgiveness. In E. L. Worthington (Ed.), *Handbook of forgiveness* (pp. 227–241). New York: Routledge.
- Bird, M. H., Butler, M. H., & Fife, S. T. (2007). The process of couple healing following infidelity: A qualitative study. *Journal of Couple and Relationship Therapy*, 6(4), 1–25.
- Boscolo, L., Cecchin, G., Hoffman, L., & Penn, P. (1987). *Milan systemic family therapy*. New York: Academic Press.
- Butler, M. H., Dahlin, S. K., & Fife, S. T. (2002). “Languaging” factors affecting clients’ acceptance of forgiveness intervention in marital therapy. *Journal of Marital and Family Therapy*, 28, 285–298.
- Butler, M. H., & Gardner, B. C. (2003). Adapting enactments to couples reactivity: Five developmental stages. *Journal of Marital and Family Therapy*, 29, 311–327.
- Butler, M. H., Harper, J. M., & Seedall, R. B. (2009). Facilitated disclosure versus clinical accommodation of infidelity secrets: An early pivot point on couple therapy. Part 1: Couple relationship ethics, pragmatics, and attachment. *Journal of Marital & Family Therapy*, 35, 125–143.
- Cano, A., & O’Leary, K. (2000). Infidelity and separations precipitate major depressive episodes and symptoms of nonspecific depression and anxiety. *Journal of Consulting & Clinical Psychology*, 68, 774–781.
- Case, B. (2005). Healing the wounds of infidelity through the healing power of apology and forgiveness. *Journal of Couple and Relationship Therapy*, 4(2/3), 41–54.
- Couch, L., Jones, W. H., & Moore, D. S. (1999). Buffering the effects of betrayal: The role of apology, forgiveness and commitment. In J. M. Adams, & W. H. Jones (Eds.), *Handbook of interpersonal commitment and relationship stability* (pp.451–469). New York: Kluwer Academic / Plenum.
- Coyle, C. T., & Enright, R. D. (1997). Forgiveness intervention with postabortion men. *Journal of Consulting and Clinical Psychology*, 65, 1042–1046.
- Darby, B. W., & Schlenker, B. R. (1982). Children’s reactions to apologies. *Journal of Personality and Social Psychology*, 43, 742–753.
- DiBlasio, F. A. (1998). The use of a decision-based forgiveness intervention within intergenerational family therapy. *Journal of Family Therapy*, 20, 77–94.
- Fenell, D. (1993). Characteristics of long-term first marriages. *Journal of Mental Health Counseling*, 15, 446–460.

- Fife, S. T., Weeks, G., R., & Gambescia, N. (2007). The intersystems approach to treating infidelity. In P. Peluso (Ed.) *Infidelity: A practitioner's guide to working with couples in crisis* (pp. 71-97). Philadelphia: Routledge.
- Fife, S. T., & Whiting, J. B. (2007). Values in family therapy research and practice: An invitation for reflection. *Contemporary Family Therapy*, 29, 71-86.
- Fincham, F. D. (2000). The kiss of porcupines: From attributing responsibility to forgiving. *Personal Relationships*, 7, 1-23.
- Fincham, F. D., Hall, J. H., & Beach, S. R. (2005). "Til lack of forgiveness doth us part": Forgiveness and marriage. In E. L. Worthington (Ed.), *Handbook of forgiveness* (pp.207-225). New York: Routledge.
- Fitness, J. (2001). Betrayal, rejection, revenge, and forgiveness: An interpersonal script approach. In M. R. Leary (Ed.), *Interpersonal rejection* (pp. 73-103). New York: Oxford University Press.
- Fitzgibbons, R. P. (1986). The cognitive and emotive use of forgiveness in the treatment of anger. *Psychotherapy*, 23, 629-633.
- Flanagan, B. (1992). *Forgiving the unforgivable: Overcoming the bitter legacy of intimate wounds*. New York: Macmillan.
- Freedman, S. R., & Enright, R. D. (1996). Forgiveness as an intervention goal with incest survivors. *Journal of Consulting and Clinical Psychology*, 64, 983-992.
- Glass, S. P. (2002). Couple therapy after the trauma of infidelity. In A. S. Gurman & N. S. Jacobson (Eds.), *Clinical handbook of couple therapy* (3rd ed., pp. 488-507). New York: Guilford Press.
- Gold, G. J., & Weiner, B. (2000). Remorse, confession, group identity and expectancies about repeating a transgression. *Basic and Applied Social Psychology*, 22, 291-300.
- Gordon, K., & Baucom, D. H. (1998). Understanding betrayals in marriage: A synthesized model of forgiveness. *Family Process*, 37, 425-449.
- Gordon, K. C., & Baucom, D. H. (1999). A multitheoretical intervention for promoting recovery from extramarital affairs. *Clinical Psychology: Science and Practice*, 6, 382-399.
- Gordon, K. C., Baucom, D. H., & Snyder, D. K. (2000). The use of forgiveness in marital therapy. In M. McCullough, K. Pargament, & C. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp.203-227). New York: Guilford.
- Gordon, K. C., Baucom, D. H., & Snyder, D. K. (2004). An integrative intervention for promoting recovery from extramarital affairs. *Journal of Marital and Family Therapy*, 30, 213-231.
- Gordon, K. C., Baucom, D. H., & Snyder, D. K. (2005). Forgiveness in couples: Divorce, infidelity, and couples therapy. In E. L. Worthington (Ed.), *Handbook of forgiveness* (pp.407-421). New York: Routledge.
- Gottman, J. M. (1994). *What predicts divorce?* Hillsdale, NJ: Erlbaum.
- Harris, A. H. S., Luskin, F., Norman, S. B., Standard, S., Bruning, J., Evans, S., & Thoresen, C. E., (2006). Effects of group forgiveness intervention on forgiveness, perceived stress, and trait-anger. *Journal of Clinical Psychology*, 62, 715-733.
- Johnson, S. M. (2004). *The practice of emotionally focused marital therapy: Creating connection* (2<sup>nd</sup> Ed.). New York: Taylor Francis.
- Kessel, D. E., Moon, J. H., & Atkins, D. C. (2007). Research on couple therapy for infidelity: What do we know about helping couples when there has been an affair? In P. R. Peluso (Ed.) *Infidelity: A practitioner's guide to working with couples in crisis*. New York: Routledge.

- Legaree, T., Turner, J., & Lollis, S. (2007). Forgiveness and therapy: A critical review of conceptualizations, practices, and values found in the literature. *Journal of Marital and Family Therapy, 33*, 192-213.
- Malcolm, W. M., & Greenberg, L. S. (2000). Forgiveness as a process of change in individual psychotherapy. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp.179-202). New York: Guilford.
- McCullough, M. E. (2000). Forgiveness as human strength: Theory, measurement, and links to well-being. *Journal of Social and Clinical Psychology, 19*, 43-55.
- McCullough, M. E., Worthington, E. L., Jr., & Rachal, K. C. (1997). Interpersonal forgiving in close relationships. *Journal of Personality and Social Psychology, 73*, 321-336.
- McGee, D., Del Vento, A., & Bavelas, J. B. (2005). An interactional model of questions as therapeutic interventions. *Journal of Marital and Family Therapy, 31*(4), 371-384.
- Mitchell, C. E. (1989). Effects of apology on marital and family relationships. *Family Therapy, 16*, 283-287.
- Schneider, J., Corley, M., & Irons, R. (1998). Surviving disclosure of infidelity: Results of an international survey of 164 recovering sex addicts and partners. *Sexual Addiction and Compulsivity, 5*, 189-217.
- Seltzer, J. A. (2004). Cohabitation in the United States and Britain: Demography, kinship, and the future. *Journal of Marriage and Family, 66*, 921-928, retrieved on September 26, 2007, <http://web.ebscohost.com/ehost/pdf?vid=4&hid=109&sid=180a3935-efcd-4fc6-8405-6c6e80b33971%40sessionmgr106>
- Simon, S., & Simon, S. (1990). *Forgiveness: How to make peace with your past and get on with your life*. New York: Warner Books.
- Snyder, D. K., & Doss, B. D. (2005). Treating infidelity: Clinical and ethical directions. *Journal of Clinical Psychology, 61*, 1453-1465.
- Snyder, D. K., Baucom, D. H., & Gordon, K. C. (2007). Treating infidelity: An integrative approach to resolving trauma and promoting forgiveness. In P. Peluso (Ed.) *Infidelity: A practitioner's guide to working with couples in crisis* (pp. 99-125). Philadelphia: Routledge.
- Spring, J. A. (2004). *How can I forgive you?: The courage to forgive, the freedom not to*. New York: HarperCollins.
- Steiner, C. (2000). Apology: The transactional analysis of fundamental exchange. *Transactional Analysis Journal, 30*, 145-149.
- Waldron, V. R., & Kelley, D. L. (2008). *Communicating forgiveness*. Thousand Oaks, CA: Sage.
- Weeks, G. R., Gambescia, N., & Jenkins R. E. (2003). *Treating infidelity: Therapeutic dilemmas and effective strategies*. New York: W.W. Norton & Company, Inc.
- Weeks, G. R., & Treat, S. R. (2001). *Couples in treatment: Techniques and approaches for effective practice* (2nd ed.). Philadelphia, PA: Brunner-Routledge.
- Whisman, M., Dixon, A., & Johnson, B. (1997). Therapists' perspective of couple problems and treatment issues in couple therapy. *Journal of Family Psychology, 11*, 361-366.
- Worthington, E. L., Jr. (1998). An empathy-humility-commitment model of forgiveness applied within family dyads. *Journal of Family Therapy, 20*, 59-76.