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Supporting Chronically Betrayed Spouses



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Supporting Chronically Betrayed Spouses

The purpose of this document is to provide an understanding of common reactions to the betrayal of a spouse sexual acting out as well as consider strategies to support and encourage them along their healing journey.

Common symptoms / Reactions

There is a high level of emotional devastation experienced by someone who learns their spouse has been sexually unfaithful (i.e, affair, pornography). This intense pain is difficult to be fully understood by those who have not experienced it. Sexual infidelity is tremendously damaging to a spouse's self-esteem, well-being, trust (both personal and relational), and emotional safety. It is helpful to be aware of some common reactions to such pain, as outlined below.

- Re-experiencing – uncontrollable, recurrent, and intrusive thoughts and memories about the event or series of events.
- Disturbance in eat / sleep patterns– sudden night awakenings, difficulty getting to sleep, and loss of appetite.
- Avoidance – avoiding activities, places or reminders of betrayal event.
- Concentration Difficulty – trouble making decisions and maintaining focus due to unsuccessful attempts at making the strange new world fit where so much of what was once accepted no longer makes sense.
- Hypervigilance and paranoia – repeatedly searching for evidence of ongoing betrayal, seeking to control environment(s), including all aspects of spouse's life.
- Intense anxiety and fear – associated with spouse spending excessive time on phone or coming home a few minutes late.
- Frequent and intense shifts in emotions – unpredictable and sudden shifts in moods or intense reactions seemingly without provocation.
- Shame and embarrassment - due to the nature of the revealed behavior.
- Feelings of inadequacy – as a person.
- Intense resentment and rage – in response to abuse and pain inflicted by chronically repeated betrayal.

Individuals will differ on the intensity and number of symptoms experienced. For example, to someone who has been more “sheltered” from sexuality, this situation may seem worse. Conversely, if the individual has experienced sexual trauma in the past, dealing with a spouse's sexual struggles may be particularly difficult. However, generally all experience overwhelming loss of stability, safety, and control.

Considerations in Healing Process

The healing process is one that takes time and has multiple stages. This paper will focus on how helpers can facilitate stabilization after initial crisis and discovery. It is recommended you meet individually with the betrayed spouse during the initial phase of the healing process. The information below may be helpful in guiding your interactions with the betrayed spouse.

- Listen – Their world has been shattered and they are in crises. Time and space are important so the betrayed spouse can explain what has happened and express their feelings. Listen to the confusion, fear, anger, and pain without rushing to conclusions or giving advice. Both the expression of such emotions by the betrayed and the acknowledgement of such pain by the betrayer is critical for the healing process. It can be helpful to counsel the betrayer to accept the expression of anger by the spouse, in appropriate ways. This is a normal part of the initial phase of healing.

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- Validate private pain – Betrayed spouses can find it infuriating that their unfaithful spouse is known in public as a wonderful, loving and responsible human being. Their experience is a painful reality of the great distance between such a public façade and their own private reality. It may be beneficial to validate this pain (i.e., “it makes sense that you would feel that way”) and help the betrayed spouse find healthy ways to cope with this distorted image (i.e., praying Psalms to turn anger over to God).
- Remember differences – In a typical female’s mind, it is very difficult to conceptualize, rationally, and emotionally, why her husband would fall into sexual sin. She finds it difficult to remove the emotional component from sex in the way a male can. Conversely, a male’s mind will view a wife’s transgression with a different lens than she has. Gender differences play a role in how sexual sin is interpreted.
- Respond – Let the betrayed spouse know they did not cause the sexual acting out, it is not their fault, and it has nothing to do with their value as a person created in the image of Christ. Affirm to the betrayed spouse you will stand with and support them through the healing process.
- Assess – Consider asking open-ended questions to assess how the betrayed spouse is doing (i.e, sleep patterns, eating habits, caring for children). It is helpful to keep this questioning basic and focus on how you can support the betrayed spouse with day to day spiritual, emotional, mental, and physical self-care.
- Provide support – Offer to provide assistance. Help connect the betrayed spouse to others within the church body that can provide encouragement and a safe place to share. It may be helpful to provide guidance to sort out who can and cannot be turned to for support and help. Remind the betrayed spouse it is not their job to fix or heal their spouse nor keep secrets to protect their spouse. Confirm your intention to help the betrayer find appropriate accountability.
- Encourage education – As the healing process moves forward, it can be helpful to encourage the betrayed spouse to seek education about the problematic sexual behavior of the spouse. This can help the spouse separate herself in a healthy way as well as develop accurate expectations for recovery. Education topics may include: 1) the problem itself, 2) treatment options, and 3) learning how others have dealt with this problem.
- Disclosure – There is a need for both the betrayer to be fully truthful and the betrayed spouse to be considerate in the questions they ask. It may take a while to develop an appropriate disclosure process, and this difficult process should be worked out in consultation with a trained professional. There are a few points to consider in working with a couple wanting to move forward in the disclosure process.
 - It can be helpful if both spouses have had individual counseling to achieve a degree of support and stability prior to full disclosure.
 - There is a need for structure, containment and guidance with a disclosure process that may otherwise go off-course. Consider a consultation with a counselor to talk through this format.
 - It is highly recommended you discourage the betrayed spouse from asking questions about graphic details (sexual acts, positions, locations, words exchanged, descriptions of bodies) as they may create images on the brain that will be difficult to override. The betrayed spouse should prayerfully and patiently consider the questions they ask.
 - It is highly recommended you emphasize to the betrayer the need to fully disclose the truth and not withhold appropriate information when asked. Withholding information, for fear of the pain it will cause a spouse in the moment, will only lead to additional damage in the relationship.

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Reasons to refer to professional counseling

There are similarities in how individuals respond to relational trauma, such as betrayals, as well as differences. The time and amount of emotional processing for each betrayed spouse can vary. At times, it can be difficult to determine if and when an individual should be referred to professional counseling. As you interact with individual in crises, it can be helpful to be aware of a few ‘red flags’ that may warrant referral (outlined below). If in doubt about referral, please contact one of the clinical counselors for a consultation.

- Pervasive and ongoing pattern of physical disturbances – after initial discovery, it is common for individuals to experience sleep and appetite disturbance, loss of energy, and somatic symptoms (i.e., headaches, backaches, abdominal pain). A referral should be considered if these symptoms continue, with no improvement, over a 2 – 3-week period.
- Presence of panic attacks – a discrete period with sudden onset of intense fearfulness, and terror. Such attacks often include symptoms such as shortness of breath, chest pain or discomfort, smothering sensations, and fear of “going crazy” or losing control.
- Intense disturbance in daily tasks – an inability to perform daily tasks (i.e., child care, job responsibilities).
- Ongoing social withdrawal – a pattern of refusing to see and spend time with friends and family.
- Feelings of abandonment from God – the intense emotions that follow a betrayal can lead to one feeling distant from God. However, referral should be considered if there is a pervasive sense of feeling abandoned or forsaken by God.
- Limited to no progress in healing process – referral should be considered if there is little to no change, over a 1 – 2-month period, in the individual’s ability to process through painful emotions in a healthy way. In addition, if there are ongoing feelings of being “stuck” by either the individual or the helper.
- The helper’s discomfort – don’t underestimate the support you are providing through active listening, nonjudgmental responses, and validation of painful emotions. At times, however, the intensity and complexity of emotions involved in a relational betrayal can lead helpers to feel ill-equipped to appropriately support the betrayed spouse. If this is an ongoing concern, please consider consultation or referral to professional counseling.

For additional recommended resources for betrayed spouses, please visit <https://www.accounseling.org/supportforspouses/>.