
The Practitioners' Notebook / Bloc-notes des praticiens

Integrating Attachment Theory to Support a Client Coming to Terms with Infidelity

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ABSTRACT

Finding it difficult to overcome the emotional distress experienced when considering her husband's infidelity, a client sought counselling support. The client's goal was to learn about herself and to use the experience as an opportunity for self transformation. The case study utilizes Attachment Theory and Cognitive Behavioural Therapy to help the client develop self-awareness and come to terms with the experience.

RÉSUMÉ

Trouvant difficile de surmonter la détresse émotionnelle éprouvée en songeant à l'infidélité de son mari, une cliente cherche appui dans un counseling. Son but était de mieux se connaître et d'utiliser l'expérience comme occasion d'auto-transformation. Cette étude de cas recourt à la théorie de l'attachement et à la thérapie cognitivo-comportementale pour aider la cliente à développer sa conscience de soi et à assumer l'expérience.

[Editor's Note: This contribution is published in the Practitioners' Notebook, a non-peer-reviewed section of the Canadian Journal of Counselling. Its intent is to provide practical information to readers. Client name(s) have been altered to protect confidentiality].

RELEVANT BACKGROUND HISTORY

Katie, a 37-year-old woman married for nine years, requested counselling services to help her deal with her husband's infidelity. Katie reported that she and her husband had previously attended five sessions of couples' counselling, which they found facilitated communication about the incident and assisted them in identifying contributing factors. Katie now wanted to focus on her own internal process. She described herself as able to understand the situation, but unable to "let go of" its emotional impact.

PRESENTING ISSUES

Difficulty coming to terms with marital infidelity.

THEORETICAL APPROACH UTILIZED

1. Cognitive Behavioural Therapy (CBT)
2. Attachment Theory

INTERVENTIONS

Congruent with CBT and Attachment Theory, one of the early therapeutic goals was to establish a strong therapeutic alliance with Katie wherein she felt safe to express her feelings, concerns, and vulnerable aspects of self. My early work with her focused on exploring her barriers to forgiveness (Gordon & Baucom, 1999). Katie described wanting to forgive her partner, but feeling unsure it was wise to “let down [her] guard.” Katie’s use of language invited two foci of work.

The first was to support Katie in identifying a concrete list of behavioural indicators that would signal someone as worthy of forgiveness. This was an adaptation of the CBT intervention *Examining the Evidence* (Leahy, 2003). This strategy allowed Katie to see that her husband met all of her indicators and that the barrier to forgiving him was her own fear. After Katie realized this, it allowed us to focus on examining her fear surrounding letting down her guard. With support in exploring her thoughts and beliefs, Katie concluded that she was afraid that she would not be able to “handle it” if her husband was unfaithful again. Supporting Katie to examine the evidence of her ability to “handle it” helped her develop strength of conviction to dispute this belief and replace it with a more adaptive belief.

As the therapeutic relationship grew, it allowed the work to deepen. Katie expressed a desire to examine how early childhood experiences informed her reaction to her husband’s infidelity. This phase of therapy was influenced by Attachment Theory, which purports that early attachment experiences set in motion expectations and beliefs, also known as working models, that in turn shape social perceptions and behaviour in regard to the nature of adult partners and relationships (Butzer & Campbell, 2008).

As suggested by Sable (2004), the purpose of exploring Katie’s early attachment experiences was to provide her with an opportunity to reflect upon and gain new understanding of experiences that have contributed to distress. To begin the work, Katie was invited to explore some of the questions in the Adult Attachment Interview (AAI). In addition to being an assessment tool, research indicates that the AAI can be a useful clinical tool to help individuals make sense of their own early childhood experiences and gain insight into how these experiences inform intimate adult relationships (Siegel & Hartzell, 2003; Steele & Steele, 2007).

During the discourse of the AAI, Katie was able to reassess her early experiences using the knowledge of her adult self. One such instance was making sense of what had led to her being placed in foster care when she was 5 years old. As a child, Katie could not make sense of the loss of her mother; she experienced the world as being scary and unpredictable. As a young child she assumed responsibility for the loss of her mother. As she explored her memories and I gently challenged her with questions that invited an alternative perspective, Katie was able to reassess her

experience. She considered the alcohol and drugs that she saw her mother consume and the violence that she witnessed as relevant factors. Katie was then supported to develop a more positive schema through a Socratic dialogue (Leahy, 2003).

Psychoeducation was provided about Attachment Theory and how early attachment experiences inform one's style of relatedness in romantic relationships (Butzer & Campbell, 2008). Katie found it reassuring and affirming to conceptualize how her husband represented an attachment figure (Sable, 2004). Katie connected her early experience of loss of her mother with the heightened anxious response and hypervigilance she has experienced since learning of her husband's infidelity. Katie valued having gained an understanding of why her husband's infidelity seemed to have "shaken her world up." Sable writes that it is useful for clients to understand responses such as fear and anxiety when there is a threat of danger or loss of an attachment figure.

Through our work together, Katie was open to examining how patterns developed in early childhood have continued to shape her style of relatedness as an adult. For example, Katie was able to link a childhood pattern of holding in her emotions to her current difficulty with experiencing and expressing deep emotions of pain and sorrow. Katie reported gaining new insight into her use of humour to distract her from her pain and was determined to challenge this pattern. Schore (2002) promotes the notion of the therapist attuning to the client in a way that modulates affect, thereby supporting a client in learning more adaptive strategies of affect regulation through attachment-focused treatment. I supported Katie by attuning to her emotions, supporting her to regulate her physiological state, and helping her use language to express her feelings. Over time, Katie became increasingly comfortable at experiencing her sadness and using language to express her feelings to others.

OUTCOMES

Katie reported that she had come to forgive her partner and noted that she felt free of the emotional pain that she had experienced earlier. Katie identified positive changes as a result of our work together:

1. Feeling more empowered to talk about her feelings and needs with her husband and actively bring about changes in her relationship.
2. Now being able to identify the early warning signs of anxiety and then implement strategies to reduce the anxiety.

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About the Author

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