The “Other” Side of Infidelity: The Experience of the “Other” Partner, Anxious Love, and Implications for Practitioners

Paul DePompo*, Misa Butsuhara

[a] Cognitive Behavioral Therapy Institute of Southern California, Newport Beach, CA, USA.

Abstract

Research on affairs has failed to acknowledge the “other woman” or “other man,” focusing only on the married spouses. The goal of this study was to explore the unique experience of the “other” partner to determine aspects critical to the navigation and healing process of these relationships. In this qualitative study, 49 participants, between the ages of 23 and 60 (N = 49; 31f, 18m), who were engaged in meaningful relationships with married partners completed a set of questionnaires and engaged in a semi-structured interview. Measures, which included the Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI), and The Experience in Close Relationships Questionnaire Revised (ECR-R), indicated clinical levels of anxiety and maladaptive attachment styles among all participants. Seven themes emerged into a model that incorporates the role of anxiety, along with the origin and maintenance of these relationships. A protocol that combines areas of trauma, GAD, and social anxiety will likely be beneficial.

Keywords: affairs, anxiety, attachment, infidelity, other woman

Introduction

Infidelity is common, estimated to occur in 20% to 40% of marriages in America (Atkins, Baucom, & Jacobson, 2001). This suggests there are many “other” men and women who are emotionally involved in relationships with cheating partners. Research shows that 90% of cheating spouses do not marry their affair partners (Lawson, 1988). Additionally, the cheating spouse often has the option of engaging in couple therapy, which has been shown to help re-build the marriage after an affair (Atkins, Eldridge, Baucom, & Christensen, 2005; Mao & Raguram, 2009; Marin, Christensen, & Atkins, 2014). Therefore, 90% of the “other” partners are left without support. Research on the psychological impact of being the “other” person in an adulterous relationship is essentially nonexistent.

Existing studies on infidelity have examined topics such as attachment (Allen & Baucom, 2004; Bogaert & Sadava, 2002; DeWall et al., 2011), narcissism (Campbell & Foster, 2002; Foster, Shrira, & Campbell, 2006; McNulty & Widman, 2014), couple therapy (Atkins, Marin, Lo, Klann, & Hahlweg, 2010; Baucom, Gordon, Snyder, Atkins, & Christensen, 2006; Gordon, Baucom, & Snyder, 2004), and trauma (Gordon, Baucom, & Snyder, 2008;
Heintzelman, Murdock, Krycak, & Seay, 2014; Snyder, Gordon, & Baucom, 2004). These studies only take into consideration the original couple and how infidelity affects it. In the research, to date, the “other” partner has been ignored.

There is a general disdain for the “other woman” that has always been ubiquitous in society and continues in the current mainstream media (Lawson, 1988). She is usually portrayed as a harlot and is disliked, much more than the adulterous man is, by the public, as was Nathaniel Hawthorne’s scarlet-letter-wearing Hester Prynne.

Laurel Richardson (1985) conducted a qualitative sociological study examining “other women” and their overall experiences. She noted that there was an increasing amount of women involved with married men, due to a general lack of availability of single men, for women over the age of 35. Richardson found that these women did not intend to “steal” husbands, as is often assumed by society. Richardson’s study was sociological in nature; she did not examine the psychological factors that led to the maintenance of the relationship and did not measure mood in her study. Moreover, women who ended up marrying their partners were excluded from the study. This leaves a gap in understanding differences between why and how these relationships work. Lastly, current investigations of the “other” partner warrant examining both men and women, whereas Richardson only examined women.

Many questions exist for the missing “others,” participating in the infidelity equation. What factors lead them into this relationship? How do they process being intimate with someone with a history of cheating? How might factors such as attachment style and mood affect the engagement and maintenance of infidelity? We know that married couples seek treatment for this problem, but does the “other” partner also seek treatment, or potentially suffer in silence? The present qualitative study seeks to understand the unique emotional experience of the “other” partner. Specifically, this study seeks to understand the psychological impact of being the “other” partner by developing a conceptual model of how these relationships begin and how they are maintained.

**Literature Review**

A review of the current literature on infidelity highlights the following categories of study: possible reasons for infidelity, couple therapy, and trauma. The role of the “other” person has been consistently left out in the research on infidelity and has not been acknowledged in any suggestions for future research. Researchers have acknowledged that there is a paucity of research on the “other” partner (Blow & Hartnett, 2005). A clearer understanding of the role of the “other” person can bring more insight to couples’ infidelity research and clinical applications for infidelity treatment.

**Possible Reasons for Infidelity**

Experiencing low marital quality (Allen et al., 2005), as well as low levels of commitment and investment in the relationship are associated with infidelity (Drigotas, Safstrom, & Gentilia, 1999). Precursors of male infidelity, in particular, include pre-marital sexual dissatisfaction and female invalidation (Allen et al., 2008). The concept of sexual dissatisfaction leaves more to be examined, as it relates to the “other woman.” If sexual dissatisfaction, in males, leads to a desire to obtain more sexual experiences with partners other than the spouse, it is unclear...
whether this desire is *unbeknownst* to the “other woman.” She may or may not be a knowing participant in the married man’s quest for sexual satisfaction.

Women who engage in infidelity are more likely to become emotionally attached with the “other” partner (Træen, Holmen, & Stigum, 2007), whereas men who engage in infidelity are more likely to consider the “other” partner as a close friend (Glass, 2003). Surely, these are motivations for the unfaithful party to maintain the affair; but, what do these motivations mean for the “other?” Does the “other man” also become emotionally attached? Does the “other woman” also see herself as simply a “friend?”

**Attachment** — People with maladaptive attachment styles are more likely to engage in infidelity (Allen & Baucom, 2004; Bogaert & Sadava, 2002; DeWall et al., 2011). DeWall and colleagues (2011) conducted eight comprehensive studies to examine the relationship between avoidant attachment, infidelity, and commitment. The researchers found a positive correlation between avoidant attachment style and infidelity, but also found that this relationship was mediated by level of commitment. They reported that avoidantly-attached partners tended to experience lower levels of commitment.

The effects of being involved, as the “other” partner, with an avoidantly-attached person who has low commitment levels have not been examined. For example, if the “other” partner has high expectations for this relationship, will that person eventually be left disappointed, due to the married partner’s avoidant attachment style and low level of commitment? Whether “other” partners also tend to have maladaptive attachment styles has also not been studied.

**Narcissism** — Infidelity is associated with narcissism and low relationship commitment (Campbell & Foster, 2002; Foster et al., 2006), as well as impulsivity and alcohol/substance usage (Atkins, Yi, Baucom, & Christensen, 2005). Infidelity is also positively correlated with own sexual narcissism, while negatively correlated with own sexual satisfaction in marriage (McNulty & Widman, 2014). Additionally, people with narcissism tend to be popular at first sight (Back, Schmukle, & Egloff, 2010) and would not necessarily struggle to find “other” mates with whom to be involved.

Lacking, in such studies of infidelity and narcissism, is an examination of how the narcissistic personality affects the relationship with the “other” partner. We know that narcissists have the ability to manipulate others for personal gain (American Psychiatric Association, 2013). If the narcissistic married partner deceives the “other” partner for his own gains, it is unclear how this deception ultimately affects the “other” partner.

**Couple Therapy**

Couple therapists find that infidelity is one of the most challenging problems to treat (Gordon et al., 2008; Heintzelman et al., 2014). However, couples with infidelity can be extremely distressed at the beginning of treatment, yet show vast, significant improvement with couple therapy (Atkins, Eldridge, et al., 2005; Atkins et al., 2010). Therefore, infidelity does not necessarily cause a relationship to end. In the instances when infidelity does not lead to divorce, what happens to the “other” partner? Does the “other” partner typically wait for the married partner to divorce, even though a divorce may never come? Certainly, recommendations, for couples working to improve their marriages, include the termination of the relationship between the unfaithful spouse and the “other” partner (Spring, 1996). However, there is no mention of what this termination means for the “other” partner, who may be blind-sighted and shocked by this event.
Snyder, Baucom, and Gordon (2007) discuss the “other” partner by referring to her as the “outside person,” in the context of setting boundaries, should she continue to encroach upon the relationship. This brief mention implies that the “other” partner pursues the married spouse, rather than the other way around, putting quite a bit of responsibility for the relationship on her. A recent feminist critique of the literature on couple therapy for infidelity acknowledges the roles of gender and power in the etiology of affairs (Williams & Knudson-Martin, 2013). Still, even in their progressive examination, the authors did not discuss the impact of gender and power on the “other” partner. Understanding how gender and power affects both “other” men and women is also important, as affairs have increased among married women (Campbell & Wright, 2010), along with permissive attitudes about having their own affairs (Lawson & Samson, 1988).

Trauma

The process of recovering from infidelity has been likened to that of recovering from trauma (Baucom et al., 2006; Glass & Wright, 1997; Gordon et al., 2004; Gordon et al., 2008). It is unclear, based on the current research, whether the “other” partner also becomes traumatized when the affair ends, particularly, if that person is abruptly cut-off from their partner, due to efforts to improve his/her marriage.

Trauma can occur when there is incongruence between a person’s assumptions, regarding safety in the relationship, and what actually occurs (Janoff-Bulman, 1992). Based on how deceived the “other” partner may have been into feeling safe in the relationship, the “other” person may be just as traumatized by its termination, as the hurt spouse may be when the affair is uncovered.

Is a Sociological Study of “The Other Woman” Enough?

As previously mentioned, Richardson (1985) conducted interviews with “other” women. She found that these women reported meaningful relationships with their partners that extended beyond a sexual connection. In addition, she found that women struggled with their role as the “other,” becoming quite pained when their partner would return to their wives.

Richardson’s study did not address any psychological factors of the “other” women. She did not use any measures that assessed mood or other psychological factors, for deeper assessment. Moreover, no implications for treatment were surmised from the data derived from this case study. In order to obtain psychological understanding of the “other” partner, with the hopes of also laying the groundwork for possible clinical intervention for those who are “pained,” further examination is necessary. The present study will examine the experience of the “other” partner, particularly mood and attachment factors that contribute to this unique and under-studied relationship experience.

Methods

Participants

All participants (N = 49, 31f/18m) were between the ages of 23 and 60 years old and were recruited from recruitment flyers posted on reputable online volunteer sites for, as well as in discussion forums about, relationships. The sample was limited to participants living in, or willing to travel to, the Southern California area.

In order to be included in this study, participants had to be adults, between the ages of 18 and 65, who have been, or are currently, involved in a meaningful, significant relationship with someone married or living in a domestic...
partnership with another person. The length of their relationships with their married (included domestic) partners varied from six months to 15 years. Out of 49 participants, none reported having addressed their relationship in any form of therapy or counseling. A diverse sample was obtained. (See Table 1.)

Table 1
Demographics (N = 49)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sex</strong></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>31 (63%)</td>
</tr>
<tr>
<td>Male</td>
<td>18 (37%)</td>
</tr>
<tr>
<td><strong>When Marital Status was Revealed</strong></td>
<td></td>
</tr>
<tr>
<td>Before 2 months</td>
<td>33 (67%)</td>
</tr>
<tr>
<td>After 2 months</td>
<td>16 (33%)</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>Euro-American</td>
<td>26 (53%)</td>
</tr>
<tr>
<td>Latino</td>
<td>10 (20%)</td>
</tr>
<tr>
<td>Asian-American-Pacific Islander</td>
<td>8 (16%)</td>
</tr>
<tr>
<td>African-American</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Other</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

**Measures**

**Anxiety**
The Beck Anxiety Inventory (BAI; Beck, Brown, Epstein, & Steer, 1988) has been demonstrated to be a psychometrically sound instrument and has an acceptable internal consistency reliability coefficient (α = .94; Beck & Steer, 1993).

**Depression**
The Beck Depression Inventory – Second Edition (BDI-II; Beck, Brown, & Steer, 1996) has been demonstrated to be a psychometrically sound instrument and has an acceptable internal consistency reliability coefficient (α = .93).

**Attachment Style**
Participants completed the Experiences in Close Relationships Scale Revised (ECR-R; Fraley, Waller, & Brennan, 2000) to assess adult romantic attachment style. The underlying variables of the ECR-R, anxiety and avoidance, have been widely used in attachment research in the past (Ainsworth, Blehar, Walters, & Wall, 1978; Bartholomew & Horowitz, 1991). The avoidant attachment (Cronbach’s x = .80) and anxious attachments (Cronbach’s α = .92) items on the ECR-R have strong internal reliability and were averaged to create composite indices.

**Semi-Structured Interviews**
Following completion of the ECR-R, BDI-II, and BAI questionnaires, participants were interviewed in a confidential clinical setting. The interview questions were semi-structured and open-ended, in order to obtain the full range of experiences of participants who were in a relationship with a married person. Questions were broad enough to allow the participants’ thoughts and feelings to freely emerge during the course of the interview. The interview
questions were developed based on the literature on infidelity. The interview session took approximately 1 ½ to 2 hours for each participant.

Procedure

The procedure consisted of five phases. Phase I: Participants completed a demographic questionnaire, providing information about themselves. Phase II: Participants completed the ECR-R, BAI, and BDI-II. Phase III: Participants engaged in one-on-one interviews discussing their experiences in their relationships (phase III was audiotaped). Phase IV: Participants were compensated for their participation, debriefed, given a list of referrals for additional resources, and offered to be contacted at the completion of the study to receive an overview of the information derived. Phase V: Participants were called 48-72 hours post interview and given the option of receiving another follow-up call after the data had been analyzed. Forty-two of the participants requested to be called following the research and given an overview of the results for a research validity check. All 42 of the participants who permitted the optional phone call were called; 19 of those participants could be reached and the model was shared with them. The feedback obtained was incorporated and adjustments were made to the model.

Data Analysis

The Corbin and Strauss (2015) grounded theory method was used for data analysis to understand factors contributing to the initiation, ongoing-involvement, and maintenance of these relationships. During the five phases, field notes were taken and incorporated into the data. From the first through the last interview, themes and categories emerged that followed further data collection. During the analysis process, the data remained predominantly descriptive, rather than interpretive, allowing participants’ experiences to speak for themselves. During the data coding process, attention was directed to the emergent themes, as well as the data that diverged from the themes, which led to theme-revisions. The new data was incorporated, in order to obtain a working model that best explained the participants’ overall experience. The data was driven by the concepts that emerged from the phenomena of interest and had been determined from the continued comparisons of the variations among the concepts that emerged. This process assisted in providing a theoretical interpretation that is conceptual and applicable to a variety of real-life contexts (Strauss & Corbin, 1990).

The researcher reviewed the groupings that emerged with professors, colleagues, and graduate students in psychology. This process provided additional clarification and validity checks of the internal structure and broader meaning of the identified groupings. Overall, there was agreement by reviewers that the units of meaning were organized in a coherent and organized manner, leading to broader conceptual themes that were woven into a conceptual model.

Results

Results will be explained in four sections: 1) descriptions of the experience of individuals in a relationship with a married person, including resulting themes; 2) moderating factors; 3) analysis of results with a proposed model that incorporates the identified themes to explain the origins and maintenance of the “other” partner experience; and 4) unexpected findings.
Description of the Experience

According to the questionnaires administered, all participants endorsed a mild to moderate level of clinical anxiety. On the BAI measure, the total BAI scores ranged between 10-25. There were no clinical levels of depression on the BDI-II. Those endorsing mild anxiety on the BAI also identified with an avoidant attachment style of the ECR-R. Those endorsing moderate anxiety on the BAI tended to identify as anxiously attached on the ECR-R. (See Table 2).

Table 2
Mean Scores of BDI-II, BAI, ECR-R (N = 49)

<table>
<thead>
<tr>
<th>Measure</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>BDI-II</td>
<td>5.20</td>
<td>2.08</td>
</tr>
<tr>
<td>BAI</td>
<td>14.79</td>
<td>8.40</td>
</tr>
<tr>
<td>ECR-R - Anxiety</td>
<td>4.54</td>
<td>.09</td>
</tr>
<tr>
<td>ECR-R - Avoidance</td>
<td>4.42</td>
<td>.80</td>
</tr>
</tbody>
</table>

Themes

Though many of the experiences amongst the participants varied, seven themes were identified that encompassed all of the participants’ experiences.

Theme 1: “Attachment Switch Activated” — All participants reported an “attachment switch” that was activated. Whether it was at first initial contact or during unexpected situations over time, they reported a “feeling” that emerged. The “feeling” provided hope that their partner could fit what they believed they needed in a romantic relationship. This concept was not described as though they believed they found a “healthy” partner for themselves; rather, it was described in a way that eased an urge. For example, one participant stated, “He’s my cocaine. With him, I feel excited, pretty, smart, and important.” Whether their attachment style was avoidant or anxious, all participants reported feeling “special” when they were with their partner. This theme was titled “attachment switch activated” because every participant endorsed either avoidant or anxious adult attachment on ECR-R measures and reported that they believed that it would take “this person” to fill the connection they have always desired.

Theme 2: “The Penny Drops” — All participants reported a point in the relationship in which “the penny drops.” This theme describes their first realization that things may not be how they appear. This concept was described as being “duped.” When this occurred, participants either learned about the partner’s marital status, or, if the participant already knew about the marital status, realized that he/she would not “fall in love” and become “vulnerable” to their partner. One participant shared, “I was told that he and his wife sleep in separate bedrooms and are on the verge of getting divorced, but the divorce keeps getting pushed back and they’re going on vacation together.” During the interviews, participants shared how their levels of anxiety increased after feeling “duped.”

Theme 3: “Facing Conflicting Values” — Following the realization that the relationship was not as it originally appeared, participants described the experience of strong opposing personal values within themselves. The connection with their married partner coincided with some of their values, such as security, fun, intensity, etc. However, the relationship also contained aspects that went against their values, such as engaging in infidelity,
being with a partner living with another woman, feeling vulnerable to the person, etc. One participant described this experience eloquently:

One the one hand, it’s the best relationship I’ve ever had. We’ve both never felt so close to anyone else before. But, on the other hand, I am fundamentally, completely against adultery. I never thought I would be that woman … to have an affair with a married man.

**Theme 4: “Accommodating the Conflicting Values”** — All participants described the “conflicting values” struggle as though they were describing a trauma. Though their descriptions varied, participants attempted to “accommodate the conflicting values” by focusing intently on the positive aspects of their relationship (e.g., having a deep connection, security, financial assistance, and/or support). Participants tended to hold on to the hopeful words their partners would say, (e.g., “I love you, not her,” “I am leaving her”) while filtering away aspects that were incongruent (e.g., the married partner still living with his spouse and the participant being kept a secret). By “accommodating the conflicting values,” the participants could still attach meaning to their relationships, despite the conflict they experienced. A participant who re-connected with a married high-school sweetheart shared, “We are meant to be together. I’m not going to lose him again. Everything happens for a reason.”

**Theme 5: “Riding the Wheel of Rumination”** — Whether it was held internally or continually shared with their partner, all participants struggled with rumination. They described repeatedly going over thoughts, such as: “Will he leave his spouse? Does he truly love me?” and “How can I behave, so things work out?” There was variation over the causes of rumination. For example, some participants reported ruminating because they believed the situation was out of their control and they needed to be “on alert” to handle it “the right way.” Others believed that they had a choice to stay or go, but ruminated in order to find facts or evidence to validate their choice. Participants often described a discrepancy between their partner’s words and actions: “I know his marriage is over but I can’t help feeling like ‘the other woman.’ Things aren’t adding up. He tells me it’s over between them but we can’t be affectionate when we’re out in public, unless we go out of town.” Trying to make sense of discrepancies increased rumination. Participants attempted to solve problems that they could not solve on their own, with the goal of the relationship “working out,” by engaging in this cyclical process.

**Theme 6: “In-Hide-Solation”** — Participants reported a shift during the course of their relationship in which they began avoiding friends and family. The extent of the avoidance ranged from completely cutting them off, to limiting information revealed about the relationship, to limiting the amount of time spent with friends and family. A participant revealed, “I don’t really go out with friends anymore. I haven’t told my parents about him, either. They won’t like him … if they know.” In addition, participants who had sought therapy often minimized the seriousness of the relationship and their feelings, or avoided bringing up the marital status of their partner to their therapist. Participants reported fearing judgment and criticism or had assumptions that their therapists would not understand.

**Theme 7: “Ponzi-Love. I Have to Be all in!”** — Participants described believing that they had already invested so much in the relationship that they had to “see it through.” Some participants had kept other facets of their lives “on hold,” such as potential career opportunities or other relationship options. Whether the “investment” related to prioritizing their partner over others and themselves or the compromising of some of their core values, the participants discussed the need to “hold on” so that the experience could have been “worth it.” One participant described,
I’ve already put three years of my life into this relationship. I could have been married by now to someone else, a great guy, who wanted to be with me, but it’s too late now. This has to work out.

**Moderating Factors**
Not all participants experienced the same levels of symptomology, nor manifested them in the same way. There were certainly varying degrees of anxiety and rumination. The experience of being in a relationship with a married person was on a continuum. The following influenced where the participants fell on this continuum: a) the amount of time spent in the relationship and b) the extent to which they were putting their life “on hold.”

**Time in Relationship**
The length of time that participants had been in their relationship affected their experience in two overlapping ways. The longer the participant was in the relationship, the more anxiety that participant reported. Participants also described a greater intensity of rumination, in response to their partner’s behavior, specifically, to a timeline for them to leave their spouse.

**Degree of Putting One’s Life on Hold**
Participants’ lives were, in one way or another, on hold. Though this varied among participants, the degree to which this occurred was related to the intensity of their experience. Some participants held off on dating other available potential partners. Others had not taken career opportunities, held off on going back to school, and/or paid higher month-to-month leases, etc., while waiting for things to progress with their partner. The afore-mentioned themes and moderating factors are highlighted in Table 3.

Table 3
*Themes and Moderating Factors*

<table>
<thead>
<tr>
<th>Themes Experienced By All Participants</th>
<th>Moderating Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment switch activated</td>
<td>Time in relationship</td>
</tr>
<tr>
<td>The penny drops</td>
<td>Degree of life on hold</td>
</tr>
<tr>
<td>Facing conflicting values</td>
<td></td>
</tr>
<tr>
<td>Accommodating the conflicting values</td>
<td></td>
</tr>
<tr>
<td>Riding the wheel of rumination</td>
<td></td>
</tr>
<tr>
<td>In-hide-solation</td>
<td></td>
</tr>
<tr>
<td>Ponzi-love. I have to be all in!</td>
<td></td>
</tr>
</tbody>
</table>

**Analysis of Results**
Wanting to be “chosen,” the participants become pseudo-independent individuals who put pressure on themselves to be “independent,” “strong,” “flexible,” and “supportive.” Their experience of anxiety facilitates their being “on alert” to be doing “independent-type” behaviors to show they should be “chosen.” In lieu of dominant depressive reactions that would likely lead them to the loss of their romantic attachment figure, a maladaptive cycle forms in which these participants are afraid to respond differently: i.e., setting their own timelines, boundaries, and limits,
with follow-through, and taking their life "off-hold." They, in turn, engage in a variety of avoidant behaviors to distract them from what they believe they cannot handle (the loss of the relationship).

**A Model of Romantic Attachment With a Married Partner**

A strength of the qualitative method used in this study is that it does not stop at breaking the data down into a description of the identified themes. The goal was to provide a conceptual understanding of the phenomenon. Therefore, the following proposed model of individuals in a romantic relationship with a married partner is presented in Figure 1.

![Figure 1. Model of romantic attachment to a married partner.](image)

Initially, an “attachment switch” is activated by the belief that the married partner can satisfy the type of connection that “other” person desires. Once activated, the switch is a constant that fuels the activity through the model. The relationship appears to be meeting, or exceeding, the “other’s” expectations until the “penny drops.” At this point, the “other” person begins to learn that things are not what they seem. Either the actual marital status of the partner is revealed or the “other” person comes to the realization that they are falling deeper for the person that they believe can meet their needs. At this point, a major conflict is presented, in which the “other” person is confronted with the incompatibility of their personal values. The “other” person values many of the qualities of the partner and the potential for what the relationship could be, yet is confronted with opposing values related to fidelity (i.e., the marital status of the partner) or that person’s previous value of not falling in love (i.e., feeling vulnerable to a partner). Simultaneously, the “other” person engages in maladaptive coping strategies as an attempt to accommodate this polarization of incompatible values by magnifying the positive aspects of the relationship and “what could be,” while minimizing what is currently happening (“We are perfect for each other and have a strong connection” vs. “He is married and most men don’t leave their spouse”).
Filtering, magnifying, and minimizing, the “other” person becomes more attached and vulnerable to this partner through the magnification-minimization process. The reality of the partner continuing to be engaged in married behavior (i.e., living/vacationing with spouse, no divorce-filing, timelines coming and going, limited availability) brings reality to the forefront, signaling a threat to the romantic attachment that cannot be reconciled. The “other” person begins to engage in rumination, as another maladaptive strategy, hoping to stay “on alert” to do what that person can to secure the connection and ward off the threat of loss. The process of rumination leads to more distress. The “other” person may either silently struggle, wanting to be a “supportive partner,” or may engage in instances of verbally lashing out at the partner and, after receiving validation, temporarily reunite. As discussing the relationship with friends, family, or mental health professional may lead to judgment and criticism, the “other” person continues to minimize or “act fine,” while isolating themselves from support systems, leading to more rumination and distress. Over time, life is put “on hold” as the relationship becomes the priority and occupies a majority of the “other” person’s thoughts and behaviors. The “other” person feels no control over the matter. Eventually, having invested and compromised so much, to the point that the person believes there is no turning back, the “other” person stays “all-in.”

Unexpected Findings

There were three unexpected findings during the course of the data analysis. One unexpected finding was the amount of participants (58%) who stated that they had been unaware of their partners’ marital status at the beginning of the relationship (within the first two months). In addition, scores on the BAI were lower than what the researcher expected, based on the presentation of participants. Participants often appeared more restless, agitated, and worried during the interview, than the mild-moderate scores on the BAI indicated.

Participants’ feedback on the model during its construction was unexpected. Following the analysis of the data and construction of the model, researchers wondered if participants would minimize their experience when faced with the model, as it may be seen as a threat for those still involved in the relationship. All 19 participants who were contacted reported that sharing the model was validating, therapeutic, and calming. Their feedback became a collaborative process that helped refine the model.

Discussion

The primary goal of this study was to understand the experiences of individuals in long-term relationships with married partners. The use of qualitative methods assisted the researchers to step away from discussing assumptions regarding the “other woman” and allowed a complex understanding to emerge. As surmised from the literature, these participants suffer in silence. The results helped shed light on aspects that may be critical to the navigation and healing process of the “other” partner and that person’s ability to move forward during and following her relationship.

The findings of this study indicate that the experience of the “other person” is complex and leads to a silent struggle. The degree of severity of the experience is heavily influenced by childhood attachment, miscalculations of the facts (being “duped”), conflicts with one’s internal value system, and maladaptive coping strategies used to manage the traumatic-like experience of incongruity within the relationship. Although the experience was relatively uniform amongst the participants, the individual’s personal history (i.e., length of time in the relationship and degree of putting one’s life “on hold”) contributed to the individual’s variability in their coping.
Factors Leading to the Start of the Relationship: Narcissism and Attachment

The participants described a partner who was charming, confident, and to whom they felt attracted to, almost immediately. This is in line with Back and colleague’s (2010) research on popularity and narcissism. Participants felt “duped” when they realized that they had fallen in love with an unavailable partner. The “other” person, nonetheless, experiences an intense draw to the unavailable partner, who triggers the “other” person by making that person feel “worthy and important.” Participants’ reports were in line with the research on infidelity and narcissism, as it relates to low relational commitment (Campbell & Foster, 2002; Drigotas et al., 1999; Foster et al., 2006) and alcohol/substance usage (Atkins, Yi, et al., 2005), in some cases. The “other” partner continues to experience the married partner’s avoidance of true commitment, as the relationship goes on.

As research has revealed, maladaptive attachment is associated with infidelity (Allen & Baucom, 2004; Bogaert & Sadava, 2002; DeWall et al., 2011). All 49 participants endorsed anxious or avoidant attachment styles. The participants’ experience of their partners’ “avoidance” was a central trigger for their upset, which coincides with DeWall and colleagues’ (2011) finding that avoidant partners have a higher chance of engaging in infidelity and endorse low levels of relationship commitment. Participants’ partners’ difficulty with commitment was the primary trigger for the anxiety and other mood states the participants endorsed.

The avoidantly-attached participants were less likely to assert their needs and set boundaries and limits with their partner. This did not seem to affect the draw and connection to that person. This contributed to the maintenance of the “avoidantly-attached partner dynamic.” These participants hoped that this relational-style strategy would assist them in appearing to be the “understanding one” who would “win his love.”

The Role of Anxiety

One important finding was that anxiety, for these participants, appeared to result from a belief about the relationship “having to work out.” In response, maladaptive coping, in order to achieve “secure attachment,” became a vicious response-cycle maintaining both their anxiety and the relationship. As these participants faced the loss of their romantic attachment figure, their use of avoidance as a defense mechanism broke them down emotionally. The “constant alertness” and hyper-arousal propagated several maladaptive coping strategies. The presentation of the other partner’s anxiety is complex.

Generalized Anxiety Disorder (GAD)

GAD is characterized by excessive worry in a variety of areas. Rumination over “What ifs,” in regards to “Will he leave her?” or “What if he leaves me?” lead to further anxiety and avoidance of problem solving. The participants’ relationships are partially maintained through this type of avoidance. Heavy rumination and the use of maladaptive strategies to block out relationship worries lead to an avoidance of actual problem solving. Moreover, these individuals see problem-solving and goal-directed behavior as incompatible with their immediate goal of this relationship “working out.” They are hyper-alert to problems in the relationship and use rumination, in lieu of actual problem solving, as is common in those who experience GAD.

Social Anxiety

At the hallmark of social anxiety is a fear of rejection and criticism (Clark & Beck, 2012). In these relationships, the “other” person is often comfortable socially, but has a prominent fear of criticism and rejection, regarding this relationship, to the point that the “other” person often retreats from family and friends. These people tend to avoid asserting their needs to their partners and family, while avoiding following through on their own goals and desires.
Additionally, as is common with social anxiety, participants expressed difficulty in accessing help, due to shame and perceived criticisms from friends and family. Even in therapy, participants reported rarely being honest about the full extent of the affair for fear of being viewed in a negative manner. The “other” person often uses safety behaviors, such as minimizing the true importance of the relationship, acting as if they are “fine,” and avoiding asserting their own needs and following through on their own timelines.

**Trauma-Like Coping**

The manner in which the participants experienced and attempted to process the relationship was similar to that of a trauma, further enhanced by their anxious or avoidant attachment styles. Adding to the research from Gordon et al. (2008), Baucom et al. (2006), Gordon et al. (2004), and Glass and Wright (1997), it appears the committed “other” partner struggles with both the navigation and recovery post-relationship, due to a trauma-like response resulting from incongruence between expectations and reality.

Typically, post-traumatic stress disorder (PTSD) had been thought to occur in situations in which a loved one is lost through a sudden, unexpected, and/or traumatic event (Pfefferbaum et al., 2000). This study contributes to the understanding of how trauma may develop during unexpected relational circumstances, as previously discussed by Janoff-Bulman (1992). The hyper-arousal and avoidant components of PTSD helped participants feel as though they were on alert and vigilant in this relationship. People with PTSD frequently experience fear, helplessness, and horror. In this study, these feelings stemmed from the fear of losing an attachment figure. In turn, these profound vulnerabilities propagated the hyper-arousal and avoidant components of participants’ experiences. In addition, these individuals tended to push away red flags (the partner continuing to stay married, pushing back timelines, etc.), as they attempted to assimilate the affair into a positive meaning that fit their moral schema (“Their marriage is over,” “He is only staying for the kids,” etc.). The findings suggest that the “other” partner is vulnerable to being traumatized during the relationship, just as the betrayed spouse is when the affair is uncovered (Glass, 2003; Snyder et al., 2007).

**Implications for Therapy**

**Secrets in Therapy**

Most of these individuals refrain from fully opening up to their therapists, due to a fear of judgment. Therapists and counselors would benefit from positioning themselves within a “well-intended” belief-system, in which they conceptualize these clients as people who mean no harm and truly believe this relationship is “different.” Giving advice to leave the relationship may lead the client to dropout of therapy, as the client may not feel understood. Talk-therapy that allows the client time to discuss the details of this affair and collaboration on a treatment plan that includes goal focusing, both in and out of the relationship, can assist in strengthening problem-solving abilities. In addition, building confidence against criticism and rejection, increasing social support, decreasing rumination, and teaching cognitive restructuring tools, to process the facts of the relationship and its ability to be in line with the client’s goals, would be beneficial and would relate to the client’s experience.

**Impact on Couple Therapy Work**

The unfaithful spouse may need more than a standard individual assessment session as part of a complete couple’s therapy assessment. The counselors’ ability to normalize the unfaithful spouse’s desire to maintain ties with the “other” person may be helpful in gaining trust and collaboration. This, in turn, may lead to improved couple’s therapy outcomes. The possibility of a therapist consultation with the “other,” as part of the therapy process,
may currently be considered a taboo idea; however, with nearly any other clinical issue, therapists’ consulting outside of session for continuity of care is considered the standard of good practice.

**Limitations**

The participants were limited to the Southern California area and, thus, the research is limited to their experience. Another limitation is that many of the participants who stated they were initially unaware of their partner’s marital status may have experienced fear of judgment and criticism by the researchers, and may not have actually been “duped” by their partner. Also, due to the unexpected findings, measures for trauma were not administered. Trauma symptoms emerged from the open-ended interviews; therefore, there was no quantitative data to measure trauma symptoms.

**Conclusion**

The researchers had contacted participants over a year after initial interviews began in order to share the “Other Woman Model” for feedback. At that time, 19 participants were contacted. Two of them had progressed in their relationship, with their married partner having left their spouse. Participants stated that, in retrospect, they had been more anxious and attempted to appear much calmer about the state of the relationship, at the time of the interview, and that they did not hold strong beliefs that the relationship would be successful. They stated they were afraid to focus on what they deemed to be the reality at the time. This is an important point, as it contributes to the concept of the “silent struggle” and the strong tendency to rationalize and minimize, as a maladaptive coping strategy.

This study has helped to identify factors that may be important in the navigation and recovery process for individuals in a relationship with a married partner. It provides mental health workers empirically grounded and evidence-based methods to help their clients. In order to generalize the results of this study, replication is needed in areas outside of Southern California, with diverse sexual orientation, and relationship status such as “other” partners who are also married or living in domestic partnerships. Exploration of the development of an evidence-based therapy protocol that incorporates this research and combines the areas of trauma, GAD, and social anxiety will likely be beneficial.

**Funding**

The authors acknowledge the support of Cognitive Behavioral Therapy Institute of Southern California and Alliant International University.

**Competing Interests**

The authors have declared that no competing interests exist.

**Acknowledgments**

The authors acknowledge the support of Cognitive Behavioral Therapy Institute of Southern California and Alliant International University.
References


**About the Authors**

**Paul DePompo, Psy.D., ABPP** is a board-certified clinical psychologist and the founder of the Cognitive Behavioral Therapy Institute of Southern California, which is also affiliated with the Albert Ellis Institute in New York City and provides trainings to psychologists in Cognitive Behavioral Therapy (CBT). Dr. DePompo’s research interests include evidence-based treatments for anxiety and mood disorders, as well as qualitative studies regarding infidelity and relationships. Dr. DePompo also provides consulting for the Hollywood film industry. For more than ten years, he has utilized a straightforward approach to successfully treating adults and adolescents with short-term therapy methods that provide long-term results. As an expert in CBT, he identified a need for evidence-based treatments that would yield the best possible outcomes for his clients. Dr. DePompo’s credentials also include being a Diplomate of the Academy of Cognitive Therapy, an Associate Fellow and Supervisor in REBT (Rational Emotive Behavioral Therapy)-CBT, and a professor of REBT-CBT at various graduate schools in California.

**Misa Butsuhara, LMFT** is the head of the Infidelity Clinic at the Cognitive Behavioral Therapy Institute of Southern California and has been successfully treating infidelity with a goal-focused, evidence-based approach. Misa is interested in research on infidelity and relationships. She received her BA from Fordham University, where she graduated summa cum laude and with honors in Psychology. She went on to attend graduate school at Pepperdine University, earning her Master’s degree in Clinical Psychology with an Emphasis in Marriage and Family Therapy. Contact Address: Cognitive Behavioral Therapy Institute of Southern California, 2549-B Eastbluff Drive, 253, Newport Beach, CA 92660, USA.