

**The Power of Hope: Posttraumatic Growth in Former Partners  
of the Sexually Addicted Individuals**

by

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## Abstract

The purpose of this interpretive phenomenological analysis is to explore and gain an in-depth understanding of the transformative changes emerging from lived experience of former partners of the sex addicts. This study informs the phenomenon of personal growth resulting from individual responses to betrayal trauma. Semi-structured open-ended interviews with a purposeful sample of 12 participants generated data that evidencing that such a seismic event - like the betrayal caused by a sex addict- can be an opportunity for a metamorphosis of a partner's schemas in the following areas: *seeing new possibilities, changed relationships, the paradoxical view of being both stronger yet more vulnerable, a greater appreciation for life, and changes in the spiritual and existential domains* (Calhoun & Tedeschi, 1999). The following themes were identified in the current study: (1) changed perception of sense of self; (2) learning to listen and honor one's body's signals, (3) new-found personal strength that allowed for facing fears and taking charge of one's life, (4) journey from spiritual bypassing to authentic spirituality, (5) changes in relating to others, and (6) existential wrestling that led to shifts in worldview.

## Acknowledgments

This document is meant to be a hope letter to those who are thirsty for hope. In the end, however, Hope is a person, and His name is Jesus. All the research in the world will never be able to bring you the hope His Presence can. My research efforts are only an attempt at being a Hope bringer, and to partner with a loving God. To thousands of partners who cannot yet see what He sees, remember: He is Jehovah El Roi, the God who sees, and He has the last word. He has had the last word in my life and my story is about Him and only Him! I am also beyond grateful to my chair, Dr. Tuttle for her infinite patience and support throughout this process; thank you for believing in me and guiding me through every step of the process with such wisdom. To Dr. Andrzejewski, your love for teaching and for your students has changed my life forever; thank you for finding creative ways to cultivate a tiny little bit of your genius in those you teach. I am grateful for keeping me accountable to my methodology and giving me extensive feedback to increase the rigor of my study. To Dr. Tyler and Dr. Taylor, thank you for modeling admirable work ethic, determination and excellent counseling practices; I am grateful for your encouragement, patience and guidance along the way.

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To my participants: my emotions are spilling over my cheeks, tears that I could not cry in front of your tears. I am in awe of your fighting spirits and your resilient grit, and grateful I could be part of the story of recognition of your own personal strength. You came in holding notes and personal journals, ready to “help” and “contribute to others’ being heard.” It became clear within the first few minutes of each interview that you were not there to talk about your trauma, rather you were giving me your precious time in order to show the world that you are “badass” and that it is possible to be a “badass” even after indescribable suffering. No research study could measure, explore, or eloquently describe the depth of the pain that you endured. Culturally, your stories have been dismissed and silenced, as society wants to shy away from what it means to be plagued by sex addiction and its ramifications to womanhood and to the integrity of the family system. I am grateful for what you have offered to the world, and for what you have taught me. Thank you for trusting me with your lived experiences. Now the world sees you and hears you.

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## **CHAPTER 1: Introduction and Literature Review**

### **Introduction and Framework**

The somber reality of this digital age is that the anonymity, accessibility, and affordability of internet pornography has created an astronomical acceleration of the erosion of authentic intimacy and marital norms (Carnes, 2001; Cooper 2002; Samenow, 2010). As a result, for the last three decades, therapists around the world have been witnessing a rapid increase in the number of clients whose presenting problem is either relational conflict due to lack of intimacy caused by an addiction to pornographic material and an escalation of cybersex behaviors, or the discovery of extramarital affairs (Carnes et al., 2005a; Carnes, 2001; Rosenberg et al., 2014). For every individual who struggles with out-of-control sexual behaviors, there is a partner or family member who is suffering through the painful effects of sex addiction. The effects of sex addiction and its many forms on partners of addicts have not been in focus before the last decade. Little attention has been given to adequate training for the counselors working with current or former partners of sex addicts, post-betrayal. Moreover, no research efforts have been made to investigate the capacity of former partners of sex addicts (FPOSA) to transcend the relational and betrayal trauma experienced in order to transform the suffering into a resource for new meaning and growth. Assessing and understanding possible post-betrayal growth is imperative to supporting the counseling field and therapeutic interventions that build resilience in overcoming the effects of betrayal trauma (Joseph & Linley, 2005).

In order to address this population's need for healing, growth and hope for the future, the phenomenon of Posttraumatic Growth (PTG) must gain more attention in the research literature. The phenomenon of PTG that emerges following the lived experiences of a traumatic life event has been reported in many populations around the world, yet it has not been researched in

FPOSA. The term *posttraumatic growth* was first used by psychologist Richard G. Tedeschi to describe the psychological transformation reported in response to traumatic life experiences; it suggests that trauma has the potential to add to one's life and can result in positive outcomes (Tedeschi & Calhoun, 2004;1995). These positive psychological changes reported are the result of a struggle to make sense of a distressful event that is "generally outside the range of usual human experience" (APA, 1980, p.236; Lindstrom et al., 2013; Tedeschi & Calhoun, 2004). Therefore, it can be inferred that having to tolerate distress throughout the challenges of betrayal trauma, FPOSA have the potential to transcend the relational and betrayal trauma experienced and transform their suffering into a resource for new meaning and growth (Tedeschi & Calhoun, 2004; 2006).

Examining the ways FPOSA transform their trauma could lead to a better understanding of their journey into and out of pain. Furthermore, a deeper look into the aftermath of posttraumatic reactions could lead to a more comprehensive way of conceptualizing sex addiction from the partner's perspective (Steffens & Reinne, 2006). Overlooking the potential for positive psychological changes following the distressful lived experiences of betrayal and relational trauma of this population may handicap the way mental health professionals view partners and how they assert their survival (Manning & Watson, 2008). It is my hope that a more holistic lens on how transformative healing emerges from suffering will encourage the field of counseling to give more attention to the stories of those affected by the current pornography and sex addiction epidemic.

### **Conceptual and Theoretical Framework: Post Traumatic Growth**

I, the researcher, employed Tedeschi and Calhoun's (1996) model of PTG as the theoretical framework for this study. A phenomenological approach to PTG allowed the



exploration of the many nuances of the impact of betrayal trauma and also of the positive psychological transformation that follow it (Tedeschi & Calhoun, 2004; Williams, 2019). The PTG framework was the most suited for this study because it gives voice to both the highly traumatic distress reported following the discovery of various levels of infidelity that results in PTSD, and the wrestling with the after-effects of betrayal trauma, which happens repetitively and chronically (Steffens & Reine, 2006). The use of PTG as a framework made room for me (and later for practitioners and their clients) to more deeply understand the impact of one of the most challenging life crises one can face and will hopefully result in adequate training of therapists who work with this population.

The concept of PTG became a research focus about two decades ago when clinicians and researchers adhering to existential thought were realizing that sudden and unexpected deviations of one's life resulted in major shifts and permanent changes (Miller & C'deBaca, 1994). Following these research findings, Tedeschi and Calhoun's (1995;1996) studies showed that major cognitive and emotional transformative life changes occur in the wake of traumatic events. The model of PTG that Tedeschi and Calhoun developed describes the process by which individuals move beyond the pre-trauma level of functioning by cognitively rebuilding new schemas that incorporate the trauma suffered, allowing for a new understanding of reality and the self (Tedeschi & Calhoun 2013; 2004;1996). Thus, when conceptualizing PTG, the phenomenon is described as both a process and an outcome (Tedeschi et al., 1998). The process of growth observed happens inside one's struggle with great distress, thus suffering *and* transformation (outcome) occur at the same point in time and space, making this a catalytic junction (Tedeschi et al., 1998). Researchers suggest that this struggle with distress is crucial for PTG and that the

traumatic event not only sparks one's transformation but motivates and fuels it (Tedeschi & Calhoun, 2004).

## **Literature Review**

### **Positioning sex and pornography addiction: Classification Challenges**

How and why individuals develop sexual addiction is poorly understood across several fields of knowledge, such as neurology and psychology. The cause and reasons for changes in brain chemistry, the maintenance of a consistent patterns of failure to control impulsive urges and compulsive behaviors related to sex are not entirely understood (Carnes, 2001; Miner et al., 2007). The Diagnostic and Statistical Manual of Mental Disorders, 5th Edition, (DSM) does not catalog problematic behaviors associated with the use of pornographic material as addictive. Terms such as *sexual addiction* or *cybersex addiction* are not included in the DSM. Nor are other commonly used terms in the clinical world, such as *hypersexual disorder*, *sexual impulsivity* or *sexual compulsivity* (Hall, 2015). Thus, the clinical world currently has no official psychiatric terms to use for this contentious and prevalent issue. Nevertheless, it appears that a slow shift is taking place regarding this neuropsychological disorder, and a definition of the term sex addiction has been adopted by the World Health Organization (2020). From the perspective of public and global mental health, significant efforts have been made to propose an agreed-upon terminology, even though the concept of sexual addiction remains male-dominated (Levine, 2010; McKeague, 2014). The revised International Classification of Diseases (ICD-11, 2020) made provision for its inclusion under the chapter of Compulsive Sexual Behavior Disorder:

Compulsive sexual behavior disorder is characterized by a persistent pattern of failure to control intense, repetitive sexual impulses or urges resulting in repetitive sexual behavior. Symptoms may include repetitive sexual activities becoming a central focus of the

person's life to the point of neglecting health and personal care or other interests, activities and responsibilities; numerous unsuccessful efforts to significantly reduce repetitive sexual behavior; and continued repetitive sexual behavior despite adverse consequences or deriving little or no satisfaction from it. (retrieved from <https://www.who.int/classifications/classification-of-diseases>, 2020).

According to Carnes (1991) – who pioneered the research on this subject– problematic sexual behaviors represent the “driven behaviors an individual finds troublesome, and which disturb levels of functioning and greatly affect those around him” (p. 11). Some of the problematic out-of-control sexual behaviors can include, yet are not limited to, addiction to pornographic materials and/or pornographic websites, cybersex, hiring prostitutes, frequenting massage parlors, and infidelity (Carnes, 2001). I will use all these terms interchangeably as enough research has been done to demonstrate the complex yet causal relationship between all forms of sex addiction and its effects.

***Implications for counseling FPOSA.*** In the last decade, it has become universally accepted that these behaviors associated with sexual addiction are devastating the lives of individuals who are fundamentally moral, thoughtful, and in committed relationships (Herring, 2011). Despite the lack of consensus and conceptualization regarding sex addiction, therapists are still attempting to make meaning of the experiences of current and former partners of sex addicts (Jones & Tuttle, 2012; Stokes et. al, 2020). The process of healing and personal growth of current and former partners of sex addicts who enter therapy continues to be hindered by these challenges regarding the identification and classification of sex addiction (Zitzman & Butler, 2005). These omissions contribute to the lack of consensus among mental health professionals and constitutes one of the factors that influence therapists' attitudes and approaches

towards partners of sex addicts and the trauma they experience (Ayres & Haydock, 2009; Levine, 2010; Reef Karim & Chaudhry, 2012). Its implications extend to harmful interferences with the process of assessment, diagnosis, and treatment of partners of sex addicts and their trauma (Zitzman & Butler, 2005). Studies that could assess possible personal growth and the positive changes following this trauma could be catalysts for hope for the addict, the partner and the field of counseling (Calhoun & Tedeschi, 1998; 2004; 2006).

***Implications for current study.*** In the current study, the general term “former partners of the sexually addicted” (FPOSA) will be used; however, the information is to be applied without gender specificity. Both men and women experience betrayal trauma when in partnership with sexually addicted individuals, thus this research intended to study both men and women who have experienced this phenomenon (Schneider et al., 1998). However, due to the male-dominated understanding about sexual addiction and the tremendous discrepancy between genders in terms of self-reported addictive behaviors, most sex addiction subject related research efforts have focused on studying men who are sex addicts only, making both the women sex addicts and their male partners one of the most unresearched populations (McKeague, 2014).

Little is known about the effects that this addiction has on the male partners of female sex addicts (McKeague, 2014). This is partially due to the gender bias embedded in cultural messages regarding the view of women and men co-addicts, where women sex addicts are much more stigmatized (Ferree 2002b, 2010; Schneider, 2005a). The fear of being shamed leads to an underreporting of sex or porn addiction in women (McKeague, 2014). Moreover, the etiology of sex addiction in women makes them more susceptible to being diagnosed as love/relationships addicts (McKeague, 2014). Thus, the underreporting of sex addiction in women significantly decreased the likelihood of finding male partners of sex addicts as research participants for this

study. In conclusion, even though this study hoped to study both genders, the factors mentioned above encouraged the researcher to choose the most accessible gender for study, which were participants who identified themselves as women (McKeague, 2014).

### **Trauma, PTSD and Betrayal Trauma: The Aftermath of Sex Addiction**

When looking beyond classification challenges, what is clear is that the experiences of partners of sex addicts qualify as trauma. The Diagnostic and Statistical Manual of Mental Disorders (DSM-V) defines a traumatic event as “exposure to actual or threatened death, serious injury, or sexual violence” (5<sup>th</sup> ed., DSM-5, American Psychiatric Association, 2013, p. 271). According to Janoff-Bulman (2006), trauma is precipitated by a shocking event that causes one to challenge the most fundamental assumptions about their internal or/and external world. Furthermore, sensorimotor psychotherapists Pat Ogden and Janina Fisher (2015) defined trauma as “any experience that is stressful enough to leave us feeling helpless, frightened, overwhelmed, or profoundly unsafe” (p. 60). Such experiences overwhelm the nervous system causing a trauma response, which interrupts an individual’s ability to function, blocking access to reasoning, to reality and the body’s messages, overwhelming the individual’s internal resources and producing lasting psychological symptoms (Briere & Scott, 2015; Ogden & Fisher, 2015).

The body of research shows that in response to their relationship with their sexually addicted partner women in these relationships report distressing trauma symptoms and trauma survivor-related behaviors (Steffens, 2006). More specifically, depression, denial, confusion, dissociation, anxiety, increased isolation, numbness, rage, shame, hyper-vigilance, and the loss of self are all evident and reported in numerous studies (Ayres & Haydock, 2009; Carnes, 2011; Carnes et. al, 2005; Carnes, 1983; Goldberg et al., 2008; Faisandier et al., 2012; Jones, & Tuttle, 2012; Reef Karim & Chaudhry, 2012; Steffens, 2006). The psychological harm is reflected not

only in physiological reactions, but it can also be observed inside the fundamental shifts in a partner's identity, meaning making, sense of worth, self-esteem, sexuality, spirituality, attachment, and one's social context (Anders et al., 2011; Carnes, 2011; Carnes & O'Connor, 2016; Corley et al., 2012; Dahlen et al., 2008; DeKeseredy & Hall-Sanches, 2016; Schneider et al., 2012; Steffens & Means, 2009; Steffens & Rennie, 2006; Tripodi, 2006; Vogeler et al., 2018; Weathers & Keane, 2007).

This body of evidence further verifies Janof -Bulman's theory of trauma (1992) that is based upon the premise that trauma is an experience that alters an individual's basic assumptions. According to these researchers, trauma occurs when "these fundamental assumptions are severely challenged in a climate of intense psychological crisis" (Janof -Bulman, 1992, p. 56). These assumptions are 1) the world is benevolent, 2) the world is meaningful, and 3) the self is worthy. This theory also describes traumatic events as instances that present a major threat to survival; it further argues that relational betrayals are capable of such threats. Partners of sex addicts report a process of questioning regarding the assumptions mentioned above (Janof -Bulman, 1992; Schneider et al., 2012; Steffens & Rennie, 2006). Given both the presence of physiological reactions and psychological alterations resulting from their experiences, a *posttraumatic stress disorder* (PTSD) diagnosis is common in partners of sex addicts.

The seminal work of Steffens and Rennie (2006) suggests that most partners of sex addicts experience PTSD. PTSD is a diagnosis that is marked by the development of the following characteristic symptoms in relation to one or more traumatic events that cause clinically significant distress: recurrent, involuntary, and intrusive thoughts or dreams, dissociation, avoidance, negative alterations in mood or cognition, and marked alterations in

reactivity or arousal (5<sup>th</sup> ed. DSM-5, American Psychiatric Association, 2013). In their study, sixty-three participants completed self-report instruments, the Posttraumatic Stress Diagnostic Scale (PDS) and the Impact of Event Scale- Revised (IES) to measure the following variables: method of disclosure/discovery (intentional, accidental), information shared by the addict in response to the discovery/disclosure (denial, partial information, or full disclosure), number of repeated disclosure events, and suspicion of sexual infidelity before disclosure and response of the sex addict. Significantly, participants reported experiences of non-stranger sexual assault at a rate of 36.5%. Fifteen participants reported sexual abuse by both non-stranger sexual assault and sexual abuse. Four reported three forms of sexual assault: sexual abuse, non-stranger sexual assault, and stranger sexual assault. In addition, the participants reported symptoms such as helplessness, sleeplessness, immobility, flashbacks, anger, hypervigilance, anxiety, nightmares, intrusive thoughts, avoidance, mood swings, panic attacks, restlessness, and confusion (Steffens & Rennie, 2006). The betrayed partner displayed symptoms such as “numbing, obsessing and shifting emotions” (Steffens & Rennie, 2006, p. 251).

Furthermore, Steffens and Rennie (2006) described the discovery or disclosure of behaviors related to sex addiction as a moment of emotional crisis and a traumatic event, which points once more to the presence of PTSD. *Discovery* refers to the accidental revelation of the addict’s hidden behaviors, such as the partner finding explicit pornographic material or the addict’s emotional and sexual affairs coming to light (Carnes, 2011; Steffens, 2006). *Disclosure* refers to the planned or unplanned process in which the addict confesses details of their out-of-control sexual behaviors (Schneider, 1998). Disclosure can be voluntary (on their own accord the addicts offer/ disclose their secret life) or involuntary (due to some discovery, the addict is forced to come forth with what was formerly kept a secret). Thus, when discussing the psychological

and relational effects of discovery or disclosure that confront the partners of those addicted, it is clear that these experiences are outside of their understanding and meaning-making capabilities. This study is significant to the process of examining personal growth in partners of sex addicts since personal growth and personal distress often commingle (Bhushan & Hussain, 2007). The experience of PTG usually follows trauma and is associated with various levels of PTSD (Bhushan & Hussain, 2007; Calhoun & Tedeschi, 2004; Grad & Zeligman, 2017).

***Relational trauma as betrayal trauma.*** The main type of trauma experienced by partners of sex addicts is relational trauma, and more specifically betrayal trauma, which is defined as disclosed or discovered infidelity by Carnes (2011), and as any violation of an expectation for emotional/physical/ psychological safety and exclusivity by Whisman and Wagers (2005). Relational trauma occurs in response to a violation of trust involving an individual with which the survivor maintains a close and personal relationship (Whisman & Wagers, 2005). Although not an entirely supported construct in therapeutic settings, many research studies support the finding that a partner's relational trauma is experienced and reported as infidelity, which means that the nature of sexual addiction and that of infidelity cannot be divorced (Jones & Tuttle, 2012; Merkle & Richardson, 2000; Schneider, 2000; Steffens & Means, 2006).

Conventionally, infidelity is usually a one-time event where the betrayed spouse is informed or discovers a partner's emotional and/or sexual betrayal. However, within the framework of sex addiction, more often than not, the addict acts out repeatedly, only disclosing what they desire when they choose to (Carnes, 2011; Steffens & Means, 2006). Thus, many partners of the sexually addicted have to face the trauma associated with partial disclosures from the addict. Partial disclosure refers to the addicts' offering only to disclose part of their deceptive and compartmentalized reality system, keeping selective information to one's self; partial



disclosures outside of a clinical process are the most trauma-induced incidents which furthers the impact of the original traumatic event and results in repeated relational betrayal trauma (Magness, 2013; Parkinson, 2016; Steffens & Rennie, 2006). All these behaviors increase the level of betrayal trauma and prevent the processing of the event in the relationship as they compound the attachment injury; since the degree of the attachment injury is dependent upon “how the injured partner interprets the event in question and how his or her spouse responds to the injured party’s expressions of hurt”, a partners’ betrayal trauma remains unaddressed, making it impossible to find hope for growth after trauma (Johnson et al., 2001; p. 185)

The psychological effects of betrayal trauma caused by sex and pornography addiction are well documented (Cavaglioni & Rashty, 2010; Kohut et al., 2017; Schneider et al., 2012). Studies show that partners of sex addicts report negative consequences of partner pornography use and cybersex, such as: erosion of trust in themselves, loss of respect for themselves and their spouse, powerlessness, decreased self-esteem, feelings of inadequacy, diminished emotional and sexual connection with the addicted partner and destruction of perceived secure attachment (Ayres & Haddock, 2009; Cavaglioni & Rashty, 2010; Kohut et al., 2017; Schneider et al., 2012; Spencer & Butler, 2009). Women in their study described experiencing ambiguous loss and uncertainty and ambivalence surrounding next steps (Cavaglioni & Rashty, 2010).

In their qualitative study, Bridges et al. (2003) condensed the 100 writing samples of partners of sex addicts from internet message boards. The participants reported changes in their view of self, included feeling “sexually undesirable,” feelings of shame and “worthlessness,” and feeling “stupid” (p. 198). When partners shared their experiences of discovering their partners’ cybersex behaviors and pornography use, they described diminished trust, feeling traumatized by repeated betrayals of trust, and vigilance to manage the addiction (i.e. "spying" or "snooping"),

self-esteem erosion, feelings of hurt, depression, and social isolation due to feelings of shame and anger (Spencer & Butler, 2009). These findings are important because they show that partners of sex addicts go through a period of re-interpreting their narratives about the relationship and a re-framing of their inner selves, which are both characteristics of the process of PTG (Vis & Boynton, 2008).

### **Betrayal Trauma and the Therapeutic Setting**

The rapidly changing definition of infidelity (Hertlein & Piercy, 2008) has many ramifications on the process of assessing and treating trauma in partners of sex addicts. Therapists' conceptualization of betrayal trauma defined by the internet has a substantial effect on the therapeutic approach taken with the betrayed spouse, and thus on the possibility of healing and personal growth post trauma (Ayes & Haydock, 2009; Carnes et al., 2005; Levine, 2010; Reef Karim & Chaudhry, 2012). Many therapists are not trained to address the particular needs and nuances of this population which in turn limits their ability to give voice to partners of sex addicts in their journey of meaning-making and empowerment (Ayes & Haddock, 2009; Goldberg et al., 2008; Walters & Spengler, 2016). Studies reveal that many surveyed clinicians take a more conventional stance towards defining betrayal, where sexual contact was a pre-requisite for online sexually acting out behaviors to be labeled infidelity (Hertlein & Piercy, 2008; Reef Karim & Chaudhry, 2012). Other studies contend that couples should define the nature of online infidelity and its outcomes (i.e., as for one spouse chatting in a chat room would be infidelity, where the other may not consider it infidelity) (Hertlein & Piercy, 2008; Schneider et al., 2012).

At a minimum, clinicians surveyed seem to agree on the same infidelity characteristic behaviors: “cybersex, sexual chatting, online dating/plans to meet online/emotional

involvement with an online contact, sexual interactions/flirting, betraying confidences of one's partner, and keeping secrets from one's partner" (Hertlein & Piercy, 2008, p. 494). Yet, evidence shows that assessing the complexity of the presenting problem is difficult since therapists do not know the concrete questions to ask in order to address the nature of the trauma of living in a sexually addicted relationship (Tripodi, 2006; Walter & Spengler, 2016). Instead, often, mental health professionals invalidate the perceptions and reports of the betrayed spouse at the beginning of a therapeutic intervention, which harms the therapeutic alliance, increases the effects of the betrayal trauma and thus might interfere with the progression towards PTG (Steffens & Rennie, 2006). In addition, there is a predisposition of some therapists to adopt a common belief that a betrayed spouse is aware of the extramarital triangulation and contributes to its maintenance (Glass, 2007). Furthermore, clinicians must consider their biases and recognize the signs and the effects of betrayal trauma, such as gaslighting, emotional abuse and potential physical abuse, in order to know how to assist clients in the rebuilding of the self and a meaning process that can lead to PTG.

Furthermore, as a sign of professional negligence, frequently the response of therapists to a partner's increasing hypervigilance, obsessions and "detective behaviors" is often inappropriate, which leads to inaccurately misdiagnosing a partner with borderline personality disorder, or co-addiction instead of one of betrayal trauma (Steffens & Rennie, 2006). This is an additional reason to examine the possible relationship between the struggle with this challenging life crisis and the meaning ascribed to the trauma resulting from it. This would allow for a comprehensive understanding of the factors that would predict PTG in partners of sex addicts (Calhoun & Tedeschi, 1998; 2004; 2006; Grad & Zeligman, 2017; Tedeschi, Park & Calhoun, 1998).

## **Posttraumatic Growth**

The idea that growth can emerge from deep suffering is not new. It can be found interwoven into basic elements of many religions and the writings of many philosophers, especially existentialists. The basic tenet of these writings is that painful experiences are also opportunities for growth, and that every individual is designed with a need to integrate traumatic events in the narrative of their life to find meaning (Calhoun & Tedeschi, 1995). Finding meaning refers to an individual's ability to assign some tolerable meaning to the trauma suffered, to the way the sense of self shifts, and to the ways the world in which the traumatic events occurred changes. Making meaning out of trauma is a deeply personal process especially since this process is often accompanied by distressing emotions such as anxiety, sadness, depression, guilt, anger and irritability (Tedeschi & Calhoun, 2004). Whatever this process and its outcome, it requires that a trauma survivor identifies and mourns the traumatic event of the past, while assigning it meaning that is both self-affirming and life-affirming (Janoff-Bulman, 2004).

Some theorists consider posttraumatic growth to be the result of an evolution, an individual's attempt to reveal and integrate their interpretation of the trauma in hopes to find a sense of coherence and purpose (Grad & Zeligman, 2017; Stein et al., 2018). Some others suggest that personal growth is not an outcome in itself, but rather a coping strategy that makes room for the natural stretching and changes of personal values, identity and life purpose due to the trauma (Butler, 2007; Davis, 2008). Whatever its delineation, PTG is a long process that occurs over a long period of time (Tedeschi & Calhoun, 2004).

Several other theories and models exist to describe how the transformation trauma might develop. Among them is Joseph and Linley's (2005) organismic valuing theory (OVT), as well as Janoff-Bulman's (2004) three explanatory models and Maercker and Zoellner's (2004) Janus-

faced model. This literature review contains a brief explanation of the synthesis of aspects of these theories and models, as each of these as a single theory or model might be insufficient in creating a holistic picture of PTG. However, Tedeschi and Calhoun's (2005) model will serve as the main framework for this study.

Joseph and Linley's theory (2008) proposes that PTG bears a remarkable similarity to psychological well-being (PWB) since descriptions of PWB show a remarkable similarity to the domains of PTG. According to this theoretical model, an individual is considered to have experienced PWB if they appear to be independent, show openness to growth and have a sense of meaning in life, high self-esteem, good relationships with others as well as being highly functional in their environment (Joseph & Linley, 2008). This conceptualization of PWB allows Joseph and Linley (2008) to condense Tedeschi and Calhoun's (1995) five domains into the following three: enhanced relationships, a changed view of the self in a positive direction and changes in life philosophies. Equivalently, Janoff-Bulman (2004) endorses a three-component model which combines the domains of changed sense of priorities and greater appreciation of life, warmer and more intimate relationships with others and spiritual development under the label of "existential re-evaluation" (p.32).

***Domains of PTG.*** The process of growth after a traumatic event happens in stages and within the framework of five areas of life, or life domains, that are measured with the aid of psychological scales (Tedeschi & Calhoun, 1998; 2004). When reviewing the literature related to positive outcomes of trauma, Tedeschi and Calhoun (1995) found three emergent general dimensions: changes in self perceptions, changes in relationships to/with others, and changes in life philosophy. After they conducted a factor analysis on the 21-item Posttraumatic Growth Inventory (PTGI), Tedeschi and Calhoun (1996) found five factors that most comprehensively

described the phenomenon of PTG: (1) greater life appreciation that leads to a change in priorities, (2) increased connection with others leading to warmer, more intimate relationships with others, (3) increased sense of personal strength, (4) new development of one's spiritual self, and (5) identification of new possibilities.

In general, the existing research agrees with the model of the PTG endorsed by Tedeschi and Calhoun (Calhoun & Tedeschi, 1998; 2004; 2006; Grad & Zeligman, 2017; Tedeschi et al., 1998). The most recent revision of this model includes nine components: person pre-trauma, seismic event, challenges (or ability to manage emotional distress), rumination (automatic and intrusive), coping success, reframed rumination (deliberate), social support, PTG domains, and enduring distress after trauma (Tedeschi et al., 2018). According to this model when a seismic event happens, challenges (management of emotional distress, fundamental schemas/beliefs, life narrative) will be present, and intrusive rumination about the event and its painful consequences will follow. However coping activities, such as writing/talking/praying/therapy will result in a reduction of emotional distress through the disengagement from previous goals and through management of automatic rumination. Furthermore, due to this disengagement, the coping activities and the social support, the rumination will become more deliberate which will result in a change in narrative development and in schema change.

Though ample research has documented the adverse effects following such experiences, no studies have explored partners' (of the sexually addicted) healing experiences that would facilitate the transformation of such trauma within the recovery process. So far, the literature has been highly focused on the etiology, the stages, and the meaning of the trauma, exploring emotional reactions to the different types of the addict's behaviors, and discussing the models of clinical treatment while presenting clear evidence of PTSD symptomology, but not on the

positive changes that might take place in the aftermath (Carnes & O'Connor, 2016; Corley et al., 2012; Dahlen et al., 2008; DeKeseredy & Hall-Sanches, 2016; Schneider et al., 2012; Steffens & Rennie, 2006; Steffens & Means, 2009; Tripodi, 2007; Vogeler et al., 2018).

Over the last two decades, scholars have made efforts to record evidence of positive changes resulting from how individuals respond to other traumatic events (Cobb et al., 2006; Hasse & Johnston, 2012; Jirek, 2017; Valdez & Lilly, 2015). Reports in literature show that PTG is a phenomenon experienced after many life crises such as bereavement, sexual abuse and sexual assault, domestic violence, medical problems, chronic illness and refugee experiences (Tedeshi & Calhoun, 2004). Yet, there is a paucity of scholarly literature related to the topic in question. After conducting extensive research using search engines such as Academic Search Premier and Google Scholar, it was concluded that scholarly articles which directly explore the intersection between trauma, sex addiction and posttraumatic growth are non-existent. The following glossary of key words and pairs were used with the purpose of curtailing this limitation: personal growth and addiction, posttraumatic growth and (former) partners of addicts, positive adaptation and sex addiction, meaning making and trauma, (former) partners of sex addicts and posttraumatic growth, positive changes and (former) partners of sex addicts. The refined search rendered no studies on posttraumatic growth experiences specific to FPOSA.

### **Posttraumatic Growth in Relationally Betrayed Women**

Some research exists at the intersection of relational betrayal and PTG. Laaser et al. (2017) examined the presence of PTG in relationally betrayed women and factors that facilitated PTG. They found that the passage of time was significantly correlated to the development of PTG when moderated by a PTSD diagnosis. Participants, 202 heterosexual females, completed the PTG Inventory and the Core Beliefs Inventory. For participants who met PTSD criteria the

post betrayal time was a significant predictor of PTG Inventory scores ( $\beta = .27$ ,  $t(121) = 3.12$ ,  $p = .002$ ). The relationship between PTG Inventory scores and time post betrayal was not significant for those who did not meet PTSD diagnosis. The results showed that more than 80 % of participants reported some degree of PTG following the posttraumatic stress of the experience. It was found that the positive correlation between PTG and disruption in core beliefs was significant ( $r = .14$ ,  $p < .001$ ). When dealing with a spouse's sexually addictive behaviors, women's preferences for support in their journeys towards personal growth included: individual therapy (72%), couples therapy (49%), full disclosure from the addict (50%), psychoeducational material (47%), forgiveness (44%), support groups attendance (40.5%), and intensive treatment (29%) (Laaser et al., 2017). In conclusion, the study showed the presence of PTG in relationally betrayed women, especially when considering factors such as the passage of time, use of resources and therapeutic engagement. The results also showed that women who met the criteria for PTSD experienced greater posttraumatic growth over time. These findings provide a foundation for the present study since it supplies evidence that PTG is possible for this population and that it can coexist with distress (Laaser et al., 2017).

Manning and Watson (2008) used a grounded theory methodology to identify what types of support partners of sex addicts found most beneficial in their journey of growth when dealing with their spouses' sex addiction. The researchers identified five characteristics common to all participants: isolation, willingness to share their experience with transparency, and a desire to advocate for other women in the same situation. Upon interviewing the twenty-two Christian women, the researchers identified two main broad categories of support: "Coping Supports" and "Change Oriented Supports." Seventeen types of coping mechanisms, and five categories of support emerged. The five most common factors of support that emerged were: connection,



advocacy, validation, education, and direction. The categories of change-oriented supports identified in this sample were: recreational, relational, professional, spiritual, and conceptual (p. 240). These findings are a springboard for the study on PTG since they show that social support pathways were part of coping with trauma. The transformation of the suffering can happen as partners engage in advocacy efforts and seek to relate to others.

### **The Trauma of Interpersonal Violence and Problematic Sexual Behaviors**

Growing evidence exists showing that one of the consequences of problematic sexual behaviors is intimate violence. In a study on pornography addiction and abusive behavior, Carnes (1991) found violence as one of the risks of sexual addiction. A strong link between pornography addiction/ pornographic materials and sexually aggressive behavior has been found in a few studies strengthening the theory that there is a fine line between domestic violence and sex addiction behaviors (Bergen, 2000; Bergen & Bogle, 2000; Bridges et al., 2010; Foubert et al., 2019). For example, in one study, out of 100 women who survived rape, 40 % reported that pornography was part of the abusive incident (Bergen & Bogle, 2000).

In their qualitative research study, DeKesered and Hall-Sanchez (2017) found that 28 out of 43 survivors of interpersonal violence disclosed that their partner was a viewer of pornographic material, and 12 participants stated that such media played a factor in their sexual assault. Due to the difficulty in applying a single definition for "pornography," researchers found that the data generated by the interviews showed more reports (32) of pornography consumption and experiences of abuse related to it. A secondary analysis revealed five themes: learning about sex through pornography, imitation and comparison, introducing other sexual partners, filming sexual acts without consent, and initiation into the broader culture of pornography. Findings suggested that the relationship between pornography and interpersonal violence was strong.

In multiple studies done by Russell (1980; 1988; 1998) on the relationship between pornography and sexual violence, the results showed that 32% of the 87 participants were wives who reported experiencing being raped and who were asked to pose for pornography by their spouse (Bergen & Bogle, 2000). In addition, another 15 participants reported attempted rapes or rapes due to their abusers' out of control use of pornography (Russell, 1988). Knowing this helps to build a connection between the effects of sex addiction and the phenomenon of PTG.

### **Experiences of Post -Traumatic Growth and Interpersonal Violence**

PTG in survivors of intimate partner violence is increasing; findings show that many such partners experience some type of growth after the primary resolution of the trauma, and leaving an abusive relationship is often related to the highest levels of posttraumatic growth (Follingstad et al., 1991; Senter & Caldwell, 2002). In Cobb et al.'s study (2006) sixty women, survivors of interpersonal violence, reported high growth on the Posttraumatic Growth Inventory (PTGI) no matter the relationship status with the abuser (still in or currently out of the relationship). The severity of abuse did not determine the PTG levels except in the appreciation of the life domain. The more severe the abuse, the greater the growth. The participants reported stronger interpersonal relationships, increased willingness to receive support and offer support, increased self-awareness and ability for insight, stronger spiritual identity, and increased perceived control over their lives following the ending of their relationships. Contact with a role model who reported growth associated with dealing with an abusive partner was a predictor of posttraumatic growth in their study as well as in others (Anderson et al., 2019; Cobb et al., 2006; D'Amore et al., 2021). These findings suggest a relationship between the domains of PTG and the interpersonal violence trauma, no matter the status of the relationship.

Valdez and Lilly (2014) conducted a study on posttraumatic growth with twenty-three women who survived intimate partner violence. The results suggested that women who were able to redefine their interpretation of the world into an overall more positive framework perceived greater personal growth due to their interpersonal victimization. Eighty-seven percent of their participants reported PTG, which validated previous research demonstrating that 75% to 90% of survivors of intimate partner violence report benefits post-trauma (Calhoun & Tedeschi, 2006). The twenty-three participants were given the PTGI twice, once at the initial assessment, and once, six months later. Positive world assumptions at the final assessment, but not at the initial assessment, were associated with greater PTG. For women who reported growth, a greater positive world framework was reconstructed from initial to final assessment. No significant differences were found in PTG scores between revictimized (at final assessment) and non-revictimized women (at final assessment). Participants who did not report revictimization perceived only moderate growth whereas revictimized women reported minor changes in PTG (Valdez & Lilly, 2014).

Brosi et al. (2020) focused on the pathways survivors of intimate violence used to move towards PTG. When thirty-two women from two domestic violence shelters were interviewed, several themes emerged: deliberateness of action, ending the cycle for children, a changed perspective on life, and social support. These factors not only led to PTG, but they provided a foundation for the decision to leave the abusive relationship and construct new assumptions about the world. This demonstrates that women who were severely emotionally and physically betrayed by a person of trust reported experiencing PTG.

## **Conclusion**

The literature reviewed considers the aspects of the experiences of PTG in relationally betrayed women; however, no research to date explores the phenomenon of PTG in FPOSA. Furthermore, little research explicitly examines the meaning of the experience of trauma transformation emerging and the positive life adaptations to this particular major life event. Despite the increased interest in this topic over the last few years, no studies have simultaneously explored the possible relationship between the meaning ascribed to the trauma suffered and the possible personal transformation experienced post-trauma. Moreover, the research around this topic centers around a quantitative methodology approach, giving little space for exploring how partners make sense of the phenomenon of PTG. A qualitative study that seeks to advance the understanding of how partners experience PTG will greatly expand the conceptualization of trauma and the healing process in FPOSA.

## **Significance of the Study**

Investigating the common meaning of PTG for FPOSA could advance the profession of counseling and reveal useful resources clinicians could use. An integrative conceptualization of such individuals can help practitioners facilitate a more direct path towards growth and healing, as well as inform counselors and partners on resources and interventions that can assuage the traumatic effects of being in a partnership with a sex addict. Additionally, it is theorized that identifying PTG experiences and fostering their journey could alleviate posttraumatic stress reactions in the current or former partners of the sexually addicted. Understanding this possible ongoing process of the adaptation of trauma and the capacity for fulfillment and self-actualization following such an emotional/identity crisis would offer much needed hope for partners, as well as for their communities (Joseph & Linley, 2004).

## **Purpose of the Study**

This study aims to examine the lived experiences of FPOSA through a PTG theory lens. Given that previous research has documented not only the traumatic effects of this life experience, but also a significant relationship between PTSD levels and a trauma survivor's cognitive beliefs about themselves and the world, it is crucial to examine how former partners of sex addicts make meaning of their traumatic experience (Steffens & Reine, 2006; Vogeler, 2018; Williams & Poijula, 2016). Further understanding the post-trauma positive outcomes of this traumatic life event is crucial to reaching an integrative conceptualization of FPOSA and to supporting therapeutic interventions that build resilience in overcoming the effects of the trauma of FPOSA (Joseph & Linley, 2004).

Research findings suggest that when one's assumptive world is threatened by a loved and trusted one, a process of transformation of trauma (posttraumatic growth) is set in motion (Calhoun & Tedeschi, 1998; 2004; 2006; Grad & Zeligman, 2017; Tedeschi et al., 1998). On this assumption, and to expand the body of knowledge regarding PTG, the present study was designed to determine whether FPOSA would report posttraumatic growth. Thus, the primary purpose of this study was to explore the possible relationships between the meaning ascribed to the trauma they suffered and the possible personal transformation experienced post trauma, when considering the growth stages and domains of PTG (Cobb et. al., 2006). Understanding this relationship would help therapists focus the treatment on normalizing the process of healing and championing their clients in their efforts to reconstruct their lives.

In this study, I also sought to examine the common meaning of the experience of trauma transformation emerging and that of the positive life adaptations to this major life event. Positive adaptations are considered a springboard that propels one to an enriched transformational level

of functioning not familiar nor available to them before the trauma (Joseph & Linley, 2004). Therefore, a secondary purpose of this study was to make sense of the lived experiences of the research participants regarding how positive life adaptations to the reality of being betrayed could increase one's capacity for change and growth (Tedeschi et. al, 2007). More specifically, I was interested in investigating if and how FPOSA's process of transformation echoed the five major personal growth domains behind the PTG theory: "seeing new possibilities, changed relationships, the paradoxical view of being both stronger yet more vulnerable, a greater appreciation for life, and changes in the spiritual and existential domains" (Calhoun & Tedeschi, 2004, p. 95). Current and former partners are known to be seeking concrete resources that will help them in their own recovery and healing journey, thus therapists would be more effective regarding long term treatment of partners if they offered their clients a framework or roadmap that they can use to navigate the journey from heartbreak to new hope (Tripodi, 2006).

### **Central Research Question**

To promote increased understanding of the phenomenon of PTG in FPOSA, I posed the following central question: *What transformative life changes and outcomes have occurred for FPOSA as a direct result of this traumatic event?*

## **CHAPTER II: METHODOLOGY**

### **Description and Rationale of Qualitative Methods**

My study employed a qualitative approach to research. I chose a phenomenological qualitative research method because it was the most suitable for developing a complex picture of growth after trauma in former partners of sex addicts. I determined that a phenomenological qualitative inquiry could assist me in reporting multiple perspectives and identifying the many factors involved in the phenomena of PTG and the larger picture that emerges (Qutoshi, 2018). In addition, this method of inquiry would facilitate both an interpretation of FPOSA's lived experiences and an engagement with a meaning making process what would allow me a deeper human understanding of a shared phenomenon (Qutoshi, 2018). More specifically, to go beyond the description of the phenomena into meaning-making, I employed hermeneutic phenomenology (Bynum & Varpio, 2018). Hermeneutics is concerned with the understanding and interpretation of our being in the world and how our different ways of being in the world are connected to our understanding of things (Trede & Loftus, 2010). Since hermeneutic phenomenology calls for interpretation and focuses on participants' felt experience of a phenomenon while involving the researcher's experiences in data collection, data analysis and reflection of thought throughout processes, this was the most suitable approach (Bynum & Varpio, 2018).

Phenomenology is the "study of essences," and it has been conceptualized as more than a research method; it is a philosophy and an overarching perspective from which all qualitative research is sourced (Maykut & Morehouse, 1994; Merleau-Ponty, 1962). A phenomenological research approach is rooted in a postmodern paradigm involving detailed examination of the

participants' own perspective and meaning making processes of a phenomena (van Manen, 1990). Its objective is to suspend assumptions in the inquiry process, so that an in-depth exploration of complexities and processes related to a phenomenon can take place, as well as a conceptualization of it (instead of an intellectualization) through the participants' lived and felt experiences (Smith & Osborn, 2015; van Manen, 1990). This methodology was the most appropriate for this study because it asks, "What is this kind of experience like?" and "How can it be known?" (van Manen, 1990, p.9), and because its research designs situates the researcher as the instrument used to construct and interpret the data generated to answer the inquiry (Creswell & Creswell, 2018).

As the instrument of research and taking in consideration context, setting, and participants' frame of reference, I made use of reflexivity, as well as inductive and deductive analysis, to give meaning to what was described to be unfolding inside the what and the how of their lived experiences of PTG (Moustakas, 1994; Marshall & Rossman, 1989). Inside the unfolding, my aim was to accept whatever was heard and to enter a "grappling together" – alongside the participants—a grappling with giving meaning to the lived experiences of growth post betrayal trauma (Josselson, 2013, p. 80). My intent throughout the study was to remain in the grappling in order to capture the essence of the lived experience of PTG described by and through the participants' point of view.

### **Social Constructivist Paradigm**

An epistemological perspective of social constructivism guided my qualitative inquiry. According to the social constructivist paradigm, knowledge is co-constructed between individuals (Cottone, 2017), and the nature of reality is apprehended through a "complex understanding of experiences that invoke a lived process, unfurling of perspectives and meanings



which are unique to the person's embodied and situated relationship to the world" (Smith et al., 2012, p. 21). Within this paradigmatic framework, the goal of this study was to collect and analyze the participants' interpretations of their lived experiences so that I, the researcher, could provide the reader with an interpretation of their interpretations. Phenomenology aligns closely with social constructivism due to its emphasis on co-constructing knowledge of lived experiences through semi-structured interviews, more specifically through language, the means through which we, as researchers understand individual's subjective worlds (Haverkamp & Young, 2007).

Ascribing to the social constructivist paradigm, I constructed the study through interactions and conversations within the inquiry. Constructivism provided knowledge and meaning, which allowed me to give voice to the FPOSA's lived experiences. Congruent with the objectives of social constructivism, my aim was to develop subjective meanings of these experiences, meanings that are varied and multiple, and are constructed through the participants' lived realities and their interactions with others (Denzin & Lincoln, 2011). This dynamic process of research where the researcher plays an active role in the detailed examination of the participants' lifeworld as opposed to an attempt to produce objective statements is characteristic to the Interpretive Phenomenological Analysis approach (Smith & Osborn, 2015).

### **Interpretive Phenomenological Analysis**

I utilized an interpretive phenomenological approach (IPA) to perform a qualitative exploration of the phenomenon of growth post-betrayal trauma as it occurs in partners of sex addicts. IPA is a contemporary philosophical approach to the study of human experiences that aims to offer insights into how a given individual, in a specific personal and social context makes meaning of a certain significant experience (Smith & Nizza, 2022; Vagle, 2018). IPA was a good

fit for the current study because it is concerned with an individual's personal perception of an event and, thus, it allowed me to explore deep emotional experiences characteristic of major life changes, such as issues of identity (Smith & Nizza, 2022). The concept of growth following betrayal trauma in FPOSA incorporates both, a major life change and issues of identity and is also associated with complex emotionality (Corley et al., 2012; Dahlen et al., 2008; Steffens & Reine, 2006; Tedeschi et al., 2018). Since PTG is considered to be a phenomenon that occurs when the experiences of suffering and distress result in transformative positive changes that are the outcome of personal perceptions of certain unique life events, IPA is the most suitable approach (Tedeschi et al., 2018).

An IPA approach complements the philosophical assumptions of social constructivism in that it assumes that individuals naturally seek to interpret their lived experiences and that these personal processes of self-reflection are accessible through questioning and conversation (Brocki & Wearden, 2006). This implies that reality is co-constructed, and that it involves interpretation on both sides, that of the researcher and that of the participants. Thus, IPA acknowledges explicitly the interpretive activity of the researcher, making the exploration of meaning of personal experiences to be an interpretive endeavor on behalf of both the participant and researcher (Smith & Osborn, 2015). This interpretation process is considered to be a double hermeneutic approach that involves the participant attempting to make sense of a particular phenomenon, while the researcher seeks to make sense of the participants trying to make sense of a particular phenomenon (Ashworth, 2015; Smith & Osborn, 2015). This approach fit well not only with the research question but also with the identity of the researcher as a therapist and its meaning-making, interpretive characteristics. It made it easier for me, as a therapist familiar with

the topic as well as an insider, to pay attention to the deep interpretive engagement on all sides: the participants, myself and the existing literature.

IPA is phenomenological in that the approach allows for inquiries into consciousness and mental processes and looks for how an experience was perceived (Larkin & Thompson 2012). Yet, what makes it distinctive is that IPA seeks to look at more than the mental processes or the perceptions of an experience; its aim is to allow participants to describe not only their perceptions of a certain experience, but also their processes and their emotions around it (McCoy, 2017; Smith & Nizza, 2022). Thus, this approach favors subjective meaning and giving voice to each individual's personal accounts and interpretations (Larkin et al., 2006). Rather than attempting to focus mainly on producing a single, generalizable truth, IPA "assumes an ontological understanding of reality as a subjective construct" (McCoy, 2017, p. 448; Smith & Nizza, 2022). Accordingly, IPA pursues an idiographic commitment, the implications being that the researcher's priority is to focus on each participant's interpretation individually before moving on to making comparisons or generalizing (Smith & Nizza, 2022). Its idiographic emphasis rests on the conceptualization of meaning-making; in other words, its aim is to explain or describe a phenomenon exhaustively, based on the subjective understandings of the participants, at their level and in their context (Eatough & Smith 2008).

In IPA, data analysis has a more layered approach to interpretation and rests on capturing and comprehending the content and complexities of meanings; it also involves examining commonality, difference, discrepancy, convergence and nuance within an individual's experience (Eatough et al., 2008). Additionally, data analysis rests on the reflection of essential themes and the iterative and cyclical process of considering both the parts and the whole (Smith & Nizza, 2022; van Manen, 1997). It is a commitment to the practice of thoughtfulness and

proceeds with the awareness that research is always “a project of someone: a real person, who, in the context of particular individual, social, and historical life circumstances, sets out to make sense of a certain aspect of human existence” (van Manen, 1997, p. 31). This methodology renders a pluralistic approach to research which attentively considers the *someone* involved as fully human- never an object for reduction or fragmentation.

The IPA researcher is actively looking for nuances in what exactly changed or stayed the same across the data (Smith, 2011). In seeking the presence or absence of what has become different or what has remained the same, following the independent analysis of each transcript, the IPA method dictates that iterative analysis must occur across transcripts to identify cumulative patterns across participants’ experiences (Smith & Osborn 2015). As elements of change appear vis-à-vis convergence and divergence alterations in directional movement have to be made (Smith, 2011; Smith & Osborn 2015). This process calls for a researcher whose default position is curiosity, a not knowing and a surrender to exploring (Josselson, 2013). Adopting this position promotes a perspective free from assumptions, discourages the researcher from embracing absolute truths and encourages a readiness to continually investigate the uniqueness of each individual and their experiences.

### **Rationale for the Design**

Apriori theory was used for the hypothetical inquiries and for the thematic analysis. To remain congruent with IPA, I situated the meaning-making questions within the specific context of the PTG model, in order to inform the detailed examination of a specific phenomenon, rather than the broader experience of growth after betrayal on too grand of a scale (Smith et al, 2009). Not a theory-driven method, IPA’s inductive conclusions are based on what is found in the data generated (Smith & Nizza, 2022). For this reason, I constructed my research questions to be

exploratory and open-ended since my objective was to gather participants' perceptions and sense making about the changes happening following betrayal trauma. To be consistent with the phenomenological framework of IPA, I made the investigating and examining open and process-oriented from the beginning; I accomplished this by exploring the interpretive aspect of participants' stories (Eatough & Smith, 2017). "Exploring," "investigating," "examining," and "eliciting" have been actions commonly used in IPA because they denote a researcher's intentions to focus on the interpretation of meaning of what is being accounted; all of these actions to are consistent with IPA's inductive procedure, and thus were a good fit for the current study (Smith & Osborn, 2008).

To remain in accord with the fundamental framework of qualitative design standards, I framed my inquiry on the results of the research studies examined in the introduction (Bergen & Bogle, 2000; DeKesered & Hall-Sanchez, 2017; Laaser et al., 2017; Brosi et al., 2020; Valdez & Lilly, 2014). Even though none of the studies explored PTG in relation to the trauma experienced by partners of sex addicts, they did establish a framework for understanding the relationship between the phenomenon and various kinds of traumatic experiences. The existing literature offered an entrance point to my research topic; thus, there was a possibility that as a result of the current study, PTG could be further clarified and put into focus through an in-depth examination of the participant's' experiences (Smith & Nizza, 2022). IPA required that I was able to evaluate the extent to which I accomplished the initial objective of the research (Smith et al., 2009)). The existing literature was useful in identifying what had been achieved and what questions had been answered. However, to ensure that I have accomplished my objective, I made use of the second-tier research questions, which are more refined and more PTG theory-driven (Smith et al., 2009).

The second-tier questions allowed me to compare the fit between the understanding that participants have of the phenomenon and the construct of PTG present in the literature. In IPA fashion, these questions were only asked and answered at a more interpretive stage of the study, once the main research question was given enough space. This prevented me from hypothesizing or testing a theory, as I viewed the PTG model only as a tool that would help me interpret the nuances of the data. Using deductive reasoning, I engaged with the theory, while making FPOSA's stories and meaning-making processes the priority. IPA is "participant-oriented" thus my intention was to honor the voices of my participants who share this common experience (Smith et. al, 2009, p.34).

I accomplished the data gathering through face-to-face, open-ended in-depth interviews, which is the closest way to naturally and actively share experiences in the research realm (Chung & Ashworth, 2006). This approach allowed me to engage in real-time, in-depth conversations with participants and remain consistent with the idiographic commitments of IPA (Pietkiewicz & Smith, 2014). In addition, semi-structured interviews offered me the opportunity to build rapport with participants and encourage meaningful reflection. This rapport assisted me with the elicitation of feelings, thoughts and meaning-making statements, which is the kind of rich data that IPA requires. Given the importance of building rapport with participants, IPA is known for its complementary nature to the counseling field. I have had many years of practicing "conversations with a purpose" which is characteristic of qualitative research interviews (Smith et al., 2009). Therefore, my expertise as a therapist assisted me in facilitating an intimate focus on each individual's unique felt experience of growth after trauma.

In IPA, the ability to conduct a worthwhile in-depth interview is a fundamental skill, especially since language is used to create meaning (Smith & Nizza, 2022). While interviewing

FPOSA, I encouraged them to narrate their stories while making sure that the interview was heading in the right direction; the open-ended questions were specifically ordered to prevent participants from getting lost in their trauma story, gently steering them towards answers that indirectly helped address the transformations that took place because of the experience of betrayal. As a therapist, I have had to consistently sharpen the art of interviewing over the last decade, which ensured that my participants remained the story tellers and the experts on their subjects. I made use of these skills to build rapport and to be flexible to accept whatever I might hear—expected and unexpected—but to also be confident enough to reach for greater depth while keeping track of what was being said and what I still need to ask (Smith & Nizza, 2022). Thus, to some extent I let the conversations flow naturally in an attempt to try getting as close as possible to the participants’ (the experts on the topic of growth after betrayal trauma) personal world so that I could take an ‘insider’s perspective’ (Eatough & Smith, 2017; Smith & Nizza, 2022).

Since “language is the means through which reality is being co-constructed” (Smith & Nizza, 2022, p. 6) I had to draw on what the participants said and how they said it, by using a complex process of data analysis which was iterative and cyclical (Smith, 2007). To reflect the idiographic and inductive approaches, I analyzed each participant’s data on its own and as freely as possible from theoretical influences of PTG, before I engaged in the process of searching for patterns across the interviews (Smith, 2011). I then explored how common themes played out for each participant, so that IPA’s idiographic commitment to allow each participant’s experience a presence within the findings would be fulfilled (Smith, 2011; 2017). Although conducting this sort of analysis is a fluid process, in order to remain consistent with the analytic process in IPA that requires a sense of order, I analyzed the data following a set of common processes and in stages (Smith et al., 2009). Iteratively, the results of each stage of the analysis indicated a

potential need for me to revise prior steps and interpretations, and repeat the process (Smith & Nizza, 2022). My goal was to engage with the data in a flexible and reflective way in order to make room for a close examination of each participant's unique experiential claims, while also observing my personal meaning-making process (Smith & Nizza, 2022).

In the end, I, the researcher, was the instrument of research, the one who made interpretations of the meaning of FPOSA's lived experiences of transformation of betrayal trauma (Smith et. al, 2009). I recognized early on that my interpretations of how I made sense of the participants' worlds was complicated by own preconceptions. From an ethical perspective, my roles as both an insider and an outsider were difficult to play. To remain a neutral observer in this two-stage process of interpretive activity, I utilized bracketing through self-reflexivity in data gathering and analysis. As I assumed interpretive authority over the analysis of the data my self-reflexivity practice throughout the research process served to show how the co-construction of the story took place (Josselson, 2013).

### **Researcher's Positionality**

Ontologically, the concept of PTG was not new to me or to the research world; at large, its nature has been identified (Cobb et al., 2006; Haase & Johnston, 2012; Lasser et al., 2017; Valdez & Lilly, 2015). Epistemologically, I am very familiar with the context of trauma and I have real first-hand information indicating that the experience of trauma transformation might have been a reality for many FPOSA. Thus, deductively, I knew of the possibility of PTG being experienced by this population, yet I did not have the knowledge of the reality of PTG from the perspective of those who lived in it. In IPA fashion, I had to acknowledge that my participants have constructed their own social reality in regard to growth after trauma (Gergen, 1994), and that I am the author of their interpretations and my own interpretations of their interpretations



(Josselson, 2013; Smith & Osborn, 2008). Throughout the research process, I had to wrestle with what this meant and with the manner in which the interpretation of data was happening.

Since I am the main instrument of research, all participants' accounts, words, sounds, and meanings flow through me and all that I bring to the table, including my personal and professional experience. As the author of this new knowledge, I had to own the responsibility and the power to illuminate, to empower, or to distort truths, as I was witnessing the participants make sense of their stories and all that the betrayal trauma touched, such as belief systems, emotions, and identity changes (Ropers-Huilman, 1999). From an axiological perspective, I had to acknowledge the double-edged sword of being an insider taking the stance of an outsider. My lived experiences and the lenses through which I see and interpret the world and the data generated, would determine my relationship with the data, more specifically how I heard, narrated and represented the stories of my participants. I felt the friction of juggling multiple roles and identities, that of researcher, that of a therapist, and that of an individual with her own lived experiences (Peshkin, 1988; Ropers-Huilman, 1999). The roles and identities I had to juggle made me vulnerable to biases.

For this reason, an on-going self-reflexivity assisted me in developing transparency within the relationship between all my roles; this grappling with the intersection of my roles decreased my reactivity as an interviewer and made me aware of the biases that resulted from my positionality (Berg & Lune, 2012; Josselson, 2013). Self-reflexivity encouraged a process of uncovering of the subjectivity of my identity as a therapist and a woman, and it assisted me with deconstructing my authority, allowing for a revelation of biases, and for the co-construction to happen (Peshkin, 1988; Ropers-Huilman, 1999). Thus, I considered how my insider knowledge of the participants' lived experiences influenced my interpretation of their interpretation. For

example, being a Certified Sex Addiction Therapist (CSAT) allowed me an up close and personal understanding of what the participants were saying in relation to growth post-trauma. This minimized the distance between the participants and me, making room for an active participation on my part, both characteristics of the IPA approach (Guba & Lincoln, 1994; Smith & Osborn, 2015).

Since I endorse a position that no method of inquiry renders itself free from the “lenses of language, gender, social class, race and ethnicity,” it was critical that I acknowledge and share my lived experiences and societal positioning that have crafted the lenses through which I represent this project (Denzin & Lincoln, 2018, p. 17). I am a 44-year-old White immigrant, straight, able-bodied, educated, Christian woman. I was born and raised in Eastern Europe to a family who had to face the effects of sex addiction. I have been in relationships –on a personal and professional level – with people who navigated the waters of sex addiction, either their own or their partners’. These lived experiences have shaped how I conceptualize trauma, family of origin, sex addiction, co-addiction, betrayal trauma, relational trauma and posttraumatic growth. Navigating through my own healing and growth by engaging in talk therapy, but also in experiential and somatic therapy helped me make sense of my own PTG journey. This journey into and out of the pain has taught me how to surrender to the complexity of human nature, and how to lean into the curious intricacies of the universal experience of hope after suffering.

Professionally, I have been given the opportunity to have clinical experience with treating partners and families of sex addicts. I have been practicing therapy for over ten years and had the privilege to sit with clients who could have been eligible for this study for many hundreds of hours. These hours witnessing their pain have allowed me to observe, participate and interpret the experiences of this population. I have listened to their trauma. I have wept over the depth of

their repeated experiences of sexual and relational betrayal. I have played the role of a social worker attempting to ease their financial and legal burdens. I have been concerned about their children. In conclusion, my social location, family background and professional experiences continue to shape my researcher self and how I interact with the data. For this reason, I understood the weight that this task carries and how diligent I had to be when interviewing, understanding and interpreting the data throughout this inquiry process, so that I could privilege the voices of my participants -and not my own.

I grappled with my positionality by not only considering my self-location vis-à-vis my participants and the data, but by also allowing myself to wrestle with my internal experience as I interviewed the participants (Josselson, 2013). In IPA fashion, I accomplished this through a cyclical approach to both rich reflective practice and to bracketing (Smith et. al, 2009). Bracketing originates in the phenomenology tradition, and it involves the practice of setting aside, or “shelving” one’s pre-existing biases, hunches, or theoretical assumptions for the purpose of viewing data freshly and purely with each interview (Smith et al., 2009). In qualitative methods, innocent knowledge does not exist because constructors of new realities – researchers—are only able to construct a reality characterized by subjectivity and reflexivity (Smith et al., 2009).

The qualitative researcher must be unencumbered by preconceived judgments, preexisting emotions, and personal experiences in order to be open to understanding the complexities of someone else’s experiences; this vantage point is reached through the use of epoché or bracketing (Moustakas, 1994). As an “insider,” I possess a great deal of knowledge and awareness around this topic, thus bracketing aided me in closely examining and putting aside this perspective. It also helped me consider how my “insider” perspective might impact my

research decisions and interpretation, as well as how my emotional investment in the topic might influence my meaning-making (Josselson, 2013; Yardley, 2000). Additionally, it assisted me in considering any personal powerful reactions to the interview experience itself, as well as my internal responses to both the most striking observations regarding listening to the interview and to the many readings of the transcripts (Smith et al., 2009; Yardley, 2000).

For example, with each interview and transcript reading, I monitored my readiness to give meaning to the participants statements and my tendency to give room to the hypotheses drawn from my anecdotal research as a CSAT and as a therapist, thus unknowingly corrupting both the data collected and the analysis (Smith & Nizza, 2022). To address my familiarity with the topic I imagined how I would answer the research inquiry of the current study so that I could be explicit about my perceptions and pre-conceptions around this familiar phenomenon in order to bracket them. I pursued these steps so that I could get out of the way and let the research process unfold. In IPA fashion, I wanted to allow the data generated be the result of a shared understanding that was preceded by a process of me making sense of my internal reactions while I made sense of the participant making sense of the phenomenon of PTG (Smith et al., 2009).

### **Ethical and Clinical Considerations**

Prior to collecting data, I sought full approval from the Auburn's University's Institutional Review Board to proceed in this study (see Appendix F: IRB Approval). In order for the Institutional Review Board to approve my research, the study met the United States Department of Health and Human Services (2014) criteria for IRB approval, which requires my compliance with the following conditions: minimal risk to participants, reasonable risks in relation to benefits, equitable selection of participants, informed consent is sought from person who is participating, proper documentation of informed consent, safeguards ensured for

vulnerable populations. As attached, the informed consent (Appendix D) ensured confidentiality of the participants. As described in the procedures section, I managed the data ethically and per the instructions of IRB.

No physical risk was involved in the current study, and no form of deception was used. The primary ethical concern I had, as a researcher and a therapist, was the potential emotional harm that might have occurred as the participants processed through a traumatic part of their lives. The strong effect and powerful emotional reactions that might be associated with this trauma had the potential to temporarily disrupt FPOSA's current level of functioning. To minimize this risk, I screened participants by the way of a brief phone interview, in addition to clearly informing potential participants of the possible risks, allowing them to decline participation at any point, and providing counseling referrals as needed. To further minimize the risks, I made every effort to empower the participants to freely and clearly communicate the presence of emotional distress during the interview process. Additionally, I provided participants ahead of time with resources that could help them navigate difficult to tolerate moments (see Appendix E).

At the start of the interview, I encouraged them to choose a code word they might use if and when they reached a point where they might want and need to pause and stop or pause and return at a later time (See Appendix D). Furthermore, at the beginning of the interview, I asked FPOSA about their current level of distress, and if I needed to briefly list five previously identified effective distress tolerance skills (See Appendix D). My intent was to allow participants the freedom to have a voice if signs of emotional dysregulation arose, and then to incorporate, as needed, effective coping mechanisms previously discussed with a mental health professional (such as a five-minute walk, mindfulness exercises, or distraction skills).

Furthermore, at the end of the interview, I assessed how the participant was feeling. According to the answer received, I directed the participant to their personal therapist or social support person who could offer them guidance and advice.

Some social risks were involved should there be any breach of confidentiality. If identification occurs it may potentially lead to serious harm such as social embarrassment, prejudice, or reprisal to the participant. To minimize this risk, I spoke to each participant about the possibility of their identity being recognized and how it is not always easy to predict which details in the data would lead to identification. In addition to clearly informing potential participants of the possible risks, allowing them to decline participation at any point, I made sure to never call them by their real name in the interview and to anonymize interview data as soon as I uploaded the transcripts.

## **Procedure**

### **Participants Selection**

Participants invited to participate were individuals 19 years old or older, individuals who self-identified as men or women, who could report having been in a marriage or long-term relationship with individuals who self-identified as sexually addicted. Due to the specific nature of the research problem, the study employed not only sampling methods characteristic to special groups, and but also specific criterion associated to it (Everatt, 2000). Thus, the participants were required to meet the following criterion in order to be eligible for participation:

1. Adults, 19 or older, who self-identified as men or women, former partners of sexually addicted individuals.
2. Participants had experienced the disclosure or discovery of what they perceived as out-of-control sexual behaviors of their partner, at least 24 months prior to the interview.

3. Participants could not have additional experiences of significant loss or traumatic events within 1 year prior to the period under study.

Due to the complexity and the intensity of symptoms that are often reported by partners of sex addicts directly following disclosure or discovery, I chose to create the “at least 24 months” post prompting event inclusion criteria in order to reduce the risk of increased emotional distress, such as undesired changes in thought processes and emotion including flashbacks episodes, stress, depression, grief, feelings of shame, and anger (Steffens & Reine, 2006). The passage of time is known to be correlated with decreased PTSD symptoms and with the development of meaning-making associated with PTG (Calhoun & Tedeschi, 2004; Grad & Zeligman, 2017; Laaser et al., 2017).

I chose to create the exclusion of additional significant loss or traumatic events due to the nature of PTG. Since PTG is seen both as a sequential process and as an outcome, my objective was to ensure that the process of transformation and growth reported by the participants was directly associated with the experience of being in a relationship with a sex addict, and not any other highly challenging life event (Tedeschi et al, 2018). In order to make sure that my research data was sound, the participant’s stages of growth should have been prompted, initially, by the disclosure or discovery of what they perceived as out-of-control sexual behaviors of their partner. Moreover, since research indicates that more often than not, PTSD and PTG co-exist in traumatized individuals, I wanted to ensure that the possible PTSD symptoms that might be reported were indeed a result of betrayal trauma and not something else entirely (Calhoun & Tedeschi, 2004; Laaser et al., 2017; Tedeschi et al, 2018).

I considered the one-year timeframe as an inclusion/exclusion criterion in order to reflect DSM-V’s specification criteria for the delayed specifications type of PTSD (American

Psychiatric Association, 2013). According to the DSM -V, the full diagnostic criteria for delayed PTSD might not be met until at least six months after the trauma, independent of whether or not the onset of symptoms might have occurred immediately (American Psychiatric Association, 2013). To ensure that the participants had enough distance from any other traumatic event that might have resulted in symptoms of PTSD, the one-year distance inclusion/exclusion increased the chances that the possible post-trauma growth outcome reported was occurring as a result of this unique felt experience (Tedeschi et al., 2018).

### **Participants Recruitment**

In IPA, participants are considered the experiential experts of the topic investigated, so their sampling is a crucial part of conducting a sound quality study (Smith & Nizza, 2022; Smith et. al, 2009). Additionally, participants represent a “perspective,” rather than a population; for this reason, each participant’s individual perspective on the phenomena of post-trauma growth was essential to providing rich data. Even though the focus is on what they do and feel individually, the phenomena is a common experience; thus, this called for a homogenous sample. In IPA, the objective is to identify a set of individuals for whom the post-trauma growth experience has been particularly meaningful; thus, participants need to be more similar than not. This aspect of IPA called for small sample sizes since small sizes allow for a substantial amount of comparison across cases, and thus provision of sufficient data necessary for a comprehensive analysis. To make sampling and recruitment theoretically consistent with the IPA paradigm, my sample was selected purposively, and contacted via referral or snowballing (Smith & Nizza, 2022; Smith et. al, 2009).

To remain congruent with the IPA framework, the current study used purposive criterion sampling that will be applied to individuals who self-identified as men and women who were



married or in a long-term relationship to a self-identified sex addict. My access to the sexual addiction population was a prerequisite, as the primary investigator (PI) responsible for recruitment of participants. I recruited the participants via other mental health professionals in the local area through flyers and mass emails distributed to my therapeutic community. The announcement informed potential participants of the parameters of the study, including its purpose, time requirements, risks and benefits of participation (see Appendix A). In addition, I made use of the snowballing method, and I asked the participants who agreed to participate in the study if they knew of anyone who met the study criteria and might be interested in participating. This method proved to be successful; shortly after I contacted mental health professional in the local area who specialize in treating the sexual addicts and their partners, I was contacted by twelve participants who fit the study's criteria. I interviewed all twelve participants, all women.

### **Data Collection**

Following approval from the Auburn University Institution Review Board (IRB) and identification of participants that met the established criteria through a screening and demographic survey (Appendix C), I collected the data through a semi-structured in-depth, face-to-face, interview process lasting from 60 to 90 minutes. The process of creating the semi-structured interview protocol (Appendix B) followed IPA traditions of identifying questions that provide a structure that would guide the participants' journey but would also offer the flexibility to engage with any additional pieces of the story and any experiences introduced by my participants. The questions created were grounded in Tedeschi and Calhoun's (1996) PTG theory; this conceptual framework helped me not only attribute meaning to the text and make sense of the PTG phenomenon, but it offered a schema for the observed codes and patterns. PTG

was the most fit theory to hang my inductive analysis on. I generated a total of 9 questions and subquestions to best elicit the essence of FPOSA's experiences of growth post betrayal trauma and to explore the primary research question: What transformative life changes and outcomes have occurred for FPOSA as a direct result of betrayal trauma?

I, as the primary investigator (PI) was responsible for interviewing the participants analyzing the data collected. I reviewed all the standards of the Applicable *Health Information and Portability Act* (HIPPA), and I took all the necessary steps to meet the privacy requirements. In order to abide by ethical standards, I made every effort to guard and protect the identity and privacy of the participants and the data collected. I conducted two out of the twelve interviews via Zoom videoconferencing, and the rest in person. I informed the two participants interviewed via Zoom– via the interview protocol –of the risks of Zoom interviews, even when the Zoom technology is provided by a secure network such as Auburn University.

I recorded all the interviews using audio-digital technology that was password protected and encrypted according to IRB standards, and according to the Auburn's University privacy standards. I conducted all the Zoom interviews using both the audio and the video feature but recorded only on the recording device approved by IRB. The recorder used is not capable of connecting to the Internet or the Cloud, so no auto-uploading capacity was present. Thus, I securely stored all the files recorded on the device and then transferred them manually to my personal password-protected computer. I then uploaded the participants' interviews onto the secure site of a professional third-party transcription service, where they were transcribed verbatim. Upon being notified that transcripts were ready, I downloaded them to the Auburn's secure box and then immediately deleted them from the cloud. Before the beginning of the interview, I assigned each participant a specific pseudonym with me being the only one who

knows the corresponding specific identity. The pseudonyms are associated with minimal demographic information to supply the reader with a context to better understand the data collected through interviews. To protect participants' privacy, I separated the identifying information from the transcription data. I made sure they knew that the document that links their one initial and their pseudonym would be saved on my password protected computer under a name non-related to the study. I entered all demographic and descriptive data into a database that was kept on my encrypted and password protected device, while I made sure to keep the transcriptions in Auburn's secure box system.

### **Interview Design**

The use of interview is an excellent fit for IPA, as it provides a structure and a space to explore how participants experience and understand their world. The interview becomes a transcendent space, outside of space and time, where the researcher and the interviewee interact to co-construct knowledge (Josselson, 2013). In contrast to everyday conversation, the interview has a "structure and purpose" designed by the interviewer (Kvale & Brinkmann, 2007). Thus, issues of ethics and methodology are important considerations in the design and application of the research interview.

I contacted the research participants by email within 24 hours of receiving their email showing interest in participating in the study. I followed through by giving the participant more information about the study and the study's Qualtrics' link (see Appendix C and Appendix D). I then set up a brief screening interview over the phone and scheduled a time for the interview. Keeping in mind that the research relationship begins way before the actual interview takes place, I used this first interaction over the phone to try to make the participants feel at ease with some light humor and with an expression of my deepest gratitude for their time. Both forms of

interviews (in person or via Zoom) occurred in my private office in order to provide a sense of safety and privacy, convenience and familiarity, as I expected most participants to be accustomed to a therapist's office. This private space, free from interruptions met the ethical standards of confidentiality and privacy of the American Counseling Association. In addition, to fulfill my ethical responsibilities, I monitored the effects of the interview on each participant by paying close attention to the participant's comfortability, the replies, the non-verbal behavior and the pauses she/he might take (Smith et al., 2009).

All the research questions of this study were constructed in such a way that they encouraged reflection on the full experience of the growth after betrayal trauma, including cognitive, affective, and behavioral components. The aim of each interview was to facilitate an intimate focus on each participant's experience, "trying to know the whole person in relation to the question I brought to her" (Josselson, 2013, p.35). To achieve this kind of intimacy, I made use of my therapist self; my main objective was to build a level of rapport that would facilitate participants to freely explore such a sensitive and personal topic (Finlay, 2011). The use of effective interviewing skills allowed me to investigate the "wholeness" of FPOSA in relation to growth after betrayal, and to engage in a free dialogue that facilitated the main research inquiry being redirected in response to the participant's responses (Josselson, 2013, p.35). This type of dialogue made it possible for me to remain close to the participants' experience of the here-and-now, and to launch the subquestions in such a way that it oriented them around how to engage with my research interest, without "coloring the interview" in a direction that did not fit their narratives (Josselson, 2013, p. 41).

The IPA researcher is interested in first-person subjective accounts of specific embodied experiences, which implies that interviewing is an essential skill (Nizza &Smith, 2022, p.9).

Thus, in-depth interviews– a flexible means of data collection – are the most fitting since IPA is known as a research method that is descriptive, so “concerned with how things appear” and with “letting things speak for themselves”, and interpretive because it “recognizes there is no such thing as an uninterpreted phenomenon” (Smith et al., 2009, p. 8). In using a semi-structured phenomenological interview, my aim was to attain a rigorous and significant description of this human experience as it is lived by my participants within this specific circumstance (Moustakas, 1994). In congruence with my research design, using open-ended interviews gave the interviewees freedom to talk, and helped me look for the data that cannot be directly and easily observed; my objective was to understand and capture all that I could in relation to how participants were perceiving and making sense of things which happened to them vis-à-vis the researched phenomenon (Patton, 2002).

Congruent with IPA the interview is the tool that helps the researcher collect detailed accounts from participants, who are the topic experts, as well as the means by which they extract the deepest meanings ascribed to lived experiences of a phenomenon (Smith & Nizza, 2022). For this reason, reaching the depth needed means that the interviewers immerse themselves in another person’s world, enabling the story to be told. Flexibility became paramount for me, as an IPA researcher, because the aim of the interview was to let the conversation flow naturally and effortlessly. A skilled interviewer has an awareness of the terrain of the conversation to be had and thus knows how and when to encourage each participant to go deeper, to tell the story through the process of interaction, what Josselson (2013) calls “trying to dance with a new partner” (p.64). A researcher who is not an insider, out of naivete, may find it difficult to understand the context and might miss joining in this “dance” taking place between interviewer and each individual interviewee. As an insider, my goal was to gently lead this “dance” in such a

way that I encouraged rich stories by remaining silent or offering empathetic responses, and by ensuring that I did not miss asking essential follow up questions (Josselson, 2013, p.64; Smith & Nizza, 2022).

The interview experience was a relational and emotional interchange between myself—and all the roles I was playing—and the participant (Josselson, 2013). I attended to the stories with a posture of vulnerability and openness towards the participant since I understood that the process of witnessing would influence the rapport; further on, that the rapport would shape the interactions, and the interactions would impact the data I collected (Smith & Nizza, 2022). My position remained that of an investigator, not attempting to get answers, but rather approaching the interactions with curiosity. Since each participant I interviewed was an unknown individual who needed to be approached with curiosity and presence, my default as an interviewer was one of *not understanding* (Josselson, 2013).

Since IPA is a strongly idiographic approach, it requires focus on each single interview at the time, to be reflected upon and analyzed prior to making comparisons between participants (Smith & Nizza, 2022). Because the objective is to understand “a particular experience of particular people in particular circumstances,” I conducted the initial interview first and then focused on its transcription, before conducting the others, in hopes to gain some insight into corrections I might need to make going further (Smith & Nizza, 2022, p.8). Throughout the analysis of the first interview, I engaged in reflexive journaling in order to engage with the data while committing to attend to the biases and values that might be impacting the analysis. The consistent practice of reflexivity after each interview influenced the way I conducted subsequent interviews. For example, I allowed more room for participants to tell their trauma story without any framework and guidance. Additionally, I changed the order of the subquestions and

elaborated more on terms like “behavioral changes” and “personal values,” so that the participants could flow with the story, be more at ease and feel more equipped with understanding growth concepts.

### **Data Analysis**

To remain congruent with hermeneutic phenomenological methods I conducted a thematic analysis to analyze interview data. Analysis processes included both hand-coding, and the use of NVIVO software which assisted me with inductive coding to find the essence of the lived experiences of growth after trauma. Prior to using NVIVO, I conducted two waves of hand-coding; the first wave involved coding the data of each interview shortly after it took place, creating a codebook of data encompassing experiential statements, emerging themes and codes. Congruent with the fundamental principles of IPA analysis, I analyzed the data of each participant prior to moving on to any other step. The second wave of coding involved comparing the interviews and building an additional codebook accordingly. Hand-coding analysis meant working closely with the transcript, reviewing words and pauses often, and taking reflection notes on the side of the transcript. After I organized the hand-coded data into themes, I placed the codes into NVIVO software for further organization.

In IPA, the data analysis is known to be an iterative and inductive cycle which draws upon some common strategies; these strategies, just like the researcher’s personal meaning-making process, are applied flexibly (Smith, 2007). In fact, conducting analysis in IPA requires flexible thinking and fluidity in engagement with the data (Smith et al., 2009). While these strategic steps are not fixed, they helped focus the interpretation and they guided the joint analytical product, product produced by both the participant and me, as the researcher (Smith et al., 2009). I took the following steps as I analyzed the data:

Step 1. Transcription: I began analyzing the data after the completion of the first interview and each separate interview after that. The analysis involved listening to each interview once, and then the second time while reading through the transcript generated. This happened immediately after each interview took place, so that I could represent and re-think what was said with the utmost clarity (Smith & Nizza, 2022). In congruence with the idiographic commitment and the inductive approach of the IPA, I analyzed each interview in a progression and in chronological order, in order to be as “free as possible from theoretical constraints” (Smith & Nizza, 2022, p.31). This practice allowed for a reflective engagement with each participant’s account and for a bracketing of what I know from each individual participant and of my personal assumptions that were instinctively presumed.

Step 2. Reading and Re-reading. Before I conducted the line-by-line analysis of the experiential claims and understandings of each participant, I listened and re-listened to each interview while reading and re-reading the transcription (Larkin et al., 2006; Smith & Nizza, 2022). This step allowed me to immerse myself in the data and to monitor how rapport and trust between myself and the participant was building. Making continuous adjustment to my interview style or to the phrasing or timing of the questions was imperative to collecting good data. In this phase of analysis, I also began the practice of bracketing by recording the most powerful initial reactions and striking observations I experienced while listening to the interview for the first time. My aim was to focus only on the data while silencing the possible distractions and biases by setting these reactions to the side after recording them (Smith & Nizza, 2022).

Step 3: Exploratory Noting. As I reviewed the transcriptions over and over with the purpose of familiarizing myself with the data, I recorded both my initial reactions to the text and the more in-depth exploratory notes characteristic to IPA studies (Smith et al., 2009). To



accomplish this goal, I allowed for large margins on the transcript and enough line spacing for self-reflexivity and later coding. The IPA tradition differentiates between three types of notes: descriptive, linguistic and conceptual (Smith & Nizza, 2022). Descriptive notes summarize the findings at face value and offer an explicit meaning to what was said in terms of events, processes, emotional responses, principles and facts. Linguistic notes consider the language used and how it was used, such as the use of verb tenses, adjectives, pronouns. They help inform the interpretation as they slow down the process of analysis, giving the researcher an opportunity to hear laughter, tone of voice, repetition, or hesitation (Smith & Nizza, 2022; Pietkiewicz & Smith, 2014). The linguistic analysis is what facilitates the understanding of the affective and cognitive state of the interviewee. Lastly, conceptual notes broaden the understanding of what is being said overall, aiding in the formulation of tentative ideas and potential meanings developing around the phenomenon studied (Smith & Nizza, 2022). As a first step to an interpretive stance and to coding, conceptual notes necessitate cyclical reflection followed by an integration of the tentative emerging ideas. For me this kind of reflection involved a curious reading, and then questions that facilitated a deeper analysis which further made room for interpretation. Capturing the emerging themes followed by the process of integration is how I kept track of the development of codes, descriptions and interpretations (Creswell & Poth, 2017; Smith & Nizza, 2022).

Step 4. Formulating Experiential Statements. As I became familiar with the data, following the transcript line by line and making use of descriptive notes, I identified a handful of experiential statements to represent what I have learned about the meaning of each participant's experience of growth after trauma. These statements were a brief summary of what emerged at first sight, but also a depiction of the "psychological substance" of the text (Smith & Nizza,

2022, p. 39). IPA analysis requires that these statements are rich and dense, descriptive of the psychological experiences taking place and of the context surrounding these processes (Smith & Nizza, 2022).

Step 5. Developing Emergent Themes. This task involves exploring ways to map the connections and patterns within and between both the exploratory notes and the formulated experiential statements (Smith & Nizza, 2022; Smith et al., 2021). Looking for connections and clusters of experiential statements is how I managed and engaged with the data, more specifically with the emergent themes. In phenomenology, themes are understood as “structures of experience”; they do not reduce experience into a categorical framework, but instead they give voice to something significant in the participants’ lifeworld (van Manen, 1997, p. 79). The process of identifying themes by clustering concepts together and re-organizing the narrative reflects the IPA’s hermeneutic circle, in that data analysis rests on the reflection of essential themes and the iterative process of “considering parts and whole” (van Manen, 1990, p. 31). In other words, the entirety of each interview’s data is re-arranged in portions of the transcript, and then these parts are all linked together as a whole, in a new way, which then is broken down once more as soon the data collected from all the interviews is organized (Smith & Nizza, 2022). The question here for me was: “What should go with that?”, as in what other part, statement, hesitation, or psychological experience should fall in the same cluster? (Smith & Nizza, 2022, p. 43). I entered the data manually in Word tables in order to track the multiple clusters and themes and to progressively synthesize, reduce and classify the data. As a result, I developed a document with a final list of themes, their descriptions and their respective quotes (document securely saved in Auburn’s Box system and containing no identifying information) (Smith & Nizza, 2022; van Manen, 1990).

Step 6. Finding Connections Across Emerging Themes. This last task involved exploring how the themes fit together and what these findings meant (Smith et al., 2021). As the analyst, my task was not only to pay attention to the frequency of each theme, but to also look for how a set of meanings was reflected across all twelve interviews (Smith & Nizza, 2022). My role as the researcher in this endeavor was crucial; I had to gradually bring all the compiled patterns and connections together, like a “design-in -the making” (Freeman, 2017, p. Preface; Smith et al., 2009). This process of “design-in-the-making” required an embracing of “re-visioning” and “re-thinking” (Freeman, 2017, p. Preface). I had to find my own way and rhythm in this process of organizing and interpreting the data, which was not an easy task.

### **Measures**

In addition to semi-structured, in -depth interviews, the measures used in this study included field notes detailing behavioral and interpersonal observations during the interview (such as tone of voice, body language, eye contact, affect and facial expressions), my personal reflective journaling that took place after each interview, and the demographic questionnaire administered via Qualtrics upon signing the consent forms (see Appendix B). The notes taken during the interview did not include any identifying information. I saved the documents containing observations and reflexive journaling, as well as the transcriptions pertaining to the study, in Auburn’s secure box system. I will maintain and safely keep the confidential data for three years and guard it as outlined in the American Psychological Association Record Keeping Guidelines. I will destroy the consent forms and coding documents by shredding the hard copies and deleting the Word files following the study and the completion of its purposes.

***Demographic Questionnaire.*** I directed potential participants through a Qualtrics link to complete of a brief screening questionnaire to determine whether or not they would meet the

requirements to participate in the study (Appendix B). The questionnaire gathered information about the participants' gender, age, ethnicity, education, length of marriage, and time passed since their divorce. It also included questions regarding demographic information and data pertaining to the criteria that would make them eligible for participation. Through the same link, I asked those who completed the questionnaire to sign the Informed Consent, ensuring that participants had the option to print the informed consent document if they chose to do so.

### **Data Trustworthiness**

Establishing trustworthiness involves the researcher “demonstrating that the claims made are warranted and have produced findings with methodological integrity” (Levitt et al., 2018, p.36). For this reason, increasing the rigor of a study by assessing its quality and its validity is a crucial part of the qualitative research process (Tracy, 2010). For this study, trustworthiness was built by addressing the following, as noted by Lincoln and Guba (1985) “1. Credibility: confidence in the “truth” of the findings, 2. Dependability: showing that the findings could be repeated and are “internally coherent” (p. 318), 3. Transferability: showing that the findings could pertain to other contexts, 4. Confirmability: “a degree of neutrality or the extent to which the respondents shape the study's findings and not researcher bias, motivation, or interest” (p.121). Within my study, I used reflexivity, bracketing, memoing, member checking, triangulation, rich thick descriptions, and audit trail to establish value and enhance the trustworthiness of my study.

***Credibility.*** Credibility is more concerned with building the soundness of the research findings than with arriving at a certain truth (Lincoln & Guba, 1985). Within the IPA tradition, credibility and dependability are enhanced when the researcher practices transparency and coherence (Yardley, 2000). In order to build soundness and increase the “truth value” of the

study I engaged in the following practices: member checking, prolonged engagement, persistent observation, memoing and self-reflexivity (Lincoln & Guba, 1985, p.296; Yardley, 2000). Thus, upon completing the data coding and analysis, the themes, statements, structures, and my understanding of the phenomenon I offered to participants the opportunity for a final member-check to understand if the lived experiences of participants were accurately reflected in the themes and universal structures identified by the research (Creswell, 2014).

I practiced prolonged engagement by being continually involved professionally with the community of FPOSA, enabling me to spend enough time in the field in order to understand the social framework, the culture, and the phenomenon being researched (Cohen & Crabtree, 2006). My professional involvement not only bettered my trust building skills, but also enabled me to monitor and test “misinformation introduced by distortions either of the self or of the respondents” (Lincoln & Guba, 1985, p. 300). Because of my knowledge as a CSAT who is working within a world where sexual betrayal and hope often intersect, I was able to establish safety and familiarity quickly in the interview space. Using context-specific language, as well as responding to references to their FPOSA community, early on in the process, gave me the opportunity to move out of an “outsider” stance and develop trust with the participants. Along with prolonged engagement, persistent observation enabled me to “identify those characteristics and elements in the situation that are most relevant to the problem or issue being pursued and focusing on them in detail” (Lincoln & Guba, 1985, p. 304). My practice of being with current and former partners of sex addicts allowed for the testing of salience that relevant themes may be observed in sufficient detail. In other words, prolonged engagement promoted scope while persistent observation cultivated depth, thus strengthening credibility (Lincoln & Guba, 1985).

***Dependability.*** A sound qualitative study demonstrates dependability when it seeks to maintain the purity of the data and inspires sincerity through techniques that enhance transparency (Creswell & Miller, 2000; Yardley, 2000). To enhance the transparency and the coherence of the current study I employed a rigorous self-reflexivity practice and audit trailing. A dedicated self-reflexivity practice allowed for an examining of myself as an observer and interpreter of the participants' stories and their interpretations, as well as for a witnessing of how the intersection of all my roles and identities could impact the data analysis. The intent was that this practice would provide a more comprehensive context of my point of view, and thus increase both the dependability and the credibility of the description of the phenomenon of PTG (Creswell & Miller, 2000; Josselson, 2013; Yardley, 2000). The audit trail allowed me to “examine the process of the inquiry” and “the product—the data, findings, interpretations, and recommendations—and attests that it is supported by data and is internally coherent” (Lincoln & Guba, p.318).

In IPA, transparency refers to how clearly the stages of research process are described (Yardley, 2000). Coherence refers to how the research process aligns with the IPA's underlying theoretical assumptions. In this study, I demonstrated transparency by carefully describing each piece of each phase of the research process, such as: how I selected the participants, how I conducted the interview, and how I conducted the analysis, step-by-step (Smith et al., 2009). I demonstrate coherence by making sure that I clearly present a sound argument throughout the process of research. I aimed to answer questions such as: do the emerging themes and patterns hang together logically?, are there any contradictions in the data?, are my interpretations of the way FPOSA made meaning of the unfolding of PTG reflected in their psychological

experiences?, and did I did I analyze contradictions or ambiguities effectively and consistently?  
(Smith et al., 2009; Yardley, 2000)

*Reflexivity Practices.* Ascribing to IPA analysis methods, exploratory notes –as a form of memoing–aided me in demonstrating sensitivity to context and facilitated my ability to look closer into these questions and grapple with levels of interpretation (Yardley, 2000). Through the lens of the constructivist paradigm, I made use of memoing as a search for disconfirming evidence, as a way to jump-start and improve self-reflexivity, and increase both dependability and credibility (Creswell & Miller, 2000; Tracy, 2010; van Mannen, 1988). Memoing is the process of writing notes in the margins of a transcript when trying to make sense of the interview and its context as a whole; it is also a method of engaging in thick, rich description (Creswell & Miller, 2000; Tracy, 2010). For me, memoing looked like very brief jotting downs of bits and pieces of emotional responses, question marks, and personal reflective thoughts, throughout the process of interviewing and analysis; it served as a place for speculation of budding insights. Memoing enabled me to not miss “the gentle witnessing of what was constructed”, the coming together of each unique participant’s data that came with her own meanings and interpretations of growth after trauma and my own experience with immersing in the emerging data (Ropers-Huilman, 1999, p. 41).

As an extension of memoing, and central to the propositions of hermeneutic phenomenology guiding this study, self-reflexivity enabled me to attend to the context of knowledge construction. The process of reflexivity affects all four areas of trustworthiness and is essential in exploring the ways the inquirer’s biases influence the process and outcomes of the study (Lincoln & Guba, 1985). My commitment to the process of self-reflexivity—a dedicated journaling of my personal innerworkings— gave me the opportunity to consider the roles I played

throughout the research process, as well as the ways in which my personal, cultural and political context and my intellectual involvement affected the interaction with the phenomenon researched.

Keeping a reflexive journal throughout the research process afforded me the opportunity to cultivate the practice of bracketing myself out of the study which in turn increased the dependability and validity of the study (Fischer, 2014). For example, I began my study by bracketing of personal assumptions that are instinctively presumed. In other words, by bracketing my experience as a woman with a felt experience of betrayal exploring growth after betrayal trauma, I attempted to separate my own experiences from that of my participants; or, during data analysis, the bracketing through self-reflection set me up to ask myself how new insight had changed prior understanding of the data and my findings (Fischer, 2014).

***Transferability.*** The extent to which research results can be transferred or generalized in other settings is referred to as transferability (Lincoln & Guba, 1985). I used methods such as purposeful sampling and data saturation to promote transferability, both of which are known to ensure transferability (Lincoln & Guba, 1985). Data saturation occurs when “no new information or themes are observed in the data”; I achieved data saturation by reading and rereading interview transcripts until I extracted all novel information and themes. Additionally, another technique used to establish transferability was thick description. In order to do this, I prioritized rich, thick description in my presentation of the findings so that the “voices, feelings, actions, and meanings of individuals are heard” (Denzin, 1989, p. 83). According to phenomenological guidelines, it is my researcher responsibility to reconcile what are irrelevant versus relevant descriptors; while findings must pertain to the specific ecological context of the interviewees, if the analysis is sound, readers will be in a position to make transferability judgements.



***Conformability.*** A key method proposed by Lincoln and Guba to establish confirmability is auditing since “a single audit, properly managed, can be used to determine dependability and confirmability simultaneously” (Lincoln & Guba, 1985, p.318). For the sake of practicing sincerity and transparency I kept track of as much detail as possible regarding each phase of conducting the study (Tracy, 2010; Yardley, 2000).

## CHAPTER III: Findings

The purpose of this qualitative inquiry was to explore the experience of trauma transformation that emerged in the aftermath of betrayal trauma and marriage loss for twelve former partners of sex addicts. Through the lens of Tedeschi and Calhoun's (1996) Posttraumatic Growth Model, I collected and analyzed the data to determine how FPOSA described their journey towards personal growth as it relates to the five domains of PTG: seeing new possibilities, changed relationships, the paradoxical view of being both stronger yet more vulnerable, a greater appreciation for life, and changes in the spiritual and existential domains (Calhoun & Tedeschi, 1999).

### Participants Profiles

During this research, twelve FPOSA completed interviews. All twelve participants self-identified as women. At the time of the interview, eleven of them resided in the southeastern region of the United States and one resided in the western region of the United States (see Table 1 in Discussion Chapter). I did not explore information regarding religious affiliation in the demographic questionnaire; however, through observation I deduced that at least ten of the participants were self-professed evangelical Christians; the other two had a strong belief in a Higher Power but did not offer details on the topic. The following profiles provide only an introduction to the women who participated in this study. In order to protect the identity of the participants I made changes pertinent to participants' names. Table 1 (*Participant Demographics*) is included with further information on each participant.

**Elizabeth** was in a marriage to a sex addict for 14 years. It has been nearly six years since the divorce, not counting the years of separation. She discovered his addiction by chance.

She remains in contact with her former spouse who is still in active addiction due to their co-parenting responsibilities for their children. During the interview, Elizabeth felt like a survivor who was so happy to finally be free.

**Esther's** marriage lasted 16 years, so at time of the interview she had been divorced for almost eight years and separated for 18 months prior to signing the papers. She found out via discovery about his emotional affairs, and later his subscription to Ashley Madison, an online website for affairs. During the interview, Esther presented as steady, wise, and peaceful.

**Deborah** was married to a sex addict for 24 years. They divorced four years prior to the interview. She found out about his sex addiction through partial disclosure. During the interview, Deborah seemed youthful, powerful, a “badass” who wanted to emphasize ways the evangelical church has enabled sex addicts.

**Hannah** was married to a sex addict for only eight months. He left her suddenly, and they divorced almost seven years ago. She found out via discovery after the abandonment. During the interview, she appeared resilient, yet her fragility came through with the details.

**Mary's** marriage lasted for close to 20 years; she was separated for four years via protection order. At the time of the interview, she had been divorced for 11 years. She endured physical, emotional and spiritual abuse in addition to his pornography addiction; he admitted to its severity and escalation only after the divorce. During the interview, she came across as warm, passionate, prepared and detailed.

**Magda** was married to a sex addict for 19 years, the last six only due to her children. She had been divorced for more than five years prior to this interview. After her discovery of his online affairs, he unwillingly disclosed his sex addiction. His addiction was coupled with

narcissistic behaviors and lying. She presented as kindhearted yet burdened by the effects of her past marriage.

**Martha's** marriage came to an end after 33 years. Her husband disclosed one of his online affairs to her leaving her speechless. She came across during the interview as witty, funny, simultaneously shocked and accepting, yet surprised by her rapid life transformation.

**Miriam** was married to a sex addict for 16 years with the separation lasting for almost five years due to custody battles. She learned of his porn addiction via discovery, and due to the narcissistic emotional abuse, she felt she had to endure it for longer than she had wanted. She presented as confident, eager to share what she had learned, and hopeful.

**Rachel's** marriage lasted for 17 years before she discovered her ex-husband's most current sexual affair which led to a long and painful process of drip disclosures. She was separated for four years prior to the divorce. She presented as resourceful and confident, warmhearted and vulnerable about the emotionally abusive and chaotic marriage she endured.

**Rebekah's** marriage to a porn addict neared seven years. At the time of the interview, she had been divorced for eight years. Her ex-husband disclosed his addiction, yet the psychological abuse and violence were clear giveaway signs. She presented as relentless, a fighter, educated on sex addiction, and empowered.

**Ruth** was married to a sex addict diagnosed with narcissistic personality disorder for 25 years. She had been divorced, at the time of the interview, for almost six years. Her ex-spouse's addiction was confirmed to her by Ashley Madison website scandal, even though prior to this discovery she and, at times, her children experienced every kind of abuse. She presents as self-aware, steady, humorous, and full of depth.

**Sarah**'s marriage came to an end after 15 years. At the time of the interview, she had been divorced for four and a half years and separated for three years prior. She had a full life juggling jobs, kids and carpoos. Her ex-husband disclosed seeking sex from prostitutes and attempted recovery, but the "addiction won." During the interview, she appeared poised, holding on to herself amid stripping away layers of grief.

**Table 1:** *Participants Demographics*

<b>Pseudonym</b>	<b>Age Range</b>	<b>Length of marriage</b>	<b>Years since divorce</b>	<b>Education Level</b>	<b>Engagement in therapy</b>
Deborah	50-60	24 years	4 ½ years	Graduate	Individual & Marriage
Esther	40-50	16 years	7 years	Graduate	Individual & Marriage
Elizabeth	40-50	17 years	5 ½ years	Undergraduate	Marriage
Hannah	30-40	6 months	6 ½ years	Graduate	N/A
Mary	50-60	20 years	11 years	Undergraduate	Individual/ Marriage
Magda	50-50	19 years	5 ¼ years	Undergraduate	Brief Marriage
Martha	60-70	33 years	6 months	Undergraduate	Individual & Marriage
Miriam	50-60	23 years	8 years	Graduate	Individual & Marriage
Rachel	40-50	17 years	3 ½ years	Undergraduate	Individual & Marriage
Rebekah	30-40	6 years	6 years	Graduate	Marriage Individual/unknown
Ruth	50-60	25 years	5 ½ years	Undergraduate	Individual & Marriage
Sarah	40-50	15 years	4 ½ years	Undergraduate	Individual & Marriage

The following research questions and subquestions guided the qualitative exploration of this phenomenon:

SQ 1: What transformative life changes and outcomes have occurred as a result of this traumatic event?

- *What were the **changes in personal values** as a result of this experience for you?*
- *What were the **changes in your identity** as a result of this experience for you?*
- *What were the **changes in worldview** as a result of this experience?*
- *What were the **changes in your relating to others**?*
- *What were the **behavioral changes** as a result of this experience for you?*
- *What were the **changes in direction of life choices** as a result of this experience?*

SQ 2: What insight, if any, did you gain going through this experience?

SQ 3: How did you make sense of the suffering caused by the relational trauma that resulted from being in a marriage/partnership with a sexually addicted individual?

The 60-90 minute semi-structured interviews allowed for probing and provided thick descriptions from the participants and of the participants' lived experiences. This approach allowed me to adjust the course of questioning as needed (Saldana & Omasta, 2018). Memoing assisted with the inductive coding to find the essence of the lived experiences through the data amongst the participants. I hand-coded and organized the data into themes and clusters of themes. In phenomenology, themes can be understood as structures of experience, not as attempts to reduce experiences into categorical frameworks (van Manen, 1997, p. 79). Thus, the themes below say something significant about the lifeworld of the participants, and they are simply means to find meaning and make sense of posttraumatic growth (van Manen, 1997). In addition, to note, while I used rigorous reflexive processes to support the centering of the

participants perception, inevitably, the themes shared in this study were also informed by my subjective experience and personal anecdotal research.

## **Themes**

The themes that emerged represent various “essences” of the lived experiences of twelve white women who were married to sex addicts, experienced betrayal trauma and who reported positive adaptations across the following areas of life: sense of self, parenting, relationships, spiritual and existential, career and new life trajectories, and a shift in worldview. Each theme is represented by my own narrative description of the theme and its respective subthemes. Additionally, I incorporate supporting quotes of participants for each theme and subtheme. The quotes are connected to fictional names.

I organized the thematic analysis into six themes and fifteen subthemes shared across the participants as follows: (1) changed perception of sense of self, 1.a. waking up to one’s self and/or recreating/recovering the self, 1.b. I am enough, 1.c. I am not a victim; (2) learning to listen and honor one’s body’s signals; (3) new-found personal strength that allowed for facing fears and taking charge of one’s life, 3.a. engaging in therapy, 3.b. “going to the mattresses,” 3.c. new vocational paths; (4) journeying from spiritual bypassing to authentic spirituality; 4.a. wrestling with their God; 4b. union with God; (5) changes in relating to others, 5.a. family of origin, 5.b. boundaries, 5.c. authenticity and vulnerability, 5.d.increased empathy towards others (even towards the addict); (6) existential wrestling that led to shifts in worldview, 6.a.meaning making, 6.b. redesigning motherhood, 6.c. changes in outlook.

### **1. Changed Perception of Self**

In the aftermath of surviving betrayal trauma, the participants reported a change in the way they perceived themselves and in the way they viewed their identities. According to the

findings of this study, wrestling with the after-effects of the trauma altered the course of FPOSA's identity development and even destabilized existing identity commitments. Living in a marriage plagued by sex addiction meant juggling feelings of shame, insecurity and worthlessness, as well as having to navigate constant violation of emotional and sexual boundaries. "Being who the addict needs me to be" became central to the participants' identities, thus FPOSA experienced a choking of their sense of self, a suspended in time feeling regarding their process of identity development. Only after parting ways with their sexually addicted spouse were FPOSA able to change their self-perception. For example, Rachel smiled as she explained:

I have watched my personality unfold for the last three years. Every year, it's better. I wasn't me in that marriage. And so of course I was stressed out, of course I was tense all the time 'cause I was always trying to figure out who to be, how to be. I no longer need your affirmation about who I am. I no longer need your approval to be who I am. I know who I am. I know who I am for the first time, and I know that it's good. I'm simple. I'm human, but you know, like, but I'm not... There's no shade in who I am. The freedom, that there is freedom and being true to who you are. And people... I know where I was going before, people will love me or they will hate me now or anything in between, but they'll do it based on the real me and not the fake perception that I put out there that they might accept or reject. If they reject me now, it's the real me that they didn't like. And I can live with that a lot more because at least I'm not lying to myself now. <sup>1</sup>

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<sup>1</sup> Note: ellipses indicate pauses in the participants' response



When asked how she would explain the way she sees the shifts in her identity, Esther did not hesitate to clarify:

So, two things come to mind. Just building a self. Before I had just relied on others, and so with this I had to rely on myself which fortified me. I like to laugh and say that my ex-husband introduced me to the real Esther. [laughter]

Then, ...just kind of an awakening really to my senses. "Oh, I want this, life has all this to offer. I don't have to do this anymore." I can... Kind of like the world is my oyster, I can create something new now, that I've learned what I didn't know.

Ruth, echoed all the other eleven participants, when probed about ways she perceived her identity shift:

Other identity things? So, I think finding your self-worth again, really, really finding that again and being able to stand strong and find confidence, coming out of that...Because I didn't have to live with a sex addict any longer, I immediately was... cut off. And so then learning to stand on my own and be independent and try to grow personally and develop strength and be independent. I think it's all part of that as you grow. But not being associated with his addiction...(..). That is his choice that... It's not a world I understand or live in, and that is his choice. It's not my identity.

Adapting to new life circumstances and severing their co-dependency with the addict opened up the path towards self-love, more specifically towards getting in touch with oneself and gaining personal insight into how they valued, think, and feel about themselves. Rachel took time to describe the pivotal moment when she “saw herself in a new way and loved herself.” Miriam pointed out that the journey towards self-love had to start with “giving myself

permission ...to be selfish” so that “I can take care of myself and forgive myself for the things that I did that were wrong for me.” Mary’s transformation of betrayal began when she realized she had value, at least in God’s eyes: “So now I take better care of myself and I realize, I know that. I have value to God and I have value as a human being.”

This type of identity work had to be done on FPOSA’s own terms, “from the inside” and by being by themselves. This acknowledgement for the need to tear down the identity they had to adopt inside the marriage was common to all participants; as it was the need to discover or uncover the self, *all by oneself*. No one else could answer the questions they were juggling: Who am I?, Do I matter?, Am I worthless? Esther stated:

Definitely before, I think it was identity in what I did, whereas now it's just who I am. So outward versus the inside. Realizing that someone else doesn't give me an identity, that my identity comes from within. So nothing outside of me, no one outside of me can give me an identity, it's something that I have to bring to the table and it's something that I do bring to the table. I think too just becoming who I wanted to become versus what I thought other people wanted me to be, what I should be or what they wanted me to be.

Hannah spoke about what changed for her throughout her journey:

Like I said, I'm comfortable, more comfortable in my own skin. I'm more comfortable being content, being by myself. And I will say like, just getting my first house and making a goal to have a life for myself instead of waiting, I was always waiting for somebody to make a life for me or make a life with me. And I just was like, well, I gotta do it by myself, you know?

On another note, participants discussed at length how having to cope with suffering and then adaptation –while recovering a self–resulted in an increase in empathy towards self and others. In the aftermath of victimization participants had to grapple with human fragility and with complexities of suffering. They recognized that the suffering gave birth to an existential self-re-evaluation. As they were discussing this particular positive transformation FPOSA exhibited feelings of worthiness, warmth and self-respect. Esther described herself as “much more empathetic” because “she knows now what it feels like to be shattered and to have to pick your own self back up”. Sarah remembered herself then and now:

I would be more judgmental and that kind of thing ...about all sorts of things. But now I'm like, you do what you gotta do. I don't even know. Grace to you because I understand it's hard, life is hard.

Moreover, like Magda, all participants described themselves as more “compassionate”, “brave”, “real” and “kindhearted”:

So now if I see somebody in trouble, I reach out. If I know somebody that's going through a divorce that I've just heard, because no one really reached out, they don't want to hear it. And I lost a lot of friends that way, too. They did not wanna hear it. I'm not covering up. I'm not fake anymore. This is me.

**1.a. Waking up to oneself and/or recreating/recovering the self.** The first subtheme described both the participants’ experience with recognizing the loss of their sense of self and the outcome of participants’ processes through recreating their identities. It is clear in this theme that the women experienced a perceived loss of their core self and underwent a subsequent process of rediscovering or recreating themselves. Most participants described a process of waking up to a new self or to the person that they used to be prior to being married to the sex addict. In fact, this

was one of the most mentioned topics in the entire analysis. Women seemed to feel that they had sacrificed or sublimated who they were in order to please their husbands, or, at times, even to stay safe. Ultimately, this led to the experience of a lost self, which became apparent to them post separation. Participants attribute this waking up, or, the remembering the old self to the individual struggle with the new reality of the aftermath of relational betrayal. As they recount their stories of abuse and crazymaking, as well as the factors that contributed to their growth, they sounded similar to Deborah's:

(...) I would travel to see a counselor. He was saying, "You need to go to Al-Anon." So, I did, and one of the ladies there said to me, she said, "Sleeping beauty's woken up." And that's what I felt, like I had been asleep and I didn't know what I didn't know. But this is the idea of you wake up...

In Sarah's case, part of waking up looked like the reclaiming of one's sense of self, including feelings, preferences, thoughts and desires:

So, I think that how I've grown at least one way is it took a long time for me to wake up to the fact that I had feelings in there. I think they were squashed so low that I didn't even... (..) but being able to articulate or even things simple things like likes and dislikes, like I wasn't allowed, I'm using air quotes, I wasn't allowed to have dislikes or opinions (...). So I think being able to discern how I'm feeling, my opinions and being able to share those with other people, I think that's a huge area of growth. I think I didn't really realize what kind of confidence I lacked ... I have become so much more able to speak my own thoughts, to feel my own feelings, to articulate those, and to not feel afraid to share those with the people who are now in my life. I think when I was married to (pause)it was a constant

dance of walking on eggshells and living in fear of, was I gonna say something that was gonna set him off?

Other participants had the same experience as Magda, who alluded to a total disconnection from her core identity, her voice. She began expounding on her hard-won inner strength by “dreaming” about the future:

I've got a bucket list of things we're gonna do and we're gonna do these adventures. So that is a big thing. And I don't want mad now. I just wanna keep it calm. And so I have to just remember that if somebody's trying to run over me, I'm not gonna let it happen again. Stand up for myself and ask the hard questions, give my opinion whether I think people want it or not. I mean. I have a voice. And I definitely was missing my voice, back then. I didn't really know who I was.

Just like Magda, most participants took time during their interviews to expound upon the person they used to be prior to marrying the addict, wrestling with the how's and why's of losing themselves. Elizabeth made a point to explain who she used to be while ruminating on what was stolen from her:

Before I got married, I was pretty self-sufficient and I bought my own house, so I lived by myself and I don't feel like I was like that during my marriage. But I definitely feel self-sufficient now and don't need him or anyone, if I don't want it. But as far as even though I was and am an extrovert (...) 'Cause I always hung out with my friends before. I loved my people and I definitely have to have that now. I could not have that in my marriage. When I was married, I was always worried about well, he wants me home...I need to get home.. now am so okay to be alone. In my marriage, used to I would never would want to be alone. That doesn't faze

me and I love it. I'm okay with being by myself. I'm okay. I'm totally okay with it.  
And I'm good with me.

With much confidence in her voice, Ruth added further details to her initial answer, to ensure that her transformation was well understood by me:

But I would say one of those biggest parts of growth is coming back to who I was and my personality, and not being afraid to speak my mind or say, have my opinion and not be judged for it, or to make a decision and not second guess myself, or to be worried about who I had to please.

In an attempt to make sense of how much was lost some FPOSA even reminisced about the child they used to be, as if their inner child might have been the one part of themselves who had answers. For example, with a tearful smile, Rachel spoke about how fearless and playful she was as a little girl; but also about how detrimental it had been to not pay attention to the pain, to follow the mantra “you fall off, you get right back on, because pain and hurt...are fine...you let it go”. Mary remembered being “very naïve, innocent and very trusting”. Martha, who described herself as “being alive again”, stated:

I remember even when I was married saying things like, Where did Martha go? Who was I, Where is she? I think she's back. I think she was just squished for a little while because she was married, I probably put him first..You had the kids to deal with early on in the marriage and just all kinds of things, and I can remember sometimes getting agitated and like, well, my whole life is around you, and I realized it was. And I kind of lost who I was in that process. So I realized, "Oh, she's still there, we just smothered her for a little while and she's back out." So, which is a good thing how you... I don't know how I got so caught up in... I don't

know why it happens. I would say that weekend (at the lake with a bunch of women supporting her) changed my life because I found that Martha that used to be a girl that enjoyed time with women and girls and just being silly girls and playing games and shopping and going out to eat and hiking.

**1.b. I Am Enough.** The feeling of “I am enough now” was a prevalent subtheme. Data showed that after the shattering of their self-worth, participants were able to rebuild their self-identity and believe they were enough. These findings echo Lynn Wildmon-White & Young’s (2002) study that showed that partners of sex addicts shared four core beliefs in common: (a) that they were not a worthwhile person, (b) that no one would love them for themselves, (c) that they could not control others’ behavior, and (d) that sexual intimacy was not the priority. In their marriages, the feeling of “I am (never) enough” coupled with shame led to a need to control and a desire to strive for perfection— either physically or in their respective roles—as an attempt to feel good enough. Ruth sped up her talking as she continued her story of abuse:

No matter how hard I worked at the gym or what I ate or did, it was never good enough. I never looked good enough. It was never right. And so I think in that sense, I have definitely backed off of some of that and learned to not feel that way at all now. I don't want it to sound selfish either, but I've gotten to where I live life more of, okay, what do I have to do today? Or what do I choose to do today? Or what do I want to do today? As opposed to feeling like I'm a little rat on that roller in the cage running, and no matter what you do it's never good enough...living with an addict too.. it was...no matter what you did, it was never good enough.

The constant striving for perfection had been a way to survive the marriage dynamics. Living inside marriages that exacerbated the idea that the world was no longer in their control

one of the only ways participants survived their trauma-filled lives was by attempting to “to keep everything perfect,” and “hold it all together”. Moreover, FPOSA spent years allowing the addict to undermine their sense of reality which resulted in increasing self-doubt. The self-doubt further fueled their striving for perfection, which in turn produced a life writhed with stress, self-loathing and exhaustion. Rachel displayed deep vulnerability as tears were rolling on her cheeks; she expounded upon her transformation, not fully recognizing how skilled she had become in coping with betrayal trauma:

I look back now and my regular stress tension that I brought into my family was seven, eight every day. That was my normal person, was a seven, eight. I didn't see it at that time. I now live at a two, three... I was holding things to... Just not laughing, not joking around and being easy to live with and fun-loving and easygoing, needing controlling and needing perfection from everyone all the time, and being probably anxious. I didn't know that's what it was, but stressed out all the time if there wasn't that, if we couldn't get a nine out of 10 that day. And so, I start learning to let go. And as my attention level was coming down, because I'm no longer in that marriage where I have to hold it all together, I hold myself together a little bit, but I'm able to see so many more things. I start learning not to control.

Sarah calmly explained:

It's also just like I can't keep everything perfect anymore, and it's okay. And part of that's just part of me thinks that's a good thing and a positive thing, part of me is like, it's a coping thing. You know what I mean?

Looking straight at me, Deborah added more details to her own story by stating vehemently:



I was living thinking I had to do everything perfect. Or be perfect in order to be loved. To embrace that imperfection and embrace that messiness. 'Cause I was always able to love others if they weren't perfect. But I have a standard for myself...to be perfect. To be perfect was to always be safe.

FPOSA did not hesitate to discuss the difference between their pre- and post-trauma selves. Some saw themselves as “control freaks” prior to living through the shock of betrayal. As they experienced complete psychological unpreparedness, the feeling of “I never thought it could happen to me” made room for the reality that they were never in control to set in. Only six months after her divorce, Martha laughed out loud as she stated:

I've always been a real control freak. Real control freak. Pretty much so thought I could take something and make it and control it. And I've learned, I've never been in control [laughter], first of all. And it made me desire to reach out for God's help. And I still try to tell him what to do. I do still try to make that control, but then I also work at, okay, I've gotta turn it over to you and use you as my armor, so that I can move forward and live a good life with a good soul.

All twelve participants reported that following the termination of their marriage they experienced a decrease in the need to be in control and a drastic increase in perceived locus of control over their own lives. This process made room for positive adaptations in the area of needing perfection and usurping control over situations and other people. The further away they were from their former spouse, the less influence the need to be perfect had on their identity, and the more “enough” they felt. Being vulnerable about her struggle with shame, Esther displayed deep self-awareness and refreshing self-love as she tried to put into words her journey towards a new Esther:

So just, when you have the big D on your chest, it's just like, "Oh, well, I can let go of that and I can do whatever I want now." The performance wheel, all of that is off the window. I can't get an identity from being perfect anymore. So I'm not... Which is freeing. Just very freeing.

Because they finally felt free to be themselves, the pressure to perform was off and self-love began to manifest effortlessly. Rachel proudly discussed her personal growth regarding self-compassion and self-respect:

That's probably part of the reason that the tensions has come down because I don't have to pretend anymore. I don't have to be perfect. I don't have to pretend. I don't have... I can start to be who I am and just... And loving myself to the point that I'm like, I don't care if you love me, I'm not for everybody.

**1.c. I am not a victim.** Ten out of twelve participants made a point to discuss in length their transformation from seeing themselves as victims to ultimately seeing themselves as “thriving,” fully individuated powerful women who also happened to be trauma survivors. In this process, they exchanged a victim identity for a status of extraordinary survivors. When faced with victimization FPOSA refused to be labeled as victims or to let the past control their present or future. Instead, they actively engaged in different ways in an attempt to rise above the trauma of betrayal and to slowly gain an empowered view of themselves. This is how Ruth expounded upon this part of her journey:

I mean, I was a victim of living with a sex addict, and an abuser, a narcissist. He stole from me. I was victimized in so many ways, but yet I don't like being a victim. It happened, but I didn't wanna spend the rest of my life being a victim. I didn't want my children to see me as a victim. I didn't want that to be the

reflection they saw of me being a victim from now on. It was bad and it was... But I didn't want to be the victim. I would rather come out on the other side and not be a victim.

Furthermore, FPOSA not only did not want to see themselves as victims, but they also did not want others to see them and label them as such. Being viewed as victims kept them feeling like objects, like powerless characters in someone's story, reducing their strength and motivation to survive, and robbing them from the personal power they had gained through much sacrifice. Deborah recounted her reaction when she realized she had been regarded and described as a victim by her pastor:

"What did you tell them about me?" He said, "Oh, well, you know, (...) and how you've been through this horrible divorce," and I was like, "No, no, no, no, no. You just victimized me. You defined me by this one event in my life." And I said, "I am brave, I belong to the most high, and I'm beloved. And that's how I define myself. And you don't get to define me by this trauma."

Rachel echoed the majority of FPOSA when she insightfully explained that she could not be both, a victim and a powerful woman, and that deciding to fight for herself meant that she could no longer see herself as powerless:

Fighting for what I deserved was the first step of regaining my power and not being a victim in the process. I've certainly felt like a victim at times. And when you're abused, there's a certain amount of victimization. But maybe that was part of why that piece (abuse) wasn't acknowledged until I was strong enough to not be a victim. But yeah, that was the first inkling of power, was being able to fight

for myself, which I didn't want to do, but which I saw I was gonna have to do to get what I wanted (...).

## **2. Learning to Listen and Honor One's Body's Signals**

The women's stories shared a common thread which showed a compromised relationship with their own bodies prior to marrying and while being married to their sex addicted husbands. Their bodies were sending subconscious signals to warn them of impending and present danger and of the methods of crazymaking of the addict, and yet FPOSA reported being incapable of recognizing these warnings and symptoms as somatic experiences associated with psychological stress. According to the DSM-5 "somatic symptoms are frequently associated with psychological distress and psychopathology" (American Psychological Association, 2013, p. 310). The participants' psychosomatic symptoms, physiological responses and/or "gut feeling" reactions were providing some indication of the illuminated experience their bodies were having, as an integrated part of their own identities, emotions, agency, expressivity and coping strategies (Wiklund et al., 2010). However, their minds remained in protective overdrive mode in order to cope with the unthinkable, in Levine's (1997) words, "what we don't know can't hurt us." Thus, the brains' protective reactions were manifesting as remarkable coping mechanism such as denial, dissociation, perfectionism, and even religiosity.

Some of their bodies manifested fear, panic, anxiety and depression. Some manifested physiological illness and discomfort as consequences to the participants' unprocessed psychological distress and as a result of the automatic avoidant coping strategies mentioned above. For example, Magda recounts her experience with psychosomatic symptoms:

Okay, from the start of our marriage, I knew something was not right and I had terrible stomach problems, terrible stomach problems. And my sister asked me

one time, "How do you stay so skinny?" And I'm like, "Because I have diarrhea all the time. All the time. I've been to a GI doctor, nobody knows what's wrong." Well, it was my body telling me something's not right. And so I think that I definitely listen to myself a little bit better, but I did know something is just not right. I just didn't know what. I learned to trust my body after this experience and why the body's doing what is doing.

Just like Magda, in the aftermath of abuse and crazymaking followed by divorce, most participants reported being in the process of re-establishing (or having already established) a healthy relationship with the physical self again. They are now able to hear and listen to their bodies, suggesting that through healing and personal growth they are able “to have a direct experience of the living, feeling, knowing organism” that is their own body (Levine, 1997, p. 6). Moreover, being able to make sense of their somatic experiences reinforced their trust in their body’s voice. With a supernatural peace in her voice, yet oozing passion and purpose when telling her story of horrendous physical and psychological abuse, Mary made sure to note:

And at that point, I knew something was really wrong. Do you follow me? I didn't quite know what it was, but I was like....He didn't admit it until I think after we were separated, but I got a professional to come in and look at the computer that we had at home. And I knew... I don't know how I knew this, but I was right. He was doing it on his laptop because he would guard that computer with his life. God has helped me to pray and not just take things at face value and to trust my gut instinct. But I didn't trust myself, I didn't listen to my gut instincts. I wanted to please people. I believed what people said about themselves. I started having much better discernment. Not that it's perfect even now, but I trust my gut, I am

learning how to listen to myself. And so learning to trust much more what people do, than what people say and learning to trust my instincts in that if I feel confusion and chaos in a relationship, that's not likely a healthy place.

In a moment of deep self-reflection, Ruth explained how learning to trust herself changed the way she viewed the world, and also fostered a greater sense of safety and self-confidence in relation to her internal boundaries:

And also it's taken over this whole time too now more is to begin to trust my gut again, my instincts. Sometimes I feel like I can be somewhat cynical, but then I feel sometimes I feel like I'm being cynical, but then I would say 75% of the time I was right in following that instinct. But it's taken me a long time to start garnering that back. Certainly the aspect of trust in a relationship.

The pain expressed by participants was evident as they spoke about not only losing all trust in their husbands, but also losing trust in themselves and their ability to accurately perceive the husband's character or his feelings toward them. As they spoke freely about their inability to recognize the reality of the addict's crazymaking, the women often spoke about aha moments in which sudden insights—either divine or somatic—were the catalyst to now trusting their gut feelings. Giving God credit for the aha moments, Rachel disclosed with courage:

But as I look back at that time, I knew something was wrong, I didn't know what was wrong in the marriage, so my response was to try to control. And just all those things that I just ignored for years, of that inconsistency. So I look back, way back.. and that first woman, who he had an affair with, there was a trip to (...) that he and I did, and I remember that was the first time I felt disconnected from him. But anyway, but I remember just out of the blue, the thought hit me, of

is he having an affair? And I look back now, and that is the exact timeline that matches up, which is bizarre to me, Holy Spirit speaking to me?.... In a way that like, there's no real explanation for, but yeah. I mean, the body, the spirit inside of me knew.

Further indication of growth as a direct result of betrayal trauma was a greater level of self-reliance and a new-found fortitude as women chose to trust their own bodies over trusting any other voices in their lives. Ten out of twelve participants spoke about how honoring their bodies resulted in them finding their voices and, consequentially, finally standing up for themselves. Deborah recounts:

And I have a very strong faith, so, all through my marriage, I would wake up 2:00, 3:00 in the morning, not every night, but very often, and just I couldn't sleep, so I would get up and read the Bible and journal and whatever. And I was fighting against something I never knew what I was fighting against, right? And I had accused him of an affair when I was pregnant (...). But I told the pastor's wife, I confronted him, they all were like, "No. You really need to trust your husband, and laugh, and all this stuff." And I should have gone with my gut. I didn't know how, but I should have gone with my gut.

With an "I will change the world" tone in her voice, Rebekah was not afraid to expound on the significance of following her own truth over any recovery rules or religious mantras:

And then same thing with clergy. They would tell me to forgive or to support him or other things and I didn't feel right, but that they were the clergy or they were the supposed authority. And I would follow it and I would just feel terrible. And so I think my values of listening to my own gut and my own, what I have been

calling my internal warning system (...). Following that rather... Yeah. Following that rather than a therapist or clergy or whatever what anyone else would tell me is way more important now. And I'm way more confident in doing it too.

### **3. New-found Personal Strength that Allowed for Facing Fears and Taking Charge of One's Life**

Participants described major changes that reflect growth in the domain of personal strength (Tedeschi & Calhoun, 2004). The findings showed that in the face of profound coping challenges, FPOSA discovered that they now could handle major unexpected difficulties and that they are stronger than they thought. One's struggle through suffering is one of the most valuable elements of PTG because it helps build strength and it teaches trauma survivors about their own potential (Tedeschi & Calhoun's, 1996). Every woman interviewed spoke in detail about the new-found personal strength in the face of divorce negotiations, custody battles, buying new homes and starting new careers. Furthermore, the data showed that they all found ways to unlock career potential and discover new possibilities. These findings echoed Tedeschi and Calhoun's (1996) schema-change model which assumes that trauma survivors cope by finding strength through suffering.

**3.a. Engaging in Psychological Help.** In the context of new-found strength, engagement in psychological help subtheme emerged clearly and effortlessly. Psychological help comprised of individual therapy, therapeutic groups related to co-dependency and interpersonal relationships, faith-based life coaching, and other FPOSA. Noteworthy is that eleven out of twelve participants first sought and participated in marriage therapy (some for a year or longer) which either failed to resolve the issues or pointed them into the right direction which was to seek individual therapy, which further facilitated empowerment. In fact, at member checking, several



participants who reported long-term engagement in marital therapy wanted me to know that “marriage therapy was more damaging than no therapy;” one FPOSA reported that her sessions consisted of the marital therapists “encouraging trauma processing without giving her tools to get to safety first.” Also significant, some women spoke about the difficulty of finding adequately trained therapists (more specifically therapists who adhered to the co-addiction/codependency model of treating partners of sex addicts), or knowledgeable counsel that could shed light on sex addiction and its effects (Hentsch-Cowels & Brooks, 2013). Mary gave up on finding a therapist or clergy who could explain the cycles of abuse and addiction, so she had to look for faith-based coaching that would enable her to own her power. As she tried to recall the details, she stated:

I found a lady...God divinely connected me with her and several other ladies (..) They had developed a policy and some guidelines. She was an expert on abuse and pornography, how it is a part of that (...). So God connected us and I got my pastor in touch with her. 'Cause he said, "I really don't know how to help you go forward."

Ten out of twelve participants reported being guided by their individual therapists (or an expert faith-based life coach in one case) who fostered a safe and supportive environment and helped increase their emotional tolerance and expand their cognitive understanding of sex addiction, co-dependency, healthy boundaries, family of origin dynamics, and the judicial system. Described as being “directive,” “knowledgeable,” “no-nonsense” and “wise,” these therapists helped FPOSA cope with the internal disorganization and disintegration that followed from the psychological unpreparedness caused by betrayal trauma (Calhoun & Tedeschi, 2005). The therapeutic environment and the expertise of their therapists enabled the participants to begin the journey to independence by owning their personal power and recognizing the need to

protect themselves and their children from any external negative influences or threats to their safety, their identities and their assets.

The act of self-disclosure helped FPOSA reflect and make sense of what had happened, and what they had uncovered about themselves and their relationships, which in turn assisted them in taking charge of their lives. Ruth credited the counseling process for her courage to take charge of her life after decades of being in an abusive marriage:

But while we're sitting here on the sofa at (counseling clinic) I have to say I've spent about seven years in intense counseling to get to that point, which I think so many times, I don't know if that's one of those questions, to have any growth coming out of that, I think the only way to really be... (..) being in some very good counseling and committed for a very long time to help you move out of it.

Esther found therapy to be the resting place she needed to gain wisdom and strength:

No, I will say I don't know what would have happened to me without therapy. I really do, I just can't even imagine. Because I am in academia, so I do read a lot. So I could have read, and read, and read, and read. And I did read a lot but the therapy side I just don't think it could have... I don't know what I would have done without the therapy side, the group therapy and one on one with my therapists.

Individual therapy offered FPOSA a safe space where they could navigate the new terrain of their lives. They were able to process through emotional states such as disbelief, distress, hurt, insecurity, fear, uncertainty, but above all the therapeutic space became a safe place for their anger. Many found that their therapists were not only guiding lights, but also someone who validated their anger, felt it with them, giving them the feeling that they were not alone in their fight. Deborah remembers:

Every step was scary. But anger was my security blanket for a while. So, I remember my counselor saying, "You had to get angry to protect yourself.

Esther was appreciative of her therapist who helped her feel the anger needed to fight for herself and her children:

I was broken..hearted but I was also ready, because I had told my therapist, you know, I need a plan of action so if I find out it happens again it will give me piece of mind to know what I am going to do . So, had no choice but to fight for me at that point and do what is best for me.

Rachel viewed therapy to be more than a sounding board; she experienced therapy to be the space for where the truth was spoken and where her world could become more congruent:

Once I got into therapy and started unpeeling my own personal brokenness of, and kind of seeing what got me there... I loved therapy and the healing, I can continually tell that I was healing, that I was growing, that those lies from childhood were being replaced with new norms. This isn't normal behavior. That never should have been acceptable. This is the normal picture, this is what's acceptable. And so understanding where I can... Where I enabled him, I won't say contributed, but enabled him.

Deborah, Sarah, Mary, Ruth and Esther's references to being a part of recovery or therapeutic groups, such as Al-Anon or Co-dependency Recovery suggested that the experience of an empathic environment was equally beneficial to them in this process, and perhaps provided a stark contrast to the abusive climate they had experienced in their marriages. Deborah explained:

And then my counselor had said, "You don't need anything, but Al-Anon. You can do all these things if you want to, but you really... Al-Anon will teach you

everything that you need." So I started going to Al-Anon, started reading the big blue book.

Another significant common denominator is the support and guidance FPOSA found in the community of former partners of sex addicts who have walked the journey ahead of them and were ready to offer emotional assistance and legal advice. Social support assisted FPOSA in developing new schemas. Deborah remembered with gratitude the part of the journey in which she could begin to dream of a new life and take actions to help her towards that goal:

I have a friend who recommended two single divorced ladies who've gone through something similar. So I just called them. And when I went and saw in her house, and it gave me the vision of I could live in a beautiful, peaceful home, on my own, and like, that's amazing, that's important. And then this lady I just talked to her on the phone, I took notes of everything she said, and she sounded so strong, so healthy, that I thought, "I'm gonna do whatever she did." So she did the codependency group class, then I did the codependency class. And it was very... It was amazing, to be in a room full of beautiful, co-dependent women, waking up together.

Elizabeth credited another former partner for finding the strength and the strategy to fight:

And then I of course freaked out, but I had a friend who had been through some horrible stuff and she told me not to confront him, which was the greatest advice and he... I mean, my life would be completely different if she had not told me that. And she was a strong believer. Like, if she had not told me that he would've talked his way out of this and it would've never come to light. But she told me not to say anything. Anyway and so then I like, met with her and then got like a

marriage crisis person and like investigated stuff for four weeks and then I confronted him and he denied it then too. But I had evidence.

**3.b. “Going to the Mattresses”: Fighting for Oneself.** An empowering and empathic therapeutic environment paired with the support of a small community of other former partners of sex addicts helped FPOSA discover a new-found courage to fight for their rights in divorce proceedings. In the aftermath of trauma, the women reported an increased sense of confidence, strength and self-reliance. Having survived years of betrayal and abuse, the sense that there was nothing they felt they could not do lingered in each interview. FPOSA reported that they knew now they could handle any difficulties and were stronger than they had thought. This posttrauma adaptation helped them outsmart their manipulative spouses in divorce; as they prioritized their goals they choose their battles wisely, while staying calm under pressure. For example, Rebekah had to invest a lot of herself to “develop a strategy for being delivered without court assistance,” because she “could not rely on the court, or therapists, or neighbors, or anyone.” She learned quickly that “you literally have to be your own hero.” Some others, like Ruth and Magda talked about a “breaking point” that ready them to begin fighting for a new life, and to “finally step out of the abuse” and “never look back”:

And I do think when I finally pulled the trigger, my family all thought I would not be able to go through with it. I think because it had felt like so many times before they had seen it and thought I should have and I couldn't ever, I couldn't do anything. I think they all thought she'll never go through with it.

Laughing while telling this part of her story, Rachel remembered:

Yep. Absolutely. You know, my lawyer and I walked out of the room and she was like, I am super proud of you. Oh my gosh. It's amazing to hear a lawyer say that.

I'm so proud of you. You're fighting for yourself, you know your worth. But it, that was the first step of regaining my power and not being a victim in the process.

Martha recounted her transition from feeling devastated to feeling empowered and ready to fight for what was hers:

And then finally I said, "Just to let you know, if you force my hand and I have to pony up the 30 or 40 thousand dollars, I will have her destroy you. I don't care what she digs up, but I will pay her every dime she wants to dig up everything on you." And I said, "And you're gonna end up paying that too, to fight me and good luck in trying to find something on me. I'm pretty boring." So he thought about it a few days and then he finally came back and said, "I'll give you what you want."

Esther faced her fears and crawled through pain to find the strength to fight:

I just got put in a situation where it was do or die, it was become less co-dependent or literally die. I had to have strength to get through the divorce and to rebuild which is so hard, and so I just knew I am going to have to figure this out to survive (...). I am not good at this, I don't know how to do this. But I am going to have to figure this out ..(change of tone) and get very good at it if I want to have a fulfilling life.

**3.c. New Career Paths.** New-found personal strength gained amid their divorce battles enabled FPOSA to see fresh avenues for the future; this resulted in a reconsideration of future goals, establishment of alternative paths to their lives, and vocational changes. Becoming more self-reliant and self-confident fostered the opportunity to re-investigate their personal make-up, resulting in a gleaning of fresh knowledge concerning abilities and talents and an awareness of

previously unknown strengths and interests regarding vocational paths. Following the divorce, Elizabeth, Sarah, Magda, Rachel and Mary either changed career paths or started a new career. Deborah, Esther and Rebekah started their own successful businesses. Esther and Miriam went back to school to explore and realize a new vocational path. Rachel smiled as she talked about her competence, and how the new-found abilities affected her self-esteem and self-reliance:

But their (...) was like, they made \$70,000 a year when I took over, and it was 200,000, 2 1/2 years later when I left. And it was just, wow, God! Look at what you're doing. Look at what I can do in this role that I wasn't even trained for, wasn't qualified for. And I'm sure that contributed to seeing myself in a new way and loving myself that I'm like, I knew I had some smarts. I don't think I'm overly about intelligence or anything. I'm on the average. But seeing that transformation, wow...

Sarah recalled her journey towards “taking life by the horns” and changing careers:

And you could really shrink back, but I just kinda had to pull myself up by the bootstraps and go, "Okay, well, now I gotta figure this life out." But it's allowed me to go, I can do hard things, I can do new things, I can do this by myself if I have to.

The women reported being able to observe an increase in their stress tolerance and flexibility skills. If pre-trauma selves felt helpless and too emotionally exhausted to think through a future or to learn new skills, post-trauma FPOSA delighted in the challenges of learning something new such as starting businesses, learning QuickBooks, sales or marketing skills. They reported having to learn “how to embrace sitting in dissonance” with what they did not know and “to not be afraid to keep walking forward” even when they did not know what to

do next. Growing meant continuing to do hard things and “getting smarter and smarter every day.” Proud of herself, Esther expounded on her journey of rediscovering herself and finding new possibilities:

Obviously, I started working, I went back to school, got my degree, and then started working full-time...I was very happy to work part time as a (..) and then be a mom. And so I was very content with that. And then, once I was single even though I was well supported, I still felt I needed to get myself that security of a full-time job.... it actually forced me to take a ninety-degree turn. So, I have gotten a graduate degree that I never would have gotten if not for this.

#### **4. Journeying from Spiritual Bypassing to Authentic Spirituality**

Findings indicate that as a result of struggling with this life crisis participants reported positive transformations in the spiritual domain. Women described the changes they had undergone to be a shift from spiritual bypassing to authentic spirituality; they saw this shift being the result of a wrestling with God and a detangling of their religious belief system. Spiritual bypassing is a term first coined by psychologist John Welwood in 1984 and it denotes the “use of spiritual practices and beliefs to avoid dealing with painful feelings, unresolved wounds and developmental needs” (Masters, 2010, p.1). Spiritual bypassing prevented POSA from acknowledging what they were feeling and needing while married and helped distance them from their true selves and from others. For example, Mary let tears roll down her cheeks as she remembered her journey to authentic spirituality:

He would take scripture and be abusive and he said... He was doing things that were inappropriate and I would say... He said, "Everything is permissible. It's in the Bible." I mean, stuff like that. It was just crazy and that I should submit to him



and all that. And I wanted to be submissive. Oh. This is a huge thing that I learned. And this is profound truth that she said to me: "We are commanded to submit to authority, but we are never commanded, nor should we submit to sin."

That is profound.

Spiritual bypassing was a coping mechanism taught in the families of origin (FOO) and cemented by their religious environment. FPOSA shared that their religious upbringing gave them a foundation of faith that was helpful with overcoming challenges and with developing strong morals and values yet indoctrinated them with a religiosity and legalism that encouraged spiritual bypassing. Women discussed ways they were conditioned to "not to rock the boat," "to be nice" (instead of authentic), "to be strong" and "to be submissive," all of which interfered with their process of individuation, a faith system that operated out of trauma –fear, shame, survival responses. They had survived their marriages by numbing themselves with magical thinking ("It will all be ok" or "God will work it out") and by avoiding feelings associated with being violated and betrayed. They had labeled anger, fear, and sadness as being negative feelings, instead of warning signs that they lacked boundaries or connection to self. They had to choose blind compassion and toxic forgiveness in order to stay safe. Upon discovering her ex-husband's sex addiction Esther believed that "all she needed to do is pray and talk to him about the affairs," and "to be strong and to cover for him." Mary talked about how she had to recognize being conditioned to misinterpret and misquote the Bible and take action:

I have misused the verse that says, "Love covers a multitude of sins." There's a time for that. And there is a time for the truth and love and there's a time to...appropriately stand up in the face of bullying and intimidation and evil.

Amid betrayal FPOSA expressed difficulty in finding a safe space in their religious communities. In their greatest hour of need, the churches they attended encouraged the spiritual bypassing – due to clergy’s lack of understanding and knowledge around sex addiction– causing re-traumatization. The participants were told that it was their responsibility to manage their partners’ out of control behavior by “giving them enough sex,” “cook enough wonderful meals,” or by being “winsome”. On the other side of trauma, FPOSA expressed their anger and deep disappointment freely, and discussed how they perceived the damages of institutionalized religion. Finally able to detach from spiritual gullibility, they exercised the necessary discernment to see through the spiritual abuse. As she discussed her journey out of spiritual bypassing, Mary stated:

At the other church where things were dealt that way, I was told that I should be like Hosea. And I was told that... I was preached that passage in 1 Peter I think it is that when a woman is married to an unbelieving husband, that she should win him over without words, and I was told that I should just do everything that he wanted and it was my responsibility to love him enough... out of that addiction (..). Not to blame for everything, but they should have been going after him. He is the priest and the head of our home and in my opinion, they should have worked with him. It was his... It was not my responsibility. Yes. I needed to work on my issues and I had many. Everything that went down badly was not his fault. Neither was it all my fault, but they put it all on me.

The incongruence between what they knew was pure and right, and the lives their addicted spouse lived –often in church leadership positions–allowed for a wrestling that empowered the women to give themselves permission to feel feelings, to make use of anger and to employ boundaries. Establishing internal boundaries helped them begin to deconstruct the toxic parts of

their spirituality and to disengage from unhealthy religiosity and religious communities. Deborah remembered the moment when she decided to respect her anger and care for her own self by standing up to church authority:

They were caught in an affair. He lied about what it was. And so we relocated and had counseling, which I loved and thrived at. But it was very much how to act right when your spouse acts wrong. Leslie Vernick ... Forgive and forget and all that stuff. And it was helpful. ... But I was like, "I am so angry. I'm furious." And so, it was, "Yes, but you don't have godly anger, that's not biblical anger. You're very selfish in that."(...) I think anger is a... It was trying to save me, and I didn't get it. I thought it was wrong, versus going, "Something is wrong in my... And somebody is crossing a boundary, and I am mad," and that's not wrong. I need to ask, "What's happening?"

Pre-trauma FPOSA described their spiritual bypassing tendencies to manifest as “narrow thoughts of what it looked like to walk as a Christian”, or to “check all these boxes and not check these,” “never have more than one glass of wine,” “don’t have sex before marriage”, and “God heals all childhood wounds”. Experiencing spiritual abuse initiated a questioning that caused not only a disconnection from previous beliefs but also a healthy dose of cynicism. Sadness came through as Elizabeth looked back at how she viewed being a Christian:

The perfect Christian, everything was together, wasn't real, wasn't a bad person and doing bad things, but nobody's perfect. But I thought I had to hide any broken and ugly and present the happy, perfect, pretty to be loved and accepted. And I think that was my whole life.

Post-trauma, women be more comfortable with life's "big grey areas" and to begin exploring their value system around femininity, sex before marriage, dating and drinking. They also began recognizing that due to spiritual bypassing parts of themselves had been "underdeveloped." Deborah's monologue echoed other participants':

So the first time I've ever considered, "No, maybe I would sleep with somebody, if I'm not married," 'cause I'm like, I don't know I wanna give up this freedom (..)I don't know, would I want to give up what I have? So I don't know. I'm just asking questions now. But I was a virgin when I got married. I've only had sex with one person my whole life. So, I think that's probably an area of me that's possibly underdeveloped. I don't know if I could live with myself if I did that differently. I don't know. I'd have to like... I don't know. That would be a huge change for me.

Eleven out of twelve participants spoke about the destructive power of romanticizing their former partner's religiosity and that of hyper spiritualizing their marriages. Hannah recounted the years she spent in shock because "she was not able to sit with the dissonance" of her sexually addicted spouse who was "such a godly man" who "did not believe in divorce or sex before marriage," yet he was sleeping with prostitutes. In the aftermath of their suffering, FPOSA found new lenses through which to process and interpret their marriages as well as the choices to enter the marriages and to stay married. Rachel admitted:

And so I knew this man... I thought, and he presented himself as a Godly man who loved the Lord. He grew up in church, and so all of my persona of him was wrapped up in that. I took him at his word. He was happy in this marriage, it was me, and this was my problem. I hyper-spiritualized things.

**4.a. Wrestling with Their God.** One of the subthemes that emerged from the data was participants' wrestling with God. Amid such a life-altering event, FPOSA went through a unique crisis of faith. The reality of their lives was shattered enough that they were forced to wrestle through what was real and what was imagined, and to discover the difference between idealized spirituality and sacred, personal intimacy with God. The participants' awareness of the dissonance between their prior assumptions and their realities resulted in experiences of deep doubt and questioning, yet it did not result in abandoning their relationship with God or their faith. As they took responsibility for deconstructing their faith and redesigning their identities, participants were able to redeem spiritual beliefs and align them to these identities. Mary got vulnerable about her season of wrestling with God and also with herself. Via a cognitive struggle, she attempted to understand what had happened and what was left in the aftermath:

I wrestled with God. I was honest with him, but I had to get to a correct view of him and of myself and begin to want to live again. It's a miracle that I'm alive. I had to get real with God and say "Where did this start and why? And what's going on?"

This grappling seemed crucial in motivating the growth process to unfold. At times it looked like a going back and forth repeatedly in prayer over their circumstances which bewildered and confused them; at times it looked like begging or negotiating with God, "a constant pouring everything" to God, similar to an automatic rumination of spiritual dimensions. This wrestling with God was experienced as an echo to the unbearable internal emotional struggle; it became a form of soothing, "the only way to find peace where there was just no peace," and "the only way to get through it." Rebekah, who described herself as "not necessarily religious," honored her emotions as she noted:

I remember praying at the time and I... Sorry, I'm really emotional about this right now, but I said, "God, I have to have a husband. I can't survive. I don't know how I can do this by myself." And so I said, "Either get me a new husband who is appropriate, and who's not a psychopath, or will you be my husband? Like, will you protect us and will you provide for us?" And my financial situation now is so much better than it ever would've been had I remained married. So I make more money on my own than I ever... Than my ex has ever made and ever would make. And so God really did just provide for us and protect us and enabled me to be delivered eventually.

Rachel humbly remembered the most difficult moment of her wrestling with what she did not understand, and how the grappling facilitated a crossing over into surrender: .

There had been time points through that year and a half, or a year and a half in, at this point, of where I was just like, Lord, I can't do it. I would just pray, I'm like, I can't do it. I'm done. And that I really felt... And I trust his timing is perfect. So, his reason is his reason, and I'll never know it, but... [chuckle] I felt he just called me to trust him and trust that he was enough, he was sufficient, and just to keep on.

**4.b. Union with God: God is My Savior in the Darkest of Nights.** While experiencing a spiritual vacuum at various points amidst betrayal trauma, POSA were also attaining a transcendental union with God. For FPOSA, authentic spirituality meant a sacred union with their Higher Power as a result of developing an authentic self and turning one's attention from the outer world of experiences and feelings to the inner world of their spirit (Francis, 2011). As evidence of growth, FPOSA reported a shift in focus, from the chaos of the unconsciousness to a conscious reflective state of being that fostered congruency between their self-concept, their

spiritual beliefs, and their experienced world (Karilemla, 2015). Mary explained the shift in her perception of God and relationship to God:

These are ways I grew. God taught me about spiritual warfare. He taught me how to fight. Back to this shattered broken vase on the floor, pornography, abuse, all of it, the enemy wants to destroy. He made me feel worthless, hopeless, just... I won't tell you the names that he called me, but I was just something to be used and I was worthless and hopeless and nothing. That was the lie. That God began to just pick me up and put me back together. He gave me that esteem that I was his precious princess, that I was the daughter of the King of Kings, that I was his handiwork, his masterpiece, that He had a destiny for me to fulfill (...). He restored and He's still in the process of doing this (...). He restored my correct view of Him and that's still... It's a journey.

This kind of level of congruency guided their behaviors, and provided a subjective, internally consistent context for interpreting the world; it also encouraged a recognition of the control they had over their choices. This capacity for congruency- which emanates from a sense of freedom, meaning, and purpose- facilitated FPOSA's process of finding spiritual authenticity. This journey into a mature kind of faith meant that they took ownership of an intimate, personal relationship with their Higher Power, and they accepted and surrendered to the suffering which, in turn, cultivated a union with God (Heidegger, 1927/2010). The process of growing toward a state of spiritual maturity was evident in all FPOSA, but was best explained by Esther:

And I think as far as my faith goes, it was... What really changed with me and God is, it's not that he'll always keep me safe, but it's that he'll never leave me, he'll provide what I need. And so I think for me, I had this assumption that, I don't

know why, I knew about the valley of the shadow of death and all that stuff, but it says I'll be with you. It doesn't say that you won't go through the valley of the shadow of death. And so for me, I think I really had to make peace with, he didn't betray me too. He didn't let me down too. This is the way it was all along. I just didn't know that bad things happen to good people. There's no economy here. You can't stave that off. And what his promises actually are, which is, "I won't leave you, I won't forsake you, I myself will provide for you, I see you." And so for me it was, again, getting out of that kind of economy thinking that I have to do this to get this. Just that God doesn't work that way. So my faith changed.

FPOSA reported a deep, almost supernatural fellowship with God both, in the midst of the chaos of finding out about the betrayal, and in the deep suffering that followed. Most participants reported that God was the one who helped reveal the behaviors of their sexually addicted spouse; for example, supernaturally Esther knew the computer password that she needed, Rachel "had a feeling and I was like, where did he set this phone?". Hannah and Elizabeth received phone calls from sexual workers. With a mischievous smile, Martha found humor in her story about her dialogue with God, just six months after getting out of a thirty-three-years-old marriage:

And I decided to look at his phone. And you know, and I've been praying all kinds of prayers, praying God for help, for me, for him, for us, our marriage, wisdom. And I don't know if God sat up there and thought, God, this girl is so technologically dumb that I'm going to have to just point her in the right direction to see what she needs to see. Because I would always ask, show me, tell me, give me some kind of sign...and there it was!



Magda gave credit to God for her psychosomatic reactions, and viewed God as the One who brought everything into the light and rescued her:

Well, I turned to God a lot more because I felt like he led me straight into... a way. And I felt like he was the one making my stomach upset and, hey, you need to pay attention. So then I started asking him, "Help me. Help me find what is wrong with me." So he woke me up in the middle of the night one night. And I went outside and my husband, my ex-husband, was in the basement doing the video stuff. And I looked in the window. But why did I wake up in the middle of the night? Because God did it. He said, "It's time."

Mary recalled an encounter with a "human angel," a police officer, who "out-of-the-blue" knocked on her door at the right time "and saved her and her children." With tears in her eyes, she reported:

And he looked at us a little and he said, "I know that this is a very difficult time." Then he said, "I want you to know that God is with you." He said, "I've walked around this home and I know that you believe in God and that Jesus is in this home." And he said, "I want you to know that He is with you and He's going to see you through this." And he said, "I'll patrol this neighborhood all night, every night and you call me if you need anything."

This new-found authentic spirituality involved living in and with and existential tension between the goodness of God and the reality of suffering; feeling deep loss and heartbreaking betrayal, and yet finding God as "the provider," "the husband," "the friend," "the father to their children," "the one who brought justice." God was no longer an ideology or a church or a Bible passage; he became a business partner and a protector. When pondering upon her journey, Sarah

talked about how her “faith had deepened and grown so much, even in super, super practical ways” like believing that her bills would be paid or being able to buy a house for herself and her children. Rebekah, a successful business owner currently, gave credit to God for her success:

In that same way, I also was like, I don't know how to run a business. And so I said, "God, will you be my business partner? Will you take care of all the stuff that I don't know how to do that I know needs to be done? Will you take care of all the things that I don't know that need to be done that I don't even know about? And will you just do all the stuff that I can't do and all the things that even I know how to do, but I can't 'cause I don't have enough time or whatever. Will you please do it?" And my situation is just so much better than I ever, ever, ever, ever could have imagined. So thinking that I needed that, and I feel like God has come through and been that protector and provider for me and also a business partner and just helped me with everything so I don't feel like I've done it by myself.

After the interview ended, Elizabeth asked me to keep recording so that she can ensure that I captured the transformation that took place for her:

I would say the biggest thing that I didn't emphasize was the difference in me now versus then is my faith and just my relationship with the Lord and how strong it is now. Because as hard as it was, of course, and bouts of depression and anxiety, but just working through that, though, and just growing so close to the Lord.

## **5. Changes in Relating to Others**

This theme describes positive growth in the domain of enhanced relationships with others (Tedeschi & Calhoun, 2004). This finding reflects growth in the PTG domain of warmer, more intimate relationships with others. The findings indicated that in the aftermath of trauma, FPOSA

developed an ability to assess which relationships were potentially unhealthy or no longer beneficial to their healing process, and which relationships were “emotionally safe,” as in trustworthy, nurturing and supportive. This new-found ability enabled participants to end the relationships that felt “not real,” “surfac,” “conditional” and “judgmental”. It further empowered them to appreciate and deepen the healthy relationships, the ones described as “real,” “vulnerable,” “safe,” and “open”. Data also suggested that women recognized that unhealthy family of origin (FOO) dynamics and prior relational trauma produced dysfunctional patterned beliefs and behaviors that initiated and fed boundaryless relationships. Fostered by deeper self-analysis, these insights enabled FPOSA reach greater levels of vulnerability with themselves and others.

**5.a. Family of Origin.** Ten out of 12 participants spoke openly, and yet with compassion, about the epiphanies gained regarding the automatic FOO programming that influenced their decision to choose their partner and stay in abusive marriages. Many spoke about the codependency displayed in their families, as well as of relational patterns that promoted gender-related socialization in general. They recognized that as women, they were raised to value interpersonal connection, and even to sacrifice some of their own needs for the long-term goal of relational stability. Others, acknowledged, that they chose an attachment and a climate that was familiar to them, a relational dynamic that reminded them of a dysfunctional or abusive parent or of one who parentified them. Mary spoke briefly and meekly about her family of origin, recounting a strict and narrow- minded upbringing that attracted bullies:

I was a fearful little person who pleased people and I was naive. I was raised very, very sheltered. And even from even as a little child on the playground, I faced a lot of bullies. And I mean, I married a bully.

Rachel evidenced deep insight as she spoke about ways her family of origin dynamics played a role in her suffering:

My dad has narcissistic behavior, not on the level of my ex-husband, but so much of his behavior seemed normal because that is how I grew up. And so I accepted it as the norm and blew so much off for so long. (..) So, and my mom is an enabler. She is the old school picture of a submissive wife, but it really... It's a wife who, she is the kindest person, and she's kind of a doormat. She doesn't establish boundaries. She doesn't demand respect. She is just give, give, give. And when it hurts, give more, keep giving, keep loving, keep giving, keep loving. Well, you can't change that, so just let that go, was very much a philosophy of my childhood.

While obviously still attempting to make sense of her suffering, Magda spoke about the influence her mother might have had on her marriage decision:

You don't know how childhood will affect you later on. And then I wonder, what about myself drew me to him? So one counselor told me that... It wasn't the sex addict counselor, but it was another one. She said, "Well, you married your mother." Because my mother was very controlling and very... And so I was used to that role of, okay, I'll just go along with it because if I don't, then you'll get mad.

Demonstrating great self-awareness, FPOSA –especially the ones who reported being committed to long-term individual therapy–discussed at length the cycles of co-dependency present in their FOO, repeating themselves from generation to generation. As they began to process their marriages, individual therapy (at times supplemented with group therapy or Al-

Annon) helped them face their co-dependency and its effects on the self and their relationships. Ruth recognized that after her parents' divorce, she had "to be responsible for her mother's happiness," which conditioned her to not consider her needs and wants in her marriage. Esther clearly described her journey out of co-dependency:

And so just understanding my codependency was how it happened and getting into recovery (...). Yeah, I think one thing I used to do, and my mom trained me to do this is if someone else acted up, I tried to figure out what I had done wrong. And so I think now I don't do that anymore. I realize, you know that other people really act up and it has nothing to do with me. So that's a huge behavior change for me mentally, not making everything about me, not thinking that I can fix everything, just getting outta that fixer mode of, if somebody wants me to fix something, they'll probably come ask me to fix it.

Understanding and working through the family of origin dysfunction did not result in FPOSA separating from their loved ones. Healing family of origin wounds in their family opened up possibilities for healthier interactions and realistic expectations. Many FPOSA revealed that they felt that family of origin relationships had improved following the trauma. They reported closer family ties, feeling cared for, and a new appreciation for the support received. Since some of the women discussed their experience within the relationship with the addict as being one of isolation – as their partners would frequently control their interactions with others– it is not clear if the participants were able to enhance their relationship with FOO as a result of terminating their relationship with the addict or because they experienced relational growth after trauma. For example, Hannah struggled with her tears as she recounted the support of her family in the midst of the pain and confusion of betrayal; she reported suddenly

recognizing how “important family was,” thus, “spending every weekend with her family, “ even though “it was a long round trip.” Elizabeth reported feeling much closer with her family following her divorce; she smiled while talking about the joy of sharing a bottle of wine with them now and not having to be rushed home:

I felt like he alienated me from family and friends. He turned me even against people, like made like, start, made me doubt of relationships that I had because of his... And now on this side, like, I'm so, I can be with my family, I can be with friends, I can do whatever I want. Yeah. I'm much more I think definitely much more relaxed with my family now, which is a good thing for sure. And now ...I talk to my parents...about parenting..(..) I'm not ashamed anymore that my family is the most important thing.

**5.b. Boundaries.** Boundary setting was a common subtheme in the stories of the interviewees. They all reported undergoing a process of active reconsideration of their personal boundary system. This process allowed FPOSA the opportunity to establish healthier boundaries with others, as they attributed a lack of boundaries and a naivety concerning others to being part of what had led them to choose their former partner and, thus, the subsequent loss of their identity. Participants also reported that they were more able to assess which relationships were potentially harmful or no longer beneficial for them, and to either distance themselves or to cut themselves out permanently, without a sense of guilt associated with their decision. This finding indicates positive growth, evidenced by the fact that FPOSA shifted from needing external validation and input to being protective over their identities and their new-found self-reliance, and subsequently over stewarding the healthy relationships in their lives.

In the aftermath of trauma, all participants reported that they had become more cautious in terms of who they chose to share their time and themselves with; these decisions were based on a value judgment of what others had to offer on an emotional level. For example, Mary discussed how her growth in this area could be assessed by the way she has “created boundaries” or has been “able to stand up and speak truth even though she might feel like jelly inside”. Deborah wanted us to listen to the song Badass after she talked about how “direct” she had become, and how she had learned to finally stand up to her “manipulative sister”; she finished with: “I think it's pretty clear that she can't mess with me now.” For Ruth, setting boundaries with people in her life who did not take a “no” was a skill she was still developing; she stated:

It's helping me to develop better boundaries and probably that personal growth of a little more confidence to be able to go, "Nope, I don't want to do that today," or, "I'm not gonna do that... " And not worried about pleasing someone else or what the backlash will be. But boundaries are very hard. And it is very hard with those people, like even my mother where there was some codependency there, now that I have pushed back and set boundaries..

Rebekah recounted how quickly she now cuts unsafe people out of her life when they disregard her boundaries:

Yeah, so the emotionally safe people in my life, my relationships with them improved drastically. I became closer with them, my relationships improved, my relationships with my kids improved drastically. With the unsafe people, so the abuser and then his family and maybe friends, that got worse. I actually had to cut off contact with them because they continued to try and tell me what a great guy

he was and that he wasn't using porn anymore, and that the things that I said about him were untrue and that I must be crazy, all that kind of stuff.

Esther laughed while she discussed at length the changes that had taken place in how she related to others:

It changed the people I am attracted to and are attracted to me (laughter)...because when you are not as co-dependent anymore ..uhh..you are just going to attract different people and you will be attracted to different people when helping is no longer your game. Uh...people who don't want help are going to appreciate you, but people who want help are not going to understand, so it changed... a lot of my relationships changed after this divorce, just because I was in recovery getting help for my co-dependency, so uhhh..any relationship I had that depended on me being the helper, also because it was so much trauma ...I didn't have the energy to help anyone, so those relationships fell by the way side ..(...), but the relationships that were more stable, where everyone carries their own weight ..

Magda expounded on how her new-found authenticity enabled her to reconsider her social circle:

So I feel like I'm not trying to change anybody or make it a pretty picture. You just kind of have to accept people the way they are. Honesty. I'm not covering up. I'm not fake anymore. This is me. And I lost a lot of friends that way, too. I don't wanna hear it.

**5.c. Authenticity and Vulnerability versus Shame.** When relational changes were discussed, a desire for deeper authenticity and an increase in vulnerability were common focuses of attention. Participants reported noticing a path of transition that began amid betrayal trauma and continued



into the present. As FPOSA began to understand the etiology and psychological framework of sex addiction, they were able to move from self-blame, shame and from “wanting to hide from the world” into being vulnerable about their lives, and furthermore, into seeking authenticity in all areas of their lives. At first, they withdrew from their communities in an attempt to avoid judgment and to protect self-image, as well as to minimize the likelihood of rejection. However, as they accepted the reality of sex addiction and then began to restructure their sense of self, they no longer perceived themselves as responsible, flawed, or unworthy of not belonging. Instead, they felt free to bring their real feelings, thoughts and experiences into the healthy relationships of their lives.

For Miriam this resulted in an unhindered freedom to be herself: “I don't have to be somebody that I'm not.” For Elizabeth it translated into “being so much more vulnerable and open and communicate in my relationships.” For Martha, it meant moving from being too embarrassed to tell her oldest best friend to being open about her betrayal trauma to a new community of women. The prevalence of growth in the domain of personal relationships was evident in the participants’ stories, as they reported a greater sense of closeness and freedom to be themselves. As Rachel’s reflected on her transition, the growth towards authenticity was clear:

Everybody knew now. And it was just... And I was finally great with that because I had hid his lies. I had lied to myself. I had protected him. I had lied even though I wasn't actually lying. Just the... Living my life in such a way that wasn't authentic.

Once she risked being seen inside the safe relationships surrounding her, she experienced a sense of congruency between the core sense of self and present life experiences:

And what I saw in my relationships with the people closest to me, who I let know what was going on is the level of love and acceptance from them. Once they knew that my world was shattered and I let them see the brokenness and the ugly of my life, they love me more. And what I learned in that is people don't love what's not real. It's not the same. People love what's real. And I had to become real.

Not afraid to display vulnerability, Ruth expounded on her journey back to authenticity by stating that she “had that before marriage but was deluded into that world that she lived in or became meshed in”, and as a result she “wasn't very authentic because she was also living that lie as well, living in, hiding a lot of things.” As she reflected on grappling with shame, her speech slowed down:

Of course, in my case too I think that some of the identity at first was a little of embarrassment because it was very public. And very embarrassing. And yet at the same time I had to kind of come to grips with, that's not a reflection of me, that's not me. That was his choice, and it's not who I am. And it's not an identity we carry.

Ruth explained her new standards regarding seeking and maintaining close friendships:

I'm looking to see more who is authentic is a good word, and what is real, not what worldly possessions people have, but what is their real... And certainly I do value that in people, I mean, I want to know what they're really about, what matters to them, how they treat others.

Sarah spoke about how she found courage to face the fear of judgment from her church community when she decided to file for divorce, a courage that did not exist pre-trauma:

My identity's not what they think of me, I'm trying to do what I feel like is best for our family. But I really would've ...It still is a little bit of a struggle, really would've struggled with something like that prior to our divorce.

Echoing many other FPOSA, and as she reflected on changes related to how she viewed relationships, Sarah reported that she did not have close relationships pre-trauma, and the ones she had were “surfacey” since she was trying to put her own facade up” to convince everyone that “nothing was wrong.” She described the way she viewed herself after betrayal:

I feel much more able to be myself and be honest about my failures and successes and the good and the bad with those people that are close in my life. Whereas, I had nobody like that before. I think I value authenticity now, and wouldn't have really valued it at all, but maybe even not really thought that it was that important maybe before.

Esther was poised as she reflected with much self- awareness on her personal vulnerability in relation to other people, and vice versa, their vulnerability in relationship with her:

I guess, again, it's just going back to, I don't like to admit this, but I think, I look back at that Esther and I just think of her as, I hate to use the word fake, because that's kind of judgmental. Yeah. And now it's just authenticity. I think I value that. Before I just didn't have the tools to be authentic, whereas now I've had to walk this walk and get through this. And so I just feel like my authenticity is important as I learned to walk through all of this without shame and without judgment and just letting it be what it is. I was married to a sex addict, and I got out of it.

**5.d. Increased Compassion Towards Others (even towards the addict).** One of the many consequences of coping with a shattered world included a sense of increased compassion

towards others. It appears that FPOSA experienced a shift in how they view others, and even how they view the addict. It is unclear, yet implied in many of the interviews, that this increase in empathy was a result of a previously untapped self-compassion. Nevertheless, the findings suggest that their suffering fostered an existential felt experience regarding human fragility and the aloneness of pain. Participants referred to it as being a sense of “no one is an island,” but rather all people “human and beautiful and courageous and strong and fun and together and belong,” all a part of a whole of a human experience filled with suffering. The compassion reported reflects a deep understanding of the pain associated with betrayal trauma, and hence a full recognition, acceptance, and validation of the pain they themselves had been through. Rachel paused to wipe the tears before she stated:

Nobody has it all together. And suffering is completely different. Recognizing everyone is broken. Everyone is carrying burdens that the rest of us don't know about. And the... We all need compassion, we all need encouragement.

Magda did not hesitate to expound on the way she views the world around her now:

I guess the biggest thing is that everybody has something going on. Every person. And although they look happy, they may not be, you just don't know what's going on behind the scenes. So now if I see somebody in trouble, I reach out. If I know somebody that's going through a divorce that I've just heard, because no one really reached out, they don't want to hear it. And some people are receptive, some people are not. But I'm just like, I'm here if you ever need to talk about it. I know it's hard. And so I think I have been more open to receiving people than I was before. And it's not a big façade... a lot more welcoming... open to everybody.

She even took the time to express compassion towards her ex-husband and the childhood trauma as a precursor to his sexual addiction:

And I feel like I've become more compassionate towards people. And I do feel sorry for my ex-husband. He did go through a lot, but he's not doing anything to get better.

With a palpable self-assurance in her voice, Esther explained:

I mean, obviously I'm much more empathetic. When stuff happens that it's an equal weight to my friends or to acquaintances, I have a lot of empathy for them 'cause I know what it feels like to be shattered and to have to pick yourself back up.

## **6. Existential Wrestling That Led to Shifts in Life Philosophies**

A common theme throughout all twelve interviews was the presence of cycles of existential questioning, followed by meaning making and reprioritization. As betrayal trauma shattered FPOSA's sense of safety and security, an existential questioning of fundamental assumptions took place. Participants began to wonder what kind of schemas lay at the bedrock of their cognitive-emotional system? And why? Through talking, writing and vulnerable self-disclosure, the women began to attempt to make sense of the deep suffering and all the ways it shifted their world. Findings also suggest that the women wrestled with the self-forgiveness in order to make meaning of the pain. Additionally, the data gathered indicated changes in worldview, changes in values, as an individual and as a parent.

In the aftermath of betrayal trauma most FPOSA engage in stages of cognitive processing regarding how and what kept them entrapped in their marriages. In the attempt to make sense of the pain caused by betrayal, some of the participants engaged in rhetorical questioning in search

for answers that would assist with the accommodation of trauma-related existential anguish.

Rachel wondered: “I look back and I'm like, why? Why did I believe that?” Versions of Magda’s monologue weaved through the interview as she kept asking:

How did I miss that? How did I let that happen to me? ...A lot of asking, Why did I stay, why did I do that? Why, why, why? And it's been a long time. I mean, 10 years since the first discovering it, but how do you wind end up with somebody like that?

Hannah’s speech got slower and slower, as she drew my attention to her crying, she inquired:

I analyzed it and analyzed it. I can't tell you how many hours that I spent trying to listen to tapes and reading through the text messages and I tried and I found this prostitute... Like he didn't care enough to give me the answers, you know? And I guess he didn't have the... Looking at it now I realize he probably didn't have himself like the ability to be the kind of person who would care enough to give answers, you know?

This “deliberate rumination” –that fosters cognitive processing and activates PTG – assisted FPOSA in wrestling with the information that no longer fit their present life circumstances (Tedeschi & Calhoun, 2018). Through deliberate rumination, participants learned ways to adjust to the changed circumstances of life, and enabled an exploration of new frameworks in which they were able to create meaning out of their experiences. Esther moved from sighing to loud laughter as she described her wrestling with the why’s. When discussing the transformation resulting from her wrestling, evidence of PTG were clear in her monologue:

I think ...what I could have done differently ...I went back and I just...but it’s who I was, so at the time I could have done anything differently because you can

only do what you can do. But those three years of emotional affairs I really suffered, carrying that on my own...uhh..the person I am today I would never let that happen again. Carrying something like that for three years and not ..telling anybody.... that really stole a lot of just energy and life from me ...so, I would certainly do that part differently. I would be a whistle blower a lot ...louder!

Sarah grappled with regrets and lost possibilities, as she spoke about the loss of the dream of “having a nice family,” growing old together,” “having this certain socio-economic standard,” and “these great purposeful ministries.” As Esther discussed the transformation resulting from her wrestling, evidence of PTG were clear in her monologue as she wondered “what could she have done it differently” and concluding that “she could not have done anything differently because she could only do what she could do,” but that “the person she was today would never let that (suffering in silence) happen again,” because “that person would be a whistle blower.”

**6. a. Meaning Making.** Following trauma, the search for meaning was part of FPOSA’s readjustment process (Taylor, 1983). Findings showed that the participants grappled with making sense of the suffering by engaging with existential questions regarding personal significance and impact of the event. This process of engagement with meaning making elements made room for positive adaptation. All twelve participants attributed the ability to create, and to rest in the framework of “There must have been a really good reason,” to their new-found authenticity regarding their relationship with God. Deborah used metaphorical language to explain how she has come to make sense of the suffering:

As you grow, you learn, you grow. There's no sadness like a future remembered.  
So as long as I hung onto that dream of, with our children around us and our

grandchildren, and then I'll be very frustrated with my present. But if I embrace that all things work together for the good, that I have seen God in the dark, I have heard him sing my name and quiet me with his love and hide me under the feathers. Some people smell like smoke when they come out of the furnace. Some don't. And I don't wanna smell like smoke. I don't want people to look at me and go, "Oh man, she's been in the fire." I want them to say, "She's been with God." And that's the goal is that there is no life with no stress or no suffering.

Some participants spoke candidly about not being able to find a personal meaning in this much suffering, yet able to rest in an existential felt experience of the unknown and to embrace the “gifts” of betrayal trauma. A shared sentiment by all was that, somehow, enduring the pain and hardships that came with being betrayed was worthwhile because it meant a new life, a new self and freedom. Sarah’s words summarize the collective sense of “I don’t understand, but I accept it.”:

Rain is gonna fall on everybody, and what seems to fall on some people differently or a deluge versus a gentle sprinkle, I don't know. And I have to trust even though it doesn't make sense that there has got to be a purpose behind it, that God has a purpose for it and a purpose behind it. And I see some of that...And that's good. But I would've never chosen this past and I wouldn't choose it again. Even with some of the good things, I would have preferred to avoid it, and for my kids to have avoided it. So, I just think it doesn't make sense, to me I can't.

Esther expounded on how her meaning making shifted her view of life:

I can't make sense of it in a way that I'm like, "Oh, it's okay that this happened." So it's like in a way, I'm like, "This shouldn't have happened, and it did, it's not



fair." And I didn't deserve this, and the kids didn't deserve this. And so in many ways I don't... I can't say that I've made sense of it, all that I can do is say, "I appreciate the gifts that's given me."

Yet, many of the women were able to find not only a purpose to the suffering, but a reasoning for it. Developing a sense of meaning promoted a missional approach to life which fostered the idea that "I must have gone through this suffering, so that I can help/understand/support/tell my story." Elizabeth interrupted as the interview was wrapping up, in order to make sure that I understood that she found great purpose in telling her story:

I mean, I'm happy to answer any more questions that it's like, I wish I knew exactly who this was gonna help and then I would say, maybe this would be helpful to you. Because I really do, I mean that's why I'm sitting here in this. I wanna be able ..for my story to be used by people in a position like yours who ...that's what they do every day, is help people

Rebekah was quick to expound on her mission:

So to make sense of all the suffering now...I'm going through this to learn and grow... because this is my purpose because God wants me because I had worked in the addiction world and been teaching about that, and then I realized, wait a minute, this is all abuse. What is this? This is ridiculous. Now I know what I know now, and now I have to talk about this and have I not known all this other stuff, I know this is what I'm called to do by God, I know this is my mission. And so in the suffering, it was easy to say, okay, I need to learn this because this is what I need to be able to talk about or teach about or whatever but, looking back, it's hard to remember how painful it was, which is weird and cool.

For other participants meaning making via deliberate rumination enabled them to reach the point where they granted themselves forgiveness for enduring the emotional abuse of the sex addict. When confronted with the pain, the lost possibilities of their lives, the regrets, and the abuse's debilitating shame, FPOSA wrestled through existential guilt and found the gift of self-forgiveness. Miriam considered self-forgiveness as being one of the last steps towards wholeness: "It was really...forgiving myself for not being able to stand up for myself at the time, and then after that seeing myself as a different person and whole again". Mary spoke about how much she "pondered the situations that seem devastating in the lives of those she loved and in her own life" and she questioned God about how he could have allowed the suffering. However, she answered her own wrestling this way: "Who am I to say that it would have been better to protect us from these things instead of allowing them to happen?" Ruth expounded on the power of forgiving herself and how it facilitated growth:

I think when I reached self-forgiveness ...that was it ...it's helped me to come to terms with realizing that... 'Cause a lot of times in a marriage people will say, "Oh, well, there's two sides to everything." I really did feel like for the 25 years of being married to a crazy person, I did everything I could to make it work. And it was a constant, it was a long, progressive struggle. And I think forgiving myself for... Probably at some point felt like a lot of times let my kids down and that I should have gotten out sooner. But then I could justify other reasons why it was quite better not to, in my particular situation, why I made some of those decisions. But to be able to know that I did everything I could, but I'm not responsible for their choices and their behaviors.

**6.b. Redesigning Motherhood.** Another subtheme that emerged from the data was growth regarding parenting; the participants reported positive changes in the way they parented their children. In the face of the adversity of divorce, FPOSA were forced to undergo a process of redesigning motherhood which facilitated growth in their parental role, especially considering they were the only emotionally healthy parent. This reconfiguration process of the notion of motherhood required a wrestling with priorities, values and societal expectations. Findings showed an increase in their capacity to rebound and in the ability to be more resourceful as a mother.

Post trauma, FPOSA recognized how much emotional energy went to their sexually addicted spouse, which meant that they had not been able to be the kind of mothers that they wanted to be while still married. Rachel's face showed sadness as she talked about her daughter not having "her person" and "a confidant" in her, because they were not close while she was married. Rebekah recognized the stark difference between the way she mothered while she was married – "I could not help them with their homework and I could barely make dinner"—and the way she mothered after she "was delivered from him": "I am a much better mom now as a single parent, because it's much easier to parent." With tears in her eyes, Magda talked about how she had grown as a mother, but also how her anger affected her children:

Parenting changed. And I think a lot of times when you're in that kind of situation, and I apologize to them now, it's like I had a lot of anger. I didn't know what my anger was about. So I took it out on them a lot. I mean, not hitting them, but I'd yell and be just aggravated as anything. So definitely parenting changed. My whole anger went away. I got more laid back and calm and happier. Even my

boys said, "You're a lot happier than you used to be, Mum." Yeah. And I am now more open, more truthful with them.

Sarah added her tune to the collective voice, as she spoke about positive changes in regards to disciplining her children and choosing transparency in her parenting:

My parenting is completely different. We have a lot of conversations about things and what is right and what is wrong and what people think and what...But even to an extent with my child, you're gonna make the choice that you're gonna make. This is the choice that I would make. Or that's not the choice I would make. But with my other child, I'm like, but you're a grown adult, and there will be your consequences. I said, I'm not gonna stop loving you no matter what. I am here for you no matter what. You have the freedom to make the choice. And you... And it's not gonna affect you and I, but it may affect you, and your future and your options and your choices moving forward.

Parting ways with the addict gave some participants a chance to be the mothers they always wanted to be. As Miriam reflected on her journey to trusting herself and to becoming an empowered mother, she acknowledged that parting ways with the addict gave her the opportunity to be “the best mom that she could be”; stepping away meant “not having to hear what a terrible mom she was” and gaining the confidence to do what she knew was best for her children. Rachel reported that if she had not gone through the divorce “this beautiful relationship with her daughter” as they were “the closest of friends now” would have never happened.

On the other side, some FPOSA talked about how they had to grieve the loss of both dual parenthood and financial freedom, which meant not enough one-on-one time with their children. This loss forced them to consider what was of the upmost importance when spending time with

their children. It also caused them to shift priorities to find family time. Sarah had to give up reading books out loud to her children; she also had to embrace that a “good mom” is flexible and does not “make her children go to Sunday school every week”, but instead does the best that she can with what she has. When she wanted to speak about how she had grown as a parent, she divulged, smiling mischievously:

When my son tries to stand up to me or disobey or bow up on me, I've had to grow a spine and realize, "No, no, you're not gonna do that, that's not how we're gonna behave, and here's what's gonna result if you're gonna choose to do that," or whatever.

All participants acknowledged the effects and the great responsibility that came with being the only emotionally healthy parent, or like Magda, Sarah, Rachel and Elizabeth, the only parent that “enforces consequences and protects.” With this acknowledgment came the call to also play the role of a father who had to do both, foster healthy femininity, and promote courageous masculinity. The women discussed ways they had to teach their boys healthy masculinity. For example, Deborah reached out to all her friends’ husbands to fill in the gap of fatherlessness and to ensure that her boys learned how to “shoot a gun,” “change the oil,” and stand up for women in their lives, so that they can remember that:

"Manhood is dangerous. And I am entrusting you with dangerous tools that I want you to wield well. 'Cause you have to be dangerous in order to protect. If you're not dangerous, you can't protect what is good."

Furthermore, watching the effects that the sexual addiction– followed by divorce– had on their children, these mothers had to engage in a meaning making process on behalf of their children. For example, here is Sarah trying to make sense of her children’s suffering:

And I'm trusting my mindset is that the things in their life that have been really hard as a result of where we're at are gonna shape them into the people that they're gonna become one day. And that God has allowed these things to happen in their lives for a good reason. And that one day maybe they'll just, they'll have certain characteristics that they wouldn't have had before, perseverance, long suffering. I don't know. There'll be characteristics present in their lives or be able to say something to somebody, pour into somebody else in some way that's good.

Like Esther, most participants viewed being a mother as the catalyst that fueled their wrestling with meaning making and later to their growth. Esther spoke about her children as being the grit that gave her strength to fight for herself:

I don't know how I would have gotten through this without my children because they've just given me the courage to take the next step I always need to take because I knew I had to take it for them or .. they wouldn't be ok, and so just knowing I didn't want chaos in their home ...uhhh...this meant that I had to do what it took to keep chaos out of their home and that meant that I could not be chaotic ...as a mother...and my therapist always talks about that, how difficult it is to go through something like this without children and to have the grit to .....keep pushing when there is no reward.

**6.c. Changes in Outlook: Appreciation and Values.** Participants identified changes in outlook as noteworthy positive outcomes that resulted from wrestling with existential questions. This subtheme was reflected in the numerous direct or indirect statements sprinkled throughout the interviews, statements that suggested changes in the way they viewed the world, changes in values, and a new-found greater appreciation for what it means to be alive. For some, this trauma

set in motion a sense that they have been spared from a lifetime of suffering—they were now “free” or “the chains are off” or “they have a second chance at life”—and that the gift of this second chance should be treated with care. Some of the outcomes of this greater appreciation for life were a change in life priorities and a new-found gratitude for the “little moments” and “smaller things”. Another outcome was a change in their life’s mission; most participants talked about the importance of focusing on “changing their little world” instead of wasting their time on the inconsequential.

Due to the felt effects of betrayal trauma, FPOSA reported that they now functioned outside of normal societal expectations and experiences. As their sense of the controllability and predictability got disrupted, their worlds had become less safe and much more complex. There was growth in the realization and acceptance that bad things happen to good people, and that the world is not always fair and just. Their outlook on life had become less naive and yet much clearer, humbler. Many participants reported experiencing the world as being “much darker,” “more broken,” “full of burdens no one knows about,” “misogynistic,” “in denial,” “head in the sand,” “nobody has it all together,” “unequipped.” Evident in their responses was a loss of innocence and naivete; in the aftermath of trauma, FPOSA described their outlook as “cynical,” “careful,” “cautious,” “more aware,” “street-smart,” “nothing being surprising,” “gray” versus black or white, “real,” just to name a few. Rebekah’s observations regarding the shift that happened for her was reflective of the collective:

So I think that my level... I am not sure that I was naive before, but my level of what we call the opposite of naivety, experience or street-smarts or whatever has just grown exponentially. And when it comes to feminism and misogyny, I feel

like the more women who have these kinds of street-smarts in the world, this is gonna make the world a much better place.

Ruth expounded on her shifts in worldview when she stated:

But certainly more cynical, more aware things don't surprise me near as much. I felt like a lot of the things with the sex addict, the darker side that you don't even know was there, the darker side of those things certainly exposed me to a lot more where certain things don't surprise me. I will hear things, others that probably are just naive and in a good sense, 'cause they didn't have to go through. But some of those things don't surprise me because I have lived through them or experienced them or have seen them in a sense of where I didn't want to.

Esther acknowledged the change in her worldview posttrauma, and expounded on it being arbitrary and risky:

I just realized that the world is darker and sweeter than I thought. I kind of thought that there were, what would you call it? Like guarantees. If this, then this. And I don't know where I came up, I don't know where I made that stuff up, that if I was good, then bad stuff won't happen. And so just realizing that didn't matter if you're good, if you're around someone who's not you're gonna get hurt. And so, yeah, I think I just have a broader worldview now, just seeing that, yeah, there are really... Are hurtful things out there, and they may come into my life and I'll survive.

It was apparent that these changes in the participants' worldview did in fact represent a higher level of functioning than before their traumatic experiences of betrayal. FPOSA reported as having "sharper vision" and "more street-smart," and also being "more equipped," "awake,"



“purposeful,” “content,” “curious,” and “outspoken”. They described their posttrauma lives as “thriving,” “a second chance,” “purposeful,” “something to be proud of,” “full of adventure,” “peaceful,” and “free”. Elizabeth’s words summarized many participants’ sentiments:

Like the chains had been released off me and I was no longer sinking. I mean, it just like, I can breathe. I can breathe. I just always just had this oppression on top of me with him.

Findings suggested that FPOSA reported changes in values, and as a result a reprioritization of life. Participants reported these changes as highly positive alterations of their sense of what was important. FPOSA reported no longer putting value in efficiency, predictability, social status, or social desirability. Instead, they wanted purposeful lives and reported a new value system comprised of values such as: “freedom to show anger,” “freedom to choose,” “independence,” “adventure,” “courage,” “my own voice,” “vulnerability,” “authenticity,” “real and healthy connection,” “compassion,” “curiosity,” and “dreaming”. For example, Deborah discussed her journey towards learning how to embrace messiness, and foster values such as “independence, strength, integrity, and adventure”; her life’s basic rule was to “look at somebody’s actions, not words, because words are what kept her in bondage”. Rebekah spoke about how she had to reexamine what she believed about marriage and find her own path to happiness instead of conforming to the idealized American dream regarding “the steps, in order, to a happy life”:

....one of the steps is getting married, and that is not one of the steps for me. So I'm like, "Oh, I can get a granite counter top, I can go to Disneyland, I can go to Egypt, I can remodel my house, I can do whatever." Being married is now no

longer on that trajectory. There are things that I want, but marriage is not a step to any of those things.

Sarah also elaborated on the messiness of this journey as she discussed how she had left behind her “it has to be this way” outlook:

I used to value I think efficiency so much, and I was kind of that on the DISC test, like the C. It was like, yeah, I'll go, this is gonna be great, and I'll have my little ducks in a row, whatever. Now the ducks are just all over the place. They're just wobbling all over the place. And I'm just like, "You know what? It's fine."

Martha's vulnerable words were indicative of her wrestling with her change in values:

And that I put so much value in then don't make a hill of beans now, if that makes any sense to you. I took life for granted. Just, I just took everything for granted that, that I would be loved unconditionally till the end. I don't know. I really don't know. It's such a bizarre story my story.

Additionally, surviving devastating betrayal helped participants understand the value of spending time with their children and with close family and friends. Being faced with heartbreaking loss, FPOSA's narrative around time changed; they recognized they did not want to waste it, instead wanting to be present with and in every moment. Deborah's trauma set in motion a sense that no moment with her children can be spared, because “you don't have long, they grow so fast.” She expounded on the adventures she went on with her children post-divorce:

I took them to Colorado. That's an incredible adventure. That picture is us where we were sledding or surfing down the sand dunes in Colorado. And we had like hiked 20 miles at a national park and see moose and I mean, like just... We had an

incredible trip, just to share that. And then we went to... And then last summer, I took them to Arizona and we saw the Grand Canyon... Just like all this stuff.

The realization of how much was lost enabled them to appreciate each day and its small pleasures, and to take life more easily. Mary spoke about changes in how she prioritized herself and that resulted in greater appreciation for the small things in life:

I've since realized how nourishing beauty is for my feminine soul. And so I'll find something beautiful just because I like it and set it in my windowsill. And it remind... It weaves me to God.

Noteworthy is that in hindsight, half of participants reported having a sense of “beauty for ashes,” a biblical expression evoking a sense of comeback, a phoenix rising from destruction, of finding life in the midst of death and devastation. In fact, for four out of twelve participants, entrepreneurship was a response to trauma; they reported building businesses or organizations whose mission was directly related to helping individuals and families who found themselves in similar circumstances. Mary’s words revealed this undercurrent running through the interviews:

Father God walks us through these trials and then brings healing, restoration and redemption. God brings beauty from the ashes. He makes us more beautiful and useful than before....that I know.

Many spoke about how suffering was a route to share the new-found wisdom with the next generation. They felt responsible to their daughters and their daughters’ daughters to pass on as an inheritance their lessons learned through suffering. Miriam explained:

Now I value the sanctity of sex, the belief that there's something sacred to that and it's not just an act. That's a bigger, I have a bigger belief system in that than it's just a fix, something that you just go do....I try to teach that to kids and my kids

and I think that the strength I have is almost like a conviction. That's certain...world doesn't view sex that way anymore. It's so watered down and just. That is not sacred anymore.

Echoing Esther, Rebekah, Deborah, Mary and Ruth, Miriam reported staying dedicated to being a whistle blower regarding the effects of pornography, as she viewed the pain of her trauma as a route to her new calling and a new purpose in life:

Behaviorally too, I'm very cautious about, what I say to people and what I want to instill in others, mainly my children. And I would, I'd have them read a lot and really into like Good Pictures, Bad Pictures. I think I kind of do that a lot in my office with the kids that I see. Behaviorally where I maybe wouldn't have addressed that before, it's always really important to bring that up and to not stick my head in the sand and pretend it's not there, but to face it and to talk about it and to get my kids to talk about it and to discipline them if I see that.

### **How PTG Unfolded for FPOSA: The Budding of a Theoretical Model**

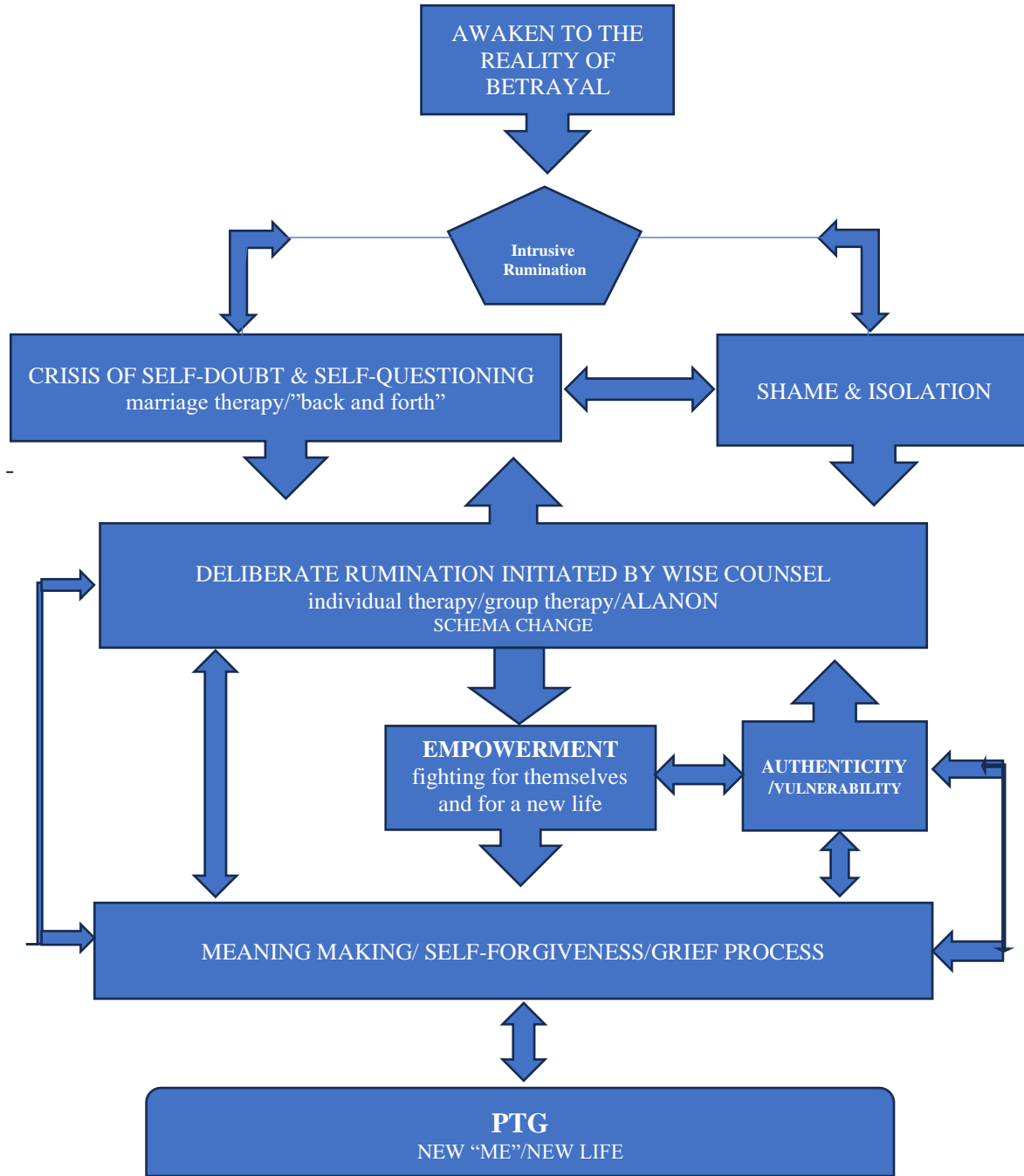
A strong pattern was found in the data in relation to how participants progressed towards the experience of PTG. This finding was surprising since it emerged naturally from the data, without conscious premature interpretations, and outside of my expectations to develop a formulaic comprehensive model of PTG for FPOSA. Thus, the data had “movement,” a way of telling a story from the beginning to the end, which could be an indication of the budding of a grounded theory that would facilitate an understanding of the steps taken to PTG (Creswell & Poth, 2017, p.83). When an additional wave of coding was conducted in order to narrow down the across participants’ responses to two or three words, a possible collective “unified theoretical explanation” was generated, one that explained the process of how PTG unfolds for this

population (Strauss & Corbin, 1998). The meticulous memoing on the consistent similarities between all participants seemed to point to the following ten stages that FPOSA engaged with prior to experiencing PTG: awaken to the reality of betrayal, crisis of self-doubt, the hole of shame and isolation, intrusive and deliberate rumination, seeking and finding wise counsel, the power of knowledge (understanding addiction and the self vis-à-vis the addiction), uniformed regret, take it to the mattresses, self-forgiveness, and vulnerability/authenticity.

These phases are reflected in the themes already discussed above. They occurred, more or less, in a sequence, however participants report weaving in and out of some of them, more specifically the seeking counsel/rumination phase and the self-forgiveness suggesting the wrestling with surrendering to the unpredictability of the grief waves. To provide additional context to the presentation of this finding, I have included a visual representation of these ten phases in Figure A. To substantiate my findings, I chose Ruth's statement to be the best concise summary of the data generated regarding how PTG unfolded for participants:

There's probably some cycles...somehow.. I would think my identity ...of coming out of that. Maybe. I think the identity stage at first of how did this happen to me? Why? And then there is a lot of... At least with the sex addiction part of why am I not good enough and why do they make these decisions in a marriage? Why are they choosing to be unfaithful and do all of these other things? Why am I not good enough? So I think there's some of that and then as you kind of move through that stage I guess, then learn more about it and ..then so on...

Figure A



In the aftermath of shock and denial—both PTSD reactions to disclosure or discovery of sex addiction—FPOSA acknowledged that they were forced into a stage of awakening to the reality of the devastating effects of betrayal trauma (Steffens, 2006). Esther remembered this

phase as the “frozen” stage where she had to accept that this was happening to her:

So it's like the process of being shocked and then frozen in that reality the accepting the reality then later having a plan of action with your therapist.

Next, many participants reported entering a crisis of self-doubt and self-questioning, “the back and forth” phase. This stage was characterized by FPOSA entering individual therapy, in addition to the couple seeking therapy even as the addict's hiding, crazymaking and/or emotional abuse continued. Rachel expounded on her experience of “back and forth”:

So all that came out, so I think that this whole time he is faithful to me and we're working on reconciling, I am riding a roller coaster all over the place, emotional, working hard in my therapy with (therapist). I wanted to grow, I wanted to heal, I wanted my marriage, and I trusted God was able to do that.

FPOSA reported the next phase to be the shame and isolation phase. In this stage, participants reported feeling shame, worthlessness and a feeling of “I am so stupid” regarding the lack of awareness and knowledge related to their husbands' sexually addictive behaviors. Feelings of shame were followed by increased social isolation. Martha's words echoed the voice of every participant:

I don't know if I was living in denial. I don't know if I was just living in shock. I don't... I was just living with it, trying to push it out of my mind, but it was always there, it just always resurfaced and I could not confide in a soul at that point.

Esther remembered being “so so embarrassed, so confused, bewildered” in this stage:

I just... I guess I was in that mode of I could fix this and I could save the reputation and all that kind of stuff. And I didn't do myself any favors at all because it was just eating me alive.

Recognizing their shell shock state of mind, all participants reported seeking wise counsel at this point in their journeys. Therapeutic engagement initiated deliberate rumination, and even replaced the intrusive rumination that was triggered by the shock of discovery or the disclosure of addictive behaviors. Intentional, reflective and existential in nature, deliberate rumination enabled the participants to process shame, self-blame, self-betrayal, codependency, family of origin dynamics, the crazymaking of the addict, the etiology and complexity of sex addiction, how to find their voice, and many other factors that play a role in partners' healing (Steffens, 2006). For many, the beginning of this intentional rumination was facilitated by reading literature related to sex addiction. Deborah chuckled as she expounded on this part of her journey towards standing up for herself:

So I read everything I could get my hands on...Trying to understand it.... To make sense of it. 'Cause I was like, "My very best thinking got me here, so we need some new thinking." And so, I think that I had to get to the heart of why I was attracted to that, why I didn't stand up for myself, why I listened to such poor counsel with the church, and never really... And I just was very obedient, very, very submissive. Do the right thing, forgive, overlook, see Jesus behind them... Listen to the Lord, cry through sex because you're giving it as a gift to God. Like, ugh, horrific, horrific counsel we get through the church.

Rachel discussed the impact therapeutic engagement had on her growth with a sense of pride and gratitude towards her own self:

So all that came out, so I think that this whole time he is faithful to me and we're working on reconciling, I am riding a roller coaster all over the place, emotional,



working hard in my therapy with my therapist. I wanted to grow, I wanted to heal...(…).. and so, I pursued everything I could do from my standpoint.

The outcome of engaging in therapy made room for the next phase, that of empowerment. FPOSA reported that accepting and understanding the link between trauma, sex addiction and mental illness gradually empowered them to find the strength to fight for themselves and their children. It was clear that the journey towards empowerment started with the realization that their spouses were not willing or capable to choose recovery, which enabled them to detach, and encouraged them to begin navigating the stages of grief. Letting go of control catapulted them into a journey of uncovering a strength they did not know they had. Here was Esther, taking over the conversation quickly to make sure she explained the undertones:

And so the fact that the behavior was escalating was no.....his personality is to do whatever I tell him to do ...so, just the fact that he was not doing anything on his own to get better, I think is what scared me...I think just realizing he's doing what I was asking him to do but it's just so ....he doesn't quote on quote get in trouble, it's not because it is a heart change (...)...I was done and ... hmm...my life was just about everyone else at that point, and when that kept happening and I was getting so hurt...I was ready for my life to become about me

Paradoxically, as FPOSA came to recognize their strength, a heightened awareness of their vulnerability and a desire for authenticity followed. This next phase was an indication that having to face their fragility and the preciousness of life provided them with the opportunity, and perhaps the need, to be vulnerable in ways never before necessary. In the face of deep suffering the women found the value of meaningful living and the importance of having an authentic self. Developing a more authentic and coherent sense of self was reported to be FPOSA's most

rewarding part of their journey towards posttrauma growth. Esther viewed authenticity as the greatest gift that this kind of suffering had given her:

I guess, again, it's just going back to, I don't like to admit this, but I think, I look back at that Esther and I just think of her as, I hate to use the word fake, because that's kind of judgmental. Yeah. And now it's just authenticity. I think I value that. Before I just didn't have the tools to be authentic, whereas now I've had to walk this walk and get through this. And so I just feel like my authenticity is the most important as I learned to walk through all of this without shame and without judgment and just letting it be what it is. I was married to a sex addict and I got out of it.

Rachel opened up about how the changes she experienced around vulnerability had a ripple effect within her social circle:

The fact that I opened up to people that my marriage was a mess, that was brand new for me. So that was a huge change. We're gonna be out there with this so that other people who are struggling don't feel isolated....Like...maybe.. don't feel like you are failing as a parent. We can't talk about this.

Data showed that self-forgiveness was the last phase of the unfolding of PTG, and perhaps viewed as the pinnacle of growth, a sort of a resolution to an evolution. Participants discussed the difficulty in forgiving themselves for marrying a sexually addicted individual, for staying in the marriage for longer than they should have, and for allowing their children to suffer. Working through the process of forgiveness brought up grief as the participants began mourning the relationship, what could have been, a “future remembered.” Consistent with other studies, self-forgiveness seemed to be indicative of FPOSA’s attempt to integrate their interpretation of

trauma in hopes to find a sense of coherence and purpose (Grad & Zeligman, 2017; Stein et al., 2018). Additionally, noteworthy was that more than half of the participants reported a sense of forgiveness towards the sexually addicted former. Forgiveness did not mean that survivors found reconciliation with the offender, but it was rather an invitation for FPOSA to examine both their innocence and their culpability while exploring their new-found freedom and creating new experiences moving forward (Bowland et al., 2011). Emanating grace, Mary talked about this topic:

I try to forgive myself now and not beat myself up. I try to be more discerning about what's my...I don't blame myself for everything anymore...like I used to. "That's on you." But in the end...I think... God wanted to heal him and redeem him. There was nothing...even the things underneath pornography and abuse that God couldn't heal and deliver him from and I knew that.

Miriam expounded on how self-forgiveness promoted her finding her voice and knowing what she deserved in life:

I gave myself permission to do that (having a voice).. Which was very difficult for me, but realizing that I was doing that to take care of myself and to forgive myself for the things that I did that were wrong. Kind of blaming him, saying, "Well, it was all your fault, I wouldn't have done this if it hadn't been for you." But that didn't make it right.

To conclude, it is crucial to mention that since the present study was not designed to explore the steps of the journey post betrayal trauma, future research should be conducted to examine the possibility of formulating a theoretical model regarding FPOSA's journey to PTG.

## **Chapter IV: Discussion**

### **Introduction**

The findings of the present study have begun to illuminate the essence of the lived experiences of PTG in FPOSA, which will help support therapeutic interventions that build resilience in overcoming the effects of betrayal trauma in this population. The primary research question posed was: *What transformative life changes and outcomes have occurred for FPOSA as a direct result of this traumatic event?* To address this inquiry, I followed the traditions of interpretive phenomenology, and I used a semi-structured interview of 9 questions grounded in Tedeschi and Calhoun's (1995, 1996) PTG model (Smith & Nizza, 2022). Through the inductive coding process, the following six themes emerged: (1) changed perception of sense of self, (2) learning to listen and honor one's body's signals, (3) new-found personal strength that allowed for facing fears and taking charge of one's life, (4) journeying from spiritual bypassing to authentic spirituality, (5) changes in relating to others, (6) existential wrestling that led to shifts in worldview.

### **Discussion of Research Findings**

Literature on growth after trauma for related populations indicated that to help frame the inquiry and analysis of such topic, the PTG model and its propositions was the best option for elaborating on the results. In the face of devastating betrayal and deep loss the twelve participants reported significant beneficial changes in emotional, cognitive, spiritual, and relational domains of life. FPOSA's narratives showed that they developed beyond their previous adaptation levels in regard to psychological functioning, self-awareness, and outlook in life (Tedeschi, Park & Calhoun, 2009). The devastation of loss afforded them an opportunity to build

a new and superior life structure pertaining to all the following domains: perception of self, body knowing, interpersonal relationships, spiritual authenticity, philosophy of life and priorities and appreciation of life. These findings support existing literature concerning PTG and its domains (Tedeschi & Calhoun, 2006;1994).

### **Changed Perception of Self**

A criterion of PTG, identity changes or identity transformation was reported by all twelve participants (Tedeschi et al., 2018). FPOSA reported seeing their pre-trauma, or in the midst of trauma, selves as “worthless,” “voiceless,” “powerless,” “naïve,” “inadequate,” “insecure,” “too forgiving,” “broken,” “controlling” and “stupid,” just to name a few. Participants emerged out of the struggle with a life changing trauma with a new perception of self. These transformational and significant changes in their identities were perceived as unexpected and unintentional, which corroborates the experience of “real” PTG, versus the “illusion” of growth (Sumalla et al., 2009). As they were being interviewed, the women described themselves as: “enough,” “powerful,” “badass,” “strong,” “precious,” “valuable,” “transparent,” “smart,” “alive again,” “world shaker,” “brave,” “real,” “empowered,” “independent,” and “capable.” The changes in perceptions were clear manifestations of PTG.

In the aftermath of trauma, FPOSA acknowledged that there were a few pieces of identity worth preserving; these pieces were the parts of themselves that had to stay hidden— sometimes even from themselves—in order to stay married. The disconnection from the core self was replaced with an awakening of their true selves. Ruth’s words echoed the collective grief of most participants who spoke about how grappling with suffering resulted in finding lost pieces of themselves: “The biggest part of growth is coming back to who I was and my personality.” Some participants—like Martha, Elizabeth, Miriam, Mary, Magda, Esther, and Sarah— were awakened

to parts of themselves that were always there but never manifested, such as curiosity, strength, hunger for vulnerability, childlike beauty and play, adventure, self-assurance, and independence. The process they followed in order to rediscover or recreate themselves fits the one found in other studies on the topic, in which the relinquishing of old patterns was seen as crucial in changing the way participants conceptualized their identities (Jenks, 2014; Laaser et al., 2017; Vladez & Lilly, 2014).

Participants in this study shared similar feelings of greater self-reliance, self-confidence and a new-found internal locus of control. They acknowledged that self-reliance, self-confidence or self-assurance was not present before their experiences of betrayal. FPOSA reported that they now have a sense that they are stronger, and if they survived this much suffering, they now felt able to handle anything. This is one of the most common reports of PTG in the literature, the sense that “if I survived this, I could survive anything” (Aldwin & et. al, 1994; Tedeschi & Calhoun, 2004, p. 6;). In the face of negative life circumstances, the women toughened up. Some started their own businesses. Some began to plan trips and travel by themselves or with their children. Some bought or remodeled their own houses. Some went back to school and changed or started new careers. Furthermore, because they were able to handle what life threw at them in addition to achieving life goals, the result was an increase in self-esteem and self-respect.

The restoration of their self-esteem and an increase in self-awareness helped FPOSA “devictimize” themselves (Tedeschi, Park & Calhoun, 2009). They reported not seeing themselves as victims and not wanting to be labeled as “victims,” but as “powerful survivors.” Rachel’s words said it all: “I am strong enough not be a victim.” Studies have shown that the changing the perception of self from a “victim” to a trauma “survivor” affects how individuals cope with the effects of trauma (Brosi, & Rolling, 2010; Epstein, 1980). The “survivor” label

conveys strength and a more complex view of self, a view that allows for a reconciliation of the new post-trauma world that is experienced. The chosen label helped the FPOSA to somehow weather the psychological unpreparedness initiated by betrayal trauma, and in turn altered the way they perceived themselves and the way they coped in the aftermath (Brosi, & Rolling, 2010; Epstein, 1980).

### **Learning to Listen and Honor the Body's Signals**

The most surprising and yet one of the most prominent themes was FPOSA's realization of a compromised relationship with their bodies prior and amid their marriages—a self-betrayal—followed by a unanimous restoration of that relationship in the aftermath of betrayal trauma. The participants reported a disconnection between the body and the mind while married to the sexually addicted individual. This disconnection resulted in psychosomatic symptoms; psychosomatic is defined by Merriam-Webster dictionary as being “concerned with or relating to both the mind and the body” and was first described by Halliday (1948) as “disorders consisting of somatic symptoms and psychic causes” (p. 245). Post trauma, the women realized that their psychosomatic symptoms before and during the marriage—such as digestive system issues, compromised immune systems, depression, anxiety, panic attacks, or “gut feeling” reactions—were their bodies' way of talking about what the mind could not know.

This finding echoes what some mental health professionals who have argued that due to Family of Origin trauma many individuals learn to disregard what they truly feel, and to secure their place in the family system they survive by supplementing other's (usually a dysfunctional parent) needs, thus self-rejecting the true self and developing a false self (Miller, 1997). With time and through the use of survival coping mechanisms, the boundaries of the true self and the false self-become blurred. This confuses the system of the psyche and the immune system, and

self-rejection is triggered: “In this disarray of boundaries, the immune cells attack the body as if the latter were a foreign substance, just as the psychic self is attacked by inward-directed reproaches and anger” (Maté, 2011, p. 173).

In retrospect FPOSA reported biological and psychological alterations due to betrayal trauma, and they also shared a common sense of being able to hear and trust the voices of their own bodies, post trauma. Being able to honor the body’s signals was seen as a manifestation of their growth since it represented a higher level of psychological functioning, the end of a life lived in cognitive dissociation and the unearthing of the true self. The body of research pertaining to this theme lends credibility to it, as studies have shown females’ psychosomatic outcomes from betrayal trauma (Gobin & Freyd, 2009; Freyd et al., 2007; Freyd et al., 2005; Platt & Freyd, 2015; Wentzel, 2018). Yet, due to the paucity of qualitative research regarding the intersection between PTG, betrayal trauma, and psychosomatic outcomes researchers should continue to understand the intertwining of mind and body in experiences of betrayal trauma.

### **New-found Personal Strength that Allowed for Facing Fears and Taking Charge of One’s Life**

One of the most essential themes of this study thread around a new-found inner strength that empowered FPOSA to work through difficult challenges pertaining to the crazymaking behaviors of the addict, divorce, custody battles and starting careers or going back into the job market. There were no questions or prompts given in the interviews to discuss personal strengths or the path to how they found the courage to face their fears, and yet a large number of accounts addressed this topic. At many points in the interviews, the participants weaved in and out of their story thread to ensure that inner strength was perceived as their greatest transformation, and to offer examples of how they had become stronger. I had a sense that during the interviews



participants were giving me the possibility to take a peek –on a very small scale–into their struggle through suffering, into how they had gotten to be “badasses.” Their hands were holding physical representations –in the form of journals, timelines and notes–of their journeys to building strength, to attaining coping skills, and to growing emotionally and mentally.

These journeys into the psychological adaptation and, later, optimal living, were not linear nor clear, but included phases of mediating processes, such as writing and reading, individual therapy and recovery groups as elements of intrusive and deliberate rumination (Calhoun & Tedeschi, 2018). All twelve participants discussed extensively the power of deliberate rumination, the constant massaging of the pieces of betrayal trauma through various means. These coping strategies were used to protect them and guide them in their healing process, and they, later, became the power that fueled their sense of “I can face anything now.” This echoes Stockton et al.’s study (2011) that showed that only reflective pondering allows one to begin to make meanings of his or her experience and to resolve discrepancies between the new trauma-related information and prior assumptive worlds. In the body of research pertaining to PTG such mediating processes are used to encourage survivors to achieve better-than-expected positive outcomes (Jenks, 2014; Lasser et al., 2017; Tedeschi & Calhoun, 2004; Wentzel, 2018).

With the help of their individual therapists FPOSA gradually substituted psychological schemas comprised by shock, shame, self-blame, numbing, threatening assumptions, helplessness and hopelessness with schemas of accepting of aspects of trauma, personal strength, a new appreciation for the helpfulness of others, and elements of self-discovery. This unfolding process produced changes in their view of their own capacity to overcome betrayal trauma and divorce. This theme was previously discussed in other research studies; in Jenks’ (2014) study, survivors of intimate partner violence reported that the validation they received in therapy was

the key to “reawakening.” Seventy two percent of the participants in Lasser et al.’s study (2017) identified individual therapists to be the most helpful resources to their healing. Other studies have shown that the struggle with suffering facilitates an awareness of inner strength and an increased sense of self-compassion that encourages posttraumatic growth (Jenks, 2014; Laaser et al., 2017; Tedeschi & Calhoun, 2004).

The significant role that individual therapy played is evidenced in this study by the account of the only participant who self-reported not attending therapy—due to financial restraints—and stated that she was not “where she wanted to be in her healing” at the time of the interview; she also indicated a lack of self-care as “she was working all the time now.” As an experienced therapist, and when compared to the accounts of others, I corroborated her opinion. She got vulnerable, as she expounded on her desire to have had support:

I don't know, but I just felt like it would've been good if I had a group of people that understood what I was going through and had counseling from a preacher who had experience in that as well. Because some of the things that were said I just thought were really just like, could be kind of cold...

Moreover, more recent body of research corroborates the findings of this study regarding the ineffectiveness of pathologizing partners of sex addicts by using the co-addiction/codependence model, as well as the therapists’ dissatisfaction with this approach (Weiss, 2019).

Additionally, the passing of time did not appear to have had as much of an impact on her healing journey, especially when compared to the other eleven participants. In fact, it seemed that her intrusive rumination and level of meaning-making were similar to that of Martha, the most recently divorced out of all participants. It would be difficult to measure the influence that the passing of time and therapy has on PTG for FPOSA, but it is certainly a discussion need to be

had in future research studies (Calhoun & Tedeschi, 2018). I postulate that engagement in therapy has more impact on predicting PTG than the passing of time.

A common thread in the body of research is the role that social support and disclosure to such support played in the development of PTG (Cobb et al., 2006; Lasser et al., 2017; Lilly & Valdez, 2015). More than three fourths of the participants in the current study emphasized the significant role the community of former partners of sex addicts had on their capacity to find strength. Those who fought the same battles before them were ready to offer a listening ear, emotional assistance and legal advice. Their credibility regarding the experience of betrayal trauma and post trauma growth aided FPOSA in incorporating new perspectives. This finding echoed the consensus that supportive others play a substantial role in crafting narratives about the changes that have occurred and in the meaning-making that leads to schema change (Tedeschi & Calhoun, 1996).

Social support satisfaction was a significant predictor of PTG in other studies (Lasser et al., 2017; Neimwyer, 2001; Tedeschi & Calhoun, 1996). Telling the stories to one another resulted in a sense of safety and closeness that was surprising, even to them; this was a common outcome in several studies, especially ones that researched PTG in bereaved parents and relational trauma (Anderson et al., 2012; Jenks, 2014; Lilly & Valdez, 2017; Miller, 2018; Znoj, 2014). This suggests that peers who can discuss the process of PTG are often the most effective in encouraging deliberate rumination, gently confronting the shattered core beliefs and assisting FPOSA with understanding the journey towards healing.

As aspects of trauma were accepted with the help of others and with psychological engagement, new meaning was constructed, and life goals were revised. In the face of profound coping challenges FPOSA created or discovered new possibilities regarding their careers. Amidst

emotional exhaustion and financial limitations –due to the process and expenses of divorce– FPOSA found rewards for their behavior in internal rather than external sources, as it was the case, for many, prior to being married. They started business, they pursued new degrees, and they surprised themselves with their self-efficacy. This internal locus of control positioned them for self-efficacy, which in turn led them to try to master challenges they never thought they could master before. This hardiness that helped create new mindsets reflects an active problem-focused approach to coping that seems indicative of the type of deliberate rumination that occurs in PTG (Tedeschi and Calhoun, 2004). The present research supports the findings of previous qualitative research (Lilly & Valdez, 2017; Soo & Sherman, 2015; Jenks, 2014).

Both positive and negative changes should be considered for the comprehensive understanding of PTG (Linley & Joseph, 2004). Wright (1989) theorized that PTG coexists with the residual of trauma since any growth after trauma is the result of attempts at psychological survival. FPOSA's encounters with trauma indeed resulted in a recognition of their own strength, and yet it also produced interruptions in lifestyle and a new set of financial burdens. The women touched on this topic suggesting that a disengagement from previous goals and assumptions was necessary. They had to do the work of grieving financial security, comfortable retirements, or the gift to be a stay-at-home mother in order to allow some degree of constructive cognitive processing to occur. According to Tedeschi and Calhoun (2004), the production of this schema change is a big contributor to the experience of PTG.

### **Journeying from Spiritual Bypassing to Authentic Spirituality**

A theme that is strongly represented in qualitative studies was that of an improved spirituality (Jenks, 2014; Lasser et al., 2017; Senter & Caldwell, 2002). What makes this theme unique in this study is that FPOSA clearly described their changes in spirituality as a shift from

spiritual bypassing to authentic spirituality. Masters (2010) characterized spiritual bypassing as “a very persistent shadow of spirituality, manifesting in many forms, often without being acknowledged as such” (p.2). Various forms of spiritual bypassing present in literature were present in the FPOSA’s lives prior to the disclosure or discovery of the sexually addictive behaviors: “exaggerated detachment, emotional numbing and repression, overemphasis on the positive, anger-phobia, blind or overly tolerant compassion, weak boundaries, debilitating judgment about one’s shadow side, and devaluation of the personal relative to the spiritual” (Masters, 2010, p.2).

Authentic spirituality is a mature relationship with one’s faith and their God and occurs when a person holds her beliefs about God in tension with her experience of God’s action or inaction in her life (Francis, 2011). A failure to hold in tension the eternal, unconditional love of God with the tragedy of human existence has similar effects to those resulting from psychological inauthenticity: a sense of dissonance, reduced self-esteem, and less satisfaction with life (Senter & Caldwell, 2002). The women interviewed reported that following betrayal and loss they were able to hold in tension both notions, “God is faithful and true” and “this seems too devastating for words,” perceiving this ability as a positive outcome of trauma. Moreover, they credited their newly found authentic spirituality to surviving the aftereffects of betrayal trauma. Mary speaks for the collective when she states:

As I ponder the situations that seem devastating in the lives of those I love and in my own life, I question why has God allowed these traumatic things to happen? ...Who am I to say that it would have been better to protect us from these things instead of allowing them to happen? Father God walks us through these

trials and then brings healing, restoration and redemption. God brings beauty from the ashes.

Interestingly enough, even though the women reported wrestling with God, their trauma did not lead many to question their faith or to step away, even temporarily, from what they believed about their Higher Power, as it is the case in other studies, not even when trusted clergy retraumatized them; forms of spiritual abuse were also a subtheme in Lasser et al., 's study (2017) who found that the least helpful professionals identified were clergy members (Anderson et al, 2012; Jenks, 2014; Levitt, et al., 2015; Yick, 2008). Instead, the profound suffering added value to their life by offering a new understanding of the person of God and fostering deep union with God represented by matured and humble cooperation with him and an acceptance of suffering. Participants described becoming more spiritual and mystic like and less religious throughout the healing process, and yet feeling the most authentic, "fully themselves." Authentic spirituality paved the way to an authentic self, to congruence, accountability and autonomy. In the words of Bloesch (2007), "authentic spirituality is not reducing oneself to nothingness, but elevating humanity to fellowship with the living God" (p. 30). What this suggests is that a restoration of the participants true humanity took place, which is exactly what authentic spirituality calls for and what evidenced PTG (Bloesch, 2007).

### **Changes in Relating to Others**

A common theme in the body of research as well as in the current study was that, as a result of reevaluating their lives in the aftermath of betrayal, participants did not keep old relationships and sought new ones that offer them the support needed (Krosch & Shakespeare-Finch, 2016). Some of the relationships they left were with family members, and some were with individuals pertaining to various social circles. Additionally, for the majority of participants this

shift encompassed distancing from a long-standing relationship with their church communities, as data suggests that FPOSA found a new “church” inside a community of women who had experienced betrayal trauma. This is a subtheme present in studies that researched PTG in the IPV population where participants reported abandoning or changing their religion altogether or distancing themselves from faith communities because they were experiencing discomfort, distress or re-traumatization (Jenks, 2014; Krosch & Shakespeare-Finch, 2016; Lasser et al., 2017).

Data suggests that the gradual process of altering their relationships with others was in part a reaction to feeling suffocated and stuck in the crazymaking of the boundaryless addict, and in part a product of stripping away a previous identity that served the marriage. The result of grappling with shattered connections and loss of trust was becoming increasingly more self-aware and self-reliant and building a sense of self that valued boundaries and was protective of personal space. FPOSA described internal shifts in the way they operated in relationships; betrayal forced them to live in vigilance of others’ intentions and taught them to operate by paying close attention to what and who could be potentially harmful or boundaryless. Nine out of twelve participants discussed the growth experienced in the area of dating; having a second chance at love FPOSA had healthy boundaries and were enough in touch with their internal warning system to ask questions such as “what’s happening?”, “am I ok with this?”, “do I want this?”, “what do I need here?”. This demonstrates the presence of growth after trauma as poor boundary-setting leading to unhealthy styles of relating to men are commonalities shared by current partners of sex addicts (Wildmon-White & Young, 2002).

Previous research corroborates these findings. IPV survivors in Jenks’ (2014) study reported undergoing a process of re-evaluating friendships post IPV and altering their

relationships with others as a result of becoming more self-reliant, stronger and emotionally healthier. These conclusions are reflected in the current study as FPOSA reported that as a result of betrayal, their relational skills improved, more specifically the ability to recognize authenticity and distinguish between safe and unsafe people. Most studies concluded that relational trauma resulted not only in a sense of caution and wisdom in regard to boundaries with others, but also in a deepening of relationships with those friends that survived the post separation period, and who felt safe, reliable, “authentic,” and “acquainted with suffering” (D’Amore et al., 2021; Lilly & Valdez, 2015). A sense of maturity, wisdom and what they called “selfishness” with their boundaries was a clear result of psychological growth.

Not all the relational changes that FPOSA had undergone were considered positive or painless. Yet, the data did not suggest that the women perceived the loss as devastating. Instead, what was implied was the loss of certain relationships was a cost they understandably were willing to pay in order to feel safe or stay true to who they had become. What had become essential to them post trauma was increased self-awareness, and a clear recognition and expression of personal needs and wants. Awareness of their needs and wants and assertiveness in having those needs met in relationships was designated as growth by FPOSA. This is a prevalent common thread documented across populations reporting relational trauma who have experienced PTG (Cobb et al., 2006; D’Amore et al., 2021; Gonzalez-Mendez & Hamby, 2020; Jenks, 2014).

This change in relating called for a rise in authenticity and with a new-found appreciation for “real”; participants became more able to integrate and align their core sense of self and their environment. In the aftermath of betrayal trauma FPOSA loathed the idea of keeping up a social facade or hiding versions of themselves from the public sphere. This experiential psychological



fit between one's true self and their environment –characteristic of authenticity– seems to have resulted in further feelings of needing synchronicity and wholeness in their relationships with others and with their own selves (Schmader & Sedikides, 2018). This finding indicates that they had moved from shame and feeling that they had to lie and hide to beginning to rebuild a more authentic, holistic self-related schema, a schema that conditioned them to require the same levels of functioning in relationships. One's perceived authenticity and the attunement to their perceived true self are known central markers of healthy psychological functioning, and a predictor of psychological well-being, including life satisfaction and self-esteem, which evidenced positive adaptation in FPOSA (Goldman & Kernis, 2002; Schmader & Sedikides, 2018).

For FPOSA authenticity went hand in hand with vulnerability, as if the speechless heartbreak of betrayal primed them for loosening of control and for tolerating the uncertainty of emotional exposure. I postulate that what made space for the process of grief and/or meaning making was entertaining the kind of “naked and unashamed” vulnerability that allowed for a congruence when it came to being with existential questioning. Literature pertaining to PTG showed that an increased desire for vulnerability is most often associated with the identification of internal strength, which corroborates the finding that an empowered sense of self promoted the desire for vulnerability (Anderson et al., 2012; Barron-Wearsch, 2020; D'Amore et al., 2021; Tedeschi et al., 2018;). Additionally, the desire for vulnerability post trauma is a common growth outcome in the literature related to PTG in the relationally betrayed as survivors report seeking to be with people who make them feel their most authentic selves (Barron-Wearsch, 2020; Lilly & Valdez, 2015; Tedeschi et al., 2018).

Although mentioned in some studies, a less common theme in the PTG body of research was changes in perceptions related to family of origin, a finding that suggested that FPOSA underwent cognitive and emotional growth (Dyjakon & Rajba, 2021). Dealing directly with how they related to their family afforded them opportunities for reconstructive changes that made a path for them to move forward towards personal growth. Elizabeth joined a family business proving to herself that she was capable, smart and strong. Rebekah welcomed her mother's help in the process of restarting her life, buying a house, and, together, completely remodeling the house. Hannah, Miriam, Elizabeth, Ruth and Magda expounded on how life's painful circumstances resulted in closer family ties and a newfound gratitude for family.

Families of origin with abuse (emotional, physical, sexual), disengagement, abandonment, and chaos are a commonality shared by partners of sex addicts (Crawford et al., 1996). Therapeutic engagement and self-help literature assisted them with the investigation of interactional patterns in the family of origin, as well as attachment styles and generational trauma. There was a noticeable difference in systemic awareness and self-awareness between the participants who self-reported attending long-term individual therapy and those who did not. Their level of self-analysis related to how and what predisposed them to marrying a sexually addicted individual was noticeably deeper. Data suggested that for Mary, Rachel, Ruth, Esther, Miriam, Deborah, Sarah and Magda understanding the effects of the family of origin dynamics aided them in reaching a radical acceptance that in turn promoted the grief process, assisted them in reaching self-forgiveness, and even provided a certain level of compassion for the former spouse. Although not a topic of research in the current study, the association between therapeutic intervention and PTG was evident. The research of this relationship has not received enough

attention in the literature yet is it clear that it would be important to understand the role of therapy in the development of PTG (Calhoun & Tedeschi, 2018).

### **Existential Wrestling That Led to Shifts in Worldview**

The findings showed that all twelve FPOSA experienced a variety of changes in core beliefs regarding the world and themselves as individuals, as daughters, and as mothers. The experience of betrayal trauma led them to question the meaning of life and previously held beliefs about religiosity and spirituality, family of origin, relationships and systemic oppression. The world was no longer a place where justice and reconciliation are possible. Previous studies found that the experiences perceived to be traumatic lead to existential wrestling regarding the meaning of life, religious beliefs and changed life priorities (Cann et al., 2010; Doherty & Jenks, 2014; Lasser et al., 2017; Mautz, 2019; Scannell-Desch 2023;). Doherty & Scannell-Desch (2023) found that women who had experienced IPV reported a new appreciation of life and that they were proud of the peace and meaning dwelling within them. The sense of gratitude they felt was a driving force to actively help others.

The outcome of being sexually betrayed caused a disruption in core beliefs regarding sexual purity and the sanctity of marriage. The data suggested FPOSA were ambivalent about how much they now valued refraining from sex before marriage in comparison to how much they had prior to getting married. They also no longer believed that marriage was the way to feeling complete or to happiness. A loss of innocence and a loss of respect for the institution of marriage as a result of coming to terms with the reality of broken humanity was a shared theme in other studies researching survivors of relational trauma (Jenks, 2014; Khan, 2020). Lastly, due to the shame and/or the marginalization experienced, FPOSA reported a shift from valuing social status and being socially desirable to, above all else, treasuring authenticity and anything that felt

“real.” These findings support the body of research that found disruptions in such major core beliefs were positively correlated with high measures of posttraumatic growth (Anderson et al., 2012; Joseph & Linley, 2005; Lasser et al., 2017; Tedeschi & Calhoun, 2004;1996).

As a result of relational trauma, the way motherhood was perceived also changed. Eleven out of twelve participants reported undergoing an existential crisis on behalf of their children as they gradually understood the effects that these traumatic life events would have on them. The mothers had to wrestle with confronting the loss associated with their children having two households, with their inability to protect, guide or supervise when not in their homes, and with losing various dreams related to offering their children “normal.” What they had assumed about family, parenting, family vacations, major life events, holiday traditions and grandparenting was shattered only to expose the human fragility and uncontrollability, leaving them with views that reflected a meaninglessness and randomness that seem to define the distribution of human outcomes. Yet, they reported that the “gift” given by their suffering was a greater appreciation of the simple joys of being with their children; they treasured these relationships much more than before the traumatic events due to the mother-child bond growing stronger, richer, and deeper. No known study has specifically focused on the positive adaptations related to motherhood following betrayal trauma.

A revised core beliefs structure facilitated a process of recreating or recovering their self-related schemas. Not only did participants report major shifts in values and priorities, but they also reported high levels of motivation for new experiences and joy at the notion of being “not in chains” anymore. Openness to new experiences has been linked to higher PTG (Tedeschi & Calhoun, 2004). Due to the financial impact of divorce, nine out of twelve interviewees were forced to reprioritize their lives and start new careers. The findings suggest that they sought

careers congruent with their new restored selves, careers that offered a sense of purpose, and/or careers that emphasized talents and gifts unfamiliar to them prior to the trauma. This evidenced a higher level of functioning and the presence of PTG.

Forgiving themselves as women and as mothers, was another outcome of the wrestling with questions of comprehensibility. Findings showed that processing and reprocessing the trauma in an effort to mentally resolve it encouraged a grappling with regrets around what they wished they had done, to then settling into “I have done all I could do.” The engagement in the process of making meaning facilitated self-compassion and self-forgiveness, and additionally, made room for the process of grieving to take full effect. Findings suggests that FPOSA found self-forgiveness to be the most evident indication of trauma transformation (Valdez & Lilly, 2015). The body of research echoes this finding; individuals who have been harmed or betrayed by a loved one experience existential concerns and begin seeking answers to why they were abused, leading to questions of “the larger operating patterns which promote well-being and disease” (Bowland, 2011, p.7). This finding supports other studies found self-compassion to be a facilitator of healing (Crowder, 2016; Smith, 2003). In addition, self-compassion has been demonstrated to have a positive impact on posttraumatic processing, which suggests that FPOSA found self-forgiveness to be the most evident indication of trauma transformation (Valdez & Lilly, 2015).

Other studies found that when relational trauma occurs, the existential wrestling with self-forgiveness is a common outcome, an outcome that originates in self-compassion (Jenks’s 2014; Kaye-Tzadok & Davidson, 2016; Heintzelman et al., 2014). It is through self- forgiveness and other forgiveness that trauma survivors find a sense of wholeness again (Crowder, 2016; Tedeschi & Calhoun, 2004; Smith 2003). In Valdez & Lilly’s study (2015) self-compassion had

a positive impact on posttraumatic processing. Similar to the participants in the studies, as FPOSA continued to learn how to feel their emotions, they gradually came to terms that what happened was not their fault (Barron-Wearsch, 2020; Brosi et al., 2020; Valdez & Lilly, 2015).

More than half of participants reported not only forgiving themselves but also forgiving their former spouse. Rachel, Magda, Miriam, Mary, Ruth, Esther, Hannah and Sarah discussed where they were on their journey of forgiveness. Forgiveness seemed to be a process. Some participants reported still being in that process of releasing feelings of resentment toward the sex addict's hurtful acts and continual betrayal, while also nurturing compassion related to the former spouse's childhood trauma. Eight out of twelve FPOSA took the time to expound on their understanding of how their former spouses' childhood abuse had opened the door to destructive coping mechanisms such as sex addiction and self-abusive behaviors. They were not excusing the behaviors, but instead they were trying to make sense of something so unforgivable so that they could forge their own path to forgiveness necessary to making peace with the randomness and cruelty of what life had dealt them.

Forgiveness did not mean that FPOSA had any desire for reconciliation with the sex addict. Instead, it meant that they had the ability to choose to let go of anger and resentment towards the perpetrator. Congruent with other studies, forgiveness appeared to be an act of will rather than of emotions, since some FPOSA hoped that the sex addict would willingly find his way to "heal his trauma" (Suchocki, 1994). This willingness to forgive the sex addict being fully aware of the nature and complexity of the violation implies that FPOSA had taken a close look at their trauma and have processed the traumatic experiences (Suchocki, 1994). PTG related literature shows that it is through this journey that survivors will begin remembering their trauma differently and integrating it in their lives, rather than erasing it or avoiding it (Brosi et al., 2020;

Cann et al., 2010; Cobb et al., 2006). These attempts to integrate interpretation of the trauma in hopes to find a sense of coherence and purpose is considered the result of the evolution of PTG (Grad & Zeligman, 2017; Stein et al., 2018).

### **Understanding How PTG Unfolds in FPOSA**

To my knowledge, no qualitative studies have been conducted with the aim to explore how the phenomenon of PTG unfolds in relationally betrayed women. Some longitudinal and/or a cross sectional quantitative studies have considered how different types of trauma may lead to different patterns of PTG, yet no qualitative inquiries have explored the way the phenomenon unfolds in relationally betrayed women (Rzeszutek & Gruszczyńska, 2018; Sawyer et al., 2010). Thus, in general the need to explore how PTG unfolds is mentioned in most PTG studies' "future recommendation" sections.

As I was following an inductive path of analyzing the data to develop an increasingly detailed knowledge of the topic, a new inquiry developed: were the participants also, possibly, answering another question I was not asking: how does PTG unfold in FPOSA? In IPA fashion, I honored the voices of my participants and what emerged was the idea that trauma transformation happened in a pattern that followed seven phases: awakening to the reality of betrayal, crisis of self-doubt and self-questioning, shame and isolation, deliberate rumination initiated by seeking wise counsel, empowerment, authenticity, and self-forgiveness that involved engaging with the process of grief. The process participants reported going through was not bound by a sequential order but rather a pathway unique to each individual FPOSA.

Data suggested that Esther, Ruth, Rebekah, Rachel, Deborah, Magda, Miriam, Elizabeth, Martha and Sarah seemed to have gone through these phases in a methodical fashion, from time to time weaving in and out of self-doubt and self-questioning and deliberate rumination. It is unclear, yet postulated, that the weaving in and out of these two phases happened due to the fact

that all participants, with the exception of Hannah, were separated for at least two years prior to divorce, and most were attending couples counseling for at least six months before the separation. Due to the nature of their circumstances Mary and Hannah had a slightly different pathway to PTG (Mary reported having to live long-term in physical and emotional abuse, and Hannah's marriage ended abruptly without an explanation, initially). It appeared that they both felt a sense of empowerment only after repeatedly circling through the crisis of self-doubt/questioning and deliberate rumination. I hypothesize that Mary felt trapped due to intimate partner violence which prevented her from feeling strong enough to fight initially, and that Hannah's lack of engagement in psychological help interfered with the process of making sense of the shock and the complexity of betrayal trauma.

It is not difficult to observe at this point of the unfolding of PTG in FPOSA that the journey towards growth follows the pattern of Tedeschi and Calhoun's (1996) model. The traumatic event of disclosure or discovery triggered the emotional turmoil of self-doubt and self-questioning which led to intrusive rumination and strengthened feelings of shame and powerlessness. The intrusive rumination experienced reflected the emotional distress instigated by the disruption in core beliefs and by the disorganization of self-schema in the aftermath of betrayal trauma (Tedeschi & Calhoun's 2004; 1996). Most participants reported this as a "frozen" state of mind, as they began attending marriage therapy while, unbeknownst to them, the sexually addicted husband remained engaged in sexually addictive behaviors. When they looked back at this part of their journey, FPOSA recognized that they were in "no-man's land," making it difficult to work through the suffering or to begin to mourn; in this stage they took responsibility for choosing to minimize the severity of addiction and the depth of their despair.



This state of mind combined with the shaming nature of sex addiction triggered the trauma of separation and isolation.

The suffering and the high anxiety characteristic of this “back and forth crazy-making” stage challenged cognitive structures and core belief systems present prior to trauma. Pre-trauma FPOSA saw the world as good and benevolent, and marriage as a story about how “we grow old together” and raise children and grandchildren while still in love. Post trauma FPOSA uncovered a different reality, which is that of an unsafe and evil world, a world where anything can happen at any time. Attempts to cope with the shocking reality of betrayal resulted in self-questioning and self-doubt. I postulate that this phase was essential to accommodating to a new reality. After repeatedly listening to the interviews, I concluded that the “back and forth” stage in addition to the two years of separation were necessary to the process of restructuring the personal narrative that would accommodate the unexpected traumatic events. This corroborates Calhoun and Tedeschi’s (2006) theory that proposes that intrusive rumination is a necessary antecedent to the later growth related to changed beliefs and goals.

It was evident to me as a therapist and as a CSAT that the emotional distress initiated both intrusive rumination and deliberate rumination. Echoing other studies, intrusive rumination—automatic in nature—was present in the beginning stages of healing, whereas deliberate—reflective in nature, and representative of psychological engagement that aided with one’s attempts to make sense of what happened and what was left in the aftermath—played a significant role in the later stages (Cann et al., 2011; Calhoun & Tedeschi, 2006; Jenks, 2014; Laaser, 2017). A here-and-now example is that without ever being prompted, eleven out of twelve participants took time to describe the experience of betrayal (and at times abuse) in much detail, offering timelines and expounding on phases of their healing and on people who had

facilitated each of those phases. It felt as though they could not speak about the transformation of trauma without first making sure that the depth of their pain was understood. This supports Tedeschi and Calhoun's (1996) theory that the story must be told for transformation to happen. It corroborated that the power of self-disclosure is indeed a predictor of PTG (Dyjakon & Rajba, 2021; Laaser et al., 2017; Tedeschi & Calhoun, 2004).

In the latter stages of healing, intrusive rumination was replaced by deliberate rumination (Tedeschi et al., 2018). Deliberate rumination brought into question notions of the world being a fair place and facilitated a wrestling with the meaning and purpose of life previously considered only in a superficial fashion. Through psychological and social support engagement FPOSA began to adapt to their changed circumstances by seeking to integrate their experiences into their life narrative. When they were encouraged to tell their stories, they were able to attribute new meaning to their experiences, thus making it possible to change the meaning of suffering and overcome it (Labronici, 2012). Empirical studies have consistently evidenced positive association between deliberate rumination and PTG (Cann et al., 2011; Cobb et al., 2006; Dyjakon & Rajba, 2021; Morris & Shakespeare -Finch, 2011). For FPOSA, facing existential questions developed a revised core belief structure that encouraged self-discovery, change, growth, and meaning, which demonstrated the presence of PTG (Labronici, 2012).

This wrestling with the new reality they were forced to face led FPOSA to seek a more deliberate rumination by engaging in therapeutic help or self-disclosure to social support. This stage represented a sharp turn in their journey towards PTG, as in the participants reported this to be the point of disengagement from the addict. Participants implied that this point in their journey was the beginning of a process of deep and existential radical acceptance of the inability or unwillingness of the sexually addicted spouse to choose recovery. Thus, self-disclosure and

seeking social support was an effective way to manage the emotional distress. Self-disclosure is one of the pillars of Tedeschi and Calhoun's (2004;1996) model and was found to alleviate distress and to affect PTG processes in other studies (Jenks, 2014; Soo & Sherman, 2015; Valdez & Lilly, 2015; Ulloa et al., 2015).

With the help of wise counsel FPOSA began a process of sorting through what needed to be kept, what needed to be adjusted and what had to be discarded; this insured a changed identity with new beliefs, goals and behaviors to be incorporated in their new selves. The influence of helpers in facilitating the passage from rumination to growth has always been a relevant component of the PTG model (Tedeschi et al., 2009). Not only the current study clearly echoes this supposition, but it also suggests that the path towards empowerment would have been much less clear and filled with much more added unnecessary pain and confusion. There is ample evidence that the grief process began in this phase. Deliberate rumination and others' support helped FPOSA to "just let go" so they could find a way to hold on to the parts of themselves that would help them survive and face the next step in the journey. Grief being an aspect of rumination is a common theme in the literature, thus examining its role in the PTG process would add to our understanding of trauma transformation (Tedeschi et al., 2009).

The cognitive and emotional processing increased self-awareness and self-reliance in FPOSA, which in turn facilitated empowerment. Empowerment in their terms meant that they began to take steps to "face their fears" (instead of "shrinking back again"), to "pull the trigger" to divorce proceedings, to "do the hard thing", and to "stand again" so that they would "not allow themselves to ever be treated like that again." The more steps they were forced to take in order to take charge of their lives, the more courage they found in themselves, and the more powerful they felt. This juncture occurred when participants reported being ready to step fully

into the “survivor of betrayal trauma” identity, in order to leave behind the victim role and the victim mentality, which was equated with “weakness”, “being stupid/clueless/dumb” and a “lack of sense of self.”

Feeling empowered meant that FPOSA found the motivation and the toughness to attain new coping skills and strategies to go about divorce proceedings and custody battles against their then spouses. Half of participants labeled their sexually addictive spouse as a “narcissist” and spoke about the strength and endurance needed to face a legal system ignorant of the complexities of addiction and biased against female survivors. This toughening promoted self-confidence and increased self-efficacy, which in turn opened the doors to new careers and new life opportunities.

All these growth outcomes are common in the PTG literature, especially within the body of research related to relational trauma (Jenks, 2014; Matheson et al., 2015; Valdez & Lilly, 2015). What I found unique to the present study was an unseen yet palpable depth to their sense of feeling powerful, almost as if FPOSA felt anchored in and with a force bigger than themselves which grounded them in a transcendent, unshakeable, greater than the present reality kind of peace. I corroborated participants’ statements when I hypothesize that within the framework of their new-found authentic spirituality FPOSA’s view of God and their relationship with God played a significant part in their feeling powerful.

As seen in Figure A, feeling empowered, paired with continual engagement in therapy, activated a desire for authenticity. Authenticity was considered the pinnacle of transformation because it likened maturity and congruence, as well as resembled healthy womanhood. The words used to describe authenticity were particularly meaningful, among them the following: “light,” “out of hiding,” “façade no more,” “feeling connection more strongly,” “feeling awake,”

“to let be what it is without shame or judgment attached to it,” “vulnerable and open,” “looking outside my life, finally” (denoting having a third eye awareness) and “taking ownership for what was mine.” They conveyed an exodus, a sort of escaping a puppet land, a play they did not author.

Authenticity and feeling empowered facilitated the next phase of FPOSA’s process of change which was meaning making that led to self-forgiveness. The emotional adjustment enabled them to finally put to rest the wrestling with uniformed regret that fueled unforgiveness towards the self. It also facilitated the process of mourning the relationship and what the relationship could have been, which in turn enabled FPOSA to desire to put to rest any bitterness and resentment. The connection between self-awareness, self-confrontation, self-reliance and self-compassion is one the main threads in the PTG literature (Tedeschi & Calhoun, 2006; 2004). Evidence of PTG, FPOSA developed the ability to hold feelings of suffering with a sense of warmth, connection to the present moment, and curiosity, which suggests greater psychological and relational health, a new-found optimism and an improved sense of self-worth (Neff et. al, 2007; Neff, 2003a, 2003b).

### **Implications for Counselors and Counselor Education**

The results of this study provide practicing counselors, supervisors, and counselor educators information to consider when the counseling work involves FPOSA. What is evident from the findings of this study is that the engagement in individual therapy, group therapy and support groups positively impact growth and meaning in life following betrayal trauma and its effects. Thus, counselors should find ways to facilitate this population’s journey towards hope and healing by encouraging the exploration of treatment goals as they relate to various aspects of PTG, such as relating to others, new possibilities, personal strength, spiritual change, and

appreciation of life. In addition, since spirituality and the processing of the meaning of theodicy served as such important resources that enhanced FPOSA's ability to assimilate betrayal trauma, counselors should incorporate treatment interventions that lie at the intersection of trauma and restoring a personal relationship with a Higher Power.

Supervisors who support counselors in their work with betrayal trauma could benefit from what this study's findings regarding the significance of processing grief and its stages in this population. Since the intersection between meaning-making and grief was shown to be a vital element of PTG, counselor educators should train counselors-in-training on the stages and manifestations of grief, as well as normalize the slowness, steadiness and patience required to guide FPOSA to healing. Furthermore, this study confirmed that peers who can discuss the process of PTG are often the most effective in gently confronting the shattered core beliefs and assisting FPOSA in their process of finding a new life. It is important for counselor educators to expand the knowledge surrounding the usefulness of attending support and therapeutic groups since it is expected that this modality might advance growth post trauma. The above concepts could be highlighted in courses that emphasize processing grief, dealing with addiction, as well as counseling skills development, assessment, and counseling theories.

The current study implicitly showed that treating FPOSA requires that therapy be flexible, since each phase of the journey towards PTG called for a careful selection regarding treatment modalities and counseling theories. Thus, adaptability in utilizing and developing treatment plans is crucial for practicing counselors working with this population. Therefore, counselor educators and those developing treatment protocol should center interventions around fostering a reconnection with FPOSA's parts of selves that had to stay hidden, as well as of re-establishing a healthy relationship with their bodies. Bringing more contemporary education -

such as Somatic-Experiential interventions- around issues that lie at the intersection between mind, body and trauma could lead to more effective treatment of partners of sex addicts. One such intervention that could foster PTG is guided imagery around imagining a positive future; this exploration of possibilities and problem solving would make room for envisioning the transformation of trauma while embodied.

Lastly, this study confirmed that graduate school programs do not adequately train their students around issues of sexual compulsivity and betrayal trauma (Walter & Spengler, 2016). Understanding the emotional support needed for current and former partners of sex addicts to heal would require counselors-in-training to learn how to tolerate discomfort related to potential countertransference or to value-charged subjects such as pornography and sexual compulsivity. Counselor educators should not only carefully measure the counselors'-in-training perceived self-efficacy regarding adequately providing services to this population, but also offer curricular integration that can assuage students in identifying relevant client issues as they relate to assessment, diagnosis, and treatment relational and betrayal trauma. For the same reasons, clinical supervisors should encourage supervisee to attend workshops who can provide knowledge on how to conduct therapy in ways that would invalidate betrayal trauma or exacerbate the cycle of addiction for the addict. For example, educating future therapists on how and why the attachment and crisis-centric model of prodependence could be more effective than the co-addiction/codependence model might be the most effective way to help this population move towards PTG (Weiss, 2019).

### **Limitations of Study**

Due to the nature of this research and population, the study contains some limitations, thus the findings should be interpreted with the knowledge of these limitations. To note, my

description of the findings constitutes a retelling of the lived experiences of only twelve participants. A noteworthy limitation of this study was that due to the nature of the format, the vast amount of rich data collected could not be appropriately represented in the allotted pages. Moreover, the emergent nature of qualitative research and the use of a semi-structured interview protocol may be considered limitations since the knowledge constructed was based on FPOSA's own interpretation of personal learning and lived experiences. Participants self-selected along criteria regarding marriage to a man with a diagnosed sex addiction, yet no assessment occurred to verify the condition of the former spouse. However, access to these participants occurred through professional gatekeepers that identified the interviewees as meeting the study parameters.

Another limitation was the study's research design, as it utilized nonrandom sampling methods due to the criterion-based nature of the research. Thus, since the study utilized convenience-sampling methods, its external validity might be affected. The use of a volunteer purposive sample could lead to selection bias because it causes the participants in the sample to not be representative of the population. People who volunteer to participate in a study are more likely to have specific characteristics or qualities that are not present in people who decline to participate. In addition, this study focused solely upon female former spouses. Thus, the findings are not generalizable to all genders of current or former partners of sexually addicted individuals. Furthermore, no previous empirical research was conducted related to the special population under study, thus no population norms exist.

One additional limitation is the size of the sample and its lack of diversity concerning gender, race, ethnicity, religion and socioeconomic status. 100% of the participants identified as female (n = 12), and 100 % of the participants identified as White (n = 12). Participants were



highly educated, with 100% completing a bachelor-level degree or higher and self-reported a middle to high income levels. Eleven out of twelve participants self-reported as evangelical Christians while one participant did not want to report her religion, yet she expounded on having God a source of strength; this uniformity in religious beliefs could have potentially skewed the findings since spirituality is known to provide unique meaning-making and resiliency functions in the face of trauma (Currier et al., 2014). All the above characteristics signify a non-standardized approach, making it difficult to replicate this study.

Lastly, a possible limitation of qualitative data collected with IPA is the interpretation of the researcher. Because IPA relies on participants to effectively articulate their experiences, weak interpretation can limit the utility of the data (Smith et al., 2009). Reflexivity, while often viewed as a pathway to building trustworthiness, can also be challenging to validate (Brocki & Weardon, 2006). While IPA offers descriptions of lived experiences, its focus is on participants' perceptions without necessarily trying to explain those perceptions or to define "representational validity of language" (Willig, 2017, p. 94). This might have limited my ability to interact with all levels of interpretation (Brocki & Weardon, 2006; Willig 2017).

### **Recommendations for Future Research**

This study provides direction for further research into the posttraumatic growth experience of current and former partners of sexually addicted individuals. Future research is needed to explore ways to provide optimal support to help survivors of betrayal trauma heal and rebuild a new life. Counselors, advocates, and professional organizations are responsible for understanding the factors and processes involved in healing in the aftermath of betrayal. Thus, it is essential to further expand the empirical knowledge and understanding around how the following factors might predict and impact the development of PTG in this population:

awareness of the effects of the family of origin dynamics, spirituality, self-forgiveness, and engagement with various therapy modalities.

Concurrent with implications of previous studies is the difficulty of assessing the role that therapy has on PTG, and yet it is certainly a discussion need to be had in future research, especially considering that this study showed the passing of time did not appear to have had as much of an impact as individual therapy and social support (Calhoun & Tedeschi, 2018; Crowder, 2016; Valdez & Lilly, 2016). Understanding that deliberate rumination aids in the empowerment of FPOAs as well as meaning making and grief processing, research on the effects of therapy should be prioritized. Noteworthy also is that in order to capitalize on the partners' movements towards PTG more research is needed to better comprehend what type of therapy modalities would promote PTG.

Additionally, knowing that spirituality plays a significant role in promoting PTG, more research efforts should be focused on understanding how survivors' views of God contributes to the growth process. This knowledge would help counselors in their intervening efforts to punctuate partners' narratives and to aid with the exploration of new religious belief systems. Moreover, it would be beneficial to study the impact of spiritual bypassing, demonstrated through encouragement to remain in a relationship with a sexually addicted individual due to misquoted scriptures, misogyny and/or the self-perception of a partner's experiences.

Lastly, while limited in its scope, this study provided an initial attempt at understanding how PTG unfolds in FPOA. Longitudinal studies are necessary in order to show how partners of sex addicts move toward healing and growth post trauma. Such a study could explore the journey between shock and a new life and would answer questions such as: in what way do the shock and freeze reactions initiate PTG processes, how long until PTSD makes room for the

processes of PTG, and what are the most common predicting factors of PTG for partners of sex addicts? Traditional interventions with this population have been focused on coping with the PTSD and on healthy detachment from the addict, not on adequately operationalized constructs for thriving instead of surviving (Steffens, 2006). Future research should explore how distress and growth coexist by keeping an open mind and increasing awareness of growth in the therapeutic context to facilitate a more holistic view of partners as being resilient, capable and perhaps more fearless than one thought.

### **Conclusion**

The term “posttraumatic” implies that growth happens in the aftermath of an extremely stressful event while the term “growth” underscores that a person had developed “beyond one’s previous level of adaptation, psychological functioning, or life awareness” (Broderick, 1988, p.628). The findings of the current study showed that in the aftermath of betrayal trauma the twelve FPOSA did not simply return to normal, but they grew beyond their previous state as a result of experiencing trauma (Tedeschi & Calhoun, 2004). Evidence of posttraumatic growth were visible in several ways, such as: changes in self-perception, a new-found ability to listen and trust their own bodies, changes in interpersonal relationships, an embracing of authentic spirituality, changes in life perspective and worldview, and a desire for authenticity.

The conceptualization of posttraumatic growth (PTG) indicates that growth is both a process and an outcome, as in the seismic event initiates the development of a cognitive process that is used to cope with the emotional toll of trauma and assists with building new structures related to self and other areas of life (Tedeschi et al., 2009). The findings of the current study showed the presence of a process, not just an outcome. When following the progression of the process of transformation of betrayal trauma, the data revealed that FPOSA experienced growth

as sequence of phases of healing. Being awoken to the reality of trauma triggered intrusive rumination which fueled a crisis of self-doubt and shame that in turn promoted isolation. The self-questioning and the lack of resolution in marriage therapy (due to the addict's crazymaking) opened the doors to engagement in self-disclosure— in the form of individual therapy, group counseling and social support—which further promoted self-empowerment and the fostering of an authentic self ready to embrace a new life.

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## Chapter V: Manuscript

For every individual who struggles with out-of-control sexual behaviors, there is a partner or family member who is suffering through the painful effects of sex addiction. The effects of sex addiction and its many forms on partners of addicts have not been in focus before the last decade. Little attention has been given to adequate training for the counselors working with current or former partners of sex addicts, post-betrayal. Moreover, no research efforts have been made to investigate the capacity of former partners of sex addicts (FPOSA) to transcend the relational and betrayal trauma experienced in order to transform the suffering into a resource for new meaning and growth. Assessing and understanding possible post-betrayal growth is imperative to supporting the counseling field and therapeutic interventions that build resilience in overcoming the effects of betrayal trauma (Joseph & Linley, 2005).

### **Posttraumatic Growth**

The term *posttraumatic growth* was first used by psychologist Richard G. Tedeschi to describe the psychological transformation reported in response to traumatic life experiences; it suggests that trauma has the potential to add to one's life and can result in positive outcomes (Tedeschi & Calhoun, 2004;1995). The model of PTG that Tedeschi and Calhoun developed describes the process by which individuals move beyond the pre-trauma level of functioning by cognitively rebuilding new schemas that incorporate the trauma suffered, allowing for a new understanding of reality and the self (Tedeschi & Calhoun 2013; 2004;1996). The process of growth after a traumatic event happens in stages and within the framework of five areas of life, or life domains, that are measured with the aid of a psychological scales (Tedeschi & Calhoun, 1998; 2004). It can be inferred that FPOSA have the potential to transcend the relational and

betrayal trauma experienced and transform their suffering into a resource for new meaning and growth (Tedeschi & Calhoun, 1998; 2004; 2006).

### **Betrayal Trauma and the Therapeutic Setting**

The main type of trauma experienced by partners of sex addicts is betrayal trauma, which is defined as disclosed or discovered infidelity by Carnes (2011), and as any violation of an expectation for emotional/physical/ psychological safety and exclusivity by Whisman and Wagers (2005). The body of research shows that in response to their relationship with their sexually addicted partner women in these relationships report distressing trauma symptoms and trauma survivor-related behaviors characteristic to Post Traumatic Stress Disorder (PTSD) (Steffens & Rennie, 2006). Therapists' conceptualization of betrayal trauma defined by the internet has a substantial effect on the therapeutic approach taken with the betrayed spouse, and thus on the possibility of healing and personal growth post trauma (Ayres & Haydock, 2009; Carnes et al., 2005; Levine, 2010; Reef Karim & Chaudhry, 2012). Yet, studies reveal that many surveyed clinicians are not adequately trained to handle the many ramifications of the process of assessing and treating betrayal trauma in partners of sex addicts (Ayres & Haddock, 2009; Walters & Spengler, 2016).

### **Literature Review**

Research exists at the intersection of relational betrayal and PTG. Laaser et al. (2017) examined the presence of PTG in relationally betrayed women and factors that facilitated PTG. After completing PTG Inventory and the Core Beliefs Inventory (PTGI), the results showed that out of 202 participants more than 80 % reported some degree of PTG following the posttraumatic stress of the experience. When dealing with a spouse's sexually addictive behaviors, women's preferences for support in their journeys towards personal growth included:

individual therapy (72%), couples therapy (49%), full disclosure from the addict (50%), psychoeducational material (47%), forgiveness (44%), support groups attendance (40.5%), and intensive treatment (29%) (Laaser et al., 2017). The results also showed that women who met the criteria for PTSD experienced greater posttraumatic growth over time.

Growing evidence exists showing that PTG is found present in survivors of interpersonal violence. This is a significant finding since a strong link between pornography/sex addiction and intimate partner violence has been found in a few studies, strengthening the theory that there is a fine line between domestic violence and sex addiction behaviors (Bridges et al., 2010; Carnes, 1991; DeKesered & Hall-Sanchez Bridges, 2017; Foubert et al., 2019). For example, in Cobb et al.'s study (2006) sixty women, survivors of interpersonal violence, reported high growth on the PTGI, no matter the relationship status with the abuser. The participants reported stronger interpersonal relationships, increased self-awareness and ability for insight, stronger spiritual identity, and increased perceived control over their lives following the ending of their relationships. Contact with a role model who reported growth associated with dealing with an abusive partner was a predictor of posttraumatic growth in their study as well as in others (Anderson et al., 2012; Cobb et al., 2006; D'Amore et al., 2021).

Furthermore, the results of Valdez and Lilly's study (2014) suggested that the twenty-three women who survived intimate partner violence were able to redefine their interpretation of the world into an overall more positive framework perceived greater personal growth due to their interpersonal victimization. Brosi et al.'s study (2020) focused on the pathways survivors of intimate violence used to move towards PTG. When thirty-two women from two domestic violence shelters were interviewed, several themes emerged: deliberateness of action, ending the cycle for children, a changed perspective on life, and social support. These factors not only led to

PTG, but they provided a foundation for the decision to leave the abusive relationship and construct new assumptions about the world.

Noteworthy is that no research to date explores the phenomenon of PTG in FPOSA. Investigating the common meaning of PTG for FPOSA could advance the profession of counseling and reveal useful resources clinicians could use. An integrative conceptualization of such individuals can help practitioners facilitate a more direct path towards growth and healing, as well as inform counselors and partners on resources and interventions that can assuage the traumatic effects of being in a partnership with a sex addict.

### **Design**

I utilized an interpretive phenomenological approach (IPA) because it allowed me to explore deep emotional experiences characteristic of major life changes. The objective of a phenomenological research approach was to suspend assumptions in the inquiry process, so that an in-depth exploration of complexities and processes related to a phenomenon can take place through the participants' lived and felt experiences (Smith & Osborn, 2015; van Manen, 1990). To remain congruent with IPA, I situated the meaning-making questions within the specific context of the PTG model, in order to inform the detailed examination of a specific phenomenon, rather than the broader experience of growth after betrayal on too grand of a scale (Smith et al, 2009).

### **Participant Recruitment and Selection**

Participants were identified through purposeful sampling to fit the criteria of FPOSA who could report having been in a marriage or long-term relationship with individuals who self-identified as sexually addicted. Participants met the following criteria: (1) age 19 or older; (2) had experienced the disclosure or discovery of their partner's out-of-control sexual behaviors at

least 24 months prior to the interview; (3) did not have additional experiences of significant loss or traumatic events within 1 year prior to the study; and (4) willing to participate in an audio-recorded interview of data collection purposes. “At least 24 months” post prompting event inclusion criteria reduced the risk of increased emotional distress, since passage of time is known to be correlated with decreased PTSD symptoms (Calhoun & Tedeschi, 2004). The exclusion of additional significant loss ensured that PTG reported was directly associated with the experience of being in a relationship with a sex addict, and not any other traumatic life event (Tedeschi et al, 2018). This research used purposive criterion sampling. Recruitment occurred through email and IRB approved flyers with via other mental health professionals in the local area. I made use of snowball sampling to recruit from an initial sample of individuals that met the criteria of the proposed population.

### **Data Collection**

Data was collected through a semi-structured, in-depth, face-to-face, interview process lasting from 60 to 90 minutes. In total, twelve FPOSA were interviewed. Two out of the twelve interviews were conducted via Zoom videoconferencing, and the rest in person. A total of 9 questions and subquestions grounded in Tedeschi and Calhoun’s (1996) PTG theory were created to best elicit the essence of FPOSA’s experiences of growth post betrayal trauma and to explore the primary research question: What transformative life changes and outcomes have occurred for FPOSA as a direct result of betrayal trauma? All interviews were audio recorded and transcribed verbatim by a third party. All questions are available in Manuscript Table 1.

### **Manuscript Table 1**

#### **Semi-Structure Interview Questions and Subquestions**

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1. What transformative life changes and outcomes have occurred as a result of this traumatic

event?

*What were the **changes in personal values** as a result of this experience for you?*

*What were the **changes in your identity** as a result of this experience for you?*

*What were the **changes in worldview** as a result of this experience?*

*What were the **in your relating to others**?*

*What were the **behavioral changes** as a result of this experience for you?*

*What were the **changes in direction of life choices** as a result of this experience?*

2. What insight, if any, did you gain going through this experience?

3. How did you make sense of the suffering caused by the relational trauma that resulted from being in a marriage/partnership with a sexually addicted individual?

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## **Data Analysis**

Data was coded inductively to allow themes to emerge from within the lived experiences and communication of those experiences to the researcher, remaining congruent with hermeneutic phenomenological methods. Analysis processes included both, two waves of hand-coding, and the use of NVIVO software. To follow IPA's tradition, I analyzed the data according to an iterative and inductive cycle in the following steps: (1) reading and re-reading the transcript, (2) exploratory noting that include descriptive, linguistic and conceptual notes, (3) formulating experiential statements, (4) developing emergent themes, (5) finding connections across emerging themes. The data was analyzed after the completion of the first interview and each separate interview after that. As I became familiar with the data, using an interpretive stance to coding and noting, a handful of experiential statements were identified to represent what was learned about the meaning of each participant's experience of growth after trauma. Connections and clusters of experiential statements were uncovered in order to engage with the emergent themes. The process of identifying themes by clustering concepts together and re-organizing the narrative reflects the IPA's hermeneutic circle, in that data analysis rests on the reflection of essential themes and the iterative process of "considering parts and whole" (van Manen, 1990, p. 31). The last task involved exploring how the themes fit together and what these findings meant (Smith et al., 2012).

## **Trustworthiness**

For this study, trustworthiness was built by addressing the following, as noted by Lincoln and Guba (1985) “1. Credibility: confidence in the 'truth' of the findings, 2. Dependability: showing that the findings could be repeated and are ‘internally coherent ‘(p. 318), 3. Transferability: showing that the findings could pertain to other contexts, 4. Confirmability: ‘a degree of neutrality or the extent to which the respondents shape the study's findings and not researcher bias, motivation, or interest ‘(p.121). Within the IPA tradition, credibility and dependability are enhanced when the researcher practices transparency and coherence (Yardley, 2000). In order to build soundness and increase the “truth value” of the study I engaged in the following practices: member checking, prolonged engagement, persistent observation, memoing, and self-reflexivity (Lincoln & Guba,1985, p.296; Yardley, 2000). To enhance the transparency and the coherence of the current study I employed a rigorous self-reflexivity practice and audit trailing. To ensure transferability methods such as purposeful sampling and data saturation were used to promote transferability (Forero et al., 2018; Lincoln & Guba, 1985). To establish confirmability, I kept track of as much detail as possible regarding each phase of conducting the study (Tracy, 2010; Yardley, 2000).

## **Reflexivity Statement**

I approached this study as a Licensed Marriage and Family Therapist that has received certification and training in sex addiction and somatic- experiential trauma-focused therapies. Given my clinical background, I recognize that I share personal and professional experiences with the participants involved in this study, and all measures of bracketing were vital to the work completed. This professional positionality, while providing closeness to the participants, it also required the need for additional rigor in self- reflexivity. Throughout the research process, I had



to wrestle with the friction of juggling my multiple roles and identities, that of researcher, that of a therapist, and that of an individual with her own lived experiences (Peshkin, 1988; Ropers-Huilman, 1999).

### Findings

A total of twelve FPOSA were selected as participants. Full participant demographics can be found in Manuscript Table 2. Through the completed inductive coding process, six themes and fourteen subthemes emerged to understand the essence of FPOSA’s experiences of PTG. These are: (1) changed perception of sense of self, 1.a. waking up to one’s self and/or recreating/recovering the self, 1.b. I am enough, 1.c. I am not a victim; (2) learning to listen and honor one’s body’s signals; (3) new-found personal strength that allowed for facing fears and taking charge of one’s life, 3.a. engaging in therapy, 3.b. “going to the mattresses,” 3.c. new vocational paths; (4) journeying from spiritual bypassing to authentic spirituality; 4.a. wrestling with their God; 4b. union with God; (5) changes in relating to others, 5.a. Family of origin, 5.b. boundaries, 5.c. authenticity and vulnerability, 5.d.increased empathy towards others (even towards the addict); (6) existential wrestling that led to shifts in worldview, 6.a.meaning making, 6.b. redesigning motherhood, 6.c. changes in outlook.

**Manuscript Table 2:** *Participants Demographics*

Pseudonym	Age Range	Length of marriage	Years since divorce	Education Level	Engagement in therapy
Deborah	50-60	24 years	4 ½ years	Graduate	Individual & Marriage
Esther	40-50	16 years	7 years	Graduate	Individual & Marriage
Elizabeth	40-50		5 ½ years	Undergraduate	Marriage
Hannah	30-40	6 months	6 ½ years	Graduate	N/A
Mary	50-60	20 years	11 years	Undergraduate	Marriage/ Individual
Magda	50-50	19 years	5 ¼ years	Undergraduate	Brief Marriage
Martha	60-70	33 years	6 months	Undergraduate	Individual & Marriage

Miriam	50-60	23 years	8 years	Graduate	Individual & Marriage
Rachel	40-50	17 years	3 ½ years	Undergraduate	Individual & Marriage
Rebekah	30-40	6 years	6 years	Graduate	Marriage Individual/ Unknown
Ruth	50-60	25 years	5 ½ years	Undergraduate	Individual & Marriage
Sarah	40-50	15 years	4 ½ years	Undergraduate	Individual & Marriage

### Changed Perception of Self

Participants reported a change in the way they perceived themselves. Wrestling with the after-effects of the trauma altered the course of FPOSA’s identity development and even destabilized existing identity commitments. While in their marriage, “being who the addict needs me to be” became central to the participants’ identities, thus FPOSA experienced a chocking of their sense of self. After parting ways with their sexually addicted spouse FPOSA were able to change their self-perception. For example, Rachel smiled as she explained:

I have watched my personality unfold for the last three years. Every year, it's better. I wasn't me in that marriage. And so of course I was stressed out, of course I was tense all the time 'cause I was always trying to figure out who to be, how to be. I no longer need your affirmation about who I am. I no longer need your approval to be who I am. I know who I am. I know who I am for the first time, and I know that it's good.

Adapting to new life circumstances meant finding a new path towards self-love, more specifically towards getting in touch with oneself and gaining personal insight into how they valued, think, and feel about themselves. Rachel took time to describe the pivotal moment when she “saw herself in a new way and loved herself.” Miriam pointed out that the journey towards self-love had to start with “giving myself permission ...to be selfish” so that “I can take care of myself and forgive myself for the things that I did that were wrong for me.” Mary’s

transformation of betrayal began when she realized she had value, at least in God's eyes: "So now I take better care of myself and I realize, I know that. I have value to God and I have value as a human being."

Most participants described a process of waking up to a new self or to the person that they used to be prior to being married to the sex addict. Participants attribute this waking up, or, the remembering the old self to the individual struggle with the new reality of the aftermath of relational betrayal. Rachel spoke about how fearless and playful she was as a little girl; but also about how detrimental it had been to not pay attention to the pain, to follow the mantra "you fall off, you get right back on". Mary remembered being "very naïve, innocent and very trusting". Elizabeth made a point to explain how "self-sufficient" she used to be. Deborah felt as though "sleeping beauty's woken up," because "she had been asleep, and she didn't know what she didn't know."

Pre-trauma FPOSA saw themselves as "having to be perfect" and "having to do everything perfect," "control freaks," and "performers." Post betrayal FPOSA saw themselves as "not a victim," but "thriving" fully individuated powerful women who also happened to be trauma survivors; the need to be perfect faded away and was replaced with feeling of "more than enough." FPOSA not only did not want to see themselves as victims, but they also did not want others to see them and label them as such. Being viewed as victims kept them feeling like objects, like powerless characters in someone's story, reducing their strength and motivation to survive. Deborah recounted her reaction when she realized she had been regarded and described as a victim by her pastor:

"What did you tell them about me?" He said, "Oh, well, you know, (...) and how you've been through this horrible divorce," and I was like, "No, no, no, no, no."

You just victimized me. You defined me by this one event in my life." And I said, "I am brave, I belong to the most high, and I'm beloved. And that's how I define myself. And you don't get to define me by this trauma."

### **Learning to Listen and Honor One's Body's Signals**

Data showed a compromised relationship with their own bodies prior to marrying and while being married to their sex addicted husbands. Their bodies were sending subconscious signals to warn them of impending and present danger, including the methods of crazymaking of the addict. FPOSA reported being incapable of recognizing these warnings and symptoms as somatic experiences associated with psychological stress. Their minds remained in protective overdrive mode in order to cope with the unthinkable, in Levine's (1997) words, "what we don't know can't hurt us." Their brains' protective reactions were manifesting as remarkable coping mechanism such as denial, dissociation, perfectionism, and even religiosity. Echoing all FPOSA, Rachel disclosed that she had to process "all those things that she just ignored for years", and "now looking back, she knew something was wrong;" Ruth explained how "it's taken.. this whole time to begin to trust her gut again, her instincts."

In the aftermath of abuse and crazymaking followed by divorce, most participants reported being in the process of re-establishing (or having already established) a healthy relationship with the physical self again. They reported that they were now able to hear and listen to their bodies, suggesting that through healing and personal growth they are able "to have a direct experience of the living, feeling, knowing organism" that is their own body (Levine, 1997, p. 6). Magda recounted her experience with psychosomatic symptoms:

Okay, from the start of our marriage, I knew something was not right and I had terrible stomach problems, terrible stomach problems... Well, it was my body

telling me something's not right. And so I think that I definitely listen to myself a little bit better (...). I learned to trust my body after this experience and why the body's doing what is doing.

### **New-found Personal Strength to Face Fears and Take Charge of One's Life**

Participants spoke in detail about the new-found personal strength in the face of divorce negotiations, custody battles, buying new homes and starting new careers. Engagement in psychological help was the main contributor to FPOSA feeling strong enough to take charge of their lives; psychological help was comprised of individual therapy, therapeutic groups related to co-dependency and interpersonal relationships, faith-based life coaching, and other FPOSA. Noteworthy is that eleven out of twelve participants first sought and participated in marriage therapy (some for a year or longer) which either failed to resolve the issues or pointed them into the right direction which was to seek individual therapy. Also significant, some women spoke about the difficulty of finding adequately trained therapists (more specifically therapists who adhered to the co-addiction/codependency model of treating partners of sex addicts), or knowledgeable counsel that could shed light on sex addiction and its effects (Hentsch-Cowels & Brooks, 2013).

In individual therapy FPOSA were able to process through emotional states such as disbelief, distress, hurt, insecurity, fear, uncertainty, but above all the therapeutic space became a safe place for their anger. Described as being “directive,” “knowledgeable,” “no-nonsense” and “wise,” these therapists helped FPOSA cope with the internal disorganization and disintegration that followed from the psychological unpreparedness caused by betrayal trauma. Esther stated:

I was broken..hearted but I was also ready, because I had told my therapist, you know, I need a plan of action so if I find out it happens again it will give me piece of mind to know what I am going to do . So, had no choice but to fight for me at that point and do what is best for me.

Another significant common denominator is the support and guidance FPOSA found in the community of former partners of sex addicts who have walked the journey ahead of them and were ready to offer emotional assistance and legal advice. Deborah recounted her first visit and her first conversation with a FPOSA and how “it gave me the vision of how she could live in a beautiful, peaceful home.” Elizabeth credited another former partner for the strategy to get out of her marriage when she was told to “not to say anything” but instead to “gather evidence” of his affairs with prostitutes.

The women reported an increased sense of confidence, strength and self-reliance. This post trauma adaptation helped them outsmart their manipulative spouses in divorce. For example, Rebekah had to invest a lot of herself to “develop a strategy for being delivered without court assistance,” because she “could not rely on the court, or therapists, or neighbors, or anyone.” She learned quickly that “you literally have to be your own hero.” Some others, like Ruth and Magda talked about a “breaking point” that ready them to begin fighting for a new life, and to “finally step out of the abuse” and “never look back.” Rachel remembered:

Yep. Absolutely. You know, my lawyer and I walked out of the room and she was like, I am super proud of you. Oh my gosh. It's amazing to hear a lawyer say that. I'm so proud of you. You're fighting for yourself, you know your worth. But it, that was the first step of regaining my power and not being a victim in the process.

New-found personal strength gained amid their divorce battles enabled FPOSA to see fresh avenues for the future; this resulted in a reconsideration of future goals and establishment of alternative paths to their lives. Following the divorce, Elizabeth, Sarah, Magda, Rachel and Mary either changed career paths or started a new career. Deborah, Esther and Rebekah started their own successful businesses. Esther and Miriam went back to school to explore and realize a new vocational path. Sarah recalled her journey towards “taking life by the horns” and changing careers:

And you could really shrink back, but I just kinda had to pull myself up by the bootstraps and go, "Okay, well, now I gotta figure this life out." But it's allowed me to go, I can do hard things, I can do new things, I can do this by myself if I have to.

### **Journeying from Spiritual Bypassing to Authentic Spirituality**

Women described the changes they had undergone to be a shift from spiritual bypassing to authentic spirituality; they saw this shift being the result of a wrestling with God and a detangling of their religious belief system. Spiritual bypassing was a coping mechanism taught in the families of origin (FOO) and cemented by their religious environment. Women discussed ways they were conditioned to “not to rock the boat,” “to be nice,” “to be strong” and “to be submissive,” all of which interfered with their process of individuation, a faith system that operated out of trauma –fear, shame, survival responses. They had survived their marriages by numbing themselves with magical thinking (“It will all be ok” or “God will work it out”) and by avoiding feelings associated with being violated and betrayed. They had labeled anger, fear, and sadness as being negative feelings, instead of warning signs that they lacked boundaries or connection to self.

Eleven out of twelve participants spoke about the destructive power of romanticizing their former partner's religiosity and that of hyper spiritualizing their marriages. Hannah recounted the years she spent in shock because "she was not able to sit with the dissonance" of her sexually addicted spouse who was "such a godly man" who "did not believe in divorce or sex before marriage," yet he was sleeping with prostitutes. In the aftermath of their suffering, FPOSA found new lenses through which to process and interpret their marriages as well as the choices to enter the marriages and to stay married. Rachel admitted:

And so I knew this man... I thought, and he presented himself as a Godly man who loved the Lord. He grew up in church, and so all of my persona of him was wrapped up in that. I took him at his word. He was happy in this marriage, it was me, and this was my problem. I hyper-spiritualized things.

Amid such a life-altering event, FPOSA went through a unique crisis of faith. They had to wrestle through what was real and what was imagined, and to discover the difference between idealized spirituality and sacred, personal intimacy with God. The participants' awareness of the dissonance between their prior assumptions and their realities resulted in experiences of deep doubt and questioning, yet it did not result in abandoning their relationship with God or their faith. This wrestling with God was experienced as an echo to the unbearable internal emotional struggle; it became a form of soothing, "the only way to find peace where there was just no peace," and "the only way to get through it." Through a wrestling with God, FPOSA found congruency which facilitated FPOSA's process of finding spiritual authenticity. This journey into a mature kind of faith meant that they took ownership of a personal relationship with their



Higher Power, and they accepted and surrendered to the suffering which, in turn, cultivated a union with God (Heidegger, 1927/2010; Sartre, 1943).

### **Changes in Relating to Others**

In the aftermath of trauma, FPOSA developed an ability to assess which relationships were potentially unhealthy or no longer beneficial to their healing process, and which relationships were “emotionally safe,” as in trustworthy, nurturing and supportive. This new-found ability enabled participants to end the relationships that felt “surfacey,” “conditional” and “judgmental”. It further empowered them to appreciate and deepen the healthy relationships, the ones described as “real,” “vulnerable,” “safe,” and “open”.

Fostered by deeper self-analysis, these insights enabled FPOSA reach greater levels of vulnerability with themselves and others. As FPOSA began to understand the etiology and psychological framework of sex addiction, they were able to move from self-blame and shame into being vulnerable about their lives, and into seeking authenticity in all areas of their lives. Miriam’s authenticity meant an unhindered freedom to be herself: “I don't have to be somebody that I'm not.” For Elizabeth vulnerability translated into “being so much more vulnerable and open and communicate in my relationships.” As Rachel’s reflected on authenticity:

And what I saw in my relationships with the people closest to me, who I let know what was going on is the level of love and acceptance from them. Once they knew that my world was shattered and I let them see the brokenness and the ugly of my life, they love me more. And what I learned in that is people don't love what's not real. It's not the same. People love what's real. And I had to become real.

Data also suggested that women recognized that unhealthy family of origin (FOO) dynamics THAT produced dysfunctional patterned beliefs and behaviors that initiated and fed

boundaryless relationships. Ten out of 12 participants spoke openly about the epiphanies gained regarding the automatic FOO programming that influenced their life decision. They acknowledged that they chose an attachment and a climate that was familiar to them, a relational dynamic that reminded them of a dysfunctional or abusive parent or of one who parentified them. Growing up in a strict and narrow-minded family culture that attracted bullies, Mary faced “a lot of bullies, thus married a bully.” Rachel she normalized “her father’s narcissistic behaviors to the point that she accepted it as a norm and blew it off in her marriage.” Equally, many FPOSA reported closer family ties, feeling cared for, and a new appreciation for the support received following trauma.

All participants reported undergoing a process of active reconsideration of their personal boundary system; they had become more cautious in terms of who they chose to share their time and themselves with. FPOSA shifted from needing external validation and input to being protective over their identities and their new-found self-reliance, and subsequently over stewarding the healthy relationships in their lives. Mary discussed how her growth in this area could be assessed by the way she has “created boundaries” or has been “able to stand up and speak truth even though she might feel like jelly inside”. had learned to finally stand up to her “manipulative sister”; she finished with: “I think it's pretty clear that she can't mess with me now.”

One of the many consequences of coping with a shattered world included a sense of increased compassion towards others. The findings suggests that their suffering fostered an existential felt experience regarding human fragility and the aloneness of pain. Participants referred to it as being a sense of “no one is an island,” but rather all people “human and beautiful

and courageous and strong and fun and together and belong,” all a part of a whole of a human experience filled with suffering. Rachel paused to wipe the tears before she stated:

Nobody has it all together. And suffering is completely different. Recognizing everyone is broken. Everyone is carrying burdens that the rest of us don't know about. And the... We all need compassion, we all need encouragement.

### **Existential Wrestling That Led to Shifts in Life Philosophies**

A common theme throughout all twelve interviews was the presence of cycles of existential questioning, followed by meaning making and reprioritization. In the attempt to make sense of the pain caused by betrayal, some of the participants engaged in rhetorical questioning in search for answers that would assist with the accommodation of trauma-related existential anguish. Through deliberate rumination –talking, writing and vulnerable self-disclosure– the women began to attempt to learn ways to adjust to the changed circumstances of life, since it enabled an exploration of new frameworks in which they were able to create meaning out of their experiences. Rachel wondered: “I look back and I'm like, why? Why did I believe that?”

Versions of Magda’s monologue weaved through her interview:

How did I miss that? How did I let that happen to me? ...A lot of asking, Why did I stay, why did I do that? Why, why, why? And it's been a long time. I mean, 10 years since the first discovering it, but how do you wind end up with somebody like that?

Through deliberate rumination FPOSA reached the point where they granted themselves forgiveness for enduring the emotional abuse of the sex addict. When confronted with the pain, the lost possibilities of their lives and regrets, FPOSA wrestled through existential guilt and found the gift of self-forgiveness. Miriam considered self-forgiveness as being one of the last

steps towards wholeness: “It was really...forgiving myself for not being able to stand up for myself at the time, and then after that seeing myself as a different person and whole again”. Mary “pondered the situations that seem devastating in the lives of those she loved and in her own life”, and yet she found concluded: "Who am I to say that it would have been better to protect us from these things instead of allowing them to happen?"

FPOSA spoke candidly about not being able to find a personal meaning in this much suffering, yet able to rest in an existential felt experience of the unknown and to embrace the “gifts” of betrayal trauma. A shared sentiment by all was that, somehow, enduring the pain and hardships that came with being betrayed was worthwhile because it meant a new life, a new self and freedom. Sarah’s words summarize the collective sense of “I don’t understand, but I accept it.”:

Rain is gonna fall on everybody, and what seems to fall on some people differently or a deluge versus a gentle sprinkle, I don't know. And I have to trust even though it doesn't make sense that there has got to be a purpose behind it, that God has a purpose for it and a purpose behind it. And I see some of that...And that's good. But I would've never chosen this past and I wouldn't choose it again.

Participants reported positive changes in the way they parented their children. In the face of the adversity of divorce, FPOSA were forced to undergo a process of redesigning motherhood which facilitated growth in their parental role, especially considering they were the only emotionally healthy parent. This reconfiguration process of the notion of motherhood required a wrestling with priorities, values and societal expectations. Findings showed an increase in their capacity to rebound and in the ability to be more resourceful as a mother. Partying ways with the addict gave some participants a chance to be the mothers they always wanted to be. For Miriam

it meant that she was now “the best mom that she could be” and that she was “not having to hear what a terrible mom she was,” while gaining the confidence to do what was best for her children.

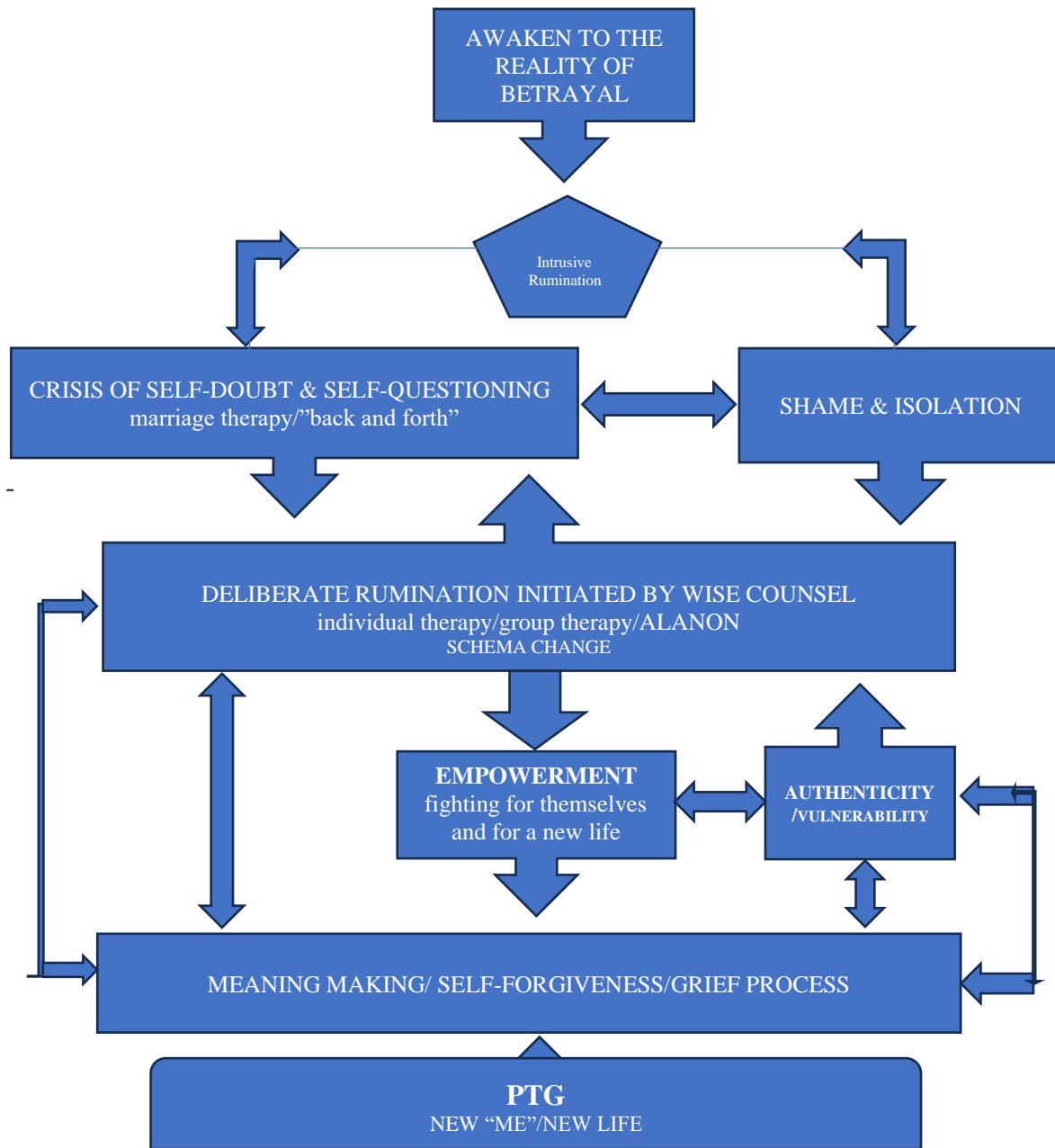
Lastly, FPOSA identified changes in outlook as positive outcomes resulting from wrestling with existential questions. For some, this trauma set in motion a sense that they have been spared from a lifetime of suffering—they were now “free” or “the chains are off” or “they have a second chance at life”—and that the gift of this second chance should be treated with care. The outcomes of this greater appreciation for life were a change in life priorities and a new-found gratitude for the “little moments” and “smaller things”. Another outcome was a change in their life’s mission; most participants talked about the importance of focusing on “changing their little world” instead of wasting their time on the inconsequential. Many participants reported experiencing the world as being “more broken,” “full of burdens no one knows about,” “misogynistic,” “in denial,” “head in the sand.” Evident in their responses was a loss of innocence and naivete; post trauma their outlook was “cynical, “full of gray areas,” and “real.”

Feeling empowered, paired with continual engagement in therapy, activated a desire for authenticity. Authenticity was considered the pinnacle of transformation because it likened maturity and congruence, as well as resembled healthy womanhood. The words used to describe authenticity were particularly meaningful: “light,” “out of hiding,” “façade no more,” “feeling connection more strongly,” “feeling awake,” “to let be what it is without shame or judgment attached to it.” They conveyed an exodus, a sort of escaping a puppet land, a play they did not author.

A strong pattern was found in the data in relation to how participants progressed towards the experience of PTG. The meticulous memoing on the consistent similarities between all participants seemed to point to the following ten stages that FPOSA engaged with prior to

experiencing PTG: awaken to the reality of betrayal, crisis of self-doubt, the hole of shame and isolation, intrusive and deliberate rumination, seeking and finding wise counsel, the power of knowledge, uniformed regret, take it to the mattresses, self-forgiveness, and vulnerability/authenticity. These phases are reflected in the themes already discussed above.

Figure A



## **Discussion and Implications**

The results of this study underscored that transformation and growth following betrayal trauma and surviving a marriage to a sex addict is possible. All twelve women in this study reported experiencing posttraumatic growth both in terms of all five of the dimensions of posttraumatic growth captured in Tedeschi & Calhoun's (1996) PTG model (new possibilities, relating to others, personal strength, spiritual change, appreciation of life), and through the endorsement of self-descriptive statements regarding growth. These findings suggest that even in the most traumatic of betrayal situations, clinicians can provide hope that posttraumatic growth is possible. However, this study also confirmed that graduate school programs do not adequately train their students around issues of sexual compulsivity and betrayal trauma (Walter & Spengler, 2016). Counselor educators should not only carefully measure the counselors'-in-training perceived self-efficacy regarding adequately providing services to this population, but also offer curricular integration that can assuage students in identifying relevant client issues.

The research conducted acknowledged the significance of the process FPOSA followed in order to rediscover or recreate themselves; relinquishing harmful old patterns and old belief systems developed in the Family of Origin or in their religious environments was seen as crucial in changing the way participants conceptualized their identities (Jenks, 2014; Laaser et al., 2017; Vladez & Lilly, 2014). Given these results, clinicians should focus on examining and reevaluating a client's core beliefs as key treatment strategies, as well as on identifying and exploring parts of themselves that had to stay hidden—sometimes even from themselves—in order to stay married. Thus, treatment interventions should be centered around fostering a reconnection with the parts of FPOSA's selves prior to marriage. In addition, echoing the body of

literature, FPOSA coped better with the effects of trauma when they changed the perception of self from a “victim” to a trauma “survivor” (Brosi, & Rolling, 2010; Epstein, 1990).

Additionally, post-trauma FPOSAs’ ability to honor the body’s signals was seen as a manifestation of their growth represented a higher level of psychological functioning, the end of a life lived in cognitive dissociation and the unearthing of the true self. Since studies have shown females’ psychosomatic outcomes from betrayal trauma, and since betrayal trauma causes the boundaries of the true self and the false self-become blurred, new treatment modalities and interventions should be explored at the intersection between PTG, betrayal trauma, and somatic experiences (Gobin & Freyd, 2009; Freyd et al., 2007; Platt & Freyd, 2015). One such intervention that could foster PTG is guided imagery around imagining a positive future; this exploration of possibilities and problem solving would make room for envisioning the transformation of trauma while embodied. In general, the current study implicitly showed that treating FPOSA requires that therapy be flexible, for each phase of the journey towards PTG called for a careful selection regarding treatment modalities and counseling theories.

A large number of accounts thread around a new-found inner strength that empowered FPOSA to work through difficult challenges pertaining to the crazymaking behaviors of the addict, divorce, custody battles and starting careers. There were no questions or prompts given in the interviews to discuss personal strengths or the path to how they found the courage to face their fears, and yet all twelve participants discussed extensively the power of deliberate rumination, the constant massaging of the pieces of betrayal trauma through various means, most commonly individual therapy. Concurrent with implications of previous studies is the difficulty of assessing the role that therapy has on PTG, and yet it is certainly a discussion need to be had in future research (Crowder, 2016; Calhoun & Tedeschi, 2018; Valdez & Lilly, 2016). Moreover,



more recent body of research corroborates the findings of this study regarding the ineffectiveness of pathologizing partners of sex addicts by using the co-addiction/codependence model, as well as the therapists' dissatisfaction with this approach (Weiss, 2019). Additionally, findings suggests that the passing of time did not appear to have had as much of an impact as individual therapy and social support.

This theme was previously discussed in other research studies; in Jenks' (2014) study, survivors of intimate partner violence reported that the validation they received in therapy was the key to "reawakening." Seventy two percent of the participants in Lasser et al.'s study (2017) identified individual therapists to be the most helpful resources to their healing. Understanding that deliberate rumination aids in the empowerment of FPOAs as well as meaning making and grief processing, research on the effects of individual therapy should be prioritized. Since considering the intersection between meaning-making and grief was shown to be a vital element of PTG, counselor educators should train counselors-in-training on the stages and manifestations of grief, as well as normalize the slowness, steadiness and patience required to guide FPOA to healing. Additionally, educating future therapists on how and why the attachment and crisis-centric model of prodependence could be more effective than the co-addiction/codependence model might be the most effective way to help this population move towards PTG (Weiss, 2019).

A common thread in the body of research is the role that social support and disclosure to such support played in the development of PTG (Cobb et al., 2006; Lasser et al., 2017; Lilly & Valdez, 2015). More than three fourths of the participants in the current study emphasized the significant role the community of FPOA had on their capacity to find strength. Telling the stories to one another resulted in a sense of safety and closeness that was surprising, even to them; this was a common outcome in several studies, especially ones that researched PTG in

bereaved parents and relational trauma (Anderson et al., 2012; Jenks, 2014; Miller, 2018; Lilly & Valdez, 2017; Znoj, 2006). This suggests that peers who can discuss the process of PTG are often the most effective in gently confronting the shattered core beliefs and assisting FPOSA with understanding the journey towards healing. It is important for counselors to offer FPOSA the option of attending group therapy with other FPOSA.

Women reported wrestling with God, yet their trauma did not lead many to question their faith or to step away –even temporarily– from what they believed about their Higher Power, as in the case in other studies (Anderson et al, 2012; Yick, 2008). Instead, the profound suffering added value to their life by offering a new understanding of the person of God and fostering a deep union with God represented by a matured and humble cooperation with Him and an acceptance of suffering. Participants described becoming more spiritual and mystic like and less religious throughout the healing process, and yet feeling the most authentic, “fully themselves.”

Knowing now that spirituality plays a significant role in promoting PTG, more research efforts should be focused on understanding how survivors’ views of God contributes to the growth process. This knowledge would help counselors in their intervening efforts to punctuate partners’ narratives and to aid with the exploration of new religious belief systems. It would be beneficial to study the impact of spiritual bypassing, demonstrated through encouragement to remain in a relationship with a sexually addicted individual due to misquoted scriptures, misogyny and/or the self-perception of a partner’s experiences.

FPOSA described internal shifts in the way they operated in relationships; betrayal forced them to live in vigilance of others’ intentions. Most studies concluded that relational trauma resulted not only in a sense of caution and wisdom in regard to boundaries with others, but also in a deepening of relationships with those friends that survived the post separation period, and

who felt safe, reliable, “authentic,” and “acquainted with suffering” (D’Amore et al., 2021; Lilly & Valdez, 2015). FPOSA reported that their relational skills improved, more specifically the ability to recognize authenticity and distinguish between safe and unsafe people. Nine out of twelve participants discussed the growth experienced in the area of dating; having a second change at love FPOSA had healthy boundaries and where enough in touch with their internal warning system to ask questions such as “what’s happening?”, “am I ok with this?”, “what do I need here?” Previous research corroborates these findings (Jenks, 2014).

All twelve FPOSA experienced a variety of changes in core beliefs regarding the world and themselves as individuals and as mothers. The experience of betrayal trauma led them to question the meaning of life and previously held beliefs about religiosity and spirituality, family of origin, relationships and systemic oppression. The world was no longer a place where justice and reconciliation are possible. Previous studies found that the experiences perceived to be traumatic lead to existential wrestling regarding the meaning of life, religious beliefs and changed life priorities (Cann et al., 2010; Doherty, & Scannell-Desch 2023; Jenks, 2014; Lasser et al., 2017; Mautz et al., 2019). In order to capitalize on the partners’ movements towards PTG more research is needed to better comprehend what type of therapy modalities would allow for grief processing and the promotion of PTG.

The engagement in the process of making meaning facilitated self-compassion and self-forgiveness, and additionally, made room for the process of grieving to take full effect. Processing and reprocessing the trauma in an effort to mentally resolve it encouraged a grappling with regrets around what they wished they had done, to then settling into “I have done all I could do.” Findings suggests that FPOSA found self-forgiveness to be the most evident indication of trauma transformation (Valdez & Lilly, 2015). This supports other studies that found self-

compassion to be a facilitator of healing (Crowder, 2016; Smith, 2003). Both self-forgiveness and forgiveness of the addict appeared to be FPOSA's attempts to integrate interpretation of the trauma in hopes to find a sense of coherence and purpose, which is considered the result of the evolution of PTG (Grad & Zeligman, 2017; Stein et al., 2018).

### **Limitations of Study**

Since the study utilized convenience-sampling methods, its external validity might be affected. The use of a volunteer purposive sample could lead to selection bias because it causes the participants in the sample to not be representative of the population. The size of the sample and its lack of diversity concerning gender, race, ethnicity, religion and socioeconomic status was a limitation. Eleven out of twelve participants self-reported as evangelical Christians while one participant did not want to report her religion; this uniformity in religious beliefs could have potentially skewed the findings. Another possible limitation of qualitative data collected with IPA is the interpretation of the researcher. Because IPA relies on participants to effectively articulate their experiences, weak interpretation can limit the utility of the data (Smith et al., 2009).

### **Recommendations for Future Research**

Future research is needed to explore ways to further expand the empirical knowledge and understanding around how the following factors might predict and impact the development of PTG in this population: awareness of the effects of the family of origin dynamics, spirituality, self-forgiveness, and engagement with various therapy modalities. Also, assessing the role that therapy has on PTG is certainly a discussion need to be had especially considering that this study showed the passing of time did not appear to have had as much of an impact as individual therapy and social support (Crowder, 2016; Calhoun & Tedeschi, 2018; Valdez & Lilly, 2016).

Understanding that deliberate rumination aids in the empowerment of FPOSA as well as meaning making and grief processing research on the effects of therapy should be prioritized. Noteworthy also is that in order to capitalize on the partners' movements towards PTG more research is needed to better comprehend what type of therapy modalities would promote PTG.

### **Conclusion**

The findings of the current study showed that in the aftermath of betrayal trauma the twelve FPOSA did not simply return to normal, but they grew beyond their previous state as a result of experiencing trauma (Tedeschi & Calhoun, 2004). Evidence of posttraumatic growth were visible in several ways, such as: changes in self-perception, a new-found ability to listen and trust their own bodies, changes in interpersonal relationships, an embracing of authentic spirituality, changes in life perspective and worldview, and a desire for authenticity. Additionally, the findings of the current study showed the presence of a process, not just an outcome. When following the progression of the process of transformation of betrayal trauma, the data revealed that FPOSA experienced growth as sequence of phases of healing.

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## Appendix A-Recruitment

### Poster

Good afternoon,

I would like to invite you to participate in a qualitative research study exploring the experience of positive changes and personal growth that happen post trauma resulted from being married to a porn/sex addict. The purpose of this phenomenological study is to understand how partners of pornography and sex addicts experience this phenomenon of Posttraumatic Growth. My aim is to learn how to cultivate this phenomenon in order to support the field of counseling, counselor training and sustainability.

You are invited to participate if you meet the following selection criteria:

- 1) Age 19 or older
- 2) Have been married to or in a long-term relationship with a porn or sex addict
- 3) Willing to participate in one audio-recorded interview for data collection purposes.

Participants will be provided with the chance to win a \$50.00 Amazon Card at the conclusion of interview participation.

If you choose to participate in this research study and return the signed informed consent, you will be asked to complete a demographic questionnaire and one audio-recorded semi-structured face-to-face or *Zoom* interview, which will take approximately one hour. Your interview will be transcribed and analyzed for themes of your experiences. Any information obtained in connection with this study will remain confidential and anonymous to protect your privacy.

My contact information is listed below for your reference if you have any questions or concerns. If you or someone you know would be appropriate for this study, please feel free to click on the link below, or to share it with an appropriate friend or family member.

Informed Consent document to be signed and returned to me by email, which will indicate your desire to participate in this research study. Upon receipt of the signed Informed Consent, you will be contacted to schedule a time that will be convenient for your interview.

Below is a link to my research study via \_\_\_\_\_ . It includes the study's informed consent and a questionnaire.

Contact Information:

Simona A. Niculaes, LPC, LMFT, CSAT

Counselor Education Doctoral Student

Auburn University

Department of Special Education, Rehabilitation, and Counseling

Email: [san0015@auburn.edu](mailto:san0015@auburn.edu)

Warm Regards,

Simona A. Niculaes

## Email to Community

My name is Simona Niculaes. I am a doctoral student at Auburn University, currently pursuing my PhD in Counselor Education, and I am currently in the dissertation phase. I am a therapist, LPC, LMFT, CSAT, at a private practice in Birmingham, AL. My research focuses on hope and trauma, more specifically the post-trauma outcomes that result from being in a partnership/marriage to an individual addicted to pornography or sex.

I am conducting qualitative research on the personal growth experienced by partners of sex addicts following the betrayal trauma. If you have clients you believe may fit this profile and who are willing to participate, please contact me and I will send you further information. Participants will complete a brief questionnaire, and one audio-recorded semi-structured face-to-face or *Zoom* interview, which will take approximately one hour. Their interview will be transcribed and analyzed for themes. Any information obtained in connection with this study will remain confidential and anonymous to protect privacy.

Appropriate participants for this study are females or males, aged 19 and above who have experienced trauma as a result of being in a marriage/partnership with a porn/sex addict.

If you or someone you know would be appropriate for this study, please feel free to share this information with an appropriate client, or friend, or even a family member who may be interested in participating in this study. Furthermore, please feel free to forward this invitation to your colleagues near and far. I hope to interview individuals from across the United States!

My contact information is listed below for your reference if you have any questions or concerns.

### Contact Information:

Simona A. Niculaes, LPC, LMFT, CSAT  
Counselor Education Doctoral Student  
Auburn University  
Department of Special Education, Rehabilitation, and Counseling  
Email: [san0015@auburn.edu](mailto:san0015@auburn.edu)

Warm Regards,

Simona A. Niculaes

Appendix B  
Brief Questionnaire

1. What is your current age?
  
2. How would you identify your gender?  
 Male  
 Female  
 Other (please describe)
  
3. What is your race/ethnic background?  
 Caucasian  
 African American  
 Asian  
 Hispanic  
 American Indian  
 Other (Please specify)\_\_\_
  
4. What is your level of education?
  - (1) Did not complete high school
  - (2) High school graduate
  - (3) Some college
  - (4) Associate degree or certificate program
  - (5) Undergraduate degree
  - (6) Graduate degree
  
5. What was the length of your marriage/relationship with your spouse/partner with the sexual addiction/compulsion?
  
6. How long has it been since the initial disclosure/discovery of your spouse's/partner's sexual addiction/compulsion?

7. Please check any of the following that you have you experienced in the past year:

\_\_\_\_\_ Sudden death of close relative or friend (Child, parent, best friend)

\_\_\_\_\_ Victim of a violent crime or serious accident

\_\_\_\_\_ Witnessed a violent crime or accident

\_\_\_\_\_ Diagnosis of a life-threatening illness to yourself, spouse, or child

## Appendix C

### Interview Protocol for a Qualitative Research Study: PTG in Partners of Sex Addicts

Date:

Time of Interview:

Place:

Interviewee:

#### **Interviewee Briefing**

Thank you in advance for your time and consideration. My name is Simona Niculaes. I am a Licensed Professional Counselor, a Marriage and Family Therapist, and a Certified Sex Addiction Therapist. I have extensive clinical experience working with partners of sex addicts and with marriages plagued by sexual addiction. I am currently in the process of getting my doctoral degree in Counselor Education and Supervision. I am passionate about what I do, and I hope to educate future counselors on how to better serve the current and former spouses of sexually addicted.

As you are already keenly aware, we are witnessing a rapid increase in the number of spouses who are reporting either/or their husband's sex addiction or an addiction to pornographic material, or/and the discovery of cybersex behaviors. The study I am conducting wants to explore aspects of personal growth that you experienced as a direct result of this experience.

The questions will be broad in order to attempt to keep the answers as authentic as possible.

Considering the sensitive nature of this interview, I wanted to take a few moments to let you know that your privacy is my absolute first priority. Any information obtained in connection with this study will remain anonymous and confidential. Information obtained through your participation may be used in the writing of my doctoral dissertation. I do hope to one day publish and present the findings of this study in order to provide empirically-based insight for mental health professionals to guide and transform treatment planning when serving wives of pornography addicted spouses. Identifiable information will never be included in any of my scholarship efforts.

But please remember that even in this process of collecting and analyzing the data, the sheet containing your demographic information will be assigned a number, thus your personal information will be concealed at all times. If at any point you change your mind about participating, you can withdraw at any time during the study. Your participation is completely voluntary. If you choose to withdraw, your data can be withdrawn as long as it is identifiable. During your participation in this research study, your interview will be recorded on a password

protected recording device that is not capable of connecting to the Internet or the Cloud. These interviews will not be destroyed at the end of this research but will be retained *for four years*..

As we are going through these questions, you might possibly experience undesired changes in thought processes and emotion including flashbacks episodes, stress, depression, grief, feelings of shame, anger, and loss of self-esteem. To minimize these risks and protect your psychological wellbeing I want to make every effort to empower you to freely and clearly communicate the presence of emotional distress during this interview. At the start of the interview, we will briefly discuss a code word you might use if you reach a point where you might want and need to pause and stop, or pause and return to the interview at a later time. Furthermore, to ensure your wellbeing I am planning to ask you to briefly list five previously identified effective distress tolerance skills. These coping mechanisms would be some effective ways you have used in the past to self-soothe and return to emotional baseline. You might have discussed them with a mental health professional; just as a reminder of what these might be... a five-minute walk, mindfulness exercises, or distraction skills. I will have the necessary resources available to aid you in grounding, such as hotlines, web links to mindfulness exercises, weblinks to mindfulness coloring, calming playlist or distress tolerance skills (See Appendix E). I will be providing you with the necessary resources in the attachment I will be sending via email labeled “*Resources*”. My intent is to allow you the freedom to have a voice and have a safety plan if any signs of emotional dysregulation arises, and then to help you incorporate these, as needed, at any time in this process. **AGAIN**, if at any point throughout this interview you change your mind about participating, you have the right to take a break or to withdraw from the study. You are free and encouraged to voice your desire for us to stop. Your decision will be respected promptly. Your participation is voluntary and much appreciated.

Right now, I will send you the consent form. If you would like to participate in this study, I will ask you to sign it, and take a picture of it and emailing it to the following address: [san0015@auburn.edu](mailto:san0015@auburn.edu). I have just gone through much of the information in the informed consent, however, I will give you whatever time you need to read it before signing it. If you have any questions I am ready to answer them at any point. Are you ready to begin?

- What would be an effective code word for you?
- What are some of the effective distress tolerance skills you might have used in the past?

### **Questions:**

***What transformative life changes and positive outcomes have occurred as a result of this traumatic event?***

***What insight, if any, did you gain as a result of this experience?***

***Could you talk about/ describe aspects of personal growth that you experienced as a direct result of this experience?***

- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **changes in personal values** as a result of this experience for you?*
- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **changes in identity** as a result of this experience for you?*
- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **changes in worldview** as a result of this experience ?*
- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **changes in interactions with other people** as a result of this experience?*
- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **behavioral changes** as a result of this experience for you?*
- *Based on what you explained to me that you know/understand (...) or/ and what you stated (...) what were the **changes in direction of life choices** as a result of this experience for you?*

***How did you make sense of this experience?***

### **Interviewee Debriefing**

Thank you so very much for your transparency and for your willingness to help offer understanding of such a delicate issue. I want to assure you again that your information is safe with me. Should you have any need to clarify information, ask additional questions, please do not hesitate to contact me. In the future, I might contact you if you have an interest in reviewing the study and perhaps offer your feedback regarding the accuracy of my interpretation of your reality. Would you be willing to follow up with me to review the transcript, the themes generated and the summary of the results?



Appendix D

(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS AN IRB APPROVAL STAMP WITH CURRENT DATES HAS BEEN APPLIED TO THIS DOCUMENT)

**INFORMED CONSENT  
for a Research Study entitled:**

**You are invited to participate in a research study** to understand the phenomenon of post traumatic growth in partners of sex addicts. The study is being conducted by Simona Niculaes, doctoral student in the Auburn University Department of Counselor Education & Supervision. You are invited to participate because you are currently

**What will be involved if you participate?** If you decide to participate in this research study, you will be asked to participate in a semi-structured *Zoom* interview about your personal growth following betrayal trauma. Your total time commitment will be approximately 60-75 minutes.

**Are there any risks or discomforts?** The risks associated with participating in this study are primarily connected to the possibility that you might be identified as a participant in this study. To minimize these risks, you will be asked to create a pseudonym, or fake name, for use in the study. (what do I do for Zoom here?) All transcripts of your interview will use only that pseudonym, in order to protect your identity. In addition, once your interview has been transcribed into written text, any potentially identifying information, such as the name of your school, will be deleted from that transcript, and the audio recording will be destroyed. Further, if you are uncomfortable with answering any question, you are free to skip a question or request that the interviewer stay away from asking about a particular subject. You are also free to end the interview at any time without penalty.

**Are there any benefits to yourself or others?** There are no known direct benefits to you by participating in this study. Indirect benefits include the opportunity for you to reflect on your past experiences and the effects of self- disclosure.

**If you change your mind about participating,** you can withdraw at any time during the study. Your participation is completely voluntary. If you choose to withdraw, your data can be withdrawn as long as it is identifiable. Your decision about whether to participate, or to stop participating, will not jeopardize your future relations with Auburn University.

**Initials:** \_\_\_\_\_

**Page 1 of 2**

**Any data obtained in connection with this study will remain confidential.** We will protect your privacy and the data you provide by using a pseudonym, or a fake name, to identify you. We will also remove any potentially identifying information (such as names) that you might share in your interview from the transcript. We will also destroy the original audio recordings of your interview 18 months after transcription. Information collected through your participation

may be, after removing identifiable information, used for professional publications, data summaries for policy makers, research presentations, and teaching research skills.

**If you have questions about this study,** contact Simona Niculaes @ [san0015@auburn.edu](mailto:san0015@auburn.edu) or (205) 999-3846 and/or Dr. Malti Tuttle @ [malti.tuttle@auburn.edu](mailto:malti.tuttle@auburn.edu) or (334) 844-3724

**If you have questions about your rights as a research participant,** you may contact the Auburn University Office of Research Compliance or the Institutional Review Board by phone (334)-844-5966 or e-mail at [IRBadmin@auburn.edu](mailto:IRBadmin@auburn.edu) or [IRBChair@auburn.edu](mailto:IRBChair@auburn.edu).

HAVING READ THE INFORMATION PROVIDED, YOU MUST DECIDE IF YOU WANT TO PARTICIPATE IN THIS RESEARCH PROJECT.

\_\_\_\_\_  
Participant's signature                      Date

\_\_\_\_\_  
Interviewer's Signature                      Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

## Appendix E

### **HOTLINES**

Crisis Text Line

Text HOME to 741741

Grief Share

**1-800-395-5755**

Families Anonymous

**1-800-736-9805**

United Way Crisis Helpline

**1-800-233-HELP**

Christian Oriented Hotline

1-877-949-HELP

National Prayer Line

**1-800-4-PRAYER**

### **ONLINE MINDFULNESS RESOURCES**

#### **BREATHING**

<https://www.youtube.com/watch?v=8vkYJf8DOsc>

<https://www.youtube.com/watch?v=DbDoBzGY3vo>

#### **COLORING**

<https://www.teacherspayteachers.com/Product/FREE-Adorable-Kids-Mindfulness-Mandala-Coloring-Pages-Printable-PDF-Sheets-6424729?st=3d5a2f479e205cbf50ad0065f76edd00>

<https://thewellnessociety.org/wp-content/uploads/2021/05/Nature-Mindful-Colouring-Sheets-1.pdf>

#### **BODY AWARENESS**

<https://www.youtube.com/watch?v=z8zX-QbXIT4>

<https://www.youtube.com/watch?v=xiP6HZY0tmQ>

#### **ONLINE DISTRESS TOLERANCE RESOURCES**

<https://www.youtube.com/watch?v=cqPcOCpJOXw>

<https://www.youtube.com/watch?v=FuDfIDMrD1s>