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Pornography viewing as attachment trauma in pair-bond relationships-A theoretical model of mechanisms.

Spencer T. Zitzman
Brigham Young University - Provo

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PORNOGRAPHY VIEWING AS ATTACHMENT TRAUMA

IN PAIR-BOND RELATIONSHIPS—A THEORETICAL

MODEL OF MECHANISMS

by

Spencer T. Zitzman

A dissertation submitted to the faculty of

Brigham Young University

in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

Marriage and Family Therapy Program

School of Family Life

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BRIGHAM YOUNG UNIVERSITY

GRADUATE COMMITTEE APPROVAL

of a dissertation submitted by

Spencer T. Zitzman

This dissertation has been read by each member of the following graduate committee and by majority vote has been found to be satisfactory.

_____   _____
Date   Mark H. Butler, Chair

_____   _____
Date   Robert F. Stahmann

_____   _____
Date   Leslie L. Feinauer

_____   _____
Date   James M. Harper

_____   _____
Date   Jeffrey H. Larson

BRIGHAM YOUNG UNIVERSITY

As chair of the candidate's graduate committee, I have read the dissertation of Spencer T. Zitzman in its final form and have found that (1) its format, citations, and bibliographical style are consistent and acceptable and fulfill university and department style requirements; (2) its illustrative materials, including figures, tables, and charts are in place; and (3) the final manuscript is satisfactory to the graduate committee and is ready for submission to the university library.

_____
Date

_____
Mark H. Butler
Chair, Graduate Committee

Accepted for the School

_____
Richard B. Miller
Director of School of Family Life

Accepted for the College

_____
Elaine Walton
Associate Dean, College of Family Home and Social Sciences

ABSTRACT

PORNOGRAPHY VIEWING AS ATTACHMENT TRAUMA

IN PAIR-BOND RELATIONSHIPS—A THEORETICAL

MODEL OF MECHANISMS

Spencer T. Zitzman

Marriage and Family Therapy Program

School of Family Life

Doctor of Philosophy

Online sexual activities, including pornography use, have drastically increased in recent

years. Many studies have examined the impact that pornography use can have on marriages and

families. One of the key findings has been that pornography use can negatively impact trust in

relationships. This study focused on understanding the mechanisms involved when a husband's

pornography use negatively impacts his marital relationship and his wife's emotional well-being.

Through qualitative analysis of interviews of 14 wives who received therapy because of their

husband's pornography use, the analytic team found (1) a breakdown of expectations and

assumptions central to the marriage, (2) a sense of distance or disconnection from their husband,

and (3) a general sense of being emotionally and psychologically unsafe and insecure in their

relationship. Further, it was found that loss of trust was greatly influenced by the sexual nature of pornography and the deceit surrounding its use. These two factors combined to produce a loss of secure attachment, particularly for attachment-oriented and attachment-idealizing wives, who hold the belief that pornography use is not appropriate. Overall, it was found that a husband's involvement with pornography can result in a lack of emotional, psychological, and physical availability and responsiveness, and a decrease in closeness and intimacy. Interacting with the impact of deceit, a spouse's pornography use clearly provides ample opportunity for the breakdown of secure attachment at a level that can be classified as an attachment rupture or trauma.

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CHAPTER I

Introduction

Prevalence rates for Internet use have continued to escalate over the past decade (Schneider, 2004; Young, 1998). This increased use of the Internet has brought along with it an increase in online sexual activities, including online pornography viewing (Schneider, 2004; Wolfe, 2000). The National Council on Sexual Addiction and Compulsivity reported that as many as fifteen percent of Internet users have accessed online sex chat-rooms or sites with pornographic material (Young, 2000). Research has found that up to nine percent of Internet users spend over eleven hours a week searching for and looking at sexual content (Cooper, 2000). Overall, it is estimated that $56 billion is spent on pornographic mediums each year worldwide (Forbes, 1999).

As preoccupation with pornography increases, couples report experiencing deterioration of marital and family relationships and impairment of performance and productivity at work and at home (Schneider & Schneider, 1996; Carnes, 1992). Schneider and Schneider (1996) conducted a survey of 88 couples that were attending counseling for sexual addictions. The participants were "asked to rank the three most important current problems in their relationship." They rated "rebuilding trust in my partner," "lack of intimacy," and "setting limits or boundaries" as the top three (p. 116). Several other concurrent problems during recovery were analyzed. Some addicted spouses and partners reported a need for years of therapy and personal work to recover from the effects of the sexual addiction.

Due to the increasing prevalence of compulsive pornography viewing and its effects on marriage, significant interest has developed among mental health professionals regarding its effects, diagnosis and treatment (Schneider, 2004; Wolfe, 2000). An increasing amount of

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literature is examining the dynamic of sexual compulsivity with pornography, including a possible diagnosis based on its effects on recreational, occupational and social aspects of life.

The current study focused on the potential impact that compulsive pornography consumption can have on marital trust. Specifically, the question was asked, how does a husband's pornography use impact marital trust? While past research studies (Bergner & Bridges, 2002; Milrad, 1999; Schneider & Schneider, 1996; Steffens & Rennie, 2006) and clinical literature (Laaser, 1996, 2006; Manning, 2006; Reid & Woolley, 2006; Tripodi, 2006) have included comments on the loss of trust due to a spouse's pornography use, this study aims to explain the influencing dynamics and process of this loss of trust. This study sought to understand what, if any, direct connection compulsive pornography use has on marital trust, or if the loss of trust is merely a result of the secrecy and deceit typically accompanying pornography use. Such an understanding can benefit clinical work aimed at restoring marital trust and helping couples heal from a husband's pornography use. The study focused exclusively on husbands' pornography use primarily due to the higher prevalence rates of pornography use among men (Cooper, Scherer, Boies, & Gordon, 1999; Cooper, Delmonico, & Burg, 2000; Daneback, Ross, & Mansson, 2006). Cooper et al. (2000) found that "the ratio of men to women [who pursue online sexual activity] is 6.14." That ratio, however, does decrease to 3.76 among the group categorized as the "cybersex addict group" (based on the results of their 59-item survey developed to measure sexual compulsivity or addiction). Therefore, while it is recognized that women view pornography and can be involved in compulsive or addictive use of pornography (particularly through the mediums of email and chat rooms (Cooper et al., 2000)), the majority of consumers are male. Changes in this trend are likely to occur as Internet use increases and could be examined in future studies. In addition to the differences in prevalence rates among men and

women being a factor in why the focus is solely on husbands' pornography use, the impact on trust would also likely differ for men and women and future studies will be necessary to understand these differences.

CHAPTER II

Literature Review and Theoretical Model

Review of the Literature

Prevalence of Pornography

Introduction of the Internet has brought with it a great increase in pornography

distribution and consumption (Schneider, 2004). Reports show that "an increasing number of sex

addicts are caught up in the web of cybersex, devoting endless hours to accessing Internet

pornography sites and chat rooms and having real-time sexual encounters online" (p. 5). Studies

demonstrate that sexual compulsivity rates have increased significantly in the last decade (Wolfe,

2000). Many have adopted Cooper's (1998) explanation for the appeal and danger of Internet

pornography (accessibility, affordability and anonymity, commonly referred to as the Triple-A

Engine), or Young's ACE model (anonymity, convenience and escape) (Young, Griffin-Shelley,

Cooper, O'Mara, & Buchanan, 2000).

Whatever the reason, statistics demonstrate that Internet pornography is a large and

growing industry. In the United States, estimates project that pornography consumption grosses

approximately eight billion dollars a year (Fisher & Barak, 2000; Thio, 2001). Worldwide, the

estimate is $56 billion (Forbes, 1999). Gross revenues, however, barely begin to show the level

of pornography use given the amount of free access available through the Internet. It is estimated

that less than 1% of viewers of online pornography spend any money to access pornography

(Branwyn, 1999). In fact, during January, 1999, the top five pay sites had 19.5 million unique

visitors, while the top five free sites had 98.5 million unique visitors.

The astronomical growth in the number of pornographic websites is also astounding.

Stack, Wasserman, and Kern (2004) reported that the number of pornographic websites had

grown from approximately 900 in 1997 to between 20,000-30,000 in 1998. The New York Times (as cited in Schneider, 2000) reported more than 60,000 pornographic sites in 2000—a growth of about 6,000% in just three years. Furthermore, "about one in four regular Internet users, or 21 million Americans, visited one of the more than 60,000 sex sites on the Web at least once a month" in the year 2000 (p. 250). Cooper (2000) found that up to nine percent of Internet users spend at least 11 hours a week searching for and looking at pornography.

Defining Pornography

It is generally accepted that therapy is concerned more with the subjective experience of clients and less with universal definitions. One area where this is especially applied is attachment. While attachment is likely not a completely malleable or constructed phenomenon, factors linked to subjective experience of security in pair-bond relationships do differ somewhat from person to person (Cassidy & Shaver, 1999). Attachment security is influenced by personal experiences, attachment experiences, early childhood experiences, relationship history, etc. (Cassidy, 1999). Experiences of attachment vary from individual to individual and from couple to couple. Therapists do not impose narrow views about who should or should not feel secure or about what creates a sense of attachment.

The designation of pornography is also subjective, varying according to the client's definition and experiences. This is especially important when the "client" refers not only to the pornography user, but also his or her spouse. As a general guideline, however, Schneider (2000) gives a general definition for online pornography (or, as she refers to it, cybersex) as "the use of digitized sexual content (visual, auditory, or written), obtained either over the Internet or as data retrieved by a computer, for the purpose of sexual arousal and stimulation" (p. 250). Such a utilitarian, outcomes-anchored definition of pornography obviously represents a different

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definition and is clearly distinguished in approach and purpose from legal definitions of obscenity.

The description of pornography included in this study is subjective to the client and anchored in attachment experience. The basic identifiers for pornography used in this study are 1) sexually oriented materials (pictorial or textual), 2) that only involves persons in indirect (not face-to-face) interactions (e.g., pictures, videos, internet chat rooms, interactive gaming, etc.), and 3) presents to the spouse a threat to their feelings of safety and security in the relationship and is experienced as a betrayal or danger signal for betrayal of intimate fidelity and trust.

Defining Pornography Addiction or Compulsion

Patrick Carnes (1983) first introduced the term sexual addiction in his book *Out of the Shadows*, and Bingham and Piotrowski (1996) first used the concept of addiction in reference to online sexual activity. Since then, an increasing acceptance of the concepts has been seen in professional literature and clinical work (Adams, 1991; Carnes, 1991, 1992; Cooper et al., 2000; Kasl, 1989; Schneider, 1989, 1991, 2000, 2000a). However, there are many who continue to debate the use of the term addiction in relation to sexual behaviors, including any form of pornography (Gold & Heffner, 1998; Sprenkle, 1987; Wolfe, 2000).

Aside from these debates, most agree that there are those who spend excessive amounts of time viewing pornography—excessive in that it causes negative effects in their personal, relational, and occupational domains. Additionally, many repeatedly fail in their efforts to discontinue their involvement with pornography (Goodman, 1993; Schneider, 2000). Traditional hallmarks and general criteria of addiction justify the application of the term to compulsive pornography viewing: "loss of control (i.e. compulsive behavior), continuation despite adverse consequences, and obsession or preoccupation with the activity" (Schneider, 2000, p. 253).

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Additional criteria of significant impairment in personal, relational, and/or occupational

domains, and multiple failed attempts to discontinue the behavior(s) can also be added to the list.

However, this study does not attempt to take a position on whether the terms compulsion,

addiction, or impulse disorder are suited for such cases in a diagnostic sense (Bergner & Bridges,

2002; Gold & Heffner, 1998). The use of the terms addiction or compulsion are solely for the

establishment of the author's assertion that pornography use can be problematic and is therefore

a relevant focus of clinical studies.

Review of the Research—Known Effects of Pornography Use on Marriage

Studies have found that pornography and other sexual addictions bring with them harmful

effects on marital and family relationships (Schneider, 1989, 2000; Schneider & Schneider,

1996; Young et al., 2000). Significantly, many of the reported effects mirror those of an

extramarital affair. Bergner and Bridges (2002) report that "the vast majority of women [use]

words such as 'betrayal,' 'cheating,' and 'affair' to describe the significance that their partner's

involvement in pornography [has] for them. . . . These women clearly [view] the pornographic

activities as a form of infidelity" (p. 196).

Cooper et al. (2000) conducted an online survey regarding online sexual activities (n =

9,265). They found that 13% of the respondents reported distress in their relationships because of

their online sexual activities. Due to the survey approach used in their study, however, they were

not able to study the specific ways that online sexual activities caused distress.

Many studies have examined more specific effects of sexual addictions, including

pornography use, on committed relationships (Corley & Schneider, 2002; Earle & Earle, 1995;

Laaser, 1996; Milrad, 1999; Schneider, 1989, 2000, 2000a; Schneider, Corley, & Irons, 1998;

Schneider & Schneider, 1996; Steffens & Rennie, 2006; Young et al., 2000), with others looking

specifically at pornography use and committed relationships (Bergner & Bridges, 2002; Bridges, Bergner, & Hesson-McInnis, 2003; Manning, 2006). Some of the common findings of personal and relationship effects associated with sexual addictions include the following: emotional attacks, increased conflict, and criticisms resulting in feelings of shame, hurt, resentment, insecurity, and self-blame (Laaser, 1996; Milrad, 1999; Schneider, 2000; Schneider & Schneider, 1991); feelings of shame (for the addicted spouse) that lead to isolation and relationship withdrawal (Adams & Robinson, 2001; Schneider, 1989); deterioration of couple communication (Schneider & Schneider, 1996); development of an egotistical and self-centered, or narcissistic, attitude (Wolfe, 2000; Young et al., 2000); and deterioration of the couple's sexual relationship/intimacy (Bergner & Bridges, 2002; Bridges et al., 2003; Schneider, 2000; Schneider & Schneider, 1996).

One of the most common and, according to couples' self-reports, harmful effects of sexual addiction on a marital relationship is a loss of trust (Schneider & Schneider, 1996; Zitzman & Butler, 2005), a lay term which may be equated with attachment security. In a study of 88 married couples where sexual addiction was present, only 14% of the addicts' spouses reported that they were able to completely trust their spouse (Schneider & Schneider, 1996). Similarly, in a study of wives' views of their husband's pornography use, Bergner and Bridges (2002) found that two of the common attributions given to husbands were "liar" and "selfish" (p. 198). Indeed, they consistently explained the grounds for these attributions from the fact that their husbands had "taken the most intimate aspect of the relationship, sexuality, which is supposed to express the bond of love between the couple and be confined exclusively to the relationship, and shared it with countless fantasy women" (p. 196). These descriptions offered by

wives in the Bergner and Bridges study clearly reveal that pornography viewing is experienced as a betrayal and "infidelity" much like an actual sexual affair.

In addition to these direct effects, other studies, while not examining directly the marital relationship, have also reported negative effects on the individual that can lead to secondary effects on a marriage relationship. For example, Adams and Robinson (2001) discuss the development of high levels of shame, which is commonly expressed through anger or contempt, which can be harmful in a marital relationship (Greenberg & Johnson, 1988). Goodman (1993) also found that individuals struggling with a sexual addiction commonly have higher levels of mood and anxiety disorders. It is important to note, however, that this finding simply denotes a correlation and cannot determine the order of temporal precedence and possible causal influence between pornography use and mood and anxiety disorders. The disorders could be cause rather than effect of pornography use.

Attachment Theory Perspective on Pornography

A theoretical model of the dynamics of pornography, juxtaposed and contrasted with the dynamics of intimate relationships, is essential to evaluate the significance of pornography viewing in the context of the couple relationship. An attachment model of the couple relationship, and a consideration of pornography viewing in terms of attachment, provides our evaluative theoretical framework. An attachment examination of pornography's depiction and scripting of relationships and sexuality suggests that pornography is inherently disruptive and destructive to secure attachment, to generativity, and thereby to well-being. We begin by linking *trust*, the focus of this study, to attachment. With this connection established, and having already detailed the well-documented connection between pornography use and loss of trust, we will be

able to develop a theoretical model proposing why pornography use within a marital relationship can cause attachment injuries.

Trust and Attachment

In this study, "trust" is viewed as the layperson's word capturing the experience of secure attachment. When discussing the loss of trust in a relationship, couples are likely referring to deterioration of secure attachment in addition to denoting dishonesty. When used as a synonym for secure attachment, trust refers to more than mere honesty, connoting a belief or expectation that a spouse will be consistently and faithfully available, attentive, and responsive—physically, emotionally, and psychologically—to our needs (Boon & Holmes, 1990; Cassidy & Shaver, 1999), that they will demonstrate a trustworthy "being for the other" in the relationship (Olson, 2000). These emotional and psychological dynamics are the basis for secure attachment in the adult pair-bond relationship (Cassidy & Shaver, 1999; Hazan & Zeifman, 1999).

Attachment and Generativity

Much of the literature on adult attachment has historically focused on adult attachment through "descriptions of past relationships" and less on the descriptions of the current marital relationship (Dickstein, Seifer, St. Andre, Schiller, 2001, p. 655). Secure attachment in marriage is a dynamic of greater consequence than its relation to marital satisfaction alone. Secure marital attachment produces the secure base of adulthood, a critical springboard to adult generativity, just as in infancy and childhood it is the springboard to critical developmental exploration. "Trust" in one's secure base empowers exploring and fulfilling adult generative activities such as parenting and career contributions. The securely attached adult is assured a relationship safe haven to which he/she can return in times of stress and distress (Dickstein et al., 2001; Hazan & Shaver, 1990; Shaver, Hazan, & Bradshaw, 1988). Thus, beyond marital satisfaction, secure

attachment may be a critical existential experience catalyzing adult generativity, so essential to

adult well-being as well as to the ongoing progress of society (Gardner & Howlett, 2000).

Conversely, attachment disruption or rupture predictably produces concomitant disruption of

generative activity (Amato & Booth, 1991; Forthofer, Markman, Cox, Stannley, & Kessler,

1996; Goldberg, 1993; O'Leary & Smith, 1991).

Pornography and Attachment

Attachment theory provides a powerful lens and unique evaluative framework for

considering the relational scripting of pornography and the effects of pornography viewing in the

context of the couple relationship. Theoretical literature (Creeden, 2004) suggests the possibility

of a systemic, recursive relation between attachment disorders and pornography viewing, each

feeding into and fueling the other in amplifying cycles. For example, one empirical study found

that identified sexual addicts commonly have significant levels of discomfort with closeness and

the majority (95%) display insecure attachment styles (Leedes, 1999). Another recent study has

proposed a treatment model and specific intervention techniques for treatment of sexual

addiction focused on strengthening attachment in pair-bond relationships (Butler & Seedall,

2006). Thus, scholars are increasingly examining pornography and pornography viewing from

the lens of attachment theory, and are centralizing attachment in recovery as well—including

focusing attention on the rebuilding of damaged trust.

The sexual dynamics of pornography place it on a collision course with the requisite

dynamics for secure attachment and authentic intimacy in the pair-bond relationship, thereby

placing intimacy, attachment, and generativity all at risk. Secure attachment ("trust") in adult

pair-bond relationships is the wellspring of generativity, the primary developmental activity of

adulthood and a central source of well-being (Hazan & Zeifman, 1999). Behavior that disrupts or

erodes secure attachment may have a significant negative impact on generativity and, subsequently, individual and societal well-being and progress. If pornography, therefore, influences or results in a more insecure attachment in a marital relationship, then it may also affect generativity, resulting in significant personal, partner, and relationship impairments (M. H. Butler, personal communication, May 2005). The view taken in this study is that a couple's report of distress and loss of trust over pornography use by a spouse is analogous to impediment, impairment, or disruption of secure attachment (Zitzman & Butler, 2005).

Sexual Experiences Disconnected from Relationship Context and Meaning

Arguably and observably, one express purpose and outcome of pornography is to detach and disconnect sexual experience from attachment dynamics and expectations in pair-bond relationships. Pornography's primary stimulus to autoerotic behavior, combined with its complete eroticization of sexual experience, readily produces profound disconnection of the sexual experience from relationship context and meaning (Zitzman & Butler, 2005). Indeed, "pornographic scripts dwell on sexual engagement of parties who have just met, who are in no way attached or committed to one another, and who will part shortly, never to meet again" (Zillman & Bryant, 1988, p. 521). Thus, pornography in no way supports or fosters intimate, attachment-linked sexual gratification, anchored in emotional connection, intimate responsiveness, and relationship fidelity.

Pornography invites and reinforces a non-intimate, non-relational, and therefore non-demanding ("easy") sexual experience—a detached, disconnected physiological arousal suited to the self-engrossed preoccupation typical of addictive experience and escape (see Bergner & Bridges, 2002; Manning, 2006). Pornography elicits and entrenches emotional, psychological, and spiritual/existential disconnection of sexuality from relationship context, meaning, and

constraints. Thus, the pornographic depiction promotes and induces sexual arousal, climax, and resolution without real relationship *attentiveness, responsiveness*, or *commitment*—the key dimensions of attachment. The entrenchment of such expectations and aims seems likely to increasingly eroticize sexuality, forming it as an addictive palliative and in the process divorce marital sexuality from intimacy and attachment ends and outcomes (Zillman & Bryant, 1988). Both the using of pornography and possible subsequently scripted exploitation of one's partner to such self-engrossed ends seems calculated to directly undermine trust (attachment security) in the couple relationship. Thus, the sexual dynamics depicted in pornography are inherently, inexorably, and unavoidably detrimental and destructive to secure attachment. The irony of pornography is its human disconnection in the context of what can be the most intimate human connection possible (Zitzman & Butler, 2005).

It should not surprise clinicians, therefore, that a spouse's viewing of pornography is experienced by some partners as an "extramarital violation" or betrayal and a risk factor that casts doubt on the attachment security and safety available in the marriage (Bergner & Bridges, 2002; Bridges et al., 2003; Manning, 2006; Zitzman & Butler, 2005). Pornography is viewed, as it were, as a virtual infidelity—just an opportunity away from actual infidelity. Such rational inference is supported by research finding that exposure to pornography resulted in a significant increase in the acceptance of actual infidelity, a decrease in considering marriage an essential institution, and a decrease in viewing frequent or occasional infidelity as cause for divorce (Zillman & Bryant, 1988).

It was expected that wives who hold the subjective view that pornography use is harmful would tend to be attachment-idealizing in their marriage—holding the belief that sexual relationships have the ability to and to be used for the purpose of creating strong, emotional

bonds between individuals and increasing a sense of secure attachment in marriage. Therefore, they would then also identify a connection between a husband's sexual experiences outside of the context of their marital relationship (regardless of whether they are real or fantasized) and a loss of trust or secure attachment. It is also reasonably anticipated that a husband's deception and lying—in order to hide and protect his pornography use from his wife and possibly others—is a concurrent, overlapping, yet also separate detrimental influence upon relationship trust.

Purpose and Rationale for the Study

As mentioned in the preceding review of the literature, a common finding from studies on sexual addiction in marriage is that serious relationship problems frequently occur among Internet and sexual addicts (Young, 1998), including a negative impact on marital trust (Schneider & Schneider, 1996; Zitzman & Butler, 2005). As a result, recent studies and theoretical papers have begun to look at attachment issues and sexual addiction (Butler & Seedall, 2006; Reid & Woolley, 2006; Seedall & Butler, in press; Zitzman & Butler, 2005).

However, most studies of sexual addiction do not examine pornography in isolation from other sexual behaviors (i.e., prostitution, strip-clubs, extramarital affairs, etc.) (Bergner & Bridges, 2002; Bridges et al., 2003; Corley & Schneider, 2002; Earle & Earle, 1995; Schneider, 2000; Schneider & Schneider, 1996). Thus, effects of pornography viewing are confounded with those of other sexual behaviors. The current study singled out the independent effects of pornography viewing by utilizing a participant sample consisting of couples where pornography viewing alone was present and was a source of complaint. Delimited attention to the experience of couples where pornography viewing alone was the presenting issue avoids confounding observed results among the entire range of sexual behaviors, thus providing a better answer to the question of whether pornography viewing alone does in fact prove a detriment in marriage.

That being said, the goal of this study was to go beyond determining whether or not pornography viewing alone harms a marriage. Other studies have attempted to draw such conclusions (Bergner & Bridges, 2002; Bridges et al., 2003; Schneider, 2000a), and all have concluded that pornography can have a negative impact on a marriage relationship (although they do not agree on the extent that it impacts a marriage or the percentage of marriages affected). The goal of this study was to look at marriages that were impacted and develop a theory explaining why this occurs. The use of a qualitative interview approach was chosen to provide a detailed and in-depth, empirical analysis of the processes involved in the genesis and etiology of a trust or attachment injury related to a husband's use of pornography. Understanding the mechanisms and processes associated with a progressive debilitation of trust, along with ensuing unraveling of secure attachment, in consequence of pornography viewing, is especially important for therapists. The overall goal of this study, then, was to identify a relational, interactional map of the theoretically hypothesized dissolution of trust in consequence of a husband's compulsive pornography use.

CHAPTER III

Method

Design

To investigate the dynamic relation of a husband's pornography viewing to wives'

marital trust, our study utilized a qualitative design (Newfield, Sells, Smith, Newfield, &

Newfield, 1996). Qualitative research, and specifically the analysis of in-depth, detailed

interviews, is capable of providing holistic, systemic descriptions of processes associated with

the development of a specific dynamic (such as a loss of trust or injury to secure attachment)—

holistic perspectives that are often out of reach of reductionistic, quantitative methods.

A qualitative design and method facilitates development of a processual, holistic profile

of relational dynamics (Bird, Butler, & Fife, in press). In this study, it was used to generate a

holistic view of client-perceived processes contributing to the loss of marital trust or secure

attachment in consequnce of a husband's use of pornography.

A qualitative method is also well suited to studying a topic which lacks widespread study,

allowing deep and extensive inquiry (Rosenblatt & Fisher, 1993). It is useful to "uncover . . .

what lies behind any phenomenon about which little is yet known and can give the intricate

details of phenomena that are difficult to convey with quantitative methods" (Strauss & Corbin,

1990, p. 19). Finally, qualitative descriptions can be useful in helping practitioners "understand a

client's conceptual model" or perspective (Newfield et al., 1996, p. 25). Increasing

understanding of the client's perspective in marital and family therapy continues to be a need in

the field (Newfield et al., 1996).

Unrelated to research objectives and outcomes, a final benefit to qualitative methods is

that study participants have on occasion reported the interview process itself as therapeutic

(Cobb, 2001). Qualitative methods were consequently chosen based on the explained advantages and the limited research regarding the client-perceived processes contributing to a wife's perception of change in marital trust related to her husband's use of pornography.

Participants

Participants were recruited from three marriage and family therapists in different locations (thirteen from one therapist, located in Utah, and one from each of the two other therapists, located in Ohio and California). All three therapists were Licensed Marriage and Family Therapists (varying from 6 to 28 years of practice). Therapists were asked to identify wives who presented for or had received individual or marital treatment regarding a husband's use of pornography (as defined by the wife). Therapists were asked to screen out any potential participants where either spouse had engaged in any other sexual promiscuity outside the marriage. When contacting potential participants, the therapist explained the purpose of the study, a brief overview of the methods, and that participation was voluntary and could be terminated at any time. No attempts were made to screen participants based on criteria for addictive or compulsive pornography use, but rather it was left to the wife's subjective judgment whether her husband's pornography use was a clinically relevant concern for her and her marital relationship.

Eighteen participants were recruited for the study, four of which were found to be ineligible due to the husbands' participation in extramarital sexual behaviors beyond viewing pornography. Participants included those who were receiving therapy services (n = 2) and those who had already completed therapy (n = 12) (no significant differences were noted between these two groups during analysis of the data).

The age range for the participants was 18-25 (29%), 26-35 (50%), 36-45 (14%), and 45-55 (7%). Participants were Caucasian (93%) and Hispanic (7%). Participants' education levels were "some college" (36%), "associates or bachelor's degree" (57%), and "graduate degree" (7%). Reported total household income ranges were $10-29,000 (29%), $30-49,000 (21%), $50-69,000 (21%), and above $70,000 (29%). The mean number of years married was 7.5, with a range from 1 to 19.5 years (see figure 1). The marital status of the participants were first marriage (11), second marriage (2), and third marriage (1). Of the 14 couples, 10 had children, ranging from 1 to 4 children. All 14 of the participants reported a Christian religious affiliation. Among the 14 participants, 9 reported that, to their understanding, their husbands' pornography use had ended. Also according to the wife's understanding, the average duration of her husband's pornography use was 16.5 years (with a range from 3 to 38 years) (see figure 1). In all but one case, pornography use began prior to the marriage. Among the participants, 5 reported that they discovered their husbands' pornography use, 6 that it was their husbands' own choice to disclose their pornography use, and 1 that her husband disclosed following her inquiries.
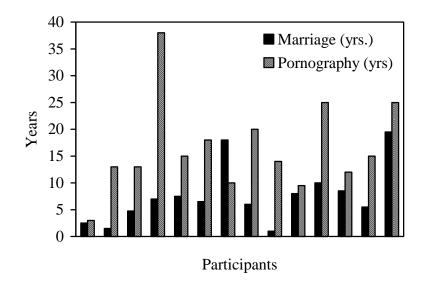

Figure 1. Number of years married (at time of interview) compared to the number of years of pornography viewing (as reported by wife).

Procedures

Therapists at each location were asked to recruit current and previous clients. These therapists were asked to give a brief explanation of the purpose, benefits, and risks of the study, a brief overview of the methodology, and to explain spouses' rights as research participants, including the freedom to withdraw from participation at any time (see Appendix A for recruitment guidelines). The potential participant was then asked if they would be willing to be contacted via the phone by a research team member for further details (with no current commitment to participate beyond this contact). If they accepted to be contacted with further information, their contact information was given to the research team member. They were then contacted by the researcher conducting that interview to set a date and location.

After the study was explained and questions answered, participants completed an informed consent form (see Appendix A). The participants were also asked to fill out a brief demographic questionnaire before the interview. All interviews were tape recorded (audio only) to allow for complete and accurate transcription. During the transcription process, all identifying information was removed. Pseudonyms were assigned for each participant. Following transcription of the interviews, the audio tapes were erased. The tapes, transcripts, and any other materials were marked by an identification code only. All materials were kept in a locked file cabinet. A list of participants, their informed consent to participate forms, and their identification numbers were kept in a separate locked file cabinet, which could only be accessed by the researchers.

Measures

The goal of this study was to use an in-depth and detailed interview in order to separate and differentiate the respective influence of (1) a husband's deceit and (2) his pornography use

on the erosion of trust and debilitation of secure attachment in the marriage. Specific interview questions attempted to make such distinctions (for example, "If your husband were to continue his pornography use, yet be open and honest about it, do you believe their there would still be a negative impact on your trust in him and/or your marriage? If so, could you explain why?").

The structured interview (see Appendix B) was formulated prior to the interview by the primary researcher. Questions were open-ended and followed a question-probe pattern. The interview was expected to last approximately 1 hour. Initial drafts of the interview questions were edited and refined to increase their neutrality and in order to minimize researcher influence. The questions were framed so as to be non-leading.

In order to further secure a safe context for participant disclosure, participants were reassured that their answers would not be shared with their therapist. They were asked to provide sincere and direct answers, in order to produce the most helpful and accurate information for serving future spouses in their situation. These instructions were given in an effort to reduce social desirability while seeking to obtain the participants' perceptions of marital trust and pornography use.

A demographic questionnaire (see Appendix B) was used to obtain information regarding gender, race, age, socioeconomic status, religious affiliation, education, and years married. Questions addressed how the pornography use was disclosed; whether it was considered to be ongoing or discontinued; and, if trust was negatively affected, whether the wife perceived the impairment of marital trust to have been influenced more by her husband's deceit/lying or directly by the use of pornography (or equally by both). Such questions allowed for analysis of any systematic distinctions among and between the dynamics of deceit versus pornography viewing.

Researchers

The primary researcher was a doctoral student in BYU's Marriage and Family Therapy program with experience in conducting qualitative interviews, research, and data analyses, including group hermeneutic data analysis. He also holds a masters degree from Brigham Young University in Marriage and Family Therapy. During his course of study, one of the specialties he focused his attention on was the study of sexual addiction in marriage relationships, including understanding its impact, and the ability to properly assess and treat as a presenting problem in marriage and family therapy.

He currently holds a license as a marriage and family therapist and works in an agency setting where a significant percentage of clients present with concerns stemming from pornography use, particularly as it affects their marriage. His religious background is with The Church of Jesus Christ of Latter-day Saints (Mormons), a religion that holds the belief that pornography use is inappropriate at any level for any individual, married or single.

A team of four other paid researchers were recruited to assist in interviewing, transcribing, and data analysis. All researchers were trained in the process of conducting interviews, transcribing, and qualitative data analysis. Research assistants were recruited from the BYU Marriage and Family Therapy graduate program (two), recent graduates of BYU's social science programs (one), and current BYU social science undergraduates (one). Two of the research assistants were male and two were female.

Analysis

Participant interviews were coded and analyzed using a refinement of qualitative hermeneutic/interpretive approach as outlined by Gale, Chenail, Watson, Wright, and Bell (1996) and Wright, Watson, and Bell (1996; see also Bird et al., in press, and Butler, Gardner, &

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Bird, 1998, for representative examples). This qualitative, group hermeneutic approach is

supported as an appropriate and valuable method for analysis of qualitative data (Benner, 1994;

Bird et al., in press; Chesla, 1995; Gale et al., 1996; Odman, 1998; Packer & Addison, 1991;

Wright et al., 1996).

A team of three analysts examined the interviews. The use of a team of analysts in the

hermeneutic process is "for the purpose of triangulation, helping assure stable, reliable results

consistent with the data through the consensus and holistic picture arising from the contributions

of multiple perspectives" (Butler et al., 1998, p. 457). Use of a team analytic strategy imposed

the necessity of documentation and negotiation in order to achieve the agreement of at least two

analysts, which was the standard for certification of any observed theme as a study theme.

Inclusion of a theme required the advocacy of at least two analysts with the consent of the third.

Significant opposition of any analyst to a specific theme led to a reevaluation and refinement or

to discarding of that theme. The team analytic strategy promotes internal validity and reliability

of the observed results, limiting the intrusion of any idiosyncratic bias of any one analyst.

A fourth research team member observed data analysis for quality control—supervision

and verification of the required protocol. As a process facilitator, the leader's influence was

limited to process and protocol and he was excluded from content conversations—e.g. the

development of themes. Specifically, he encouraged equal participation from all team members,

assured that analytic team members supported proposed themes directly from the data, and that

observed results were detailed, clearly worded, and prepared for reporting. This research team

member was trained in his role by the primary researcher.

In this manner the analytic team was held to a rigorous process, while simultaneously the

primary researcher was removed from the analytic process so as to preclude the introduction and

overlay of his views upon the data. The goal of this format was to assure a high level of analyst accountability, encourage the development of coherent themes and credible results with direct support from the raw interview data, and promote valuable and equal participation by all team members. The anticipated empirical outcome of such a strategy is increased credibility and reliability of the findings. The analysis consisted of four phases, adapted from Gale et al. (1996) and Wright et al. (1996).

Phase One

Each analyst was given a copy of all participant interviews. Prior to distribution of the interviews to the analysts, the reading order was randomly sequenced for each analyst, in order to help control for the vulnerability of grounded theory processes to produce "first interview" bias. Each analyst was asked to read the interviews over once to gain a general perspective. They were instructed next to re-read the interviews in greater depth to identify themes recurring across multiple interviews and relating to the influence of a husband's pornography viewing on wives' relationship trust. Each analyst coded the interviews to document her/his observed themes. Finally, each analyst independently wrote a summary of observed themes. All of these procedures were completed by the analysts prior to any group process.

Phase Two

For phase two, the team met to discuss the themes that they found and work toward consensus. The team leader attended and supervised the process as outlined previously. Each analyst, in an order determined by random, shared a theme as well as the supporting data from the interviews. As each analyst had read and coded the interviews during the previous phase, they were able to give references from the interviews to support each theme. The supervisor required analysts to fulfill the requirement that proposed themes be anchored directly to the data.

Themes with multiple references from different interviews were weighted as the most prominent. Through a process of feedback and collaboration, the team reached a consensus concerning the key themes found in the interviews. As noted above, in order for a theme to be considered a key theme, advocacy from at least two members and acceptance from the third were required.

Phase Three

In phase three of the analytic process, each analyst once again separately reviewed the transcripts, but this time searching specifically for confirmation, refinement, or disconfirmation of consensus themes, and/or for additional themes that had been overlooked. Once again, they wrote summaries that included supporting data and which confirmed, clarified, or disconfirmed themes. Themes without adequate two-and-one support (according to the criteria described) would later be discarded.

Phase Four

In phase four, the analysts met for a final time to review and discuss the information from each team member's individual discovery and analysis. The goal was to determine a final consensus regarding the themes, seek to establish where possible a coherent framework unifying the themes, and to document and code the data from the interviews that supported each theme.

During Phase 2 and Phase 4, the discussions of the analytic team were tape recorded. These have been archived as part of the research record.

CHAPTER IV

Results

Primary Themes Included

Results of the qualitative analysis build a model of participants' experiences with the

disclosure of their husband's pornography use and the resulting impact on trust in their marriage.

Results confirm that pornography use can have a significant impact on trust, or attachment, in a

marital relationship. Results also suggest that deceit surrounding the pornography use has an

independent effect on the deterioration of trust, standing alongside perceptions that the husband

is not as available and responsive to his wife's needs because of his pornography use. The

findings of the individual members of the analytic team proved to be highly consistent.

Three major themes relating to wives' experience of husbands' pornography use arose

from the analysts interface with the data. The major themes (and sub-themes) follow three broad

areas: 1) intense emotional experience; 2) deceit and trust (lying about pornography, changed

perception of husband, marital expectations, open and honest); and 3) pornography and the

attachment bond (inability to fulfill marital expectations, emotional harm, and compromised

sexual intimacy).

Table 1
Major and sub-theme groupings and organization

Major Themes	Sub-themes
Intense Emotional Experience	None
Deceit and the loss of trust	Lying about pornography use
	Changed perception of husband
	Failed marital expectations
	Open and honest disclosure
Pornography and the attachment bond	Inability to fulfill marital expectations
	Emotional harm
	Compromised sexual intimacy

Intense Emotional Experience

In 13 of the 14 interviews, wives described their experiences of their husband's disclosure of pornography use as an intense, emotional experience. Wives used the following terms to describe their experiences: "floored," "horrible," "emotional," "freaked out," "stunned," and "numb." Mary stated (not her real name):

It was really devastating. When he . . . was telling me that he had something to tell me . . . . I thought of the worst thing that . . . would just totally kill me, and that was what it was. It . . . was really hurtful.

Ann explained that the disclosure was "really shocking, really devastating" and that she felt "duped" by her husband. She further explained that she is generally a very confident person in most situations, but that this discovery led to her feeling "the most depressed, I think, that I had ever been."

Jennifer explained that hearing her husband disclose his pornography use felt "surreal." She explained that the time following disclosure continued to be "an emotional rollercoaster":

Everyday was an emotional rollercoaster, but there was just this whole period of just being numb and just being like this is . . . this is just out of control, you know? And then there was a period of questioning. . . . Then there was a period of being really angry, and sometimes it wasn't necessarily just anger at my husband, sometimes . . . I had a lot of anger towards people in my religion—The lack of information and the lack of awareness and knowledge. . . . I just wanted to scream at everybody and just say "You're so dumb. You don't know what you're talking about!"

Nancy and Karen also described similar "emotional rollercoaster" experiences of being "angry" and then "depressed." In fact, Nancy described her initial experience as having to go to

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"the depths of despair and then [having] to climb back out again." Karen explained, "One minute you can be just so angry you want to kill him, and the next minute you're just begging for, you know, some affection." Kimberly also talked about being devastated. She explained that what was so difficult was that "it had been going on for so long" and that she "had no idea it was going on."

Four of the wives were aware, to some extent, of their husband's pornography use prior to their marriage. All of these women agreed that disclosure of the continuation of pornography viewing during the marriage resulted in a much more devastating and emotional experience, regardless of their knowledge of use prior to marriage. Katy explained that she was "devastated . . . [and] heartbroken. . . . It was just like when you hear really bad news or when you find that somebody's been hurt or killed or something—that shock that just goes through your body." Sarah also knew about her husband's pornography use before marriage, yet also stated that disclosure after marriage was still "devastating." Amy explained that when she found out later in marriage she remembers, "Just sitting on the floor in the hallway and just crying and crying." The next theme ties into the first, seeming to provide some understanding of the reasons for wives' intense, emotional reaction.

Deceit and the Loss of Trust

All 14 wives commented that their husband's pornography use resulted in a loss of trust in their marriage. Also consistent with all fourteen participants was that the deceit surrounding their husband's pornography use was a major factor in that loss of trust. Through analysis of the wives' explanations of this phenomenon, four sub-themes developed. They included the following: 1) lying about pornography use, 2) changed perception of husband, 3) failed marital expectations, and 4) open and honest disclosure.

Lying about pornography use. Of the 14 wives, 9 talked about how their husband's secrecy and deceit associated with pornography decreased her trust in him. Lisa explained that initially she was not that concerned with the pornography use, that pornography was "not a big deal." Then she found that her husband was concealing the full extent of his pornography use. She explained, "The fact that he hid it from me is what kind of started gnawing at me." She stated that secrecy and hiding were the first things that made her begin to be concerned.

The intrinsic as opposed to socially (or religiously) constructed nature of this experience is suggested by wives' own surprise that it affected them the way it did. Sarah mentioned that "it doesn't seem like it *should* affect your trust. Like, you look at it on paper [and] you're just kind of like, why would it affect your trust?" She then explained that a primary reason she feels that it did affect her trust was "the fact that he had hid it from me. . . . He went through significant means to be able to hide it from me."

Karen stated, "It's about the lying. It's about the secrecy. It's about not, you know, not being open." Laura explained why the lying caused problems with trust: "Secrecy . . . I think it's detrimental, because if you start hiding one thing, it's easier to hide another thing." Lying in one area appears to cast a cloud of doubt over trustworthiness and honesty in the relationship generally. Mistrust, or at least uncertainty, appeared to be generalized in the relationship. Jennifer explained that her trust issues "didn't come up until suddenly I realized I had been duped." She added:

> Part of it is the idea that someone that I thought I knew was living a whole other life that I had no idea [of], and the idea that it was intentionally hidden from me and I guess you could say [I was] lied to. . . . How do you know that you're not going to get duped again. So that affects the trust. . . . So you become more skeptical and in that process [struggle

to know] . . . 'How do we regain trust when I know that you are perfectly capable of deceiving me?'

Some of the women commented on how lying and deceit surrounding the pornography use compounded the impact of the pornography and the resulting loss of trust. Katy said, "Knowing that he's using [pornography] or viewing [it] is bad enough. But knowing that he's lying about it and deceiving me and it's secretive—that's worse to me."

Changed perception of husband. Perhaps developing directly from this experience of deception, a second sub-theme found in the data was that secrecy and deceit surrounding pornography use eventually led to a change in the wife's global perceptions of her husband—her internal working model. Of the 14 wives, 12 talked about this change. They discussed a general loss of trust in their husband's word and even a decrease in respect for him. Mary explained that it was not simply a lack of trust regarding pornography use:

Everything changed. [Generally speaking,] I didn't trust him any longer. . . . I thought he was disgusting. . . . I just couldn't trust him. . . . I felt like I always had to check up on him and that he wasn't responsible.

Katy also admitted that she became "very suspicious of" her husband, worrying about such things as "what he was really doing when he would be at work late." She also felt "disappointed in him" because she felt he was not living up to his potential. She added:

It makes it so that I can't believe anything he says. And that, I think, has been . . . one of the hardest things. . . . I don't know what to believe. I don't know what's real anymore. I don't know what to really think. Because when I ask him, "How are you doing?" in the past he'd say, "Oh, I'm fine, I'm fine. You don't have to worry about me." But the truth was I really did need to be worried, and he really was viewing pornography. And so

when he says to me now, "I'm fine, you don't have to worry about me." I'm still kind of

on pins and needles wondering, "Do I really need to still be wondering about you

because you told me that [reassured me before] when [in truth] you weren't doing well?"

So how am I supposed to know if that's really the truth now?

Jennifer also confirmed that her husband's deceit surrounding his pornography use made

her question much more than his pornography use:

I felt like I didn't know who he was, and so I didn't know what to think of him, or what

to feel about him. I felt like he was a stranger to me. . . . I didn't trust anything. I didn't

trust that what he was thinking about, looking at, or doing in public at any given moment.

. . . Everything comes into question. That is an awful existence.

Karen elaborated on why the deceit surrounding pornography spread to a lack of trust in

anything her husband said:

You can't trust anything he says. You can't because if he says he's not going to do it and

he does it, then how do you believe anything he says. . . . I mean you can't trust anything.

So it's not so much about the pornography, it's just about the, "If you'd lie about that

then what else were you lying about?"

Sharon gave a similar explanation of this process:

Before [my husband] told me about it, everything that he said to me I just took for [the

truth] . . . as he said it. And after he disclosed everything to me and told me over and over

again that he had told me everything and that he was now telling me all of the truth, I still

didn't know if I could believe anything that he said. And even when he would say

something as simple as, "I love you," I would question, "Well, does he really love me?

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Or is he just saying that because he's been covering this up for five years?" So anytime he said anything it made me question if he was telling the truth or not.

For 4 of the women, in addition to this lack of trust in their husband's word—leading to uncertainty about the "substance" of the man they married, uncertainty about his true identity—there was one change in their perception of his identity that was concrete and definitive—that of seeing him as fundamentally untrustworthy and of disreputable character. Thus, their internal working model of their husband changed. Lisa explained, "It has altered my opinion of him. I see him as a much weaker man. . . . It has damaged my view of him. . . . It makes me question his concept of truth." Nancy also talked about coming to a point where she "couldn't have any respect for him. . . . I couldn't ask for his opinion on things that . . . you struggle with [in raising a family]."

In one interview, the wife mentioned that she still had some measure of trust in her husband because he voluntarily disclosed his pornography use instead of her finding out about it. Even so, she said, "It still brought skepticism. . . . It [caused] me to question his character."

Failed marital expectations. Not only did wives' internal working model of their husbands deteriorate in consequence of husband's pornography viewing and deception, but their image of their marriage was also diminished and impaired. As outlined above, the deceit and secrecy surrounding pornography use greatly affected a wife's trust. This process began with an inability to trust his statements regarding pornography use and then frequently generalized to a changed perception of her husband as someone who was untrustworthy.

In 11 of the 14 interviews, the wife explained that the deceit was a violation of her expectations for her spouse. Included in this were comments regarding the breaking of promises and marital vows, divergence from common goals, and the collapse of hoped-for intimacy and

companionship in marriage. Per these comments, it appeared that because of the deceit, these wives began to question the overall value they once placed on their marriage as well as their husband's commitment to their marriage.

In describing this development, 5 of the 14 wives commented on how a husband was "the person that you want to look at you and love [you] more than anything else in the world" (Jennifer). Mary described perceiving her husband as someone who "wasn't that type of person that I would think would do something like that." Other wives expressed similar conceptions, damaged by pornography use and attendant deception. When the pornography use was disclosed, they began to question whether they had accurately perceived *any* part of their husband's character. For example, Jennifer would ask herself, "Who is this person that I am married to and what did I get myself into? . . . I felt like every time he was happy with me was a lie." Laura explained that she entered marriage with "different expectations." Karen also mentioned failed expectations and further explained:

> You have a certain expectation or a belief of what your future's going to be and then [suddenly] . . . that's ripped . . . from you and you don't trust anything. You don't trust that he'll come [home] from work on time. You don't trust that . . . he'll be there tomorrow. . . . There's nothing left to look forward to because you don't know what tomorrow will bring, you know? So it's not just about, "Well is he going to view pornography?" It's about, "Is he going to provide for our family? Is he going to . . . come home tomorrow and say he wants [a] divorce?" . . . All those little things that you felt pretty secure in one day, the next day they're just gone.

Lisa talked about the promise made when she and her husband were married. She stated, "It makes me question his promises." Sharon also referred to marital vows: "For him to use

pornography was breaking the promises that he had made [to be faithful] and when promises are broken, I can't trust someone." She added that she then began to feel "like everything was different. Every way that I thought about myself and my spouse was different."

Katy and Ann also referred to damage to the marital bond—another attachment reference. Katy stated, "It tears away that bond between a husband and wife and it destroys families." Speaking in particular about the bond created through sexual intimacy, Ann stated, "That bond has been broken; that kind of promise [of fidelity] that you made at marriage." Nancy talked about her expectations about shared goals. She stated:

> You're building on the same goals, and the same philosophies of life, and the same morals, and the same religion, and the same faith, and the same everything, and all of a sudden you're looking at this man and he has decided to go [off in] left field.

She added, "I just always figured that we'd be a team, and that we would have the same ideals and the same goals. . . . I never figured it would be him I'd have to stand up to." Throughout these comments, what was consistently noted were references to failed expectations particularly linked to the promises and commitments of complete emotional fidelity—thus the internal working as a secure base was diminished, alongside diminished views of her husband individually.

Open and honest disclosure. While all of the wives talked about losing trust, and deceit being a primary factor in that loss of trust, 9 of the 14 wives identified a contrasting experience of open and honest communication lessening the loss of trust. Nancy explained that even having her husband "fess up" when asked about his pornography use was helpful.

In addition to initial full and honest disclosure being helpful, Michelle talked about the benefit of a developing openness and honesty. She stated, "Having open communication about

[his pornography use] does help. It does reduce the impact." Katy also mentioned the relief of a shift toward open and honest communication:

It's just easier to know . . . what [he is] doing rather than dealing with the deceit on top of it. . . . Of course I'd be disappointed and heart-broken, but to me that's not . . . as difficult for me [as] being blindsided by finding out later that he had viewed and not told me. . . . For him to come to me [and acknowledge his actions] . . . would actually help build the trust.

Laura also mentioned still feeling hurt and losing trust, but confirmed that the impact was less when her husband chose to be honest and disclose his problems with pornography to her. She explained:

With my husband being completely open and honest . . . it has lessened the impact, . . . lessened the hurt. The hurt is still there. The anger is still there. But I don't think it's as bad because . . . I didn't have to find it or I didn't have to find out through . . . somebody else. . . . It's made it easier for me to be able to work through the addiction, work through my hurt, than I think it would've been if he would have completely hidden it. So I think being completely open and honest, that helped lessen [the loss of trust]. . . . Even though [honesty] doesn't take away the hurt and it doesn't make the addiction go away . . . it does help. Because in some ways it brings a husband and wife closer together, just because it's open communication.

A final key point and a caveat to this paradox, uncovered through the analysis of this theme, was that for open and honest disclosure to be beneficial to the wife and her trust, it had to be accompanied by an intent and effort to change. Mary explained:

I'd appreciate that aspect [his honesty], but if he was willingly doing it, and not seeing a wrong in it, or why I didn't like it, . . . it would still affect us, [especially if] . . . he wasn't telling me things that he could do to help his problem.

Pornography and the Attachment Bond

In addition to the impact that deceit and secrecy were observed to have on trust, there appeared to be a separate, negative impact on trust linked solely to a husband's use of pornography during marriage and primarily because of the sexual nature of pornography.

All 14 wives discussed the fact that their husband's pornography use would or did continue to reduce trust even if it were openly disclosed. As mentioned in the previous theme, even with open and honest disclosure, 6 of the 14 wives were still "disappointed and heart-broken" (Katy). Jennifer noted that her husband had been open about his pornography use. However, she still stated, "If he was open about it and it continued . . . I [still] think it would destroy our relationship."

Karen also stated that even if there was no secrecy or deceit surrounding the pornography use, continued involvement would independently negatively impact her trust. She stated that it would "[negate] everything that we've worked on as far as the trust goes. . . . You can't have an open, honest, trusting relationship and have pornography there." Sharon expressed similar feelings:

I feel like it wasn't just the fact that he didn't tell me about it, because if he had told me the first time and told me every time then I still wouldn't have trusted him. It wasn't just the fact that he was hiding it, it was [also] the fact that he was *doing* it. . . . I mean, the lying about it to me was just extra on top of it. But the pornography use was what broke the trust.

In discussing why pornography damaged trust or attachment security, aside from the factor of deceitfulness and secrecy, three sub-themes developed. They included the following: 1) inability to fulfill marital expectations; 2) emotional harm; and 3) compromised sexual intimacy.

Inability to fulfill marital expectations of emotional intimacy and companionship. One of the major sub-themes revealed in the data was that pornography use was experienced by wives as negatively affecting a husband's ability to fulfill marital expectations specific to emotional availability and responsiveness. Comments from the wives described a loss of emotional intimacy and companionship.

Eight of the wives also talked specifically about not trusting that their husband would fulfill the role of being someone who could provide emotional support. Amy stated, "I don't trust him with . . . my most intimate thoughts." Katy made a similar comment, "I just felt like I couldn't really trust him with my emotions. I mean I would still share things with him, but it just felt like there was this wedge between us." When asked to explain this further, she added, "I just felt like for so long he's divided his attention. There's been a part of him that's been involved with the pornography that he gives that attention to." Mary also talked about a lack of emotional support when she explained why pornography use affected her trust in her husband. She stated:

> I needed . . . someone I could love again and someone that I could trust again, and
> someone that . . . really did love me and tried to love me and tried to do things to make
> our family happy. . . . I didn't feel like I could rely on him to emotionally support the
> family. . . . I always felt like I was carrying the whole load of the whole family on my
> back.

Susan explained that she couldn't trust her husband with her emotions because of the way he responded to her when she did. She explained:

When I came to him and [told him] how it made me feel, he flipped out and said, "You can't feel that way. You can't be mad at me. You can't hurt. You can't be sad." . . . I couldn't trust him with how I was feeling because [he made it seem] . . . horrible that I felt that way.

Laura reported another reason why she could not trust her husband for emotional support. "I don't trust going to him with feelings because . . . I'm afraid I'm gonna trigger something or . . . that [it will] . . . throw him further into the addiction." Sarah felt that she could not trust her husband for emotional support because "he didn't see anything beyond his own pain." She added, "It's like he was so in his own little world that he wasn't available for anything else. . . . He tried to do other things too, but it wasn't like he could really wholeheartedly devote his attention and be there."

Finally, 2 of the 14 wives discussed a loss of the companionship they had anticipated from a husband because of the time their husbands spent away from their family during pornography use. Michelle explained, "He's been gone those times when he could have been with us." Sharon stated, "I felt like every time he chose to view pornography . . . it was a decision to do something that took him away from me and from our relationship."

Throughout these comments, the wives explain a loss of intangible emotional support and tangible companionship from their husbands. Wives felt unable or unwilling to turn to their husbands for this emotional support for different reasons: fearing she would trigger a relapse with pornography; feeling rejected because of his use of pornography; sensing her husband's inability or unwillingness to provide emotional support; being shamed by a husband's angry or dismissive response from her attempts to reach out for support and companionship; or resolving that her husband was emotionally preoccupied with his own struggle with addiction.

Emotional harm. As demonstrated in the previous theme, wives felt that their husbands were not available to them for emotional support. Beyond that, and even more consistent within the data, all 14 wives explained that their loss of trust (or secure attachment) was in a large part due to the fact that their husbands were choosing an activity that caused emotional harm to them. Thus, trust was diminished by marital "omissions"—failure to provide support—but devastated by marital "commissions"—directly injurious actions.

Every wife discussed how her husband's pornography use caused "self doubt" and lowered her "self-esteem" (Ann). Mary stated, "I felt like . . . I wasn't pretty enough, or I wasn't skinny enough, or I wasn't . . . what he wanted." Katy made a similar comment:

I feel like I'm in competition with skinnier, prettier girls, you know that are on the internet or in movies or whatever. Just how the world and Hollywood portrays women and makes me feel like, "Well, if I was prettier, if I was sexier, or this or that, then he wouldn't have this problem." That's been hard for me.

Jennifer also discussed how her self-esteem was affected. She explained that once the pornography use was disclosed, her "self-esteem . . . plummeted" and she began to feel like she was "an awful person." She noted retrospectively:

He had sent such subtle messages to me throughout the whole marriage that I never caught on [to] or I excused away. . . . [He would send messages, such as,] if my clothes weren't stylish enough or a certain style that, you know, I didn't really get a compliment. Or if I didn't put makeup on every day, then it wasn't enough. Or even like if I didn't want sex [often enough then] . . . I wasn't normal. So there were a lot of little messages that . . . had made me feel bad. . . . So it had affected my self-esteem a lot.

Lisa also felt that her husband's pornography use was an attack on her self-worth. She said, "I started doubting myself. I started doubting my worth. I started doubting the things that made me feel special and meaningful. Because if I was so special and meaningful, why was he going to that?" She added that her husband's pornography use made her "question whether I am important enough to him." Sharon also discussed the emotional harm she felt and how that contributed to her loss of trust in her husband. She stated:

> I think that there were a lot of feelings that I had of being inadequate as a wife. . . . I thought that I wasn't attractive and that he didn't want to be married to me, and that he wanted some other life, and that he just didn't even want to be a part of our life.

> As noted, all 14 wives discussed psychological or emotional harm from their husband's pornography viewing (e.g. a loss of self-esteem or self-worth), a result of husbands' perceived indifference to the wife's well-being.

> *Compromised Sexual Intimacy.* The final sub-theme dealing with pornography and the attachment bond was that pornography use compromised the couple's sexual intimacy. This theme was found in 13 of the 14 interviews.

> The impact that pornography has on the attachment bond and attachment trust in marriage is certainly not surprising when a spouse's pornography use is viewed (as stated specifically by 6 of the 14 women interviewed) as an affair. Katy stated, "It felt like an affair. It felt like he's had a million affairs." Ann gave this explanation, "I know for me it very much feels like there is an affair going on, even when another person doesn't even really exist. . . . It still feels like someone else has been brought into my home."

> While Laura did not compare her husband's pornography use to a physical affair, she did discuss her concerns that he would eventually have a physical relationship with another woman:

I thought I was the only woman in his life, but I've noticed that occasionally he'll look at other women and it's . . . not a lustful . . . kind of look, but it still makes me second guess, like, "Well if he's looking at pornography, what makes me think he's not, you know if it becomes available, if he's not gonna go after another woman? . . . It's made me wonder . . . if he doesn't get over this . . . how long [would he] be able to stay faithful to me?"

When Jennifer was asked to explain why she thought her husband's pornography use affected trust, she replied soundly, "I think the egocentric nature of his behavior and realizing that that affected how he viewed me, how he loved me, how he made love. . . . He had a warped sense of what love was." Nancy also explained that she lost trust in her husband within their sexual relationship: "I don't trust him in our physical relationship. . . . He has this idea of what it is going to be, and I will no longer put up with that idea. . . . I felt used in our marriage. I felt like I was just there for his own gratification." Mary also explained that she was not able to trust her husband and that part of that was tied to feeling unsafe or insecure with him sexually. She stated, "It took a long time for me to feel like I could even have sex with him again because . . . I always felt like he was viewing somebody else." She added that she didn't even feel comfortable with the intimate expression and vulnerability of dressing in front of her husband.

Summary

The qualitative analysis of the interview data confirmed, extended, and elaborated upon the findings of other quantitative and qualitative studies of the effects of pornography on a relationship—that a primary effect is a loss of attachment trust (Schneider & Schneider, 1996; Zitzman & Butler, 1995). The current qualitative data provided a greater understanding of the overall process involved in this loss of trust, which supports a scientifically based theory for

explaining the relation between a husband's pornography use and his wife's loss of trust. Most notable were the discussions regarding the collateral impact that deceit, along with the pornography use, has on trust or secure attachment in marriage.

CHAPTER V

Discussion

Given the growing discussion regarding addictive or compulsive sexual behaviors (i.e. hypersexuality, cybersex, etc.) and relationships from other theoretical (Butler & Seedall, 2006; Laaser, 2006; Reid & Woolley, 2006; Tripodi, 2006) and research articles (Bergner & Bridges, 2002; Bridges et al., 2003; Milrad, 1999; Schneider, 2000a; Schneider & Schneider, 1996; Schneider & Levinson, 2006; Steffens & Rennie, 2006; Zitzman & Butler, 2005), it is not surprising to find a considerable amount of attention being paid to loss of trust (trust generally and attachment trust specifically) as one significant negative impact.

It is important to repeat that participant criteria for this study included being in a marriage relationship with the pornography user and also reporting no involvement of their husband in other extramarital sexual behaviors (e.g., affairs, strip clubs, voyeurism, etc.), behaviors frequently included in the participant sample in other studies. This allowed for an analysis that focused exclusively on the impact of pornography use and deceit specific to pornography use, without confounding this analysis with the potential impact of other behaviors related to and commonly included in studies and papers dealing with sexual addiction.

Aside from its distinctive participant sample, the data from this study makes a further and significant contribution to the professional literature through an analysis regarding the *process* specific to the loss of trust which can be experienced by the spouse of a pornography user. Our findings supported the development of a theoretical model for explaining the correlation between a spouse's pornography use and his wife's loss of trust.

Wives described an intense, emotional and psychological reaction to their husbands' pornography use—what might be described as an acute, albeit perhaps comparatively transitory,

PTSD-type experience (Bergner & Bridges, 2002; Milrad, 1999; Steffens & Rennie, 2006). This reaction included a re-evaluation of her husband and the quality of their marital relationship, namely the availability, attentiveness, and responsiveness that he was able to demonstrate in fulfillment of her physical, emotional, and psychological needs; there was also a lack of close and secure emotional intimacy in their marriage. These findings coalesce into a model of attachment injury and trauma both independently and interactively influenced by pornography viewing combined with deception. We will discuss each of these findings briefly, linking them to extant literature, then suggest a conceptual model of the dynamics of deception and pornography use in the pair-bond relationship, and finally conclude with clinical recommendations for disclosure, for creating an "open book" relationship, and for healing damaged trust.

Attachment Injuries

The loss of trust described by participating wives might be best conceptualized as an attachment injury. Johnson, Makinen, and Millikin (2001) explain that an attachment injury is viewed "as abandonment" and is not just "a general trust [honesty] issue" (p. 149). In fact, they argue that attachment injuries "[concern] a specific incident in which one partner is inaccessible and unresponsive in the face of the other partner's urgent need for the kind of support and caring that we expect of attachment figures" (p. 149). This may occur from a specific, acute event, or it may develop more gradually from chronic and pervasive attachment violations. Furthermore, attachment injuries "become a touchstone, an incident that, for them, defines the security in the relationship" (Johnson & Whiffen, 1999, p. 377). In other words, specific attachment injuries and trauma can profoundly restructure the internal working model of the spouse and relationship, and thereby pervasively and chronically impair the attachment system and dynamics. Johnson et al. (2001) define a secure attachment bond as "an active, affectionate, reciprocal relationship in

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which partners mutually derive and provide closeness, comfort, and security" (p. 145). Attachment injuries damage and undermine these essential, interpersonal processes necessary for a couple to experience a secure attachment bond, the basis for intimacy.

The results of our analysis confirmed both independent and interactive effects of pornography viewing combined with deception. Pornography viewing and deceit independently produce negative effects, and their interaction magnifies the negative effects. Wives' descriptions of the impact of husbands' pornography viewing compounded by deceit are clearly consistent with an attachment trauma conceptualization. Wives' descriptions of effects clearly implicate the attachment system, and the relationship harms clearly represent an attachment injury and trauma. The following sections will further expound on this theoretical model.

Attachment Injury Specific to Deceit Protecting Pornography Use

It was evident from the wives' comments that the initial disclosure (whether voluntary, compelled, or discovered) of extensive pornography use also revealed a history of deceit and concealment (Schneider & Levinson, 2006). Based on both the reports from the pre-interview questionnaire and interview data, participant wives pointed to the deceit surrounding their husband's pornography as significantly distressing, a major factor in the loss of trust, and an attachment-disruptive dynamic (Corley, 1998; Corley & Schneider, 2002; Reid & Woolley, 2006; Schneider, 2002; Zitzman & Butler, 2005). The end state for many wives was a global shift in perception of their husbands—from seeing them as someone honest and trustworthy to someone who could possibly be deceptive and untrustworthy, both particularly and pervasively. (Bergner & Bridges, 2002).

Concerned about the breadth and depth of deception, wives may begin to question everything they once unskeptically assumed to be true about her husband and their marriage.

There appears to be a significant generalization of uncertainty, loss of confidence, and mistrust in the relationship, leading to a significant unraveling of the relationship in terms of its attachment potential and as an attachment resource. Thus, there is a notable cascade of consequences to the relationship generally that stem from deceit in this 'one area alone.'

The psychological and relationship implications of a wife's assertion that in consequence of deceit her husband became "a stranger" to her and "everything comes into question" should not be overlooked. A cognitive and affective internal working model of one's attachment partner and relationship that is conducive to security, safety, and well-being is one that is characterized by reliability, predictability, and comparative un-changeability. The person is experienced as tangible, concrete, and real.

Participants' descriptions of the immediate and then generalized consequences and sequelae of deception suggest that the wife's internal working model of her husband and relationship becomes instead an amorphous, shape-shifting entity. The internal working model becomes unstable and volatile, shifting quickly and unpredictably. At any moment the person may not be what they seem. The person and relationship is experienced as one thing one day and another thing the next. Metaphorically, deception replaces a tangible, concrete internal working model the spouse is confident of with an intangible and changeable hologram. The experience of an intangible "hologram" relationship is unsettling, unnerving, disorienting, frightening— producing an anxiety-prone, "pins and needles" experience in the marital relationship. The ensuing unraveling of the attachment bond—as a partner seeks to safely re-anchor her psyche and her experience in some more stable and reliable structure—is completely predictable and understandable.

The vicissitude of one's partner and the relationship—its regular succession or alternation among several opposing states of being—together with its ultimate unknowability, predictably precipitates confusion, uncertainty, distress, and anxiety, likely to be followed by ameliorating, self-protective shielding, distancing, and withdrawal. Safety once anticipated *in* the relationship will now be sought through distancing *from* the relationship—emotionally, psychologically, physically.

Furthermore, it appears that the more successful the deception, the more disorienting, disturbing, and distressing the ultimate discovery becomes. The wife not only loses trust in her husband, but in herself as well—in her ability to accurately perceive, discern, and know the condition and circumstances of her most intimate relationships. This dual devastation to one's confidence and certainty is deeply unsettling, and makes it difficult for the spouse to have a grounded, stabilizing sense of her life and relationships. The potential of this mistrust to extend beyond the current relationship also seems apparent.

As a result, the wife is now in a state of disorientation, instability, anxiety, fear, and uncertainty about her husband, herself, and their relationship (Gordon, Baucom, and Snyder, 2004) and perhaps, to some extent, about people and life in general. It may be surmised that, in this state, the wife then concludes that the hiding, secrecy, denial, and deception implicitly convey her spouse's willingness, even determination to pursue his own self-interests and self-gratification, and indulge himself (conveying a disregard for his wife and her emotional and psychological needs) and to use deception to protect the behavior. The message implicit in such actions directly contradicts the belief and trust that one's partner can be relied upon to choose and act for and in behalf of their intimate other—belief and confidence that is a primary component of secure attachment (Cassidy, 1999; Olson, 2000). With deceit's traumatic impact

on secure attachment in the relationship in place, we will now follow the process into the wife's contemplation of her husband's pornography viewing.

Attachment Injury Specific to Pornography Viewing

As previously stated, the impact of deceit and pornography viewing are generally viewed as one phenomenon. Our findings converge with our clinical experience and innumerable informed reports of our clients suggesting that the effects of pornography viewing and deception are independent and interactive, magnifying the effects of the other. After concluding our discussion of independent effects of each, we will then turn attention to interaction effects.

All 14 wives categorically stated that their husband's pornography viewing negatively impacted their relationship even after they chose to be open and honest about it. Again, the effects here also clearly represent attachment injury and trauma.

As has been identified, a husband's deceit alone begins to create a new, amorphous cognitive and affective internal working model of one's attachment partner that is unreliable and unpredictable. Beyond the impact of deceit, wives' contemplation of the pornography viewing itself appeared to exert its own unique devastation to attachment trust.

Wives' reports reveal that following disclosure of deceitfulness a constellation of attachment trauma symptoms remarkably similar to PTSD symptomatology soon ensued. Trauma symptomatology may be likely to develop where the wife holds attachment-idealizing expectations regarding marriage. In such a case, a wife would likely rely so completely on her attachment partner and place such trust in him, that when this trust is shattered (through deceit, for example) it is tremendously psychologically disorienting and destabilizing. Johnson et al. (2001) propose that such traumatic violations between attachment figures "[shatter] assumptions, [change] the way we see ourselves and others, and [induce] a sense of existential vulnerability"

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(p. 150). Hence, we find a wife in "urgent need for the kind of support and caring that we expect of attachment figures" (p. 149). However, if harmful behaviors were to continue instead of being replaced with "support and caring," an attachment injury or trauma results.

Our study found that following the initial devastation of the deceit wives began to reflect on the implications of their husband's involvement in pornography. Based on our analysis, we would conclude that some wives consider a husband's involvement in pornography synonymous with extramarital sexual behavior, and akin to an affair (Bergner & Bridges, 2002; Zitzman & Butler, 2005), in the sense of being a choice to participate in extramarital sexual activity that inflicts emotional harm upon the wife. Again, similar to extramarital affairs, wives experience "sadness and fearing stemming from the knowledge that their partners were capable of causing them great hurt" (Gordon et al., 2004, p. 227). This further solidifies their conclusion that their marital relationship is no longer the safe and secure attachment relationship it was once perceived to be. We propose that this emotional harm stems from the sexual nature of pornography and the meaning wives place on her husband's use of pornography, specifically regarding the closeness, intimacy, and fidelity in their marriage.

Sexual Nature of Pornography and its Relation to Insecure Attachment

Perhaps the clearest reason that a husband's pornography use can undermine secure attachment comes from the fact that it anchors the addictive experience and euphoria in sexual arousal. Sexual intimacy provides couples an experience particularly able to "[facilitate] closeness and [create] bonding" (Reid & Woolley, 2006, p. 225). This is evident through an analysis of the characteristics of emotional and sexual intimacy.

Bergner and Bridges (2002) summarized the findings of four other studies (Bergner, 2000; Davis, 1985; Davis & Todd, 1982; Roberts, 1982) of the characteristics of emotional

intimacy. They reported the following traits characteristic of emotional intimacy: "(a) investment in the well-being of the beloved, (b) respect, (c) admiration, (d) sexual desire, (e) intimacy, (f) commitment, (g) exclusivity, and (h) understanding" (p. 196). Romantic partners typically have a strong expectation of "exclusivity"—an assumption and assurance that wives reported was threatened by their husband's viewing of pornography. Pornography use, particularly when perceived as intensive involvement, such as compulsive or addictive pornography use, can be viewed as "a secret life from which [a spouse is] excluded," a "[violation] of the love relationship" (p. 196). Bergner and Bridges further posit that partners of pornography users may conclude "that they are not loved—that they no longer have a place in the world of the other as his or her beloved."

Other studies confirm similar characteristic expectations held by sexual partners (Roscoe, Kennedy & Pope, 1987). The marital expectation of a relationship anchored in trust, faith, openness, commitment, and security is considered by most couples to entail complete sexual fidelity and exclusivity. We concur with McCarthy's (2003) statement that through attachment fidelity "a healthy marriage fulfills needs for intimacy and security better than any other human relationship" (p. 10). A typical model of marriage, then, is the attachment model. (This is not true in all cultures, but has become predominantly so in industrialized nations.) In accordance with attachment theory, a healthy marriage is one where each spouse is dependably accessible and responsive to the other's needs, which therefore "creates safety, security, and context for emotional vulnerability and engagement to occur" (Reid & Woolley, 2006, p. 226).

Such other-orientation logically entails a measure of self-sacrifice, self-restraint, and self-discipline wherever personal drives and gratifications collide with partner expectations. Pornography viewing was clearly perceived by participant spouses as representing a failure to

fulfill these entailed requirements of an attachment relationship. Through mutual vulnerability and accessibility, combined with exclusivity and fidelity, sexual intimacy in a healthy marriage contributes significantly to an attachment bond. The sexual component of a marital relationship can be viewed as a symbolic "attachment behavior that facilitates closeness and creates bonding, . . . [characterized by] mutual acceptance, affection, and admiration" (Reid & Woolley, 2006, p. 225). Marital sexuality symbolically and literally safeguards intimate vulnerability, but also creates a context for potential harm where that vulnerability is not "held" by one's spouse with complete fidelity and trustworthiness (Butler & Seedall, 2006).

As previously noted, attachment injuries and trauma can occur when emotional, psychological, and existential safety is not provided and major attachment expectations are unfulfilled or violated (Johnson et al., 2001). To qualify as an attachment injury, this violation must occur "when the person is most vulnerable and comfort is essential" (p. 150). Sexuality is just such an experience of acute vulnerability where emotional and psychological safety is critical. Tripodi (2006) states that "sex touches at the most intimate part of a person's existence" (p. 272). Hence, sexual violation may readily produce attachment injury and trauma. Participants in this study personalized their husband's pornography use and reported their feeling that "it touches on a violated sacred place of union that they believed would be honored" (p. 272). Similar to participants in Bergner and Bridges' (2002) study, wives explained the loss of trust/devastation to attachment as arising from the fact that their husbands had "taken the most intimate aspect of the relationship, sexuality, which is supposed to express the bond of love between the couple and be confined exclusively to the relationship, and shared it with countless fantasy women" (p. 196). Clearly, pornography viewing was experienced by these women as significant "virtual infidelity."

Emotional distancing. In addition to the attachment injury caused by the belief that a husband is violating the sexual bond expected in marriage, we propose that the sexual nature of pornography affects the viewer in a way that further encourages emotional, and even physical, distancing in their marriage. Pornography offers its viewers "a guaranteed escape from [the real demands of] intimacy" as it immerses him in a world of "sexually objectified women [who] are depicted as imposing no sexual or relational demands" (Butler, 2007). We suggest that regular immersion in objectification creates a diminished, marginalizing, and destructive working model for viewing and interacting with women in real life. Butler (2007) further details this process:

> Objectification interposes psychological distance or cutoff from the comprehensive real-life experience of another human being, allowing the overwhelming majority of her thoughts, feelings, and behavior to pass beyond the pale of human regard and into the pornographic abyss (and bliss) of ignorance. Women become unknown and unacknowledged in terms of any existence other than the objectified dimension (p. 6).

Ultimately, husbands who view pornography, particularly compulsively or addictively, would likely develop a pattern of intimate distancing and objectifying, which we predict will lead to emotional detachment from the comprehensive lived experience, needs, and expectations of their spouse. Cooper, Griffin-Shelley, Delmonico, and Mathy (2001) also found evidence of emotional distancing from real-life relationships as a result of online sexual activity. Further, they found evidence that those with usage that might be classified as addictive or compulsive had decreased contact with their partners. They proposed that "the ability to easily engage in cyberspace fantasies might decrease motivation to resolve issues with a partner, leading to a retreat to, and eventual preference for, their virtual world" (p. 280) (see also Young et al., 2000).

Additionally, pornography viewing as a response to stress may be problematic. Cooper, Galbreath, and Becker (2004) found that partners complained more about online sexual activity when it was used for stress relief. They concluded that these men were learning "a long-term pattern of turning inward and away from others as a primary coping strategy" (p. 227).

Here again we see evidence that a husband's involvement with pornography can result in a lack of availability and responsiveness (emotional, psychological, and physical) and a decrease in closeness and intimacy. Intertwined with the impact of deceit, a spouse's pornography use clearly provides ample opportunity for the breakdown of secure attachment, to an extent that the experience may be reasonably construed as what Johnsen et al. (2001) call an attachment trauma.

Combined with the steady increase in pornography consumption (Schneider, 2004; Wolfe, 2000; Young et al., 2000), we therefore anticipate a growing need for therapists to understand the potential harms and most appropriate and effective means of treatment. While further studies are required to provide further understanding of the dynamics of pornography viewing in marriage relationships, and while further clinical studies are needed to provide substantial evidence for effective treatment methods, we offer some initial suggestions for clinical practice.

Clinical Implications

This study contributes increased understanding to the growing discussion on compulsive, addictive, or otherwise harmful sexual behaviors, with particular attention to pornography use and its impact on marriage relationships. Evidence of the emergent concern for these topics can be seen in the establishment of The National Council on Sexual Addiction & Compulsivity and the professional journal, *Sexual Addiction & Compulsivity*, both established just over ten years ago. At the same time, however, this author believes that the growth of the problems still exceeds

the attention that is being given them. Several articles have discussed that the introduction of the Internet is a major contributor to the growth of problems in the last fifteen years and that even more substantial growth can be anticipated in the years to come (Cooper, 1998; Schneider, 2004).

Attention to the effects of pornography use should be especially given by those providing marital therapy. Previous studies have established that a majority of those with sexual compulsions or addictions are in marriage relationships (Cooper et al., 2000; Daneback et al., 2006). As mentioned in the review of literature, an understanding of the impact pornography use can have on attachment trust is especially important since loss of relationship trust is frequently referred to by spouses as the most common and harmful effect (Schneider & Schneider, 1996; Zitzman & Butler, 2005). Based on comments by the wives in this study, as well as other studies (Bergner & Bridges, 2002; Zitzman & Butler, 2005), pornography use may be viewed as mirroring the potential for emotional harm associated with real-life extramarital affairs. Clearly as well, for wives their husband's pornography viewing raises the specter and fear of the possibility of actual infidelity—particularly where the stepping-stone progression from pornography to sexually oriented chat rooms only involves the leap of a few computer keystrokes, easily followed by face-to-face encounters.

In order to address pornography's devastating impact on attachment trust in marriage, results from this study suggest the need for an understanding of attachment theory principles, including secure attachment in adult relationships. Butler and Seedall (2006) propose a treatment model for addressing sexual addictions with clear attention to attachment principles. Using an attachment model of the relationship impact of a spouse's pornography viewing and deception, therapists can be encouraged to take a more systemic approach to understanding and treating the

problem. I would propose that it is essential to view the wife and the marriage as essential elements of the treatment system. Therapists clearly need to address the attachment trauma experienced by wives (Steffens & Rennie, 2006); yet I, along with others, have informally observed a tendency to dismiss the wife and focus primarily, if not exclusively, on the husband (Butler & Seedall, 2006; Zitzman & Butler, 2005). I believe that by recognizing and validating the wife's experience, and inviting her story, therapists can directly and explicitly attend to spouses' needs in healing and recovery. This has been shown to be a powerful intervention in and of itself (Zitzman & Butler, 2005), and one consistent with findings related to softening in EFT (Greenberg & Johnson, 1988). Furthermore, I concur with Butler and Seedall's (2006) assertion that conjoint therapy allows the therapist to use the attachment relationship as a resource in the treatment of sexual addiction.

Open Communication

Based upon the findings, it is recommended that during conjoint therapy, much attention needs to be given to the importance of open and honest communication in general and with regards to pornography viewing specifically, in order to avoid the independent and interaction contribution of deceit to wives' negative experience. Guiding disclosure can be a difficult task. Wives report, however, that if they are able to believe that their husband is being honest, the ongoing hurt during recovery is greatly reduced. While it may not remove all injury resolve the pornography problem, disclosure and openness can begin to bring the couple closer together and initiate the rebuilding of trust. Honesty and open communication allow the wife to gain a sense of hope as she can then be a witness to sincere desire and supportive recovery efforts (Zitzman & Butler, 2005). It is important to note that this positive strengthening-of-trust impact appears to be contingent on the husband's voluntary disclosure. I propose that this holds true because it allows

the wife to see her husband work towards closeness in their relationship and demonstrate attentiveness and responsiveness to her needs.

Schneider and Levinson (2006) have provided some suggestions to guide couples and therapists during disclosure. They suggest that "it is much more beneficial for the addict to risk disclosing initially the broad outlines of all his or her acting out behaviors" rather than to carry out a "staggered disclosure," which can be a significant "obstacle to rebuilding trust" (p. 7). They explain that, similar to the wives in this study, this initial disclosure can be very traumatic, suggesting potential effects such as "worsening of the couple relationship, guilt, shame, anger . . . loss of trust . . . depression . . . loss of self-esteem . . . [and] fear of abandonment" (p. 5). However, they also found that "over 80% of partners and more than 60% of addicts report that at the time of disclosure they felt it was the right thing to do." Schneider et al. (1998) also found that "with time, 96% of addicts and 93% of partners came to believe that disclosure had been the right thing to do" (p. 190). Schneider et al. (1998) also suggest that disclosure is found to be "most conducive to healing in the long run when it includes all the major elements of the acting out behaviors but avoids the 'gory details'" (p. 189). Certainly, though, given the shock and trauma of the experience, we recommend that therapists (1) provide a secure scaffolding for each person and their relationship; (2) encourage couples to postpone any life-changing decisions for the time being; and (3) carefully monitor and provide support for grief process and trauma symptoms management.

Limitations

Finally, it is important to address limitations of the current study. In terms of external validity or generalizability, the skew of the participant sample—all conservative Christian couples—must be noted. Some scholars voice the reasonable supposition that religiosity will be

correlated with a stronger disapproval and hence more negative subjective experience of pornography use (Stack et al., 2004). All 14 participants in this study did claim the belief that pornography use is wrong for all individuals, whether or not they are married (11 linking it directly to their religious beliefs).

This finding would apparently support the concern that the negative impact of pornography viewing could have been significantly biased by the religiosity of participant wives. However, it is also important to note that wives also commented that, in spite of their religious background, they did not anticipate effects as significant as what occurred for them. If wives anticipated these effects, we could suppose that they were taught (socialized) by their religion to feel this way and have this experience. The fact that some did not think it would be this profound, yet found it to be so, raises the possibility that the effects may be intrinsic to pornography viewing, not socially constructed, at least in attachment-idealizing marital relationships.

Furthermore, Bridges et al. (2003) conducted a study of women's views of pornography, principally with the goal of accessing views generalizable to all women, not just those presenting in therapy with concerns about pornography use. Significantly, they found that "the variable of professed religiosity was not predictive of participants' levels of distress" (p. 13) related to the issue of pornography.

What Bridges et al. (2003) did find was that *marital status* was predictive of higher distress levels regarding a partner's pornography use. Therefore, the high level of distress from participants in this study is likely more related to the fact that they were married to the pornography user, rather than an artifact of their religiosity.

Still, Laaser (2006) posits that addressing sexual betrayals between married couples always incorporates spirituality, and I would add, attachment. Laaser reasons that "the experience of marriage is a spiritual one" and therefore a sexual betrayal in marriage "violates vows he or she has made . . . [which] is a spiritual violation and the pain of it is experienced in deep emotional and spiritual ways" (p. 209). In my view, the overlap of spiritual, emotional, and attachment dynamics and factors in marriage fully confounds any distinction or discrimination of effects among them; hence, Laaser's comments are apt concerning attachment as well. Nonetheless, given that all participants were wives who self-identified pornography as their presenting couple relationship problem and who identified themselves as Christian, a subsequent study could address similar research questions to a sample of non-clinical married women.

Additionally, this study did not attempt to assess the degree of the husband's level of pornography use, but merely sampled wives who expressed concern with their husbands' pornography use. Therefore, results of this study cannot speak to the differences between various levels of pornography use, be it frequent, habitual, addictive, etc. Bridges et al. (2003) suggest that significant distress is primarily found when pornography use is at levels the wife considers to be excessive. It is possible that here, too, religiosity may play a significant factor. One might anticipate that wives with strong religious beliefs (at least where the religious belief is that pornography use is sinful at any level) would be more sensitive to any level of pornography use and, therefore, more easily consider her husband's pornography use as excessive. Additionally, even a husband's dishonesty might be viewed as more serious based off of religious beliefs. While there is likely validity to these concerns, I would propose that, at best, the problems might be accentuated for religious couples, but that the primary factors are relationship commitment and attachment, and that, similar to the conclusion of Bridges et al. (2003), religiosity is not a

significant factor. Based on the characteristics of the participants in this study, however, I cannot claim this as more than theory which requires further study.

Another noted limitation is that almost all the participant wives (12 of the 14) were from one therapist, whose views about the benefits of disclosure and the potential harms of pornography viewing are clearly articulated to each client he serves. Hence, it is possible their ideas and subjective experience could be influenced by their therapy experience.

It could also yield interesting results if a larger sample size were studied where participants could be grouped and compared based on the length of time since the initial disclosure. While there was some variation among participants in this study, all participants were asked to reflect back on the time when disclosure initially occurred. It is possible, therefore, that this rupture of trust across the board and these global doubts could be a phenomena/experience limited to the period immediately following disclosure. It might be expected that over time, even in the situation where a husband continues to view pornography, the wife develops a "differentiated" trust profile of her husband (e.g. "I have learned I can trust him to be a good provider and a conscientious father. The area I can't trust him is in terms of not viewing pornography."). If differences were noted, however, I suspect it would be more closely related to attachment issues relating to the deceit. It may be supposed that such a couple would still be left to face the negative attachment impact from pornography viewing.

Summary

Through the analysis of the interview data of 14 wives, it is evident that pornography use by a spouse can have a devastating impact on a marriage relationship. Analysis of wives' comments revealed (1) a breakdown of expectations and assumptions central to her evaluation of the marriage, (2) distance or disconnection from their husband, (3) and a general sense of being

unsafe (emotionally and psychologically speaking) and insecure in their relationship. The experience or experiences leading to these perceptions were equated with an attachment injury and trauma—described in lay terms as a loss of relationship trust, "the [attachment] trust that your partner will 'be' for you and for your relationship rather than for self" (Butler & Seedall, 2006, p. 297).

Through qualitative analysis, we were able to add to the existing empirical work a descriptive understanding of wives' unfolding experience of husbands' pornography viewing and deception as they separately and interactively relate to attachment trust. The selection criteria of this study limited participants to those in a marriage relationship with the pornography user and where their husband had not been involved in any other extramarital sexual behaviors (e.g., affairs, strip clubs, voyeurism, etc.). This allowed for an analysis that focused solely on the impact of pornography use (and deceit specific to pornography use), without the confounding effects from other behaviors commonly included in studies and papers addressing sexual addiction.

Based on this analysis, we describe a process where a wife's awareness of deceit combines independently and interactively with the disclosure or discovery of pornography viewing, exponentially magnifying wives' subjective devastation. The combination of these factors accounts for wives' description of the experience as emotionally intense and psychologically profoundly disturbing and disorienting—qualifying it as a psychological and relationship trauma, attended by an acute, albeit perhaps comparatively transitory, PTSD-type experience (Bergner & Bridges, 2002; Milrad, 1999; Steffens & Rennie, 2006). Describing this experience with adult attachment language, we consider this experience to be equivalent to an attachment injury or trauma.

More specifically, because of the history of deceit, wives are left with the concern that their husband could possibly be deceptive and untrustworthy, and that the commitment and security in her marriage is unstable and unpredictable. Furthermore, pornography viewing alone is not viewed or experienced as a harmless behavior in many attachment-organized and attachment-idealizing marriages. In marriages where trust that one's partner is fundamentally "for the other" is a primary ideal, anticipation, and assurance, and where it is relied upon for attachment security and safety, behaviors such as pornography viewing—that indulge the "self" while disregarding one's partner—are not innocuous, but significantly impair trust and rupture attachment. A husband's involvement in pornography (an extramarital sexual activity) is viewed as taking something that is held intimate and symbolic of the closeness and unity in marriage and sharing it with countless other women. In the end, wives are left struggling with the doubt that their husband can be relied upon to choose and act for and in behalf of her, and that he will be available and responsive to her needs—the primary components of secure attachment (Cassidy, 1999; Olson, 2000). Far beyond recovery work alone, any comprehensive and complete therapy needs to attend to and resolve these attachment issues to have any prospect of relationship repair and renewing a stable, secure, and satisfying intimacy.

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Appendix A

Instructions for therapist's initial phone contact with potential subjects

When contacting potential participants for the study, please follow these guidelines:

Introduction: Following your initial greeting with the client, inform her that you are calling to talk to them regarding a study that is being conducted by a doctoral student in BYU's Marriage and Family Therapy program. Explain to her that you have identified her as someone who could contribute to this study based on your understanding of her reasons for seeking therapy or based on your experiences with her in therapy (depending on the appropriate situation).

Purpose of the study: Please explain that the study is aimed at understanding the effect of pornography use by a spouse on the level of trust in a marriage. Explain that participation is completely voluntary. Explain that accepting or declining to participate in this study will not affect any therapy she is currently receiving or planning to receive. Ask her if she also feels that her experiences would allow her to contribute to a discussion on this topic.

Participation in the study: Explain that participation in the study would involve talking with a research team member about her experiences with her husband's disclosure of his pornography use, and especially regarding its impact on trust. This interview would last about one hour. In addition to the interview, she would be asked to fill out a brief demographic survey. Following the interview, no further participation is required. It would be tape recorded to allow for accurate analysis. Explain that during transcription all names and identifying information will be removed to protect confidentiality. Reassure that participation is voluntary and that it would not affect any therapy that she is or will be receiving if she declines to participate. Ask if she has any questions.

Continued Contact: Explain that what you are requesting is if a member of the research team could contact them to further discuss the study possible participation. Agreeing to this is not a commitment to participate in the study. The researcher would contact them on the phone to discuss any other questions that she may have. If she then decides to participate in the study, the researcher would talk with her about when and where they could meet. If she agrees to be contacted, inform her that you will give her name and number to the researcher and that will be contacting her soon.

Concerns: If she has any questions, inform her that she may contact Dr. Mark H. Butler (801-422-8786; 262 TLRB, P.O. Box 28601, Provo, UT 84602), Spencer Zitzman (614-836-2466; zitzmanst@ldschurch.org), or Renea Beckstrand, IRB Chair, (801-422-3873; renea_beckstrand@byu.edu) for any questions regarding this study or their rights as a research participant.

<u>Informed Consent to Participate as a Research Subject</u>

Introduction
Mark Butler, Ph.D., Associate Professor in Brigham Young University's School of Family Life, together with Spencer T. Zitzman, M.S., graduate student in Marriage and Family Therapy, School of Family Life, are conducting research examining how a spouse's exposure to or use of pornography affects marital relationships. You have been recommended as an individual who may be willing and qualified to participate in this important research. You were selected for participation in part because you are seeking, are receiving, or have received counseling related to your husband's use of pornography.

Procedures
You participation would include filling out a brief demographic questionnaire and participating in a one-on-one interview with a member of the research team. The time and place of the interview will be decided between you and the researcher. Questions will discuss the impact that your husband's pornography use and the disclosure of his pornography use has had on you and your marital relationship. The interview will last approximately one hour. Interviews will be tape-recorded and later transcribed.

Risks/Discomforts
There are minimal risks for participation in this study. However, due to the fact that participants will be asked to recall previous experiences within their marital relationship, it is possible that emotional discomfort or distress could result. Participants who experience undue emotional distress as a result of participation in the study should discuss this with their assigned therapist. If the couple feels therapy is necessary, therapy will be paid for by the participant.

Benefits
There are no direct benefits to subjects. It is hoped that your participation might further our understanding of how pornography affects marital relationships. The results of this research may specifically help other couples who come to therapy to resolve problems due to pornography use. As this study is completed, the conclusions and benefits will be released to the public in hopes of providing assistance for all couples who have or will experience problems with a spouse's pornography use.

Confidentiality
Because your privacy is of great importance, the handling of all the data will be kept strictly confidential. Any information that may identify you will be removed when the tape-recording is transcribed. No identifying information will be included in any reports or publications.

Participation
Participation in this research study is voluntary. You have the right to withdraw at anytime or refuse to participate entirely without jeopardy to any therapy you are currently receiving or might receive in the future.

Page 1 of 2 _____ Participant's Initials _____ Spouse's Initials (optional)

Questions about the Research
If you have questions regarding this study, you may contact Dr. Mark H Butler at 801-422-8786, mark_butler@byu.edu or Spencer T. Zitzman, M.S., at 503-620-1191, stz@email.byu.edu.

Questions about your Rights as Research Participants
If you have questions you do not feel comfortable asking the researcher, you may contact Dr. Renea Beckstrand, IRB Chair, 422-3873, 422 SWKT, renea_beckstrand@byu.edu.

I have read, understood, and received a copy of the above consent, and desire of my own free will and volition to participate in this study.

_____
Research Participant Signature   Date

_____
Research Participant Printed Name   Date

_____
Witness   Date

_____
Research Participant's Spouse Signature (optional)   Date

_____
Research Participant's Spouse Printed Name (optional)   Date

_____
Witness   Date

Participant Questionnaire

1. What is your gender?
    a. Male
    b. Female

2. What is your age?
    a. 18-25
    b. 26-35
    c. 36-45
    d. 46-55
    e. 56 or above

3. What is your ethnicity?
    a. White/Caucasian
    b. African-American
    c. Asian/Pacific Islander
    d. Hispanic
    e. Other _____

4. What is the highest level of education that you have completed?
    a. No formal education/some high school
    b. High school diploma/GED
    c. Some college
    d. Associates/Bachelor's degree
    e. Graduate studies/graduate degree

5. What is your annual income?
    a. 0-9,999
    b. 10,000-29,000
    c. 30,000-49,000
    d. 50,000-69,000
    e. 70,000 or above

6. How long have you been married?
    a. Years _____ Months _____

7. How many times have you been married? _____

8. How many children do you have? _____

9. What is your religious affiliation?
    a. Atheist
    b. Buddhist/Hindu
    c. Christian
    d. Islamic
    e. Jewish
    f. Other _____
    g. None

10. Circle the statement that most accurately describes your situation:
    a. To my knowledge, my spouse has NOT been involved in extramarital sexual behavior other than viewing pornography (including online, books/magazines, DVD/videos, 1-900 phone sex, etc.) and masturbation.
    b. To my knowledge, my spouse HAS been involved in extramarital sexual behavior other than viewing pornography (e.g. strip clubs, affair(s), or such).

11. According to your understanding, approximately over what length of time was pornography used?

    ____ years ____ months

12. According to your understanding, has pornography use ended?
    a. Yes
    b. No
    c. Unsure

13. How was the pornography use revealed?
    a. By your husband of his own choice
    b. By your husband due to your inquiries
    c. By your husband due to someone else's suggestion or pressure (for example, a religious leader, employer, etc.)
    d. Discovered by you
    e. In therapy
    f. Other _____

14. Do you feel that your husband's pornography use has affected in any way the trust you have in him or your relationship?
    a. Yes
    b. No

15. If you feel that your husband's pornography use affected your trust in him or your relationship, please rate the major influence(s) for this loss of trust on the scale below. Please circle the correct response.

1	2	3	4	5	6	7
Entirely caused by Lying	Primarily caused by Lying	Somewhat more caused by Lying	Equal	Somewhat more caused by Pornography	Primarily caused by Pornography	Entirely caused by Pornography

16. Which statement below most accurately reflects your beliefs about pornography use?
    a. Pornography is a healthy expression of human sexuality.
    b. Pornography use is an acceptable form of sexual entertainment.
    c. While I do not choose to view pornography and/or agree with its use, I am not concerned with other's use of pornography (including my spouse).
    d. While I do not have any specific concerns with other's pornography use, it is not an acceptable behavior for my spouse or me.
    e. Pornography use is unhealthy and harmful for any married person.
    f. Pornography use is unhealthy and harmful for any person, whether they are married or not.
    g. Pornography use is not only unhealthy and harmful for any person, according to my religious beliefs I view it as a sin.

17. Which statement most accurately describes your situation:
    a. I have never received therapy as a result of my husband's pornography use.
    b. I am currently receiving therapy as a result of my husband's pornography use.
    c. I received therapy in the past as a result of my husband's pornography use.

Structured Interview Questions

The research participant should have completed the demographic questionnaire prior to conducting the structured interview. Before beginning the interview, ask the participant if she has any questions she would like to ask before she begins. Remind her that the interview will be tape-recorded, and so it is important to speak firmly and clearly. Also, remind her that her participation is voluntary and, if at any time she feels uncomfortable or has any concerns, she should feel free to express those concerns or discontinue participation.

1) To begin, could you help me understand the overall situation by giving me a general history of your husband's pornography use, as far as you are aware?
   a. If necessary—Can you tell me what you know about when his pornography use began? What his habits were (frequency, types of pornography use, etc.)? If there were any periods when he discontinued his pornography use?

2) How did you come to know about his pornography use?

3) What was the experience of finding out about his pornography use like for you?
   a. If necessary—How did it affect you emotionally? Was there anything that it changed for you—personally or in your relationship?

4) Did you ever know anyone else (besides your husband) who had a problem with pornography use?
   a. If applicable—How did knowing about this other person and his/her situation influence in any way, if at all, your experiences with your husband's pornography use?

5) What are your beliefs about pornography use?
   a. If necessary—Do you believe that it is wrong? If so, why?
   b. If necessary—What are your religious beliefs about pornography use?
   c. If applicable—Is it equally wrong for a single person to use pornography as it is a married man? If not, what is different about the two situations?

6) How, if at all, did your husband's pornography use affect your marriage?

7) How, if at all, did your husband's pornography use affect your views of him? of yourself?

8) Many wives whose husbands have struggled with pornography use have also reported that a major effect is a change in trust. When I refer to trust, I am also referring to more than mere honesty, but also a belief or expectation that a spouse will be consistently and faithfully available and responsive to your needs. Given this description of trust, how do you feel that his pornography use has affected the trust in your marriage, if at all?
   a. If necessary—Do you feel that it has or did lessen or change your trust in him in any way?

       b. If necessary—Do you feel that it has or did lessen or change your trust in your relationship in any way?

9) If applicable—Can you explain why you feel his pornography use has an affect on your trust in him/your relationship?

10) If applicable—Can you explain why you feel his pornography use did not have any affect on your trust in him/your relationship?

11) Many people believe that the only reason that a husband's pornography use affects trust in a marriage is because of the secrecy or deceit that commonly surrounds the pornography use. Do you feel that secrecy or deceit was the reason that his pornography use affected your trust?
       a. Do you feel that if he were to continue to use pornography, but would be completely open and honest about his use, that it would still have a negative impact on your marriage? On your trust in him or your relationship?
            i. If necessary—Why do you believe that it would (or would not) still have a negative impact on your marriage?

12) Is there anything that you would say did or could *reduce* the impact that a husband's pornography use has on his wife's trust?

13) I am very grateful for all of the information that you have been willing to share with us to help us better understand the effects of pornography use on a marriage. Before we end, is there anything else that you would like to add to help us better understand the relationship between a husband's pornography use and his wife's trust in him or their relationship?