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Creating Peace After Betrayal by Healing Shattered Trust Schemas

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As a clinician, I practice psycho-spiritual interventions and, where I practice, the clientele largely come from a Christian religious background. I have written this article using the applications and interventions I use for these religious clients but acknowledge that these interventions can be adapted and/or similar interventions can be found without a faith/religion-based approach. Throughout the article, you will note I separate the brain from the client. I have found it beneficial to separate clients from the automatic responses the brain will provide when in trauma. The clients that I have worked with respond well when I teach them what their brain is doing, separate from their own purposeful choices, and I have found this often provides a measure of security to my clients. It would be easy for a client to feel disempowered by this approach so I trust that you, the reader, will use discernment with the interventions and approaches you use.

Women experiencing betrayal trauma often experience a shift in their world that is so great it will destroy their understanding of trust: how to trust, if they can trust themselves, who is trustworthy, and how to determine trustworthiness. This article will address this shattering of trust and how to guide a client back to a place of peace and confidence after her trust has shattered. I, the author, will write in the first person to make it easier when referencing my clinical experiences with clients.

BETRAYAL TRAUMA

The term “betrayal trauma” originated as a theory addressing the effects of childhood trauma at the hands of a trusted caregiver (Sivers et al., 2002). Throughout the 21 years since the origination of the betrayal trauma theory, its definition and application have expanded. It has shifted from a theory of understanding a

child’s behavior to a description of symptoms that individuals may be experiencing when their “well-being is threatened by an important person or institution in their life” especially if they “have had a close relationship, dependence, or trust with the person or institution who betrayed them” (Lovering, 2023). We will discuss those symptoms of betrayal trauma in subsequent paragraphs. Parental, institutional, partner, and interpersonal are all types of betrayal trauma that the term is now being applied to (Lovering, 2023).

I will focus this article on partner betrayal trauma, more specifically, partner betrayal trauma as experienced by a female spouse in a heterosexual relationship. I believe that the information discussed in this article likely applies in whole or part to both husbands and wives in either a heterosexual or homosexual relationship; however, due to the recent nature of the application of betrayal trauma to describe the expe-

periences of betrayal by one's spouse, the research and application of a variety of relationship dynamics is not currently available.

Betrayal trauma can occur when there is a substantial breach of trust in any part of the relationship (dishonesty, infidelity, gambling, substance abuse, intimate partner violence, etc.). Specifically, this article will address betrayal trauma in the wife as a result of the husband's unfaithful acting out behaviors, (including physical affairs, emotional affairs, virtual affairs, pornography use, and any other sexual, mental, or emotional infidelity, etc.) as well as the subsequent co-occurring behaviors (including dishonesty, manipulation, and grooming). I will not address why infidelity behaviors often result in betrayal trauma or the effects of pornography on marriages because research addressing these topics is plentiful (although I have included a few references in my reference list). In this article, I will simply speak from the perspective that unfaithful acting out behaviors will result in the spouse experiencing symptoms of betrayal trauma in the majority of the cases that we will see in our offices and clinics (Steffens & Rennie, 2006).

BETRAYAL TRAUMA SYMPTOMS

Common symptoms of betrayal trauma include

- intense emotions
- withdrawal and isolation
- difficulty concentrating
- self-harm
- sleep issues
- other physical health concerns
- questioning reality
- constant anger
- hypervigilance
- being plagued with fear and worry
- loss of autonomy
- loss of strength of will and respect
- lingering doubts about self-worth
- a feeling of helplessness
- tarnished, sullied, distorted core beliefs,
- and/or an inability to remember or connect with who they are/were (Janoff-Bulman, 1992).

This list is not exhaustive and due to the extensiveness of the symptoms, top researchers studying betrayal trauma have begun classifying it as post-traumatic stress disorder (PTSD) (Steffens & Rennie, 2006),

complex post-traumatic stress disorder, or PTSD-like. A 2006 study by Steffens and Rennie found that 69.6% of women who experienced betrayal trauma also met the criteria for a PTSD diagnosis, which was supported by Weiss and Stabel (n.d.) who found 65.8% of betrayal trauma women met the criteria for PTSD in their study. Dr. Kevin Skinner, author of "Treating Trauma for Sexual Betrayal" co-created the Trauma Inventory for Partners of Sex Addicts (TIPSA) assessment, which compares the range of betrayal trauma symptoms to the diagnosis criterion for post-traumatic stress disorder for diagnosing purposes (Skinner, 2017). His colleague refers to betrayal trauma as "Post Traumatic Relationship Disorder" to include the similarities of PTSD with the addition of the relationship component (Skinner, n.d.). Similarly, Dr. Dennis Ortman referred to the experience as "Post-Infidelity Stress Disorder" (Ortman, 2005).

As clinicians, understanding that women are experiencing PTSD-like symptoms ought to change our approach to helping these women. Recently, I was in an office surrounded by clinicians who each expressed their expertise in helping men recover from engaging in sexual self-mastery struggles. They reported with pride about their 10-week group which provides men the help that they need. When I asked what was being done for the wives they responded that on week 10 the wives were invited to come to the final class to see what their husbands had been working on. One clinician turned to the other and, laughing, responded, "Those angry wives never want to celebrate their husbands though." As a clinician whose specialty is helping those wives, this brought necessary insight into what is happening in other clinical settings. Seeing the wife as 'angry' rather than 'traumatized' prevents clinicians from being able to sufficiently see her. The wives are not angry. The wives are in trauma. Their schema, or their understanding of the world, has shattered.

SHATTERED SCHEMAS

A schema in brain development is slightly different than the definition found in schema therapy. Schema therapy suggests a schema is a *negative or maladaptive* pattern of thinking and beliefs that developed early in life (Young et al., 2003); however, from a developmental standpoint, a schema "is a cognitive structure

that serves as a framework for one's knowledge about people, places, objects, and events." (Vinney, 2021). Essentially, our schema is the system that our brain has built to help us quickly interpret what we are experiencing and be able to file it away. It's *neither good nor bad*. When you look at a round, orange fruit that is fuzzy, you are able to determine it is a peach, not an orange or a tangerine, because of the peach schema that your brain has created. Before that schema was built, your brain would not have been able to quickly determine what was in front of you.

Our brain searches for evidence that what it has filed as a schema is true. It does this by viewing the world through schema-supporting lenses and focusing on those pieces that strengthen what it has already built (Cherry, 2019). And, although schemas are neither good nor bad, both pros and cons of schemas exist. Through the lens of our schemas, we may understand what we're experiencing quickly but we also may create prejudice, enforce gender stereotypes, be vulnerable to scams, and be unable to recognize something we are not familiar with, such as abuse. We may accidentally limit ourselves to only learning information that reinforces the schemas we have or we may distort new information to make it fit our incomplete schema. Usually, our schemas shift to understand new information through assimilation or accommodation (Cherry, 2019); however, when we run into something that does not, cannot, and will not file into an appropriate schema our ability to understand that schema disappears (Janoff-Bulman, 1992).

Ronnie Janoff-Bulman (1992) called this loss of schema "shattered assumptions" in her book "Shattered Assumptions: Towards a New Psychology of Trauma." When an experience suddenly shatters the basic assumptions we make of the world, namely that 'the world is benevolent, the world is meaningful, the self is worthy' an individual would no longer understand the way the world worked or be able to function within the world. Because that person is suddenly aware that "people can be malevolent the entire world of people becomes suspect. Who can be trusted? Who is completely safe?" (Janoff-Bulman, 1992). Adding the understanding of schema to Janoff-Bulman's work, I would suggest that a reason the person whose assumptions have shattered can no longer answer the questions, "who can be trusted," or "who is complete-

ly safe" is because the brain can no longer access its structure for understanding trust and safety. The trust schema isn't there anymore. It has shattered along with the assumptions.

SHATTERED TRUST SCHEMAS

The betrayal trauma victim can no longer process what trust is. In session, I will often have a repentant husband who is earnestly trying to shift his behaviors exasperatedly say, "Why isn't she trusting me?! I'm not the same guy. It's like nothing I do will ever be enough." What this husband doesn't realize is that often this wife, with a newly shattered trust schema, has a brain that is unable to process trust at this time. It's not that she "has trust issues," it's that trauma has shaken her entire understanding of trust across the board. Not just her ability to trust him. But her ability to experience trust in any facet of her life has been disintegrated.

She may be experiencing some or all of the following thoughts:

- Her husband has betrayed her, she may be thinking, "He's been lying for years so who knows if anything he ever says is real now or if anything was real then. I don't know who he is or what our life was."
- Regarding her ecclesiastical leader, she may think, "He clearly doesn't understand. Also, he's a man and the men I know are liars, so I can't trust him."
- Her brain may continue to desperately understand who is and is not trustworthy in all areas of her life but, with no understanding of trust, it often lands on, "The stranger at the grocery store is also a man, so can't trust him."
- "That woman over there appears to be happy, but how long did I put on a show, too? Can't trust her."
- "I was putting on a show for all those years. And I made the choice to marry my husband. Plus, I'm still here even after he's done this. He's been lying to me this whole time and I fell for it. So obviously, I can't trust myself."
- "Now that I think about it, God led me to marry my husband and hasn't told me to leave him even though he's been lying. So I can't trust God."

Without the ability to process all the pieces of trust, and while still experiencing active trauma, the safest approach she (and her trust-shattered brain) is left with is to distrust everyone and everything. With the variety of ways this shattered trust schema may present, along with the possibility of additional unhealthy behaviors in the marriage, correctly identifying betrayal trauma/PTSD/CPTSD can prove difficult.

COMPLICATIONS TO DIAGNOSIS

Simply trying to piece together the shattered schema is work on its own; however, along with the acting-out behaviors of her husband often comes several unhealthy dynamics that the husband may have also brought into the relationship. He may do or say things that are unfair or untrue in an effort to get his needs met first. He may have manipulated, gaslit, or groomed her throughout their relationship, which has increased her feelings of self-doubt or lack of ability to make choices independently. He may have blamed her for his cheating, infidelity, or other behaviors and used logic to convince her that she was the problem. When this is the case, she is left feeling confused, and hopeless, and only seeing where she has failed in the relationship. If not careful, clinicians can easily dismiss her symptoms as depression, intrusive thoughts, and bravely taking accountability for her mistakes—rather than as the evidence of the deep, shattering betrayal she has experienced. However, a clinician who is watching for PTSD-like symptoms and a shattered trust schema can provide a space of safety and healing. By slowly showing a client how to re-teach their brain about trust, and build a new, more accurate, trust schema, these clients can find peace and trust in their lives again.

STEPS TO HEALING SHATTERED TRUST SCHEMAS

When facing betrayal, the “victim” may “feel like she will never be able to fully trust anyone again. She may question whether she can ever depend on someone else, herself, or even God to keep her safe” (What if I am struggling with trusting others after abuse? churchofjesuschrist.org). This is expected. Clinicians must approach this phase of healing with compassion and understanding. Too often women in betrayal trauma are told: “It isn’t your husband that’s doing this

to you—it’s the addiction,” “Your partner has stopped engaging in those harmful behaviors, it’s time to let go of the past and give him a chance,” “your trust issues are keeping you from being able to experience the peace you’re searching for.” Instead of minimizing and brushing aside the broken trust, we must validate that her trust has been shattered and that she is in trauma.

VALIDATION

Validation is the first step in helping a woman begin to find peace after betrayal and means “expressing acceptance of another person’s emotional experience... we honor, encourage, and respect them. The [client] feels seen and heard, something they likely have not felt in a long time, which helps them remember their value” (M3nd Project, n.d.). Validation is important because with the gaslighting and manipulation that she has likely been experiencing, not only can her brain not process the idea of trust, but she’s been taught through the manipulation that any pain she is experiencing is her fault. Our first job as clinicians is to give her a place where she feels seen, heard, and believed, to show her understanding and compassion for what she has experienced. As a clinician, you might ask questions about what her experience felt like, about when she felt something was off, and then congratulate her for being in touch with her intuition to know something was off. She will need to build the ability to validate herself but, first, she will need to see what validation looks like before she can. So validate her. Show her. “You can trust your impressions. You can receive your own revelation and inspiration. Your observations can be accurate and true. Your thoughts and beliefs matter. Others’ thoughts and feelings are not more important than yours.” (The Church of Jesus Christ of Latter-day Saints, n.d.a.)

As external validation begins to teach her that she has experienced pain, she’s not crazy, and her story is believable she will slowly begin to reconnect with herself. Dr. Skinner refers to this stage of healing as “re-orienting” in his video, “Intro to Healing Trauma from Sexual Betrayal” (n.d.). In reference to a client he was working with, Dr. Skinner stated,

My primary goal was to help her understand that what she was experiencing was actually normal and that she wasn’t losing her mind. I explained that trauma is a natural response when we are betrayed. Help her

feel normal, and help her to name what she was going through. . . . It is critical to give individuals a way to describe what they are experiencing. (n.d.)

Giving clients the language to understand what they have experienced will lead to them beginning to attempt to verbalize it themselves.

As a clinician, I have noticed that my clients will begin to experiment with their ability to validate themselves. “I kinda got that feeling that maybe something was off,” “I wasn’t sure, but it seems like I didn’t feel comfortable,” etc. When she does this sort of experimenting, I respond by pointing it out and celebrating with her. I celebrate with her every time she *recognizes* an instinct/gut feeling/intuition. And I celebrate with her again anytime she *acts* on that instinct. I then begin to shift my validation from, “You can trust your impressions,” to “Do you believe you can trust your impressions;” from, “I hope you feel proud of that work you just did,” to, “Are you feeling proud of your hard work,” etc. As she begins to believe that she can trust herself, I add opportunities to begin to believe that she can trust her emotions.

TEACH HONORING EMOTIONS

The American Psychological Association defines emotions as, “conscious mental reactions . . . subjectively experienced as strong feelings . . . accompanied by physiological and behavioral changes in the body” (n.d.). Breaking that down, we consciously receive a message, and we experience that message both as a “feeling” and as a change in our physiology. Sometimes we might notice the feeling first, sometimes we might notice the physiology first. The two of them together create, “emotion.” Like schemas, emotions are neither good nor bad, they are simply sensations in the body. Women in betrayal trauma go through periods of numbness, a characteristic of PTSD (Duek et al., 2023), during which times they may not be aware of either the feeling or the physiology. Numbness often cycles with hyperresponsivity, where, still unaware of the physiology or feeling leading to emotion, they are suddenly hit with strong, overwhelming emotions such as, “fear, horror, . . . anxiety” (Litz & Gray, 2002) and anger. The lack of awareness of the two factors that create emotions can cause the emotion to feel like an unexpected tidal wave crashing on them, leaving them unsure which way is up. When emotions are

given context, understanding, and meaning clinicians are providing ground for clients to stand on to stabilize after the waves.

Lyle Burrup, at the 2023 AMCAP conference described emotions as the way that the subconscious communicates with the conscious. Similarly, I describe the experience of feelings with a simple metaphor to help women understand what’s happening to them:

Feelings are your friends. When you feel the emotion, it’s a notification to you that your subconscious has something to tell you. It’s your job to learn what it’s trying to communicate. Have you ever been on a road trip and passed through an area where there is no service? If you have a friend who is trying to communicate with you while you’re out of service they send messages, but you don’t receive them. When you finally come to a place with cell reception suddenly your phone dings over and over and over. Just because you couldn’t receive it at the time, that didn’t stop your friend from sending you a message. And once you were in a place where you could receive it, all the previous messages, from however long you were out of service, came flooding in. Emotions are the same way, they’re messages from your subconscious. Your subconscious wants to let you know something important like, “This isn’t okay,” “Something feels off here,” or “You’re worth holding a boundary,” but if you’re not in a place where you can receive the messages, you won’t feel them at the time of their sending. When you do shift out of the numbness, suddenly all the messages that your feeling friends have sent you come flooding in. You’re suddenly angry because all of the “this isn’t okay” messages finally came through. Sometimes the situation that sent the anger messages has shifted and is no longer happening, which might leave you confused about why you’re so angry now that he’s stopped lying to you. Just because situations might have changed now, that doesn’t mean the message should be ignored. There was real pain happening when the message was sent. That pain needs to be validated. However, this validation doesn’t mean that your emotions get to dictate your behavior. You wouldn’t check your message while in the middle of driving on a dangerous, curvy mountain road - you also won’t give your emotions control of your behavior. They simply have a message for you to understand when you’re ready to receive it.

In session, I observed that adopting this metaphor helps create a space where women are allowed to have emotion as a part of who they are, without the stigma

or fear of having the emotions define who they are. Dr. Richard Schwartz, author of “No Bad Parts: Healing Trauma and Restoring Wholeness with the Internal Family Systems Model” (2021), teaches the importance of accepting all our parts as good, important, or helpful. I would suggest that this acceptance includes emotion parts. There are no such things as “bad” and “good” emotions—simply enjoyable to experience and difficult to experience ones, for the same reason as there are no bad parts, because, at the bottom of a part or emotion, is a desire to help and protect the self.

Once a client has accepted that her emotions have value and she can trust that they have a message for her, clinicians can then shift to teaching her how to honor her emotions. Honoring emotions does not mean giving control of behaviors to the emotion, it means approaching the emotion with curiosity about what message the emotion is sending her. Interventions that allow her to separate herself from the emotion can be beneficial, including interventions similar to Empty Chair, where she can imagine her emotion in the empty chair—visualizing its form and asking it what message it has for her; and Board Room, her emotions surround the table in the board room and talk about why they’re noticing. Sometimes I’ll have a client simply voice, “Hi, anger. What’s up?” and that space between herself and the emotion will begin to bring clarity into where the emotion is originating.

DISCERNMENT

A question I have often been asked during a discussion on the Holy Ghost is, “How do I tell if a thought came from me or the Holy Ghost?” Answers to this question often include a reference to the scripture that states, “All good things come from God” (The Church of Jesus Christ of Latter-day Saints, 1987a). I am glad when clients ask this question. I am glad their instinct is to ensure that they can tell when they are receiving promptings. However, helping clients discern between the spirit and their own voice is short-sighted if the conversation ends there. An important part of the discussion can also be the difference between a Spiritual prompting or a prompting from the Adversary.

The question, “How do I tell if a thought came from me or Satan?” is not one that I get asked nearly as often in session. But this question is the important one. In scripture, we learn that the Adversary can influence

our thoughts and actions by putting ideas into our minds and hearts in 2 Nephi 28:20-22 (The Book of Mormon, 1981):

For behold, at that day he rage in the hearts of men, and stir them up to anger against that which is good. And others will he pacify, and lull them away into carnal security, that they will say: All is well in Zion; yea, Zion prospereth, all is well—and thus the devil cheateth their souls, and leadeth them away carefully down to hell. And behold, others he flattereth away, and telleth them there is no hell; and saith unto them: I am no devil, for there is none—and thus he whispered in their ears, until he grasps them with his awful chains.

Notice that it does not read, “he saith unto the *wicked*” or “he whispered in the ears of *his followers*.” It is important that while teaching discernment, psycho-spiritual practicing clinicians watch for the distortion that a client might internalize that suggests if they are going about doing good they will not hear from Satan. Or, more importantly, that if they are receiving whisperings from the devil they must not be a good person.

It is expected to be a good person *and* experience whisperings from the Adversary. Receiving messages, temptations, influences and distortions from Satan and his minions is part of this life. It is not contingent on worthiness, or lack thereof. Christ himself was tempted by Satan. As well as Moses and Joseph Smith. And everyone on the Earth. David A. Bednar taught about the importance of studying, recognizing, and understanding the tactics of the Adversary to build our awareness of his relentless attacks and be able to protect ourselves (2019). So the question is not whether or not the Adversary will put thoughts in your client’s head. Nor is the question of their righteousness when Satan is the source of their thoughts. The true questions we teach our clients are, *When* the devil whispers in your ears:

- How will you recognize the source?
- Are you *required* to believe what you are thinking?
- What will you do with the thoughts you’re having?

Michelle D. Craig addresses some of these questions in her sermon titled “Divine Discontent,” (2018). She differentiates between when the Spirit prompts us to change something and when the Adversary attacks something we’re doing by attributing “divine discontent” to the message from the Spirit and paralyzing

discouragement to those adversarial attacks (Craig, 2018). In session, clinicians can guide their clients to notice the difference in how their body, mind, and energy feel when they're experiencing discontent versus how they feel when under an attack. A guide that I will start with with my clients is that the Spirit speaks it usually brings feelings of empowerment, ability, confidence/courage, and clarity for the next step. Compared to when the Adversary speaks it is common to feel confused, hopeless, miserable, like nothing can ever be done, disempowered, discouraged. I ask my clients to create their own list of how they felt at a time when she was certain it was the Spirit. This list becomes a Litmus test of sorts to help her cognitively clarify the skill of discernment. With this list and her recent development of confidence in her feelings and physiological sensations, she can begin to find clarity in her ability to discern. She can now confidently identify and access the Spirit to help her as she intentionally puts efforts toward helping her brain understand what she's experienced.

CBT TO BUILD NEW SCHEMAS

As I have worked with clients to build new schemas around trust, I have found it is important to spend time building two schemas to replace the one. We do not just identify what *are* trustworthy behaviors but we put efforts towards identifying what are *not* trustworthy behaviors as well. The addition of the second framework around untrustworthy behaviors provides a space for her to place experiences that she hasn't been able to understand previously. It also gives her the control to determine when to trust and when not to trust, which leads to the restored peace that she is craving. For this stage of healing, I have found the intervention suggested in an article produced by The Church of Jesus Christ of Latter-day Saints, *What if I am Struggling With Trusting Others After Abuse?* (n.d.b.), to be one of the most helpful visualizations.

This intervention begins by asking the client to consider a bank account. When money is deposited into the account, the balance grows. When money is withdrawn, the balance is depleted. There is a point, \$0, when the balance is neither positive nor negative. Some bank accounts require a minimum amount to remain in the account to qualify for the account to be

free. Otherwise, if the balance drops below that point, there are consequences attached.

Trust is the same. Some behaviors make deposits into the trust account. Other behaviors make withdrawals. There are minimum amounts required for certain types of relationships, and consequences when the trust balance drops below that minimum amount. Your client gets to determine which behaviors deposit trust and which ones withdraw, although some general ones can get the discussion started. Rhyll Crowshaw, the founder of SA Lifeline and S-Anon, has a series of behaviors to discuss and consider in the "Roadmaps to Recovery" section of her book, "What Can I Do About Me?" (2012). Betrayal is a huge withdrawal. The lying, defensiveness, deception, lack of accountability, blame-shifting, gaslighting, etc., that often come along with betrayal are their own withdrawals as well. This leaves the wife with a trust account for her husband with a high negative balance.

I like this metaphor because when a wife says, "I see he's working but I'm still so angry," or the husband says, "I'm working so hard but she still doesn't trust me. She never will!" the bank account analogy brings clarity to what is happening. For example, if we assign a number to the negative balance caused by the husband's behaviors, say -\$1,000, and assign values to trustworthy behaviors, perhaps working a 12-step program is \$10, being open and transparent is \$25, attending and engaging in couples counseling is \$50, etc., it is easier to understand the amount of time needed to bring that -\$1,000 back up to a zero. And, depending on her minimum balance required for an intimate partner's level of trust, it will take a significant amount of time to return to a trust balance level before the betrayal. This shows that his actions *are* important. Trust *is* growing. But it's the consistent deposits over a significant amount of time that will make the difference.

CONCLUSION

When a schema shatters, it shifts reality, confidence, and understanding of the world. Betrayal trauma results in a shattered trust schema, and when that trust schema shatters it affects the ability to trust themselves, strangers, family, and often, God. This experience can be disheartening and confusing. As a clinician, it is important to remind the wife that she is not

crazy and that she's not alone in this experience. Many women are experiencing the same shattering in their world. One way to help her amidst the shattering is to work through four phases of healing to begin to build more accurate schemas and restore confidence and peace to their lives. First, is validation. Beginning with external validation to teach what validation looks like and then shifting to internal validation for personal wins, large and small. Second, honoring emotions. Honoring emotions is not letting emotions control behaviors, it is accepting the message that an emotion is trying to communicate. Third, discernment. Some thoughts may come from an actual enemy whose intent is to create misery. Clients can use their emotions to discern and identify promptings from the Spirit vs. promptings from the Adversary. And finally, rebuilding the trust schema to include both trustworthy and untrustworthy behaviors. It is my experience that working through these phases brings the opportunity for restored peace to the wife, even when the relationship remains in peril.

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