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Psychological Dynamics of Middle-Aged Balinese Women Following Spousal Infidelity

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ABSTRACT

Background: Marital infidelity is a multifaceted phenomenon and a primary catalyst for divorce worldwide.

Objectives: This study explores the complex psychological dynamics of middle-aged women who have experienced chronic spousal infidelity within the specific cultural context of Bali, Indonesia.

Method: This research utilizes a qualitative case study approach, focusing on a 44-year-old Balinese woman (LS) who endured five distinct episodes of infidelity over a 22-year marriage. Data collection involved in-depth interviews and observation, supplemented by a comprehensive psychological battery, including Graphic Tests, Wartegg, Standard Progressive Matrices (SPM), Sack's Sentence Completion Test (SSCT), and the Beck Depression Inventory (BDI).

Results: Clinical assessment revealed that the subject suffers from severe anxiety and clinical depression. Her personality profile is characterized by low self-esteem, chronic indecision, and a maladaptive preoccupation with past traumas. The psychological dynamics identified include profound social withdrawal, emotional dysregulation, and somatic symptoms such as insomnia, fatigue, and loss of appetite. The findings suggest that the repetitive nature of the betrayal led to a state of learned helplessness and a diminished capacity for proactive problem-solving or future planning.

Conclusion: The study concludes that chronic infidelity in a long-term marriage produces deep-seated psychological scars that impair both daily functioning and social integration. For women in traditional cultural settings like Bali, these dynamics are compounded by a lack of adaptive coping mechanisms, necessitating targeted psychological intervention to address the intersection of trauma and self-identity.

Keywords: Psychological dynamics, Balinese women, Infidelity, Marriage

Citation: Saraswaty, R., Wulandari, P. D., Astaningtias, N. M. I. N. Psychological Dynamics of Middle-Aged Balinese Women Following Spousal Infidelity. Bali Medical and Wellness Journal. 2026, 2 (3), 16-22. DOI: <https://doi.org/10.71341/bmwj.v2i3.44>

Submitted: October, 28 2025
Revised: December, 11 2025
Accepted: December, 12 2025
Published: January, 30 2026



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INTRODUCTION

One of the fundamental developmental tasks of adulthood is the selection of a life partner and the establishment of a marital union. This trajectory extends into middle adulthood, typically defined as the period between ages 40 and 60. As a prolonged phase in the human lifespan, middle adulthood is often characterized as one of the most challenging periods to navigate. Individuals at this stage face an intensification of diverse responsibilities and multifaceted roles, ranging from professional demands to evolving family dynamics (Papalia, Olds, & Feldman, 2008).

The primary developmental challenges during this phase involve maintaining a healthy partnership, adjusting to the care of aging parents, and guiding adolescents toward responsible adulthood. Unlike younger cohorts, middle-aged adults often

exhibit shifting social patterns, placing a higher premium on building and sustaining intimate relationships. Such intimacy is a significant benchmark for psychological health; research by Putri et al. (2021) underscores that the quality of these close bonds has a profound impact on an individual's overall psychological and physical well-being.

Within middle adulthood, marriage represents the most prominent form of intimate relationship. Success in marriage is often measured by the alignment of individual expectations with the reality of the partnership. When this alignment is achieved, marital satisfaction is high; conversely, a persistent gap between expectations and reality leads to declining satisfaction. If left unaddressed, this decline fosters chronic conflict and may eventually lead to infidelity. Infidelity—whether emotional or physical—is defined as a fundamental violation of trust and a breach of relational commitment (Nagurney & Thornton, as cited in Shaleha & Kurniasih, 2021).

The ramifications of infidelity are devastating and far-reaching, affecting the psychological development of children, the stability of the extended family, and the social standing of the household. For the victim, the experience often precipitates severe emotional distress, including anxiety, depression, sexual dysfunction, and a catastrophic loss of self-esteem (Shaleha & Kurniasih, 2021). These stressors are major catalysts for divorce. According to the Indonesian Central Bureau of Statistics (2023), the divorce rate in Indonesia surged by 15.31% in 2022, with 75% of cases initiated by wives—primarily due to persistent conflict, financial strain, and abandonment.

Despite the existing literature on the general factors influencing infidelity, there remains a critical gap in understanding the specific psychological dynamics of middle-aged Balinese women who experience marital betrayal. This case study seeks to identify and analyze these dynamics within their unique cultural and developmental context. By providing a comprehensive understanding of these complex emotional experiences, this research aims to offer a foundational framework for mental health practitioners to develop more effective, culturally sensitive therapeutic interventions for victims of infidelity.

METHODS

Study design

This study employs a qualitative case study approach to investigate the intricate psychological dynamics of a middle-aged woman experiencing marital infidelity. A case study design is particularly suited for this inquiry as it facilitates an in-depth exploration of a complex phenomenon within its real-life context, allowing for a profound understanding of the subject's subjective experiences and the multifaceted factors shaping her psychological state.

Participant Profile and Selection

The primary participant, identified by the initials LS, is a 44-year-old housewife who has been married for 22 years and is a mother of two. The participant's history is marked by the discovery of her husband's infidelity on five separate occasions throughout their marriage. Selection was based on specific purposive inclusion criteria: (1) middle-aged Balinese women, (2) currently unemployed (housewife

status), (3) victims of repeated marital infidelity, and (4) those who demonstrated a voluntary willingness to participate in the research process.

Data Collection

To ensure a robust and rigorous analysis of the participant's psychological state, this study utilized a multi-method data collection strategy designed to facilitate data triangulation. Primary qualitative data were gathered through semi-structured, in-depth interviews aimed at uncovering the participant's personal narrative, the chronological development of the marital conflicts, and her subjective emotional responses to repeated infidelity. These verbal accounts were supplemented by systematic observation, where the researcher recorded non-verbal behaviors, affective displays, and physiological cues during the sessions to gain a more nuanced understanding of the participant's underlying distress.

The qualitative narrative was further grounded by a comprehensive battery of psychometric and projective assessments. Cognitive functioning was screened using the Standard Progressive Matrices (SPM) to ensure that the participant's intellectual capacity was within a normal range for accurate self-reporting. To explore deeper personality structures and subconscious defense mechanisms, the researcher employed the Wartegg Test and graphical projective tests, such as Draw-A-Person and House-Tree-Person. Relational attitudes and specific emotional triggers were identified via the Sacks Sentence Completion Test (SSCT), while the severity of depressive symptoms was clinically quantified using the Beck Depression Inventory (BDI). This integrated approach allowed for a holistic assessment of the participant's psychological dynamics, merging self-reported experiences with standardized diagnostic evidence.

Ethical Considerations

The research was conducted with strict adherence to psychological ethical standards. Prior to data collection, the participant was provided with informed consent, which detailed the study's objectives, procedural steps, potential psychological risks, and the benefits of participation.

RESULTS

The results of this case study delineate the complex interplay between the participant's developmental history, marital trauma, and the specific cultural constraints of the Balinese patrilineal system.

Participant Profile and Clinical Observation

LS is a 44-year-old housewife with a high school education, married for 22 years and a mother of two. Although naturally extroverted and open to new social interactions, her current clinical presentation is marked by severe psychological distress. Upon initial assessment, LS appeared visibly depressed, characterized by a somber and fatigued expression. Her affect was highly labile; she frequently wept, avoided eye contact, and exhibited psychomotor signs of anxiety, such as placing her hand over her chest and sighing deeply when discussing her marital history. Notably, LS reported a lifelong lack of personal agency, rooted in a restrictive childhood where her father discouraged independent activities—a pattern that has persisted into her adult life.

Psychological Symptomatology

Over the past eight months, the intensity of LS's domestic problems has led to a perceived inability to cope. In the three months preceding the study, she reported significant somatic and cognitive symptoms, including chronic insomnia, anorexia (loss of appetite), and persistent fatigue. Cognitive impairments were also evident; the participant experienced frequent "brain fog" and memory lapses, such as forgetting her grocery lists or losing her orientation when traveling home. Socially, LS has transitioned from an outgoing individual to one who is increasingly isolated, withdrawing from community activities to avoid the stigma associated with her domestic situation.

Psychometric and Projective Interpretation

The integration of multiple psychological assessments provided a consistent profile of LS's personality dynamics. Firstly, Projective Measures (BAUM, DAP, HTP, Wartegg): These tests revealed high levels of generalized anxiety, profound self-doubt, and a lack of adaptive ego strength. The imagery suggested an individual who is "fragile" and overly anchored in past traumas. Her problem-solving approach was found to be reactive rather than proactive, indicating a lack of future-oriented planning. Secondly, Cognitive and Emotional Screening (SPM, BDI, SSCT): The Beck Depression Inventory (BDI) scores confirmed a state of severe depression. The Sacks Sentence Completion Test (SSCT) highlighted significant conflicts regarding her marital identity and emotional regulation, revealing a chronic inability to express needs or navigate disagreements effectively.

Psychological Dynamics and Cultural Context

The participant's psychological state is a result of cumulative trauma from five instances of marital infidelity, exacerbated by a lack of healthy communication regarding emotional and sexual needs. The current crisis is intensified by the impending divorce, which triggers specific cultural anxieties within the Balinese Purusa (patrilineal) system. LS fears that a legal separation will result in the loss of her children—who, according to customary law, remain with the male lineage—and social ostracization, as divorce remains a significant taboo in her community.

This systemic pressure has rendered LS feeling helpless and abandoned, as she views her husband not only as a lost companion but as her sole economic provider. The domestic instability has also affected her children, who exhibit a mixture of sadness and resentment toward their father, while LS herself reports increased irritability and shame when interacting with her extended family.

DISCUSSION

The psychological trajectory of the participant, LS, aligns closely with established theoretical frameworks regarding relational betrayal and emotional attachment. The findings suggest that unmet emotional needs and significant deficits in communication—characterized by a lack of open discourse and mutual understanding—function as primary drivers for seeking external emotional connections. As observed in LS's case, the consequences of this breakdown are profound and multi-dimensional. Her experience of severe depression, anxiety, and impaired emotional regulation corroborates the research of Shrestha et al. (2023) and Aulia and Andaryuni (2025), which liken the impact of infidelity to post-traumatic

stress disorder (PTSD). The intrusive thoughts, feelings of helplessness, and cognitive "brain fog" reported by LS represent a characteristic "attachment wound," where the partner, who is traditionally viewed as a "safe base," becomes the source of psychological trauma.

The destructive reach of infidelity extends beyond the dyadic relationship to the broader family system, particularly affecting the psychological development of offspring. LS's children exhibited a combination of hatred toward the father and withdrawal from their social environment, mirroring the findings of Imtinan et al. (2023). This systemic distress suggests that children of infidelity often develop a profound distrust of future intimate relationships and the opposite sex. Furthermore, for the victim, the loss of self-confidence and security can trigger a cascade of negative outcomes, including social isolation and the adoption of maladaptive coping mechanisms. As highlighted by Rokach and Chan (2023), these emotional dysregulations are not merely transient reactions but can evolve into long-term psychological conditions if not addressed through targeted clinical intervention.

Given the severity of LS's symptomatology, a holistic and multi-modal therapeutic approach is warranted. Potential interventions for such cases include Emotionally Focused Therapy (EFT), which is specifically designed to repair attachment bonds, and Cognitive Behavioral Therapy (CBT) to address the cognitive distortions and depressive symptoms identified in the psychometric testing. Newer integrative approaches, such as the combined EFT-EMDR protocol, may offer a specialized pathway for processing the acute trauma of betrayal while simultaneously restructuring the couple's emotional responsiveness. Additionally, Imago Relationship Therapy (IRT) and Integrative Behavioral Couples Therapy (IBCT) provide structured frameworks for fostering empathy and navigating high-conflict dynamics. For practitioners, a stepwise protocol involving trauma stabilization followed by structured disclosure is essential for building a viable path toward forgiveness or healthy separation.

While this case study provides a rich, granular understanding of the psychological dynamics involved, it is important to acknowledge its limitations. As a single-subject qualitative inquiry, the findings cannot be broadly generalized to all victims of infidelity. The unique intersection of LS's experiences with Balinese customary law (Awig-Awig)—specifically regarding the patrilineal Purusa system—presents a culturally specific layer of distress that requires further exploration. Future research should employ larger sample sizes and longitudinal designs to evaluate the long-term effectiveness of the proposed interventions. Moreover, a dedicated investigation into the socio-legal pressures faced by Balinese women during divorce is necessary to develop culturally sensitive mental health programs that address both psychological trauma and social stigmatization.

CONCLUSION

The psychological dynamics of LS, a middle-aged Balinese woman and victim of repeated marital infidelity, represent a complex intersection of individual emotional trauma and systemic cultural constraints. This study concludes that the impact of infidelity is not limited to the individual; rather, it precipitates a cascade of distress that significantly affects the children and the broader family unit. In LS's case, this

trauma manifested in a constellation of debilitating symptoms, including social withdrawal, severe emotional lability, psychomotor fatigue, and chronic cognitive impairment. Standardized psychological assessments further confirm that LS is experiencing severe depression and anxiety, compounded by a profound deficit in emotional regulation and self-confidence. Crucially, these psychological states are exacerbated by the unique pressures of Balinese customary law, which adds a layer of socio-legal vulnerability to the victim's experience. Ultimately, these findings underscore the necessity for clinical interventions that are not only psychologically robust but also culturally sensitive to the specific challenges faced by women within the Balinese patrilineal system.

CONFLICT OF INTEREST

The authors stated there is no conflict of interest in this study.

FUNDING

No funds were received in support of this work. No benefits in any form have been or will be received from any party related directly or indirectly to the subject of this paper.

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