



RESEARCH PAPER

Relationship between Attitude towards Infidelity, Difficulty in Emotion Regulation and Mental Health Issues among Married Individuals

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PAPER INFO	ABSTRACT
Received: February 21, 2022	The study examined the relationship between attitude towards infidelity, difficulty in emotion regulation, and mental health issues including psychological distress and psychological well-being. Cross-sectional survey research design was applied for data collection from married individuals (N = 200), including an equal number of men (n = 100, 50%) and women (n = 100, 50%). Along with demographic information sheet, Difficulty in Emotion Regulation Scale (Gratz & Roemer, 2004), Mental Health Inventory and Attitude toward Infidelity Scale was used for the purpose of data collection from participants. Attitude towards infidelity and difficulty in emotion regulation positively predicted psychological distress whereas attitude towards infidelity negatively predicted psychological well-being of married individuals. The findings have important implications in the field of family psychology, health psychology and marital counselling from the perspective of the impact of attitude towards infidelity on the mental health issues of married individuals.
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Introduction

Perceived disloyalty of partner in married couples is “infidelity”. Married individuals form different attitudes towards infidelity. Although the attitude towards infidelity has direct relevance to mental health of married individuals. A good deal of knowledge is evident on the impact of attitude towards infidelity on the mental health issues including psychological distress (Epstein, 2005) and psychological well-being in the individualistic cultures. However, the present study is the extension of the individualistic evidence as it is being conducted in a collectivist culture whereas marital life and related issues are relatively different. Association between emotion regulation and mental health issues is also an important consideration of the study. Emotions can eventually lead to different causes for psychological distress and psychological wellbeing. Emotion regulation strategies show a significant part in depression, and that shortfalls in cognitive control are associated to the use of maladaptive emotion regulation approaches. Negative emotions are positively correlated. Previous research is evident on the impact of difficulty in emotion regulation on the mental health (Gross & Munoz, 1995). Thus, just like attitude towards infidelity, emotion regulation has direct relevance to mental health of married individuals (Whisman, 2001). Therefore, emotion regulation is also included in the present study to empirically investigate its impact on mental health from the

collectivist context of Pakistan as previous research was limited to individualistic countries only ([Bell & Calkins, 2000](#)).

This study investigates the attitude towards infidelity, emotion regulation and mental health issues. The current section provides a brief review of previously conducted researches with study variables. Evolutionary model of psychology described those biological effects a potency behind many gender variances in relationship approaches and responses to problems related to relationship. An example, previous research has exposed that female showed more anxious at the emotional infidelity, while male indicate more distress in relative to sexual betrayal of their committed partner. The recent research tried to duplicate and cover this earlier study by also investigative related attitudinal issues perhaps associated to retorts to infidelity. Applicants were investigated concerning likely responses to betrayal related to relationship (emotional vs. sexual infidelity), and measures of applicants' romantic beliefs and sexual attitudes were found. Findings revealed a clear gender difference, the men chose sexual infidelity as most stressful while women were more probable to indicate emotional infidelity as most stressful. Women and men who did respond on the similar type of betrayal as most stressful, the intensity of the distress did not different. Sexual attitudes were assessed to be important in foreseeing grief caused by any type of infidelity. Due to emotional infidelity, romantic beliefs were important predictor of distress. This research assessed the individuals' attitudes related to different behaviors which may establish cheating. For example, behaviors include go on date with someone other than your committed partner, dancing with other one than your committed partner. The data was examined to determine if there was a change in insights of these type of behaviors between individuals who had cheated and those who had not on their partners. Fascinatingly, here was *no difference*, those had not and who had cheated viewed the behaviors in a same manner. This result denies prior research which has exposed that in the past those who have cheated on partners also have more lenient attitudes towards infidelity (Drake & McCabe, 2000). There was a significant difference between those who were cheated by a partner and those who were not. Those who had been resentful on before were much more likely to view their partner's behaviors with others as infidelity. Therefore, it seems that our past experiences influence our present beliefs and we fear that it may repeated. Investigative infidelity and behaviors found cheating can help partners better comprehend what will and will not be stood by a partner. It also possibly encourage a discussion of how to act in social circumstances with others.

In a study explored that the sex differences in response to spousal infidelity based on attachment styles, relationship status, variables of libido and history of infidelity in a sample of couples, the findings revealed that women stated concern and distress toward emotional infidelity more than men, and men were more subtle to sexual infidelity and were more worry. The results indicated that the variables of freedom, avoidant attachment style has history of infidelity and the couple's communication style with each other have most expectedness for action to spousal infidelity. Also, the results indicated that, in the topic of sexual envy, women and men respond in contradiction of infidelity as well as (Burchell & Ward, 2011).

Researcher examine in this research, that men and women differently experience emotions, which can eventually lead to different causes for self-injurious behavior. In general report, Women experiencing both emotions (positive and negative) more intensely than men, that might describe why women report more difficulties with ER skills compared to men (Robinson et al., 2014). Also, women tend to reveal more depressing symptoms, and have more trouble to controlling brooding behaviors e.g., over thinking about something than men. Compared to females who self-injure, men who self-injure over think about negative thoughts, and they have difficulty to thought in good ways (Macklem, 2008).

A meta-analysis by Carpenter (2012) found that researchers run amiss by holding fast to the evolutionary psychology tenant that male are more distressed by sexual infidelity, and female are more distressed by the extra dyadic diversity. Even both genders have a tendency to similar reactions, whereby, in a dichotomous forced choice scenario, extreme extradyadic intimacy is rated as more distressing. However, when participants are provided with a Likert scale, both men and women rank physical cheating as more distressing (Carpenter, 2012). Allen (2008) explored personal values, sexual chances, and excellence of the marital relation to extra martial sex. Allen found that married couples in which the men engaged in marital betrayal were characterized, by significantly less men sexual gratification, lower men positive conversation, and greater women invalidation, while couples in which the women went on to engage in cheating were considered, premarital, by significantly lower levels of woman optimistic communication, high levels of man and woman negative communication, and greater levels of man and woman invalidation.

Social role theorists contend that gender influenced responses to emotional against sexual infidelity are a product of forced select testing models and are not reliably indicated when replies are modelled as incessant scale choices Haris (2002) described results, Using both force choice and incessant metrics, Sagarin and colleagues comprised responses to supposed emotional and sexual infidelity among men and women with infidelity experience, betrayal experience, or no experience with betrayal. The authors revealed that theoretical sexual infidelity for men with cheating experience and women with betrayal experience was more upset than men.

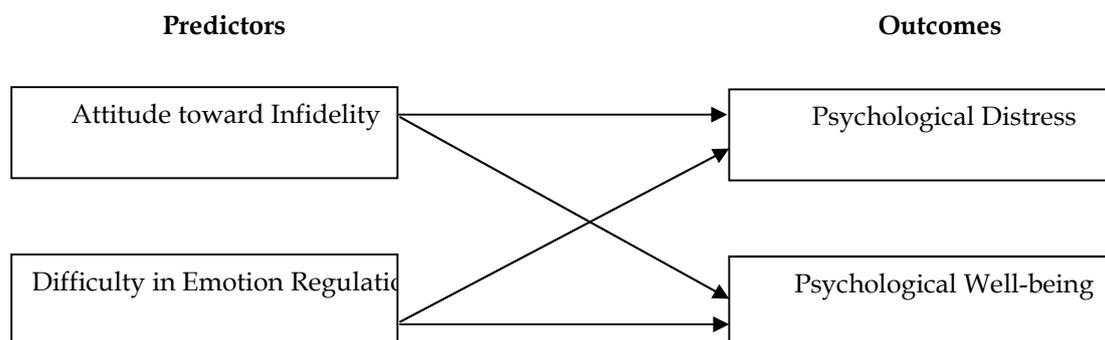


Figure 1. Schematic Representation of the Study

Hypotheses

To achieve the above listed objectives, following hypothesis were formulated and tested in the present study.

1. Attitude towards infidelity will be positively correlated with mental health issues among married individuals
2. Difficulty in emotion regulation will be positively correlated with mental health issues among married individuals.
3. Attitude towards infidelity will be positively correlated with difficulty in emotion regulation among married individuals.

4. Attitude towards infidelity will be positively correlated with psychological distress among married individuals.
5. Attitude towards infidelity will be negatively correlated with psychological wellbeing among married individuals.
6. Women will inhibit high score on Attitude towards infidelity, difficulty in emotion regulation and mental health issues as compared to men counterparts.

Variables

Attitude toward Infidelity is person being unfaithful in a committed monogamous relationship is defined as Infidelity (Whatley, 2006). Attitude towards infidelity means that what people think, understand and feel about issues related with infidelity. Emotion Regulation (Slamenik 2011, p. 48) is a process of origination, change of occurrence or adapting, keeping, physiological procedures and concentration and period of inner emotional conditions are associated with emotions, often helping to reach the personal aims. To retain, reduce or strengthen an emotion and its exterior manifestation, frequently considering the social perspective is a goal of regulation. The fact is that a person can try to normalize their feelings to escape significances of his/her behavior inclined by emotions, or to decrease the bad emotions carrying out in contradiction of an individual's physical and psychical behaviour (Slaměnik 2002). Mental Health Issues are substantial predictor for the health problems of a population. The deficiency of traditional marks of psychopathology like signs of depression and anxiety, as well as the occurrence of indicators of PWB like enjoyment, feeling cheerful, interest in life, and are the concept of mental health (Ware, Snow, Kosinski, & Gandek, 1993). Psychological wellbeing and psychological distress are two components of mental health.

Material and Methods

The present study was conducted with cross-sectional survey research design. Information was collected by using self-report measures.

Participants

The present study was carried out by using cross sectional survey research design to explore the relationship between attitudes towards infidelity, motion regulation and mental health issues among married individuals. Sample was comprised of married individuals ($N = 200$) with age range 19 to 70 years ($M = 34.31$, $SD = 8.75$). An equal sample of married men ($n = 100$, 50%) and married women ($n = 100$, 50%) were included in the study. Non probability convenient sampling was used to collect data. Convenient sampling allows the selection of participation on basis of availability and willingness to participate (Shaughnessy, Zechmeister, & Zechmeister, 2015). Inform consent was obtained in written form before administering the questionnaires. At the end after completion of the data collection participant was thanked by the researcher for their participation in research.

Table 1
Frequency and Percentage of the Demographic Variables

Demographics	<i>f</i>	%
Gender		
Men	100	50
Women	100	50

Education		
Illiterate	3	1.5
Matric	43	21.1
Inter	19	9.5
Graduation	77	38.5
Master	58	29.0
Occupation		
Government employ	70	35.0
Private employ	91	45.4
House wife	39	19.5
Marital condition		
Love marriage	44	22.0
Arrange marriage	107	53.5
Love-arrange	44	22.0
Forcefully	5	2.5

Table 1 show frequency and percentage of participants with respect to gender, education, occupation and marital conditions. Men ($f = 100.50\%$) and women ($f = 100.50\%$) were equal in number. Most of the participant were from the highest graduate level ($f = 77, 38.5\%$). With relevance to occupation, most of the participants were from the Private employ ($f = 91, 45.5\%$). Participant with arrange marriage were highly frequency ($f = 107, 53.5\%$).

Instruments. Self-report measures that provided the best operationalization of the variables of the present study according to the theoretical grounds of the variables were selected for the study. All the scales have good psychometric properties. In this study 3 self-administered questionnaires were administered to collect the initial information about variables under study from married individuals. Demographic sheet was also attached with the scale. Demographic information sheet was developed by to obtain the personal Information regarding personal information of the participants e.g. gender, age, socio economic status and educational level.

Attitude towards Infidelity Scale (AIS). Infidelity can be well-defined as a person being unfaithful in a committed faithful relationship. AIS was developed by Whatley (2006) and Urdu-translated by the researcher. It is a 12 item scale. The purpose of this scale is to get a better consideration of what people think and feel about issues related with infidelity. Each item on a seven point scale from (1) *strongly disagree* to (7) *strongly agree*. Negative items were reverse scored so that 84 higher scores indicate more positive AI and the lowest score of 12 means rejection of infidelity and lack of positive attitudes towards infidelity. A 12 item solution consisting of six positively worded and six negatively worded items was chosen to allow greater flexibility in research. The sample items were like “being unfaithful never hurt anyone” and “infidelity in a marital relationship is ground for divorce”. The reliability (internal consistency) of the scale was .80. Past research confirmed that AIS is a construct valid measure of attitude towards infidelity (Whatley, 2006).

Difficulty in Emotion Regulation Scale. DERS was developed by Gratz and Roemer (2004) and Urdu-translated by Kanwal (2012). It is a 36 item self-report scale. There are six subscales of DERS i.e. non-acceptance of emotional reactions, problems fetching in goal directed behavior (goals), impulse control difficulties (impulse), lack of emotional awareness (aware), limited access to emotion regulation strategies (strategies), lack of emotional clarity (clarity). The items of the scale are like “I am clear about my feelings” and “I pay attention to

hoe I feel". It is a five point Likert scale from 1 (*Almost never*) to 5 (*Almost always*). DERS holds a test retest reliability of .88 over the duration of two weeks, reliability among subscale is also reliable.

Mental Health Inventory. Mental Health Inventory was developed by Veit and Ware (2002) is a 38 item scale. Urdu translated by Mashir and Naz (2013). There are two global subscales of MHI, psychological distress and psychological wellbeing. The purpose of this scale is assessing mental health problems such as anxiety, behavioral control, depression, positive effect, and general distress. This scale helps in the measure of complete emotional process. The MHI includes 38 items in which the participant uses a six point Likert style answers and it can usually use without help. The sample items were like "how happy, satisfied, or pleased have you been with your personal life during the past month? And "throughout the past month, how often did you feel there were people you were close to? The MHI has a stated .93 alpha coefficient.

Procedure

In the present study, the researcher personally approached the participants to collect the information. Initially, an authority letter was obtained by the department which confirmed the institutional affiliation of the researcher. The researcher personally provided a brief introduction regarding the importance, implications, and objectives of the study and motivated them to participate in the study. Researcher insured them that this is an academic research and information provided by them will be used just for academic purpose and it will remain confidential and will never be disclosed at any stage. After motivating the participants, those who were willing to participate in the study, they were requested to sign the informed consent. After taking the written informed consent, they were given brief instructions to complete the scale and to provide the information on demographic information sheet. The researcher remained physically present and vigilant during the completion of the scale. In case, if the participants faced any sort of difficulties in the completion of scales or the understanding of the questions, the researcher addressed their queries in an appropriate way and answered their question. After the completion of the scales, the researcher scanned the questionnaires to see if any question was left unanswered. In case, if any question was left blank, the researcher requested the participant to provide the information in the respective section of the questionnaire. The response rate was 100% as out of 200 questionnaires, 200 were returned back, none was left blank or incomplete. About 15 to 20 minutes were consumed in the completion of the scales. Overall response of the participants was encouraged. At the end, the researcher paid special thanks to the participants because of their voluntarily participation in the study without taking any tangible incentive. The researcher appreciated them that their participation is worthy contribution in the knowledge of psychology.

Results and Discussion

The present study examined the relationship between attitude towards infidelity and its correlates including difficulty in emotion regulation and mental health issues among married individuals. For testing the hypotheses, different statistical techniques were applied.

Table 1
Psychometric Properties and Pearson Correlation in Variables

Variables	M	SD	Potential Range	Actual Range	Skewness	Kurtosis	1	2	3	4	5
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*Relationship between Attitude towards Infidelity, Difficulty
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Attitude towards Infidelity	42.0	10.95	.70	12-84	16-71	.28	.08	-	.27***	.64***	.41***	-.81***
Difficulty in Emotion Regulation	90.04	17.48	.84	36-180	50-133	.01	-.84	-	.49***	.49***	-.29***	
Mental Health Issues	111.6	27.48	.92	38-228	53-196	.01	-.65	-		.93***	-.77***	
Psychological Distress	69.90	20.03	.90	24-144	32-125	.29	-.67	-			-.49***	
Psychological Well-being	41.76	11.41	.84	14-84	16-71	.29	-.22	-				-

Table 1 shows psychometric properties of study variables. The reliability analysis indicates that reliability coefficient of Attitude Towards Infidelity Difficulty in Emotion Regulation, Mental Health Inventory, Psychological Distress and Psychological Wellbeing sub scale is .70, .84, .92, .90 and .84 are respectively which indicate satisfactory internal consistency. The value of skewness and kurtosis for Attitude towards Infidelity Difficulty in Emotion Regulation, Mental Health Inventory, Psychological Distress and Psychological Wellbeing sub scale are less than 1 which indicated that university normality is not problematic. The findings indicate that attitude towards infidelity is positively correlated with difficulty in emotion regulation ($r = .27, p < .001$), mental health issues ($r = .64, p < .001$) and psychological distress ($r = .41, p < .001$) whereas negatively correlated with psychological well-being ($r = -.81, p < .001$). Difficulty in emotion regulation is positively correlated with difficulty in emotion regulation ($r = .49, p < .001$), mental health issues ($r = .49, p < .001$) and psychological distress ($r = .41, p < .001$) whereas negatively correlated ($r = -.29, p < .001$). Mental health issues are positive correlation with psychological distress ($r = .93, p < .001$) whereas negatively correlated with psychological well-being ($r = -.77, p < .001$). Psychological distress is positively correlated with psychological well-being ($r = -.77, p < .001$).

Table 2
Regression Analysis Revealing the Impact of Attitude towards Infidelity and Difficulty in Emotion Regulation on Mental Health Issues

Predictors	[1] Outcome: Mental health issues		[2] Outcome: Psychological distress		[3] Outcome: Psychological well being	
	Model B	95%CI LL, UL	Model B	95%CI LL, UL	Model B	95%CI LL, UL
(Constant)	6.16	[-9.52, 21.85]	4.12	[-9.42, 17.46]	2.14	[-3.07, .36]
Attitude toward infidelity	1.38***	[1.12, 1.63]	.54***	[.32, .76]	-.84***	[-.76, -.92]
Difficulty in emotion regulation	.53***	[.37, .69]	.48***	[.34, .62]	.05	[-.01, .09]
R^2	.51		.32		.69	
F	104.26***		48.29***		217.66***	

*** $p < .01$.

[1] The R^2 value of .51 explained 51% variance in mental health issues with $F(2, 197) = 104.26, p < .001$. The finding indicated that attitude towards infidelity ($\beta = 1.38, p < .001$) and difficulty in emotion regulation ($\beta = .53, p < .001$) has significant positive effect on mental health issues. [2] The R^2 value .32 explained 32% variance in the Psychological Distress with $F(2, 197) = 48.29, p < .001$. The finding indicates that Attitude toward infidelity ($\beta = .54, p < .001$) and

Difficulty in Emotion Regulation ($\beta = .48, P < .001$) has significant positive effect on Psychological Distress. [3] The R^2 value .69 which indicate 69% variance in the psychological well-being with $F (2, 197) = 217.66, p < .001$. The finding indicates that attitude towards infidelity ($\beta = -.84, p < .001$) and difficulty in emotion regulation ($\beta = .05, p < .001$) has significant negative effect on Psychological Well-being.

Table 3
Mean, Standard Deviation and t-value for Men and Women on Attitude towards Infidelity, Difficulty in Emotion Regulation and Mental Health Issues

Variables	Men (n = 100)		Women (n = 100)		t(198)	p	95%CI		Cohen's d
	M	SD	M	SD			LL	UL	
Attitude towards Infidelity	42.1	10.46	42.0	11.46	.12	.90	-3.25	2.87	.01
Difficulty in Emotion Regulation	90.10	17.49	89.97	17.56	.05	.96	-4.75	5.02	.01
Mental Health Issues	111.3	26.46	111.96	28.58	.16	.88	-8.29	7.07	.02
Psychological Distress	69.74	19.75	70.05	20.40	.10	.91	-5.91	5.29	.02
Psychological Well-being	41.61	11.16	41.91	11.69	.19	.85	-3.35	2.88	.03

Table 8 shows mean, standard deviation and t-value for men and women on attitude towards infidelity, difficulty in emotion regulation and mental health issues Finding indicated that non-significant mean deference on attitude toward infidelity with $t (198) = .12, p > .05$, difficulty in emotion regulation with $t (198) = .05, p > .05$, mental health issues $t (198) = .16, p > .05$, psychological distress with $t (198) = .010, p > .05$ and psychological well-being with $t (198) = .10, p > .05$. The value of Cohen's d for all variables indicated small effect size

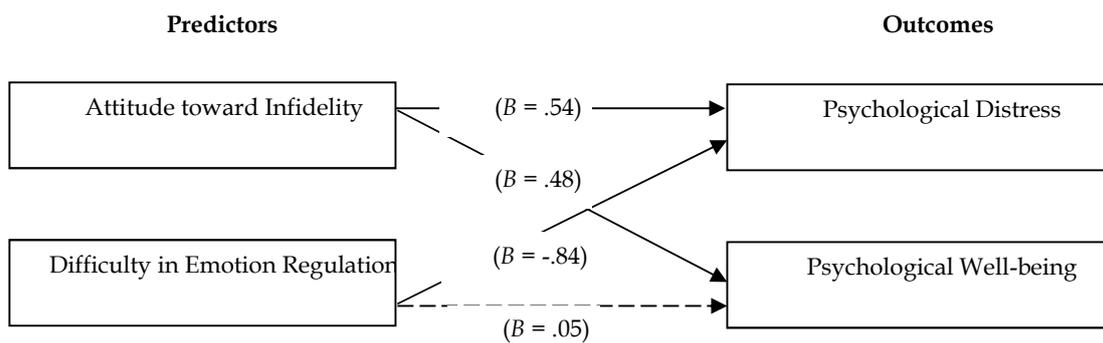


Figure 2. Outcome Model

Figure 3. Outcome Model on the Relationship of Attitude towards Infidelity and Difficulty in Emotion Regulation on Psychological Distress and Psychological Well-being among Married Individuals

———— Significant Findings

----- Non-Significant Findings

In present study, three variables were studied including attitude towards infidelity, difficulty in emotion regulation and mental health issues. Results provided evidence with relevance to hypotheses of the study. Reliability analysis revealed that all the scales had satisfactory internally consistency and further analysis can be carried out on the data. Pearson product moment correlation was carried out to check initial picture of relationship between study variables. The results of current study indicated that there was significant correlation between all the study variables among married individuals. Results of Pearson correlation demonstrated that attitude towards infidelity has positively correlated with mental health issues; difficulty in emotion regulation has positively correlated with mental health issues; attitude towards infidelity has positively correlated with difficulty in emotion regulation; attitude towards infidelity has positively correlated with psychological distress; and attitude towards infidelity has negatively correlated with psychological wellbeing. The major assumptions for regression and related parametric statistics were addressed. Data is normally distributed as indicated by the values of skewness and kurtosis. Pearson correlation revealed that the relationship patterns were theoretically consistent to conduct regression analysis for making predictions. Results of the Pearson correlation and further regression analyses revealed that most of the hypotheses were supported in the present study.

The first hypothesis of present study the attitude toward infidelity has positive correlated with mental health issues. Finding of current study support first hypothesis. Results are in line with the previous researches, that there exists significant positive relationship between mental health issues and attitude towards infidelity. Infidelity is a negative behavior it can turn into serious mental disorders. Cheating behavior makes people depressed and it makes the major reason of low self-esteem. Whisman and Bruce (1999) declared higher levels of marital dissonance stated by individuals with anxiety disorders, mood disorders or substance abuse disorders. The association of infidelity most limited to mental health, but mental health also contributed to difficulty in emotion regulation among married individuals PWB is a sensual of sexual health, as it is affected by environmental variation and the mechanism of ER in individuals. Trust is necessary to a good relationship, and the dishonesty, mistruths and lies that infidelity dictates destroys trust, or at least hurts it extremely. In accumulation, the in hurts, that when people have deceived and angry feelings their mate has been with another, is really difficult and painful to overcome. Therefore, infidelity ruptures trust and hurts intimacy. infidelity also makes the disloyal person feel as if he/she is not good enough, which makes the feeling of being incessantly threatened, and leads to insecurity. Both gender similar feel some kind of jealousy when they hurt intimacy doubtful their committed partner is being disloyal. Infidelity has important role to make person insecure and it leads to mental health issues.

Second hypothesis postulated that difficulty in emotion regulation will be positively correlated with mental health issues. This hypothesis was supported in the study and emotion regulation found to positive predictor of mental health issues. Finding of current study sported the notion of Berking and Wupperman (2012) that significant relationship between difficulties in emotional regulation with mental health. When people not clear about their emotions and can't express their feelings due to this they survive with mental health problems. Difficulties in emotion regulation or emotional deregulation has been found to be related with a number of mental health issues, such as depression (Gross & Munoz, 1995). The contribution of difficulty in emotion regulation is most limited to mental health issues, but it also associates with infidelity.

Third hypothesis purposed that Attitude towards infidelity will be positively correlated with difficulty in emotion regulation. Past research support current findings Buunk (1980) reported that significant other affected by the sexual infidelity have been originated to practice greater negative emotional responses, including disappointment, anger, self-doubt, and shame (Buunk, 1980). The association of infidelity to difficulty in emotion regulation is most important construct but it also contributed to psychological distress among married individuals. The fourth hypothesis of the current study stated that attitude towards infidelity is positively correlated with psychological distress among married individuals. The results of statistical analysis revealed that attitude towards infidelity ha significant positive correlation. With psychological distress. This finding supported the fourth hypothesis. In the line with the findings of current study previous literature and empirical support reveled that there is direct relationship between attitude towards infidelity and psychological distress according to (Hall & Fincham, 2009). Suffering greater depression, distress, and anxiety after being cheated on were related with an increased possibility of engaging in a variety of health compromising behaviors. As developed infidelity behavior, psychopathological signs anxiety, depression has showed in married individuals. Finding of other research is sported to current findings extra-relational involvement behaviors occur in populations, recurrently resulting in distress for the individuals who participate in such relationships, their spouses or significant other, and their instant family members (Epstein, 2005).

Whisman and Bruce (1999) revealed disappointed partners to be three times higher likely to cultivate depression over a one-year period paralleled to content partners. In this research, the relationship between depression and interpersonal dissonance endured significant when demographic variances. These findings deliver evidence for interpersonal discord as a causal issue to the cause of depression. There are no researches which study the psychological and emotional effects of ERI. While evidences about the relationship between close relationship quality and emotion regulation, researchers have mostly focused on violent relations and aggressive and conflicting communication contexts. The present study tested the role of difficulty in emotion regulation in manipulating the quality of couple relationship, measured in terms of intimacy, in adult participants, all involved in a stable heterosexual couple relationship. Participants completed the DERS and the Couple Affectivity Scale. Data were investigated through descriptive statistical analysis, regression analyses and correlations. Researcher found that difficulty in emotion regulation had a negative effect on couple relationship quality. In other hand, difficulties in emotion regulation had negative affect on couple intimacy, definitely the perception that his or her partner was opened to intimate dialogue. Furthermore, difficulty emotion regulation predicted fears of dependency and fears of emotional involvement and control therefore, individuals who were not able to control their own emotions tended to duck close relations and were frightened to be controlled by their partner. Finally, gender was the unique predictor of sexual satisfaction and self-disclosure. The results indicated that emotion regulation of partners constitutes are important protective factor for the couple relationship, particularly for intimacy processes (The association of infidelity to psychological distress but it also contributed to psychological wellbeing).

The fifth hypothesis of current study stated that Attitude towards infidelity is negatively correlated with psychological wellbeing among married individuals. The result of statistical analysis revealed that attitude towards infidelity has significant negative correlation with psychological wellbeing. This finding supported the fifth hypothesis. In the line with findings of current study previous literature and empirical sport exposed that negative evaluations (significant other blame, self-blame, and causal attribution) had negative special

effects on health compromising behaviors through mental health (anxiety, distress and depression) ([Hosie](#), 2017).

The last hypothesis of current study stated that Women are inhibit high score on Attitude towards infidelity, difficulty in emotion regulation and mental health issues. The finding not supported to last hypothesis, in the line with findings of current study previous literature and empirical support revealed that no gender difference in the rate of infidelity. These findings propose the cohort effects which effect rates of ERI may have more effect on infidelity (Wiederman, 1997). Another research sport the current findings, females were virtually just as likely to commit acts of infidelity as males, females were less likely to condone the behavior than males (Foshi, 2000).

Conclusion

The present study found the association between attitude towards infidelity, ER, and mental health issues. The study also investigated gender deference on attitude toward infidelity. Pearson correlation was employed to find out relationship between attitude towards infidelity, difficulty in emotion regulation and mental health issues. Finding indicated that attitude towards infidelity was positively correlated with difficulty in emotion regulation and psychological distress. Regression analysis also revealed that attitude towards infidelity and difficulty in emotion regulation positively predicted psychological distress whereas attitude towards infidelity negatively predicted psychological well-being of married individuals.

References

- Bell, K. L., & Calkins, S. D. (2000). Relationships as inputs and outputs of emotion regulation. *Psychological Inquiry*, 11(3), 160-163
- Berking M, & Wupperman P. (2012). Emotion regulation and mental health: recent findings, current challenges, and future directions. *Curr Opin Psychiatry*, 25(2):128-34. doi: 10.1097/YCO.0b013e3283503669. PMID: 22262030
- Burchell, J.L., & Ward, J. (2011). Sex drive, attachment style, relationship status and previous infidelity as predictors of sex differences in romantic jealousy. *Personality and Individual Differences*, 51, 657-661.
- Buunk, B. (1980). Extramarital sex in the Netherlands. *Alternative Lifestyles*, 3, 11-39.
- Carpenter, C.J. (2012). Meta-analysis of sex differences in responses to sexual versus emotional cheating: Men and women are more similar than different. *Psychology of Women Quarterly*, 36(1), 25-37.
- Drake, C. R., & McCabe, M. P. (2000). Extra relationship involvement among heterosexual males: An explanation based on the theory of planned behavior, relationship quality, and past Behavior. *Journal of Applied Social Psychology*, 30, 1421-1439.
- Epstein, N. B. (2005). Extramarital involvement: A core relationship issue in need of a coherent model, comprehensive research, and empirically based intervention. *Clinical Psychology: Science and Practice*, 12, 139-143.
- Gratz, K. L., and Roemer, L. (2004). Multidimensional Assessment of Emotion Regulation and Dysregulation: Development, factor structure, and initial validation of the difficulties in emotion regulation scale. *Journal of Psychopathology and Behavioral Assessment*, 26(1), 41-54.
- Gross, J. J., & Munoz, R. F. (1995). Emotion Regulation and Mental Health. *Clinical Psychology: Science and Practice*, 2(2), 151-164.
- Hall, J.H., & Fincham, F.D. (2009). Psychological Distress: Precursor or Consequence of Dating Infidelity? *Personality & Social Psychology Bulletin*, 32(2), 143-159. Doi: <https://doi.org/10.1177/0146167208327189>
- Macklem, G. L. (2008). Emotion dysregulation, Practitioners Guide to Emotion Regulation in School-Aged Children, 13-24.
- Veit, Clairice & Ware, John. (1983). The Structure of Psychological Distress and Well-Being in General Populations. *Journal of consulting and clinical psychology*. 51. 730-42. 10.1037/0022-006X.51.5.730.
- Ware, J. E., Snow, K., Kosinski, M., & Gandek, B. (1993). SF-36 Health Survey: Manual and interpretation guide. Boston, MA, USA: Health Institute. World Health Organization. (2003). *Investing in mental health*. Geneva, Switzerland: Author.
- Whatley, M. A. (2008). Attitudes toward infidelity scale. In D. Knox & C. Schacht (2008). *Choices in Relationships* (9th ed.). Belmont, CA: Thompson Wadsworth Publishing.

- Whisman M. A. (2001). The association between depression and marital dissatisfaction. In: Beach S, Ed. *Marital and family processes in depression: A scientific approach*. Washington, DC: American Psychological Association; 2001
- Whisman, M.A., & Bruce, M.L. (1999). Marital dissatisfaction and incidence of major depressive episode in a community sample. *Journal of Abnormal Psychology, 108*, 674-678.
- Wiederman, M. W. (1997). Extramarital sex: Prevalence and correlations in a national survey. *Journal of Sex Research, 34*, 167-174.