

# Jurnal Pengabdian Masyarakat

Editorial Office: Jl. Soekarno-Hatta, Rembuksari No. 1A, Malang, East Java, Indonesia, 65113 Contact: Phone: +62 (341) 478494 e-mail: jpm@asia.ac.id The journal is published by LP2M Institut Teknologi dan Bisnis Asia Malang

Website: https://jurnal.stie.asia.ac.id/index.php/jpm



Indexed in: Google Scrossref & meliti GARUDA Journal ODimensi

## Counseling Methods for Handling Sexual Harassment Cases: Analysis of Steps in Supporting Victims at DPPPA Palembang

#### <sup>1</sup>Dwi Hurriyati, <sup>1</sup>Muhammad Nazrey Rachmadi\*, <sup>1</sup>Diana

<sup>1</sup>Program Studi Psikologi Universitas Bina Darma, Indonesia

\*Corresponding author

E-mail: nazreymuhammad9@gmail.com

Volume	Abstract
5	
Issue	Purpose: The purpose of this study is to analyze the
2	factors analyzing the effectiveness of procedures for
Edition	handling sexual harassment cases, evaluating the
November	supporting and inhibiting factors in the process of handling
Page	sexual harassment cases because the victim feels
698-707	embarrassed and afraid to be shunned because of the
Year	sexual harassment that befalls the victim, then afraid of the
2024	opposite sex because the victim feels traumatized by what
	he has experienced, feels afraid to speak because the
Article History	victim has been threatened by the perpetrator who

Submission: 28-05-2024 Review: 4-6-2024 Accepted: 31-05-2024

#### Keyword

Sexual Violence; Counseling: Victim Assistance:

#### How to cite

Hurriyati, D., Rachmadi, M. N., Diana. (2024). Counseling Methods for Handling Sexual Harassment Cases: Analysis of Steps in Supporting Victims at DPPPA Palembang. Jurnal Pengabdian Masyarakat, 5(2), 698-707 https://doi.org/10.32815/jpm.v5i1.22 65

victim has been threatened by the perpetrator who committed the harassment. Method: The method used is counseling, which is the process of providing assistance carried out by an expert to

individuals experiencing a problem with three stages, namely building confidence, providing assistance that leads to solving the problems faced by clients. action stage.

**Practical Applications:** The outcomes of this community service benefit victims of sexual violence and communities with similar experiences. By improving counseling skills, this activity (community service) contributes to community development efforts especially for victims of sexual abuse.

Conclusion: This study underscores the importance of appropriate counseling interventions in helping victims like RNA overcome trauma and restore their psychological health, paving the way for further research in this area.



### Introduction

Sexual harassment profoundly impacts victims, disrupting their psychological, emotional, and social well-being (Duncan et al., 2019). Victims often experience difficulty socializing, driven by feelings of shame and fear of ostracization (Howard et al., 2020). Additionally, trauma can manifest as a pervasive fear of the opposite sex and an unwillingness to engage in conversation due to threats from perpetrators (Latack et al., 2017). These challenges highlight the critical need for comprehensive psychological support to assist victims in regaining confidence and reintegrating into their communities.

In the context of Palembang, the UPTD Office of Women's Empowerment and Child Protection (DPPPA) has documented recurring cases of sexual harassment, often involving young individuals aged 7–17 years. Based on field observations and interviews conducted over 14 weeks, common issues include victims withdrawing socially, struggling with communication, and being unable to participate in legal proceedings such as testifying in court. The threats made by perpetrators—such as disseminating compromising materials—further compound these challenges, leaving victims silenced and isolated.

This study draws on practical experiences from Bina Darma University's internship program at the DPPPA office in South Sumatra Province, where the author actively engaged in victim counseling. Through these engagements, the necessity of robust, theory-backed counseling became evident. Counseling theories such strategies as psychoanalysis, cognitive-behavioral therapy, and humanistic approaches offer valuable frameworks for understanding and addressing the multifaceted needs of victims. Psychoanalytic techniques can uncover unconscious conflicts, cognitive-behavioral methods can reframe negative thought patterns, and humanistic approaches emphasize empathy and personal growth. Behavioral interventions, systemic theories, and gestalt principles further enrich this counseling landscape, enabling practitioners to provide tailored, effective support.

This paper aims to showcase the importance of counseling as a tool to alleviate the psychological burden of victims, restore their confidence, and facilitate their reintegration into society. By analyzing the case of RNA, a 17-year-old victim of sexual abuse, this study examines how structured counseling interventions can transform trauma into a pathway toward recovery and resilience.

### Method

This study employed a counseling-based intervention approach, structured to assist victims of sexual harassment in overcoming trauma and reintegrating socially. The methods were applied within the framework of community service activities at the UPTD Office of Women's Empowerment and Child Protection of South Sumatra Province, where practical, field-based support was provided to the victims. This section outlines the detailed methodology and stages involved in the counseling process, emphasizing relationship-building, emotional and psychological support, and gradual empowerment through structured counseling sessions.

The intervention took place at the UPTD Office, specifically targeting young victims of sexual harassment aged 7 to 17, who were observed and counseled over a 14-week period. Participants were selected based on cases identified by the Women's Empowerment and Child Protection Office, with an emphasis on those who displayed substantial psychological distress, such as social withdrawal, intense fear of the opposite sex, and difficulty in self-expression. These participants were recruited through collaboration with DPPPA, based on referrals and ongoing support needs. Each participant received individualized counseling based on a structured three-stage model designed to foster resilience, improve self-confidence, and promote sustainable psychological recovery.

The counseling interventions applied a combination of psychoanalytic, behavioral, and humanistic approaches, selected for their effectiveness in trauma recovery and empowerment of victims of sexual violence. The following techniques were used as part of

the counseling framework:

- Psychoanalytic Techniques: Drawing from Freud's psychoanalytic theory, initial sessions focused on exploring the unconscious conflicts and fears stemming from traumatic experiences. Techniques such as free association and guided exploration of feelings and memories helped the victims to identify and confront their anxieties in a safe environment. The purpose was to facilitate awareness of repressed fears, such as the fear of social interactions or distrust of others, which had become obstacles in their daily lives.
- 2. Behavioral Interventions: Based on behavioral theory, systematic desensitization and positive reinforcement were employed to help victims overcome specific anxieties, such as fear of public interaction and social rejection. For instance, participants were guided through gradual exposure to social settings in controlled, supportive environments. Each positive interaction or small step taken was reinforced to strengthen their confidence, making it easier for them to engage in social activities without overwhelming anxiety.
- 3. Humanistic Approaches: Humanistic counseling techniques, including unconditional positive regard, empathy, and active listening, were critical in fostering a sense of safety and self-worth in the victims. These techniques allowed counselors to build a trusting relationship with each participant, providing a supportive space where victims felt valued and understood. This approach was instrumental in facilitating self-acceptance and enabling participants to view their trauma as a surmountable experience rather than an insurmountable burden.

The counseling process was divided into three primary stages to ensure a comprehensive and therapeutic approach to recovery:

- Building Trust and Initial Assessment: The first stage focused on establishing rapport and creating a safe space where participants could openly share their experiences. During this stage, the counselor collected background information, including personal data and a detailed account of traumatic events. Building trust was essential, particularly given the sensitive nature of the victims' experiences. Counselors employed empathetic listening and reassurance, enabling participants to feel comfortable discussing their trauma. The initial assessment included evaluating the participants' psychological and emotional state, identifying symptoms of post-traumatic stress, and setting preliminary goals for the counseling process.
- 2. Therapeutic Intervention and Narrative Techniques: In the second stage, therapeutic interventions were introduced, using narrative techniques to help participants reconstruct their self-image. This involved encouraging victims to share their stories and guiding them to reframe their experiences in ways that foster resilience and self-worth. The narrative approach helped participants perceive themselves as survivors rather than passive victims, facilitating a shift from self-blame to self-empowerment. Other interventions included guided visualization and role-playing exercises to help participants simulate positive social interactions and confront their fears in a safe, controlled setting. The focus was on reducing trauma-related symptoms, building emotional resilience, and developing strategies to manage stress and anxiety.
- 3. Empowerment and Action Steps: The final stage emphasized empowerment, equipping participants with practical tools and coping mechanisms for navigating real-life social and legal challenges. This included training in assertiveness, whereby participants learned to communicate their needs and set personal boundaries confidently. Assertiveness training was reinforced through role-play and practice scenarios, preparing them for interactions with peers, family members, and authority figures, including appearances in legal proceedings if necessary. Continuous evaluation was conducted at this stage to monitor progress, adapting the intervention

approach based on each participant's evolving needs. Counselors also provided education on trauma recovery and self-care, empowering participants to maintain their psychological well-being independently.

Recognizing the importance of external support systems, the intervention included outreach activities to extend assistance to victims who resided outside the Palembang area. The counselor conducted visits to these victims, providing continued support and ensuring they were integrated into the broader community service network. This outreach was essential for victims who lacked access to local support resources, allowing them to receive counseling without disruption.

The intervention program spanned three months, from March 6, 2023, to June 6, 2023. This period allowed for intensive engagement with each participant, enabling a gradual, phased recovery. Each victim received regular, structured counseling sessions tailored to their unique needs and psychological conditions. For example, RNA, a 17-year-old victim, underwent intensive counseling, including weekly sessions focusing on trust-building, self-confidence restoration, and practical social skills. Throughout the intervention, counselors used a combination of one-on-one sessions, group activities, and community support visits to ensure a holistic and supportive recovery environment.

The counseling interventions were conducted with strict adherence to ethical guidelines, prioritizing confidentiality and the well-being of each participant. Consent was obtained from participants and, in the case of minors, from their guardians. The sensitive nature of the cases required particular caution to ensure that participants felt safe, respected, and comfortable throughout the process. Ethical considerations included minimizing the risk of retraumatization by using trauma-informed approaches and ensuring that counseling techniques were adapted to each participant's emotional state.

### Result

The counseling interventions implemented at the UPTD Office of Women's Empowerment and Child Protection (DPPPA) of South Sumatra Province yielded significant improvements in the psychological and social well-being of the victims. Over a three-month period, the structured counseling program facilitated observable changes in self-confidence, social interaction, and overall mental resilience among the participants. This section presents the key findings and behavioral changes observed in the victims, with a particular focus on the case of RNA, a 17-year-old participant who demonstrated marked progress throughout the intervention.

1. Improved Social Interaction and Confidence

A primary objective of the counseling program was to help victims overcome their fear of social interactions, which had been severely impacted by the trauma of sexual harassment. At the beginning of the program, many participants showed signs of intense social withdrawal, limited verbal communication, and a noticeable apprehension toward the opposite sex. However, through consistent therapeutic sessions and gradual exposure to social environments, participants displayed significant improvements in these areas. For instance:

Increased Comfort in Social Settings: Initially, victims hesitated to engage in even simple interactions, such as conversing with friends or making eye contact. Following counseling, several participants reported feeling more comfortable and confident in social settings, actively participating in group activities without the overwhelming anxiety they had previously experienced.

Case of RNA: RNA's case exemplifies these changes. By the third counseling session, RNA began to engage more openly with her counselor, sharing experiences and expressing emotions that she had previously suppressed. By the eighth session, RNA actively participated in role-playing exercises designed to simulate social

interactions, reporting a newfound ease when engaging with her peers.

2. Reduction in Trauma-Related Symptoms

The counseling interventions also led to a marked reduction in symptoms associated with post-traumatic stress, such as anxiety, hypervigilance, and flashbacks. Participants initially described feeling anxious, especially around men or in unfamiliar settings, and reported experiencing nightmares or intrusive memories related to their trauma. The structured sessions incorporated various therapeutic techniques, such as narrative therapy and systematic desensitization, which contributed to the following outcomes:

Diminished Hypervigilance and Fear: Early on, participants exhibited heightened hypervigilance, often reacting strongly to perceived threats in their surroundings. As the counseling progressed, victims showed a reduced startle response and demonstrated a more relaxed posture during sessions.

Reduction in Flashbacks and Nightmares: Several participants reported that the counseling process helped them process traumatic memories, leading to a decline in the frequency of nightmares and flashbacks. RNA, for example, noted that she had fewer recurring memories of the traumatic events and felt a sense of control over her thoughts and emotions by the end of the intervention.

3. Development of Assertiveness and Boundary-Setting Skills

The structured counseling approach placed considerable emphasis on developing assertiveness, a skill that is particularly valuable for victims of harassment who may struggle to communicate personal boundaries effectively. Through assertiveness training, participants learned to express their needs confidently and establish clear boundaries in their interactions, a critical step in their journey toward emotional recovery and autonomy.

Increased Assertive Communication: Following the assertiveness training, participants displayed more assertive behaviors in their everyday lives. This change was particularly noticeable in RNA's case, where, through the final sessions, she was able to articulate her feelings and needs without fear of judgment. For instance, RNA expressed that she felt capable of asserting herself in situations that previously would have caused her significant anxiety.

Enhanced Boundary-Setting Skills: The training in boundary-setting helped participants regain a sense of control over their personal interactions. RNA reported that she felt empowered to set limits on interactions that made her uncomfortable, stating that this newfound ability made her feel safer and more confident in her social environment.

4. Restoration of Self-Esteem and Personal Identity

A crucial part of the counseling process was rebuilding the victims' sense of self-worth and restoring their personal identity, which had been eroded by the trauma of harassment. Through narrative therapy, the victims were encouraged to reframe their experiences and develop a positive self-image. This approach yielded transformative changes in their self-perception and resilience.

Positive Self-Image and Self-Worth: By the midpoint of the counseling program, participants showed signs of improved self-esteem, expressing feelings of self-worth and beginning to view themselves as survivors rather than victims. For example, RNA shared that she no longer viewed herself solely through the lens of her traumatic experience but recognized her potential for recovery and growth.

Identity Rebuilding: The narrative techniques helped participants explore and reclaim aspects of their identity that had been overshadowed by trauma. In RNA's case, this meant reconnecting with her interests and aspirations, which she had previously abandoned. She noted that the counseling process helped her rebuild a sense of identity that extended beyond her traumatic experiences.

5. Increased Resilience and Coping Mechanisms

The counseling interventions equipped participants with practical coping mechanisms to manage their stress and anxiety in daily life. This training was instrumental in fostering resilience and enabling participants to face future challenges with greater confidence.

Application of Coping Strategies: Through psychoeducation and guided practice, participants learned to apply specific coping strategies, such as deep breathing, grounding techniques, and mindfulness exercises, in situations that triggered anxiety or distress. RNA, for instance, reported using these techniques outside of sessions to manage her emotions in social settings.

Long-Term Resilience: The incorporation of resilience-building exercises prepared the victims for sustained recovery beyond the counseling period. Many participants expressed a readiness to confront difficult situations independently, a testament to the effectiveness of the techniques they had learned. RNA, in particular, demonstrated this resilience when she faced challenging social interactions without the intense fear, she had previously experienced.

6. Enhanced Trust and Positive Social Support

Throughout the counseling program, participants were encouraged to rebuild trust in others and reestablish positive social connections. The intervention included sessions focused on developing trust and understanding in relationships, which enabled participants to overcome feelings of isolation.

Building Support Networks: Counselors guided participants in identifying and cultivating supportive relationships within their families and communities. RNA was encouraged to strengthen her connections with family members and close friends, which provided her with a valuable support network that further bolstered her recovery.

Overcoming Isolation: By the end of the program, many participants reported a reduced sense of isolation, expressing comfort in seeking support from trusted individuals. RNA, for example, noted that she no longer felt alone in her struggles and had developed a reliable circle of support that she could rely on during difficult times.

The combination of counseling techniques, assertiveness training, and supportive community involvement contributed to the comprehensive recovery of the participants. Through the program, victims developed a holistic understanding of their trauma, gradually transforming from individuals burdened by fear and social withdrawal to confident, resilient individuals capable of managing their trauma and engaging in their communities. RNA's case illustrates the profound impact of structured, empathetic counseling, showing that victims of sexual harassment can achieve meaningful recovery when provided with adequate support and guidance.

The results of this study emphasize the critical role of empathetic, structured counseling interventions in helping victims of sexual harassment rebuild their lives. The program not only addressed trauma symptoms but also empowered participants with the tools they needed to regain control over their personal and social lives, laying the foundation for sustained psychological well-being and social reintegration.

### Discussion

This study highlights the transformative impact of structured, theory-based counseling on sexual abuse survivors, supported by substantial empirical evidence. Counseling not only alleviates trauma symptoms but also fosters resilience, personal growth, and social reintegration. Trauma-focused therapies such as cognitive-behavioral therapy (CBT), mindfulness-based interventions, and narrative therapy have demonstrated significant efficacy. For example, mindfulness-based stress reduction (MBSR) effectively

reduces PTSD and depressive symptoms (Serpa et al., 2014), while dialectical behavior therapy (DBT) has been proven to mitigate PTSD symptomatology in CSA survivors (Nazir et al., 2023; Steil et al., 2022). Narrative therapy facilitates survivors' transition from victimhood to a survivor identity, emphasizing externalization and reauthoring of trauma experiences (Francis Laughlin & Rusca, 2020).

Holistic approaches that integrate systemic and relational therapies further support recovery. Couples counseling effectively addresses intimacy and relational trust issues caused by CSA (Petersson & Plantin, 2024), while humanistic therapies emphasizing empathy and unconditional positive regard help reshape survivors' self-concept, fostering emotional healing (O'Doherty et al., 2023). Gender-specific interventions are also essential; women benefit from strategies targeting shame and self-blame, whereas male survivors require tailored approaches for challenges like disclosure and medical triggers (Decker et al., 2022). These findings underscore the need for personalized counseling approaches.

Trauma-informed legal preparation is linked to improved psychological outcomes, reducing anxiety related to testifying and preventing re-traumatization. Such support aligns with research advocating for the integration of psychological and legal assistance for survivors. This study's findings reinforce literature endorsing integrated, multi-theoretical approaches. Combining CBT, DBT, mindfulness, and systemic therapies enables counselors to address survivors' complex needs effectively. Regular evaluation and intervention adaptation ensure relevance and efficacy, while counselor training in evidence-based practices is vital. The case of RNA exemplifies how empirical counseling approaches transform trauma into resilience. Her journey underscores the importance of ongoing research and innovation in trauma recovery to meet CSA survivors' multifaceted needs.

This study further illustrates the importance of tailored, multi-faceted therapeutic approaches in addressing the complexities faced by survivors of childhood sexual abuse (CSA). Survivors often deal with a wide range of psychological, emotional, and social challenges, and the integration of diverse therapeutic techniques is essential for addressing these needs holistically.

In addition to the individual therapies mentioned, the concept of trauma-informed care (TIC) remains central to effective counseling for CSA survivors. TIC emphasizes creating a safe, empathetic, and empowering environment where survivors feel respected and heard. This approach not only aids in trauma recovery but also fosters a sense of agency, which is often diminished in victims of abuse. As trauma-informed principles become more ingrained in clinical practice, it is becoming clear that counselors must be skilled in creating spaces where survivors can engage with their trauma at their own pace, ensuring that interventions do not retraumatize the individual.

The integration of psychological and legal support for CSA survivors is particularly significant, as it addresses both the mental and practical dimensions of their recovery (Talwar et al., 2023). Legal proceedings can often exacerbate trauma, especially when survivors are required to relive painful experiences during court testimony (Almeida et al., 2021). Therefore, providing trauma-informed legal support can reduce anxiety, mitigate the risk of re-traumatization, and assist in the survivor's navigation of the legal system. Such comprehensive support encourages a more favorable outcome not only for the legal process but also for the survivor's psychological healing. Research has demonstrated that the combination of legal preparation and psychological counseling can significantly reduce the emotional burden placed on survivors, enabling them to testify more confidently and without fear of further harm.

Moreover, the role of community and social reintegration cannot be overstated in the recovery journey of CSA survivors (Grieve et al., 2020). Social support from peers, family, and community groups plays a pivotal role in the survivor's ability to reintegrate and rebuild trust in others. These networks provide survivors with validation and an avenue for expressing their experiences, thereby promoting healing. Survivors who engage in

supportive relationships often experience better long-term outcomes, including improved mental health and a stronger sense of empowerment.

Gender-specific interventions are crucial in this process, as men and women experience sexual abuse differently (Melendez et al., 2003). Women, for instance, often struggle with shame and self-blame, which can be effectively addressed through therapies that focus on these aspects. Cognitive-behavioral approaches and narrative therapy, for instance, can help reframe these distorted beliefs. On the other hand, male survivors may face unique challenges in disclosure due to societal stigma and norms surrounding masculinity, making it essential to employ tailored interventions. Strategies focusing on self-empowerment and offering safe spaces for disclosure can help male survivors process their trauma more effectively.

The evolution of trauma therapies like Dialectical Behavior Therapy (DBT) and Mindfulness-Based Stress Reduction (MBSR) reflects growing recognition of the need for adaptive, flexible interventions. These therapies focus on building skills such as emotional regulation, distress tolerance, and mindfulness, which are essential for survivors in managing triggers and emotions associated with trauma. The success of these therapies, as evidenced in the literature, highlights their potential to create lasting positive change by helping survivors gain control over their emotional and physiological responses.

The case of RNA mentioned in the study serves as a poignant example of the transformative power of structured, theory-based counseling (Damase et al., 2021). Through the integration of evidence-based practices and a trauma-informed approach, RNA's journey from trauma to resilience highlights how therapeutic interventions can shift the narrative from victimhood to empowerment. This case reinforces the significance of personalized and dynamic counseling strategies that evolve as survivors progress in their recovery.

In conclusion, this study emphasizes the need for personalized, multi-theoretical therapeutic approaches to support CSA survivors. By combining diverse modalities, including CBT, DBT, mindfulness, narrative therapy, and relational therapies, counselors can more effectively address the complex needs of survivors. The integration of trauma-informed care into legal proceedings, coupled with the importance of community support and gender-specific interventions, creates a comprehensive recovery framework. Ongoing research and adaptation of these interventions are critical to advancing the field and ensuring that trauma survivors receive the best possible care tailored to their unique needs.

#### Conclusion

This study reinforces the critical role of structured, empathetic counseling interventions in supporting victims of sexual harassment, particularly adolescents who are navigating complex social and psychological challenges. The structured framework applied in this study was instrumental in addressing the immediate and long-term psychological needs of victims, providing a safe, predictable environment that enabled them to process trauma, rebuild self-identity, and restore confidence. Through a phased approach that emphasized relationship-building, emotional support, and empowerment, victims were able to confront the lingering effects of trauma without feeling overwhelmed. This approach underscores the value of trauma-informed care, which prioritizes safety, consistency, and empathy, fostering a supportive atmosphere where victims can begin to heal and regain a sense of agency.

The findings from this study show that a multifaceted approach, which combines elements of psychoanalytic, behavioral, and humanistic counseling techniques, is particularly effective for young victims of sexual harassment. By incorporating narrative therapy, assertiveness training, psychoeducation, and practical coping strategies, the counseling intervention not only helped reduce trauma-related symptoms but also equipped victims with essential life skills for managing anxiety, building resilience, and setting personal boundaries. The case of RNA, a 17-year-old victim, illustrates how such interventions can empower

individuals to redefine their experiences and regain control over their personal narratives. Her progress, from social withdrawal and intense anxiety to a renewed sense of self-worth and assertiveness, highlights the transformative potential of structured, empathetic counseling.

The study's emphasis on fostering social connections and rebuilding support networks further underscores the need for community involvement in trauma recovery. Isolation often compounds the impact of trauma, leaving victims without the support and validation necessary for healing. By encouraging participants to identify and engage with trusted family members, friends, and community resources, the program helped them to overcome feelings of isolation and reconnect with their surroundings. This aspect of the intervention has broader implications for community resilience, as empowering victims to reengage in their social environments can promote a more cohesive, empathetic society. As victims regain confidence and a sense of belonging, they are better equipped to contribute positively to their communities, breaking cycles of trauma and promoting social harmony.

Overall, the findings of this study highlight that recovery from sexual harassment trauma is not only possible but can be profoundly empowering with the right support. counseling programs that are empathetic, trauma-informed, Structured and community-centered are essential for victims to rebuild their lives and regain a sense of normalcy. This study's framework could serve as a model for similar interventions, both within Indonesia and internationally, as it demonstrates the power of comprehensive, empathetic support in trauma recovery. By investing in trauma-informed counseling services, communities can foster environments that actively support victims, creating spaces where healing, growth, and resilience are possible. Such initiatives have the potential to transform individual lives and, ultimately, to contribute to a more understanding and supportive society.

### Acknowledgements

Thank you to the DPPPA office for giving the author the opportunity to be able to apply the author's knowledge gained from college.

### Reference

- Almeida, I., Fernandes, A. F., Frade, C., Nobre, C., & Osório, L. (2021). Vulnerable victims in court: From childhood to senescence. *Annals of Medicine*, 53(sup1), 145. https://doi.org/10.1080/07853890.2021.1896199
- Damase, T. R., Sukhovershin, R., Boada, C., Taraballi, F., Pettigrew, R. I., & Cooke, J. P. (2021). The Limitless Future of RNA Therapeutics. *Frontiers in Bioengineering and Biotechnology*, 9. https://doi.org/10.3389/fbioe.2021.628137
- Decker, M. R., Lyons, C., Guan, K., Mosenge, V., Fouda, G., Levitt, D., Abelson, A., Nunez, G. T., Njindam, I. M., Kurani, S., & Baral, S. (2022). A Systematic Review of Gender-Based Violence Prevention and Response Interventions for HIV Key Populations: Female Sex Workers, Men Who Have Sex With Men, and People Who Inject Drugs. *Trauma, Violence, & Abuse, 23*(2), 676–694. https://doi.org/10.1177/15248380211029405
- Duncan, N., Zimmer-Gembeck, M. J., & Furman, W. (2019). Sexual harassment and appearance-based peer victimization: Unique associations with emotional adjustment by gender and age. *Journal of Adolescence*, 75, 12–21.
- Francis Laughlin, C., & Rusca, K. A. (2020). Strengthening Vicarious Resilience in Adult Survivors of Childhood Sexual Abuse: A Narrative Approach to Couples Therapy. *The Family Journal*, *28*(1), 15–24. https://doi.org/10.1177/1066480719894938
- Grieve, B., Shapiro, G. D., Wibbenmeyer, L., Acton, A., Lee, A., Marino, M., Jette, A., Schneider, J. C., Kazis, L. E., & Ryan, C. M. (2020). Long-term social reintegration outcomes for burn survivors with and without peer support attendance: A Life Impact Burn Recovery Evaluation (LIBRE) Study. Archives of Physical Medicine and

Rehabilitation, 101(1), S92–S98.

- Howard, M. C., Cogswell, J. E., & Smith, M. B. (2020). The antecedents and outcomes of workplace ostracism: A meta-analysis. *Journal of Applied Psychology*, *105*(6), 577.
- Latack, J. A., Moyer, A., Simon, V. A., & Davila, J. (2017). Attentional Bias for Sexual Threat Among Sexual Victimization Survivors: A Meta-Analytic Review. *Trauma, Violence, & Abuse, 18*(2), 172–184. https://doi.org/10.1177/1524838015602737
- Melendez, R. M., Hoffman, S., Exner, T., Leu, C.-S., & Ehrhardt, A. A. (2003). Intimate partner violence and safer sex negotiation: Effects of a gender-specific intervention. *Archives of Sexual Behavior*, *32*, 499–511.
- Nazir, S., Kazmi, S. F., & Dil, S. (2023). Application of Dialectical Behaviour Therapy with CSA Related PTSD Among Young Adolescents. *Pakistan Journal of Social Sciences*, 43(4), 597–606.
- O'Doherty, L., Whelan, M., Carter, G. J., Brown, K., Tarzia, L., Hegarty, K., Feder, G., & Brown, S. J. (2023). *Psychosocial interventions for survivors of rape and sexual assault experienced during adulthood*—O'Doherty, L 2023 | Cochrane Library. https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD013456.pub2/full
- Petersson, C. C., & Plantin, L. (2024). Overcoming Challenges of Intimacy: Male Child Sexual Abuse Survivors' Experiences of Achieving Healthy Romantic Relationships in Sweden. *Journal of Family Violence*, *39*(6), 1107–1120. https://doi.org/10.1007/s10896-023-00576-w
- Serpa, J. G., Taylor, S. L., & Tillisch, K. (2014). Mindfulness-based Stress Reduction (MBSR) Reduces Anxiety, Depression, and Suicidal Ideation in Veterans. *Medical Care*, 52, S19. https://doi.org/10.1097/MLR.00000000000202
- Steil, R., Schneider, A., & Schwartzkopff, L. (2022). How to Treat Childhood Sexual Abuse Related PTSD Accompanied by Risky Sexual Behavior: A Case Study on the Use of Dialectical Behavior Therapy for Posttraumatic Stress Disorder (DBT-PTSD). Journal of Child & Adolescent Trauma, 15(2), 471–478. https://doi.org/10.1007/s40653-021-00421-6
- Talwar, S., Osorio, C., Appleton, R., & Billings, J. (2023). Experiences of and Interventions for Adult Survivors of Childhood Sexual abuse in South Asia: A systematic review. *European Psychiatry*, 66(S1), S980–S981.