The effectiveness of gratitude intervention in reducing negative emotions in sexual abuse victims

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Abstract: Gratitude therapy is a positive psychotherapy approach given to victims of sexual abuse to generate positive thinking by expressing gratitude to the environment, God and other people. This research aims to test gratitude intervention as a religious activity undertaken to reduce negative emotions in victims of sexual abuse. A total of 104 such victims were identified using the snowball sampling method who were divided into an experimental group (N=52) and a control group (N=52). They were diagnosed as having negative emotions based on the Child Trauma Questionnaire Shot-Focus (CTQ-SF) and Gratitude Questioner-6 (GQ-6) with triple ANOVA data analysis. The study’s results demonstrate a significant influence of gratitude on negative emotion, with values of F(39,037) = 4.71, p < .01, and ηp2 = 0.113. It can increase feelings of gratitude and reduce negative emotions in victims of sexual abuse. Gratitude therapy helps reduce negative emotions and foster positive emotions amongst such victims. The study could be implemented in people who experience negative emotions related to clinical and non-clinical disorders.

Keywords: gratitude intervention; negative emotion; sexual abuse

Abstrak: Terapi syukur merupakan pendekatan psikoterapi positif yang diberikan kepada korban pelecehan seksual untuk membangkitkan pemikiran positif dengan mengungkapkan rasa syukur kepada lingkungan, Tuhan dan orang lain. Penelitian ini bertujuan untuk menguji intervensi syukur sebagai aktivitas keagamaan yang dilakukan untuk mengurangi emosi negatif pada korban pelecehan seksual. Sebanyak 104 korban diidentifikasi menggunakan metode snowball sampling yang dibagi menjadi kelompok eksperimen (N=52) dan kelompok kontrol (N=52). Mereka didiagnosis memiliki emosi negatif berdasarkan Child Trauma Questionnaire Shot-Focus (CTQ-SF) anak dan Gratitude Questioner-6 (GQ-6) anak dengan analisis data triple ANOVA. Hasil penelitian menunjukkan terdapat pengaruh yang signifikan rasa syukur terhadap emosi negatif, dengan nilai F(39,037) = 4.71, p < .01, dan ηp2 = 0.113. Hal ini dapat meningkatkan rasa syukur dan mengurangi emosi negatif pada korban pelecehan seksual. Terapi syukur membantu mengurangi emosi negatif dan menumbuhkan emosi positif di antara para korban. Penelitian ini dapat diterapkan pada orang yang mengalami emosi negatif terkait gangguan klinis dan nonklinis.

Kata Kunci: intervensi rasa syukur; emosi negatif; pelecehan seksual

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Introduction

In Indonesia, in 2021 the Commission for the Protection of Children and Women determined that sexual abuse was the leading source of negative emotions in victims, with 299,911 cases reported. The emotions of sexual abuse victims manifest in long-term unpleasant emotional issues for victims, which consistently include anxiety, sadness, fear, anger, worry, trauma, and depression, which are conscious in responses to stimuli in their surroundings (Amédée et al., 2019; DeBono et al., 2020). Emotional disorder with regard to self-esteem and social acceptance may interfe with daily activities and contribute to social interaction problems with peers and family members (Parkinson et al., 2017). Negative emotions are often formed in certain circumstances which have a negative impact on how these emotions manifest (Bombari et al., 2017; Nuriyyatiningrum et al., 2023). It is crucial to understand that emotions expressed in negative thoughts can lead to suicidal ideation, drug use, prostitution and depression (Kaufmann et al., 2019; Wu et al., 2018; You et al., 2018). The other adverse effects of negative emotions on physical and mental health and their long-term consequences need to be addressed immediately (Pulverman et al., 2018). Because victims of sexual abuse find it difficult to verbally express their positive emotions, there is also a need for interventions to treat their negative emotional disturbances (Bjornsdottir & Rule, 2020).

Gratitude is essentially interpersonal; it arises in reaction to the other people's regard and reinforcement, resulting in demonstrations of affection towards individual (Wu et al., 2018). Gratitude is one of the "healing effects" in social situations, facilitating the bringing of peace to previous trauma and alleviating emotional pain (Lomas et al., 2014; Warsah et al., 2023). In contrast to several other forms of therapy, gratitude might affect the emotional state of victims of sexual harassment. It enhances the value of life and happiness by fusing appreciation with religious activity practices (Yu et al., 2020). This study focuses on the aspects of gratitude of intensity, frequency, span, and density in reducing negative emotions and increasing gratitude (Emmons & Stern, 2013; Lomas et al., 2014).

This study develops the gratitude therapy of Lomas et al. (Lomas et al., 2014), combining it with religious activities to reduce the risk of psychological disorders (Khaer et al., 2021). Amongst Muslims, gratitude has long been regarded as an essential human attribute for promoting happiness and well-being (Khaer et al., 2021). The habit of feeling grateful refers to the propensity to feel grateful to the right person in order to promote the right behavior (Loi & Ng, 2021). Furthermore, the Quran exhorts people “to be grateful to Allah for his manifold blessings and to one another” (Al-Seheel & Noor, 2016).

Gratitude therapy aims to increase happiness, well-being and life satisfaction in victims of sexual abuse (Arilikah et al., 2022). This intervention can be performed classically or independently. We emphasize that therapy for victims of sexual abuse is conducted to encourage participants to be grateful for what they currently have and to think positively about society, their family and God. The research contributes to theoretical and practical knowledge about people with emotional disorders. Coupled with gratitude therapy as a positive psychological development, we aim to conduct emotional gratitude therapy to overcome the problems of dealing with victims of sexual abuse, whose effectiveness has been empirically demonstrated based on theory (West et al., 2017). Gratitude therapy initially focuses on increasing positive emotions in the form of the free expression of positive feelings and thoughts, without receiving advice from therapists (Emmons et al., 2019).
Gratitude involves contemplating or writing about events for which one is grateful over time (Khaer et al., 2021). Gratitude interventions are relatively easy to use and completed in a short time. The types of intervention related to gratitude include gratitude lists, thankful thinking, and behavioral manifestations of gratitude (Algoloe & Zhaoang, 2016; Komarudin et al., 2022). Gratitude consists of grateful activities, such as keeping a gratitude journal comprising three items every day (Emmons et al., 2019; Lomas et al., 2014). McCullough et al. (2002) told participants of negative emotion to save a weekly report in which they listed five benefits (i.e., states of gratitude), problems, or life issues from the previous ten weeks. Gratitude thought is similar to a gratitude list, in that it involves thinking or writing about appreciative events in a broader global context (Lomas et al., 2014; You et al., 2018). Participants of negative emotion who invested five minutes each day reflecting on something they were appreciative of showed fewer negative emotions and less despair, and lower stress levels, than those who spent time focusing on new information (Renshaw & Rock, 2018). The technique of making a "gratitude visit"—that is, learning to write and read a thank-you note to someone of important as dynamic display of appreciation. Participants of negative emotion who made a one-week gratitude visit reported improved happiness levels and decreased rates of despair than those who did not (Xiang & Yuan, 2021). Furthermore, the beneficial effect lasted for one week and until month after the activity was completed (Jans-Beken et al., 2020). However, participants of negative emotion preferred to create online gratitude journals over letters of gratitude because offline letters of appreciation were thought to be more challenging to finish (Kaufmann et al., 2019).

Efforts can be made to reduce negative emotions in victims of sexual abuse by regulating the emotions that may impact negative emotional symptoms using Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) (Chang et al., 2018). However, TF-CBT has only been modified to address the problems of adolescents with PTSD symptoms due to sexual abuse, such as the lack of attention, emotional instability and anxiety, but without increasing long-term positive emotions such as gratitude (McGuire et al., 2021). This has implications for resurfacing negative emotions, which can cause anger, hatred, anxiety and fear in victims of sexual assault. Therefore, such victims need independent, consistent, and effective long-term interventions to express their positive feelings verbally, in writing, and behaviorally. In addition, this research connects the concept of gratitude with Islamic religious activities, meaning the research can be long-term impact and independent intervention. The study aims to test a gratitude intervention to reduce negative emotions in victims of sexual abuse.

Method

Research Design

A quasi-experimental pretest/posttest approach with experiment and control groups was employed. This research is a group therapy for victims of sexual abuse. Victims of sexual harassment in Indonesia, such as East Kalimantan, East Java and Yogyakarta, are invited to participate in the Gratitude Intervention of four session. Subsequently, they completed a questioner of gratitude and negative emotions through an online survey platform. The process included a series of five phases: theory, practice, application, evaluation and presentation. A therapist explained the theories of gratitude and connected them with Islamic teachings about the meaning of gratitude with words, thanksgiving with actions, and gratitude with the heart, together with their practice. The aim was for the
participants to apply gratitude in their daily lives. After doing this, they would evaluate their progress and continue displaying gratitude. After finishing the experiment, all the participants re-completed the online gratitude and negative emotion questioner.

Participants

The participants were identified using the snowball method. Such sampling is defined as a non-probability technique in which the samples have characteristics that occur infrequently. It is a sampling technique in which individuals provide references to recruit other participants needed for the research study. In this case, the participants were invited by others who had experienced negative emotions due to sexual abuse. They were selected using a Google Form about natural negative emotions. Those eligible for the study received informed consent and information sheets about the gratitude intervention. If they agreed to participate in the gratitude intervention, they signed an informed consent form and completed two pretest sets of gratitude and negative emotion questioner.

The 104 study participants were 22 males (28.07%) and 82 females (71.93%), all recruited in Indonesia. The study population were teenagers feeling negative emotions a minimum of six months after experiencing sexual abuse. Color coding of blue = experiment and red = control was used for the 104 participants to determine the experimental (N=52) and control groups (N=52). The questionnaire was administered using online Google Forms to 16 - 20-year-old victims diagnosed as having high negative emotion disorders and low gratitude according to the child Trauma Questionnaire-Shot Focus (CTQ-SF) and Gratitude Questioner (GQ-6). Victims in the experimental group received four sessions of gratitude therapy once a week. The sessions were conducted by an experienced psychologist possessing a psychologist certificate who had completed a psychologist in university Indonesia. Participants’ demographic data obtained included age, occupation, education, gender, duration of sexual experience, perpetrator of sexual abuse, and religion.

Ethics Issues

After receiving information about the purpose of the study and program information, indicating that it was voluntary, private and confidential, the sexual abuse victims completed an informed consent form. They were also told that they had the option to withdraw from the research process at any time. The Research Ethics Committee of the Department of Psychology in Indonesia approved the use of human subjects.

Measurement

The Gratitude Questionnaire-Six Item Form trait-like measure (GQ-6) was used to assess gratitude on sexual abuse victims (McCullough et al., 2002). This self-report scale considers general appreciation and gratitude from four perspectives: intensity, density, span and frequency. The respondents were asked to rate their level of agreement with six statements, two of which were reverse-scored; for example, 'I have so much to be thankful for in my life'. They rated their level of agreement on a seven-point scale ranging from "Strongly disagree" to "Strongly agree." The items were added up to generate a total gratitude score, with higher scores indicating greater gratitude, in line with other studies employing this measure (O’Connell & Killeen-Byrt, 2018). Cronbach’s alpha =.82 in previous research (McCullough et al., 2002) indicates that the scale is internally consistent; in this study, Cronbach’s alpha was .93.

Many previous researchers have used this scale to measure the negative emotions of sexual abuse victims in various countries. The Child
Trauma Questionnaire-Short Form (CTQ-SF) scale consists of 25 items and is widely used to evaluate the background of childhood abuse. In a pilot on sexual abuse victims, Cronbach's alpha was .89 for sexual abuse, and the Indonesian version of the CTQ-SF has been shown to have strong reliability and validity among sexual abuse victims. It uses a five-point grading system, with higher scores indicating more severe mistreatment.

**Intervention Procedure**

A total of 104 sexual abuse victims were randomly allocated to the experimental and control groups after signing consent forms. Both groups were requested to complete the SF-CTQ and GQ-6 as a pretest before any therapy. According to Lomas et al.'s (2014) protocol, the treatment group received four sessions of gratitude therapy (60 minutes a week). Initial assessment, rapport-building, free exploration, observation, and discussion were all part of the treatment procedures. The intervention was given to the control group by undertaking activities every day during the intensive therapy given to the experiment group. Finally, a posttest was conducted after the intervention had finished with both the experimental and control groups.

In each session, the sexual abuse victims were part of a method comprising a series of five phases: theory, practice, application, presentation and evaluation with the aspect self-introspection, together with three blessings, positive self-talk, a gratitude letter and a gratitude visit (Emmons & Stern, 2013; Lomas et al., 2014). The therapist then reflected on the sexual abuse victims' feelings (e.g., "Looks like you are worried") and thoughts (e.g., 'You think many people care about your fear'). In addition, behavior (e.g., 'your response to others who care about your problem') encouraged sexual abuse victims (e.g., 'You know how to solve it'). This reflection enabled the participants to release their negative thoughts and increase their positive thinking to find solutions to these thoughts.

Gratitude intervention was scheduled once a week with a maximum time of 90 minutes for each session. In the first session, the participants wrote down the expectations they had of participating in the gratitude training, based on the aspects listed on the information sheet. At the second and third meetings, the participants attended and completed three sessions of gratitude intervention material. In these sessions, they completed the gratitude scale and the negative emotion scale, which were the same as the pretest and posttest scales and conducting interviews about the impact of gratitude interventions. The control group participants were offered access to online materials for the gratitude intervention. The materials for the gratitude intervention were as follows:

**Identifying self** – The self-acknowledgment session began with the showing of the video “The Rich and the Poor.” The participants were then asked to identify what lessons they had taken from the video. The facilitator invited them to identify grateful or ungrateful thoughts in everyday life, then to jointly formulate any thoughts that support gratitude. The ungrateful thoughts were then replaced with thoughts that support gratitude. At the end of the session, together with the facilitator the participants practiced the behavior of gratitude in their daily lives.

**Three Blessings** – This was a technical training session that began with relaxation. The participants sat comfortably, closed their eyes, then listened to the speaker's instructions and followed his orders. They were asked to remember three good things or gifts they had received that day and why these good things may have happened to them. The participants then
opened their eyes and discussed the three good things they had experienced. They were allowed to give their opinions and say why these things that happened to them were worth being grateful for.

**Positive Self-talk** – The participants wrote and spoke about something positive about themselves, their families and their environment.

**Gratitude Letters** – In this session, the participants were provided with a blank sheet of paper on which to write a letter. This is a thank you letter to someone who deserves thanks in the lives of victims of sexual abuse. The letters were freely written, with no need to pay attention to perfect grammar or spelling. After finishing the writing, the participants were given the task of delivering the letter, either online, through social media, or in a face-to-face meeting with those who had been kind to them.

**Gratitude Visits** – In this session, the participants were invited to remember someone who had contributed to their lives and to whom they not had had the opportunity to give thanks, either directly or indirectly. They were asked to remember the kindness or service given by this person and to plan a visit or show of friendship to express gratitude for their kindness.

During the intervention, the control group only received psychoeducation to reduce negative emotions and increase their gratitude, which was conducted every two weeks. In the final session, those in the experimental and control groups completed the posttest, using the same scale as the pretest. Four weeks after the posttest was administered, the participants from both groups were invited to participate in the posttest evaluation. Brief explanation of this theory can be seen in Figure 1.

**Data Analysis**

The research hypothesis is that the gratitude of victims of sexual harassment in the experimental group will have a greater impact on their negative emotions than to the control group. This shows that the higher their level of gratitude, the lower their negative emotions. The study employed three-way ANOVA by three (group: pretest, posttest, follow up) x two (variable: gratitude vs. negative emotion) x two (treatment: experiment vs. control). Both groups' negative emotion and gratitude levels were compared using a The Univariate Approach Analysis of Variance (ANOVA), while SPSS 26 was used to analyze the gathered data.

**Figure 1**  
**Framework and Steps of Gratitude Intervention**
Results

Demographic Information

This study was dominated by women rather than men aged 16 - 18 years. Participants who were victims of sexual harassment were predominantly in East Kalimantan and the lowest were in East Java who were Muslim. The highest education in this study was SMA, the lowest was SMP. Victims of sexual abuse experience sexual abuse predominantly between the ages of 7 - 12 years and are mostly carried out by uncles and neighbors. A complete explanation is in Table 1. Table 1 shows the demographic characteristics of the participants.

Descriptive Statistics

A statistically significant difference was found between the mean negative emotion and gratitude-related subscales in the pretest, posttest and follow-up analysis, at an alpha level of $p < .01$. The total mean scores for pretest, posttest and follow-up, together with subscales scores, can be seen in Table 2. The table shows the total mean score of the reduced negative emotion and increased gratitude after gratitude therapy in the experimental group, but no significant difference was found in these scores in the control group. Three-way ANOVA was used to determine the significance of this discrepancy.

Table 1

Demographic Characteristics of the Participants

<table>
<thead>
<tr>
<th>Demographic Item</th>
<th>Intervention (N=52) (%)</th>
<th>Control (N=52) (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>10 (9.62)</td>
<td>12 (11.54)</td>
</tr>
<tr>
<td>Female</td>
<td>42 (40.38)</td>
<td>40 (38.46)</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 - 18</td>
<td>28 (26.92)</td>
<td>26 (25)</td>
</tr>
<tr>
<td>&gt;18</td>
<td>14 (13.46)</td>
<td>16 (15.38)</td>
</tr>
<tr>
<td>Area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Kalimantan</td>
<td>32 (30.77)</td>
<td>28 (26.92)</td>
</tr>
<tr>
<td>East Java</td>
<td>8 (7.69)</td>
<td>14 (13.46)</td>
</tr>
<tr>
<td>Yogyakarta</td>
<td>12 (11.54)</td>
<td>10 (9.62)</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moslem</td>
<td>52 (50)</td>
<td>52 (50)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Junior high school</td>
<td>14 (13.46)</td>
<td>16 (15.38)</td>
</tr>
<tr>
<td>Senior high school</td>
<td>22 (21.15)</td>
<td>20 (19.23)</td>
</tr>
<tr>
<td>Other</td>
<td>16 (15.38)</td>
<td>16 (15.38)</td>
</tr>
<tr>
<td>Time negative emotions experienced</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;6 months</td>
<td>15 (14.42)</td>
<td>18 (17.31)</td>
</tr>
<tr>
<td>7 - 12 months</td>
<td>21 (20.19)</td>
<td>23 (22.12)</td>
</tr>
<tr>
<td>&gt;12 months</td>
<td>18 (17.31)</td>
<td>11 (10.58)</td>
</tr>
<tr>
<td>Rapist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uncle</td>
<td>3 (2.88)</td>
<td>1 (0.19)</td>
</tr>
<tr>
<td>Teacher</td>
<td>19 (18.27)</td>
<td>19 (18.27)</td>
</tr>
<tr>
<td>Brother-in-law</td>
<td>2 (1.92)</td>
<td>1 (0.19)</td>
</tr>
<tr>
<td>Neighbor</td>
<td>19 (18.27)</td>
<td>11 (10.58)</td>
</tr>
<tr>
<td>Grandfather</td>
<td>1 (0.19)</td>
<td>2 (1.92)</td>
</tr>
<tr>
<td>Other</td>
<td>10 (9.62)</td>
<td>18 (17.31)</td>
</tr>
</tbody>
</table>
ANOVA

The study has carried assessed homogeneity and normality at a level of \( p > .05 \). The hypothesized three-way interaction was significant: \( F_{(3,993)} = 4.71, p < .01, \) and \( \eta^2_p = 0.113 \). To facilitate analysis of the interaction, separate group × variable ANOVAs were interpreted for each gratitude intervention. For the treatment, there were significant main or interaction effects: \( F_{(3,969)} = 5.72, p < .05, \) and \( \eta^2_p = 0.016 \). The group × variable interaction was significant, at \( F_{(3,1570)} = 3.31, p < .01, \) and \( \eta^2_p = 0.094 \). This research found that the experimental group showed significant results for gratitude \( F_{(5,224)} = 3.31, p < .01, \) and \( \eta^2_p = 0.017 \), and for the negative emotion variable: \( F_{(4,36)} = 3.31, p < .05, \) \( \eta^2_p = 0.07 \). As hypothesized, feelings of gratitude for victims of sexual harassment in the experimental group had more influence on their negative emotions when responded to and appreciated by others. This shows that the higher the feeling of gratitude, the decrease the negative emotions of victims of sexual abuse. The results of the experimental and control groups in this study are shown in Figure 2.

Discussion

The study presents the impact of gratitude therapy on reducing the negative emotions and increasing the gratitude of sexual abuse victims. The results demonstrate that the therapy effectively reduced negative emotions, including anxiety, fear, worried and anger, in the victims. The findings are consistent with those of Vernon et al. (2009) that Victims displayed significant gratitude in response to traumas from unpleasant experiences, reporting low levels of negative emotions for months and years after the event. Furthermore, gratitude therapy conducted for at least one week positively impacted happiness, well-being and life satisfaction (Froh et al., 2011; Lomas et al., 2014). This study is supported by the concept of psychology positive and religion (Bosacki et al., 2018; Schaefer et al., 2018), in that religious activity can be used as therapy for increasing gratitude, optimistic hope, and life well-being (Hamka et al., 2020), and positive emotions (Jin et al., 2018).

Table 2
Pretest, Posttest and Follow up

<table>
<thead>
<tr>
<th>Step</th>
<th>Participants</th>
<th>Gratitude</th>
<th>Negative Emotion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pretest</td>
<td>Exp M</td>
<td>30.94</td>
<td>78.90</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>3.38</td>
<td>3.78</td>
</tr>
<tr>
<td></td>
<td>Control M</td>
<td>32.88</td>
<td>73.37</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>5.15</td>
<td>3.42</td>
</tr>
<tr>
<td>Posttest</td>
<td>Exp M</td>
<td>34.15</td>
<td>76.29</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>2.93</td>
<td>3.48</td>
</tr>
<tr>
<td></td>
<td>Control M</td>
<td>31.15</td>
<td>75.68</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>4.48</td>
<td>6.57</td>
</tr>
<tr>
<td>Follow up</td>
<td>Exp M</td>
<td>37.35</td>
<td>71.75</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>2.32</td>
<td>3.25</td>
</tr>
<tr>
<td></td>
<td>Control M</td>
<td>33.23</td>
<td>76.29</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>4.55</td>
<td>3.54</td>
</tr>
</tbody>
</table>
Gratitude increases positive emotions, brings about life satisfaction, improves social relationships, and creates a positive environment. It includes not only things people like, but also things they hate. Being thankful for the things you hate means that individuals can enjoy everything that God has given (Schaefer et al., 2018). Gratitude can bring the human soul and heart closer to peace and help someone face various problems. Gratitude and emotions have a close value relationship. Gratitude can be a way or a tool to strengthen positive emotions and calm down all of one’s negative emotions and behaviors that can lead to mental disorders (Hamka et al., 2020).
This research suggests reflecting gratitude today by praying to God and thinking positively about what happens to victims of sexual abuse. Participants meditate using prayer to increase appreciation which will create peace and tranquility within themselves (West et al., 2017). Meditation or self-reflection enhances the consciousness of human interconnectedness; of how much we have gained from others; and what thanks they should be offered (Froh et al., 2011; Hamka et al., 2020). This weekly gratitude-increase exercise was found to increase the feelings of overall gratitude in the final assessment of the intervention.

Furthermore, the experimental participants were instructed to focus on recent and future problems. The intervention gave the sexual abuse victims time and freedom to complete the gratitude activities without rushing. In other words, the victims digested the meaning of gratitude in building positive thoughts by contemplating the goodness of others and the hope of life. Therefore, they could experience favorable positive emotions in most social interaction situations, even though they had had a bad experience. Furthermore, others must support the victims to increase the positive emotions they strive for (Kim & Bae, 2019; Kwok et al., 2019).

The decrease in the negative emotion levels of the experimental group indicates that gratitude intervention was able to help handle the problems of the sexual abuse victims by building positive emotions. Therefore, the benefits of gratitude are not only linked to a eudemonic life orientation, which has been linked to higher life satisfaction (Smith et al., 2018; Zhang et al., 2020), but also operates as a preventative and protective factor against the formation of negative emotions (Kwok et al., 2019). Therefore, a meaningful life will be accompanied by increased gratitude, which could help sexual abuse victims cope with their worries and anxiety (Wu et al., 2018). However, the effectiveness of gratitude intervention is supported by cultural factors (Wu et al., 2018) such as parental support and social behavior (Yu et al., 2020), as well as social support factors (Kwok et al., 2019). West et al. (2017) showed that the participants of sexual abuse victims were motivated and had a good understanding of life through self-introspection, positive thinking, and appreciation of the goodness of others.

This result is supported by Kwok et al. (2019), who propose three possible causes of gratitude factors in relation to sexual abuse. Gratitude can generate positive emotions and experiences; help one pay attention to and maintain positive life elements; and strengthen satisfying interpersonal relationships. Second, grateful people seek personal growth and meaning in their lives. Finally, gratitude can help self-control. The concept of gratitude focuses on understanding the mechanism and benefits of gratitude in reducing negative emotions.

Therefore, gratitude interventions promise to reduce negative emotions in sexual abuse victims. The concept must be supported by material on such intervention, the environment, interaction social, emotion conditions, participants' motivation who will take part in the gratitude intervention training. If gratitude intervention is conducted without internal and external support it will not be effective. Future researchers could design gratitude intervention programs or different strategies to serve participants. For example, for physical and sexual abuse victims, developing a gratitude intervention program or exercise would be effective for individuals or groups in their fight against negative emotions. The study results confirm the effectiveness of gratitude intervention on the negative feelings of sexual abuse victims and indicate a better direction for related studies in the field.
The study has limitations. First, it only focuses on the emotions, but not on the physical or psychological sexual abuse victims. Future researchers could possibly develop such gratitude intervention and not focus on negative emotions, but more on the physical repercussions on sexual abuse victims. Second, the participants in this study were all Muslims, so researchers could develop gratitude intervention focusing also on Christians, Hindus and Buddhists.

Conclusion

The study has demonstrated the effects of gratitude therapy on sexual abuse victims who had been diagnosed with negative emotions. It found that gratitude therapy can effectively influence negative emotions in such victims. Negative emotions, as one of the impacts of long-term disorders related to sexual abuse, should be urgently reduced to prevent other psychological disorders in adulthood. Because victims of sexual abuse cannot verbally articulate their emotions and thoughts, gratitude therapy as part of a positive psychological approach can be an effective intervention. Individuals can express their internal feelings during gratitude therapy sessions and better understand their challenges, allowing them to cope better. Although our findings suggest that gratitude therapy is beneficial, more research incorporating comorbidity and medication is needed to fully understand the mechanism of gratitude therapy in the reduction of harmful emotions.

Author Contribution Statement

Hamka Hamka: Conceptualization; Data Curation; Formal Analysis; Investigation; Methodology; Writing Original Draft. Mein-Woei Suen: Conceptualization; Data Curation; Formal Analysis; Investigation; Methodology; Writing Original Draft. Nisa Rachmah Nur Anganthi: Conceptualization; Data Curation; Formal Analysis; Investigation; Methodology; Writing Original Draft. Aniq Hudiyah Bil Haq: Conceptualization; Funding Acquisition; Project Administration; Validation; Visualization, Review and Editing. Bayu Prasetyo: Conceptualization; Funding Acquisition; Project Administration; Validation; Visualization, Review and Editing.

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The effectiveness of gratitude intervention in reducing negative emotions.


