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INTEGRATING ISLAMIC GUIDANCE AND COUNSELING TO ADDRESS DEVIANT BEHAVIOR IN CHILD VICTIMS OF FAMILY VIOLENCE

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Abstract

Child abuse in Indonesia produces long-term physical, psychological, and social consequences that may manifest in deviant and aggressive behavior. Although culturally appropriate spiritual care integrated with evidence-based psychotherapy has potential to support recovery, qualitative evidence on such integrated approaches remains limited. This phenomenological study, conducted in Palangka Raya from December 2025 to February 2026, explored how Islamic Counseling Guidance combined with Cognitive Behavioral Therapy (CBT) addressed deviant behavior in a 17-year-old male victim of family violence and identified factors that facilitated or hindered behavioral change. Data were collected through in-depth semi-structured interviews with the subject, caregivers, and counselors, as well as participant and non-participant observations of counseling sessions and daily interactions. Data were analyzed thematically using a phenomenological approach. The intervention integrated spiritual practices and values with CBT techniques, including cognitive restructuring, emotion regulation skills, and behavioral training. During the intervention, the subject demonstrated improved emotion regulation, reduced frequency and intensity of aggressive behavior, clearer emotional expression, and

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better family communication. Spiritual engagement increased moderately and served as an internal motivator supporting cognitive and behavioral change. Supporting factors included openness, intrinsic motivation, and access to spiritual support, whereas barriers included dysfunctional family dynamics, normalization of violence, economic stress, and the influence of pro-aggressive peers. Temporary relocation to independent living facilities facilitated stabilization. The study concludes that integrated Islamic Counseling Guidance and CBT is feasible and acceptable in the local context, with potential to reduce deviant behavior and strengthen psychosocial and spiritual resources among victims of family violence. However, the sustainability of change remains constrained by family and environmental factors, highlighting the need for multi-level interventions and further empirical research.

Keywords: Child Abuse; Cognitive Behavioral Therapy; Deviant Behavior; Islamic Counseling Guidance; Spiritual Support

INTRODUCTION

Violence against children is a social problem that remains a serious concern in Indonesia. This phenomenon occurs in various forms, including physical, emotional, sexual, and neglect, all of which can negatively impact a child's life. Numerous cases indicate that child victims of violence experience developmental challenges, both physically, psychologically, and socially. Therefore, addressing child victims of violence cannot be done simply but requires a comprehensive and sustainable approach (Yanti & Agustina, 2022). The psychological impacts of violence are often profound and long-term. Children can experience emotional disturbances such as anxiety, excessive fear, low self-esteem, and difficulty trusting others. In many cases, experiences of violence can even form negative behavioral patterns that persist into adolescence and adulthood. It demonstrates that violence against children is not merely a temporary problem but has the potential to create a cycle of ongoing psychological problems if not addressed appropriately (Ariani & Asih, 2022).

Given the complexity of the impacts, appropriate treatment is necessary, one of which is through counseling services. Counseling plays a crucial role in helping child victims of violence express pent-up feelings, understand their traumatic experiences, and develop more adaptive coping strategies. Through appropriate counseling, it is hoped that children

can gradually reduce their psychological burden and begin to rebuild their sense of security (Nastiti & Hanif, 2024).

Various counseling approaches can be used to treat trauma in children, including play therapy, cognitive-behavioral therapy, and family-based approaches. Play therapy, for example, is effective for children because it allows them to express their emotions through enjoyable activities indirectly. Meanwhile, cognitive-behavioral therapy helps children transform negative thought patterns that arise from traumatic experiences into more positive and realistic ones. A family-based approach is also important because the family environment plays a significant role in supporting a child's recovery process (Kpeno et al., 2024). In addition to psychological approaches, holistic approaches, such as integrating spiritual aspects, also play an equally important role. In the Indonesian context, with its strong religious background, Islamic Guidance and Counseling can be a relevant alternative. This approach not only helps children cope with emotional trauma but also provides inner peace through faith values, thus making the recovery process more comprehensive (Nastiti & Hanif, 2024).

This approach can be implemented through simple acts of worship such as prayer, dhikr, and listening to verses from the Quran, which have a calming effect and help reduce anxiety in children. Furthermore, instilling the values of patience, trust in God, and self-acceptance are also important parts of the gradual trauma recovery process (Somaliagustina & Sari, 2018).

Previous research has shown that Islamic guidance and counseling play a crucial role in addressing deviant behavior in child victims of violence. Laili (2010) found that the Islamic guidance and counseling method at Rekso Dyah Utami Yogyakarta consists of three stages (analysis, direct/indirect intervention, and follow-up) covering the meaning of family, getting closer to Allah SWT, and self-control, which are effective in assisting child victims of domestic violence. Syamsidar and Walidah (2020) reported that Islamic guidance and counseling services at the Gowa Regency Child Protection and Rehabilitation Center (P2TP2A) are crucial for the mental health and trauma recovery of child victims of violence, with an Islamic approach that incorporates religious values in the counseling process. Nurhayani et al. (2023) demonstrated that the efforts of guidance and counseling teachers to reduce aggressive behavior in child victims of domestic violence through religious-based counseling successfully reduced aggressive behavior and increased children's self-confidence.

Munasti et al. (2019) described that the implementation of counseling services at P2TP2A uses individual, family, Islamic, advocacy, and rehabilitation approaches, although their implementation needs to be more structured for optimal results. Hanifah et al. (2023) demonstrated that individual counseling services effectively develop assertiveness in child victims of domestic violence, restoring self-confidence, respect, and a sense of comfort. Siswanto (2024) highlighted that social justice-based Islamic counseling focuses on trauma recovery, strengthening self-esteem, understanding victims' rights in Islam, and legal-social advocacy, emphasizing that Islam prohibits violence and demands justice. These six studies consistently affirm that holistic Islamic counseling and guidance strategies—combining psychological approaches, Quranic and Hadith values, and advocacy—are effective in addressing deviant behavior in child victims of violence.

From the explanation above, Islamic counseling plays a crucial role as a guide, not only providing emotional support but also guiding children to find positive meaning in their experiences. With an empathetic approach and Islamic values, children are expected to develop resilience and achieve a balance between emotional and spiritual well-being. From this perspective, it is crucial to conduct and share this research with the public.

METHODS

This research uses a qualitative approach with a phenomenological case study. The phenomenological approach was chosen to understand and reconstruct the meaning of the lived experiences of the participants—child victims of violence who exhibit deviant behavior—in their real-life context. Case studies allow for in-depth focus on individual or limited group phenomena, resulting in rich contextual understanding (Kusumastuti & Khoiron, 2021; Safrudin et al., 2023). This research was conducted in one area of Palangka Raya from December 2025 to February 2026. The location was selected based on the existence of mentoring programs/services that handle child victims of violence and the researcher's access to conduct observations and in-depth interviews.

The study participants consisted of child victims of violence who exhibited deviant behavior. For perspective triangulation, teachers/parents/guardians, as well as Islamic Guidance and Counseling (BK-Islam) counselors involved in case handling, could be added. Participant selection was conducted by purposive sampling based on the following inclusion criteria: identified as victims of violence according to agency or professional reports;

exhibiting signs of deviant behavior confirmed by professional personnel or initial observation; and willing and able to provide information, or obtain consent from guardians for underage participants (Kusumastuti & Khoiron, 2021; Sugiyono, 2017).

Data were collected through several techniques to provide a comprehensive picture. First, semi-structured in-depth interviews were conducted with children (as appropriate), guardians, and Islamic counselors to explore experiences, perceptions, emotional responses, and coping strategies. Interview guides were developed based on the literature review and research objectives. Second, participant and non-participant observations were conducted to record children's behavior during counseling sessions, social interactions in the service environment, and relevant daily activities. Observation findings were recorded in field notes (Cresswell, 2012).

Data analysis was conducted following thematic analysis procedures adapted for phenomenological studies. All interviews were transcribed verbatim and aligned with observation notes to ensure completeness. The researcher read the transcripts repeatedly to obtain a comprehensive overview before conducting initial coding (open coding) to identify units of meaning (Rosidah et al., 2023). The resulting codes were then grouped into themes and subthemes (axial coding) that reflected the essence of the participants' experiences. Data reduction was then carried out to formulate phenomenological descriptions and thematic interpretations that explain the Islamic Guidance and Counseling Center's strategies in addressing deviant behavior. Findings are presented through rich narratives, illustrative quotations, and thematic tables and diagrams to strengthen clarity and interconnectedness among themes.

RESULTS

Islamic Guidance and Counseling Process for Deviant Behavior in Child Victims of Violence

The research subject was a 17-year-old male studying at a vocational high school (SMK). His family background changed significantly after losing his biological mother at the age of 11. Afterward, the subject lived with his father and older brother. In the early post-grief stage, the family was relatively stable. Still, family dynamics changed when the father remarried, triggering a shift in roles and attention within the household that impacted the subject's emotional well-being.

The presence of a stepmother was a triggering factor in the relationship between the subject and his father, resulting in decreased family harmony. The subject reported reduced attention and affection from his father, leading to feelings of disappointment, discomfort, and alienation. These changes indicate unmet emotional needs following the bereavement and family restructuring, which increases the risk of attachment and self-esteem problems in adolescents.

The conflict not only occurred between the subject and his father, but also extended to his relationship with his older brother, making family interactions generally less supportive. Increased intrafamilial friction created an unsafe and unstable home environment, making the subject more vulnerable to chronic stress, social isolation, and negative communication patterns that reinforced tensions rather than resolved them. The psychological impact manifested itself in changes in the subject's behavior: increased negative emotions (irritability), a tendency to engage in fights, and difficulty controlling impulses (Krylov & Zabrodina, n.d.). These behaviors can be seen as maladaptive coping mechanisms for expressing frustration and striving for recognition or control in situations where they feel powerless. Without intervention, these aggressive patterns risk developing into long-term problems, including conduct disorder or legal and educational problems.

In addition, the subject experienced physical violence (hitting, slapping) and verbal violence (shouting, insults, harsh words) from her father and older brother. These violent experiences exacerbated feelings of insecurity and disrespect, and eroded the sense of comfort at home—a place that should be a source of protection. Exposure to intra-family violence contributed to complex trauma that affected the adolescent's emotional regulation, interpersonal trust, and moral development. The conflict culminated when economic problems triggered a serious dispute that led to the subject being evicted from their home. This eviction caused deep emotional wounds, worsened her psychological condition, and gave rise to feelings of rejection and loss of a haven. Economic pressure, as a triggering factor for conflict, added a dimension of external stress that exacerbated internal family tensions and reduced the family's collective coping capacity.

Pressure from the school environment added to the subject's burden; he expressed a desire to drop out of school due to feeling unable to cope with the accumulated problems. It indicates a risk of declining academic performance, dropping out, and diminished economic opportunities. This situation demonstrates the urgent need for comprehensive

support—both Islamic Guidance and Counseling and psychosocial support—to stabilize emotions, restore learning motivation, and prevent a long-term negative trajectory (Imamah, 2025).

The Islamic counseling interventions implemented focus on a spiritual and emotional approach: religious advice, motivation, and strengthening Islamic values (patience, self-control, and sincerity). Counselors encourage increased closeness to Allah SWT through worship, reading the Qur'an, and prayer to foster inner peace. Techniques used include individual counseling through attending, empathy, reflection on feelings, and *mau'izah hasanah (*good discourses). Attending fosters a sense of being heard, empathy, and reflection help the subject name and process emotions, while Islamic counseling provides a spiritual framework that supports resilience. These interventions should be combined with referrals to professional psychological services when needed, as well as family programs and mediation to improve communication and resolve structural conflicts.

Cognitive Behavioral Therapy (CBT) Approach as a Solution

The approach used in this study was Cognitive Behavioral Therapy (CBT). This approach was applied to help subjects identify, evaluate, and change negative thought patterns that influence aggressive behavior. In the initial stage, the therapist guided subjects to recognize automatic cognitive patterns that trigger excessive emotional reactions, so that intervention could be directed at specific and measurable cognitive reconstruction.

After identification, an evaluation process is conducted to assess the accuracy and usefulness of these beliefs. Subjects are encouraged to question the evidence supporting irrational thoughts and explore alternative interpretations of the situation. This technique helps reduce cognitive distortions such as black-and-white thinking, overgeneralization, and personalization, which often underlie aggressive reactions.

The next step is to replace irrational thoughts with more rational and adaptive ones. The therapist provides practical exercises in the form of more balanced internal dialogue and alternative behavioral scenarios to try in real-life situations. The application of these skills is encouraged through structured homework or assignments so that cognitive changes can be tested and reinforced in the context of everyday life. In addition to focusing on cognition, the intervention also trains self-control as a crucial component in managing aggression. Subjects are trained in emotion regulation techniques such as guided relaxation, breathing

exercises, and grounding techniques to reduce affective intensity when conflict triggers arise. These skills are combined with concrete behavioral strategies, such as delaying responses, using time-outs, and communicating assertively (Lieneman & McNeil, 2023).

In the social realm, CBT is aimed at improving the subject's ability to respond to conflict more constructively. Role-playing exercises and behavioral modeling are used to develop communication skills, negotiation skills, and the expression of feelings without blaming the other party. This intervention aims to improve interpersonal interactions, thereby significantly reducing domestic conflict.

The results of the study indicate that Islamic guidance and counseling strategies combined with CBT had a positive impact on the subjects' behavioral development. Gradually, the subjects began to be able to control their emotions, reduce aggressive behavior, and express their feelings more openly. These improvements were monitored both through the subjects' subjective reports and through observations by their families and therapists. Relational improvements were also noted—the subjects' relationships with their father and older brother showed improved communication quality and a reduction in the frequency of conflict (Tucker & Finkelhor, 2015). Although the subjects initially chose to live separately by renting a boarding house to create a more stable environment, this decision was seen as an adaptive strategy that supported the emotional recovery process and encouraged functional autonomy.

Changes occurred not only in psychological and behavioral aspects, but also gradually in spiritual aspects. Previously, subjects rarely performed prayers, but after mentoring, they began to make an effort to perform their prayers, although not yet regularly. Through Islamic guidance and counseling, values such as patience, self-control, and closeness to God were introduced as sources of internal motivation that reinforced behavioral changes, so that spiritual development went hand in hand with emotional and social stability.

DISCUSSION

Handling Islamic Guidance and Counseling (*Bimbingan Konseling Islam*/BKI) as an Approach

Based on the research results, the subjects exhibited various forms of deviant behavior, such as swearing, engaging in physical violence, and normalizing aggressive behavior, and even feeling proud when winning fights. Furthermore, the subjects had been

involved in brawls, illegal racing, theft, and were active smokers. These behaviors indicate a deviation from social norms and are categorized as social pathology because they are detrimental to themselves and their environment (Kader, 2019). These actions not only violate formal and informal societal rules but also reflect a pattern of maladaptive adaptation to recurring life stressors.

Theoretically, deviant behavior is an action that does not conform to prevailing norms and values, which in this case is influenced by disharmonious family conditions and the subject's experiences of violence (Soekanto et al., 2013). Family contextual factors—such as lack of parental supervision, poor communication, and the internalization of violent values—strengthen deviant tendencies. These conditions facilitate the formation of subcultural norms that justify the use of violence as a solution to conflict, thus forming a social identity that tends toward antisocial behavior.

From a social learning theory perspective, deviant behavior is formed through a learning process from the environment, particularly from experiences of physical and verbal violence. Subjects tend to imitate and internalize these behaviors as perceived normal responses to conflict, thus reinforcing aggressive behavior patterns (McLeod, 2025). Reinforcement, both direct (e.g., receiving recognition from a group) and indirect (e.g., seeing a respected role model act aggressively), plays a role in maintaining these behaviors. At the same time, weak or inconsistent social sanctions fail to break the cycle.

The psychological impacts that arise include emotional instability, such as irritability, frustration, and difficulty controlling oneself. Furthermore, subjects also experience feelings of insecurity, low self-esteem, and loss of trust in their surroundings (Huraerah, 2020). These psychological conditions can progress to chronic mood or anxiety disorders and contribute to maladaptive coping patterns such as substance use (smoking) and involvement in criminal behavior, which further exacerbate social stigma and isolation.

In its treatment, Islamic guidance and counseling (BKI) is used as an approach that integrates spiritual and psychological aspects. Subjects are guided to understand and practice Islamic values, such as patience, sincerity, and self-control, as a foundation for improving behavior (Musnamar, 2019). This approach also emphasizes moral recovery and rebuilding a sense of social responsibility through values education, spiritual remediation, and building positive relationships with Islamic figures or mentors who can model pro-social behavior.

The techniques used include individual counseling, attending, empathy, emotional reflection, and Islamic advice (*mau'izah hasanah*) to build a warm and open counseling relationship (Khasanah et al., 2025). Empathetic interventions aim to create a sense of security so that subjects can explore traumatic experiences without fear of punishment, enabling cognitive restructuring. Furthermore, family involvement in the counseling process is recommended to improve communication patterns and establish consistent boundaries and consequences, so that the home environment becomes a supportive vehicle for change.

Additionally, a Cognitive Behavioral Therapy (CBT) approach is applied to help subjects identify and transform negative thought patterns into more rational ones, as well as to cultivate emotional control and more adaptive responses (Bowers, 2013). Relevant CBT techniques include emotion recognition training, cognitive restructuring of maladaptive beliefs (e.g., "fighting is the way to be respected"), and the practice of problem-solving skills and relaxation techniques to reduce emotional reactivity. Combining elements of CBT with IBC creates a dual therapeutic framework that simultaneously targets cognitive, behavioral, and spiritual aspects.

Practically, recommended interventions include short-term programs for emotional stabilization and risk reduction (e.g., anger management, crisis counseling), as well as long-term programs for social rehabilitation and relapse prevention (e.g., group therapy, family engagement, social and vocational skills training). Regular monitoring and evaluation of outcomes (reduced violence incidents, increased emotional control, improved family relationships) are necessary to assess the effectiveness of the interventions (WHO, 2013). Conceptually, the integration of modern psychotherapeutic approaches with the principles of BKI offers a comprehensive strategy that respects the subject's cultural-religious context while meeting evidence-based clinical practice standards.

Supporting Factors

Supporting factors in the counseling process include the subject's openness, motivation to change, and spiritual support that helps calm the inner state (Amin, 2020). Openness facilitates the exploration of traumatic experiences and maladaptive beliefs, allowing for more targeted interventions. Intrinsic motivation to change increases adherence to therapeutic tasks (e.g., anger management exercises, CBT homework), thus increasing the opportunity for acquiring new skills and changing behavior.

Spiritual support serves as a source of emotional and moral reinforcement that facilitates the internalization of pro-social values. In the context of Islamic Guidance and Counseling (BKI), the practice of worship, prayer, and Islamic advice can provide meaning, hope, and a moral structure that supports self-control. The combination of spiritual support with psychological techniques allows subjects to integrate religious motivation with concrete coping strategies, so that change is not only behavioral but also rooted in identity and values (Thema & Wong, 2013).

Meanwhile, inhibiting factors stem from a dysfunctional family background and a social environment that is less supportive of behavioral change. Family conflict, the normalization of violence, and the absence of consistent supervisory figures hinder the transfer of new skills into everyday life (Southern & Sullivan, 2021). Peer environments that still praise aggression or provide opportunities for deviant behavior (e.g., brawls, street racing) create regressive pressures that increase the risk of relapse. Nevertheless, the BKI strategy combined with the CBT approach has shown considerable effectiveness, marked by increased emotional control, reduced aggressive behavior, and improved family relationships (Saraswati & Hildayani, 2018). The synergy of these two approaches allows for a holistic intervention: CBT targets cognitive distortions and coping skills, while BKI instills a foundation of values and spiritual support. The results of this combination are seen in improvements in psychosocial indicators and a reduction in the frequency of risky behaviors.

To enhance the sustainability of change, multi-level interventions are recommended: strengthening family engagement through family therapy sessions and communication training, preventive programs for peer groups (e.g., support groups and alternative activities), and long-term follow-up with a relapse prevention module that combines religious elements and CBT techniques. Regular evaluation using quantitative (aggression scales, emotional control) and qualitative (family reports, self-reports) indicators is needed to assess effectiveness and adapt interventions to contextual dynamics.

CONCLUSION

This phenomenological case study demonstrates that integrating Islamic Guidance and Counseling (*Bimbingan Konseling Islam*/BKI) with Cognitive Behavioral Therapy (CBT) can effectively reduce deviant and aggressive behaviors in a child victim of family violence. The combined intervention addressed cognitive distortions, improved emotion regulation,

and strengthened spiritual resources—producing measurable improvements in self-control, reduced frequency of aggressive incidents, and better family communication. Key facilitating factors were the subject's openness and intrinsic motivation and the provision of spiritual support; major barriers included dysfunctional family dynamics, normalization of violence, and pro-aggression peer influences. For sustainable outcomes, the study supports multi-level interventions—family involvement, peer-group prevention, referrals to professional mental health services when needed, and systematic follow-up with relapse-prevention modules that blend CBT techniques and Islamic values. Future research should evaluate this integrated model with larger, diverse samples and controlled designs to establish generalizability and quantify effect sizes.

REFERENCES

Ariani, N. W. T., & Asih, K. S. (2022). Dampak Kekerasan pada Anak. *Jurnal Psikologi Mandala, 6*(1), 69–78. https://doi.org/10.36002/jpm.v6i1.1833

Bowers, E. (2013). *The everything guide to cognitive behavioral therapy: Learn positive and mindful techniques to change negative behaviors*. Adams Media.

Bryant-Davis, T., & Wong, E. C. (2013). Faith to move mountains: Religious coping, spirituality, and interpersonal trauma recovery. *American Psychologist, 68*(8), 675–684. https://doi.org/10.1037/a0034380

Creswell, J. W. (2012). *Research design: Pendekatan kualitatif, kuantitatif, dan mixed*. Pustaka Pelajar.

Hanifah, N., Stefani, S. A., Budy, M. H. S., & Adnan, L. H. (2023). Implementasi Layanan Konseling dalam Mengatasi Kekerasan terhadap Anak: Studi Literatur. *Jurnal Sarjana Ilmu Pendidikan, 3*(2), 63–72. https://doi.org/10.26877/jsip.v3i2.21507

Huraerah, A. (2020). *Kekerasan terhadap Anak*. Nuansa Cendekia.

Imamah, E. S. (2025). Islamic education in preserving mental health based on the Qur'an in the contemporary era. *Al-Ishlah: Jurnal Pendidikan, 17*(4), 5885–5904. https://doi.org/10.35445/alishlah.v17i4.8390

Khasanah, M., Sucipto, A., Hufron, A., & Jannah, R. (2025). Revitalization of students' learning motivation through the Mau'idzah Hasanah counseling approach. *JOURNAL SEKAWAN: Science, Education, and Knowledge Application in Worldwide Academic Networks, 1*(1). https://sekawanpress.com/journals/index.php/sekawan/article/view/3

Kpeno, A., Sahu, P. K., & Bagson, E. (2024). The role of family in trauma recovery: A review of the literature. *Anatolian Journal of Mental Health, 1*(1), 10–28. https://doi.org/10.5281/zenodo.11351299

Krylov, V. I., & Zabrodina, A. S. (2025). The affect of anger as a psychological phenomenon and a psychopathological symptom: A literature review. *Neurology Bulletin, 57*(1), 64–78. https://doi.org/10.17816/nb640882

Kusumastuti, A., & Khoiron, A. M. (2019). *Metode Penelitian Kualitatif*. Lembaga Pendidikan Sukarno Pressindo.

Laili, A. (2010). *Metode Bimbingan Konseling Islam bagi Anak Korban Kekerasan dalam Rumah Tangga di Rekso Dyah Utami Yogyakarta* [Skripsi, UIN Sunan Kalijaga Yogyakarta]. https://digilib.uin-suka.ac.id/id/eprint/5071/

Lieneman, C. C., & McNeil, C. B. (2023). *Time-out in child behavior management*. Hogrefe Publishing. https://doi.org/10.1027/00509-000

McLeod, S. (2025, October 16). *Albert Bandura's social learning theory*. Simply Psychology. https://www.simplypsychology.org/bandura.html

Musnamar, T. (2019). *Dasar-Dasar Konseptual Bimbingan dan Konseling Islami*. UII Press.

Nastiti, M. F., & Hanif, M. (2024). Peran Guru Bimbingan Konseling dalam Mendukung Pemulihan Siswa yang Mengalami Trauma Psikologis. *Jurnal Ilmu Pendidikan dan Psikologi (JIPP), 2*(3), 117–121. https://doi.org/10.61116/jipp.v2i3.323

Nurhayani, Wahyu, Antika, R., Saragih, F. A. L., & Putri, M. F. F. (2023). Layanan Konseling Individu dalam Mengembangkan Asertifitas pada Anak Korban KDRT di Desa Karya Jadi Kecamatan Batang Serangan Kabupaten Langkat. *Jurnal Pendidikan Tambusai, 7*(1), 1961–1965. https://doi.org/10.31004/jptam.v7i1.5513

Razali, G., Syamil, A., Hurit, R. U., Asman, A., Lestariningsih, Radjawane, L. E., Bagenda, C., Falasifah, N., Amane, A. P. O., Tingga, C. P., Saloom, G., Sumarni, S., Gultom, N. B., Fadhilatunisa, D., Fakhri, M. M., & Rosidah. (2023). *Metodologi Penelitian Kuantitatif, Kualitatif, dan Kombinasi* (S. Bahri, Ed.). CV Media Sains Indonesia.

Ridwan, & Kader, A. (2019). Patologi Sosial Masyarakat: Studi Kasus di Kecamatan Wera-Ambalawi. *SANGAJI: Jurnal Pemikiran Syariah dan Hukum, 3*(2), 300–322. https://doi.org/10.52266/sangaji.v3i2.486

Safarudin, R., Zulfamanna, Kustati, M., & Sepriyanti, N. (2023). Penelitian Kualitatif. *Innovative: Journal of Social Science Research, 3*(2), 9680–9694. https://j-innovative.org/index.php/Innovative/article/view/1536

Saraswati, H., & Hildayani, R. (2019). Using a cognitive–behavioral approach to reduce aggressive responses in an adolescent with borderline intelligence. In *Proceedings of the 2nd International Conference on Intervention and Applied Psychology (ICIAP 2018)* (pp. 72–86). Atlantis Press. https://doi.org/10.2991/iciap-18.2019.6

Siswanto, S. (2024). Bimbingan dan Konseling Islami untuk Korban Kekerasan dalam Rumah Tangga: Perspektif Keadilan Sosial. *Jurnal Bimbingan dan Konseling Islam, 1*(2). https://oj.mjukn.org/index.php/bki/article/view/3998

Soekanto, S., & Sulistyowati, B. (2013). *Sosiologi Suatu Pengantar*. Rajawali Press.

Somaliagustina, D., & Sari, D. C. (2018). Kekerasan Seksual pada Anak dalam Perspektif Hak Asasi Manusia. *Psychopolytan: Jurnal Psikologi, 1*(2), 122–131. https://jurnal.univrab.ac.id/index.php/psi/article/view/510

Southern, S., & Sullivan, R. D. (2021). Family violence in context: An intergenerational systemic model. *The Family Journal, 29*(3), 260–291. https://doi.org/10.1177/10664807211006274

Sugiyono. (2017). *Metode Penelitian Kualitatif untuk Penelitian yang Bersifat: Eksploratif, Interaktif, dan Konstruktif*. Alfabeta.

Syamsidar, S., & Walidah, W. (2020). Layanan Bimbingan dan Konseling Islam dalam Pemenuhan Kesehatan Mental bagi Anak Korban Kekerasan di Pusat Pelayanan Terpadu Pemberdayaan Perempuan dan Anak (P2TP2A) Kabupaten Gowa. *Al-Irsyad Al-Nafs: Jurnal Bimbingan dan Penyuluhan Islam, 7*(1). https://journal.uin-alauddin.ac.id/index.php/Al-Irsyad_Al-Nafs/article/view/13917

Tucker, C. J., & Finkelhor, D. (2017). The state of interventions for sibling conflict and aggression: A systematic review. *Trauma, Violence, & Abuse, 18*(4), 396–406. https://doi.org/10.1177/1524838015622438

World Health Organization. (2010, January 12). *Violence prevention: The evidence.* https://www.who.int/publications/i/item/violence-prevention-the-evidence

Yanti, P. E., & Agustina, L. F. (2022). Gambaran Psikososial Anak Korban Kekerasan dalam Rumah Tangga. *Ash-Shudur: Jurnal Bimbingan dan Konseling Islam, 2*(1), 43–57. https://journal.uinsuna.ac.id/index.php/Ash-Shudur/article/view/1390