

## ORIGINAL ARTICLE

# Self-Harm and Suicide in the Context of Sexual Trauma: A Bibliometric Review

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## ABSTRACT

**Introduction:** Sexual trauma has been consistently identified as a profound risk factor for both self-harm and suicidal behaviours. While individual studies have explored these associations extensively, there remains a lack of systematic mapping of the academic landscape surrounding this intersection. Fragmented research efforts across disciplines have hindered the development of cohesive knowledge frameworks and limited the translation of findings into clinical and policy practice. **Aim:** This study aims to conduct a comprehensive bibliometric analysis to map the global scientific output on self-harm and suicide in the context of sexual trauma. The objective is to identify key contributors, thematic trends, research networks, and knowledge gaps that define and shape this field. **Methods:** A total of 207 documents published between 1981 and 2025 were retrieved from the Scopus database using a targeted search strategy focused on article titles. Data were cleaned, harmonised, and analysed using biblioMagika® to assess publication trends, citation metrics, co-authorship patterns, and keyword co-occurrence. **Results:** Findings indicate a growing body of literature over the past two decades, with a concentration of research in high-income countries. A limited number of prolific authors and institutions dominate the field, with recurrent themes centring on childhood sexual abuse, non-suicidal self-injury (NSSI), and suicidal ideation. However, significant gaps remain in research from low- and middle-income regions and in the integration of intersectional and longitudinal frameworks. **Conclusion:** This bibliometric review highlights the urgent need for more geographically diverse, interdisciplinary, and theoretically robust investigations into the link between sexual trauma and self-harming behaviours. It highlights underexplored domains and provides a roadmap for future research, offering valuable insights for clinicians, researchers, and policymakers aiming to address the complex outcomes of sexual trauma.

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## INTRODUCTION

Sexual trauma continues to pose a serious threat to both public health systems and the criminal justice sector, demanding multifaceted responses from policy-makers,

clinicians, and legal authorities (1). Notably, its incidence escalates within settings of sociopolitical unrest, where systemic instability tends to erode legal protections and heighten vulnerabilities (2). Within such vulnerable environments, acts of sexual aggression (ranging from coerced sexual initiation to rape) are not only common but also carry enduring psychological and physiological consequences, including compromised mental health and maladaptive stress regulation mechanisms (3). Evidence further suggests that individuals exposed to profound life stressors, such as sexual violence,

frequently present with symptoms consistent with post-traumatic stress, indicating a disruption in psychological well-being (4). Importantly, the presence of PTSD symptomatology following sexual assault has been empirically associated with elevated risks of suicidal ideation, highlighting the need for early psychological intervention (5).

Traumatic experiences often precipitate profound psychological and somatic distress, reflecting the complex relationship between external events and internal coping mechanisms (2). Cognitive responses following trauma, particularly those involving shame, fear, and self-blame, have consistently been associated with detrimental psychological outcomes, reinforcing the view that such cognitions may exacerbate the negative sequelae of trauma exposure (3). For instance, male survivors of childhood sexual abuse (CSA) commonly encounter crises related to their sexuality and gender identity. These individuals may internalise self-blame for their perceived failure to prevent the abuse, a response frequently shaped by dominant sociocultural narratives that equate masculinity with strength and the ability to physically resist assault (4). Despite the well-established links between sexual victimisation and a wide spectrum of adverse physical and mental health outcomes, it is important to acknowledge the heterogeneity of survivor trajectories. A considerable number of individuals demonstrate resilience and ultimately lead functional, fulfilling lives without significant long-term impairments (1).

Despite a substantial and growing body of research on sexual trauma, self-harm and suicide, there remains a lack of systematic synthesis capturing how these areas interconnect within the academic literature. The interdisciplinary nature of this research (spanning psychology, psychiatry, trauma studies, social work, and gender-based violence) often results in fragmented findings and limited cross-disciplinary integration. This fragmentation hampers the accumulation of coherent knowledge, the translation of research into practice, and the development of comprehensive policy responses. Notably, the absence of bibliometric analyses in this field restricts our understanding of key contributors, thematic patterns, and emerging trends, thereby impeding efforts to coordinate global research, enhance clinical interventions, and guide future inquiry.

To address this gap, the present study applies a bibliometric approach to map the global scholarly output on sexual trauma with a specific focus on self-harm and suicide. It aims to identify leading authors, journals, institutions, and countries shaping the field, as well as the most cited works and influential themes. Specifically, this review addresses the following questions: (1) How has publication volume evolved over time? (2) Who are the most prolific and influential

authors, and what topics do they emphasise? (3) Which journals, institutions, and countries contribute most significantly? (4) What documents receive the highest citations, and what core issues do they address? (5) What are the dominant and emerging keywords within this domain? By answering these questions, this study seeks to illuminate the field's intellectual structure and inform future research, practice, and policy directions.

## MATERIALS AND METHODS

### Search Strategy

This study selects Scopus database to retrieve and map scientific literature on self-harm and suicidal behaviours related to sexual trauma. The Scopus database was selected for its comprehensive, peer-reviewed coverage and suitability for bibliometric studies. We conduct the systematic searching of article titles on May 17, 2025, using the following string: TITLE("suicide" OR "suicidal ideation" OR "suicide attempt" OR "suicidal behavior" OR "self-harm" OR "self injury" OR "self-injurious behavior" OR "non-suicidal self-injury" OR "NSSI" OR "deliberate self-harm") AND ("sexual trauma" OR "sexual abuse" OR "sexual assault" OR "rape" OR "childhood sexual abuse" OR "sexual violence"). We include English-language journal articles and reviews published from 1981 to 2025, with no restrictions on subject area.

### Data Collection

The search yielded a total of 210 documents. These results were screened for relevance based on title review and abstract inspection. A total of 3 records were excluded due to duplication or misalignment with the topic. The final dataset comprised 207 documents, which were exported from Scopus in .csv format for further processing.

### Data Cleaning and Harmonisation

The raw Scopus data were cleaned and refined for analysis. Duplicate entries were removed, and irrelevant documents were excluded through manual inspection. Author names, institutional affiliations, and country information were standardised using OpenRefine, applying clustering and manual editing techniques. Special attention was given to harmonizing institutional variants, such as consolidating "Harvard Medical School" under the umbrella of "Harvard University" to reflect institutional affiliation accurately. Keywords (author and indexed) were also cleaned to address inconsistencies in spelling, abbreviations, and term variants (e.g., "NSSI" vs. "non-suicidal self-injury").

### Tools

Descriptive statistics and visualizations were generated using biblioMagika®, a Microsoft Excel-based tool for bibliometric preprocessing and analysis.

## RESULTS

### Impacts and trends of publications

A total of 207 documents were published from 1981 to 2025, with 187 of them receiving citations. The total citation count reached 6,928, yielding an impressive average of 33.47 citations per paper, 37.05 citations per cited paper, and h-index of 44 and g-index of 76. Notably, the h-core, comprising the most cited documents, alone accounted for 6,755 citations—(over 97% of the total citation count)—indicating a high concentration of impact among a relatively small number of seminal works. The m-index of 0.978 meanwhile reflect a consistent scholarly contribution per year since the earliest indexed publication.

**Table I. Subject Area**

Subject Area	Total Publications	Percentage (%)
Medicine	158	75.24%
Psychology	117	55.71%
Social Sciences	32	15.24%
Neuroscience	17	8.10%
Arts and Humanities	14	6.67%
Nursing	10	4.76%
Environmental Science	2	0.95%
Pharmacology, Toxicology and Pharmaceutics	2	0.95%
Computer Science	1	0.48%
Engineering	1	0.48%
Health Professions	1	0.48%

**Table II: Impacts of Publications**

Most Productive Authors	Author's Name	Current Affiliation	Country	TP	NCP	TC	C/P	C/CP	h	g	m
	Monteith, Lindsey L.	VA Rocky Mountain Mental Illness Research	United States	13	13	319	24.54	24.54	10	13	0.909
	Holliday, Ryan	VA Rocky Mountain Mental Illness Research	United States	8	8	138	17.25	17.25	5	8	0.625
	Blais, Rebecca K.	Utah State University	United States	8	5	93	11.63	18.6	3	8	0.429
	Bahraini, Nazanin H.	Rocky Mountain Mental Illness Research	United States	5	5	187	37.4	37.4	5	5	0.455
	Gilmore, Amanda K.	Medical University of South Carolina	United States	4	4	29	7.25	7.25	3	4	0.375
	Forster, Jeri E.	Rocky Mountain Mental Illness Research	United States	4	4	145	36.25	36.25	4	4	0.364
	Asgeirsdottir, Bryndis Bjork	Reykjavik University	United Kingdom	3	3	166	55.33	55.33	3	3	0.167
	Gudjonsson, Gisli H.	Reykjavik University	United Kingdom	3	3	166	55.33	55.33	3	3	0.167
	Badour, Christal L.	University of Kentucky	United States	3	3	50	16.67	16.67	3	3	0.3
	Tannahill, Hallie	Utah State University	United States	3	1	1	0.33	1	1	1	0.5

CONTINUE

The vast majority of publications were peer-reviewed journal articles (93.81%), with reviews comprising only 6.19%. Table I, Table II and Figure II illustrate the interdisciplinary nature, trend, and impacts of publication in this field.

### Keyword Analysis

Table III presents the top keywords by frequency (number of documents), total citations, normalised citations, and average publication year.

## DISCUSSION

The most active journals include *Suicide and Life-Threatening Behaviour*, *Child Abuse and Neglect*, and *Journal of Interpersonal Violence*, reflecting the interdisciplinary nature of the field across psychiatry, clinical psychology, and public health. High-impact articles were also found in elite journals such as the *American Journal of Psychiatry* and *British Journal of Psychiatry*, despite their lower volume of publications. These platforms serve as amplifiers of evidence-based practice and policy translation. A review of the most highly cited articles revealed that many focus on the longitudinal relationship between childhood sexual abuse and later suicidal or self-harming behaviour. Foundational works such as Molnar et al. (2001), Klonsky & Moyer (2008), and Gladstone et al. (2004) continue to influence theoretical and empirical studies in the field. Recent contributions emphasise mechanisms such as PTSD symptoms, substance use, and revictimization as mediators of this relationship (14, 20, 28). The

**Table II: Impacts of Publications (cont.)**

Most productive institutions	Affiliation	Country	TP	NCP	TC	C/P	C/CP	h	g	m
	University of Michigan, United States	United States	40	40	817	20.43	20.43	17	28	1.417
	University of Colorado , United States	United States	38	38	983	25.87	25.87	23	31	1.353
	University of Texas System, United States	United States	29	29	1041	35.9	35.9	21	29	0.467
	Utah System of Higher Education, United States	United States	29	24	761	26.24	31.71	16	27	1.231
	Yale University, United States	United States	24	24	466	19.42	19.42	8	21	0.444
	Harvard University, United States	United States	20	20	1869	93.45	93.45	18	20	0.72
	Florida State University, United States	United States	15	15	1595	106.3	106.3	6	15	0.316
	Medical University of South Carolina, United States	United States	15	15	107	7.13	7.13	8	10	1
	Brown University, United States	United States	13	12	434	33.38	36.17	9	13	0.3
	University of Rochester , United States	United States	13	10	501	38.54	50.1	10	13	0.435
	U.S. Department of Veterans Affairs, United States	United States	12	10	401	33.42	40.1	7	12	0.7
	Reykjavik University, Iceland	Iceland	10	10	542	54.2	54.2	10	10	0.556
	University of California, United States	United States	10	10	444	44.4	44.4	6	10	0.176
	University of North Carolina, United States	United States	9	6	327	36.33	54.5	5	9	0.217
	Anhui Medical University, China	China	9	9	90	10	10	9	9	1.8
Most active source titles	Title		TP	NCP	TC	C/P	C/CP	h	g	m
	Suicide and Life-Threatening Behavior		17	17	687	40.41	40.41	13	17	0.542
	Child Abuse and Neglect		14	13	379	27.07	29.15	9	14	0.2
	Journal of Interpersonal Violence		10	9	375	37.5	41.67	6	10	0.261
	Psychiatry Research		9	9	258	28.67	28.67	7	9	0.538
	Journal of Affective Disorders		7	6	163	23.29	27.17	5	7	0.455
	Archives of Suicide Research		4	4	53	13.25	13.25	3	4	0.1
	Journal of Traumatic Stress		4	4	130	32.5	32.5	4	4	0.235
	Journal of Forensic Nursing		4	2	7	1.75	3.5	1	2	0.143
	Journal of Child Sexual Abuse		4	4	51	12.75	12.75	4	4	0.133
	American Journal of Psychiatry		3	3	556	185.3	185.3	3	3	0.097

CONTINUE

**Table II: Impacts of Publications (cont.)**

Top 20 highly cited articles	Title	Source Title	Cites	Cites Per Year
	Psychopathology, childhood sexual abuse and other childhood adversities: Relative links to subsequent suicidal behaviour in the US	Psychological Medicine	339	13.56
	Revictimization and Self-Harm in Females Who Experienced Childhood Sexual Abuse: Results from a Prospective Study	Journal of Interpersonal Violence	278	12.09
	Implications of childhood trauma for depressed women: An analysis of pathways from childhood sexual abuse to deliberate self-harm and revictimization	American Journal of Psychiatry	270	12.27
	Childhood physical and sexual abuse and lifetime number of suicide attempts: A persistent and theoretically important relationship	Behaviour Research and Therapy	259	13.63
	Childhood sexual abuse and non-suicidal self-injury: Meta-analysis	British Journal of Psychiatry	253	14.06
	Posttraumatic Stress Symptoms Mediate the Relation Between Childhood Sexual Abuse and Nonsuicidal Self-Injury	Journal of Consulting and Clinical Psychology	190	10.56
	The association of sexual assault and attempted suicide within the community	Archives of General Psychiatry	179	5.97
	Sexual abuse in childhood and deliberate self-harm	American Journal of Psychiatry	164	5.29
	The role of child sexual abuse in the etiology of suicide and non-suicidal self-injury	Acta Psychiatrica Scandinavica	161	10.73
	Military Sexual Trauma and Suicide Mortality	American Journal of Preventive Medicine	155	15.5
	Childhood sexual abuse and suicidal behavior: A meta-analysis	Pediatrics	154	12.83
	Sexual assault history and suicidal behavior in a national sample of women	Suicide and Life-Threatening Behavior	143	5.96
	Suicide attempts, gender, and sexual abuse: Data from the 2000 British psychiatric morbidity survey	American Journal of Psychiatry	122	7.18
	Dating violence, sexual assault, and suicide attempts among urban teenagers	Archives of Pediatrics and Adolescent Medicine	117	6.16
	Lifetime physical and sexual abuse, substance abuse, depression, and suicide attempts among Native American women	Issues in Mental Health Nursing	114	4.96
	Physical and sexual abuse as predictors of substance use and suicide among pregnant teenagers	Journal of Adolescent Health	112	3.29
	Early life sexual abuse is associated with increased suicide attempts: An update meta-analysis	Journal of Psychiatric Research	112	14
	Sexual abuse, alcohol and other drug use, and suicidal behaviors in homeless adolescents	Comprehensive Child and Adolescent Nursing	108	4.32
	Same-sex sexual orientation, childhood sexual abuse, and suicidal behavior in university students in Turkey	Archives of Sexual Behavior	91	4.33
	Correlates of serious suicidal ideation and attempts in female adult sexual assault survivors	Suicide and Life-Threatening Behavior	89	5.24

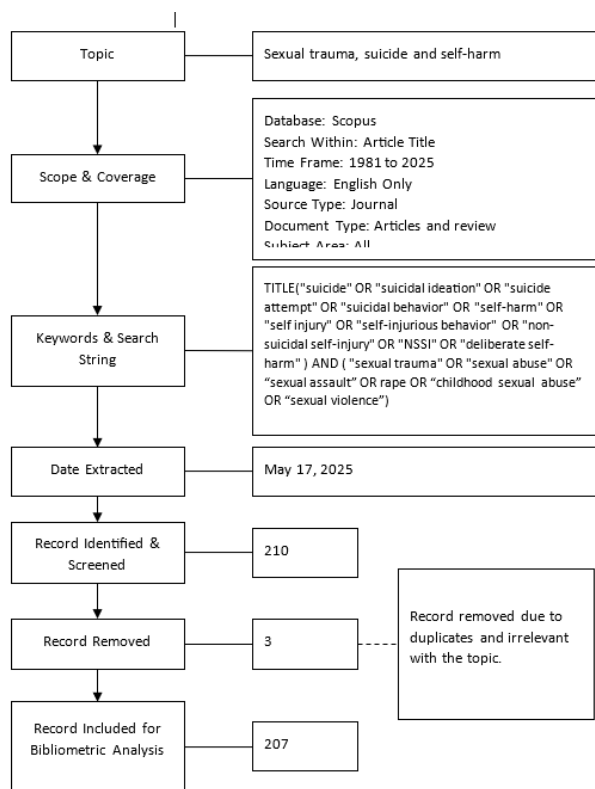


Figure 1. Flow diagram of the search strategy. Source: Punj et al. (2021), Moher et al. (2009)

Table III. Top 20 author keywords

Keywords	Total link strength	Occurrences	Citations	Avg. citations
Suicide	95	44	1289	29.295
Childhood sexual abuse	81	43	1065	24.767
Sexual abuse	87	39	1551	39.769
Suicidal ideation	86	37	693	18.730
Self-harm	59	25	925	37.000
Suicide attempt	70	25	662	26.480
Posttraumatic stress disorder	57	21	417	19.857
Military sexual trauma	52	20	318	15.900
Adolescents	54	19	339	17.842
Suicidal behavior	36	18	402	22.333
Sexual violence	36	17	222	13.059
Veterans	44	17	201	11.824
Non-suicidal self-injury	39	16	223	13.938
Depression	44	16	492	30.750
Sexual assault	39	16	215	13.438
Suicide risk	15	9	70	7.778
Trauma	20	8	241	30.125
Childhood abuse	15	7	402	57.429
Victimization	18	7	367	52.429
Dissociation	21	7	139	19.857

CONTINUE

Table III. Top 20 author keywords (cont.)

Keywords	Total link strength	Occurrences	Citations	Avg. citations
Dissociation	21	7	139	19.857
Mental health	13	6	65	10.833
Risk factors	16	6	160	26.667
Military	16	6	104	17.333
College students	12	5	28	5.600
Impulsivity	17	5	176	35.200

emergence of terms like “military sexual trauma” and “non-suicidal self-injury” indicates a diversification of the field and an increased focus on prevention, resilience, and therapeutic pathways.

This study makes a substantial contribution to understanding the bibliometric structure of research on sexual trauma and suicidality. The analyses of bibliometric indicators, geographic trends, thematic foci, and citation dynamics insightfully illustrate a field that is both expanding in scope and advancing in evidence. However, they also reveal gaps, particularly the underrepresentation of research from low- and middle-income countries, the limited integration transdisciplinary of perspectives, and the scarcity of clinical trials or translational studies. Addressing these limitations requires greater investment in efforts, expertise, collaborations, and commitment to derive a meaningful and novel solutions.

Nonetheless, this study is also limited by a number practical constraints due to the scope of this study. First, it is confined to Scopus-indexed publications, which may exclude relevant works from other databases such as Web of Science or PubMed. Yet, since Scopus database is a widely referenced, comprehensive and secured research data depository, the analysis is representative of the overall research information. Second, the analysis was quantitative and descriptive, focusing on publication trends, authorship, and citation metrics, without assessing the qualitative content or theoretical depth of the studies. While it is not undermining the robust quantitative analysis presented in this study, we do acknowledge investing more resources to conduct the comprehensive qualitative synthesis may prove invaluable in enriching the understanding of this field. Future research could depart from this aspect and expand the scope further by integrating content analysis, examining methodological rigour, or exploring research gaps across cultural and demographic groups.

CONCLUSION

This bibliometric analysis examined global research trends on self-harm and suicide in the context of sexual trauma. The study highlights a significant rise in scholarly output over the past two decades, with dominant contributions from high-income countries,

particularly the United States. Key themes identified include childhood sexual abuse, suicidal ideation, non-suicidal self-injury, and posttraumatic stress disorder. Recent research has increasingly focused on high-risk populations such as veterans and adolescents. The prominence of specific keywords suggests a shift toward trauma-informed and clinically oriented research. This study contributes to the field by mapping its intellectual structure, identifying influential works and gaps, and informing future directions. Findings underscore the need for greater inclusion of underrepresented regions, interdisciplinary collaboration, and longitudinal and intervention-focused studies. While limited to Scopus and English-language sources, this analysis demonstrates the utility of bibliometrics in understanding the development of trauma-related mental health research and guiding future inquiry in this critical area.

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