Career counselling interventions for women survivors of intimate partner violence

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Abstract

Women survivors of intimate partner violence (IPV) often face many challenges that can significantly impact their career development. However, career counsellors may not be fully prepared to support the unique needs of these women. This article will explore major issues faced by women survivors of IPV in their career development and propose counselling interventions that draw from Krumboltz' social learning theory and Social Cognitive Career Theory. A counselling framework that is informed by these factors can help career counsellors empower women survivors of IPV in moving forward and rebuilding their lives.

Key words: career development; intimate partner violence; career theories; counselling interventions

Introduction

Intimate partner violence (IPV) is a serious issue impacting millions of women worldwide (Aizpitarte et al., 2023). Though men also experience IPV, women are significantly more

likely to be victims of IPV than men. Intimate partner violence has been defined as 'any behaviour within an intimate relationship that causes physical, psychological, or sexual harm' (World Health Organization [WHO], 2012, p. 1). Intimate partner violence has many consequences on the lives of women affected, including their career development (Chronister et al., 2004). For instance, IPV can occur at or near workplaces, wherein survivors can be stalked by their ex-partner, forcing them to leave their workplace for safety reasons, and secure new employment (Al-Modallal et al., 2016; Riger et al., 2000). Furthermore, women facing IPV often express challenges at work because of exhaustion, feeling unwell, being injured, increased distressed regarding the IPV (MacGregor et al., 2022). As a result of the aforementioned challenges, women may be more likely to miss work, have difficulty concentrating and have decreased job performance (Al-Modallal et al., 2016; Wathen et al., 2015). For some women, their partners or ex-partners directly interfere with their ability to secure employment or prohibit them from attending work (Al-Modallal et al., 2016; Wathen et al., 2016; Swanberg et al., 2005). In comparison to women who have not experienced IPV, women with a history of IPV reportedly have increased job instability, lower income, and greater financial difficulties (Adams et al., 2013; Crowne et al., 2011). Given that women who experience IPV often face career challenges (OMorris et al., 2009), it is highly likely that career counsellors would need to support this population at some point in time. However, there is a gap in career counselling services available to women survivors of IPV (Chronister et al., 2012).

Based on these concerns, this article will attempt to discuss several issues encountered by women in abusive relationships that might affect their career development process. These issues include low self-esteem, diminished self-efficacy, dependency, social isolation, and psychological distress. It is then followed with a discussion on how career counsellors could integrate some theoretical aspects of Krumboltz's social learning theory (Mitchell & Krumboltz, 1984) and the social cognitive career theory (SCCT; Lent, Brown, and Hackett, 1994, 2000) as interventions to facilitate the career development of women survivors of IPV.

It is important to highlight that women who experience IPV are not a homogenous population; they may come from all races, ethnic groups (Cory & McAndless-Davis, 2008), communities, educational levels (Lundberg-Love & Marmion, 2006) and socioeconomic statuses (Worell & Remer, 2003). Their stories of abuse and personal needs may therefore vary greatly as well. However, given that the tasks of examining and addressing the intersections of these women's identities and their life difficulties are beyond the scope of this article, a broader definition of women who experience IPV has been utilized. Women in this article include those who are in abusive relationships and who are either employed or pursuing educational and/or career goals.

Major issues faced by women in abusive relationships

The following subsections will present some of the key issues that women face in abusive relationships, and consider the potential impacts these issues may have on their career development.

Low self-esteem

Self-esteem has been referred to a personal evaluation of one's own value or sense of worth (Dutton, 1992). For many women survivors of IPV, low self-esteem, which might at times occur along with feelings of shame, is one of the most devastating consequences they suffer from abuse in their relationships (Dutton, 1992; Noormohamadi et al., 2021; Sáez et al., 2021). Intimate partner violence may include repeated experiences of verbal or emotional abuse such as belittling, name calling and criticizing from an abusive partner (Lundberg-Love & Marmion, 2006), resulting in women internalizing those negative messages. Consequently, their self-esteem may deteriorate, and they may feel worthless and powerless (Worell & Remer, 2003). In Taylor et al.'s (2001) phenomenological study that explored the lived experiences of women who had faced IPV, almost all women reported losing self-esteem after having endured partner abuse. Additionally, a study by Tariq (2013) examined the impact of IPV on women and found that self-esteem was lower for women who had experienced abuse compared to those who had not.

An individual's self-esteem has been found to impact career satisfaction, job performance, and career outcomes (Bowling et al., 2010; Krauss & Orth, 2022). High self-esteem has been shown to have a positive influence on career decisions and success, and vice versa (Milburn, 1986). Brown et al. (2000) examined the relationship between self-esteem and career decision-making among women who experienced IPV, and they found that high-self-esteem significantly contributed to greater confidence in making career decisions and implementing career plans. This suggests that women with low self-esteem will likely experience an opposite effect. Thus, as women survivors of IPV often struggle with low self-esteem and evaluate themselves negatively, their career development will undoubtedly be affected.

Diminished self-efficacy

Self-efficacy refers to a person's belief that he or she can successfully perform specific tasks or achieve a certain goal (Morris et al., 2009). Albaugh and Nauta (2005) note that self-efficacy is an important component in the development of career interests, and implementation of choices and goals. People with high self-efficacy will likely feel capable of initiating tasks and capable of putting a greater amount of effort into tasks despite difficulties, whereas those with low self-efficacy might avoid the task, perform poorly and ultimately fail to succeed (Albaugh & Nauta, 2005; Brown et al., 2000; Hackett & Betz, 1981).

Due to being involved in a relationship that is of a denigratory nature, survivors of IPV might be in fewer situations where they could develop feelings of competence (Chronister & McWhirter, 2003). Often, an abuser may minimize a woman's sense of accomplishment when she successfully executes any general or career-related tasks to maintain control over her (Worell & Remer, 2003). Over time, a victim of IPV may start to believe she is incapable. She may also doubt her own ability to succeed in a variety of areas including her pursuits of education and career (Chronister & McWhirter, 2003). Because women survivors of IPV may have fewer opportunities for positive learning experiences, they may have lower career decision self-efficacy (Albaugh & Nauta, 2005). Consequently, ongoing abuse leaves survivors of IPV with a low sense of self-efficacy (Gianakos, 1999; Matheson et al., 2015;

Sáez et al., 2021). Based on these considerations, survivors of IPV with low self-efficacy will certainly face challenges in terms of their career development, as they may be unlikely to attempt career-related behaviours and overcome challenges to reach their career goals.

Dependency

Another major issue faced by women survivors of IPV is that they are often made by their abusive partners to become dependent on them in various ways. Abusers tend to direct women's lives through manipulation and coercion, which in turn weaken women's ability to make decisions for themselves (Bowen, 1982; Wettersten et al., 2004; Wright et al., 2021; Van Niel, 2021). Thus, these women may not only have trouble making everyday decisions, but they may also experience difficulties in reaching career-related decisions (e.g., choosing relevant activities in their career exploration) independently. Some women may even rely on 'benevolent others' to help them decide instead (Bowen, 1982, p. 124). Additionally, researchers have noted a general decrease in many women's problem-solving skills due to being involved in abusive relationships (Ibrahim & Herr, 1987; Lundberg-Love & Marmion, 2006). Thus, one could reasonably expect that women who have experienced IPV might struggle to cope well with new situations.

Furthermore, it is not uncommon for abusers to exploit women financially so that women would become economically dependent (Collins, 2011; Gianakos, 1999; Wettersten et al., 2004). Numerous researchers have pointed out that a lack of economic resources might play an important role in explaining why some survivors of IPV continue to stay in their abusive relationships (Brown et al., 2000; Dutton, 1992; WomanACT, 2021). Without sufficient economic resources, women will unlikely view leaving the relationship as an option because they (and their children) could be facing tremendous living difficulties on their own (Dutton, 1992; WomanACT, 2021). For this reason, Bowen (1982) contended that helping a woman attain financial stability should be given emphasis in career counselling with this population. This could be done by helping women develop necessary job skills and secure employment so that they could generate income to meet their basic needs. By establishing financial independence, women might then become more willing to separate from their abusers and regain control over their lives.

Social isolation

The next major issue facing many women survivors of IPV is that they are often forced into social isolation (Goodman & Epstein, 2008). In many ways, they may feel completely alone in experiencing the abuse. An abuser may attempt to keep a woman from meeting her family and friends, and actively damage all her potential sources of support (Lundberg-Love & Marmion, 2006). Stark (2012) stated that the aim of these abusive behaviours is to further instil dependence and take exclusive control over the woman's agency and skills. On the other hand, women facing IPV might also choose to stay away from their close ones because they may feel shame, embarrassed or become fearful of rejection (Worell & Remer, 2003).

Consequently, women survivors of IPV who have been socially isolated, have lacked access to external helping resources. They tend to have very few opportunities to contact supportive

individuals and to be in situations where they can develop positive mental health (Michalski, 2004). Additionally, Chronister and McWhirter (2003) noted that women survivors of IPV may rarely interact with and learn from role models who are pursuing similar career and educational interests. Thus, their ability to acquire occupational knowledge and obtain career-related information such as job skills training may be particularly limited.

Psychological distress

Furthermore, given the unpredictability of the abusers' violent behaviour, victims of IPV often live with high levels of stress and experience significant psychological distress. For instance, survivors of IPV may struggle with anxiety and depressive disorders, somatoform disorders, substance use disorders, sleep difficulties, poor concentration, hypervigilance, and anger (Dutton, 1992; Van Niel, 2021). There is also evidence to suggest a strong link between partner violence against women and post-traumatic stress disorder (PTSD). Particularly with women experiencing prolonged and intense abuse in their intimate relationships being more prone to exhibiting severe PTSD symptoms (Woods, 2005). A meta-analysis by Spencer et al. (2019) included 207 studies that examined the relationship between mental disorders and physical IPV victimization. They found PTSD to be a significant correlate for IPV victimization in women. This was aligned with other research indicating the correlation between IPV and PTSD for women (Babcock et al., 2008; Golding, 1999; Woods, 2005).

Psychological distress that results from abuse may also have long-term negative effects on a woman's ability to connect with others, handle difficult situations and gain satisfying experience regarding career development and advancement (Brush, 2000). Therefore, the distress will inevitably affect a survivor of IPV's ability to work to a great extent. In fact, studies have found that women reported being involved in an abusive relationship have caused them to either be late for work or miss work (Wettersten et al., 2004). Women survivors of IPV also often find it challenging to stay focused at work and perform their best in work tasks (Swanberg, Macke, & Logan, 2006). Moreover, the amount of psychological distress among women may intensify, because in addition to the abuser's violent behaviour at home, it is very common for abusers to employ a variety of interference tactics to harass women at their workplace (Swanberg, Logan, & Macke, 2005). Some consequences of such harassment are that women may not only be occupied with worrying thoughts about what might happen while at work (Wettersten et al., 2004), but they may also end up losing their jobs (Chronister & McWhirter, 2003). Overall, for these women, their inability to become a productive and responsible worker will likely have a negative impact on their colleagues and employers' perceptions of them. There are high possibilities that they will receive fewer opportunities to develop important job skills and receive undesirable comments in their job evaluations (Chronister & McWhirter, 2003). Consequently, as a victim's prospects of growing professionally suffer, they are likely to continue experiencing distress.

Underlying theories

Krumboltz's Social Learning Theory

Krumboltz's social learning theory utilizes Bandura's social learning theory as a foundation with the intent of addressing how career decision-making process is influenced by the

interaction of four factors: (1) genetic endowment, (2) environmental conditions and events, (3) learning experiences, and (4) task approach skills (Mitchell & Krumboltz, 1984). As a result of these four factors interacting with one another, individuals will acquire their own unique learning experiences which in return, influence how they form certain beliefs about themselves, make generalisations about their surroundings and approach career tasks (Krumboltz, 1994). In this regard, this theory would be applicable to women survivors of IPV because as discussed earlier, many women in abusive relationships have been situated in an isolated and restrictive environment where their opportunities to develop positive views about their personal qualities and learn task skills are very limited.

Social Cognitive Career Theory

There have been several studies suggesting that social cognitive career theory (Lent et al., 1994, 2000) can be used effectively to support the career development of women survivors of IPV (Chronister & McWhirter, 2003; Chronister et al., 2018; Morris et al. 2009). In general, as described by Morris et al. (2009), SCCT considers that the development of one's career interests, goals, and actions are influenced by interactions among key concepts including self-efficacy, outcome expectations and contextual barriers and supports. Individuals whose career self-efficacy beliefs are low will also tend to have low outcome expectations for being successful in their jobs or their career pursuits (Chronister & McWhirter, 2003). As it has already been mentioned that many women survivors of IPV often have low self-efficacy and anticipate negative outcomes in both life and work, it would be necessary for career interventions to follow a SCCT approach that aim at improving these two aspects. Additionally, focusing on the contextual barriers and supports surrounding women survivors of IPV would be equally necessary, because such environmental factors could influence whether individuals will set career goals based on their own career interests and take certain actions to reach those goals (Lent et al., 2000).

Proposed helping interventions with application of career theories

Based on the discussion of key issues above, counselling interventions for women survivors of IPV are proposed by drawing aspects from Krumboltz's social learning theory (Mitchell & Krumboltz, 1984) and the social cognitive career theory (Lent et al., 1994, 2000).

According to Krumboltz's (1996), a career counsellor working from a social learning perspective should focus on actively helping clients to learn, so that they would be able to take appropriate actions to manage their career-related concerns and experience life satisfaction. Therefore, in accordance with this theory's emphasis on learning, a career counsellor could support women survivors of IPV by teaching practical skills, introducing relevant learning resources and employing cognitive strategies.

Teaching practical skills

Since women survivors of IPV may often have a hard time making career decisions on their own, the career counsellor can teach them how to come to a more appropriate and informed decision independently. To do this, the counsellor can introduce Krumboltz and Hamel's (1977) 'DECIDES' model that describes career decision-making as a process

consisted of seven steps: (1) define the problem, (2) establish an action plan, (3) clarify values, (4) identify alternatives, (5) discover probable outcomes, (6) eliminate alternatives systematically, and (7) start action. By dividing the entire decision-making process into smaller steps, this model would enable women survivors of IPV, who may often experience fear of making a wrong choice (Gianakos, 1999), to feel less overwhelmed in making decisions regarding their career. The counsellor could suggest to women to reanalyse their action plans if needed (Gianakos, 1999) while reminding them that all decisions—including tentative ones—can teach them a lot about themselves (Krumboltz, 1996). A gentle and manageable approach could be particularly beneficial for survivors of IPV, as they could slowly regain self-confidence and trust in themselves to make important decisions even when facing with a new career problem.

In addition, a woman survivor of IPV's problem-solving skills could be enhanced by teaching her to perform a cost-benefit analysis (Worell & Remer, 2003). In this hands-on approach, the counsellor could encourage the woman to take an active role in evaluating the pros and cons associated with each of her choices.

Introducing relevant learning resources

As the primary focus of the social learning theory is to promote client learning, the career counsellor's task could include offering women survivors of IPV new learning experiences through a variety of useful resources that aim to expand their interests, values, interests, work habits and skills (Krumboltz, 1996). For example, to assist a woman who is engaging in career exploration, the counsellor could share books, reports, magazine articles, videos and internet sites (e.g., http://www.careerinfonet.org/) so that she is able to obtain accurate information about career areas that interest them. The counsellor could further set up opportunities for associative learning to occur, such as connecting the woman with supportive role models (Sharf, 2013). In doing so, these women might be able to learn about the role models' actual work experiences (e.g., their typical workday and working conditions) as well as receive guidance on how to acquire certain skills or training required for specific jobs. Together, these learning resources will help increase occupational knowledge and facilitate the achievement of career goals for women survivors of IPV.

Employing cognitive strategies

Challenging troublesome beliefs

Using the cognitive strategy of challenging troublesome beliefs is a crucial part of career counselling with women survivors of IPV because abusive experiences often result in their tendency to form strong negative beliefs about themselves. Thus, throughout the counselling process, the counsellor not only needs to listen attentively to the women's stories but also identify any 'assumptions, presuppositions and beliefs' that could possibly hold them back from achieving career success (Krumboltz, 1992, p. 2). For example, a woman's faulty and unhelpful beliefs might be reflected through her statements such as 'I will never be able to support myself' or 'I am never good enough for any job'. In such cases, the counsellor could gently point to evidence in the woman's life that contradict such beliefs (Krumboltz, 1992) and respond in the following ways: 'Let's look back on the progress you have made and see how much you managed to support yourself this whole time' and 'Think of some positive qualities or strengths, no matter how small, that you feel

you possess. Think about what some people who are close to you might say about this'. With consistent support of the counsellor, women survivors of IPV might start to realize that such negative beliefs they hold are not representative of their authentic selves. This can lead to an increased sense of empowerment among women, while improving their self-esteem and subsequent vocational behaviour.

Cognitive rehearsal

Another cognitive strategy that could be employed is called cognitive rehearsal. In this strategy, women survivors of IPV could be encouraged to practice saying positive statements or affirmations to themselves, to replace their negative thoughts that have been so deeply ingrained (Krumboltz, 1996). For instance, the counsellor may ask the woman to repeat positive and uplifting phrases about herself such as 'I am capable of doing things right' and 'I can move forward with my life.' Doing so repeatedly could help women see that they have more options (Sharf, 2013). They might also spend more time considering their future opportunities rather than dismissing them immediately (Sharf, 2013), hence increasing their chances of growing professionally. Concurrently, the counsellor could teach women to avoid labelling themselves (Krumboltz, 1992) to build healthy self-esteem. For example, although a woman might not accomplish a task, she can rehearse saying, 'This is an unsuccessful attempt, but I am not a failure.'

Increase self-efficacy

In order to increase self-efficacy, the career counsellor could consider the four main sources of information that contribute to its development: performance accomplishments, vicarious learning, emotional arousal and verbal persuasion by others (Bandura, 1977). Likewise, facilitating women survivors of IPV to experience these four sources could influence their existing self-efficacy beliefs.

Performance accomplishments

As women begin to identify their career interests and skills, the counsellor could suggest they engage in relevant and manageable tasks or activities in which they are very likely to gain success experiences (Brown et al., 2000). For example, it may be helpful for the counsellor to first ask women to perform tasks that are of non-evaluative nature (Gianakos, 1999), such as gathering information about current employment trend and report it back during the counselling session, since these types of tasks are typically less intimidating. Gradually, the counsellor could also suggest participating in suitable activities such as volunteering or skills-building workshops so they will further experience a stronger sense of efficacy. Brown and Lent (1996) recommended that after each successful performance accomplishments, inviting clients to talk in detail about how they think they were able to achieve such positive outcomes is a good way to reinforce their self-efficacy.

Vicarious learning

For vicarious learning, giving women opportunities to observe role models who have persisted and successfully overcome similar career challenges could be particularly helpful (Betz, 1992; Brown & Krane, 2000; Chronister et al., 2012). This is because women survivors of IPV may not only learn some useful behaviours to overcome their own challenges from observing, but they may also start to believe in themselves to be able to

do the same. Such vicarious learning experiences could potentially be more powerful if the models with whom women interact are women who had once been in abusive relationships (Gianakos, 1999; Chronister et al., 2012).

Emotional arousal

Regarding addressing emotional arousal, the counsellor could strive to help women experience a more balanced mood or positive feelings by teaching them techniques to manage their stress or anxiety (Betz, 1992; Ibrahim & Herr, 1987). While the techniques may vary greatly depending on what fits best for each client, some useful ones could include deep breathing and progressive muscle relaxation exercises. The calmness that usually coincides with regular practice of such techniques might allow women to feel that they can effectively manage their career task at hand. It might also help alleviate psychological distress that women survivors of IPV often experience.

Verbal encouragement

Lastly, increasing women's self-efficacy through verbal persuasion can be achieved by offering consistent encouragement and support as they are working towards independence (Bowen, 1982; Chronister et al., 2012). Since women survivors of IPV often experience self-doubts, it would be imperative for them to receive messages indicating that have great potential to succeed. Hearing such encouraging messages over time could help enhance women's beliefs about their own abilities.

Improve outcome expectations

Similar to self-efficacy, outcome expectations among women survivors of IPV needs to be improved as they might often anticipate negative situations. For example, a woman may be afraid of losing financial support if she does choose to leave her abusive partner (Morris et al., 2009). In this case, the counsellor could validate the woman's concern while engaging her in a discussion that focuses on the possibilities of positive outcomes (Morris et al., 2009). For example, noting that she could achieve financial independence and establish a life free of abuse. On the other hand, for a woman who may fear getting harassed at work by her partner and express worry about her job performance and security being affected (Wettersten et al., 2004), the counsellor could work with her to develop a personalized safety plan for work. They could also work together to explore whether to disclose the abuse to someone whom she trusts at the workplace and strategize how to do so if she proceeds (Swanberg et al., 2005). This could possibly lead to positive outcomes (e.g., feeling less distress, being able to work productively) as Swanberg et al. (2006) found that most women survivors of IPV in their study received a range of supports from their colleagues and supervisors when they chose to share their experiences of abuse.

Contextual Factors: Barriers and Supports

Finally, while career counsellors should assess the contextual barriers that can prevent women survivors of IPV from achieving safety and career success, it is also important to encourage women to identify them on their own as well (Chronister et al., 2012; Morris et al., 2009). To this end, a counsellor could first share information related to IPV such as the cycle of abuse and the power and control wheel (Cory & McAndless-Davis, 2008; Worell & Remer, 2003). Such information can be very valuable as it could allow women to realize

they are not responsible for the abuse and to become aware of the difficult challenges they would be facing if they continue to stay with their abusive partners (Cory & McAndless-Davis, 2008). The counsellor could then gradually shift to asking women more specific questions about what barriers they think they might encounter in their career pursuits because of being involved in an abusive relationship.

Once the counsellor elicits a better understanding from the woman about her perceived barriers, they could connect her with appropriate supports that would help minimize the impacts of such barriers (Chronister et al., 2012; Morris et al., 2009). For instance, for a woman who is lacking a reliable support system, referring her to join support groups might allow her to make meaningful connections with other women who are facing or have overcome similar abusive experiences in their intimate relationships (NiCarthy, Merriam, & Coffman, 1984). Women in a group setting can support each other to break isolation, build confidence and exchange useful knowledge including survival strategies and career information (Bowen, 1982). Moreover, depending on the woman's challenge (e.g., in need of financial assistance or medical care), the counsellor can help women gain access to a variety of community resources such as social services agencies, health centres, food banks and local women's shelters (Cory & McAndless-Davis, 2008). Similarly, since women survivors of IPV might often need extensive support when looking for employment and educational or job training, the counsellor could also be prepared to guide and direct them in this process as much as possible (Bowen, 1982). These multiple sources of supports may effectively raise hope and strengths for women to leave the abuse situation.

For all the aforementioned interventions and strategies to be effectively implemented into counselling and provide effective outcomes, women survivors of IPV require counsellors with advanced skills and knowledge in the treatment of IPV. According to research, accurate diagnosis of both current and past IPV is the utmost crucial aspect in ensuring that there are no misdiagnosis and improper treatment (Sutton et al., 2020). Some researchers reported that formal education inadequately prepared counsellors to work with clients experiencing IPV (Fedina et al., 2017; Todahl et al., 2008), thus, increasing the demand for greater in-depth clinical training. Studies revealed that mental health professionals who have received adequate training regarding IPV are more likely to engage in comprehensive assessments and intervention practices (Murray et al., 2016). Not only are assessment and intervention practices important, but also the counsellors' individual skills and knowledge. For instance, professionals working with IPV should be aware of stigmatizations that exist, proper language that does not covey biases, being aware of their own non-verbal body language as victims of IPV often rely on body language for safety, and being cautious not to cause re-victimization (Maghsoudi, 2018). Counsellors who can participate in trainings that address the above-mentioned, are more likely to be in a better position to support survivors of IPV, and thus, accurately implement the strategies and interventions discussed in this paper. Taken together, counsellors require the foundational knowledge and awareness of IPV to properly incorporate effective interventions.

Conclusion

This article presents that women who experienced abuse in their intimate relationships face multiple challenges, particularly low self-esteem, diminished self-efficacy, dependency, social isolation and psychological distress. While these challenges can have profound

negative impacts on women's career development, it becomes possible to support this population in an appropriate and sensitive manner by employing helping interventions that incorporates aspects of the social learning theory and social cognitive career theory. These interventions that have been proposed here, such as teaching practical skills, introducing learning resources, using cognitive strategies, increasing self-efficacy and expanding sources of support, are aimed primarily at helping women empower themselves. As a woman survivor of IPV's self-worth and inner strengths grow, she will be much more likely to overcome challenges in her life and career. In addition, it would also be extremely important for career counsellors to demonstrate an empathic and encouraging attitude to affirm the woman's attempt to improve her situation throughout the counselling process. By taking all these factors into consideration, career counsellors will become better able to assist them in moving forward and rebuilding their lives.

Data Availability Statement

Data availability is not applicable to this article, as it is entirely based on existing literature that is fully accessible to the public.

Conflict of Interest Statement

On behalf of all authors, the corresponding author states that there is no conflict of interest.

Informed Consent and Ethical Statement

Informed consent and ethics review are not required or applicable to this article, as it is entirely based on existing literature that is fully accessible to the public.

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