ARTICLE IN PRESS

BURNS XXX (2016) XXX-XXX



Available online at www.sciencedirect.com

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Conceptual model of acid attacks based on survivor's experiences: Lessons from a qualitative exploration

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ARTICLE INFO

Article history: Accepted 4 October 2016 Available online xxx

Keywords:
Acid attack
Grounded theory
Physical and psychological wounds
Survivor
Iran

ABSTRACT

Introduction: Acid attack, a worldwide phenomenon, has been increasing in recent years. In addition to severe injuries to the face and body, such violence leads to psychological and social problems that affect the survivors' quality of life. The present study provides a more indepth understanding of this phenomenon and explores the nature and dimensions of acid attacks based on survivors' experiences.

Method: A grounded theory study using semi-structured, recorded interviews and applying purposeful theoretical sampling was conducted with 12 acid attack survivors in Iran. Data were analysed using constant comparison in open, axial and selective coding stages.

Results: A conceptual model was developed to explain the relationships among the main categories extracted through the grounded theory study. Physical and psychological wounds emerged as a core category. Traditional context and extreme beauty value in society acted as the context of the physical and psychological wounds experienced. Living with a drug abuser with behavioural disorders and lack of problem-solving skills in interpersonal conflict were found to be causal conditions. Action strategies to deal with this experience were found to be composed of individual, interpersonal and structural levels. Education, percentage and place of burning acted as intervening conditions that influenced survivors' strategies. Finally, adverse consequences of social deprivation and feeling helpless and hindered were found to have an important impact.

Conclusions: Acid attack lead to physical and psychological wounds in survivors. This is a multi-dimensional phenomenon involving illness, disability, and victimization, and requires a wide range of strategies at different levels. The conceptual model derived through this study can serve as a good basis for intervention programs.

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BURNS XXX (2016) XXX-XXX

1. Introduction

Acid attack is a revengeful act and a vicious form of aggression which leads to severe injuries to the face and body [1]. Survivors of acid attacks experience psychological problems and social isolation. Acid attack creates short-term effects such as serious physical pain; its long-term effects include blindness, defacement, and severe psychological distress. Deformities and resultant disabilities isolate and marginalize survivors in society [2]. The common scenario of acid attack in most countries, and particularly in developing countries, is that a person buys sulphuric acid (which is used in automobile batteries or for plumbing) from a retail store and uses it to take revenge on someone who may have rejected their marriage proposal or because of a family dispute [3,4].

Historical evidence shows that acid attacks were common in England and the United States in the 1800s [5], and by 1980 several acid attacks had occurred in developing countries [6]. According to statistical data, acid attacks have become more prevalent in developing countries, especially in south Asian, southeast Asia, and sub-Saharan Africa since 1980 [1,7,8]. For instance, in Bangladesh about 9% of burns are acid burns [9] and it is estimated that there are 200 acid attacks each year in Pakistan [8]. In Cambodia, acid burns comprise 20% of all burns [6]. Waldron et al. [10] indicated that between 2000 and 2013, 254 patients were survivors of an acid attack in Cambodia. In Iran, despite the lack of official statistics, some studies have shown that about 11.5% of all patients with burns were injured through criminal attempts to throw acid [11].

Although most acid attacks are perpetrated by men to destroy young women's physical appearance, men are also survivors of acid attacks. There are different reasons and risk factors for acid attacks. Milton et al. [12] reported on the motives for acid attacks and occurrence by gender in different countries. For example, in India the survivors were often male and the motive was most often to get revenge on someone after a quarrel [13,14] but in Nigeria even though the survivors were often male, theft and altercations were the main reasons [15]. In the United Kingdom, survivors were more often men who were usually attacked by gangs of male adolescents or young men with the motives of racial bias and robberies [16]. Jamaican survivors of acid attacks were both men and women; the female perpetrators commit this crime as a consequence of their husbands' infidelity [17]. In Pakistan, acid attack survivors were women; their husbands or other family members carried out acid attacks as a result of spousal and family disputes and dowry issues [8]. In Bangladesh, a country with the highest incidence of acid attacks, most survivors were women under the age of 18 years who attempted to be emancipated from cultural and traditional rules that created their subordinated positions [9]. Most survivors were female in Taiwan [18] and Ugandan survivors were both male and female; the motives for half of these acid attacks were robbery (car or motorcycle theft) and house burglary [7].

The occurrence of these violent attacks among both genders shows that various patterns and processes exist around this phenomenon. Consequently, this can challenge the feminist perspective that considers acid attack as gender-based violence, i.e. male perpetrators intend to destroy what

society considers the most valuable trait in a woman, her beauty [2].

Survivors of acid attacks experience psychological problems such as anxiety, depression, social isolation [4,19] and social exclusion [20]. Social isolation creates difficulties in finding a suitable job; limits marriage opportunities and increases relational problems within the family. Similar to neighbouring developing countries, Iran has a high incidence of burn by acid attack. The actual incidence in Iran is likely to be much higher than that registered at burn centres and hospitals [21].

Research on acid attack globally has been carried out using quantitative methods and was limited to the study of its prevalence, outcomes, claimed reasons, and level of burning. Because acid attack is a multi-dimensional culture-based phenomenon, qualitative research methods are not used to study it. However, qualitative approaches can potentially provide deeper understanding about phenomena that are less recognised and are culturally constructed. Consequently, rigorous application of qualitative methodologies can promote and develop our knowledge on burns [22,23]. We believe acid attack is a phenomenon that is socially and culturally constructed. We applied the grounded theory method to explore different aspects of this phenomenon based on Iranian survivors' experiences.

2. Method

2.1. Study design

We used grounded theory to guide sampling and collection and analysis of data. Grounded theory is a research approach or method in qualitative research that uses inductive analysis as a principal technique. Strauss and Corbin [24] defined grounded theory as follows:

A grounded theory is one that is inductively derived from the study of the phenomenon it represents. That is, it is discovered, developed and provisionally verified through systematic data collection and analysis of data pertaining to that phenomenon. Therefore, data collection, analysis and theory stand in reciprocal relationship to one another analysis. (p22)

2.2. Setting and participants

The setting for this research was Shahid Mottahari Accident and Burn Injury Hospital in Iran. This hospital is under supervision of Iran University of Medical Sciences (IUMS) and is the main centre for admission of patients with burns. Patients involved in acid attacks during the last 5 years (2009-2014) were introduced to the researchers by burns unit supervisors. The patients who were currently in the hospital and those already discharged were contacted about their participation in the study. Purposive sampling was applied to select the participants. The inclusion criteria for the participating in this study were as follows: (1) having experience about acid attacks during the last 5 years (2009-2014), (2) being in an appropriate psychological and physical state for

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