

## From Victims to Survivors: Understanding the Psychological Impact of Trauma Experienced by Acid-Attack Survivors through Qualitative Research

Shreya Sharma<sup>1</sup>, Manvi Jain<sup>2</sup>, Sanya Dhawan<sup>3</sup>, Anubha Jain<sup>4</sup>, Neha Gupta<sup>5</sup>,  
Shivangi Khattar<sup>6\*</sup>, Akash Saxena<sup>7</sup>

### ABSTRACT

This qualitative study explores the various dimensions of the trauma response of acid attack survivors. Acid attack is a brutal form of gender-based violence with drastic consequences for survivors, including catastrophic emotional responses and the exhaustion of available coping devices and resources. It's concerning that the repercussions of actions such as this are merely studied through their physiological and social consequences. Owing to this gap, the current study adopted a qualitative approach to explore the psychological impact of trauma experienced by acid attack survivors. Thematic Analysis was employed as a methodological preference, which examined and extracted themes and patterns relating to the psychological impact from the lived experience of the participants/survivors. 11 semi-structured interviews consisting of 12 questions each were conducted, out of which four superordinate themes emerged: Individual perspective on Mental Health, Attitudes towards Counselling and Psychotherapy, Impact of Structural and Societal Factors and Post-Traumatic Growth. These findings demonstrate that the nature of trauma experienced by acid-attack survivors is complex, which is aggravated by discrimination and structural limitations. All survivors have coped with the attack and their trauma in different ways over the years, all of them showing post-traumatic growth. There is a need for psychological interventions for survivors, along with systemic support.

**Keywords:** *Trauma, Acid-Attack Survivor, Mental-Health, Psychological Impact, Coping, Post-Traumatic Growth, Social structures.*

<sup>1</sup>Member, Research & Development Department, You're Wonderful Project

<sup>2</sup>Member, Research & Development Department, You're Wonderful Project

<sup>3</sup>Member, Research & Development Department, You're Wonderful Project

<sup>4</sup>Member, Research & Development Department, You're Wonderful Project

<sup>5</sup>Member, Research & Development Department, You're Wonderful Project

<sup>6</sup>Department Lead, Research & Development Department, You're Wonderful Project

<sup>7</sup>Co-Founder & Chairperson, You're Wonderful Project

\*Corresponding Author

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**A**cid-attack is not just a criminal act but a form of gendered violence that is perceived as a traumatic experience and has severe adverse impacts on survivors. Research in the Indian context has predominantly focused on the physiological, medical, and legal impacts of acid-attack. To understand the psychological impact of acid-attack, it is crucial to develop an understanding of what trauma is, the various forms of stigma attached with acid-attack, prevalent interventions, and what coping means for acid-attack survivors.

The National Commission for Women defines an acid attack as "any act of throwing acid or using acid in any form on the victim with the intention of or with the knowledge that such person is likely to cause to the other person permanent or partial damage or deformity or disfigurement to any part of the body of such person" (National Commission for Women, 2010). An acid attack was included as a separate offense in the Indian Penal Code only after the 2013 Criminal Amendment Act, until which acid attacks were tried as acts of causing grievous hurt voluntarily (Law Commission of India, 2009). As stated in the 2018 National Crime Records Bureau report, there have been more than 200 acid attack cases in India, 80% of which include women. It is gender-based violence performed not with the intent to cause death but to burn or disfigure the victim's body. According to Acid Attacks Trust International (2021), there are almost 1500 acid attack cases reported every year globally, the majority of which are reported in India. Predictably, these figures do not include the scores of cases that go unreported due to shame, stigma, and fear of retribution. Adding to the ordeal, not all of the victims of the crime receive compensation. In the year 2020, only 63% of the victims, who filed a complaint, received compensation from the authorities (PTI, 2020). This depicts how the rights of the survivors are endangered due to prolonged systemic negligence of attacks that can cause immediate damage, defacement, and severe pain, often requiring significant surgery as well as long-term support and rehabilitation. It often leads to the development of certain psychopathological symptoms as well, including sleeplessness, depression, recurrent nightmares, increased fear, and anxiety (Patel, 2014).

### ***Psychological impact of the trauma caused by acid-attack***

Acid attack is a heinous crime that can have a traumatic and deep psychological impact on the survivor's mental and emotional well-being and health.

Owens, Pike and Chard (2001) reported that victims of sexual abuse tend to focus on self-blame attributions. Findings of research by Branscombe, et al., (2003) suggest that blaming oneself leads to more significant distress among rape victims. Findings of past research indicate that various cognitive distortions have been found to have adverse effects of mental health and recovery. Owens, Pike and Chard (2001) found an association between cognitive distortions and increased post-traumatic stress disorder (PTSD) symptoms among rape victims. Beck (1963) stressed the role of cognitive distortions in increasing the symptoms of depression.

Survivors of acid attacks experience psychological concerns such as anxiety, depression, social isolation, and social exclusion. Social isolation creates difficulties in finding a suitable job; limits marriage opportunities and increases relational problems within the family. Guerrero (2013) found that participants have low self-esteem, constant fear of being assaulted again, propensity to depression increased by the severity of their facial disfigurement, chronic anger due to the assault and a permanent feeling of helplessness. The victim often abstained themselves from intentionally providing evidence to the authorities due to their emotional, romantic or sexual ties with the attacker, and the guilt derived from

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accusing him. Khoshnami, et al., (2016) found that in addition to losing the beauty of their face, participants experienced psychological disturbance and disarray, which lasted for years for some people. Moreover, the survivors felt that significant others' pitiful behaviour was unpleasant and painful. They experienced many expostulatory and reprehensive behaviours in their family relations. Their families blamed them for the acid attack and, in this situation, they were so sensitive and had less control on their behaviour. Consequently, they experienced hopelessness as a result of their negative experience of the acid attack. Mannan, et al., (2006) found that the individuals showed high levels of psychological distress including social anxiety and avoidance, anxiety and depression.

Qazi, et al., (2019) undertook a study which revealed that survivors face serious issues of social isolation. After the incident of acid attack surrounding individuals stigmatized survivors and made it difficult for them to communicate. As a consequence, acid attack victims lost their friends and relatives and developed issues of isolation which ultimately lead to suicidal ideations among them.

### ***Coping and well-being of acid-attack survivors***

The term 'resilience' can be understood as the positive adjustments made by an individual in the face of adversity. Most commonly, maintaining a good mental health is believed to be an indicator of 'successful coping' with unpleasant situations (Färber & Rosendahl, 2018). However, many times, the connection between positive mental health and resilience gets viewed in terms of using a defence mechanism; protecting the self in the face of adversity (Dmitry, et al., 2010). In the case of survivors of acid attack, resilience, coping and the subsequent well-being, often gets examined through gauging the impact of the physical wounds that an individual experiences, and their ensuing psychological health.

The study by Khoshnami et al. (2016), provided an in-depth exploration of physical and psychological wounds that the survivors reported and identified feelings of disdain, frustration and severe irritation, in addition to a general feeling of being unsafe, and being pitied by family members and others that added to the experience of psychological disturbance and disarray in survivors which lasted for years for some people (Khoshnami, et al.,).

Different social support systems can play a significant role in helping the survivors of acid attack cope successfully in mitigating the impact of such violence. The study by Mujeeb & Kamal (2018), divides the coping strategies employed by the survivors into three broad categories, religious coping, problem-focused coping and emotion-focused coping. Post the incident, religious coping or turning to God for strength, praying frequently etc., was observed in survivors and their family members. A tendency to use emotion-focused coping during the earlier stages of the victimization experience for social support and overcoming these powerful negative emotions was also noted. Whereas problem-focused coping took longer time, usually years, for survivors to come out of the struggles and move towards betterment.

The experience of an acid attack can be life altering in nature, therefore, effective coping, post incident can prove to be beneficial in reducing the negative effects of disfigurement. Acid- attack survivors have to face multiple difficulties ranging from societal stigma, psychological difficulties, to medical, legal, and economic hurdles. Hence, efforts have to be made on a larger structural level to provide support to survivors.

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### *Interventions*

According to the latest National Crime Records Bureau (NCRB) data, India witnessed 228 incidents of acid attacks against 240 victims in 2018. Moreover, NCRB data over the last five years points towards females being affected the most by acid violence, with every two out of three victims from India being female.

These include the cases which have been reported. The actual statistics may indicate severe under-reporting and a larger number of survivors having chosen to remain anonymous due to social stigma (Siddika & Baruah, 2018). Under-reporting, social stigma and flawed categorisation of data are all factors which affect interventions and thus, worth considering when examining the success of interventions and state responsibility in mitigating acid violence.

Acid attacks give rise to significant healthcare and legal costs for survivors. They can be attributed to a number of factors, including land disputes, dowry, other interpersonal conflicts and the ease of availing acid (Avon Global Center for Women and Justice at Cornell Law School & New York City Bar Association, 2011). Therefore globally, efforts for preventing acid attacks and aiding the survivors have been undertaken at the interstices of government and civil society interventions.

The Acid Survivors' Foundation (ASF), Bangladesh, and the Acid Survivors' Trust International (ASTI), United Kingdom, have been influential in highlighting campaigns against acid attack crimes. Further, with funding from ASTI, ASF has now become a global civil society organisation and branched out to countries like Cambodia, Uganda and Pakistan (WHO, 2011). Similarly, other instances of successful interventions spearheaded by grassroots organisations include ASF's "Essential Burn Care" campaign in partnership with the Health Ministry and Interburns, a British charity (Avon Global Center for Women and Justice at Cornell Law School & New York City Bar Association, 2011), or in the Indian context, Ria Sharma's non-governmental organisation (NGO) Make Love Not Scars; Sahas Foundation, an NGO founded by survivor Daulat Bi Khan; and the "Stop Acid Attacks" campaign (2013) by Chhanv Foundation, which led to the subsequent formation of Cafe Heroes Hangouts to provide employment to survivors.

## **METHODOLOGY**

### *Design*

Employing a qualitative approach, 11 structured interviews containing 12 questions each were conducted. The interviews lasted approximately one hour each. The interview data was processed using thematic analysis to recognize significant patterns in the data.

### *Participants*

The 11 participants were from an NGO that was working with acid attack survivors in India. The participants were selected through a purposive sampling method. Participants had survived an acid-attack in the past, and were employed by and associated with the NGO in question. The inclusion criteria for the participants was that all participants should identify as women, must be adults (18+), should be acid-attack survivors, and must be employed/working with an organization. The selection of the organization relied on two primary criteria. First that the organization's mission statement needed to specifically address issues of acid attack survivors. Second, the organization's reliability was verified

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through their work with the survivors in terms of financial, legal, and medical aid. Hence, we chose the ‘Chhanv Foundation’ in order to collect data for our research.

**Table 1: Participant Demographics/Description**

<b>Pseudonym of the Interviewee</b>	<b>Age (in 2021)</b>	<b>Location</b>	<b>Work profile</b>	<b>Age at the time of being attacked</b>
AR	22	Lucknow	PR Manager at Sheroes; Reach Out Team	15
MK	40	Agra	Servicewoman at Sheroes	17
RI	27	Orissa	Orissa project coordinator at Chhanv foundation	16
RA(1)	24	Agra	Floor service provider at Sheroes Hangout Cafe	16
DY	20	Agra	Worker at Sheroes	13
RU	25	Rohtak	Working with Rehabilitation centre at Chhanv	17
FA	36	Lucknow	Front desk manager at Sheroes, since 2015	26
NU	30	Agra	Worker @ Sheroes	3
KI	26	Lucknow	Reach Out Team; Fashion Events; Chappak	17
RA(2)	26	Agra	Worker @ Sheroes	-
RK	32	Agra	Worker at Sheroes	14

**Interview schedule**

A semi-structured interview schedule was prepared to collect information and understand the lived experiences of acid-attack survivors. There were a total of 12 questions which were constructed through employing past research, literature review, and objectives of the present study. They were prepared in both English and Hindi for the participants’ understanding, as most of them were not well versed with English.

**Procedure**

Participants contact with the researcher was facilitated via the organization only. This was done in order to ensure that the survivors were comfortable and the privacy was maintained. Interviews were conducted online via Zoom and lasted approximately one hour each. Nine interviews were recorded with prior consent and two interviewees preferred not to be recorded.

The interviews were transcribed from Hindi to English and thematic analysis was conducted using Google Spreadsheet. This involved coding all the data before identifying and extracting five key themes and several sub-themes using thematic analysis methods (Braun and Clarke, 2006).

**Data analysis**

An inductive thematic analysis was employed to address the research question that explores the psychological impact of trauma experienced by acid attack survivors. Thematic analysis

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using methods of constant comparison with the extracted data (Braun & Clarke, 2006; Glaser, 1965) was carried out. The extracts from the interview were read repeatedly and discussed at length. The essence of each extract was captured as a code and these were plotted together on a sheet to indicate the relationships between ideas and concepts. From this process, themes and subthemes were generated, which were further refined through discussion.

### ***Ethical considerations***

In order to ensure ethical guidelines were followed, an Informed Consent was shared with the participants before data collection, and they were informed that their participation was entirely voluntary. We also ensured confidentiality as well as anonymity by de-identifying the participant demographic information through the use of pseudonyms.

## **DISCUSSION**

The present study attempted to explore the psychological impact of trauma experienced by acid-attack survivors, while examining their understanding of mental-health, post-traumatic growth, and the role played by societal structures. We have also tried to understand the nature of psychological interventions present for acid-attack survivors and the role played by psycho-social community support.

We adopted a qualitative approach using in-depth semi-structured interviews to gain richer understanding about the traumatic experiences, coping mechanisms, self-perception, and the perspectives on mental-health of the 11 acid-attack survivors we interviewed. The data collected was thoroughly analysed, beginning with translation from Hindi to English, followed by a 6-phase thematic analysis process.

Through our qualitative analysis we have categorically identified 5 themes, 18 sub-themes, and 90 codes. The themes are as follows- Individual perspective on Mental Health, Attitudes towards Counselling and Psychotherapy, Impact of Structural and Societal Factors, Post-Traumatic Growth, and Role of Psychosocial and Community Support.

### ***Theme 1: Individual perspective on mental health***

The first theme explores the individual perspectives of acid-attack survivors on mental health. There are four sub-themes under this broad theme: Understanding of mental health, self-perception of the survivor post the attack, factors that promote positive mental health, and factors negatively impacting mental health. It has been attempted to understand the self-perception of survivors' post the attack and their views on factors that positively and negatively impact mental-health. Under the first sub-theme, we analyzed how survivors understand the concept of mental-health and what are their perspectives on it. Most survivors looked at mental-health through an optimistic lens, understanding it as being integral to identity formation, personal to the individual, and it being about encouraging positive thinking and believing in ourselves. One participant (NU) stated that, "*It is keeping mind free from negativity, not indulging in that thought process.*"

The second sub-theme focused on understanding the self-perception of survivors post the attack, how they looked at themselves, and how they perceived their self-worth. Survivors reported having feelings of isolation, shame, embarrassment, fear, and worthlessness post the attack, which symbolized a negative self-perception. It was understood that factors like

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mental-health distress, suicidal ideation, and facing rejection from employment opportunities, contributed to and triggered a low self-concept.

The third sub-theme explored factors which promote positive mental-health as per the survivors. According to them, factors like financial independence, supportive family and environment, positive reassurances, and following a daily routine enhance their mental well-being. Some survivors also highlighted how factors such as stories of other survivors became a source of strength for them and they channelled society's negativity into a motivating force.

The fourth and last sub-theme highlights factors that negatively impact the mental-health of survivors. Most of the interviewees agreed that social factors such as negative societal perceptions and medical, legal, and governmental procedures can be distressful, to the extent of leading to internalised victimhood and dysfunctional thoughts, perceptions, and routines. It was stated by one participant (RA1), "*Society plays an important role in impacting mental health. I have been blamed by the society for my attack by the virtue of being a woman, as a woman always gets blamed even without any fault of hers. A person internalizes such negative comments and also at times starts blaming themselves.*" The Covid- 19 pandemic has also contributed to the deterioration of the survivors' overall well-being.

### ***Theme 2: Attitudes towards counselling and psychotherapy***

In this theme we attempted to understand the perception and level of awareness about counselling and psychotherapy and its impact among survivors. The first sub-theme refers to 'Positive attitude about the impact of Counselling', wherein we explored the positive perceptions of some survivors. It was understood that some survivors found the group counselling sessions during the pandemic induced lockdown or individual sessions to be helpful, as they learnt about ways to cope and think positively, helping them gain behavioral insight. One survivor (MK) mentioned during the interview, "*During the lockdown we received counselling sessions and classes in group and individually, it acted as a distraction, kept us busy and occupied, and really helped us feel positive and empowered.*" This demonstrates how counselling and psychotherapy acted as a form of support for survivors, especially in stressful times such as the pandemic and lockdown, enabling them to feel empowered and capable of impacting their lives positively.

The second sub-theme highlights the negative attitude of survivors and lack of awareness about counselling. Some survivors felt that counselling was unnecessary as it is the equivalent of talking to a friend and not required if one has belief in God. It was analysed that these perceptions stem from either having been unable to openly share inner feelings in therapy/counselling or were a result of lack of awareness or knowledge when it came to counselling, as most of the survivors had not been exposed to counselling before in their lives. It was stated by NU that, "*I don't feel like I need counselling. I am strong enough that I don't need these. God has given me strength and a belief in myself to overcome anything and everything.*"

### ***Theme 3: The impact of structural and societal factors***

The four sub-themes underneath it analyze the deep psychological and traumatic impact larger social structures and society can have on acid-attack survivors. The first sub-theme: Societal stigma towards acid-attack, allows us to analyze the taboos and stigmas that exist in society. It was highlighted by survivors how being born and raised in a patriarchal society

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inculcates negative perceptions towards acid-attack survivors, and as a result survivors are obliged to hide or mask their faces, they face victim blaming and character assassination. A participant (AR) mentioned, *"Our society has always been unequal and has discriminated against people who're different. I feel that even after education there still isn't a lot of awareness that exists, especially in rural areas, and these stigmas still exist, where people make fun and taunt acid attack survivors."* Few survivors also mentioned that certain communities are attempting to overcome stigma, however, there is still lack of awareness especially in rural areas.

Subsequently, the second sub-theme explores how these negative societal perceptions impact the mental-health of survivors. It was mainly stated that derogatory comments or remarks about physical appearance are internalised and they deteriorate mental-health. The discrimination faced by survivors coupled with lack of empathy can also have an impact on their sense of self. Few participants also said that they experienced a pressure from either their family or society to seek revenge from their perpetrators. One participant (RA2) mentioned *"People tell all such things like "you should throw acid back on them, you should take revenge." They are still stuck. I tell them that it happened to me, you don't need to worry."*

The third sub-theme highlights structural and systemic failures and how medical, legal, or financial factors impact survivors. Participants shared how lengthy legal proceedings, delayed government compensation, medical expenses leading to an increased debt, and misconduct by police personnel, are all societal and structural factors that can act as emotional or psychological burdens, which can be stressful or overwhelming for survivors. Lack of support from government organizations and society makes it difficult for survivors to cope with the attack and they experience a 'secondary victimization' by the system. One participant (FA) stated that, *"FIR was registered, the accused was also caught, but what is exhausting is having to go to courts personally in such a sensitive condition, we ourselves have to fight for justice, the case goes on for years on end. I was in a very fragile condition medically but still had to go to court as my case went on for 4 years. I didn't get compensation until 2016, such legal and bureaucratic procedures are very excruciating for a survivor and affecting their mental health. Medically, going through surgeries is very painful, this also makes one prone to depression, I made paper bags just to earn money."*

In the fourth sub-theme 'state of employment and working conditions for survivors' has been analyzed. Survivors face multiple challenges and obstacles especially when it comes to finding employment and working outside home. Participants reported having faced discrimination, facing rejection due to their physical appearance, and being forced to work below their educational qualification level. They also felt that they weren't fairly compensated for their work, as their efforts were undervalued.

### **Theme 4: Post-traumatic growth**

The fourth theme revolves around post-traumatic growth exploring what coping and healing means to acid-attack survivors. It was attempted to analyze the self-perception of survivors post the attack. The first sub-theme is 'Coping Mechanisms' which explores the various coping mechanisms employed by the participants in their daily lives. Survivors highlighted how having a routine, engaging in physical activities, meditating, and being part of an NGO positively impacted them and enabled them to cope from the acid-attack and the secondary



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victimization experienced. A participant (RK) mentioned, "*Working at Sheroes, talking to friends at Sheroes helps to cope with depressive thoughts.*"

The second sub-theme attempts to understand the self-perception of survivors in recent years. Most participants stated how they experienced an increase in their self-worth and self-confidence when they gained control over their own life and narrative. In the recent years, post joining the NGO and gaining financial independence the self-perception of survivors improved significantly. This highlights the importance of control as mentioned in post-traumatic growth theory in positive psychology.

The third sub-theme specifically highlights the importance of financial independence and economic stability for survivors in enabling them to not only cope with the attack but also personal growth. It was analyzed that participants felt that work and employment led to a positive distraction for them, allowing them to be engaged and occupied. Participants also stated that being financially independent allowed them to feel empowered. One survivor (RK) stated that, "*I feel that being independent and having a community of friends or supporters helps one change their negative self-perception.*"

The fourth sub-theme refers to 'Internal Motivation' wherein we attempt to understand sources of motivation for survivors, such as having faith and will power, working on identity formation, and moving on from the past. Participants mentioned how they gained motivation and inspiration from the stories of strength of other survivors.

### CONCLUSION

Through our exploratory research, five superordinate themes emerged: Individual perspective on Mental Health, Attitudes towards Counselling and Psychotherapy, Impact of Structural and Societal Factors and Post-Traumatic Growth. These findings demonstrate that the nature of trauma experienced by acid-attack survivors is complex, which is aggravated by discrimination and structural limitations. All survivors have coped with the attack and their trauma in different ways over the years, all of them showing post-traumatic growth. There is a need for psychological interventions for survivors, along with systemic support.

### *Future Scope & Limitations*

Our research was limited by the Covid-19 pandemic which restricted researchers from conducting face-to-face interviews with the survivors, and had to resort to conducting interviews online.

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**Conflict of Interest**

The author(s) declared no conflict of interest.

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**Appendix:**

**Appendix A: List of Interview Questions**

1	What do you understand about the term 'mental health'? आप 'मानसिक स्वास्थ्य' से क्या समझते हैं?
2	What, according to you, are some factors that promote better quality mental health? आपके अनुसार वो क्या चीजें हैं जो मानसिक स्वास्थ्य को बेहतर बनाती हैं?
3	What, according to you, are some factors that affect mental health? आपके अनुसार वो क्या चीजें हैं जो मानसिक स्वास्थ्य को प्रभावित करती हैं?
4	What do you think about your mental health? आप अपने मानसिक स्वास्थ्य के बारे में क्या विचार रखते हैं/क्या सोचते हैं?
5	Do you think that the (perception of others towards acid attack survivors) stigma still exists in society? क्या आपको लगता है कि एसिड अटैक से पीड़ित लोगों के प्रति भेदभाव समाज में अभी भी प्रचलित है?
6	If yes, then has this stigma impacted your mental well-being? अगर हां, तो क्या इस भेदभाव ने आपके मनसिक स्वास्थ्य को कैसे प्रभावित करा है?
7	What are some of the coping mechanisms you use to deal with (less positive) negative feelings? वो क्या कुछ तरीके हैं जिनसे आप बुरे विचारों का सामना करते हैं?
8	How do you think your self- perception (your views about your self worth/body) has changed post the incident? आपके हिसाब से, हादसे के बाद किस तरह से आपके आत्म बोध (खुद के बारे में विचार) में बदलाव आया है?
9	What are the problems that you faced, in terms of financial issues, medical or legal help? Has that impacted your well-being? हादसे के कारण आपको वित्त-संबंधी, चिकित्सा-संबंधी, या कानून-संबंधी, किन मुश्किलों का सामना करना पड़ा है? क्या इसका असर आपकी मानसिक स्वास्थ्य पर पड़ा है?

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10	<p>Have you received psychological help or Counselling? If yes, then what impact has it had?</p> <p>क्या आपको किसी मनोचिकित्सक या सलाहकार से मानसिक स्वास्थ्य संबंधी मदद दी गयी है? अगर हां, तो इसका क्या फर्क आपको महसूस हुआ है?</p>
11	<p>If not, then do you think you need psychological support?</p> <p>अगर नहीं, क्या आपको लगता है कि आपको इस प्रकार के सहयोग/सहारे की जरूरत है?</p>
12	<p>Is it essential for survivors to get free mental healthcare services?</p> <p>क्या हादसे से पीड़ित लोगों के लिए निःशुल्क मानसिक सेवाएँ होनी चाहिए?</p>