The Lived-In Experience and Psychological Recount of Dog Bite Victims Visiting the Anti-Rabies Clinic in Kashmir: A Qualitative Study

Khalid Bashir¹, Zeenat Kausar², S. Muhammad Salim Khan³, Inaamul Haq⁴

¹Senior Resident, ³Professor & Head, ⁴Assistant Professor, Department of Community Medicine,

²Senior Resident, Department of Anatomy, Government Medical College, Srinagar

Correspondence: Dr Khalid Bashir, Email: drkhalidbashir.s@gmail.com

Abstract:

Introduction: There is a necessitated need for canvassing and prioritizing measures towards rabies elimination beyond existing statuesque post-exposure prophylaxis. Moreover, there is a need to characterize the psychological and intrusive experiences of dog-bite victims to portray a picture beyond the public health perspective. Objective: To get an expressive understanding of the psychological and lived-in experience of dog bite victims' to complement existing concepts. Method: The study was conducted at the anti-rabies clinic(ARC) of SMHS hospital which receives animal bite cases from the whole of Kashmir valley. Participants were selected by purposive sampling based on the inclusion criteria, and data saturation was reached with eleven participant interviews. One to one in-depth interviews were conducted with eleven (11) dog bite victims, using a preformed interview guide. Data analysis was performed using Colaizzi's phenomenological method to describe the individualistic experiences faced in peculiar conditions with familiar phenomena embedded in them. Results: Data analysis yielded three overarching themes and nine subthemes viz:-1. Spiritual and emotional ineffectualness. (Suffering and affliction, Spiritual sulkiness, Emotional emergence) 2. Flashbacks of being hindered and defenseless. (Lack of focus in one's work, lacking the courage to protect, Being shaky) 3. Social and economical implications. (Financial loss, group and peer detachment, preferring isolation) **Conclusion:** The results of this study showed that dog bite patients experience an unpleasant phenomenon in the face of being bitten by the dogs and are subjected to severe psychological pressures that require attention and support of medical professionals, psychologists and government authorities.

Key words: Dog bites, Post-exposure prophylaxis, psychological, Rabies.

Introduction:

Rabies remains one of the principal public health problems, having economic, social, and human health dimensions in many countries of the world. The animal bite patients suffer not only from the physical effects of the bite but also from the intangible psychological consequences. Animal mauling, especially by dogs remains a worldwide problem that is sometimes fatal and particularly affects children. [1,2]

Furthermore, children afflicted by dog bites mostly receive injuries on the head; and have a higher risk of resulting in serious injury or death. The World Health Organization (WHO) faltered to achieve the target of elimination of human rabies transmitted by dogs in South-East Asia by 2020. In India, around 15 million people are bitten by animals every year and the majority of bites are by dogs. The post-exposure rabies prophylaxis to these canines and other animal

Quick Response Code

Access this article online

Website:

www.healthlinejournal.org

DOI:

10.51957/Healthline_407_2022

How to cite this article:

Bashir K, Kausar Z, Khan S, Haq I. The Lived-In Experience and Psychological Recount of Dog Bite Victims Visiting the Anti-Rabies Clinic in Kashmir: A Qualitative Study. Healthline. 2022; 13(3): 208-213.

bite victims leads to enormous economic losses annually. There are fewer studies explaining dog bite victims livid in experience and phenomenon. Thus a study giving a qualitative perception of animal bite victims needs to be assessed to present their secluded suffering. Moreover, there is a need to assess and present the secluded suffering of the dog bite victims. The neglected flipside of this public health problem is of significant concern. There is a necessitated need for canvassing and prioritizing measures towards rabies elimination beyond existing statuesque post-exposure prophylaxis. Furthermore, there is a need to characterize the psychological and intrusive experiences of dog-bite victims to portray a picture beyond the public health perspective. As such an authentic, legitimate perspective that could potentially help in achieving the goal of rabies elimination by garnering a more holistic response from the various stakeholders and policymakers towards achieving the goal of a rabiesfree world by 2030 is very much needed.

There are substantial numbers of studies showcasing burden of rabies disease, epidemiological profile, factors for delay in getting post-rabies prophylaxis (after animal bite) and economic burden of post-exposure rabies prophylaxis. However, there is scarcity of studies showing intangible aspect of dog bite victims or animal bite victims. The study aims to highlight the elusive impalpable aspect of the dog bite victims, so that policy makers and health care professionals become cognizant of this immense and evasive complication associated with the dog bite victims. Moreover, study will provide a propelling thrust of advocacy in mobilizing opinion of policy makers in taking curbing measures towards the menace of stray dog bites and elimination of dog mediated Rabies."

Method:

The qualitative phenomenological study was conducted on dog bite victims attending the antirabies clinic of the SMHS hospital in Kashmir to get an understating of the lived-in experiences of the dog bite patients. The study period was November-December 2021.

Colaizzi's phenomenological method was used for data analysis as it generates patterns having similarities and tries to reveal the explanations that people experience in particular circumstances. [6] The approach guarantees the authenticity of the collected experience of participants in particular circumstances. This method was used as it delves into the experience and feelings of the dog bite patients having gone through the identical phenomenon of agony and suffering.

Study subjects: Dog bite victims attending the anti-rabies clinic at SMHS hospital which caters to patients from whole Kashmir, The study was conducted at the anti-rabies (ARC) of SMHS hospital which receives animal-bite cases from the whole of Kashmir valley. Participants were selected by purposive sampling based on the inclusion criteria and data saturation occurred with eleven participant interviews. One to one in-depth interviews were conducted with eleven (11) dog bite victims, using a preformed interview guide.

Inclusion criteria: Only dog bite victims above the age of 18 years with WHO classification category III were included in the study & who gave written informed consent. The number of required respondents was determined by interviewing dog bite victims until the data saturation and no new topics were generated.

Approval from Institutional Ethics committee was taken before commencing the study.

Data Collection:

An interview guide (outline), with open-ended questions, was framed in advance based on consultation with two experts and a review of the literature. Interview timing was scheduled as per the convenience of participants. Informed consent (audio-recorded) was taken from the participant for participation and recording of the interview. Confidentiality and anonymity of identity were assured. The interview started with the introduction of the interviewer followed by explaining to the participants' research purpose, method, and content. The interviewer maintained neutrality, used techniques such as unconditional acceptance, active listening, to promote the authenticity of the data and to avoid bias. The interviewer familiar with the phenomenological qualitative method performed the interviews. All interviews were conducted by the same researcher who has experience in qualitative studies interviewing and interviews were conducted in the Kashmiri language. However, interviewees were given the liberty to speak in English/Urdu/ Kashmiri. The interviewer asked questions appropriately according to the interview guide and recorded the key points and perceptible changes of the interviewees' mood and tone during the interview. The interviewees were not interrupted during the interview. The interviews ended once all the intended questions/content in the interview guide were fulfilled. The interviews lasted from 35 to 65 minutes. All recordings were transcribed within 24 hours with the verbatim English translation of Urdu/Kashmiri language used by the interviewees and data was analyzed by Colaizzi's phenomenological analysis method. The transcripts (interview materials) were read and reread several times to identify themes and categories by two researchers. Two researchers coded the transcripts line by line and extracted meaningful statements, and formulated themes for the meaning of sentences. Two researchers independently reviewed the themes, summarized conflicting opinions on the contents of a theme, and resolved them after discussion. After review, a coding frame was

74

Married

Male

developed, and the transcripts coded. The coding frame was changed according to the development of new codes, and the transcripts were reread according to the new structure. The whole exercise was meticulously used to develop categories, which were transfigured into broad themes after further discussion. The specific steps are referred to as the phenomenological 7-step analysis method of Colaizzi. [7]

Study Rigor: The same interviewer who had expertise in qualitative studies conducted all interviews and researchers who read the transcripts were not involved in the interviewing process to reduce bias. Final themes were established during the thorough threadbare discussion with two researchers who were experienced and knowledgeable of the standard qualitative study analysis guidelines. [8]

Results:

Demographic details of the participants are given in Table 1. Data analysis yielded three overarching themes and nine subthemes. (Table 2)

Theme 1: Spiritual and emotional ineffectualness

:- The dog bite victims stated that after facing a mauling from the dogs, they developed a strong inner feeling of psychological and emotional instability.

Retired Government employee

Participants' Age in Marital Education* Occupation Gender **Years Status Female** 50 Married Matriculation Shopkeeper Male 20 Unmarried **Pursuing BBA** Student Male 45 Married B.A Readymade garments 8th class Female 68 Married Homemaker 12th class **Female** 19 Unmarried Student **Female** 38 Married M.A Urdu Teacher Male 21 Unmarried B.Tech Student (fourth semester) Student 11th **Female** 35 Married Homemaker Male 39 Married B.Sc Orchardist 12th pass Male 24 Unmarried Sales executive

Table 1: Demographic Details of the Participants

Matriculation

^{*}BBA=Bachelor of Business Administration, BA=Bachelor of Arts, MA=Master of Arts, B.Sc.=Bachelor in Science

Themes	Sub-themes
1. Spiritual and emotional ineffectualness.	I. Suffering and affliction ii. Spiritual sulkiness, iii. Emotional emergence,
2. Flashbacks of being hindered and defenseless.	I. Lack of focus in one's work, ii. Lacking the courage to protect, iii. Being shaky
3. Social and economical implications.	I. Financial loss, ii. Group and peer detachment iii. Preferring isolation

Table 2: Themes and Sub-Themes generated by Qualitative Analysis

They felt subdued, shaken up, and defeated. They wanted to shrug off the memories of the unpleasant events they had experienced after getting bitten by the dogs.

"......Soon after offering my Fajar Namaz (morning prayers), some 7 to 8 dogs chased me, it was terrifying. I tripped down and they mauled me, both bones in my forearm got fractured. I suffered multiple wounds, no one was around there. I felt low and shaken to the core, my inner self is in tatters"

".....After realizing I was hounded by the dogs, I felt perished for a moment. At that moment, I just regretted my helplessness....."

"......I lost my wages, my shop is closed, I am very upset, suffered my regular work. I was really afraid at that moment and felt they might kill me and what will happen to my family....."

Theme 2: Flashbacks of being hindered and defenseless.

The experiences shared by these dog bite victim interviewees showed that they had suffered an internal failure and helplessness. They had suffered disgrace and some of them felt disarrayed as a wide array of emotional responses were reported by them after the dog biting incident like fear, shock, anger, frustration, dejection, irritation, and feeling perpetual vulnerability.

"......I feel torn out and debased, the dog licked my face after biting my hand, leg, and forearm. I can tell you, it not only scuffed me physically but mentally as well....."

"......I was working in the orchard, the pack of dogs mauled my four-year-old son, while trying to save

him they attacked me as well. I got bitten as well. My son got severe lacerations on the face and injury on the right eye, he had to get operated on twice........

"........ There is still a lot that the surgeons need to do but we could afford expenditure till now only (crying)..."

Theme 3: Social and economical implications.

The interviewees revealed that dog bites have substantial and far-reaching social and economical implications. Some of the respondents had suffered the loss of daily wages apart from out-of-pocket expenditure to meet the consequential dog bite management costs. The dog bite victims were unequivocal in their statements regarding the feeling of detachment and being thrown away.

"......I lost wages for the whole week; I'm stuck at home due to tripping (due to a dog attack) related fracture in my right ankle. It is feeling nasty; you have to brood at home due to this awful dog bite......"

"......they operated my son twice on the right eye, I had to spend Rs.24000/= out of my pocket on medicine and other things. It hit me hard and led me low and diminished monetarily"

"......can't make ablution, can't offer routine prayers, my forearms and buttocks are bitten, the whole pack of dogs pounced on me on that day. I am nursing my wounds at home......"

Discussion:

The study has explored the experience of dog bite victims to galvanize the perception of these patients towards the impacts of the dog bite injuries on their life. Furthermore, in this qualitative study, we attempted to discover livid experiences of dog bite victims and inquired on how they cope with the sudden changes in their life after the incident. There are very less number of studies having adopted phenomenological approach for the study of phenomenon of dog bite victims, so, comparison with other studies couldn't be done after doing thorough review of the literature to the best of our abilities. Moreover, our objective is to complement other existing studies [9-11] and assemble argument for the advocacy of measures towards rabies elimination. As the precursor to intangible sufferings of these victims is dog bite only. We need to nip it in the bud. Therefore, it revolves around the pivotal measures towards rabies elimination. Our study highlights the flip side of the sufferings to mobilize support for the measures towards elimination of dog mediated human rabies.

Present study noticed and demonstrated another side of the dog bite victims, the inexplicable suffering meted out by them was brought to the fore which shows they had a proverbial "dog's life" immediately after being bitten by the dogs. We explored the impalpable emotional, mental, and inner sufferings of the dog bite victims; nonetheless, the intangible hurt endured by children after being bitten by dogs couldn't be translated. Moreover, children are vulnerable to getting bitten on the head and neck, mostly leading to awful injuries needing cautious and careful management. [9] There is a need to think and examine out-of-box measures to attain the goal of achieving a dog-free world. We need to look beyond the capture, neuter, vaccination, and release policy. There is a potential need for the use of oral rabies vaccines (ORVs) in free-roaming dogs in India to control dog transmitted rabies. Due to a lot of attentive and iterative work on ORVs over the last four decades, we are having modern and more efficacious ORVs with high safety profiles whilst generating a consistent immune response. Pertinently, the use of oral rabies vaccines has shown favorable gains in putting brakes to canine-mediated rabies in Europe and the USA. The ORVs to freeroaming accessible and evasive canines can prove not only cost-effective but a humane measure in a country like India where every 2 seconds a person is bitten by a dog and more than three million people receive post-exposure prophylaxis treatment each

year. Moreover, India reports 36% of the world's rabies deaths as rabies is endemic here and approximately 18,000-20,000 rabies deaths are reported each year of which 30 -60% are children less than 15 years of age. So, capacity building: training dog vaccinators and dog catchers, switching from dog population control to mass dog ORVs campaigns can prove a game-changer in the fight against rabies. Present study manifested the noticeable need of controlling and preventing incidents of dog bites and dog mauling to prove humane to humans.

Conclusion and recommendations:

The study provides an elucidative and explanatory analysis of the lived experiences of dog bite victims, wishing to draw the attention of the planners and policymakers. The study creates propelling thrust for the use of cost-effective mass dog vaccination program in the Indian context. The results of this study showed that dog bite patients experience an unpleasant phenomenon in the face of being bitten by the dogs and are subjected to severe psychological pressures that require attention and support of medical professionals, psychologists and government authorities.

There is a need to pay attention to the dog bite victims' lived experience, and health care professionals need to support them through education, and counseling. The policymakers should devise other supportive programs to minimize the psychological trauma caused by the dog bites, apart from enhancing measures towards elimination of dog mediated human rabies.

Declaration:

Funding: Nil

Conflict of Interest: Nil

Reference:

- Lang ME, Klassen T. Dog bites in Canadian children: a five-year review of severity and emergency department management. CJEM 2005;7(5):309-14.
- Kaye AE, Belz JM, Kirschner RE. Pediatric dog bite injuries: a 5year review of the experience at the Children's Hospital of Philadelphia. Plast Reconstr Surg 2009;124(2):551-8.
- 3. Sacks JJ, Lockwood R, Hornreich J, Sattin RW. Fatal dog attacks, 1989-1994. Pediatrics 1996;97(6 Pt 1):891-5.
- 4. Brogan TV, Bratton SL, Dowd MD, Hegenbarth MA. Severe dog bites in children. Pediatrics 1995;96(5 Pt 1):947-50

- Sudarshan MK, Madhusudana SN, Mahendra BJ, Rao NS, Ashwath Narayana DH, Abdul Rahman S, et al. Assessing the burden of human rabies in India: Results of a national multi center epidemiological survey. Int J Infect Dis 2007;11:29 35.
- Shosha GA. Employment of colaizzi's strategy in descriptive phenomenology: A reflection of a researcher. Eur Sci J 1857;8:31-43.
- 7. Morrow R, Student P, Alison H, Senior R. Colaizzi's descriptive phenomenological method. Psychologist 2015;28:643-4.
- Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. Int J Qual Health Care 2008;19:349-57.
- 9. Shah V, Bala D V, Thakker J, Dalal A, Shah U, Chauhan S. Epidemiological determinants of animal bite cases attending the anti- rabies clinic at V S General Hospital, Ahmedabad. Healthline 2012;3(1):66-8.
- 10. Menezes R. Public health: Rabies in India. CMAJ. 2008;178(5):564.
- 11. World Health Organization. Rabies. Available from: http://www.searo.who.int/india/topics/rabies/en/. Accessed on 06 November 2019.