

Conflict induced disability: A study of pellet victims in Srinagar.Syed Wasifa Mehraj Kamili¹,Saima Farhad²**Abstract**

Armed conflict is a global phenomenon with serious implications for mass population. It results into powerful and long-lasting impact in the form of mortalities, morbidities, severe injuries, permanent disabilities and also restricts the access of basic facilities to the affected population. Among the catastrophic events that occur during armed conflict, disability is one of the devastating consequences which not only impacts the victim but also proves to be distressing for whole society. In the context of Kashmir Valley, armed conflict since last three decades has resulted in extrajudicial killings; arbitrary detentions; enforced disappearances and formation of a large number of people with disabilities due to which there has been a serious impact on the development and economy of the society. According to the data of Handicapped Association of Kashmir (as cited in Sidiq, 2015) nearly two lakh people have been disabled due to the conflict in the state from the last 20 years. Disability is not limited to the impairment of functioning of particular sensory or locomotory organ (s) only but it has also a long-term impact on the overall well-being of the survivor (Thapa & Thaler, 2012, p.7). As a result, the victims are not disabled physically only but it has drawn the indelible marks on their mental health as well. This statement gets corroborated with the study conducted by The Department of Psychiatry, Government Medical College, Srinagar which has revealed that, of the total number of pellet victims, 85% have developed several psychiatric disorders. Depression was the most common followed by adjustment and Post-Traumatic Stress Disorder (PTSD) among them. Hence, this study would aim to elucidate the multifaceted aspects of morbidity faced by the conflict induced disables through certain case studies which would throw light on physical, social and emotional well-being of the survivors.

Keywords: Kashmir, Armed conflict, Disability, Impact, Pellet Victim

Introduction

Conflict is one of the serious ancient phenomena visible almost in every society. It is one of the salient features of human society and is as old as mankind. It is an

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expression of rivalry, aggression, negative attitudes, hostility and opposition (Thakore, 2013, p.7). It can be defined as state of disagreement between the opposing individuals or groups where each of them tries to persuade the opposite one. In other words, conflict occurs when the interests of one party come into engagement with that of another or others either intentionally or unintentionally (Cooper, 2008, p.85). It can involve both tangible and intangible products of interest which are accommodated through deceit, intimidation or by some political means (p.86). According to Jeong (2000), conflict is said to exist when two or more groups develop a state of disagreement over values and claims for power, status and resources so as to injure and eliminate the rival by the opponent group (as cited in Folarin, n.d, p.2). It is thus a dynamic concept which involves energy and movement as its attributes and thus indicates its destructive potential (Cooper, 2008, p.86).

Conflict is a lasting phenomenon whose roots are embedded in interests and dissatisfactions. Since wants and desires for betterment are one of the components of human societies, these are fulfilled on the expense of others which carry seeds of conflict (p.88). Thus, conflict mostly occurs in every part of the world with varying degree, intensity and consequences across the regions and sub-regions. The reasons of the conflict could be diverse and complex and can occur at different levels. Not only this, but the nature of conflict also vary which could be mostly intra-state conflict, inter-state conflict and trans-state conflict. However in politics, conflict involves clashes, wars and revolutions which involves the use of force as in armed conflict (Hassan, 2013, p.16). Thus the reasons could be economic, social or political such as dispute on territory, breakdown of diplomatic ties, economic strains between nation states and cyber-attacks that precipitate state paralysis, undermine national security, or provoke international conflicts with sponsoring states (Bugajski, 2011, p.1). As a result of it stress or tension develops among stakeholders which leads to serious repercussions on social conditions. Thus, the conflicts are ubiquitous, occurring at different levels along with the array of consequences.

Armed conflict

Armed conflict is one of the major reasons for deaths and injuries worldwide accounting for millions of people every year. Globally, it has become a growing concern for the developing nations. According to the Uppsala University Conflict Database, an internationally recognized tool that manually collects data on armed conflicts, an armed conflict is a contested incompatibility that concerns government and / or territory where the use of armed force between two parties, of which at least one is the government of a state, results in atleast 25 battle-related deaths in one calendar year. According to armed conflict database, there are 42 active conflicts around the world causing 180000 fatalities and more than 12 million refugees. (Cole,

Ying Xu and Reitter, 2016, p.1). Since the reasons of armed conflict could be numerous but it results in massive levels of destruction to people physically, psychologically, culturally and economically. It affects the social fabric of society drastically. Households are left without breadwinners, the livelihood of individuals is threatened, people are forced to leave their homes, access to health facilities is disrupted and ultimately the human rights of individuals are not preserved (Hoeffler & Reynal-Querol, 2003, pp.3-4).

Armed conflict affects the population not only directly but it has indirect implications too and the burden of it remains in post conflict era as well. In-fact, indirect effects are as equal as the direct ones as the latter is limited to battle deaths whereas the former has deleterious effect on the growth and development of a country (Guha-Sapir & Van Panhuis, 2002, p.15). The aftermaths of conflict results into forced migration, injuries, permanent disabilities, long-term problems for refugees, destruction of infrastructure, outbreak of epidemics, disruption in vaccination programmes and ultimately affects the integrity of a nation (Farrell & Schmitt, 2012, pp.10-11). Out of the several consequences the major burden of conflict includes the wide range of non-fatal injuries which remains as the impressions of armed conflict even after the decades in a growing nation. According to World Health Organization (as cited in Murray, King, Lopez, Tomijiba, Krug, 2002, p.348) it is estimated that “0.70% of the global burden of disease in the year 2000 was due to conflict, including years of life lost and years of life lived with disability”. It has been corroborated by the report of Global Burden of Disease, 1990 (as cited in Murray, King, Lopez, Tomijiba, Krug, 2002, p.347) which illustrates that “non-fatal outcomes of disability resulted in 4.8 million disability adjusted life years worldwide, about the same as fires and more than half that caused by road traffic injuries”.

Armed Conflict in Kashmir

Over the past seven decades, Kashmir has remained a bilateral dispute between two neighboring nuclear powers; India and Pakistan where both the parties have tried to exceed their powers – leaving behind the hapless and impoverished population. In-fact, it is considered as one of the longest unresolved conflicts in the South Asia (Zia, 2019, p.5). While India and Pakistan have fought several wars on this part of the world so as to conquer it and take the control of its resources, it has been disrupted by several resolutions passed by one of the international organizations working for peace all over the world, the United Nations (UN) and by signing certain treaties including Shimla Accord which has been agreed by both the countries partially. Now looking back into the genesis of Kashmir dispute, it started right after the independence of India and birth of Pakistan in 1947. At that time several princely

states got absorbed in both the new nations, however the then ruler of Kashmir Maharaja Hari Singh decided to be independent hoping that it might be permitted to remain independent without acceding to either of the nations. But the things turned upside down after the invasion of Pakistani tribesmen that compelled Maharaja to seek help from the then Viceroy of India, Lord Mountbatten which provided him military support, in return to which Maharaja signed, which is controversial in contemporary times as well, known as “letter of instrument of accession to India” on October 27, 1947 (Sehgal, 2011, p.188). Initially India agreed to conduct plebiscite, however later it changed its mind during 1950s (Lone, 2018. p.21). And the plebiscite was never held.

As a result of it, in 1950s and 1960s, political discontent with central government emerged which tried to control politics in the state. Finally, in 1964 the first pro-independence and militant group Jammu Kashmir Liberation Front (JKLF) emerged to fight for the independence. It therefore, resulted into beginning of militant movement in 1989, fighting for self-determination against the Indian armed forces that has transformed into battle now, involving the hundreds of different militant groups, besides killing, maiming and abuse of human rights blatantly in Kashmir (Qayoom, 2014).

Meanwhile, the armed conflict which has been going in Kashmir over the last three decades has now turned into everyday massacre with more than 70,000 people who have lost their lives, and the number of enforced disappearances according to the findings of Jammu Kashmir Coalition of Civil Society (JKCCS) is nearly 8,000. Similarly, continuous strife and use of live ammunition have rendered hundreds of people either partially or fully blinded with severe casualties among others, thus leaving behind a huge proportion of population that have sustained life-long impairment, resulting into two lakh population of disables as per Handicapped Association of Kashmir (as cited in Sidiq, 2015). It is pertinent to mention here that among the several years of insurgency, Kashmir witnessed some noted civilian uprisings in 2008, 2010 and 2016. As far as the year of 2008 is concerned, it witnessed the noted uprising involving 671 total killings followed by 2010 civil uprising which too witnessed bloodshed in the form of 470 killings out of which 167 were civilians, 201 were militants and 102 were armed forces respectively (Association of Parents of Disappeared Persons and Jammu Kashmir Coalition of Civil Society, 2018). Similarly, the year of 2016 remained as one of the deadliest involving massive pellet gun injuries and often reported as “Epidemic of dead eyes” according to Barry, 2016 (as cited in Zia, 2019, p.3). According to Jammu Kashmir Coalition of Civil Society the total number of killings in 2016 were 383, out of which 145 were civilians and over 15000 persons received grave to minor injuries that included blinding, maiming, bone fractures of civilian in state forces action (Jammu

Kashmir Coalition of Civil Society,2016). Among injured, the majority of them received pellet injuries in their eyes ensuing them completely blind and thus creating a significant population of disabled.

Similarly,the year of 2018, like previous years, also witnessed many counter-insurgency operations led by armed forces resulting into the death of 267 militants and 159 armed forces. The same year witnessed the killing of 160 civilians also amounting to total 586 killings (Association of Parents of Disappeared Persons and Jammu Kashmir Coalition of Civil Society, 2018). Thus, the figures are giving a serious picture of the unresolved conflict and therefore the violations are on a continuous go. Besides, the gross human rights violation like extrajudicial killings, torture, rape, custodial killings, enforced disappearances are normal phenomenon prevailing in Kashmir since last several years which have been carried out by 700,000 Indian armed forces that have been deputed by the Government of India (GoI) in Jammu and Kashmir. This is an incredibly high concentration of forces for an area having population not more than 12 million. Hence deputation of such huge troop of forces has made Kashmir as one of the most densely militarized places on earth with aspersions often been casted on the freeness and fairness of elections conducted under such heavy military presence (Sehgal, 2011,p.188). Thus, despite much upsurges between military forces and the rebellion groups, it has always been Kashmiri people who have faced the brunt of this conflict, waiting for long-lasting solution to the dispute of Kashmir.

Disability

As the societies are growing, the nature and forms of armed violence are also altering – leaving behind the hapless human population. The use of nuclear weapons, artillery machines, explosives, landmines and other rampantforms of weapons have transformed the composition of modern civil wars from the earlier centuries: the shift in impact from combatants to civilians (Hoeffler & Reynal-Querol, 2003,p.7). Thus, according to World Health Organization (WHO), people suffer during as well as after the conflict, however millions of them sustain severe injuries resulting into life-long disabilities and mental health problems (as cited in Buchanan,2011,p.52). Although the term ‘disability’ has been defined and used in several conventions and organizations but according to WHO (as cited in Krishna, Dutt and Rao, 2015, p.5); “disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being”. While being a person with disabilities is not a new phenomenon as there is a huge proportion of population worldwide that lives with disability but the difference lies in the nature of disability whether it has been the congenital or acquired during the life time. According to WHO and World Bank (2011) it is estimated that over a

billion people (or 15% of the global population) have a disability (The World Bank, 2019). Similarly, according to Helander, the current total figure is around 276 million of whom 183 million are in developing nations and 93 million in developed countries and by 2025, this number is going to have elevation from 183 million to 435 and from 93 million to 138 million in developing and developed countries respectively. Therefore, based on these projections it will ultimately contribute to around 8.2 percent of the world's total population by 2025 (as cited in Krishna, Dutt and Rao, 2015, p.9).

Disability in conflict zone – *Kashmir Scenario*

In all the situations of conflict or armed violence, a survivor is bound to experience both physical as well as psychological imbalances of different nature. Out of the several consequences, disability due to armed violence, is one of the inevitable phenomenon, as the number of fatalities after the cessation of war is as high as people incurred during the war (Hoeffler & Reynal-Querol, 2003,p.4). In case of the conflict-ridden zones, particularly in Kashmir, disability is carrying with itself both physical impairment as well as mental trauma. Kashmir being a bilateral dispute between two nation-states have resulted into militarization and human rights violation which includes extrajudicial killings, rape and disappearances (Lone,2018,p.6).The huge militarization thus gradually snatched away the rights of the people living in Kashmir. And pertinently, Kashmir saw a birth of more disables through the ongoing conflict by the use of landmines, explosive devices and pellet shot-guns. It is of prime importance to mention here that there has been upsurge in the population of disables after the use of landmines and explosives near border areas and by pellet guns that are shot mostly above the waist on the protestors. It gets supported by the statement of Project Coordinator of Handicap International, according to whom, “landmines and IEDs have caused nearly 1076 deaths in J&K out of the total 3646 casualties that took place in the state till 2012” (Hassan, 2015).

2016 civil uprising – *the year of dead eyes*

As already mentioned above, there have been several instances in Kashmir wherein a significant number of people have lost their lives and sustained permanent injuries. However, the number of injuries started occurring rapidly right after the introduction of, as stated by the Indian policy makers, non-lethal weapon known as ‘pellet guns’ in 2010 according to Singh,2016 (as cited in Zia, 2019,p.2) It has resulted into a range of violent forms of injuries that are used against violent mobs and demonstrations while controlling the ‘law and order’ situation in Kashmir according to the Government of India (GoI). However,during 2016 civil uprising, protests emerged in all the districts of Kashmir valley, and to control over that, Indian armed forces resorted to firing tear-gas and PAVA shells, pellets and bullets on the

protestors resulting into the mass deaths and injuries particularly eye injuries. As a result of it 'mass blindings' began to be associated with Kashmir (Zia, 2019, p.3).

Hence, according to Jammu Kashmir Coalition of Civil Society, the total number of killings was 383 which included 145 civilians, 138 militants and 100 state and central armed forces (Jammu Kashmir Coalition of Civil Society, 2016). The number of killings, however, has been estimated to more than eighty eight people, over eleven thousand injured and more than eight hundred injured in eyes or blinded by Indian troops (Zia, 2019). In addition to it, Amnesty International, 2017 (as cited in Zia, 2019) revealed that pellet shot-guns wounded more than 6000 persons including 782 eye injuries. It is relevant to mention here that the eye injuries included both partially as well as fully blinded individuals. In comparison to the civil uprising of 2010, the magnitude of injuries and killings was very high in 2016. This has been supported by the statement of one of the renowned eye specialists of Kashmir Valley, Dr. S. Khanday who explicated that "we got to see less mortality than 2010 as there were fewer cases of shell and bullet but the pellet injuries were at elevation" (personal communication, November 14, 2016). According to him, the age group that was mostly affected ranged between 10-25, without any gender distinction. Therefore, around 900 surgeries were conducted by doctors in order to recover the losing eyesight of local masses ("Dr. Natarajan at SMHS Hospital for pellet victims", 2016).

Thus, the subsequent events of civil uprising have affected the local masses at large magnitude, particularly creating a section of society which is forfeited of the perception of light. As a result of it, a significant population of pellet victims have been formed that have been reduced to living dead; damaged, stigmatized and pushed towards darkness. They have been subjected to systematic form of human rights violation which has changed their status from 'able bodied' to 'specially abled individuals'. It has thus considerably changed their way of living and hence resulted into multifaceted issues and challenges to which they are the everyday survivors. Therefore, the purpose of the study was to understand the living patterns of pellet victims who have mostly got injuries above the waist line, specifically in facial region rendering them either partial or complete blind. And the certain research questions that were explored during the study were as follows:

How pellet injury affected the overall growth and development of survivor?

What was the impact of pellet injury on physical, social and emotional well-being of survivor?

What were the challenges faced by them in their day to day lives?

Research methodology

In order to understand the implications of pellet caused disability among the affected group, we conducted fifteen interviews. The form of injuries among pellet victims being diverse, so the inclusion criteria for the study that was considered included; (a) a victim with pellet injury in facial region (b) who has completely or partially lost his vision (c) who voluntarily gave his consent to participate in the study. Survivors within the age group of 18-22 were included in the study. Since the study was sensitive in nature dealing with victims who have lost their vision due to pellets shot by state armed groups, it became initially difficult to locate them as they share numerous threats and vulnerabilities. However the social work background of researchers helped them in dealing with such situation. Thus, the participants were approached through certain acquaintances, working in some notable non-governmental organizations who had an experience of working with such survivors. The resource person(s) therefore explicated the purpose of study to the participants and later depending upon the feasibility of the participants, both time and place of interview was scheduled by resource person(s). It is pertinent to mention here that out of all the participants that were contacted by resource person(s), few participants were reluctant to share their experiences. Thus, considering the expediency of participant, either face to face or telephonic interviews were conducted so as to gain trust as well as to build rapport with the participant.

In addition to it, the study was carried in both rural as well as in urban areas of district Srinagar. The aim and the purpose of study was explained to them and the interviews were conducted by obtaining prior oral consent from all the fifteen participants. Most of the interviews were tape-recorded by taking consent from the participants and was avoided in few cases where they were reluctant. Thus, maintaining the principle of acceptance, such interviews were only documented in written form. Besides, semi-structured interview schedule with observation method were used as tools for data collection. Both open ended and close ended questions were framed so as to develop comprehensive understanding of the phenomenon. Each interview lasted for 50-60 minutes. Interviews were later transcribed and emergent themes were generated so as to elucidate the numerous dimensions of being hit by pellet gun.

Data Analysis

Primary data was collected by interviewing the pellet victims who have either partially or completely lost their vision during several uprisings. The names of the participants were kept unchanged in certain cases and changed in majority of cases depending upon the consent of the participants. Analysis of data was inductive in nature focused on generating emergent themes.

Emerging Themes

The accounts of the pellet victims have been reproduced in the form of following themes which are discussed below:

1. Impact on physical functioning

Acquired disability has a profound effect on the overall well-being of the survivors. In fact, it leads to myriad consequences which act as impediment to their growth and development. From physical disability to socio-economic impairment it affects the lives of survivors, their family members and other support groups. In fact, it has been estimated that at least four members of the immediate family get affected directly while meeting the needs and adapting to the situation of their disabled one (Krishna, Dutt and Rao, 2015, p.11). In this study the use of pellet guns have grievously affected the overall living patterns of pellet victims. Since most of the participants have either partially or completely lost their vision in one or both eye(s), it has turned their life upside down.

During the study it was also revealed that some of the participants were shot at multiple sites such as head, nose, chest, teeth and neck which has compounded the nature of complications in addition to partial or complete vision loss. As a result of it the participants were facing numerous problems which were affecting their daily routine. In most of the cases where the participants have lost their vision either partial or complete, they were not able to recognize their loved ones and had only assumption of light in the surrounding without the formation of image through their eye(s).

Farzan, aged 18, with 30% vision in his left eye and completely blind with right eye, faced tremendous difficulties after being hit by the pellets twice in the year. Adding to his woes his grandfather and father died which put serious brunt on his socio-emotional well-being. Narrating his ordeal, he said

After this incident my father died... I was not able to see him... even when the shroud was being pulled over his face... as I have got blind now...

He further added:

Whenever I wants to see myself, I usually takes favor from my friend... who click my picture... which I zoom and then tries to see myself with the help of lenses...(Farzan,18)

Since the participant was shot by pellets in the facial region 'twice' in the same year, it resulted into multifaceted forms of injuries particularly affecting his teeth and brain. While interviewing it was noticed that Farzan was stammering, with his front incisors being absent. When asked about the reason he responded:

I have lost it due to pellets ... as after regaining consciousness the first thing I noticed and felt bad... was about my teeth... My friends make fun of me... (he was telling this while being shy and smile on his face). (Farzan,18)

His smile was filled with agony that was reflected by his inability to walk and move around to unknown places without the support of his friends, thus hindering his physical functioning.

Impact of pellets on physical health of the victims have also been reported in the study conducted by Maqbool (2017) in which it was revealed that mostly pellets were fired above the waist line affecting nose, neck, chest and eyes, thus creating complications for the survivors. In majority of cases, eyes were injured which resulted into loss of vision and thus rendered them disabled.

2. Social Stigma and discrimination

Stigma was another theme that was discussed by the participants. It was one of the important aspects that was affecting participants, not only socially, but emotionally as well. In fact, discrimination in case of any marginalized group has deleterious impact on their psychosocial well-being (Kagan et.al,2004,p.3).

Zahid (name changed), aged 21, hailing from downtown area of Srinagar, got his left eye completely damaged in 2018. The tragedy resulted into numerous multifaceted issues particularly affecting his health and social well-being. He sees himself very fortunate for attaining strong support from his family due to which he is also continuing his studies, however; he believes that social environment is not supportive in Kashmir. He is of firm belief that people like him are not seen normally rather they are seen as differently as if they have committed any crime. Moreover, he doesn't play with his friends now as he was no longer called by his friends for same. He states:

We are looked as different creatures... we are seen as underprivileged and helpless people... and that makes our soul dead...

He further reported:

When we attend some social gatherings... people make a group and start gossiping about us... It hurts me... but it has to be kept within heart only... (Zahid,21)

Rashid, aged 19, while narrating his ordeal about the social discrimination revealed:

People blame... nobody says... why did the armed forces fired pellets... but I am blamed... why did I leave... It hurts ... (Rashid,19)

Thus, it is clear from author verbatim of the participants that they have been excluded and blamed for the situation, as a result of it they feel alienated and departed from the mainstream society. These findings have been testified by Thapa & Thaler (2012) in which it was revealed that persons who sustained disabilities due

to armed violence in four different countries (Uganda, Columbia, Pakistan and Haiti) were subjected to social discrimination and blamed for their disability which leads to their social exclusion. They were highly marginalized, considered as social burden and not as persons with abilities and aspirations. Similar findings have been reported by Businge (2016) in which it was stated that people with disabilities in Uganda were stigmatized which lead to their rejection in communities. They were physically abused, disowned and were subjected to live in dehumanized conditions. They became invisible in the provision of services due to negative attitude of people. As a result of it such families had to displace from one area to another and were abhorred and discriminated.

3. Poor mental health

One of the most important themes that emerged during the study was the poor mental health of the participants. Pellet injury had not only affected the physical and social well-being of the participants but had put an indelible impression on their psychological health as well. In most of the cases participants were exposed to fear psychosis, post-traumatic stress disorder and other psychosomatic issues.

For Shabir (name changed), aged 21, with left eye completely damaged, this injury had taken a strong toll on his health as he experiences nightmares and involuntary recollections of the incident, ultimately rendering him fearful. Sometimes he observes negative emotions overpowering him but he tries to avoid it by sitting alone in his room in order to control his aggression and body agitation. It is imperative to mention here that sitting alone has become one of his coping mechanisms to face the aggression. He was also facing other issues such as adjustment disorder, sleep disturbance, hyper-vigilance and startle responses. He had also experienced self-harm temptations. He mentioned:

Initially I had a deep sleep... but after the incident, I feel sleeplessness...

He further stated:

Initially when I used to get ill, I never take medicine...I preferred to take traditional treatment, but now I panic a lot...(Shabir,21)

Irfan, aged 22, with only 30% of vision in his right eye, deals with post-traumatic stress disorder. It occurs frequently when he recalls himself being involved in the pre-traumatic activities such as attending school regularly, playing with friends and completing numerous tasks. He dealt with other issues also such as hypervigilance, startle responses, lack of positive emotions, feeling of detachment. According to him, he was not so aggressive initially, but now he gets irritated on small issues. He confided:

Disturbances do occur in my dreams... in the form of nightmares ... after that there happens sleep deprivation...

He further added:

The happiness it used to be before... is not the same now ...

Talking about the hypervigilance, he responded:

If somebody comes from outside, I suddenly stand up without any reason...to see who is there... (Irfan, 22)

Aslam (name changed), 21, with partial loss of vision in right eye and a scar on nose, also shared his tale in similar vein. When asked about the impact on psychological well-being he revealed that there have been flashbacks which were accompanied with sadness, mood swings along with the feelings to forget those events. He further mentioned about hyper vigilant behavior, and lack of interest especially in outdoor sports. However, family support was highly revered which helped him in speedy recovery.

Farzan, 18, with partial damage in left eye and complete loss of vision in right eye confided his ordeal that being hit by pellet injury affected his psyche badly. He disclosed that he experiences 'sadness' everyday as it has become a part of his life now. He further stated that lack of confidence, fear of getting injure again, flashbacks, lack of interest in pre traumatic activities, dependency, inability to forget the event and loss of memory are some of the challenges which he mostly tackles. Besides, lack of positive emotions and concentration were also experienced. However, he did not blame himself for the same. He narrated:

I cannot forget this...it is the matter of eyes...when I have darkness to my eyes what would I do...

Blaming government agencies for his condition, he responded:

Why would I blame myself...it is their government like this...truly blind law...This pellet is meant for animals...but not for animals also...they are also speechless...it should not be used upon them as well...since it gives so much pain to human...what it will do to animal? (Farzan, 18)

Farzan while being adolescent lived jovial life, took active part in sports and co-curricular activities. But after the incident he has lost the zeal and charm from his life. He narrated:

I had a concentration in trekking, fishing, swimming...whenever I went to some place, I used to think that I will climb that mountain ...that tree ...I was able to play everything but now I can play only chess...When I was studying I used to make plans with my friends for trekking...outing but now I can't...

Farzan further revealed that after this incident he has developed sleep deprivation which is handled by offering prayers.

From the day I got pellet...I have not slept...then I offer prayer...Almighty might consider that he is doing time pass...then I start laughing... (Farzan, 18)

Maqbool (2017) in his study revealed that besides the physical disability the pellet victims have also sustained psychological damage which has been reflected by anxiety, palpitation, sleep deprivation, nightmares and hypervigilance. During study it was also ensued that the victims had developed aggressive behavior, restricted themselves within indoors and lost concentration which was taking toll on their mental health badly. Similar findings have been reported by Buchanan (2011) wherein it was revealed that victims of gun-violence suffer from both social as well as psychological repercussions which is accompanied by loss of self-esteem, suicidal ideation, anxiety, involuntary recollections of event, isolation from social groups etc.

The study conducted by Amnesty International India (2017) also confirms the psychological plight of pellet victims in which it was reflected that many of them were facing psychological trauma and other associated complications such as nightmares, loss of memory, sleep disturbances, loss of temper which was creating obstacles in their life. Victims of armed violence sustain lasting impact on their psychological well-being was also confirmed by the study conducted by Thapa & Thaler (2012) in which it was discovered that majority of survivors with lasting injuries were dealing with negative emotions, trauma and stress. They were facing anxiety, depression and suicide was anticipated in some of the cases, while being exposed to new circumstances.

4. Loss of Education

Inability to attain education was another theme that emerged while interviewing the participants. Since education is both fundamental right as well as building blocks of progress, it was one of basic rights that was snatched by their prevailing health conditions and was becoming a hurdle while meeting higher ends.

Naveed, aged 20, with only left eye fully functional and partial loss of vision in right eye underwent four surgeries, hoping that there would be some restoration of vision. However, the whole journey of being the pellet victim and then looking for different treatment options put deleterious impact on his studies. He could not continue his studies first as a regular student. Later on, when he opted for correspondence mode education, he could not compete. As a result, he became a drop-out student.

For Farzan, aged 18, with only right eye partially functional, lost the whole glory from his life. Being diligent student as well as active sports person, he finds it difficult to continue his studies. Although he tried his best to compete but due to

inability to read and write he left his studies and turned to be breadwinner for his family. He stated:

I was studying till August ...then I was hit by pellet again...and then I got confusion during study... (Farzan,18)

Inception of disability impacts socio-economic status due to adverse effect on livelihood, education and other expenditures related to disability has been confirmed by World report on disability (n. d). It thus implies that education is one of the aspects that suffers serious setback in case of people with disabilities. Maqbool (2017) also confides that pellet victims are hindered from attaining education as a result of both physical as well as mental trauma. Although the enthusiasm lies within the hearts of victims but inability to read due to injury in eyes and the lack of concentration makes it difficult for them. Survivors of armed violence face marginalization resulting into barriers particularly while accessing basic opportunities, education, skill development have also been confirmed by Thapa & Thaler (2012).

From the above accounts, it vividly shares the thought of pellet survivors, being in the continuous state of trauma and subjected to various restrictions after getting disabled through pellet guns. They are not supposed to live their lives as someone born with disability, but it is something which they acquire during their life and now are struggling between what they are and what they were.

Conclusion

Armed conflict is one of the major concerns of modern times which is taking toll on human lives gravely. It has resulted into killings, injuries, gross human rights violations and destruction of infrastructures, thus affecting each section of society indiscriminately. Among the myriad consequences there is one of the growing issues and that is the emergence of people with disabilities particularly in conflict-ridden zones (Murray, King, Lopez, Tomijiba, Krug, 2002, p.348) The reasons of impairment and hence disability could be either intentional or unintentional by combat forces, but it is this particular section which survives the aftermath of the strife. In the context of Jammu and Kashmir state, the insurgency since 1989, have put several indelible marks on its people which has changed the history from victimhood to survivor hood. People have lost their vital body parts due to use of artillery weapons in the form of bullets, pellets, landmine explosions, explosive remnants of war (ERW), PAVA shells, live ammunition etc. As a result of it, the state of Jammu and Kashmir has maximum number of people with disabilities as

compared to other states (Hassan, 2015). Since trauma is an unavoidable condition in conflict ridden societies, so is the case with the disabled people in Kashmir. Disability not only results into physical impairment, but has equally affected their mental health as well. As a result of it, these victims are suffering from several psychological issues such as depression, anxiety, Post-Traumatic Stress Disorder (PTSD) etc. In fact, according to study conducted by Department of Psychiatry, Government Medical College, Srinagar, 85% of patients have developed several psychiatric disorders. Depression was most common followed by adjustment and Post-Traumatic Stress Disorder (PTSD).

Thus, the present study was designed in order to understand the impact of acquired disability through the use of pellet shotguns on affected individuals. The use of pellet guns by armed forces has created a significant population of pellet victims that have rendered them either partial or complete blind. Since pellets have been considered as non-lethal weapons by government agencies yet it proved disastrous for the affected lot. In fact, it resulted into ripple effect affecting each and every aspect of the victim; critically distressing their physical, social, emotional and behavioral well-being. Hence, through the reflection of certain research articles, reports and by conducting few case studies, the researchers came to know about the several challenges that the survivors were dealing in their present lives. One of the visible effects of pellet injury is the physical harm that has incurred partial and complete blindness along with array of complications, depending upon the nature and form of injury. Disability thus occurred has affected not only physical functioning of the survivors but has equally affected their social functioning. Their mobility has been restricted and equally placed on the mercy of others. They find themselves incapable which hinders their growth and development.

Another major impact of acquired disability that has been alluded is the poor mental health, resulting into several psychological morbidities such as post-traumatic stress disorder, adjustment disorder which included stress, anxiety, sleep deprivation, flashbacks, nightmares, hypervigilance and startle responses. Aggression and irritable behavior were also overpowering them which they tried to cope either by getting detached or by adopting some religious coping methods. During study it was also revealed that change in living patterns, inability to perform pre-traumatic activities, stigmatization etc. have adversely worsened the mental structure of survivors, thus further deteriorating their mental health. The study also revealed that stigmatization was also faced by the survivors which is affecting the essence of being a normal person. They are looked down upon as different creatures which results into social exclusion. Besides inability to compete in studies and hence resulting into dropout is yet another challenge that is faced by them in their daily lives.

Thus, our findings confirm that disability caused by armed violence has impacted the survivors on large magnitude. They are dealing with multi dimensional issues that are affecting their growth and development. Hence it is the need of hour to devise certain strategies at community level so that they won't feel alienated and marginalized section of society.

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