

**The Recovery Process of
Survivors:
Findings from a Qualitative
Field Study in Six Mine-Affected
Countries and the U.S.**

Qualitative Study Questions

- What factors promote or hinder landmine survivors' recovery and integration?
- How are these factors related?

Scope of Research

7 Countries:

Bosnia-Herzegovina,
El Salvador, Eritrea, Ethiopia,
Jordan, Mozambique,
United States

Data Collection

- Open-ended, in depth interviews
- Participants:
 - Landmines: 24
 - Traumatic limb loss (excluding landmines): 9
 - Amputation due to disease: 11
 - Family Members: 12
 - Service Providers: 9 (of which 4 are also survivors)
 - Total Number of survivors: 60

Demographics

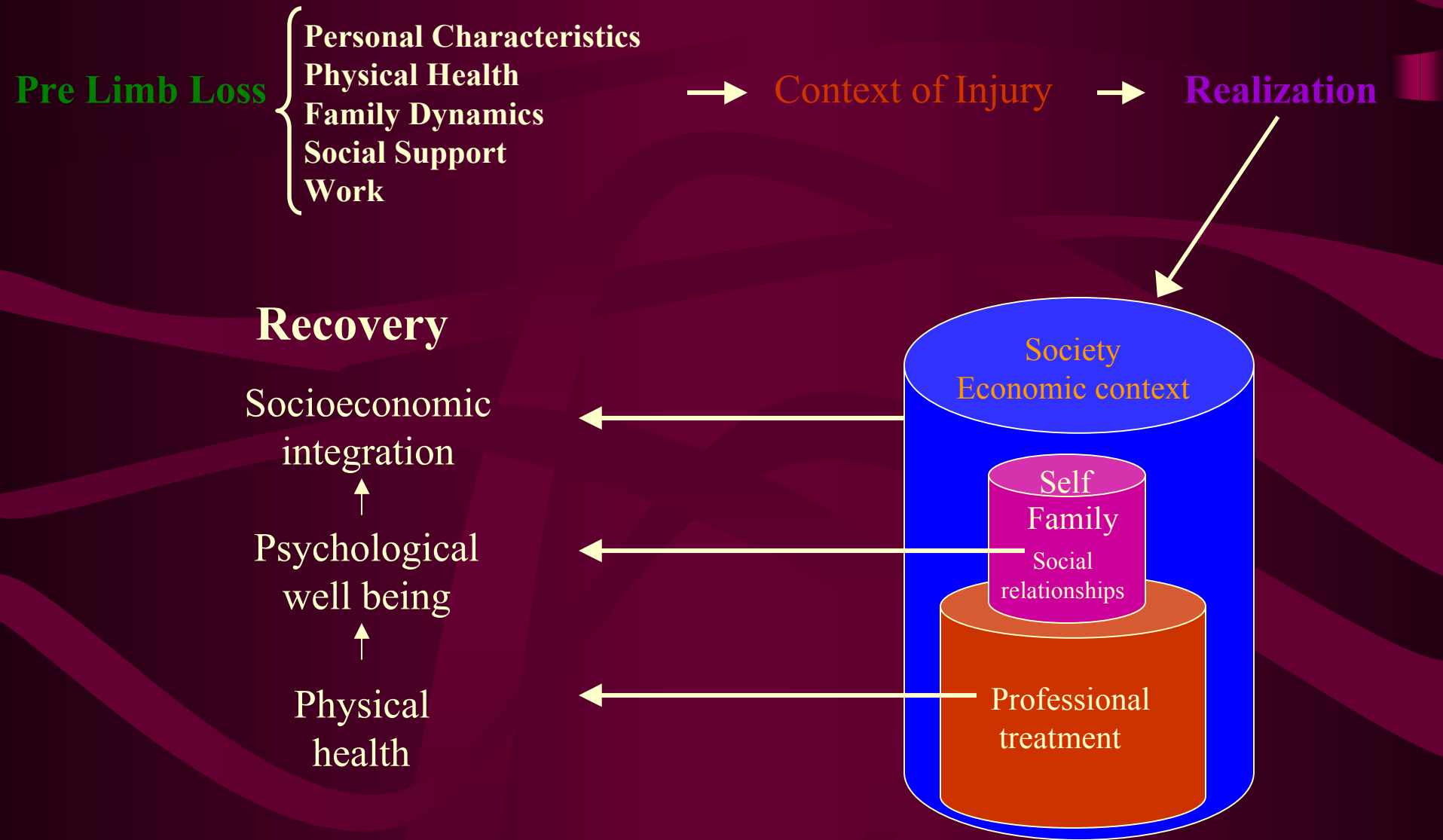
- Age Range (at time of amputation): 1-48 yrs old
- Gender:
 - Female: 17 (28%)
 - Male: 49 (82%)
- More than 1 amputation/disability: 10 (17%)
- Currently working: 22 (37%)
- Currently training or in school: 9 (15%)

Recovery



Recovery includes physical health, psychological well-being, and socioeconomic integration (the opportunity to be a productive member of society). This cannot happen without access to economic necessities, comprehensive and coordinated professional care, and social relationships. Society's awareness of the concerns of people with disabilities and the survivors' own attitudes and personal resilience play important roles in the survivor's recovery process.

Recovery Process Theory



Society: Macro level

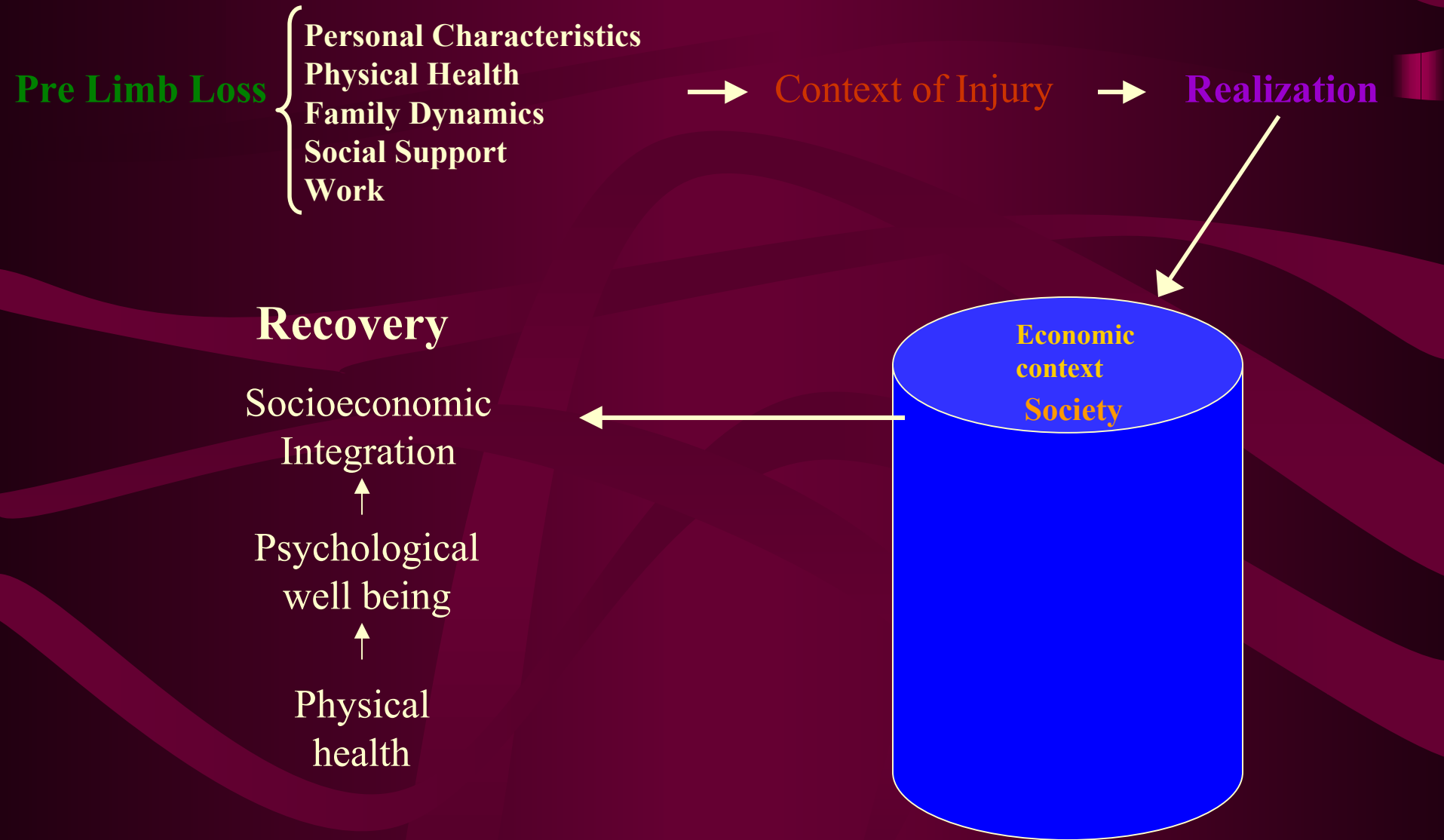
- Sociopolitical situation
- Economic conditions
- Infrastructure
- Government policy, legislation
- Access to and availability of services
- Public attitudes and awareness

Public Attitudes & Awareness

Recovery is a two-way street:

Whilst survivors have to be resilient and determined to integrate, *society* too must desire and encourage their socioeconomic integration.

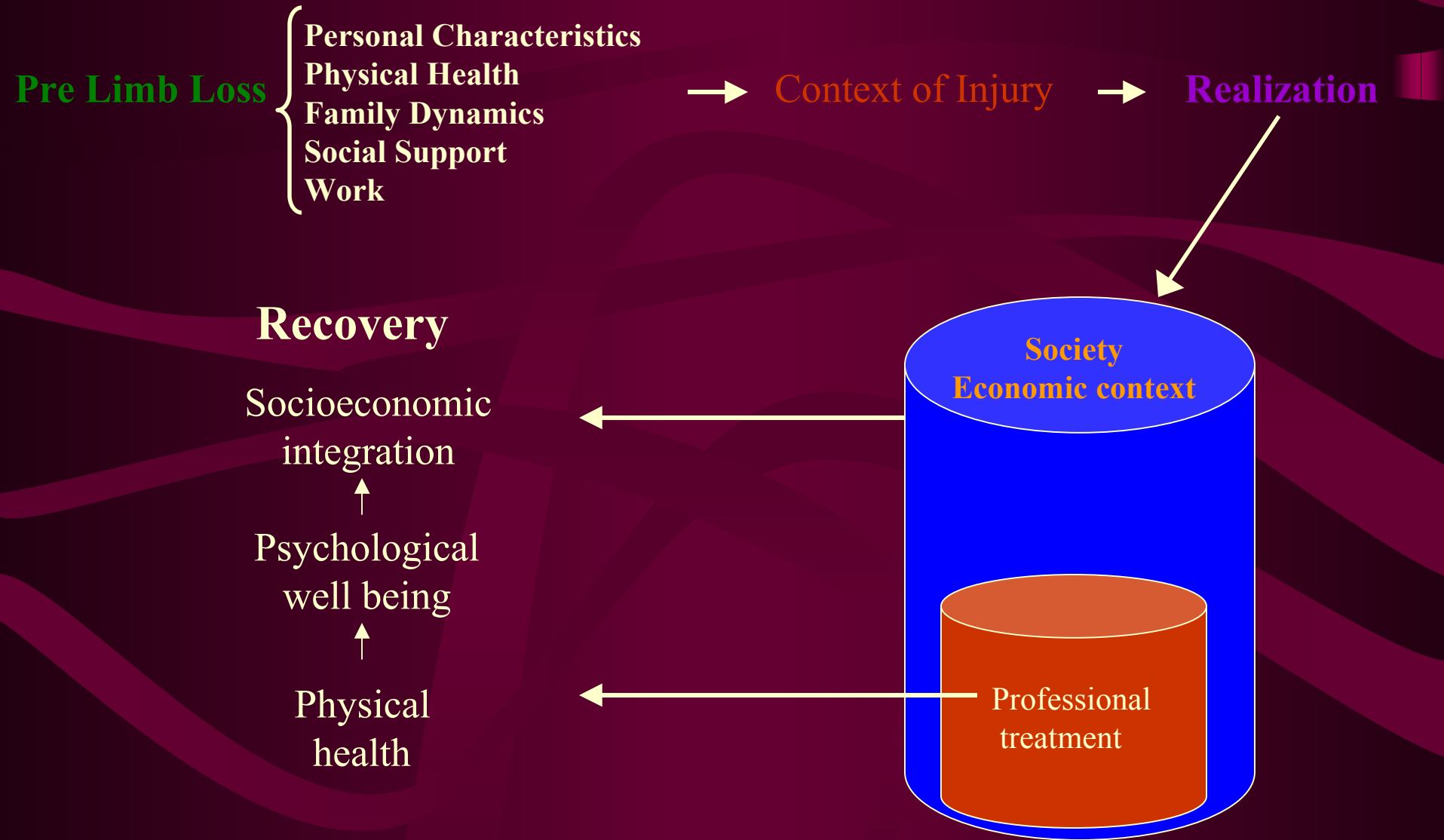
Recovery Process Theory



Economic Context: Micro level

- Economic security and integration of survivor
- Employment
- Vocational training and education
- Health insurance

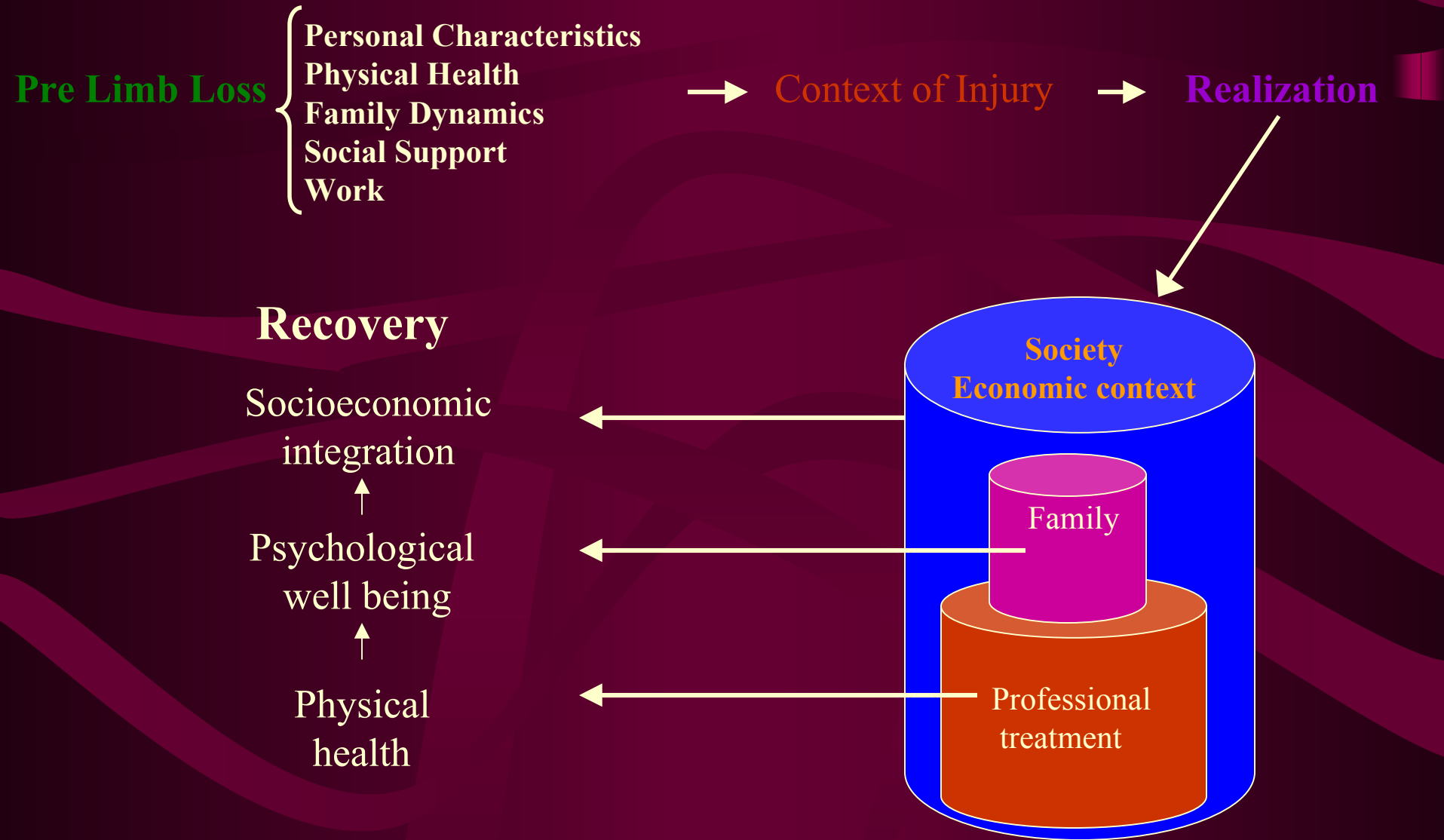
Recovery Process Theory



Professional Treatment

- Emergency medical care
- Continued medical care
- Physical rehabilitation
- Psychological care
- Prosthesis and assistive devices

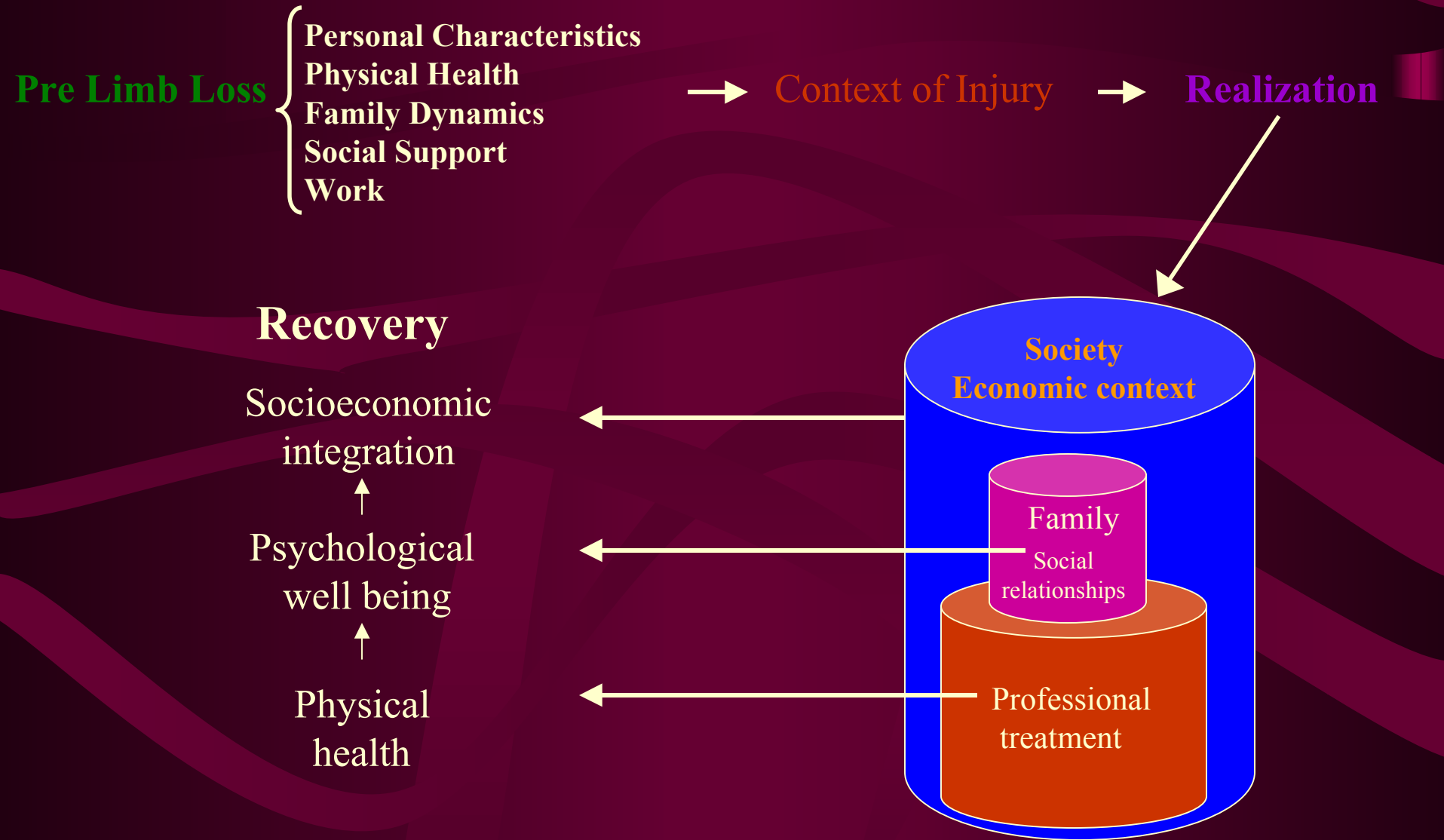
Recovery Process Theory



Family

- Includes nuclear and extended family, or village
- Examples of family support include:
 - provision of economic necessities
 - mobility support
 - Care-giving
 - psychological support
 - amelioration of negative societal attitudes

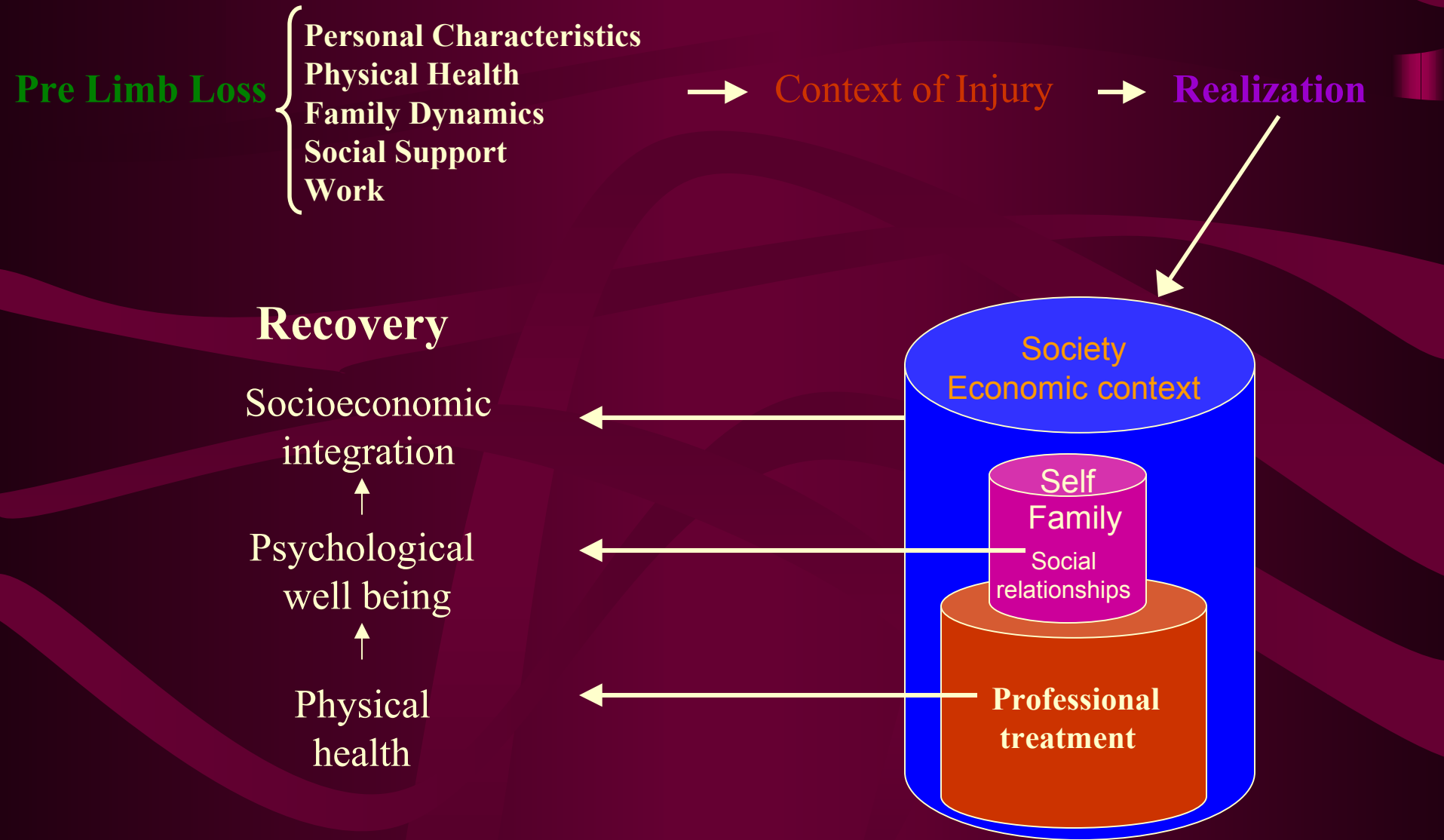
Recovery Process Theory



Social Relationships & Peer Support

- Includes friends, neighbors, and other community members
- Provides links to socioeconomic integration
- Importance of peer support in recovery as discussed by survivors: “If they can, so can I”

Recovery Process Theory



Self

- Physical being
- Personality / Core
- Attitudes and Emotions

Psychological Process Hypothesis

Pre Limb Loss Life

Context of Injury

Realization of physical loss

Emotional responses

Pragmatic acceptance

Physical adjustment

Acceptance with resignation

- Depression
- Negative self image/attitude
- Abnormal – self perception
- Disconnected
- Unsettled
- Isolated
- Delayed reintegration

Acceptance with resilience

- Perspective
- Make meaning
- Not defined by amputation
- Self-perception as normal
- New life
- Feels connected/supported
- Socioeconomic integration

Implications

1. *Ensure* economic necessities
2. *Provide* comprehensive and coordinated care
3. *Create* opportunities to be a productive member of society
4. *Assist* in re-establishing social relationships with family, community and society
5. *Address* societal attitudes

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