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As of December 2015

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Member of the ASF Board of Trustees & Executive Director
### Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ABC</td>
<td>Advanced Burn Care</td>
</tr>
<tr>
<td>ASF</td>
<td>Acid Survivors Foundation</td>
</tr>
<tr>
<td>ASK</td>
<td>Ain O Salish Kendra</td>
</tr>
<tr>
<td>BLAST</td>
<td>Bangladesh Legal Aid and Services Trust</td>
</tr>
<tr>
<td>BNWLA</td>
<td>Bangladesh National Woman Lawyers' Association</td>
</tr>
<tr>
<td>BSBI</td>
<td>Bangladesh Society of Burn Injuries</td>
</tr>
<tr>
<td>BoT</td>
<td>Board of Trustees</td>
</tr>
<tr>
<td>CAMPE</td>
<td>Campaign for Popular Education</td>
</tr>
<tr>
<td>CIDV</td>
<td>Citizen Initiative to against Domestic Violence</td>
</tr>
<tr>
<td>DACC</td>
<td>District Acid Control Committee</td>
</tr>
<tr>
<td>DMCH</td>
<td>Dhaka Medical College Hospital</td>
</tr>
<tr>
<td>DSS</td>
<td>Department of Social Services</td>
</tr>
<tr>
<td>DU</td>
<td>Dhaka University</td>
</tr>
<tr>
<td>EBC</td>
<td>Essential Burn Care</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
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<tr>
<td>HCD</td>
<td>High Court Division</td>
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<tr>
<td>HRFB</td>
<td>Human Rights Forum Bangladesh</td>
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<tr>
<td>IO</td>
<td>Investigation Officer</td>
</tr>
<tr>
<td>KII</td>
<td>Key Informant Interviews</td>
</tr>
<tr>
<td>LAG</td>
<td>Legal Advisory Group</td>
</tr>
<tr>
<td>MSPVAV</td>
<td>Multi-Sectoral Programme on Violence against Women</td>
</tr>
<tr>
<td>MOWCA</td>
<td>Ministry of Women and Children Affairs</td>
</tr>
<tr>
<td>MMS</td>
<td>Manab Mukti Sangstha</td>
</tr>
<tr>
<td>NACC</td>
<td>National Acid Control Council</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Government Organization</td>
</tr>
<tr>
<td>NIBPS</td>
<td>National Institute of Burn and Plastic Surgery</td>
</tr>
<tr>
<td>OC</td>
<td>Officer in Charge</td>
</tr>
<tr>
<td>PP</td>
<td>Public Prosecutors</td>
</tr>
<tr>
<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
</tr>
<tr>
<td>SP</td>
<td>Superintendents of Police</td>
</tr>
<tr>
<td>VGD</td>
<td>Vulnerable Group Development</td>
</tr>
<tr>
<td>VGF</td>
<td>Vulnerable Group Feeding</td>
</tr>
<tr>
<td>VSC</td>
<td>Victim Support Center</td>
</tr>
</tbody>
</table>

*Photography*

Shafiquil Alam Kiron
A K Azad
ASF Photo Gallery
organizations working on burn and expertise with other acid violence, to share knowledge key areas included the reduction of I

SUMMARY

EXECUTIVE SEARCHED FOR OPPORTUNITIES TO

SESSIONS. OVER THE YEARS ASF HAS LOOKED INTO ART AND MUSIC THERAPY, AS WELL AS PROVIDE INDIVIDUAL, GROUP, FAMILY, AND PRE AND POST OPERATIVE COUNSELING TO BURN PATIENTS. ASF'S PSYCHOThERAPY UNIT CONTINUED TO PROVIDE SUPPORT TO BURN PATIENTS IN THE POST OPERATIVE CARE PROCESS. IN 2015 ASF ALONG WITH DATABASE OF MEDICAL COLLEGE HOSPITAL, ASF'S WORK IN 2015 FOCUSED ON HOW TO IMPROVE THE QUALITY OF CARE TO SURVIVORS, AND TO BECOME A PROOF OF CONCEPT FOR SUSTAINABLE CHANGE. THIS YEAR ASF CONTINUED TO WORK WITH THE NACC, DACC AND OTHER GOVERNMENT AGENCIES TO ADVOCATE FOR THE IMPROVEMENT OF THE IMPLEMENTATION OF THE ACID CONTROL ACT 2002. A LARGE NUMBER OF WOMEN AND CHILDREN ARE AFFECTED BY ACID VIOLENCE, TO Lobby AND ADVOCATE WITH ELITES TO MOBILIZE LOCAL LEADERS AND PROMOTE CHANGE THROUGH DOOR TO DOOR VISITS, MONTHLY GROUP MEETINGS AND COMMUNITY FORUMS. THESE FORUMS CREATE A SPACE FOR SURVIVORS TO SHARE THEIR STORIES AND SUPPORT EACH OTHER IN THE RECOVERY PROCESS. ASF CONTINUED TO WORK WITH THE LOCAL GOVERNMENT AND ADMINISTRATION TO RAISE AWARENESS ON CAUSES AND EFFECTS OF ACID VIOLENCE AND ADVOCATE FOR THE PROPER IMPLEMENTATION OF THE ACID CONTROL ACT 2002. IN 2015 ASF ALSO FACILITATED THE PROCESS OF IMPLEMENTATION OF THE 'ACID CONTROL ACT 2002' IN BANGLADESH AND 'COPING WITH ACID INJURIES' AS ONE INITIATIVE TO ENHANCE AWARENESS AND TAKE INITIATIVES FOR PREVENTING ACID VIOLENCE. ASF ALSO Continued TO WORK WITH THE MEDIA, STUDENTS, COMMUNITIES, AND LOCAL GOVERNMENT TO RAISE AWARENESS ON THE IMPACT OF ACID VIOLENCE.

ASF'S LEGAL ADVISORY GROUP STRENGTHENED THE ADVOCACY INITIATIVES TO COLLECTIVELY ADVOCATE FOR THEIR RIGHTS, CONTINUE THEIR EDUCATION, AND PROVIDE SUPPORT TO SURVIVORS TO ACCESS THEIR RIGHTS, CONTINUE THEIR EDUCATION, AND PROVIDE SUSTAINABLE LIVELIHOODS. IN 2015 ASF ASSISTED SURVIVORS TO ACCESS SUSTAINABLE LIVELIHOODS. IN THE COMING YEARS ASF WILL CONTINUE TO WORK WITH THE GOVERNMENT, LOCAL ADMINISTRATION, AND LOAN FROM THE DACC FUND TO PROVIDE SAFETY NET SUPPORT FROM THE NATIONAL INSTITUTE OF BURN AND PLASTIC SURGERY AT DHAKA MEDICAL COLLEGE. ASF'S LEGAL ADVISORY GROUP TO COLLECTIVELY ADVOCATE FOR THEIR RIGHTS. IN 2015 ASF ALONG WITH MEMBERS OF ASF'S 10 YEAR STRATEGIC PLAN ASF CONTINUES TO WORK WITH THE GOVERNMENT AND ADMINISTRATION TO RAISE AWARENESS ON THE IMPACT OF ACID VIOLENCE.

ASF CONTINUED TO WORK WITH THE GOVERNMENT AND ADMINISTRATION TO RAISE AWARENESS ON THE IMPACT OF ACID VIOLENCE AND TO BRING ABOUT SUSTAINABLE CHANGE. THIS YEAR ASF CONTINUED TO WORK WITH THE NACC, DACC AND OTHER GOVERNMENT AGENCIES TO ADVOCATE FOR THE IMPROVEMENT OF THE IMPLEMENTATION OF THE ACID CONTROL ACT 2002. A LARGE NUMBER OF WOMEN AND CHILDREN ARE AFFECTED BY ACID VIOLENCE, TO Lobby AND ADVOCATE WITH ELITES TO MOBILIZE LOCAL LEADERS AND PROMOTE CHANGE THROUGH DOOR TO DOOR VISITS, MONTHLY GROUP MEETINGS AND COMMUNITY FORUMS. THESE FORUMS CREATE A SPACE FOR SURVIVORS TO SHARE THEIR STORIES AND SUPPORT EACH OTHER IN THE RECOVERY PROCESS. ASF CONTINUED TO WORK WITH THE LOCAL GOVERNMENT AND ADMINISTRATION TO RAISE AWARENESS ON CAUSES AND EFFECTS OF ACID VIOLENCE AND ADVOCATE FOR THE PROPER IMPLEMENTATION OF THE ACID CONTROL ACT 2002. IN 2015 ASF ALSO FACILITATED THE PROCESS OF IMPLEMENTATION OF THE 'ACID CONTROL ACT 2002' IN BANGLADESH AND 'COPING WITH ACID INJURIES' AS ONE INITIATIVE TO ENHANCE AWARENESS AND TAKE INITIATIVES FOR PREVENTING ACID VIOLENCE.
EXECUTIVE SUMMARY

In ASF’s 10 year strategic plan ASF had identified few key program areas as milestones for 2015. The key areas included the reduction of acid violence, to share knowledge and expertise with other organizations working on burn violence, to lobby and advocate with NACC, DACC and other government bodies to provide necessary services to survivors, and to become a proof of model for bio psycho social service provision in Bangladesh.

ASF’s work in 2015 focused on how to reach these milestones and bring about sustainable change. This year ASF continued to work with the media, students, communities, and local government and administration to raise awareness on causes and effects of acid violence and advocate for the proper implementation of the two acid Acts. In 2015 the number of acid attacks came down to 59 incidents where 74 victims were affected. ASF hospital provided comprehensive care to new and old patients. ASF’s psychotherapy unit provided individual, group, family, pre and post operative counseling along with art and music therapy sessions. Over the years ASF has searched for opportunities to strengthen public private partnership. As part of a partnership with Dhaka Medical College Hospital, ASF’s Psychotherapists and Physiotherapists provided support to burn patients in National Institute of Burn and Plastic Surgery at Dhaka Medical College Hospital. In 2015 ASF along with Interburns, National Institute of Burn and Plastic Surgery (NIBS) in DMCH, and Bangladesh Society of Burn Injuries (BSBI) implemented operational standards of burn care for basic, immediate and advanced levels of service in Bangladesh. ASF has also been able to introduce a pressure garment and brace/splint corner in the National Institute of Burn and Plastic Surgery at Dhaka Medical College Hospital to provide quality pressure garments at reasonable price to burn patients.

A Large number of women and children are affected by acid violence and as part of the rehabilitation plan ASF aims to provide support by creating opportunities for survivors specially women and children to access their rights, continue their education, and establish sustainable livelihoods. In 2015 ASF assisted survivors to access DACC fund, khas land and other safety net support from the government, and loan from the Department of Social Services. ASF also organized a number of community meetings and conducted orientation sessions for community elites to mobilize local leaders and community members to help create a safe and supportive environment for survivors. Over the years ASF has established a peer support system for survivors in eight selected districts. Survivors are able to access peer counseling and emotional support through door to door visits, monthly group meetings and community clinics. These forums create a space for survivors to share their stories and support each other in the recovery and rehabilitation process. In 2015 ASF’s capacity development initiatives included skill development and leadership training as well Participatory Action Research workshops to equip survivors with the knowledge and skills to collectively advocate for their rights and take initiatives for preventing and responding to acid violence in their communities.

Acid violence is a criminal offense however a culture of impunity and weak rule of law allows most of the perpetrators to go unpunished. In 2015 ASF along with members of ASF’s Legal Advisory Group organized a legal conference on ‘Ensuring Justice for Acid Survivors through Prompt and Effective Judicial Process’. Access to justice remains to be ASF’s biggest challenge and in the future ASF will continue to work with its Legal Advisory Group to strengthen advocacy initiatives to increase survivor’s access to justice.

ASF sees learning as an ongoing social process and continues to work towards improving knowledge management and quality through new and innovative ideas and interventions. In 2015 ASF conducted two research studies on Implementation Status of the ‘Acid Offences Prevention Act 2002’ and ‘Acid Control Act 2002’ in Bangladesh and “Coping with Disfigurement: A Focus on Survivors of Acid and Other Burn Violence”. ASF also facilitated the process of developing a guideline on “Minimum Care Standard of Psychosocial Care for Victims of Acid and other Burn Violence” as one initiative to strengthen ASF’s bio psycho social model. This was a participatory process engaging different civil society and government stakeholders.

In the coming years ASF will continue to explore ways to incorporate the research findings to fine tune ASF’s interventions and implement the guideline to ensure that survivors are able to access quality care from ASF.
It is with great pleasure and humility that we present this 2015 Annual report of Acid Survivors Foundation (ASF) containing an overview of the progress of our work. ASF’s mandate has a niche and uniqueness of its own. With an unqualified commitment and expertise developed over the years, the Foundation has been working to prevent, control and hopefully eliminate acid violence in Bangladesh. It is an organization of, and for the survivors dedicated to protect and promote the rights of women, children and men who have been subjected to this most cruel form of violence. ASF has a vision of Bangladesh which will be free from acid violence and where victims of this crime, especially women and children, can live and work with equality, justice and dignity.

In 2015 ASF continued to work in close cooperation with the Government of Bangladesh and our partner organizations at the national and local levels to advocate for the rights of acid survivors and to strengthen the capacity of the society to prevent and control acid violence. We have stood by the survivors with all our capacity in their efforts to overcome their trauma and vulnerabilities. We are always conscious of that fact that these are far from what could fully meet their needs and expectations and to ensure their full, effective, and inclusive participation in the society. But ASF did what was possible within its limited resources. As we move on with our efforts to sustain the positive changes already made, we would rely more heavily on the partnership of the public, private and non-government sectors and community-based organizations, and cooperation of the media and other stakeholders.

ASF has always been privileged to secure excellent multi-stakeholder collaboration. 2015 was no different. We are grateful to the Government of Bangladesh, our donors, our partner organizations, numerous individuals and the media for their generous support and partnership. I would like to acknowledge the contribution, support and commitment of my colleagues in the Board of Trustees throughout the year. I would also like to acknowledge the contribution of our Executive Director and her team for their hard work and dedication.

What follows here demonstrate that the lion’s share of the credit for what ASF has so far been able to achieve has to go to the courage, patience and perseverance of the survivors. They are setting brightest examples of transforming lives despite enormous odds. No words can fully capture their determination and confidence.

Dr. Iftekharuzzaman
We are pleased to present our Annual report 2015 where we tried to reflect our key progress, lessons learnt, challenges of the year and our way forward based on the learning and experiences of last year. In terms of organizational development, ASF reviews current HR and Finance & Procurement policies for better system development and has developed some new policies as well.

We continued to transform our knowledge and expertise with key factors through networking, knowledge sharing and have strengthened our networks at national, regional and global level.

We are looking forward and have identified some clear strategies. Our focus for the year ahead will be on improving better services for the survivors to ensure that they receive better treatment, to fulfill our vision of eliminating acid attacks and other burn violence from our country. We will also focus in strengthening our survivors’ network which includes their initiatives to raise their collective voices at different forums.

I would like to express my gratitude to my esteemed board of trustee members for the valuable guidance and encouragement that they provide to our work. Also, I would like to thank our partners for their strategies, their implementation ability and for their support to address acid violence. Without our sincere and committed team members, we would not be able to achieve our yearly targets. I sincerely appreciate their hard work. Our beloved survivors also proved that they can also play a vital role when it comes to making a difference and together, we have developed a much appreciable unity.

We are also grateful to our development partners, government counterparts, private sectors and individual donors for their technical and financial support.

We are committed to deliver quality services to our survivors and for prevention of acid attack at a continued basis.

Again, thanking you all for your immense support.

Selina Ahmed
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<td>Rehabilitation and Reintegration</td>
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- ASF’s Research Initiatives ....................................................... 36
- Established Institutional Linkages ............................................ 39
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Since its inception, ASF has been working to reduce and eventually eliminate acid violence in Bangladesh through extensive awareness raising campaigns and by focusing different forms of prevention initiatives. Though acid violence in this country was more widespread than any other place in the world, ASF’s records show that the prevention initiatives have resulted in a steady decline in the number of acid attacks in recent years.

The above chart shows that between the years, 1999 to 2015, a total of 3,661 people have been attacked with acid in 3,303 different incidents. In the year 2015, ASF recorded a total of 74 people who have been attacked in 59 incidents.

The above pie chart shows that out of the 74 victims who came under acid attack in 2015, the majority 50 (67.6%) were women and girls.
ACID SURVIVORS FOUNDATION

ANNUAL REPORT 2015

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TRENDS OF ACID ATTACKS

The above chart shows that between the years, 1999 to 2015, a total of 3,661 people have been attacked with acid in 3,303 different incidents. In the year 2015, ASF recorded a total of 74 people who have been attacked in 59 incidents.

The above pie chart shows that out of the 74 victims who came under acid attack in 2015, the majority 50 (67.6%) were women and girls.

Gender Segregation of Victims of Acid Violence (2015)

From the following graph it can be seen that in 2015 most of the victims, 41 (55.41%) fall into the 19 to 35 age group among which 27 (36.49%) are Women and 14 (18.92%) are Men.
Reasons for Acid Attacks (2015)

Over the last few years the majority of acid attacks have occurred for land, property or money related disputes and this trend continued in 2015. Other significant causes that have been identified include marital and family disputes, dowry related violence and refusal of marriage, sex and love proposals and sexual advances.

The above chart shows that the highest number of acid attacks in 2015 took place for land, property and money related disputes (31%), while another major percentage (27%) of acid attacks were occurred due to two reasons, family related disputes (14%) and marital disputes (13%). The Chart also illustrates that 20% attacks were occurred due to the refusal or rejection of marriage (11%) and love (9%), and the reasons of 11% attacks could not be known during this period as the victims were not able to recognize the perpetrators or confused about the reasons of their attacks.
Acid Survivors Foundation aims to provide survivors with essential burn care services to enable survivors to cope with the physical and psychological impact. The Bio Psychosocial approach incorporates physical, psychological and social care for the survivors and it starts from the moment ASF is notified of an attack. ASF in collaboration with brac developed a nation wide notification and Referral system. ASF operates a 24 hours hotline for reporting attacks and once an attack is reported ASF takes measures to ensure that survivors have access to treatment and legal support. Once a survivor is brought to ASF hospital a multi disciplinary team including nurses, doctors, physiotherapists, psychologists and program representatives perform medical rounds.

Demographically, victims of acid violence are usually from lower socio-economic status and are unable to afford quality health care. ASF provides complete medical services for free of cost. ASF runs a 20 bedded specialized hospital with fully equipped Operation Theatre and post-operative care facilities. The services provided by ASF hospital include reconstructive surgeries by highly qualified Plastic surgeons. Intricate procedures are performed with usage of modern technological devices. Patients are taken care for 24 hours round the clock by doctors and nurses. All medication, pathological tests including their transport from ASF is also sponsored for both in and out patients. Other necessities are taken care of by medical unit of ASF. Community visits are arranged regularly to follow up all the patients of a specific area.
Physiotherapy services

To regain functionality a patient needs extensive physiotherapy. Physiotherapy comprises of different active and passive exercise and maneuvers to regain the strength of the particular muscles and limbs and their normal functionalities. Skilled and trained physiotherapist in burn care conducts the physiotherapy at ASF to provide the maximum level of care to the patients. Physiotherapist of ASF also teaches and encourages the patients to continue with active exercise when they return home. Physiotherapists of ASF also provide this service to National Institute of Burn and plastic surgery (DMCH).

<table>
<thead>
<tr>
<th>Service Name</th>
<th>No. of Patients</th>
<th>women</th>
<th>Girls</th>
<th>Men</th>
<th>Boys</th>
<th>No. of Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physiotherapy provided at ASF hospital and</td>
<td>195</td>
<td>69</td>
<td>28</td>
<td>74</td>
<td>24</td>
<td>Procedure-3039</td>
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</table>

Physiotherapy comprises of different active and passive exercise and maneuvers to regain the strength of the particular muscles and limbs and their normal functionalities. Skilled and trained physiotherapist in burn care conducts the physiotherapy at ASF to provide the maximum level of care to the patients. Physiotherapist of ASF also teaches and encourages the patients to continue with active exercise when they return home. Physiotherapists of ASF also provide this service to National Institute of Burn and plastic surgery (DMCH).
Pressure Garments for Survivors

Special physiotherapy is provided to every patient to prevent contracture and retain functionality of limbs to a major number of patients. Hypertrophic burn scars create a challenge for both burn survivors and health care providers. In many cases, they can severely limit a burn survivor’s level of function, including work and recreational activities. A widespread modality to prevent and treat of hypertrophic scarring is the pressure garment therapy. Pressure Garment is a garment made from elasticized fabrics that can apply continuous pressure over the healing skin after burns, trauma and surgery. A pressure between 25 and 32 mmHg is used to treat the scar. It limits hypertrophy and contracture of scar tissue. Burn scars mature in 1 to 3 years. These garments need to be worn for at least 6 months and perhaps as long as 2-3 years. In 2015 ASF provided Pressure Garments to 39 survivors and produced 165 items. ASF introduced the pressure garments unit in 2002 to provide comprehensive treatment to survivors. In 2015 ASF in collaboration with National Institute of Burn and Plastic Surgery (NIBPS), Dhaka Medical College start a “Pressure Garment and Brace/Splint Corner” in NIBPS at as a Public Private Partnership program. ASF is delivering high quality but cost effective pressure garments to all kind of burn patients from there. Both parties are planning to renovate this corner in an extensive way in near future

Psychological services

Burn injuries may be very distressing to patients and their families and it is often a devastating event with long-term physical and psychosocial effects. The rapidly increasing number of burn patients in the country has turned into a serious psychological problem for patients and families. They suffered from various psychological symptoms like PTSD and anxiety like symptoms (recurrent thought/ memories, traumatic nightmares, detachment feeling, felt fear, anger, horror feeling, shame, inability to recall the traumatic event, helplessness, restlessness, vulnerable etc). From ASF hospital, professional psychotherapist provided by specialized psychotherapeutic services through different types of therapeutic modes like-Psychotherapy, Individual counseling, group counseling, family counseling, emotional support, pre-operative counseling, post-operative counseling, relaxation, social skill training, art therapy and music therapy etc.

In 2015 total 168 survivors received 1681 times' different types of psychotherapeutic services through 1164 sessions.

These psychological services helped them to ventilate their suppressed feelings, to cope with reality, to reduce their burn and pain sensations, to reduce their emotional disturbances, to increase self-confidence and communication skill, to increase self-esteem, giving evidence with rational to decrease their negative thought etc.
Guideline on Minimum Care Standard of Psychosocial and Mental Health Care for Victims of Acid and other Burn Violence

Acid Survivors Foundation (ASF) has been trying to improve mental health services for the survivors and in this process prepared a guideline on Minimum Care Standard of psychosocial and mental health care for the victims of acid and other burn violence. The guideline contains 43 aspects with minimum standard statements organized under three broad categories namely service delivery aspects, service providers aspects and organizational matters.

Why minimum standard guideline

Minimum standard guidelines are essential prerequisites for ensuring quality of services. It allows the service providers to ensure high quality service in a consistent manner. It also gives the service recipients a clear understanding of why a specific service is provided in a specific manner and under what considerations.

As common principles, the standard guidelines are focused on improving the safety, dignity, wellbeing and quality of life of the recipients. Therefore, implementation of such standards is connected with increased access and satisfaction of the service recipients.

Minimum standards guidelines on psychosocial care for acid and other burn survivors can be helpful in many ways including planning, development, maintenance and evaluation of services. Adherence to minimum standard guidelines make sure that the service offered by different organizations and stakeholders are of similar standard and quality making inter-organizational referral more convenient for both providers and recipient of services.
The Guideline has been prepared through a series of activities of ASF including International conference on ‘Setting standards for psychosocial and mental health service provision for victims of acid and burn violence’, document analysis, field study, review of examples, panel discussion, stakeholder meeting, dissemination seminar, consultation with different stakeholders including survivors and their family members as well as Government and other Service Providers.

Capacity Development of Burn Care Professionals

ASF, in supporting from Interburns has been implementing a project in partnership manner with National Institute of Burn and Plastic Surgery (NIBPS) and Bangladesh Society for Burn Injuries (BSBI) to reduce the impact of burns through a comprehensive approach encompassing training, education, research, prevention and capacity building. The aim of this collaboration is to improve burn care and to support the development of burn services and ensure there are well trained burn care professionals across Bangladesh. Under this project, ASF organized Seven Essential Burn Care (EBC) trainings, three at National Institute of Burns and Plastic Surgery (NIBPS), two in Shaheed Suhrawardy Medical College Hospital and the rest of 2 in Gazipur District Sadar Hospital in 2015. A total of 164 participants including 101 women participated in the training sessions. Different burn care professionals including Surgeons, Doctors, Nurses and physiotherapists participated in the training sessions, which ultimately helped to strengthen their capacities with the appropriate skill and knowledge to maintain a good standard of care at their respective hospitals. The learning of the trainings also helped to strengthen the burn-team work, which is crucial to decrease both morbidity and mortality of Burn injuries from Bangladesh.

In 2015, ASF also organized a 5 day long Advance Burn Care (ABC) training on Rehabilitation in collaboration with Interburns at NIBPS. A total of 26 burn care professionals (Men-14 & Women-12) including Physiotherapists, Occupational Therapists and Nurses participated in the training to learn standard advanced knowledge about burn care. The ABC training has proven extremely effective in engaging the leadership of ASF and NIBPS in Bangladesh. The five day long training was really full of learning new things, entertainment, and knowledge sharing.

Training session with burn care professionals
# REHABILITATION AND REINTEGRATION

ASF is one of the few holistic service providers with the capacity to provide hospital based medical and psychological support and community based psychosocial support through case management system involving a multidisciplinary team. When a patient is about to be released from the hospital ASF prepares a plan to facilitate their re-entry and reintegration into life at home. For many survivors this means returning home to their families, but for some whose attackers are family members it means starting over a new life. Based on the specific needs of survivors ASF designs a rehabilitation plan for each survivor.

## Rehabilitation Support Provided in 2015

<table>
<thead>
<tr>
<th>Direct Support from ASF</th>
<th>Family Assistance</th>
<th>Education Support</th>
<th>Income Generating Activity</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Women attacked by their husbands or who are sole earner in the family and who have children as their dependents are provided with an interim financial support to meet their immediate needs. ASF provided family assistance support to 9 female survivors and one male survivor</td>
<td>Support provided to selected survivors for continuing their education after an acid attack. In a few cases children of survivors who are women and head of the households and children of survivors with disabilities have received this support. ASF provided education support to 53 students including 35 women and girls and 17 men and boys in 2015 to enable them to continue their education.</td>
<td>The economic and financial burden following an acid attack increases the vulnerability of the survivor and their family members. Most survivors belong to a lower economic status and are unable to bear the loss of an income earner. In many cases the victim is the sole breadwinner of the family and in some instances the victim is unable to return to their family because a family member is the perpetrator. Many survivors feel compelled to return because they have no other income source. Therefore it is vitally important to set up a sustainable livelihood for survivors who are vulnerable. 7 women survivors and 2 men survivors received IGA support in 2015</td>
</tr>
</tbody>
</table>
The District Acid Control Committee (DACC) has a special provision of grant to provide financial support to acid survivors for medical treatment and socio-economic rehabilitation. The National Acid Control Council (NACC) under the Ministry of Home Affairs disburses the money to DACCs. ASF with the help of partner NGOs continues to advocate for distribution of DACC funds. DACC fund of twenty lac seventy two thousand taka was distributed to 77 women survivors and 18 men survivors in Sathkhira, Comilla, Mymensingh, Sherpur, Bagerhut and Tangail.

The Department of Social Services (DSS) has a separate policy to provide rehabilitation support in the form of soft loans to survivors of acid violence. ASF provides support to survivors to access this loan. DSS granted one lac thirty seven thousand and five hundred taka in total loans to 7 women survivors.

State-owned lands (Khas Land) are normally distributed to the vulnerable and landless people by the government. ASF provides necessary support to survivors to access khas land and other government support including VGF/VGD card and allowance for the financially insolvent disables. 4 women survivors were incorporated into the monthly disability allowance scheme and 1 woman survivor was incorporated into the stipend for disabled students. Total of 31 women survivors received VGD/VGF cards from the local union parishad. 1 woman survivor received 10,000 taka grant from the District Commissioner Office and 1 man survivor received special grant of 50,000 taka from the Prime Minister’s Office.

ASF conducts meetings to engage community elites and members to contribute in creating a safe and supportive environment to enable the survivors to reintegrate into their families and communities. A total of 3,942 women and 3,295 men attended 213 community meetings in 2015.

Survivors working as ambassadors in six selected districts visit households of other survivors in that district to provide peer support and to assess survivor’s needs. It includes legal, medical and/or psycho-social support. A total of 970 door to door visits were conducted in 2015.
Community Clinic

ASF conducts community clinics at the district level to identify and address rehabilitation and reintegration challenges that survivors face in their communities. The clinics focus on legal, medical, psycho social problems of particular survivors identified through door to door visits. 24 community clinics were organized in 6 districts in the year 2015.

Telephonic follow up

ASF Medical and Program staffs along with Program Officers and Survivor Ambassadors working in six selected districts continue to provide advice and emotional support over phone as required.

Group Meetings

There are 29 survivor groups in eight districts who meet every month and these meetings act as a forum where survivors share their struggles and problems and identify possible solutions. These groups encompass 395 survivors engaged in various local level activities including meeting with the community members and local government for survivors’ psychosocial support. A total of 241 group meetings were held in 2015.

Survivors in their regular group meeting

Community clinic helps to identify necessary initiatives in a comprehensive manner
Developing Survivors to become Change Agents

After ASF was established in 1999 the organization played an instrumental role in mobilizing civil society and government to ensure the state’s obligation to prevent acid violence and protect the rights of survivors. In 2010 ASF started developing survivors at community level to act as change agents to influence the government, civil society and community to be more accountable to the rights of acid survivors. Twelve change agents have been working in six districts raising awareness on acid violence as well as advocating for survivors’ protection and rights through mobilizing government, media, civil society and community elites.

Since 2006 ASF has arranged survivors’ conferences at the national and district levels to create an opportunity for survivors to meet, share their concerns and celebrate their achievements. These forums have enhanced solidarity among the survivors and empowered them to raise a collective voice for their rights. This experience has identified the need to establish a sustainable support system for survivors at the community level. In 2012 survivors’ groups were developed to function as a platform for collective voices to demand justice, protect rights, and advocate for social change.

There are currently 29 groups in 8 districts. The groups are not only addressing issues pertaining to acid violence but group members are also involved in resolving other social issues. Moreover, all the groups have started a monthly savings schemes for its sustainability. Some group leaders have taken further initiatives to address violence against women, dowry related disputes and early marriage in their communities.
Leadership Training for Survivors: In 2015 ASF organized four days long leadership training for 22 women survivors. The training included sessions on gender and gender based violence, leadership, empowerment, rights based approach and advocacy.

Participatory Action Research: In 2015 ASF organized three days long participatory action research workshop with survivor group members in Sirajgonj, Satkhira, Dinajpur, Mymensingh, Narsigndi and Bogra. The aim of the workshop was to identify problems and seek community based solutions through collective self enquiry and self determination. A total of 106 acid survivors which included 78 women and 28 men participated in the workshops.

Skill Development Training and Job Placement: In 2015 ASF provided six month long computer training to five survivors and one survivor received computer training from Jatiya Mohila Sangstha. Three survivors were also engaged as trainees in ASF’s Pressure Garment Unit. With the help of ASF’s partner NGOs two survivors were employed by a Jute Mill and a dying factory in their respective districts.

Capacity Development

Way Forward

Strengthen rehabilitation and reintegration support through livelihood and life-skills development.
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Challenges
- Most survivors belong to the lower income status with little or no assets, poor health, poor education and social support system. An effective rehabilitation plan must take into account the different dimensions of vulnerability.
- Women who are socially and economically dependent on their husbands or other family members require immediate support. Accessing government safety net and other support is a lengthy procedure and it is difficult to ensure timely delivery of the services.

Lessons Learned
- Case Management System is an effective tool to ensure cooperation and coordination between a multidisciplinary team to provide holistic services to acid survivors.
- A thorough need assessment and rehabilitation plan is important to ensure that appropriate services are available and accessible to clients and resources are allocated appropriately and it requires cooperation and coordination between different stakeholders including government.

Way Forward
- Strengthen rehabilitation and reintegration support through livelihood and life-skills development.
“I am not just a victim of acid attack, I am a woman as well. A man who disrespects a woman, can never be considered as a good human being,” said Suraiya Akhter Dolly from Mymensingh. She had a good family life comprising of six sisters, one brother and her parents. Her father was a farmer. Even after having to fend for such a big family, her father never neglected his children. His daughters were the apple of his eyes and he always referred to them as, “Ma”. Suraiya says, “While studying for long hours, we often used to fall asleep without eating anything. Our father then woke us up and fed us with his own hands.”

Dolly used to study in a Madrasa (Islamic school). Often, in class or in the roads, quite a lot of people used to harass her. When Dolly was studying in class 8 a teacher’s relative who resided abroad, asked for her hand in marriage. Dolly’s father was scared for his daughter’s security and therefore agreed to the marriage. In 2005, at the tender age of fourteen, Dolly got married to Monir Uddin. All was well for a few months after her marriage. Nine months later, her husband Monir Uddin returned to Saudi Arabia and came back after three months. At that time, Dolly was pressurized by her husband to bring money from her father and was even told that all her wedding ornaments would be sold off. Dolly even managed to bring some money from her father. But, without taking her permission, her husband sold her wedding jewelry. Later, it was discovered that Monir Uddin has become a drug addict. Her in-laws never raised their voices to protest against the torture that Dolly was being put through. In 2008, with her family’s permission, Dolly divorced Monir Uddin.

After the divorce, Monir Uddin regularly threatened her and even told her that he would burn her into complete ashes. On the 1st of September, 2008, which was also Ramadan eve, Monir Uddin threw acid at her face. After being admitted at Mymensingh Medical College Hospital, Dolly was taken to Dhaka Medical College Hospital on that very night. She stayed in the hospital for a long time and with the help of her family, she soon regained her health. Her father’s savings were used up in order to pay for her treatment. Later, she came to Acid Survivors Foundation for further checkup. She lost one of her eyes and an ear due to acid violence. Her face, hands, throat and chest were burnt. On the 9th of September, 2008, Dolly filed a case against Monir Uddin in the Gaforgaon police station. When adequate information was collected, the police took her statement. Dolly said, “I repeatedly received threats to withdraw the case. However, I simply said that the person who commits a crime and a person who tolerates that injustice, are both to be blamed and should be punished equally.” She also said that, “My father was disheartened to see me in such a miserable condition. He often cried by saying that he himself was responsible for ruining my life. This sorrow brought him to his death in 2010.” He was actively involved in Dolly’s case and ensured that every witness involved was brought to court. Dolly also said that the judge was a sensitive person. In 2011, the culprit was granted life sentence and his bail was set at one lakh taka. Three months after the court’s ruling, the accused was caught and has been held in captivity since then.

After the court’s decision, Dolly has started her life with new dreams. She was admitted in class 9 and successfully passed her SSC board exams. Alongside that, she works as an ambassador for acid survivors and uses her experience to provide peer support to survivors and work with classrooms.
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After the court’s decision, Dolly has started her life with new dreams. She was admitted in class 9 and successfully passed her SSC board exams. Alongside that, she works as an ambassador for acid survivors and uses her experience to provide peer support to survivors and work with communities to promote and protect the rights of other survivors. Dolly said that, “Every month, we survivors arrange a meeting where we share our sorrows. We can talk freely here and plan for a better life ahead.” She also added, “We will earn our rights, become self-supporting and will be able to stand for ourselves by becoming self-independent. By keeping this vision in mind, we have formed survivor groups. We hope and aspire to live as fulfilled human beings who are not neglected or looked down by anyone.”
LEGAL SUPPORT SERVICES

To address acid violence the Government of Bangladesh introduced two acts in 2002; the ‘Acid-Offences Prevention Act 2002’ and the ‘Acid Control Act 2002’. A National Acid Control Council and Acid Crime Case Monitoring Cell were also established under the Ministry of Home Affairs to regularly monitor acid crime cases and ensure effective implementation of the Acts.

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Legal support to survivors is provided by referring cases to the legal aid partners and closely following up with different stakeholders.

As the legal aid partners pursue cases for the survivors at the local level, ASF’s case managers and Advocate follow up with the Police and Public Prosecutors and correspond with local partners for better collaboration between all parties.

To speed up fair investigations and trials, ASF along with its legal aid partners also hold conferences and panels to discuss new and better methodologies and to provide status updates on the current landscape of acid offense in Bangladesh.

ASF also works with media to raise awareness on Acid related Acts and also to raise concerns related to impunity, corruption and structural and procedural barriers in justice.
According to the Acid Crime Case Monitoring Cell of Police Headquarters, 59 cases have been filed till October 2015 and a total of 2019 cases have been filed during 2002 to 2015. Even though cases are supposed to be complete in 90 working days, out of total number of cases, 1,200 cases, meaning of 59.4% filed in the last eleven years are still under trial. Among all the cases in which court has pronounced a verdict, approximately 25.5% of the accused case has been convicted and 74.5% has been acquitted.

ASF provides legal support to survivors of acid violence by referring acid cases to the legal aid partners who work at the grassroots to assist survivors in the day to day legal procedures and advocate for their cases at courts. ASF also communicate with survivors and their family and community members, police authorities including Deputy Commissioners, Superintendents of Police (SP), Officers in Charge (OCs), Investigation Officers (IOs), national and local Government organizations, Civil Surgeons, doctors, judges and partner organizations, Public Prosecutors (PPs), media personnel to follow up on cases and facilitate effective coordination from all different stakeholders.

### Partnership

In 2014 ASF activated the Legal Advisory Group for a collaborative approach that focuses on providing comprehensive legal aid support to survivors of acid violence. The Group consists of seven partner organizations dedicated to protecting and promoting human rights of poor and marginalized groups in Bangladesh. Partner organizations include Ain O Salish Kendra (ASK), brac, Naripokkho, Bangladesh National Woman Lawyers’ Association (BNWLA), Jatiya Mohila Sangstha, Bangladesh Society for Enforcement of Human Rights (BSEHR), and Bangladesh Legal Aid and Services Trust (BLAST). ASF refers cases to the legal aid partners to provide necessary support at the local level. The Legal Advisory Group meets quarterly to discuss strategies for providing legal support and strengthen advocacy initiatives.

### Achievements

- 44 cases have been referred to ASF’s legal aid partners. ASF’s legal aid partners have engaged panel lawyers to represent the survivor and are closely monitoring the cases.
- 115 survivors received legal advice.
- 20 medical certificates have been issued from ASF hospital.
- ASF doctors or advocate appeared in court 5 times to testify before the Tribunal.
- Verdicts were given in 5 cases under Acid Tribunals in Gaibandha, Netrokona, Jessore, Sirajgonj, and Rangpur.

### Challenges

- In many cases where verdicts against the perpetrators were death sentence or life imprisonment in lower courts, the perpetrators received bail, were acquitted or got a lesser sentence from the higher courts.
- Community elites often pressure survivors to settle or withdraw the case.
- In majority of cases it is very difficult to ensure witnesses to testify mainly for security concerns.
- As a result of delays in the court proceedings survivors are often unable to bear the cost to continue the case.

### Lessons Learnt

- Establishing partnership with legal aid organizations and enhancing coordination between partner organizations has been effective to increase reach and impact of ASF’s legal services.
- It is necessary to strengthen cooperation of duty bearers during the litigation process to ensure that survivors are well informed, aware of their rights, have willingness to seek legal support and have increased access justice.

### Way Forward:

More focus on judiciary system to implement two acts, Acid Offences Prevention Act, 2002 and Acid Control Act, 2002.
Jorina, a 49-year-old housewife from Sirajgonj, was facing conflict with her sister-in-law’s sons over a piece of land. The family land dispute had been going on for 7 years and the conflict escalated following her husband’s death. On March 11, 2011, Jorina and her sister-in-law’s sons got into an argument over the land. The incidence took place on the same night at 2:00 am when Jorina stepped out of her house to perform some chores and her sister-in-law’s sons barged in. They tried to pressure Jorina to sign over 33 decimal of land in their name, and when Jorina refused, the perpetrators threw acid on her.

Jorina’s case was referred to BRAC, and a panel lawyer was appointed for her case. ASF provided necessary support, including ensuring that a medical officer appeared before the tribunal as a key witness. At the argument stage, BRAC's panel lawyer noticed that the Public Prosecutor assigned to this case was not taking proper steps in presenting the arguments. BRAC's panel lawyer sent a notice to the judge requesting his presence with the PP in court to represent Jorina. Once the judge granted him permission, the panel lawyer argued the case in the tribunal.

Challenges

Jorina’s son filed the case on February 2011, the day after the incident. From the beginning, the accused party tried to use their influence to dismiss the case. At the initial stage, the police submitted the final report to the tribunal, however, the Investigating Officer willingly excluded the name of one of the accused in the charge sheet. At this stage, with the help of BRAC’s panel lawyer, a naraji (Disagree) petition was submitted to the tribunal against the final report. From the onset of the case, the Public Prosecutor showed a lack of interest, and it was clear that the accused was able to influence the Public Prosecutor to argue the case so the verdict remained in their favor. However, with the help of ASF, MMS, BRAC, and local print and electronic media, Jorina was able to pursue the case. At one stage of the court proceedings, the judge was transferred, which created a new challenge. The assigned Public Prosecutor refrained from disclosing important issues to the new judge but BRAC’s panel lawyer took a proactive role to present important information to the judge, inform witnesses of their court appearances, and ensure their presence in court. The panel lawyer also requested the court to consider all the evidence, including medical certificates, burn percentage, number of surgeries, and the chemical report where the type of acid (sulfuric) and the area of injury were mentioned.

There were a total of 12 witnesses, however, only 4 witnesses testified for the prosecution, and the other witnesses turned hostile. The matter of witnesses being influenced by the accused to testify in their favor was reported to the tribunal after which the tribunal took it into consideration.

The Verdict

On February 9, 2015, the Acid Crime Prevention Tribunal, Sirajgonj, sentenced two accused to life imprisonment with Tk. 50,000 as fine for throwing acid. It took four years to complete the case proceedings even though as it is stated in section 16(3) of Acid Crime Prevention Act 2002 that “the Tribunal shall dispose of a case within 90 days from the date of receiving the file.” Jorina had to wait four long years for justice during which she was under continuous threat and had to personally invest money. Despite all these challenges, her determination and perseverance enabled her to pursue the case to the end. However, after the verdict was declared, the accused submitted an appeal petition to the High Court Division. At the time of the verdict, the accused persons were in jail but two months after the verdict was declared, the accused have been granted bail from the High Court. Currently, the appeal case is pending, and Jorina is waiting for the trial to begin in the High Court Division.

THE STRUGGLE FOR JUSTICE

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“My case ran for five years and I was happy to see my perpetrator go to jail but now that he is out on bail I face threats again. I have the same feeling of hopelessness and insecurity that I felt after the attack.”

-Jorina
Over the last sixteen years, ASF has been focusing its prevention campaigns on raising awareness on acid violence and its legal and social consequences. In recent years, ASF has widened its focus to build awareness on the root causes of acid violence. ASF has observed that acid as a weapon is used in a wide range of contexts from land and domestic dispute to sexual harassment. ASF’s prevention campaigns focus on raising awareness on the multiple causes and consequences of acid attacks and the immediate steps that should be taken to minimize the detrimental effect of acid. The awareness raising campaigns target youth, families, communities, government and civil society.
Media

The media is a powerful instrument for social change and over the years ASF has been working with the media to prioritize anti-acid violence campaigns. ASF tries to reach a wider audience at the grassroots level through different types of mass media interventions. In 2013 the Government took initiatives to disseminate promotional materials developed by ASF on private and public TV channel free of cost. As a result in 2015 many public and private TV and radio channels broadcasted messages on legal consequences of acid violence and the importance of using water on burn injuries caused by acid. ASF also arranged four talk shows in 2015 on Skin Bank and Pressure Garment, Psychosocial Support, Legal Support, and Stigma and Disfigurement. The talk shows helped to raise important issues for policy and decision makers.
School Based Initiatives

ASF hosted events at various schools in 2015 to motivate students to take active roles to advocate for the prevention of acid violence in their communities. Multimedia presentations and docudramas are shown followed by interactive discussions which are held between students and ASF staff. The campaigns are also aimed to sensitize the youth on the social rehabilitation of victims and to encourage students to be supportive to survivors while reintegrating into schools and communities. Necessary information is also provided to the students on where to go for help and what immediate steps should be taken if an incident of acid violence occurs. In 2015 ASF conducted 217 school campaigns with 14,261 students and teachers.

Community Programs

ASF conducted various awareness raising campaigns in the hat bazaars in 2015. Folk media like popular theatre are used in this purpose and found to be an innovative communication tool for disseminating information to communities through entertainment. Its interactive method involves the participation of the audience to answer questions and ensure that social messages are well received by them. ASF arranged 11 bazaar campaigns in 2015 with 6,000 participants.
Community Leader Orientation Workshop

In 2015 ASF arranged 6 Community Leader Orientations in Sirajgonj, Satkhira, Mymensingh, Bogra, Dinajpur, and Narshingdi. The total participants included 89 women and 142 men. The aim of the orientation was to ensure that relevant local actors are aware of the existing mechanisms, their roles and responsibilities and to create a basis for accountable and accurate provision of services for preventing and responding to acid violence.

Advocacy

ASF has been instrumental in facilitating the process of the drafting and enactment of two Acid Acts. The Acts are holistic in their approach and do not only address the effects of acid violence but also has provision for awareness raising and providing medical, legal and rehabilitation support to victims. The government established the National Acid Control Council (NACC) and District Acid Control Committees (DACC) under the Acid Control Act 2002, which provides for an independent fund to “procure funds to fulfill the goal of creating public awareness about the bad effect of the misuse of acid and its dangerous aspects and to provide treatment and legal assistance to the victim and to rehabilitate them”.

Advocacy meeting with local administration

Mobilizing Communities

ASF has focused on advocacy at the grassroots level through a series of awareness raising campaigns and meetings. It created a forum for survivors to share their stories and strategies for overcoming legal and social barriers, and to express solidarity. ASF also conducts community meetings with community elites including UP members, Chairman, teachers and other professionals to motivate community members to take active roles to enable survivors to reintegrate into the society. ASF has developed survivors to act as Ambassador to advocate for their rights and entitlements. Survivor Ambassadors hold advocacy and lobby meetings with members of the Union Parishad, local officials of DSS, MOWCA, police and the Deputy Commissioner’s office. ASF conducted 52 meetings with DACC, 28 meetings with the Department of...
Social Services, 43 meetings with local government, 24 meetings with local thana, 22 meetings with public prosecutors, 22 meetings with the Department of Women and Children Affairs and 33 meetings with relevant institutions.

Dialogue with Local Administration.

ASF arranges dialogue with acid sellers and users to prevent the use of acid for criminal offenses and for better implementation of the Acid Control Act 2002 (amendment 2010). The Act is meant to control ‘the import, production, transportation, hoarding, sale and use of acid, and to provide treatment to victims of acid violence, rehabilitate them, and provide legal assistance’. The dialogue meetings were arranged between district authority and acid sellers and users aimed to increase awareness among acid sellers and users on their obligations under the Acid Control Act 2002 and for the authorities to take appropriate measures for the proper enforcement of the law. In 2015 ASF arranged 17 meetings with acid sellers and users in 6 districts of which 3 were at the district level and 14 were at the upazilla level.

At the district level ASF’s advocacy initiatives include mobilizing the local government, NGOs, media, and other agencies to support survivors to access government and other services. ASF maintains necessary advocacy and lobby activities with relevant groups to facilitate a dialogue between survivors and government officials on access and delivery of services. ASF in partnership with local NGOs arranged dialogue with relevant government agencies in 2015 in 6 districts which included Satkhira, Sirajgonj, Narsingdi, Mymensingh, Bogra, and Dinajpur. The entire program was divided into two segments. The first part of the event included a workshop where survivor group members formed a District Committee and prepared a declaration to be presented to the district authorities. The second part included a dialogue with the relevant district authorities on social and economic rehabilitation services from government agencies and access to justice.

Influencing Policy Makers

ASF is an active member of the National Acid Control Council (NACC) and member of the Acid Crime Case Monitoring Cell under the Ministry of Home Affairs. ASF uses these forums to raise concerns about the challenges faced in providing medical, legal and rehabilitation support to survivors and advocate for effective implementation of the two Acts. ASF participated in one NACC meeting and one Acid Crime Case Monitoring Cell meetings which were held in 2015.

Dialogue with Stakeholders for Effective Implementation of two Acid Related Acts

ASF in collaboration with ASF’s Legal Advisory Group members which include brac, BLAST, BNWLA, ASK, Naripokkho, Jatiyo Mohila Sangstha and Bangladesh Manabadhikar Bastabayan Sangstha arranged a conference on ‘Ensuring Justice for Acid Survivors through Prompt and Effective Judicial Process’ on December 5th, 2015. Participants included survivors, Public Prosecutors, Assistant Public Prosecutors, Panel Lawyers and Staff Lawyers from 21 districts of the country. Justice Md. Imman Ali, Appellate Division Bangladesh Supreme Court attended the conference as the Chief Guest and Special Guests included were Ms. Nasreen Begum, Additional Secretary, Legislative and Parliamentary Affairs Division, Ministry of Law, Justice and Human chain to justice for Yasmin Akter of Narayanganj. Yasmin succumbed to her injuries after being attacked by her husband.
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Parliamentary Affairs, Government of the peoples’ Republic of Bangladesh; Mr. Abu Kalam Siddique, Additional Inspector general of Police (Crime-East), Head Quarters, Bangladesh Police; and Ms. Rina Roy, Director Rights, Manusher Jonno Foundation and Advocate Tawhida Khandaker, Director-Legal, BNWL; and Advocate Saleha Khatun, District Project Officer, BLAST were the panel discussants. ASF’s board member and President, BNWL Advocate Fawzia Karim Firoze chaired the conference and Advocate U.M Habibun Nessa, Member, Naripokkho and Member, Board of Trustee, ASF moderated the open discussion.

Recommendations from the Conference

- In incidents where acid cases have a stay order from the High Court Division it is important for the Attorney General Office to monitor these cases
- The issue of safety and security of the victim and witnesses is not clearly mentioned in the Acid Offence Prevention Act 2002
- Case related papers and documents should be preserved properly
- It is important to prepare the witnesses prior to the trial and provide orientation and guidance during the trial
- Ensure victim’s right to protection from intimidation and harassment and establish a witness protection system
- Ensure judicial process is completed in 90 working days as stated in the Act
- Increased cooperation and sensitization of Police and Public Prosecutors.

Challenges:

- Land dispute is the leading cause of acid violence and it is difficult to address the complex nature of land related dispute which remains to be a serious concern in Bangladesh
- Acid is widely used in small and large scale industrial capacities and it is challenging to ensure effective monitoring mechanisms for users who are working out of home or involved in small cottage industries.

Lessons Learned:

- Regular dialogue with communities through meetings, workshops, orientations is effective to create a supportive environment for survivors
- Dialogue with District Administration and acid sellers and users to strengthen awareness on the Acid Control Act 2002 has been effective to increase the number of applications to obtain and renew licenses.
- More initiatives are required to work with youth and students to increase awareness on gender inequality and discrimination

Way Forward

- Building institutional linkages at National and local level.
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Way Forward:

- Building institutional linkages at National and local level.
ASF’S RESEARCH INITIATIVES

ASF conducted two research studies in 2015 which will provide strategic guidance to ASF in the design and monitoring of ASF’s program interventions.

Implementation Status of the ‘Acid Offences Prevention Act 2002’ and ‘Acid Control Act 2002’ in Bangladesh

The study “Implementation Status of the Acid Offences Prevention Act 2002 and Acid Control Act 2002 in Bangladesh” was conducted to analyze the actual implementation status, i.e. trends and patterns of two acid related acts, the challenges faces by the survivors in terms of receiving legal justice, and the specific recommendations for addressing factors inhibiting legal justice of the victims of acid violence.

The study is primarily a qualitative analysis of the data collected through FGDs, KII’s and Case Studies. Additionally, a total of 25 judgments from different Acid Crimes Prevention Tribunals were reviewed to get an overview of the courts’ perception and reasoning in coming to a conclusion of conviction or acquittal of the accused. The study has been conducted in four districts of Bangladesh namely, Dhaka, Satkhira, Sirajganj and Sylhet; and a total of 152 respondents have been covered through different processes of data collection.

The study findings confirmed that the significant trend that was noticed was regarding lack of awareness on the two acid related laws. Majority of the participants had never heard of any of the laws and are not aware of the services of the formal duty bearers under the laws, e.g. the local administration, police and judiciary.

The study has also identified and analyzed a number of immediate, underlying and root causes that appeared to be preventing effective implementation of the two acid related laws. Nonappearance of witnesses, noncooperation and flawed investigation by police, inefficiency and bias of the Public Prosecutors, lengthy disposal of cases before the tribunal, frequent bail and stay orders from HCD, ineffective role of the NACC and DACC, weak monitoring of acid use and complicated process of obtaining license have been identified as the key implementation barriers. In addition, lack of legal awareness (both among public and service providers), non-availability of government legal aid, delayed execution of punishment, growing perception of acid cases being false (among the service providers), have also been identified as reasons preventing effective implementation of the two acid related laws.

The study finally concludes by indicating a large number of recommendations considering the implementation gaps of the two acid acts and providing a brief implementation guideline for specific groups of stakeholders to work upon, as immediate goals to achieve.

Round table discussion on research study
Coping with Disfigurement: A Focus on Survivors of Acid and Other Burn Violence

The research “Coping with Disfigurement: A Focus on Survivors of Acid and Other Burn Violence” was conducted to collect information on people’s perception on disfigurements, challenges faced by the survivors with disfigurements to cope with, the strategies which are required to address the personal and social impacts of survivors of acid and other burn violence, and finally, recommendations on the necessary actions required to address any negative perception of people to cope with disfigurements.

The research was conducted by following both quantitative and qualitative methods, where a total of 120 one-to-one surveys were administered on survivors of acid and other burn violence. Moreover, 6 FGDs, 12 KIIs, 18 IDIs and a Facial Disfigurement Photograph Scale were adopted with different stakeholders for capturing data on the respective issues.

The research findings indicated that almost 95.8% survivors face physical hurdles due to their disfigurements, and maximum survivors reported that they are still facing physical problems like weakness, unable to lift heavy objects, skin tightness and severe itching which limit their capability to work like other people.

The research findings also confirmed that almost all the survivors went through some common psychological changes after acid attack and some of the survivors face critical or different types of changes such as depression, anxiety, PTSD, phobia, social avoidance, lack of confidence, low self-esteem, anger, etc. depending on their demographic background.

The research has also identified and analyzed a number of reasons those are stated by general people perceives survivors with disfigurement are: disfigurements of the survivors are due to their past sins, survivors are considered as unemployment and a burden to their families, incapable of taking care of their livelihoods, incapable of performing jobs on the same level as others, incapable of maintaining social and personal relationships, likely to end up living lonely lives, etc.

Finally, the research concludes by indicating few positive and negative coping strategies for the survivors with disfigurements. Under positive strategy, optimistic outlook for life, sharing stress with the family members, self-counseling about the situations, communicating and interact with other people, ability of acceptance the disfigurement as a part of life, etc. were identified by the respondents of the research. Under negative strategy, the survivors got hurt by the comments of the people and felt unloved, unwanted, unattractive, and embarrassed and discourage to go outside and interact with people due to their disfigurements.
ASF strengthened institutional linkage with different organizations and forums/networks in 2015 through programmatic different interventions. ASF being a part of a project entitled Initiative to End Violence against Children project of SAIEVAC Bangladesh and Ministry of Women and Children Affairs to mitigate and eliminate all forms of Violence, abuse, exploitation, neglect and discrimination against all children. In this process ASF initiated two different campaigns on all forms of Violence against children on 25th and 26th February 2015 with the technical assistance of Aid Comilla at Birchandra Nagar Milanayatan, Comilla; and Upazila Parishad Milanayoton, Chouddagram, Comilla. Mr. Hasanuzzaman Kollol, Deputy Commissioner, Comilla; and Debmoy Dewan, Upazila Nirbahi Officer, Chouddagram were present as the chief guest of the two different meetings respectively. This initiative increased the collaboration between government, civil society and children’s forums.

As members of South Asia Men Engage steering committee member ED of ASF joined 2 meetings held in Pune, India and Colombo in Srilanka. It was an opportunity for sharing and learning experience of Men engage work to promote Gender justice. Also on behalf of ASF, Executive director joined International conference on Men and Masculinities in New York as presenter. She has shared key findings and recommendations of the study on “Perpetrators perspectives. Executive Director of ASF also attended consultation workshop in Nepal organized by Interburns where Advocacy and capacity building tools/strategies has been shared with participants.

In November 3-5, 2015 Executive Director attended “International Conference on Women’s Shelter “as keynote presenter. She has shared ASF’s experience to address Acid violence and Bio-psychosocial model with different actors and shared the key messages with the participants that ASF does not promote the shelter because ASF strongly believe that survivors have their right to go back their community and live with dignity. Successful reintegration is the key issue of ASF’s work. Shelter could be the last resort if there are no alternatives.

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Men and Boys Network, Girl Child Advocacy Forum etc) at National level. As results of this kind of initiatives ASF’s credibility of work and positive image has been improved and recognized by other key actors. Institutional linkages with government institutions through health professionals also added value.

Way Forward:

- Building institutional linkages at National, Regional and international level to share knowledge and expertise.
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Way Forward:

Building institutional linkages at National, Regional and international level to share knowledge and expertise.
AUDIT REPORT

Khan Wahab Shatique Rahman & Co
Chartered Accountants

AUDITORS’ REPORT

TO THE BOARD OF TRUSTEES OF
ACID SURVIVORS FOUNDATION (ASF)

We have audited the accompanying Consolidated Financial Statements of Acid Survivors Foundation (ASF) which comprise the Consolidated Statement of Financial Position at 31st December, 2015, Consolidated Statement of Comprehensive Income and Consolidated Statement of Cash Flow for the year then ended, and a summary of significant accounting policies and other explanatory notes on that date.

Management Responsibility for the Financial Statement
Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Financial Reporting Standards (IFRS) as adopted by the Institute of Chartered Accountants of Bangladesh (ICAB) as IFRS and for such internal control as management determines is necessary to enable the preparation of Financial Statements that are free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility
Our responsibility is to express an independent opinion on these financial statements based on our audit. We conducted our audit in accordance with Bangladesh Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

Scope
An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the financial statements present fairly, in all material respects, the consolidated financial position of Acid Survivors Foundation (ASF) as at 31st December, 2015, and its financial performance for the year then ended and comply with other applicable laws and regulations.
We also report that:

a) we have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit and made due verification thereof;

b) in our opinion, proper books of accounts as required by law have been kept by the organisation so far as it appeared from our examination of those books; and

c) the Consolidated Statement of Financial Position and Consolidated Statement of Comprehensive Income of ASF dealt with by this report are in agreement with the books of account.

Dhaka, March 31, 2016

Khan Wahab Shafique Rahman & Co.
Chartered Accountants
### Audit Report

**Acid Survivors Foundation**

**Consolidated Statement of Financial Position**

**As at 31st December, 2015**

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Note(s)</th>
<th>Amount (In Taka)</th>
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</thead>
<tbody>
<tr>
<td><strong>Property &amp; Assets</strong></td>
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<td><strong>Non-Current Assets</strong></td>
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<td><strong>Current Assets</strong></td>
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<td>Investments</td>
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<td>Advances and Deposits</td>
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<td>Cash and Cash Equivalents</td>
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<td><strong>Less: Current Liabilities</strong></td>
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<td>Provision for Expenses</td>
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<td>Payable to AusAID Accountant</td>
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<td><strong>Net Current Assets</strong></td>
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<td><strong>Total</strong></td>
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<td>134,242,285</td>
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Signed in terms of our annexed report of even date.

**Dhaka, March 31, 2016**

Khan Wahab Shafique Rahman & Co. Chartered Accountants
Auditor Report

Acid Survivors Foundation

Consolidated Statement of Comprehensive Income

For the year ended 31st December, 2015

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Note(s)</th>
<th>Amount (In Taka)</th>
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<tbody>
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<td>2015</td>
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<tr>
<td><strong>Income</strong></td>
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<td>Project donation</td>
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<td>Donation from government</td>
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<td>2,048,874</td>
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<td>Donations from individuals</td>
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<td>357,838</td>
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<td>Other income</td>
<td>15</td>
<td>12,340,056</td>
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<tr>
<td>Recovery from projects at Head Office (overhead)</td>
<td>16</td>
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<td><strong>Total Income (A)</strong></td>
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<td>94,158,099</td>
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<td><strong>Expenditure</strong></td>
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<td>Administrative and General Expenses</td>
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<td>Personnel expenses</td>
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<td>17,799,831</td>
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<td>Administrative expenses</td>
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<td>14,926,046</td>
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<td>Communication</td>
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<td>Utilities</td>
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<td>Transport/Logistics expenses</td>
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<td><strong>Program</strong></td>
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<td>Support to survivors</td>
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<td>Medical support program</td>
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<td>Research advocacy and prevention unit</td>
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<td>6,574,931</td>
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<td>Psychosocial support unit</td>
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<td>Legal unit</td>
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<td>347,823</td>
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<td>Increase organisational capacity building (Program)</td>
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<td>4,530,209</td>
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<td>Human resources development</td>
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<td>Increase organisational capacity</td>
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<td>Audit fee</td>
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<td><strong>Others</strong></td>
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<td>Depreciation</td>
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<td>2,189,685</td>
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<td>(Financial charges)</td>
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<tr>
<td><strong>Total Expenditure (B)</strong></td>
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<td>90,334,052</td>
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<tr>
<td>Excess/(deficit) of income over expenditure (C=A-B)</td>
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<td>4,024,047</td>
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</tbody>
</table>

The annual notes form an integral part of these financial statements.

[Signatures]

Treasurer

Executive Director

[Signature]

Dhaka, March 31, 2016

Khan Wahab Shafique Rahman & Co.
Chartered Accountants
Acid Survivors Foundation
Consolidated Statement of Cash Flows
For the year ended 31st December, 2015

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Amount (In Taka)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Cash flows from operating activities</td>
<td></td>
</tr>
<tr>
<td>Project donations</td>
<td>79,611,142</td>
</tr>
<tr>
<td>Interest received</td>
<td>2,569</td>
</tr>
<tr>
<td>Other donation received</td>
<td>2,666,712</td>
</tr>
<tr>
<td>Income from sustainable project</td>
<td>2,060,069</td>
</tr>
<tr>
<td>Recovery from projects &amp; Head Office overhead</td>
<td>409,075</td>
</tr>
<tr>
<td>Bank charges</td>
<td>(136,347)</td>
</tr>
<tr>
<td>Support to survivors through various units</td>
<td>(57,143,004)</td>
</tr>
<tr>
<td>Increased organisational capacity</td>
<td>(3,526,186)</td>
</tr>
<tr>
<td>Advances and loan realisation</td>
<td>7,112,523</td>
</tr>
<tr>
<td>Other received</td>
<td>4,360</td>
</tr>
<tr>
<td>Paid for management and internal operation</td>
<td>(35,703,976)</td>
</tr>
<tr>
<td>Paid against previous year’s provision</td>
<td>569,724</td>
</tr>
<tr>
<td>Net cash from/(used in) operating activities (A)</td>
<td>5,863,523</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Cash flows from investing activities</td>
<td></td>
</tr>
<tr>
<td>FBR encashment</td>
<td>51,063,883</td>
</tr>
<tr>
<td>Investment in FDR</td>
<td>(56,286,618)</td>
</tr>
<tr>
<td>Interest on investment</td>
<td>12,234,087</td>
</tr>
<tr>
<td>Purchase of property, plant and equipment</td>
<td>1,629,909</td>
</tr>
<tr>
<td>Sale of property, plant and equipment</td>
<td>12,397</td>
</tr>
<tr>
<td>Net cash used in investing activities (B)</td>
<td>8,233,939</td>
</tr>
<tr>
<td>Net increase/(decrease) in cash and cash equivalents (A+B)</td>
<td>14,147,473</td>
</tr>
<tr>
<td>Opening cash and cash equivalents</td>
<td>11,960,378</td>
</tr>
<tr>
<td>Closing cash and cash equivalents</td>
<td>26,107,851</td>
</tr>
</tbody>
</table>

[Signatures]

Treasurer

Executive Director
Contribution to ASF : 2015

Donor Agencies

Australian Government

Individual Donation
Mr. Ahyam, Mr. Reshed Ahsan, Dr. Nasima Akter, Ms. Fraza, Mr. Anamul Haque, Ms. Nabila Fahreen, Mr. A H Chowdhury, Mr. Nafis Sikdar, Ms. Sazia Afreen, Ms. Bernhard Schill, Mr. Oliver Kittnar, Ms. Humaira Hamim

Organization Donation
Australian International School, Canadian High Comission, Aswad Composite Mills Ltd, Texco, ISABS, Property Care Service (PVT), Center for Addict, Inter Burns, Army Ladies Club

ASF would like to thank the people who have donated their time to ASF. We have made every effort to ensure accuracy in our donor list. We apologize for any errors or omissions and would like to request any necessary changes to be brought to our attention so we can rectify our records.

ASF Partners
ASF is grateful for the support that its partners have provided over the years. Their innumerable contributions and collaborations have allowed ASF to provide essential services to its survivors. We thank them for being there at every step of the rehabilitation process, from legal support, to grassroots advocacy, to social reintegration.

- brac
- Manab Mukti Sangstha (MMS)
- PAPRI
- Agrogoti Sangstha (AS)
- Sabalamby Unnayan Samity (SUS)
- Light House
- Ain O Salish Kendra (ASK)
- Bangladesh National Woman Lawyers’ Association (BNWLA)
- Naripokkho
- Jatiya Mohila Sangstha
- Bangladesh Manabadhikar Bastabayan Sangstha (BSEHR)
- Bangladesh Legal Aid and ServicesTrust (BLAST)
- Engage Men & Boys Network
- National Girl Child Advocacy Forum
- The Hunger Project
- CIDV – Citizens Initiative Against Domestic Violence
- WE CAN Bangladesh
- HRFB – Human Rights Forum Bangladesh
- Nari Nirapotta Jote
- Social Action Committee
CONTRIBUTION OF LOCAL AND INTERNATIONAL DOCTORS & SURGEONS

Plastic Surgeons
Prof. Dr. Shafquat H. Khundkar
Associate Prof. Dr. Muhammad Quamruzzaman
Associate Prof. Dr. Ahmad Seraji
Assistant Prof. Dr. Md. Rashedul Islam

Anaesthesist
Dr. Waheed Murshed
Dr. Taslema Chowdhury
Dr. Mohsin Mollah
Dr. Sumon Sikder
Dr. Ferdous Ali
Dr. Saidur Rahman Khan

Ophthalmologist
Associate Prof. Dr. Faridul Hasan

ENT Consultant
Associate Prof. Dr. A. Allam Chowdhury

Thoracic Surgeon
Associate Prof. Dr. A.K.M. Razzak

Assistant Surgeon
Dr. Mohammed Mazharul Haque
Dr. Hasan Naziruddin
Dr. Masroor Ur Rahman Abir
Dr. Raihan Anwar
Dr. Mirza Shamsul Arefin
Dr. Zahid Iqbal
CONTRIBUTION OF LOCAL AND INTERNATIONAL DOCTORS & SURGEONS
Acid Survivors Foundation
Plot A/5, Block A, (ICRP Bhaban 5th & 6th Floor), Mirpur 14, Dhaka 1206
Tel: 09678777148, 09678777149, ASF Hotline: 01713010461
Email: asf@acidsurvivors.org, URL: www.acidsurvivors.org