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May - August 2023

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## Assess the Knowledge and Attitude Regarding Breastfeeding among Primipara Mothers in Selected Hospital, Chengalpattu

Vanvaguladevi J<sup>1</sup>, Sumathi C<sup>2</sup>, Jayanthi P<sup>3</sup>, Ciby Jose<sup>4</sup>

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### Abstract

**Background:** Breastfeeding is one of the most effective ways to ensure child health and survival. Breastfeeding is a process in which the human breast milk is fed to the infant. Exclusive breastfeeding delays the return of the mother's menstrual period, which can help to extend the time between pregnancies.

**Aim and Objectives:** To assess the knowledge and attitude regarding breastfeeding among primipara mothers.

**Methodology:** Quantitative research approach, descriptive research design was used. 50 postnatal mothers were selected using non-probability convenient sampling technique. The study was conducted at Government hospital, Chrompet.

**Results:** The attitude mean score regarding breastfeeding was 81.48 and the knowledge mean score of breastfeeding was 10.48.

**Conclusion:** The study revealed that there is a significant difference in the knowledge and the attitude regarding breastfeeding among primipara mothers. So, the mothers need to be educated regarding the importance of breastfeeding.

**Keywords:** Knowledge; Attitude; Breastfeeding; Primipara mothers.

## INTRODUCTION

Breastfeeding is one of the most effective ways to ensure child health and survival.

Breastfeeding is a process in which the human breast milk is fed to the infant.

The World Health Organization (WHO) recommends that breastfeeding should begin within the first hour of a baby's life and continue as often and as much as the baby wants. WHO recommends exclusive breastfeeding for the first 6 months of life, followed by continued breastfeeding with appropriate complementary foods for up to 2 years and beyond. It help the breastfeeding mothers to recover from childbirth more quickly and easily. The hormone oxytocin released during breastfeeding acts to return the uterus to its regular size more quickly and can reduce postpartum

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bleeding. Exclusive breastfeeding delays the return of the mother’s menstrual period, which can help to extend the time between pregnancies.

Worldwide, 135 million babies born every year. Only 42% are breastfed within the first hour of life. Only 38% of mothers practice exclusive breastfeeding during the first six months and 58% of mothers continue breastfeeding up to the age of two years and beyond. About 44% of infants 0–6 months old are exclusively breastfed. Over 820000 children’s lives could be saved every year among children under 5 years, if all children 0–23 months were optimally breastfed. (WHO Factsheet, 2022). In India, less than 50% of children are breastfed within an hour of birth, whereas the rate of exclusive breastfeeding in the first 6 months stands at 55%. Many infants and children do not receive optimal feeding.

### OBJECTIVES OF THE STUDY

1. To assess the knowledge and attitude regarding breastfeeding among primipara mothers.
2. To associate the level of knowledge and attitude regarding breastfeeding among primipara mothers with their selected demographic variables.

### HYPOTHESES

**H<sub>1</sub>:** There is a significant difference in the knowledge and attitude regarding breastfeeding among primipara mothers.

**H<sub>2</sub>:** There is a significant association between the level of knowledge and attitude regarding breastfeeding among primipara mothers with their selected demographic variables.

### METHODOLOGY

Quantitative research approach with descriptive research design was used for the study. 50 primipara mothers were selected using non probability convenient sampling technique. The study was conducted at Government hospital, Chrompet. The demographic variables included were age of the mother, education, occupation, religion, type of delivery and sex of the baby. The tool consisted of a semi-structured knowledge questionnaire and 20 items rating scale to assess the knowledge and attitude of primipara mothers. Written informed

consent was obtained from the primipara mothers. Privacy and confidentiality were maintained throughout the data collection.

## RESULTS AND DISCUSSION

The study revealed that majority of the mothers 28 (56%) were in the age group of 20-24 years, 43 (86%) belonged to hindu religion, 50 (100%) were homemakers, 28 (56%) were graduates, 35 (70%) undergone lower segment caesarean section (LSCS) and 28 (56%) mothers had delivered a male baby.

Majority of the mothers 26 (52%) had inadequate knowledge 19 (38%) had moderately adequate knowledge and only 5 (10%) mothers had adequate knowledge regarding breast feeding. Majority of mothers 47 (94%) had positive attitude and only 3 (6%) mothers had negative attitude towards breastfeeding.

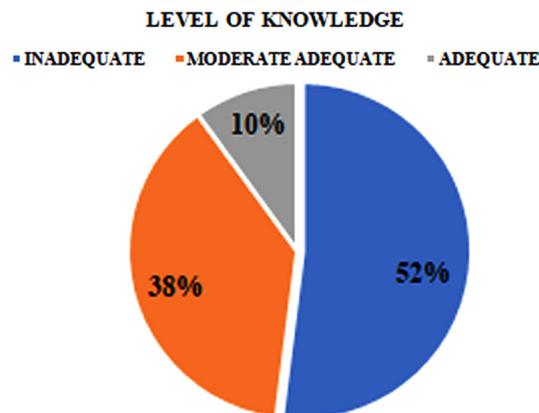


Fig. 1: Knowledge regarding breastfeeding among primipara mothers

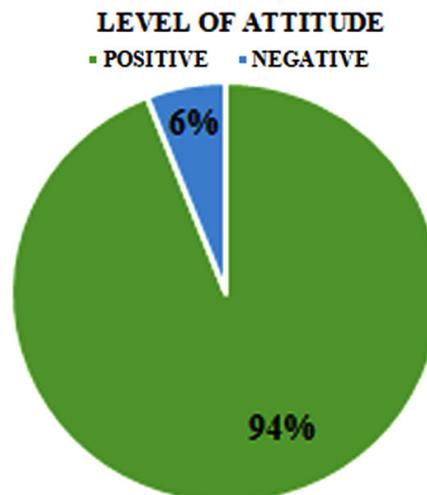


Fig. 2: Attitude regarding breastfeeding among primipara mothers

The study results were consistent with the study conducted by Amarendra B (2019) regarding knowledge of the primipara mothers at selected hospital in Guntur district, Andhra Pradesh. A total of one hundred primigravida were selected by using convenient sampling technique. A structured knowledge questionnaire was used to collect the data. The results showed that out of 100 participants 71% had moderately adequate knowledge, 27% had inadequate knowledge and 2% had adequate knowledge.

Another study conducted by Sandhiya (2015) among primipara mothers admitted in Krishna Hospital, Karad. An evaluative survey approach with purposive sampling technique was used for data collection with a structured interview schedule related to attitude of mothers. Majority 20 (57.14%) mothers had average attitude of breastfeeding.

There was a significant association between the level of knowledge and attitude with the selected demographic variables such as age, religion, education, type of delivery, and sex of the baby were found at  $p < 0.05$  level of significance. The results were supported by Sharma E (2020) conducted a study among 100 mothers using purposive sampling technique. The instrument used for data collection was a self-structured knowledge questionnaire. The study showed that 12% mothers had poor knowledge, 77% had average knowledge and 11% had good knowledge in Govt Hospital, Gandhi Nagar, Jammu. The knowledge score was significantly associated with the age of mothers, education, occupation, type of family, number of family members and the dietary pattern ( $p > 0.05$ ) whereas score was not statistically significantly associated with the religion of the mothers ( $p < 0.05$ ).

## CONCLUSION

The study results revealed that there is a significant difference in the knowledge and attitude regarding breastfeeding among primipara mothers. This study implied that developing programs that enhance women's participation in education and decision making as well as providing nursing mothers with adequate and up-to-date breastfeeding information could be significant in improving breastfeeding practices.

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# The Vital Role of Emotional Intelligence in Nursing Practice

Gowri Sayee Jagadesan

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## Abstract

Emotional intelligence is a crucial skill that enables nurses to understand and manage their emotions as well as the emotions of others. This article discusses the benefits of Higher emotional Intelligence, importance of Emotional intelligence in nursing practice and the different elements of emotional intelligence and their relevance to Nursing practice. It also explores the way in which nurses can develop their Emotional intelligence skills. This article concludes by emphasizing the need for nurses to prioritize Emotional intelligence in their practice to provide high quality, compassionate care to their patients.

**Keywords:** EI-Emotional; Intelligence.

## INTRODUCTION

Nursing is a profession that requires a high level of Empathy, Compassion and communication skills. Nurses are responsible for caring for patients, and Emotional intelligence plays a crucial role in this process, Emotional intelligence is the ability to understand and manage ones emotions of others. It is an essential skill that Nurses need to possess to provide effective care to their patients. In this article, we will explore the importance of emotional intelligence in the nursing

profession, its impact on patient care, and how nurses can develop their Emotional intelligence skills.

### *What is Emotion?*

The oxford English Dictionary defines emotion as any agitation or disturbance of mind, feelings, passion; any vehement or exited mental state.

According to Daniel Goleman Emotion refers to a feeling and its distinctive thoughts, psychological and biological states and range of propensities to act.

Managing emotions is especially important in situations when we are under pressure.

- ✓ Giving and receiving feedback
- ✓ Meeting tight deadlines
- ✓ Dealing with challenging relationships
- ✓ Not having enough resources
- ✓ Navigating change
- ✓ Working through setbacks and failure

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### *What is Emotional intelligence?*

Emotional intelligence or EI is the ability to understand and manage your own emotions, and those of the people around you. People with a high degree of Emotional intelligence know what they are feeling, what their emotions mean, and how these emotions can affect other People.

**The Institute for Health and Human Potential describes** Emotional intelligence as "being aware that emotions can drive our behaviour and impact people (positively and negatively), and learning how to manage those emotions both our own and others especially when we are under pressure."

Emotional intelligence is the capacity for recognising our own feelings and those of others, for motivating ourselves, and for managing emotions well in ourselves and in our relationships  
**Daniel Goleman**

- ✓ Emotional intelligence is the aspect of human intelligence that governs our ability to recognize, understand, control and use of emotions in solving problems of a personal and interpersonal nature (**Bar-On**)
- ✓ EI as the "ability to accurately appraise and express emotions in oneself and others and the use of feelings to motivate, plan and achieve in one's life," (**Salovey & Mayer, 1990**).

### *Benefits of Higher Emotional Intelligence*

- ✓ People with higher emotional intelligence find it easier to form and maintain interpersonal relationships and to 'fit in' to group situations.
- ✓ People with higher emotional intelligence are also better at understanding their own psychological state, which can include managing stress effectively and being less likely to suffer from depression.

### *Importance of Emotional intelligence in Nursing*

Nursing is by nature an emotionally charged profession, with nurses serving at the frontline of healthcare.

The Nursing workplace is a highly stressful environment, with many Nurses managing the emotional events surrounding death and illness in their patients.

In such stressful situations, interpersonal relationships can be affected. There has been increasing concern about aggression in healthcare

settings directed at nurses, primarily from colleagues and supervisors.

EI helps nurses build successful interpersonal relationships, obtain support from others and manage workplace stress.

EI is hypothesized to improve the workplace by allowing individual Nurses to interpret workplace events accurately, decreasing misunderstanding as well as regulating their own emotions.

Emotional intelligence improves communication so that Nurses can cope more effectively with conflict.

Most importantly, when nurses apply emotional intelligence, it leads to a better patient experience Emotional intelligence may be a Nurses most valuable asset to provide high quality of patient care.

Emotional intelligence leads to empathy which plays an important role in establishing patient trust. A major benefit of this trust is that patients may be more likely to adhere to their Nursing care plan which results in better outcome.

### *Elements of Emotional Intelligence*

1. Self-awareness
2. Self-regulation
3. Motivation
4. Empathy
5. Relationship management (social skills)

#### *1. Self-awareness*

- Nurses with self-awareness know how they feel at all times and know how their emotions and actions can affect others.
- Being self-aware allows personal growth through the embracement of constructive feedback.
- Authentic self-awareness allows the Nurse to identify personal strengths and weaknesses and to be comfortable with emotional discomfort. For example, a nurse with self-awareness may have different opinions with a colleague, but does not take the differences in opinion personally but rather acknowledges and embraces differences.
- Nurse leaders who have self-awareness have a clear picture of their strengths and weaknesses and behave with humility.

### **What can you do to improve your self-awareness?**

Self-awareness can be developed through objectively evaluating oneself. Writing down one's strengths and weakness, helps oneself become more aware of themselves. Additionally, being willing to listen to colleagues providing honest and constructive feedback will promote personal and professional growth.

**Keep a journal:** Journals helps to improve your self-awareness. If you spend just a few minutes each day writing down your thought's strengths and weakness, this can move you to a higher degree of self-awareness. Journaling this information along with one's achievements, goals, and plans will allow for self-reflection which fosters self-awareness.

**Mind fullness and meditation:** allows individuals to be at a place to better self-reflect and focus on self-awareness.

**Slow down:** When you experience anger or other strong emotions, slow down to examine why. Remember, no matter what the situation, you can always choose how you react to it

Finally, personality tests exist that may help individuals better learn about traits that influence who they are and thus assist Nurses in understanding why they feel and react the way they do personally and professionally.

## **2. Self-regulation**

- Being self-aware allow nurses to be self-regulated, a second trait of emotional intelligence.
- Self-regulated nurses rarely verbally attack others, make rushed or emotional decisions, stereotype people, or compromise their values.
- Self-regulation is all about staying in control. Although nurses find themselves in stressful situations, developing self-regulation will allow stressful situations to not become worse and minimize chaos.
- Self-regulation can be most difficult when interacting with colleagues who do not agree and patients and families who are in denial about their illness/wellness state.
- Nurses who self-regulate listen more than talk. They do not take other's comments personally, but rather puts the statements in context of the situation.
- Self-regulation is not just about verbal restraint but also behaviour surveillance.

When interacting with colleagues, patients, and families.

### **How can you Improve your Ability to self-Regulate?**

- **Know your values:** Do you have a clear idea of where you absolutely will not compromise? Do you know what **values** are most important to you? Spend some time examining your "code of ethics." If you know what's most important to you, then you probably won't have to think twice when you face a moral or ethical decision you'll make the right choice.
- **Hold yourself accountable:** If you tend to blame others when something goes wrong, stop. Make a commitment to admit to your mistakes and to face the consequences, whatever they are. You'll probably sleep better at night, and you'll quickly earn the respect of those around you.
- **Practice being calm:** The next time you're in a challenging situation, be very aware of how you act. Do you relieve your stress by shouting at someone else? Practice deep breathing exercises to calm yourself. Also, try to write down all of the negative things you want to say, and then rip it up and throw it away. Expressing these emotions on paper (and not showing them to anyone!) is better than speaking them aloud to your team. What's more, this helps you challenge your reactions to ensure that they're fair!

It is important to be mindful of body language and the perceptions of others related to our body language. Often nurses are in a hurry due to multiple time sensitive tasks and do not realize how their lack of engagement with others effect the patient care experience. Slowing down, standing still, without hands crossed, making eye contact when dialoguing with others, will facilitate a positive perception of care by nurses. Being self-aware and self-regulating will help others feel cared for.

Self-regulation can be fostered by practicing mindfulness and meditation as noted above, along with identifying stressors in various areas of one's life. Knowing what triggers stress in one's life will help to regulate one's emotions and reactions when those stressors occur. Reflecting on instances when you did not self-regulate through journaling or talking with a mentor can help you to learn and move toward better self-regulation in the future.

Asking questions such as, "Why am I or others feeling angry, frustrated, anxious, with this

situation?" and "Are these emotions in play being directed at the right person or situation and to the right degree?". Reflecting on the answers to these questions can assist in the prevention of repeating the same mistake.

### 3. Motivation

Motivation is another trait of emotional intelligence.

Motivation refers to the driving force or inner desire that compels a person to take action, pursue a goal or engage in a particular activity. It is the energy that propels us to keep going, despite obstacles or setbacks, and helps us to achieve our goals and aspirations.

Self-motivated leaders work consistently towards their goals, and they have extremely high standards for the quality of their work. People are not motivated by those who lash out, tear down or disempower others through lack of self-regulation.

Not everyone is motivated by the same incentives. Some Nurses will be intrinsically motivated while others will be extrinsically motivated. Taking the time to learn the uniqueness of one's motivation will assist in fostering motivation. Some nurses will set personal goals of achievement (intrinsic), while others are motivated by hearing or receiving positive feedback (extrinsic); however, extrinsic motivation is not sustaining.

Fostering intrinsic motivation in others will sustain motivation. Assisting others in setting realistic goals and affirming the achievement of set goals will help others be motivated and find purpose in their work.

#### *How can you improve your motivation?*

- **Re-examine why you're doing your job:** It's easy to forget what you really love about your career. So, take some time to remember why you wanted this job. If you're unhappy in your role and you're struggling to remember why you wanted it, try the **Five Whys** technique to find the root of the problem. Starting at the root often helps you look at your situation in a new way. And make sure that your goal statements are fresh and energizing.
- **Know where you stand:** Determine how motivated you are to lead. If you need to increase your motivation to lead, it directs you to resources that can help.
- **Be hopeful and find something good:** Motivated leaders are usually **optimistic**, no matter what

problems they face. Adopting this mindset might take practice, but it's well worth the effort.

- Every time you face a challenge, or even a failure, try to find at least one good thing about the situation. It might be something small, like a new contact, or something with long-term effects, like an important lesson learned. But there's almost always something positive, if you look for it.

### 4. Empathy

Empathy is often considered a critical component of emotional intelligence and is essential for building strong healthy relationships with others.

Empathy is the ability to understand and share the feelings of another person. It involves being able to put oneself in someone else's shoes and imagine how they might be feeling in a particular situation.

Empathy allows a nurse to put themselves in someone else's situation and be self-regulated. When nurses demonstrate empathy, nurses listen and do not react to emotional outbursts or deficiencies of other people. They are able to work in the context of understanding others in light of what others are experiencing.

Empathy can be expressed in many ways, including active listening offering support and encouragement, showing understanding and compassion, and being sensitive to another person's needs and feelings. It is an essential skill for developing healthy relationships, resolving conflicts, and building trust with others.

Cultivating Empathy can be challenging, but it is a skill that can be developed through practice and self-reflection.

#### *How can you improve your empathy?*

##### *Put yourself in someone else's position*

Empathy can be developed by intentionally, cognitively putting oneself in another's shoes. For example, asking the other person,

"How do you feel about that?"

What is on your mind?"

To demonstrate true empathy for others one must also ask themselves,

"What am I hearing the person say?"

Why does the person feel this way?"

As the person begins to open up and deeper

understanding is achieved, it is important to offer support.

Nurses often find themselves trying to 'rescue' or 'save' others and thus as nurses practice empathy it is important to be able to detach themselves from the person's experience while being empathetic. If unable to detach oneself, the nurse may find herself/himself with compassion fatigue. Compassion fatigue occurs when nurses become 'closed off' or 'callous' to protect themselves from the pain other's experience by trying to be empathetic. Mindfulness meditation can help foster empathy. By being still, in the moment, allows one to be non-judgmental and accepting of what it is with clarity

**Pay attention to body language:** Learning to read body language can be a real asset because you'll be better able to determine how someone truly feels. This gives you the opportunity to respond appropriately.

**Respond to feelings:** Responding to the feelings is an important component of empathy because it shows that you are actively listening and understanding how the other person is feeling. Responding to feelings can take many forms, including verbal response like saying I can understand why you feel that way or that must be really difficult for you. Nonverbal responses like nodding making eye contact.

It is important to remember that responding to someone's feelings does not necessarily mean trying to fix the situation or offer advice. sometimes all someone need is to be heard and validated their emotions.

Offering empathy and emotional support can be incredibly powerful in helping someone feel seen, heard and understood.

For leaders, having empathy is critical to managing a successful team or organization. Leaders with empathy have the ability to put themselves in someone else's situation. They help develop the people on their team, challenge others who are acting unfairly, give constructive feedback, and listen to those who need it.

## 5. Social Skills

### ***The last trait of EI is relationship management or social skills***

Social skill is an important component of emotional intelligence because it involves using our emotional awareness to navigate social situations effectively. Social skill encompasses a wide range

of abilities including communication, conflict resolution, teamwork and leadership.

Having strong social skills enables us to build positive relationship with others, resolve conflicts effectively and work collaboratively towards common goals.

Nurses who seek to have good relations with others exhibit EI and provide a canvas for others to feel cared for. Nurses must seek to engage with others, not merely tolerate others. Engagement fosters communication and gives the opportunity to practice self-evaluation and self-regulation.

Often time you will hear people say, '...I just have to work with them, I don't have to like them or socialize with them.' While this may be true on some level.

But in order to give collaborative, patient centred care, one has to have some type of relationship with his/her colleagues and patients. This is where EI comes into play and why it is important for nurses.

Nurses with good relationship management and social skills not only demonstrate EI but also will find greater satisfaction in their work. Likewise, patient, families and colleagues who are exposed to nurses who possess EI will find their experiences much more satisfying. This allows both nurses and patients to flourish in their healthcare experiences. Nurses who intentionally develop their EI will allow their colleagues, patients and families to feel cared for and cared about.

How can you build social skills?

- **Learn conflict Resolution:** Nursing Leaders must know how to resolve conflicts between their team members, customers, or vendors. Learning conflict resolution skills is vital if you want to succeed.
- **Improve your Communication skills:** Communication is the largest and most vital piece of social skills and relationship management. Effective communicators not only place active listening as a priority but also exude warmth when talking with others. Warmth is felt by others when the communicator is friendly, approachable and is kind. In order to exhibit these attributes of warmth, the nurse needs to make sure that the verbal communication and non-verbal communication are parallel. Assuming yourself as 'friendly' and saying the right words, but showing impatience or condescending behaviours while talking, dismisses the receiver from hearing the

friendly words. Likewise, exhibiting warmth in non-verbal behaviours but choosing words that are demeaning, negative, judgmental and/or unkind will dismiss the warm behaviours evident in a conversation.

- **Learn how to praise others:** Nursing leaders can inspire the loyalty of the team members by **giving praise** when it's earned. Learning how to praise others is a fine art, but well worth the effort.

## CONCLUSION

Working on your emotional intelligence could well be the most important aspects of your personal development.

Research has shown that people with higher level of emotional intelligence enjoy more satisfying and successful careers and relationships.

If you think about ways to enhance your

emotional intelligence you are likely to become more charismatic, interesting and attractive to others and will give your self-esteem a boost.

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# Gender Based Violence against Women During COVID-19 Lockdown: A Critical Analysis

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## Abstract

Earlier studies have shown that incidents of gender based violence (GBV) against women have increased in the face of the pandemic. GBV is an all pervasive issue. In India, crime against women is a serious issue. Many ranking agencies have declared India as the most dangerous country for women due to the prevalence of GBV. The aim of this research was to investigate incidents of GBV when lockdown was declared during COVID-19 pandemic in India. This study identified the factors involved in GBV against women during COVID-19 through thematic analysis. For this study incidents of GBV were taken from different parts of India during lockdown. The result shows that the lockdown situation had reinforced instances of GBV against females. It also shows that males were carrying out these crimes during lockdown due to having no fear of being caught, unemployment, stress and boredom. Frustration could have been a major reason leading to gender based crimes. Another significant reason that resulted in gender based crimes during lockdown period during the pandemic was migration.

**Keywords:** Lockdown; Gender Based Violence; COVID -19; Women; India.

## INTRODUCTION

The first cases of COVID-19 were reported in India on January, 2020, when three Indian medical students of Kerala returned to their towns

from Wuhan (WHO 2020). The cases engulfed other regions in the country and soon spread to different states of the country (Kumari & Tohniwal, 2020). It was on 11 March 2020 that the World Health Organization (WHO) declared COVID-19 as a "global pandemic." With the increasing number (crossed 500) of COVID-19 cases in India, the Prime Minister of the country Mr. Narendra Modi has declared a fourteen hour public curfew on 22 March 2020. This was done to control the spread of corona virus. Following public curfew, the government of India (GIO) ordered a complete lockdown across the country for twenty one days, starting from the midnight of 24 March 2020 (Soni, 2021). To control the worsening situation of COVID-19 pandemic in the country social gatherings were banned and cinema halls, schools, restaurants, offices, shopping complexes, educational institutions were all shut.

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People were asked to stay indoors as much as possible. Streets were deserted and road were empty as everyone, except those associated with essential services, were asked to stay indoors during the lockdown (Gautam 2020). Social distancing had become a new norm of living (De Vos, 2020).

Social distancing has helped in controlling the spread of COVID-19 virus for some extent, but it brought negative impact on the life of females (Mittal & Singh, 2020). Living a more domestic life and lack of contact with the outside world made women more prone to GBV. However, women have been subjected to violence in both private and public spheres, (Russo & Pirlott, 2006).

The latest edition of the Global Study on Homicide (published by UNODC) published in 2019, states that the home of a female is the most dangerous place for her. In a very short span of time, the situation caused by the pandemic began to put a tremendous pressure on the economy of various countries. From how we function in a society to how we interact with our landscape to how we live as people; every aspect of our life was altered during the pandemic time. This new way of life was challenging because it was affecting almost every part of our life. And the lockdown measures introduced to restrict the spread of COVID-19 have in fact aggravated GBV against women in a form of sexual violence and domestic violence. Therefore, the aim of this research study is to investigate GBV that happened during the lockdown period in India and to identify factors involved in GBV against women during lockdown by thematic analysis.

### *GBV during Pandemic*

COVID-19 brought the term 'Quarantine' once again in the life of common people as it is an effective measure of controlling contagious diseases since 532 AD (Schepin, 1991). The literature shows that in 1377AD the concept of 'Quarantine' was deeply rooted in the health practice to control the spread of plague (Gensini et al., 2004). The land travelers were isolated for forty days, and ships were put in isolation for thirty days in the seaport of Ragusa (Nie, 2015).

Once COVID-19 was declared as a global pandemic by WHO, there was tremendous pressure on the Indian government to come up with strategies that could prevent community spread. There were no vaccinations available at that point in time that could provide immunity to people against coronavirus. Hence, social distancing as a tool was employed to prevent spread of coronavirus within

various regions. Those testing positive for the virus were put under strict quarantine period and were constantly monitored by health officials. People had to embrace a new norm of living during the pandemic. This caused a drastic change in the lifestyle of individuals. One cannot negate the fact that social distancing did help in curbing down infection and preventing spread of the disease to a huge extent, it is important to acknowledge that the pandemic period also led to severe social isolation among people. Many people lost their jobs and had to face economic vulnerability, along with mental health issues resulting from quarantine, uncertainty and loneliness. When it comes to GBV, there is considerable similarity between the recent global pandemic caused from coronavirus and a lot of other pandemics in history. The lockdown granted greater freedom to abusers (Bradbury Jones & Isham, 2020) Several literatures show that there has been an increase in cases of GBV in several nations. According to Wagers (2020) different states of United States also reported an increase of about 21–35% in GBV. A 5% increase in GBV has been observed in Australia (Gearin & Knight, 2020). There was a three-fold increase in GBV in China in the year of 2020 (Allen-Ebrahimian, 2020) during lockdown. In India, there has been a visible increase in the number of GBV (Ingala & Smith, 2020). In the year 2020, National Commission of Women of India received a total of 23,722 complaints on GBV out of which 1,699 cases were registered between April and June, 2020 (Jain, 2020). Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) states that GBV is predominantly directed towards females. GBV includes sexual violence. Any form of violence towards women such as domestic violence, sexual assault, molestation as well as female genital mutilation which are practiced within many communities come under GBV. For the present paper, the term GBV has been used for two kinds of violence against women such as sexual violence and domestic violence (Khosla et al., 2017).

## **MATERIALS AND METHODS**

For this research study the sample was drawn by searching the terms 'gender based violence, COVID-19, rape, domestic, sexual violence, lockdown' in open sources. Articles depicting the incidents happened in India and published during the lockdown period (25 March 2020 to 31 May 2020) have been taken into consideration for this study. Initial online search threw up a total of 303

articles in different media outlets such as, local newspapers from various parts of the country, national newspapers, websites and e-magazines. After reading 303 articles total 31 articles have been filtered which were relevant for this study. Other 272 articles were not narrating any incident of GBV. A thematic analysis has been done to identify the factors involved in GBV against women during COVID-19.

## DATA ANALYSIS

The thematic analysis approach has been adopted to analyze the data in this research study. According to Braun & Clarke (2006), this approach is useful in identifying, analyzing, and reporting patterns (themes) within data. The data were analyzed in five steps: compiling, disassembling, reassembling, interpreting, and concluding. In compiling the articles and news reports were prepared and organized to extract meaning. Later, a disassembled process was performed by segregating data and putting it in groups to give meaning to data (Castleberry & Nolen, 2018). After disassembling the data in meaningful groups, the research reassembled the data and started interpretation.

At the first stage of research the researcher read and re-read articles and news reports in order to identify potential themes, which she then forwarded to the co researcher. The coding was done by two independent researchers, during the analysis process the researcher reviewed the articles and news reports several times. Later the

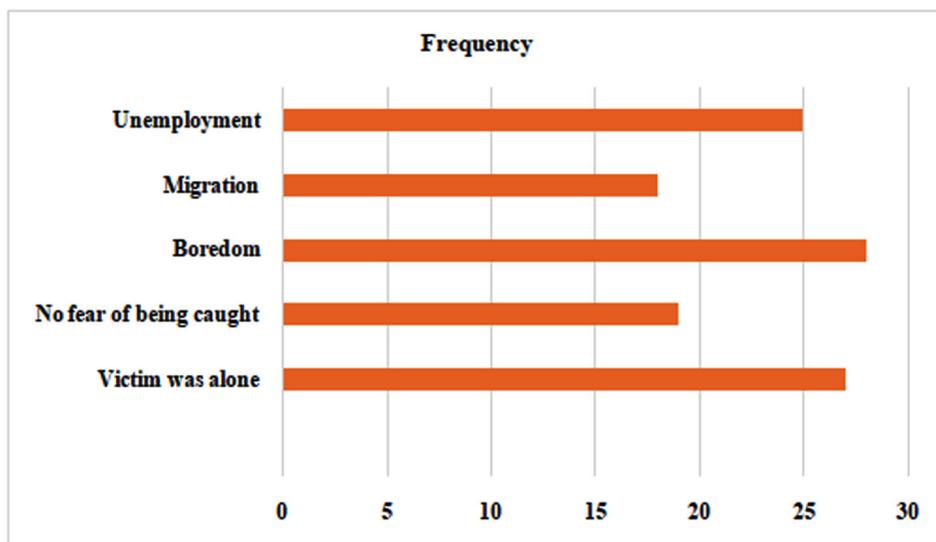
Krippendorff’s alpha has been calculated (See table 1) for each theme to check the reliability (Hayes and Krippendorff, 2007). After the finalization of themes, the write-up of the report began.

## RESULT

The researchers identified eleven overarching themes. However, after calculating Krippendorff’s alpha of themes, 6 themes were excluded from the study because their Krippendorff’s alpha value (< .7) were not satisfactory. Finally, the researchers took 5 themes which’s Krippendorff’s alpha is greater than .7 (See Table 1) into consideration. Fig. 1 illustrates the frequency of words comes under above mentioned themes. Those where victim was alone, no fear of being caught, boredom, migration, unemployment.

**Table 1:** Inter-rater reliability for themes

Measure	Krippendorff’s alpha
Victim was alone	.71
Night	.61
No fear of being caught	.92
Boredom	.89
Migration	.73
Unemployment	.91
Stress	.70
Alcoholism	.37
Proximity	.53
Forced isolation	.35
<b>Anxiety</b>	<b>.63</b>



**Fig. 1:** Themes used in articles.

## DATA ANALYSIS

### *Victim was alone*

It is important to realize that gender violence, particularly rape, as a crime is intimate in nature.

And conviction rate is quite low when it comes to punishing the guilty involved in committing such crimes against women such as rape. Often, such cases when they go to court are laden with “the burden of proof” resulting in impunity for crimes against women.

In addition to this there is the problem of victimization and a sense of shame attached to gender crimes. This further dissuades women from reporting such incidents and at the same time emboldens perpetrators to carry on with their heinous acts such as, rape, sexual assault, molestation, domestic violence or anything else that violated the dignity of women. Moreover, it becomes easy for a criminal to exploit a woman they intend to violate if she is alone or travelling alone or if she is in an isolated area. In such circumstances the vulnerability quotient increases manifold because the perpetrators think that they can get away after committing the crime. For a criminal, paucity of evidence or absence of witness serve as important factors when they consider committing crime against women.

Out of a total of 31 articles, 21 articles or news reports dealt with incidents of domestic violence while the rest 20 cases reported incidents of sexual violence. Among 20 cases, only one case had the presence of family member where the victim was not alone (it happened in the presence of victim’s brother) while in the rest 19 cases the perpetrators committed the crime when the victim was alone. For example a 21-year-old woman was raped near the bank of the Yamuna River. In another incident, a girl aged 14 was gangraped in a forest and a 16-year-old girl was gangraped near a nonworking dam (Elsa, 2020). In another case, a woman aged 40 was raped inside a school when she was all alone. There are reason why perpetrators target women in isolated areas. According to Costopoulos & Juni (2018) a perpetrator seeks pleasure by dominating the victims and achieves extreme happiness by witnessing submission along with humiliation and degradation of the victim (Illescas, 2002). Thus, the perpetrator could easily dominate the victim when she is alone.

In domestic violence cases also, we see that females are targeted at home. During lockdown,

women’s presence at home had increased manifold compelling them to stay indoors and subjecting them to domestic violence more often as they were not in a position to seek other safe havens to escape from the violence. Neither they could seek help from others. Hence the pandemic aggravated their already dire situation to a great extent.

### *No fear of being caught*

Previously, a series of studies have shown that most males are inclined towards raping females (Boylon, 2019). When Malamuth (1981) conducted a survey and a focus group study on this issue, many male respondents of the survey accepted that they would rape women and girls to fulfil their sexual desire. It is the fear of punishment that dissuades them from raping women. Lockdown had diluted these factors to a certain extent, making the situation ripe for such crimes to take place.

Lack of getting caught or no fear of punishment encouraged criminals to commit such crimes. Often perpetrators of rape crimes are minors. This goes to show that males who do not have female partners have more tendency to commit such (Shukla & David, 2020) crimes. In the context of Indian society which is by and large patriarchal in nature, females are either completely or partially dependent on their male partners for their well-being. This dependency does not make them independent or self-sufficient. Hence, they are easily exploited and sexually assaulted by their male counterparts. Their dependence on males confines their growth, ability and public interaction thus limiting their potential. It also restrains their choices, making them more vulnerable to sexual violence (Sexual Abuse and Domestic Violence During Lockdown, 2020).

This happened in two gang rape cases involving a 21-year-old woman and a 16-year-old girl. The same factors were involved in cases of domestic violence that occurred during lockdown. In majority of cases females were easy targets for males as the former were confined to their homes due to lockdown. This made things difficult for women who could not move to other safe places or seek any support system for their benefit when they faced violence from the men. These circumstances resulting from the pandemic coupled with already existing hierarchical and patriarchal norms aggravated the situation of already vulnerable women in the society.

### *Boredom*

According to Drody et al. (2022), boredom that emanates from lack of engagement can result in

volatile behavior. Due to boredom males become more aggressive and lose their sanity. Oftentimes, they lose their ability to judge between the good and the bad. Hence, to get rid of their boredom, often males get involved in activities which are against decent societal norms. These can happen due to two factors: biological and cultural. The biological factor explains males' involvement in sexual violence activity and cultural factors explains males' involvement in domestic violence.

India is a patriarchal society and here boys (male child) are raised in male dominating families, where males exhibit their masculinity through aggression. A lot of traditional family set up promotes this kind of toxic male masculinity. Hence boys tend to grow up with a certain mindset and often resort to violence. They also tend to acquire a habit of getting involved in GBV (Straus, 1980). The patriarchal society firms up the belief that it is only a man who can be the decision-maker of the family, and that he has all the right over his wife and can resort to any kind of violence to control her or teach her a lesson if she refuses to obey him (Malamuth, 1981).

In all the 31 cases the perpetrators of the crime came from villages. They were below a certain economic and cultural threshold. Most of them worked as labourers. Some of them were college students who had no stimulating or constructive arrangement during lockdown period. Hence, they committed such acts to kill their boredom and to gain a sense of something adventurous. This can be observed in all the 31 cases where the perpetrators are all craving for an adrenaline rush.

## MIGRATION

Migration is another major factor behind GBV. The migrant community was severely hurt during COVID-19 pandemic. A lot of industries were shut down rendering them unemployed within a short span of time. An overnight decision by the government declaring lockdown in the entire country hit this community even harder. People who worked as migrants not only lost their jobs during pandemic, but the lockdown period also rendered them homeless, forcing them to travel back home with all their lock, stock, and barrel. Most of them took a perilous journey crossing through many states and districts to reach their native villages. Some made it, but a lot of them didn't. Some migrants perished midway from sheer exhaustion. Some even dozed off and died from accidents.

In this regard Pazzani (2007) stated in her research that migration creates social disorganization, thus increasing crime activities in a group. The pandemic forced around 50,000-60,000 people to move from their workplaces to their hometowns. The lockdown prompted chaotic and painful situation in India and migrants were heavily struggling with the problem of unemployment (Lockdown in India has impacted 40 million internal migrants, 2020). Fig. 1 illustrate the number of migrants during lockdown.

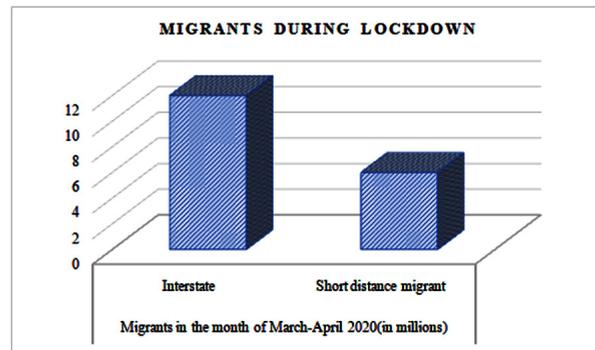


Fig. 2: Migrants during lockdown

The above figure shows that approximately 22 million people migrated from one place to another out of which 16 million were internal migrants and 6 million were short duration migrants. Most internal migrants who were hit the most during lockdown came from rural sector. Lack of jobs in villages and more money emanating from significant work opportunities in factories, industries, real estate business, construction sector in big cities force migration upon them.

The reports mentioned in this study show that rape against migrant women traveling from one place to the other was higher during the lockdown. Even the perpetrators of the crime belonged to the migrant category. This can be seen in all the above mentioned cases. A 40-year-old woman, another 16-year-old girl, a 21-year-old female who were raped were all migrants who were probably traveling back to their hometown during lockdown period. The crimes happened when either victim or perpetrator were migrating from one place to other (Chishti, 2020). For example, a 16-year-old girl stuck in the outer part of the city who took help from her friend (gangraped by group of friends) was raped while she was making her way to her hometown from the city where she was studying as a college student. The pattern is quite similar in other incidents of rape as well. Migration can make women vulnerable and vulnerable women are more susceptible to gender violence.

## Unemployment

Lockdown was declared to control the spread of coronavirus within the country. In other words, COVID-19 pandemic brought about lockdown and lockdown brought about unemployment. In patriarchal systems prevalent in most parts of India, male members are the bread owners and earning members of the family. But the lockdown situation forced by the global pandemic rendered a lot of these males unemployed forcing upon them a sense of insecurity and causing them much anxiety as well as stress. The uncertainty of the situation and what the future had in store for them further aggravated stress level within the males. The pressure that patriarchal societies put on these men to prove their mettle by earning well and shouldering all the financial responsibility, further aggravated stress levels causing disruption within the family. A toxic unemployed men would often engage in violent behaviour towards women to vent out their frustration and anger. A news report published in the newspaper 'The Hindu' reported that some 12.2 crore Indians had lost their jobs during the lockdown period in April. This led to men perpetrating different forms of GBV against women. Hence, unemployment can play a critical role in generating violent behaviour towards women.

## DISCUSSION

Violence against women continue to be one of the foremost problems of Indian society. Our society has been grappling with women centric issues for a very long time. Violence against women continues to be a grave issue within our male dominated family structures prevalent in most parts of the country.

The lockdown period caused complete disruption of life and aggravated the situation of women making them even more prone to violence. Hence, it should not come as a surprise to see GBV cases rise during the time of the pandemic.

These were trying times for those people struggling with bare minimum needs important for survival. Hundreds and thousands of people became unemployed and were rendered unemployed. Hundreds were forced to go to bed without food. Migrants crossed difficult terrains, taking perilous journey by foot in scorching heat to reach their hometowns. This included thousands of women who were travelling distances sometimes alone, sometimes with their families and sometimes

with other migrants. Often, the women had to make the journey through deserted areas. In all the GBV (sexual assault) cases against the women the perpetrators were mindful that the women were exhausted from traveling. Hence, they would not be in a position to defend themselves because of physical exhaustion. Choosing an isolated place for such crimes would further increase their vulnerability as the victims cannot cry out for help and the perpetrators can get away after carrying out the act. When the crime took place, the victim was alone except in one case where the victim was with her brother. The victims belonged to families who were came from Below Poverty Line (BPL) or they were from middle class background. Their educational skill and occupational status were low. Yodanis (2004) found in her study that less educational skill and lower occupational status of women and girls make them an easy target for sexual assault. Those women who have less education cannot seek upward mobility in terms of financial growth. When it comes to occupation, they are confined to menial jobs which does not provide them with significant economic or social security. Instead, it makes them more vulnerable, and exposes them to toxic masculinity from men.

Men attempt to sexually assault the opposite sex to establish their control over them. In this regard Zillman and Bryant (1982) have stated in their studies that males usually commit gender based crimes especially rape to exhibit their dominance over the opposite sex. Most men generally believe that women are only an element of pleasure and are subordinate to them. This is quite evident in the two incidents in which a 21-year-old girl and a 16-year-old girl were gangraped by a group of people. In both incidents we see that the female migrants had requested the males for help during travelling to their native places. In other words, the women exhibited a sense of dependency on the males while travelling. This gave the feeling of supremacy to their male partners and encouraged them to perpetrate the crime. During lockdown male members of family spent more time at home. They, too, felt confined. Inability to step outside their family fold and travel freely often forced these males to take out their anger and frustration on the females' members of family.

During the lockdown period, maximum GBV cases were reported from states known to be traditionally and severely patriarchal, such as Haryana, Madhya Pradesh, Bihar, and Delhi (NCRB, 2020).

In families which are dominantly male centric,

role of females happens to be secondary. A girl child growing up in such families are trained to be mellow and obedient. They are discouraged from being independent and self sufficient, whereas the boys are trained to be aggressive, in their daily lives (Indian women: Yesterday, today and tomorrow, 2015). Even television and cinema depict the stereotypical image of men and women (Cuklanz, 2000). This too encourages GBV in Indian societies as women are always shown as victims and men are always being portrayed a powerful, strong and dominant.

## CONCLUSION

Every perpetrator has a different motivation for committing crime (Pazzani, 2007). A plethora of studies point at multiple factors that encourage men to perpetrate gender related crimes such as rape, sexual assault, molestation against women, domestic violence, etc. Men commit gender crimes against women for different reasons. And men in India have several reasons to sexually assault women. Sexual violence against women cannot be prevented by controlling just one factor. There are several factors involved. From cultural exposure to family upbringing to mindset issues, there are various reasons why violence can be perpetrated against women.

Findings of the study indicate that GBV during lockdown period emanated due to various reasons. Several attacks happened at night when the victim was alone. The time of the day in this case also matters a lot because at night places can be more deserted and visibility could be significantly low. Hence criminals can think that they can get away after committing the crime. The time of the day as well as location can act as deciding factors for perpetrators to commit crime. This is clearly evident from the abovementioned cases where incidents against the victims took place in locations which were isolated.

It is important to note that the lockdown period, in terms of space and time, provided much scope for the perpetrator to commit gender based crimes. Several studies and research carried out earlier in this direction have also shown that male always love to dominate females and they get pleasure in sexually violating females as long as they can get away with such acts. Boredom is another major factor which reinforces criminal attitude in males who attack females who are soft targets for them.

Those males who dominate, control, and sexually

violate females & perceive women as objects of pleasure, are brought up in a harshly patriarchal culture and setup. Lockdown brought about unemployment and migration which made a very supportive environment for committing these kinds of crimes when females were not able to change their plight and were unable to communicate with anyone or request anybody for help. Patriarchal structure of society, different upbringings of male and female, exposure to media, less education, depression, social learning, social disorganization theory (moment when migrants traveled from one state to other), insecurity of future, frustration, are some major factors that perpetrated sexual violence against women during COVID-19.

Another set of social thinkers also state boredom, monotonicity of daily life as compelling factors for men to commit gender based violence against females. As pointed earlier, some men can also do it to seek adrenaline rush or to simply indulge in the pleasure of adventure.

The research has seriously tried to analyze the reasons and investigate factors that can compel men to commit serious crimes against women. The relevance of such a study becomes all the more important in this day and age when feministic movements are shaping the way we think about men women relationship in our society. The role that men and women play in society are being seriously questioned. New adjustments are being made within this hierarchical order. More women are calling out sexual offenders. Stories on violence against women are now becoming mainstream stories. Media is now heavily invested in women centric stories. Gender stereotypes are being shattered. Movies around women and gender issues are loved by audience. In other words, feminism is now taking centerstage.

Hence, any kind of research carried out in this direction becomes a significant attempt in understanding issues that can take us one step forward towards achieving an egalitarian society such as a small step of "Me too" movement has given space to females all around the world including India to openly talk about rape and sexual assault. The revelations have also showed how all pervasive this problem is within our society as women from every walk of life have come forward to share their stories. It is hence important to call attention to this GBV carry out elaborate work in this field. The GBV is growing in India and around the world. On that front work in this field is of paramount importance.

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## Combating Infodemics

J. Violet Jayamani

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### INTRODUCTION

Infodemics are the rapid dissemination of false or inaccurate information, frequently through online or social media platforms. It can happen during situations involving a threat to the public's health, like pandemics or epidemics, and it can cause worry and uncertainty among people worldwide.

Infodemics can spread rapidly, frequently more quickly than the actual illness, and can thwart containment efforts by spreading false treatments or preventative measures. Public health and safety could eventually suffer more as a result of this.

The World Health Organization (WHO, 2021) describes an infodemic as an excess of information, including untrue or misleading information, which makes it challenging for people to locate reliable sources of advice when they need it. Infodemics, particularly during health emergencies, can confuse people and harm communities.

#### *Here are a few infodemic Examples:*

During the COVID-19 pandemic, there was

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an increase in false information about the virus, including hypotheses about its origins, untrue statements about cures and preventative measures, and false statements about the severity of the outbreak. People who depended on false information were left in confusion, terrified, and even in danger as a result (Romer & Jamieson, 2022). In some places, vaccination rates decreased as a result of false information about vaccines, including their safety and efficacy. This has aided in the spread of illnesses that could have been avoided. Erroneous information about the causes and transmission of the Ebola virus circulated during the 2014 epidemic in West Africa made people fearful of and distrustful of medical professionals. This made it harder to control the epidemic.

During the Zika virus outbreak, erroneous information about how the virus was transmitted circulated, including assertions that it could be shared by vaccines or mosquitoes that were genetically altered. The people became perplexed and afraid as a result. During political events, such as elections, misinformation can proliferate and significantly affect the results. False information about political issues, voting processes, and candidates can sway public opinion and foster mistrust of the political system.

In order to combat the infodemic, Zarocostas (2020) emphasizes the need for a coordinated international effort that includes disseminating accurate information, combating false information, and fostering community trust. In order to give the public timely and accurate information, he emphasizes the significance of scientific communication and co-operation.

Promoting accurate and timely information

from reliable sources, such as public health groups and medical experts, is crucial in the fight against infodemics. Monitoring social media and other online platforms and fact checking can aid in spotting and combating fake information. Promoting critical thinking and digital literacy can assist people in better navigating the internet and separating dependable information from unreliable sources (WHO, 2021).

Campaigns on social media can be used to educate patients about disease prevention and health improvement. Due to its ease of use and ability to reach a large population, social media has emerged as a crucial platform for health education. Social media campaigns for health education have had great success, including the "Ice Bucket Challenge" and the "Movember" movement for prostate cancer awareness. Thus, social media campaigns can be a useful tool for patient education and health promotion, but successful campaigns require careful planning and implementation (Liu & Liu, 2014).

By spreading accurate information and combating false information, healthcare professionals can play a significant part in the fight against infodemics. They can instruct patients and the general public in determining the reliability of health information and locating reliable sources. They can offer patients and the general public accurate and current knowledge on health related issues, including methods for disease prevention and treatment, identify and address misinformation when they know it, and provide accurate information to correct false or misleading information.

Social media networks are a useful tool for healthcare professionals to share reliable information. Science based policies can also be

promoted that put the needs of the public's health and safety first supported by reliable data and research. In order to combat the infodemic, best practices must be exchanged, accurate information must be advanced, and healthcare experts must be collaborated with.

An international group called the International Fact Checking Network (IFCN) strives to advance and encourage fact checking in journalism. The Poynter Institute for Media Studies serves as its host, and it was established in 2015. Fact-checking groups are required to abide by a set of standards in order to join the IFCN and receive resources, training, and membership verification (International Fact Checking Network, n.d.).

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