

Assess the awareness regarding self defence against public violence among B.Sc. Nursing first year students

*¹Leema Rose Lakra, ²Kavith AS

¹ M.Sc. Nursing Student, Department of Mental Health Nursing, Bombay Hospital College of Nursing, Indore, Madhya Pradesh, India

² Lecturer, Department of Mental Health Nursing, Bombay Hospital College of Nursing, Indore, Madhya Pradesh, India

Abstract

Self-defence, particularly for women, is of utmost importance in the kind of the world we live in today. Women, usually referred as the weaker sex, are considered easier targets. In a country like India where the cases of gender violence are on rise, out of which many go unreported, self-defence for women has become a necessity more than ever. Rape molestation kidnapping and murder are the most common forms of crime against women in India. The women in India are also vulnerable to acid attack and eve testing. The mind-set of the people, including the victim and the inspector is to ignore and just let it go. But what we as the responsible citizens of an independent country, fail to realise is that this instance of harassment can flare up into other bigger heinous crimes against women. And that is when the importance of learning self-defence techniques for women is felt. Various studies have shown that the criminals tend to choose their targets when they (the potential victim) unaware of the surrounding. Hence it is time that each women become vigilant and totally aware of the surrounding. The purpose of this study was to assess the awareness regarding self defence against public violence among B.Sc. Nursing first year student. Ten B.Sc. nursing first year students were selected through the purposive sampling technique and their awareness was assessed by structured questionnaire. Mean and standard deviation of awareness score was calculated in which, the mean value was 9.1 and the standard deviation was 1.73. Thus, the study revealed that there is no association of knowledge scores with selected socio demographic variables regarding self-defence against public violence.

Keywords: awareness, self-defence, public violence

1. Introduction

Gender based violence, is collectively violent act that are primarily or exclusively committed against women. Sometimes considered a hate crime, this type of violence target a specific group with the victim's gender is a primary motive.

The UN declaration on the elimination of violence against women state that: "Violence against women is a manifestation of historically unequal power relations between men and women" and that "violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with man." "Violence against women and girls is a problem of pandemic proportions. At least one out of every three women around the world has been beaten coerced into sex or otherwise abused in her lifetime with the abuser usually someone known to her. Violence against women can fit into several broad categories. This include violence carried out by "individuals" as well as "states". Some of the forms of violence perpetrated by individual are rape, domestic violence, sexually harassment, and coercive use of contraceptives, female infanticide, prenatal sex selection, obstetric violence and mob violence as well as harmful customary or traditional practices such as honour killing dowry violence female genital mutilation, marriage by abduction and pressurised to marriage.

Every day we see images of male violence against women in the social media, on Television shows, in the pictures, in advertise, and in our homes and workplaces. It is a fact of life for women of all ages, races, and classes. In the broadest sense, violence against women is any violation of a woman's personhood, mental or physical integrity, or freedom of movement through individual acts and societal oppression. It includes all the ways our society objectifies and oppresses women. Violence against women ranges from sterilization abuse to prescription-drug abuse, pornography, stalking, battering, and rape. It includes the sexual and physical abuse of young girls and the abuse of elders.

Every type of violence threatens all women and limits our ability to make choices about our lives. Sexual violence is particularly insidious because sexual acts are ordinarily and rightly a source of pleasure and communication. It is often unclear to a woman who has been victimized and to society as a whole whether a sexual violation was done out of sexual desire or violent intent or whether these motivations are even distinguishable, because violence itself has come to be seen as sexual or erotic.

1.1 Need of the Study

Female mortality rates is high from sex selective abortion female infanticide (the killing of female infants soon after

birth), and systematic and often fatal neglect of the health nutritional needs of girls.

While it is essential to continue working on a better response to existing violence against women and girls, it is also necessary to work to 'stop it before starts'. Prevention is about identifying and addressing underlying causes of a problem, rather than focusing on its results or symptoms. The global study report highlights need to scale up violence prevention efforts globally because of 475 000 people were murdered in 2012, and homicide is the third leading cause of death globally for males aged 15–44 years, this results indicates the urgent need for more decisive action to prevent violence. Despite indications that homicide rates decreased by 16% globally between 2000 and 2012, violence remains widespread. Non-fatal acts of violence take a particular toll on women and children. One in four children has been physically abused; one in five girls has been sexually abused; and one in three women has been a victim of physical and/or sexual intimate partner violence at some point in her lifetime.

Key Findings

Jointly published today by WHO, the United Nations Office on Drugs and Crime, United Nations Development Programme, report indicates that:

Only one third of the 133 countries surveyed are attempt large-scale initiatives to prevent violence, such as bullying prevention programmes, visits by nurses to families at high risk, and support to those who care for older people. Just over half the countries are fully enforcing a set of 12 laws generally acknowledged to prevent violence, although 80% of countries have enacted them. Only half of all countries have services in place to protect and support victims of violence.

The incidence of violence on physical, mental, sexual and generative health often last a lifetime. Violence also furnish to leading causes of death such as cancer, heart disease and HIV/AIDS, because victims are at an increased risk of adopting drug abuse behaviours such as smoking, alcohol and drug misuse, and unsafe sex.

“The consequences of violence on families and communities are profound, and can result in lifelong ill health for those affected,” states Margaret Chan, WHO Director-General. “Yet we know what works to prevent violence in our homes, schools and workplaces and on our streets and playgrounds. We should take inspiration from governments which have demonstrated success in reducing violence by taking the steps needed. They have shown us that indeed violence is preventable.”

The "Global status report on violence prevention 2014" [9] is the initial report of its type to assess national efforts to address interpersonal violence, like child maltreatment, youth violence, intimate partner and sexual violence, and elder abuse. Each country profiles reflect the extent to which key concept to violence prevention programmes and laws and selected services for victims of violence are being implemented.

Thus report assessed the scale of implementation of 18 “best buy” violence prevention programmes. It shows, for example, that:

One half of countries are implementing school-based

programmes to teach children and adolescents “life-skills” such as non-violent conflict resolution. One half of countries are promoting efforts to change gender norms supportive of violence against women. One third of countries are putting in place programmes to improve parenting in families at risk of violence. Less than one quarter of countries are developing public information campaigns to prevent elder abuse.

High levels of family and community violence cripple both people’s ability to sustain their individual livelihoods, as well as a nation’s options for political, social, and economic development”, said Helen Clark, Administrator of the United Nations Development Programme. “This report takes stock of the measures countries are taking to prevent and respond to interpersonal violence, but the report also reveals gaps in global violence prevention which must be filled, such as the quality and reach of prevention programmes, the access to services for victims, particularly for women and girls who are It shows, for example, that: 98% of countries have laws against rape.87% of countries have laws against domestic violence.84% of countries have laws against carrying weapons in schools.40% of countries have laws against abuse in institutions for older people. Disproportionately affected by violence, and the enforcement of existing laws. The report also reviewed 12 laws which are relevant for violence prevention.

Thus, various studies encourage the researcher to conduct this study among B.Sc. Nursing students on self-defence against public violence with the goal to develop awareness regarding self defence against public violence.

1.2 Statement of the Problem

“A Descriptive study to assess the awareness regarding self-defence against public violence among B.Sc. Nursing students residing in selected Nursing College at Indore”.

1.3 Objectives of the Study

- To assess the awareness regarding the self-defence against public violence among B.Sc. Nursing students residing in selected College of Nursing at Indore.
- To find out association of self-defence against public violence with selected socio demographic variables of B. Sc. Nursing students residing in selected College of Nursing at Indore.

1.4 Hypothesis

At 0.05 level of significance:-

H₁- There is a significant association of awareness regarding self-defence against public violence with selected socio-Demographic variables of B. Sc. Nursing students residing in a selected College of Nursing at Indore.

1.5 Assumption

This study assumes that B. Sc. Nursing students have inadequate knowledge regarding self-defence against public violence.

2. Materials and Methods

2.1 Research Approach

Quantitative approach was used for this study.

2.2 Research Design

The research design adopted for the study was Non-experimental descriptive design. This design was used to assess the awareness regarding self-defence against public violence.

2.3 Setting of the study

This study was conducted at Bombay Hospital, College of Nursing at Indore. The researcher selected the setting for the following reasons:

- Availability of the sample
- Economic feasibility of conducting the study.

2.4 Population

The target population in this study was 10 B. Sc. Nursing first year students In Bombay Hospital, College of Nursing at Indore.

2.5 Sample and Sampling Technique

In this study sample was selected from Bombay Hospital Indore, 10 B. Sc. Nursing first year student who fulfilled the inclusion criteria were selected as the sample. Purposive sampling technique was used to select the samples for this study.

2.6 Sampling Criteria

a) Inclusion criteria

- B.Sc. Nursing students
 - 1 of a selected College of Nursing at Indore.

- 2 Willing to participate in the study.
- 3 Available at the time of the study.

b) Exclusion criteria

- B. Sc. Nursing first year students who are;
 1. Studying college of Nursing.
 2. Studying outside of Bombay Hospital College of Nursing.

2.7 Data Collection Process

10 B. Sc. Nursing first year students were selected randomly, using purposive sampling technique. Participants were requested to fill the socio demographic Proforma in the beginning, and the knowledge was assessed using structured knowledge questionnaire.

3. Result

90% of B. Sc. Nursing students were in the age group of 19 - 20 years of age and 10% were in the age group of 17-18 years.90% of B. Sc. Nursing students were having knowledge of two language and 10% were having three languages. 30% of B.Sc. Nursing, students have previous knowledge through internet, through television, through workshop, followed by 10% through social media. Mean knowledge score of B. Sc. Nursing students was 9.1, median was 8.5 this value indicates that the B.Sc. nursing, students had average knowledge. Standard deviation was 1.73. There is significant association of knowledge score with selected socio demographic variables.

4. Tables and Figures

Table 1: Description of Knowledge Score (n = 10)

Knowledge Score	Grade	Assessment Of Knowledge Score				
		Freq.	Percentage	Mean	Median	S. D
1-5	Poor	0	0%	8.3	8	1.89
6-10	Average	8	80%			
11-15	Good	2	20%			
16-20	Excellent	0	0%			

Table 2: Association of knowledge scores with selected socio demographic variables.

Socio Demographic Variables		<Median	>Median	X ² Value	Df	P Value	Level Of Significance
Age (In Yrs.)	17-18	0	1				Significance
	19-20	3	6				
Knowledge Of Language	Two	2	7				Significance
	Three	1	0				
Previous Knowledge Regarding Self Defence Against Public Violence Attended Through	Internet	1	2	10.10	4		Non Significance
	Social Media	1	0				
	Television	0	3				
	Workshop/Conference	1	2				

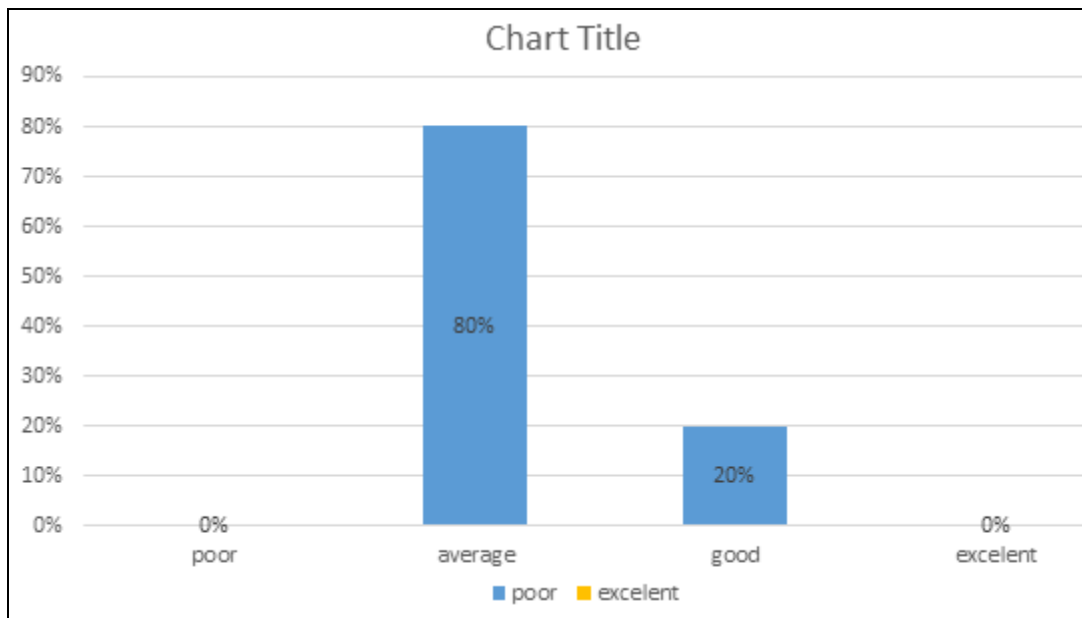


Fig 1: Bar diagram showing the frequency wise distribution of ICU Nurses according to knowledge score.

5. Conclusion

The study was to assess the degree of knowledge regarding self defence against public violence among B.Sc. Nursing students find its association with selected demographic variables. After detailed analysis, the finding revealed the following results.

- The more than half B.Sc. Nursing students who are studying in Bombay Hospital, Indore have an average knowledge.
- Mean score of knowledge score among B.Sc. Nursing students was 9.1.
- There was no significant association of knowledge scores with selected socio demographic variables.

The overall experience of conducting the study was enjoyable. The response of the participants was an encouraging hand for the investigators. The constant help and support of the guide and co-guide provided a positive re-enforcement for successful completion of the study. The study was a new learning experience for the investigators.

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