

# Attitude of Antenatal Mothers toward Cesarean Section Delivery

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## Abstract

**Background:** Globally, the rate of cesarean section (CS) delivery has been increasing among women. The perceptions surrounding CS delivery may have a significant role in the decision-making process which influenced by multiple complex factors such as cultural values, beliefs, and anticipations of the birth, possible traumatic events in life, available social support, and personal sense of control are only a few.

**Aim:** This study aims to compare the attitude toward CS delivery between primigravida women and multigravida women with and without previous history of CS delivery and also to find the association of attitude of antenatal mothers with their selected demographic variables.

**Methodology:** The descriptive study approach has been used in view of accomplishing the main objectives of the study. The tools consist of demographic profile along with structured attitude questionnaire. The subject consisted of 100 antenatal mothers and was selected by purposive sampling technique. Data were analyzed using descriptive and inferential statistics.

**Results:** The attitude assessed using attitude scale showed that majority of antenatal mothers (66%) had favorable attitude toward CS. There was no significant relationship between the attitude of primigravida and multigravida mothers. There was no significant association found between the attitude of antenatal mothers with their selected demographic variables such as age, religion, type of family, education, income per month, residence, parity, and mode of delivery.

**Conclusion:** Although the findings revealed that most pregnant women prefer CS delivery, it was found that pregnant women need more guidance by midwives and obstetricians.

**Keywords:** Antenatal mothers, attitude, CS delivery

## INTRODUCTION

Cesarean section (CS), also commonly known as C-section and, is a surgical procedure, in which one or more incisions are made through a mother's abdomen and uterus to deliver one or more babies.<sup>[1]</sup> A CS is often performed when a vaginal delivery would put the baby's or mother's life or health at risk. Some are also performed on request without a medical reason to do so. The WHO recommends that they should be done based only on medical need.<sup>[2]</sup>

Globally, the rate of CS has been increasing. The safety of the procedure has resulted in some women requesting

it in the absence of any medical indication, particularly in the developed countries.<sup>[3]</sup> A number of women have good knowledge regarding CS is preferable to vaginal delivery as pain in vaginal delivery is usually unpleasant. Although recent studies have shown that the risk of planned CS and planned vaginal delivery in the short term is low and similar, in subsequent pregnancies, the risk will be higher in a mother who has had a previous CS.<sup>[4]</sup>

It is difficult to pinpoint an exact cause for the rising rates of CS. Medical, institutional, legal, psychological, and sociodemographic factors play a contributing role.<sup>[5]</sup> India is also not excluded from this trend. At the all India level, the rate has increased from 2.9% of the childbirth in 1992–1993 to 7.1 in agreeing for cesarean delivery for medical and even for non-medical reason without knowing true risk and benefits of the procedure.<sup>[6]</sup>

One of the main goals of every medical team, dealing with childbirth, is performing a safe delivery. CS are one of the

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most frequently performed operations in women. One of the most dramatic features of modern obstetrics is the relentless increase in the cesarean rate. This escalating cesarean rate is a major public health problem because CS increases the health risk for mothers and babies as well as the cost of health care compared with normal deliveries.<sup>[7]</sup> Hence, the study was conducted to compare the attitude toward CS delivery between primigravid women and multigravid women with and without previous history of CS delivery and also to find the association of attitude of antenatal mothers with their selected demographic variables.

## METHODOLOGY

One hundred antenatal mothers, who attended the inpatient and outpatient departments, were enrolled in this study using systematic random sampling at obstetrics and gynecology wards and outpatient department (OPD) in a selected hospital at Mangaluru from June 27, 2016, to July 2, 2016. The antenatal mothers were included if (a) antenatal mothers who are available in inpatient/outpatient facility at the setting, (b) both primi- and multi-gravid antenatal mothers irrespective of the previous history of CS, and (c) mothers who know the languages of Kannada, Malayalam, and English. The mothers were excluded if (a) mothers in labor process is initiated, (b) mothers those who are not willing to participate, and (c) mothers who are not available at the time of data collection.

### Study tool

The study tool consisted of two sections. Section I contained 9 items related to demographic profile of the mothers such as age, religion, type of family, level of education, occupation, income, residence, and parity. Section II was an attitude scale. The researcher prepared the rating scale consisted of 21 items to assess the attitude of antenatal mothers toward CS. The items were closed-ended questions with five alternative responses to each. Each item had only one correct response. Correct response carries 5 marks for high level of attitude and 1 mark for low level of attitude. The maximum total score was 105 and minimum total score was 21.

### Methods

The investigators visited the obstetric and gynecological ward, OPD and collected data from the participant. After introducing the purpose of the study, confidentiality was assured and written consent was obtained from the participants indicating their willingness to participate in the study. The tool was administered to the participants with explanation. After data collection, the investigator thanked the respondents for their participation in the study.

### Ethical consideration

Ethical clearance was obtained from the Institution Ethics Committee. The pilot study was conducted in the obstetric wards.

### Data analysis

The data were presented as frequency and percentages.

## RESULTS

### Demographic characteristics

Table 1 shows demographic characteristics of the study subjects. About 52% of the mothers aged between 18 and 25 years followed by 33% of mothers aged 26–30 years. Only 4% of mothers aged >34 years. About 55% of the mothers were Muslims and 23% of the mothers were Christian. About 54% of the study subjects were living in nuclear family and 56% belonged to rural area. About 41% of them were graduates while only 1% was illiterate. About 77% of subjects were housewives. Only 15% of mothers have family income of more than Rs. 15,000/-. About 47% of the mothers were primigravid women [Figure 1] while 60% of mothers underwent CS delivery [Figure 2].

### Attitude of antenatal mothers toward cesarean section

The data presented in Figure 3 show that most of the antenatal mothers (66%) are had favorable attitude toward CS. Remaining 34% had unfavorable attitude toward CS.

The results of factors contributing toward the attitude show that psychological factors are the main contributing factors (mean  $32.65 \pm 5.9$ ) and physical factors ( $19.87 \pm 3.4$ ).

**Table 1:** Demographic characteristics

Variables	Frequency	Percentage
Age in years		
18–25	52	52
26–30	33	33
31–35	11	11
>36	4	4
Religion		
Hindu	22	22
Muslim	55	55
Christian	23	23
Type of family		
Nuclear	54	54
Joint family	46	46
Level of education		
Illiterate	1	1
Primary education	7	7
Secondary education	44	44
Graduate	41	41
Postgraduate	7	7
Occupation		
Homemaker	77	77
Self-employed/business	1	1
Professional	17	17
Others	5	5
Monthly income		
<5000/-	26	26
5001–10,000/-	38	38
10,001–15,000	21	21
15,001 and above	15	15
Residence		
Rural	56	56
Urban	44	44
Parity		
Primigravid	47	47
Multigravid	53	53
Mode of delivery		
Vaginal delivery	32	60.37
Cesarean delivery	21	39.62

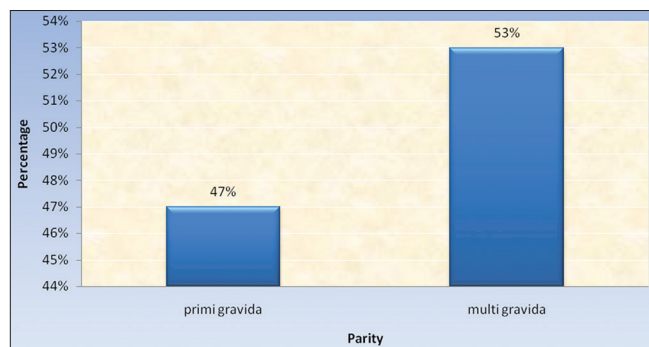
Data expressed as frequency and percentages

Socioeconomic factors were the other contributing factors ( $8.96 \pm 2.12$ ) and spiritual factors were the least contributing factors ( $5.28 \pm 1.44$ ).

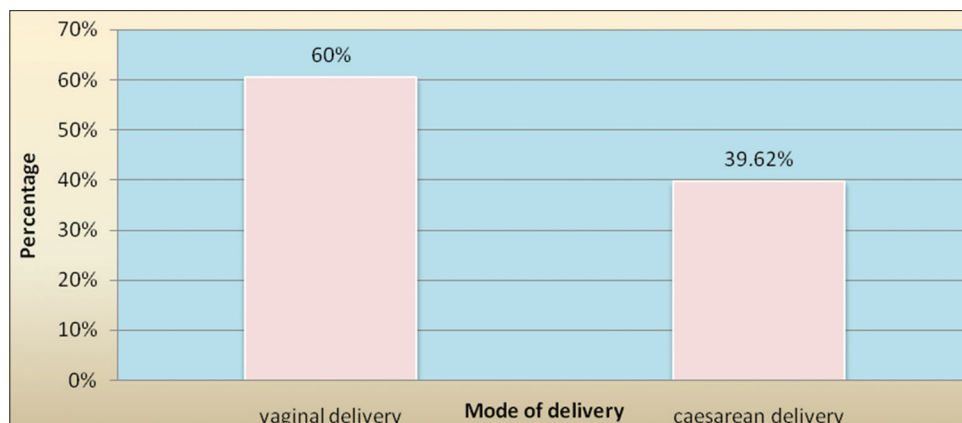
Comparison of the attitude of primigravid women and multigravid women with and without previous history of CS delivery revealed that there was no significant difference between the attitude of women toward CS ( $t = 0.608$ ). Association between the attitudes toward CS and selected demographic variables were tried to establish, and the results revealed that there was no significant association found between the attitudes of antenatal mothers with their selected demographic variables ( $P > 0.05$ ).

## DISCUSSION

The present study shows that among the subjects selected for the study, highest percentage (52%) of antenatal mothers belongs to the age group of 18–25 years. Majority of the antenatal mothers (55%) belongs to Islam religion, Christian 23%, and Hindu 22%. Most of the antenatal mothers (54%) belong to nuclear family and 46% of antenatal mothers belonged to joint family. Most of the subjects (44%) had secondary education as their basic education and 41% of subjects are graduates. Highest percentage (77%) of antenatal mothers is homemakers and 17% were professional workers and 6% are others. Majority of the antenatal mothers (53%) are multigravid and (47%) are primigravid. Majority of the multigravid mothers underwent vaginal delivery (60%).



**Figure 1:** Distribution of subjects according to their parity



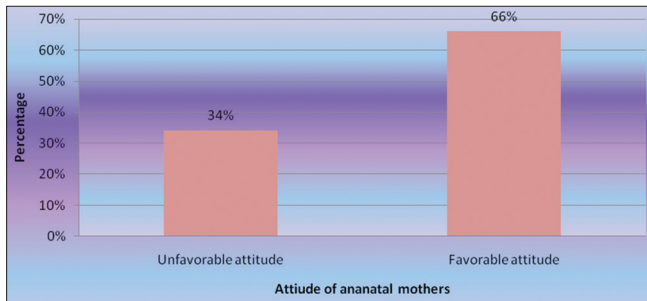
**Figure 2:** Distribution of subjects according to the mode of delivery in multigravid mothers

The study findings revealed that most of the antenatal mothers (66%) are had favorable attitude toward CS. Remaining 34% had unfavorable attitude toward CS. A descriptive study was conducted at the University of Benin Teaching Hospital in Nigeria to determine the perceptions and attitudes toward CS. From the study, it is found that the women had good knowledge and favorable attitude toward CS; however, only 6.1% were willing to accept CS as a method of delivery, while 81% would accept CS if needed to save their lives and that of their babies. Up to 12.1% of women would not accept CS under any circumstances. Logistic regression showed that women's low level of education, and past successful vaginal and instrumental deliveries, was most likely to be associated with women's non-acceptance of indicated CS.<sup>[8]</sup>

A cross-sectional descriptive study was conducted among Nepalese women with an objective to evaluate the knowledge and attitude toward mode of delivery and cesarean on demand. Two hundred pregnant women after 37 completed weeks of gestation were recruited randomly and interviewed, and their answers were analyzed. Vaginal delivery was the preferred mode in 93% and 7% preferred cesarean delivery. Only 35% of the interviewed women believed that women should have the right to demand a CS.<sup>[9]</sup>

There were studies which showed different findings from Hong Kong Chinese women aged 18–45, who were pregnant or had given birth within the past 3 years which were recruited. A total of 319 women were recruited, of whom 73 preferred to have a CS. The results showed that women preferred CS delivery because they were concerned about being pregnant at an advanced age, were worried about labor pain and perineum tearing, wanted to have a better plan for maternity leave, had chosen an auspicious date to deliver, and perceived that CS delivery is a more convenient way to deliver.<sup>[10]</sup>

The present study revealed that there is no difference in the attitude of primigravid mothers and multigravid mothers toward the CS. However, there was a study conducted at a selected hospital in Coimbatore. The study was designed to assess the knowledge and attitude of antenatal mothers toward CS and normal vaginal delivery. The data were collected from



**Figure 3:** The distribution of antenatal mothers according to their attitude score toward cesarean section

100 samples using convenient sampling technique through survey method. Multigravid mothers had positive attitude and primi mothers had negative attitude toward CS.<sup>[11]</sup>

## CONCLUSION

The main purpose of the study was to assess the attitude of the antenatal mothers toward CS. The rising cesarean birth rate in developing countries is an important issue; to decline this trend, health professional should provide the true information to the pregnant women and their partners about the modes of delivery, their indications, advantages, and adverse consequences during antenatal period. This knowledge will change their outlook and make them a better judge while choosing their preferences.

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