



Providing Education About Caesarean Section Operations To Pregnant Women Who Will Understand Caesarean Section Operations To Reduce Pre-Operative Anxiety

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ABSTRACT

Section caesarea (SC) is a method of expelling a baby by performing surgery on the mother's abdominal wall and uterus. Apart from having painful side effects and a large risk of complications, a Caesarean section is also a major medical procedure that can cause fear, anxiety, worry and stress for pregnant women who will undergo it. Providing appropriate education to pregnant women who will undergo a cesarean section can help reduce anxiety levels before surgery. This community service activity is to increase pregnant women's knowledge about caesarean section operations. reduce the anxiety of pregnant women who will undergo caesarean section surgery. and prepare pregnant women physically and mentally to face caesarean section surgery. The number of participants in this community service activity was 20 pregnant women who were about to undergo a Caesarean section. Pregnant women understood about Caesarean section operations, benefits, risks and surgical procedures. The anxiety of pregnant women who will undergo caesarean section surgery has decreased. Pregnant women feel more physically and mentally prepared to face caesarean section surgery. Education about caesarean section surgery can increase knowledge and reduce anxiety of pregnant women who will undergo caesarean section surgery.

KEYWORDS

Education, caesarean section, anxiety

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INTRODUCTION

Section caesarea (SC) is a method of expelling a baby by performing surgery on the mother's abdominal wall and uterus. SC itself is usually performed to remove babies weighing more than 5000 grams, through an incision in the uterine wall that is still intact (Arda & Hartaty, 2021). Caesarean section (C-section) is a surgical procedure commonly performed on pregnant women to give birth to a baby when normal delivery is not possible or is risky for both mother and baby. According to the World Health Organization (WHO), the number of births using the SC method has increased throughout the world and exceeds the range of 10% -15% recommended by the World Health Organization (WHO) in an effort to save the lives of mothers and babies. In Indonesia, based on the results of the 2018 Basic Health Research (Riskesdas), the prevalence of cesarean delivery during childbirth is 17.6%, the highest in the DKI Jakarta area (31.3%) and the lowest in Papua (6.7%) (Sulistianingsih & Bantas, 2018). In East Java Province, the number of births by SC in 2019 was 124,586 out of 622,930 or around 20% of all births (Ministry of Health of the Republic of Indonesia, 2020). Caesarean section surgery can cause the most common side effects, one of which is pain. The pain itself arises because there is an incision wound in the abdominal area and the uterus experiences contractions to return to its original shape as before pregnancy. Post-surgical pain will cause physical and psychological reactions in postpartum mothers such as disturbed mobility, laziness from activities, difficulty sleeping, no appetite, not wanting to care for the baby so there is a need for ways to control pain so that they can adapt to post-caesarean section surgery pain and speed up the postpartum period. . Pain is a sensory experience brought about by a stimulus as a result of tissue damage. This occurs due to the mechanical stimulation of a wound which causes the body to produce chemical mediators of pain. The pain experienced by mothers post caesarean section can also interfere with comfortable activities and sleep (Sofiyah et al., 2014) (Ofori et al., 2020). Delivery by caesarean method also has a five times greater risk of complications compared to normal delivery. After a caesarean section operation, the mother feels afraid to make small movements, because it will cause pain in the surgical wound. This discomfort is an unpleasant sensory and emotional experience resulting from actual or potential tissue damage. Pain itself also results in limited movement in the majority of patients after surgery (Suparyanto and Rosad (2015, 2020). According to Solehati & Rustina, (2014) 75% of surgical patients experience moderate to severe pain after surgery. The duration of the pain can last 24 up to 48 hours, it can also last longer depending on how the patient can tolerate and respond to the pain. Women experience high levels of pain during the first 24 hours after caesarean section. In addition, the pain experienced by patients with caesarean section is said to last longer than that with women who give birth vaginally. Apart from having painful side effects and a large risk of complications, a Caesarean section is also a major medical procedure that can cause fear, anxiety, worry and stress for pregnant women who will undergo it Before surgery can influence the experience of pregnant women and the results of surgery. The fear felt by mothers can be due to fear of pain, worry about complications, uncertainty about the recovery process, worry about the impact on the baby and lack of social support. Therefore, providing appropriate education to pregnant women who will undergo a cesarean section can help reduce anxiety levels before surgery.

MATERIALS AND METHODS

This activity is aimed at pregnant women who are planned or scheduled to undergo caesarean section surgery and their families at the Wava Husada Hospital, Malang Regency, who are willing to be given education about caesarean section operations. Providing material about what caesarean section surgery is, the benefits, risks and surgical procedures. Discussion and questions and answers with





participants (pregnant women and their families). Providing educational leaflets about SC

Results and Discussion

This activity was carried out well and received very good enthusiasm from the community service participants, namely pregnant women who were about to undergo a Caesarean section in Inpatient Room A, Wava Husada Hospital, Kepanjen, Malang Regency and their accompanying families. Activities are carried out in accordance with the planned activity schedule. The number of participants in this community service activity was 20 pregnant women who were about to undergo a caesarean section. The objectives of the educational activities have been achieved, it is known from the evaluation that there has been an increase in knowledge before and after the counseling was carried out. The targets of community service outreach activities have also been achieved. During the presentation of the material, the participants seemed enthusiastic and paying attention to the content of the counseling material. At the end of the session the speaker gave participants the opportunity to ask questions related to the material that had been presented. There were 4 questions from the counseling participants regarding the content of the material presented. From this community service activity, it was found that: a) pregnant women understand about caesarean section operations, the benefits, risks and surgical procedures b) Anxiety of pregnant women who will undergo caesarean section operations has decreased. c) Pregnant women feel more physically and mentally prepared to face caesarean section surgery

CONCLUSIONS

Education about caesarean section surgery can increase knowledge and reduce anxiety of pregnant women who will undergo caesarean section surgery. This education can also help pregnant women prepare themselves physically and mentally for surgery.

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Conflict of Interest

No conflict of interest

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