



# Perception and Acceptance of Cesarean Section among Pregnant Women Visiting Antenatal Care Clinic at Tertiary Hospital

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## ABSTRACT

### Background

Cesarean section is one of the most performed major surgical procedures for delivering the baby when vaginal delivery is not possible or threatens the life of mother or baby or both. Current trends show steady rise in cesarean section rates globally though comparatively lower in developing countries. The objective of the study was to assess the perception and acceptance of cesarean section and to identify the relationship between perception and acceptance of caesarean section among pregnant women.

### Methods

An analytical cross-sectional study carried out among 92 pregnant women visiting Antenatal Care clinic at Bharatpur Hospital, Chitwan Nepal. To assess the perception and acceptance of caesarean section among pregnant women, 5-point Likert scale developed by the researcher and used to collect the required information. Three domain; mode of delivery, mother and baby conditions and expenses for caesarean section included in likert scale to assess the perception. The data was analyzed in Statistical Package for the Social Science (SPSS) version 20 using descriptive and inferential statistics.

### Results

The study findings revealed that of 92 respondents, all of them (100.0%) had good perception towards CS regarding mode of delivery, 98.9% had good perception related to mother's and baby's conditions and 98.9% had good perception of CS regarding expenses. Regarding the acceptance of CS, 98.9% agreed to accept CS when medically indicated, whereas 1.1% refused CS under any circumstances. There was a significant relationship between the perception and acceptance for CS ( $r = 0.304$ ,  $P\text{-value} = 0.03$ ) suggesting that level of perception influences the acceptance of the Caesarean section.

### Conclusions

The result of study indicates that the need of public awareness on preference of natural delivery is important and cesarean section delivery is optional only when the condition contraindicated for natural delivery.

**Keywords:** acceptance, cesarean section, perception, pregnant women.

## INTRODUCTION

Caesarean section often called a C-section is an operative technique, which is the delivery of a fetus through a surgical incision into the uterine wall after 28 weeks of gestation.<sup>1</sup> Globally, there is a general increase in the rate of CS from 12% in 2000 to 21% in 2015 According to WHO-2021, cesarean section use continues to rise globally, now accounting for more than 1 in 5 (21%) of all childbirths.<sup>3</sup> The trend of

cesarean section in Bharatpur Hospital from 2019 to 2022 were 28.6%, 34.09% and 34.4% respectively.<sup>4</sup> A study at Babcock University Teaching Hospital revealed that 67.5% pregnant women had a good perception of CS and 93% had a positive attitude towards CS.<sup>2</sup> Maduka et al. reported that the majority of women (89.4%) said they would accept cesarean section if their lives or the baby's life were in danger,<sup>5</sup> A study showed that 83 % of the pregnant women have

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average perception of caesarean section and 17% of the women have good perception towards caesarean section.<sup>6</sup> In a study to evaluate the acceptability of caesarean sections, the results showed that 71% of respondents did not find the delivery of CS to be agreeable, while 29% thought it was acceptable.<sup>7</sup> Various studies revealed that, the trend of caesarean section is increasing and women had good perception and acceptance on caesarean section. They have accepted that CS lessen the pain and discomfort as well as the complications on mother and newborn arises during labour could minimized. In the current study setting the CS trend seems also increased and it was not found any recent data on women's perception and acceptance towards CS. So the researcher interested to assess the perception and acceptance of cesarean section among pregnant women.

## METHODS

An analytical crosssectional study was carried out to assess the perception and acceptance of cesarean section among pregnant women visiting antenatal care clinic in Bharatpur Hospital, Chitwan. The population of the study were pregnant women who have completed 12 weeks of gestation irrespective of parity visiting the antenatal care clinic. The non-probability convenience sampling technique used to select the 92 pregnant women to collect the desired information as objective. To assess the perception, the 5 point Likert scale developed by researcher in three domain; mode of delivery, mother and baby conditions and expenses for caesarean section and was used. Likewise to assess acceptance of cesarean section also self developed 5 point Likert scale was used. The instrument was developed reviewing the related literature's concepts and self experience. Through face to face interview technique data were collected. The duration of the study was from 16 June 2024 to 20 september 2024. Ethical approval was taken from institutional review committee of Bharatpur Hospital with reference no. 080/81-BNS 008. Written informed consent was taken from each pregnant women before data collection who had included in study. Privacy and confidentiality were maintained throughout the study. The data was

entered and analyzed in Statistical package for the Social Science (SPSS) version 26 using descriptive statistics in terms of frequency and percent. The level of good and poor perception as well as acceptance were classified as Hussein KM, et al.<sup>18</sup> In addition, inferential statistic, spearman's rank correlation was used to identify the relationship between perception and acceptance of cesarean section.

## RESULTS

Out of 92 pregnant women attending antenatal care clinic of Bharatpur Hospital more than one third (35.9%) belonged to the age group 28-32 years with mean age ( $27.26 \pm 5.14$ ) and ranging from 18 to 39 years. More than two third of the pregnant women (71.7%) resided within Chitwan district and nearly half of the pregnant women belonged to janajati (45.7%) group. Most of the pregnant women (83.7%) followed Hindu religion. Similarly, all of the pregnant women were able to read and write. Among them 62.0% were educated up to secondary level.

Regarding obstetric characteristics, nearly half of the pregnant women (44.6%) were married in the age group of 20-24 years with mean age of marriage 21.43 and SD 3.74. Almost half (47.8%) were primigravida and more than half (52.2%) were multigravida, 46.7% had single child. Only 19.6% had an experience of caesarean section delivery. Similarly, only 9.8% gave history of disease in which hypothyroidism comprised 5.4%. More than one third (42.3%) had heard about cesarean section from family and friends.

Pregnant women's perception of cesarean section on a mode of delivery shows that 28.3% were strongly agree while 70.7% were agreed that vaginal delivery is a natural mode while CS is artificial. Similarly, majority of them 51.1% were strongly agreed, that CS is indicated in an abnormal lie, placenta position, and big baby. Two third (66.3%) of were with the belief that CS is not safe because they may have to choose CS for future pregnancies and childbirth and also fearful. Half of (50.0%) agreed that CS delivery is safe and can prevent unnecessary damage to the body e.g., vaginal tear. Most of them (68.5%) were disagreed on CS is preferable as pain of labor and vaginal delivery are unpleasant. Likewise, majority

(71.7%) disagreed that CS does not require women's consent. Most of them (89.1%) agreed that CS may require blood transfusion during or after operation and 59.8% disagreed that CS is performed to train young practitioners. Majority of them (78.3%) agreed that CS is a risky procedure (Table 1).

problems in later years of life. Majority (92.4%) and (90.2%) of agreed that CS saves the life of mother and baby when unfavorable conditions arise during labor respectively (Table 2).

Table 3 illustrates the pregnant women's perception of CS related to expenses and found that majority of

Statement	Strongly Agree n(%)	Agree n(%)	Neutral n(%)	Disagree n(%)	Strongly Disagree n(%)
Vaginal delivery is a natural mode while CS is artificial.	26(28.3)	65(70.7)	1(1.1)	-	-
CS is indicated in an abnormal lie, placenta position, and big baby.	47(51.1)	43(46.7)	2(2.2)	-	-
CS is not good because I may have to choose CS for future pregnancies and childbirth.	5(5.4)	61(66.3)	6(6.5)	20(21.7)	-
CS is very fearful. *	3(3.3)	61(66.3)	3(3.3)	25(27.2)	-
CS delivery is safe and can prevent unnecessary damage to the body e.g., vaginal tear. *	-	46(50.0)	8(8.7)	35(38)	3(3.3)
CS is preferable as pain of labor and vaginal delivery are unpleasant. *	-	18(19.6)	3(3.3)	63(68.5)	8(8.7)
CS does not require women's consent. *	-	6(6.5)	6(6.5)	66(71.7)	14(15.2)
CS may require blood transfusion during or after operation.	2(2.2)	82(89.1)	5(5.4)	3(3.3)	-
CS is not dangerous to the mother and baby. *	-	45(48.9)	13(14.1)	33(35.9)	1(1.1)
CS is performed to train young practitioners. *	-	5(5.4)	23(25)	55(59.8)	9(9.8)
Because many people do it, it seems to be fine. *	-	23(25.0)	4(4.3)	53(57.6)	12(13)
CS is a risky procedure.	1(1.1)	72(78.3)	3(3.3)	16(17.4)	-

*\*Negative statement*

Regarding perception of CS in relation to conditions of mother and baby showed that most of the (84.8%) agreed that health condition of the mother determines the mode of delivery. Likewise, 70.7% believed that CS is done for weak women, while 22.8% denied. Majority (75.0%) agreed that CS is indicated for women who are in labor for a long period of time and 68.5% agreed that women who deliver through CS miss an important life experience. Majority of them (71.7%) agreed that CS delivery will prevent mother from regaining her health status sooner than vaginal delivery. Likewise, 45.7% of disagreed that babies born through CS are healthier than those delivered through vaginal birth. On the other hand, 30.4% were unsure about babies born through CS being healthier than those born through vaginal route. Similarly, 66.3% of them agreed that CS can lead to many health

respondents (89.1%) agreed that CS deliveries are of high cost in private hospitals along with 93.5% of them agreeing that CS is comparatively cheaper in government hospitals. Most of the (72.8%) agreed that CS cause a longer stay at hospital than vaginal delivery while (25%) were strongly agreed (Table 3). Regarding the acceptance towards cesarean section among pregnant women, the finding revealed, majority (79.3%) agreed that they would accept cesarean section if medically indicated. Likewise, 51.1% of respondents agreed that they have right to request for CS even if not indicated, 44.6% disagreed. Most of them (92.4%) said that they would willingly consent for emergency or elective CS. Likewise almost all (97.8%) agreed that CS is an artificial mode of delivery. While 80.4% believed that CS can reduce maternal and neonatal mortality, 10.9% were unsure.

Statement	Strongly Agree n(%)	Agree n (%)	Neutral n(%)	Disagree n(%)	Strongly Disagree n(%)
Health condition of the mother determines the mode of delivery.	8(8.7)	78(84.8)	4(4.3)	2(2.2)	-
CS is done for a woman who is weak. *	-	65(70.7)	6(6.5)	21(22.8)	-
CS is indicated for a woman who is in labor for a long period of time.	16(17.4)	69(75.0)	4(4.3)	3(3/3)	-
Women who deliver through CS miss an important life experience.	2(2.2)	63(68.5)	8(8.7)	19(20.7)	-
CS delivery will prevent mother from regaining her health status sooner than vaginal delivery.	21(22.8)	66(71.7)	1(1.1)	4(4.3)	-
Babies born through CS are healthier than those delivered through vaginal birth. *	1(1.1)	19(20.7)	28(30.4)	42(45.7)	2(2.2)
CS can lead to many health problems in later years of life.	3(3.3)	61(66.3)	17(18.5)	11(12)	-
CS saves the life of mother when abnormal condition arises during labor.	5(5.4)	85(92.4)	1(1.1)	1(1.1)	-
CS saves the life of baby when unfavorable conditions arise during labor.	5(5.4)	83(90.2)	4(4.3)	-	-

\*Negative statement

Statement	Strongly Agree n(%)	Agree n(%)	Neutral n(%)	Disagree n(%)	Strongly Disagree n(%)
CS deliveries are of high cost in private hospitals.	4(4.3)	82(89.1)	4(4.3)	2(2.2)	-
CS is comparatively cheaper in government hospitals.	1(1.1)	86(93.5)	3(3.3)	2(2.2)	-
CS cause a longer stay at hospital than vaginal delivery	23(25)	67(72.8)	1(1.1)	1(1.1)	-

Statement	Strongly Agree n(%)	Agree n(%)	Neutral n(%)	Disagree n(%)	Strongly Disagree n(%)
I can accept CS if medically indicated.	17(18.5)	73(79.3)	-	2(2.2)	-
It is my right to choose a CS even if there are no medical measure to have it. *		47(51.1)	4(4.3)	41(44.6)	-
I would willingly consent to an emergency or elective CS.	-	85(92.4)	-	7(7.4)	-
CS is an artificial mode of delivery.	1(1.1)	90(97.8)	1(1.1)	-	-
I consider CS can reduce maternal and neonatal mortality.	1(1.1)	74(80.4)	10(10.9)	7(7.6)	-
I can accept CS if costs are subsidized in private hospitals.*	-	13(14.1)	7(7.6)	61(66.3)	11(12)
I will accept CS only if my husband gives consent for it. *	-	21(22.8)	-	61(66.3)	10(10.9)
My relative had CS, so I will also have cesarean section. *	-	1(1.1)	1(1.1)	69(75)	21(22.8)

\*Negative statement

66.3%, were with the idea that if cost of CS is reduced in private hospital, they will accept CS but 14.1% of them denied. Two third of them (66.3%) disagreed on they will accept CS only if their husbands consented for it and 22.8% agreed that they would accept only

when their husbands give consent for it. Some of the (22.8%) strongly disagreed that they will not accept CS just because their relative had caesarean section (Table 4).

The level of perception regarding cesarean section

was categorized on three domain and analyzed it. All pregnant women (100%) had good perception on CS as a mode of delivery. Similarly, 98.9% had good perception on CS related to mother's and baby's conditions. Likewise, 98.9% had good perception regarding CS expenses. Overall level of perception and acceptance of pregnant women on cesarean section indicates that all women (100.0%) had good perception. Least of them (1.1%) had not accept the cesarean section delivery while 98.9% had accepted the cesarean section delivery (Table 5).

<b>Table 5. Pregnant women's level of perception and acceptance on cesarean section. (n=92)</b>	
<b>level of perception as Domain</b>	<b>Frequency (%)</b>
<b>Perception on CS as a mode of delivery</b>	
Poor (<50%)	-
Good (≥50%)	92(100)
<b>Perception on CS related to mother's and baby's conditions</b>	
Poor (<50%)	1(1.1)
Good (≥50%)	91(98.9)
<b>Perception on CS on expenses</b>	
Poor (<50%)	1(1.1)
Good (≥50%)	91(98.9)
<b>Level of Perception and Acceptance</b>	
Perception (≥50% score)	92(100)
Acceptance (≥50% score)	91(98.9)
No acceptance (<50% score)	1(1.1)

(Poor perception < 50%, Good perception ≥ 50%)

To identify the relationship between perception and acceptance of cesarean section, Spearman's rank correlation was used. The finding revealed that there was a significant relationship between perception and acceptance of cesarean section among pregnant women ( $r=0.304$ ,  $P\text{-value}=0.003$ ). The level of perception of women influences their acceptance towards caesarean section.

## DISCUSSION

The perception and acceptance of cesarean section among pregnant women visiting antenatal care clinic was assessed. The study revealed that just more than half pregnant women (51.1%) strongly agreed that CS is indicated in an abnormal lie, placenta position and big baby which is in line with the findings of study conducted by Chongo et al.<sup>7</sup> Likewise, (66.3%)

believed that they may have to choose CS for future pregnancies and childbirth if they had CS now. This finding is similar to study conducted by Omotayo et al. and Ansah, however contradicts the finding demonstrated by Maitanmi et al. revealed majority (29.9%) strongly disagreed with the statement.<sup>11,12</sup> This may be so because of different geographical location and cultural beliefs. Similarly, 68.5% of pregnant women disagreed that CS is preferable as pain of labor and vaginal delivery are unpleasant. This finding does not align with the result shown in the study conducted by Maitanmi et al. revealed that majority agreed to the statement. Almost all pregnant women (89.1%) agreed that CS may require blood transfusion during or after the operation.<sup>2</sup> This finding is in line with the result of study by Tahlil et al. and Ansah.<sup>13,12</sup>

Regarding perception, the study further revealed that 70.7% of pregnant women believed that CS is done for weak women which contradicts the findings of Ansah study revealed that majority of disagreed with this statement.<sup>12</sup> The study showed that 71.7% agreed the statement CS delivery will prevent mother from regaining her health status sooner than vaginal delivery. This result is in alliance with the study conducted by Ogunkorode et al.<sup>14</sup> Almost all of the pregnant women (92.4% and 90.2%) perceived positively that CS saves the lives of mother and baby when unfavorable condition arise during labor. Also the study conducted by Ansah and Chongo et al. (2024) showed similar results.<sup>7</sup> In this study, majority of respondents (45.7%) disagreed with the statement that babies born through CS are healthier than those delivered through vaginal birth while 30.4% were unsure. Maitanmi et al. revealed similar results in their study conducted in Babcock University Teaching Hospital.<sup>2</sup> The study further demonstrated that majority of (72.8%) agreed that CS cause a longer stay at hospital than vaginal delivery. This finding is in accordance with the studies conducted by Chongo et al. , Maitanmi et al. , Tahlil et al. and Ansah.<sup>7,2,13</sup> The study shows that majority of (79.3%) pregnant women were ready to accept cesarean section if medically indicated. This finding is consistent with the studies conducted

by Maitanmi et al. , Akabuikie et al. , Gandau et al. , Panti et al.<sup>2,15-17</sup> Majority of (80.4%) pregnant women accepted that cesarean section can reduce maternal and neonatal mortality rates in this study. This finding is supported by the studies conducted by Tahlil et al. and Maitanmi et al.<sup>13,2</sup> On the statement that husband's consent will only make them accept cesarean section, majority of the pregnant women (66.3%) disagreed whereas 22.8% agreed. The studies conducted by Maitanmi et al. and Abiodun-Ojo et al. contrasts this finding.<sup>2,1</sup> Maitanmi et al. concluded that half of the pregnant women agreed while half disagreed with the statement.<sup>1</sup> Esther et al. showed that majority of respondents (36.8%) agreed while 9.4% disagreed the role of husband's consent in acceptance of CS.<sup>18</sup>

The study found that all pregnant women (100%) had good perception towards cesarean section. The study conducted by Maitanmi et al. revealed 67.5% had good perception and Omotayo et al. showed 66.7% had good perception.<sup>2, 11</sup> Likewise, this finding is also in disagreement with the result of study conducted by Devi and Susila in Bareilly, India which revealed that only 17% had good perception while 83% had average perception.<sup>6</sup> Likewise, the study reveals that 98.9% respondents showed acceptance to cesarean section as an alternative to vaginal delivery when medically indicated while 1.1% clearly refused to accept cesarean section

under any circumstances. This finding is in agreement with other studies carried out by Maduka and Okubor (91.1% and 1.9%), Panti et al. (77.5%).<sup>10, 17</sup>

## CONCLUSIONS

Based on the findings it was concluded that all of the pregnant women visiting antenatal care OPD in Bharatpur Hospital had good perception regarding cesarean section. Similarly, among them majority were ready to accept cesarean section when medically indicated while a few of them were completely against it even under strong indication. The study revealed that there is a significant relationship between perception and acceptance of cesarean section among pregnant women. This implies that level of perception towards cesarean section influences the probability of acceptance for the surgical procedure. The study also indicates that women have high perception and acceptance towards caesarean section, somewhat this reason inputs the increasing trend of caesarean section.

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