



## Factors that Influence Caesarean Section Delivery at Columbia Asia Hospital Medan

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### Abstract

Delivery is the process of expelling the products of conception (fetus and placenta). Caesarean section is a delivery in which the fetus is born through an incision in the front wall of the abdomen and uterine wall with the condition that the uterus is intact and the fetal weight is above 4000 grams. The purpose of this study was to determine and analyze the delivery of Caesarean section at Columbia Asia Hospital Medan in 2020. This study used a quantitative method with a cross sectional design, with a research sample of 40 respondents. This study used a questionnaire. The research was conducted on March-October 2021 as a follow-up to the end of the research. The analysis of this study used Univariate, Bivariate and Multivariate. The statistical test used chi square test and logistic regression. The results of the study on the effect of Age (P-value 0.000), Parity (P-value 0.000), Knowledge (P-value .003), Trust (P-value 0.000), Childbirth Indications (P-value 0.001), Anxiety (P-value .002), Husband's Perception (P-value .001) and based on the logistic regression test of age, parity, confidence, labor indications, anxiety, husband's perception were variables that affect the delivery of cesarean section. The conclusion in this study shows that there is a significant influence between age, anxiety and work on cesarean delivery. It is suggested and expected to midwives on duty at Columbia Asia Hospital Medan City to provide health education about family planning to mothers after giving birth so that pregnancy does not occur before 2 years.

## Introduction

Childbirth is the process of expelling the products of conception (fetus and placenta) that are already months old or can live outside the womb through the birth canal or through other means, with or without assistance. The role of the helper anticipates and manages complications that occur in the mother and fetus. Therefore, skilled management and good childbirth experience are needed so that they can realize a healthy and satisfying delivery. Sectio Caesarea (SC) is a delivery in which the fetus is born through an incision in the front wall of the abdomen and uterine wall with the condition that the uterus is intact and the fetal weight is above 4000 grams. Advances in medical technology, especially in this method of delivery, clearly bring great benefits to the safety of mothers and babies and facilitate the delivery process.

According to the World Health Organization (WHO), the average standard for SC operations is around 5-15%. Even the WHO Global survey data on Maternal and Perinatal Health 2015 showed 46.1% of all births by CS. In 2020 the MMR in the world is 210 deaths per 100,000 live births, while in developing countries it is 14 times higher than developed countries, which

is 230 per 100,000 live births (World Health Organization, 2012). The first professional caesarean section performed in the United States. Previously cesarean section was rarely performed and was usually fatal. In London and Edinburgh from 35 caesarean sections there were 33 maternal deaths (Nurheti., 2010). Sectio Caesarea (SC) is a delivery in which the fetus is born through an incision in the front wall of the abdomen and uterine wall with the condition that the uterus is intact and the fetal weight is above 4000 grams. Advances in medical technology, especially in this method of delivery, clearly bring great benefits to the safety of mothers and babies and facilitate the delivery process.

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Indications for sectio caesarea can be absolute or relative indications. Any situation that makes delivery via the birth canal impossible is an absolute indication for abdominal sectio. Among them are very severe pelvic narrowing and neoplasms that block the birth canal. In relative indications, vaginal delivery is possible but the circumstances are such that delivery by cesarean section will be safe for the mother, child, or both (Sofian, 2011).

Some of the reasons underlying the demand for sectio caesarea are because working mothers are very time bound and already have a certain schedule. Another reason is the problem of trust that relates the time of birth to luck with the hope that if the child is born on that date or time, the sustenance and life will be better, the belief that babies born by caesarean section will be more secure. But the most common reason is the mistaken assumption that with surgery, the mother will not experience pain as in natural childbirth. This happens because of worry and anxiety about the pain that will occur in natural childbirth (Oxorn & Forte, 2010).

Research conducted by Intan Salfariani on the Factors of Selection of Sectio Caesarea Delivery Without Medical Indications at Bunda Thamrin Hospital Medan that the selection factors for sectio caesarea delivery without medical indications are factors of husband and wife agreement (86.4%), knowledge (81.8%), factors social (72.7%), anxiety of normal delivery (59.1%), trust (54.5%), economic factors (36.4%), and work (18.2%). In dealing with delivery by caesarean section Economic planning is important because the costs that must be incurred are not small. Delivery by surgery will cost 3-5 times greater than normal delivery. Therefore, financial ability is one of the considerations in making a decision to give birth by Caesarean (Intan Salfariani & Nasution, 2016).

The results of Aprina's research on Factors Associated with Sectio Caesarea Delivery at Dr. Hospital. H Abdul Moeloek Lampung Province obtained From the results of medical records there are descriptions of maternal risk factors during childbirth or caesarean section in the classification of 13.4%, due to severe preeclampsia, 5.49%, location abnormalities, 5.14% due to placenta previa, and 4,40% because labor did not progress. sectio caesarea may be caused by several factors, one of which is non-progressive parturition, non-progressive parturition is a phase of a labor that is stuck and lasts too long, causing symptoms such as dehydration, infection, fatigue, as well as, asphyxia and death in the womb. In the state of non-progressive parturition, pregnant women have indications for delivery by cesarean section. Because labor does not progress will result in the risk of fetal death if not handled properly (Aprina, 2016).

Caesarean section can be said to be a simple operation, and at the same time it is also called the most dramatic operation among major surgeries. The abdominal wall is sliced, vertically or

horizontally, fifteen centimeters wide, the uterine wall is sliced, again vertically or horizontally, of almost the same width, the baby and the placenta are removed, then the incision is sewn back together (Emma et al., 2019).

From the initial survey conducted at the Columbia Asia House, Medan, it was found that the ratio of the percentage of caesarean section deliveries to normal deliveries in 2017 was 67.3% and 32.7%, in 2018 it was 70.2% and 29.8% in 2020 was 78.97% and 21.03% Here, there is an increase in the demand for caesarean section deliveries without medical indications and medical indications, researchers also found several reasons why pregnant women choose caesarean section deliveries. The cause of delivery by cesarean section can be due to problems on the part of the mother and baby, the decision to have a previously diagnosed caesarean section.

Causes with medical indications include imbalance in the size of the baby's head and mother's pelvis (narrow pelvis, big child, forehead position, face position), severe pregnancy poisoning, severe preeclampsia or eclampsia, abnormal position of the baby (breech, latitude), some cases of mouth uterus covered with placenta (placenta previa), twins, pregnancy in elderly mothers, history of caesarean section in previous pregnancies, mothers suffering from certain diseases, infection of the birth canal and so on.

The second is a decision taken suddenly because of the demands of an emergency. Although from the beginning there were no problems and it was predicted that the delivery could be carried out normally, there are times when for one reason or another it arises during the delivery process. Examples of causes of this case include premature delivery of the placenta, prolonged labor, the baby has not been born more than 24 hours since the membranes ruptured, contractions are too weak and so on.

Many factors outside of medical indications, both from the mother and baby, that caused sectio caesarea to be chosen, including maternal psychological factors, the patient's right to choose the medical action to be taken, excessive maternal anxiety, husband and wife agreement, trust issues that link the time of birth with the luck of fate with the hope that if the child is born on that date or hour then the sustenance and life will be better, the confidence of babies born by sectio caesarea will be more guaranteed health. But the most common reason is the mistaken assumption that with surgery, the mother will not experience pain as in natural childbirth. This happens because of worry and anxiety about the pain that will occur in natural childbirth.

## **Methods**

This type of research is quantitative research, that is, this research method aims to obtain more comprehensive, valid, reliable, and objective data. The population in this study is the population in this study were all pregnant women who delivered by caesarean section at Columbia Hospital. Asia Medan as many as 40 people.

The samples taken in this study were 40 people with a sampling technique using Total Population The research tools or instruments used in this study were questionnaires and checklists. Analysis of the data used is multiple linear regression analysis to measure the factors that influence Multiple linear regression analysis is used to see the effect of the independent variable on the dependent variable and predict the value of the dependent variable using the independent variable.

## **Results and Discussion**

### **Description of Nurse Characteristics**

The study was conducted on 40 respondents, namely maternity mothers at Columbia Asia Hospital, Medan City with the following characteristics:

Table 1. Age Frequency Distribution of Maternity Mothers Sectionally Cesarean at Columbia Asia Hospital Medan City in 2020

<b>Mother's Age</b>	<b>N</b>	<b>Percentage</b>
<20 and >35 years (at risk)	23	57.5%
20 -35 years (not at risk)	17	42,5%
<b>Maternal Parity</b>		
Primipara	17	42.5%
Multipara	23	57.5 %
<b>Work</b>		
Work	24	60%
Not Working	16	40%
<b>Knowledge</b>		
Good	8	20,0
Enough	22	55,0
Less	10	25,0
<b>Belief</b>		
Believe	17	42.5
Not Sure	23	57.5
<b>Indication</b>		
With Indications	23	57.5%
Tampa Indications	17	42.5 %
<b>Belief</b>		
Anxious	30	75,0
Not Anxious	10	25,0
<b>Husband's Perception</b>		
Good	17	42.5
Bad	23	57.5
<b>Persalinan SC</b>		
Emergencies	23	57,5%
Elective	17	42.5 %
<b>Total</b>	<b>40</b>	<b>100%</b>

Based on table 1, it can be seen that from the age of the mother, the majority of the mother's age at the time of delivery belonged to the risk group as many as 23 people (57.5%). Maternal parity The majority of parity mothers in parity belong to the Multipara group as many as 23 people (57.5%), Mother's occupation with the majority of maternal parity at work belonging to the Working group as many as 24 people (60%), Mother's Knowledge The majority of mothers who give birth manually cesarean section had sufficient knowledge of 22 people (55.0%). Mother's trust in The majority of mothers who gave birth by cesarean section had confidence of 23 people (57.5%). Indications for Labor with The majority of mothers at the time of delivery belong to the group with indications of 23 people (57.5%). Anxiety of mothers with the majority of mothers who gave birth by cesarean section had anxious anxiety as many as 30 people (75.0%). in Maternal Mothers with the majority of mothers who gave birth by cesarean section had anxious anxiety as many as 30 people (75.0%).

Table 2. Bivariate Analysis

Variable	Sc Childbirth						P Value
	Emergencies		Elective		Sum		
	F	%	F	%	F	%	
<b>Age</b>							

Risk	7	17.5	16	40.0	23	57,5	0,000	
Not at risk	16	40,0	1	2,5	17	42,5		
<b>Sum</b>	<b>23</b>	<b>57,4</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Parity</b>								
Primipara	15	37.5	2	5,0	17	42,5	0,002	
Multipara	8	20,0	15	37,5	23	57,5		
<b>Sum</b>	<b>23</b>	<b>57,5</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Work</b>								
Work	9	22.5	15	37.5	24	60.0	0,005	
Not Working	14	35.0	2	5.0	16	40.0		
<b>Sum</b>	<b>23</b>	<b>57,5</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Knowledge</b>								
Good	2	5,0	6	15,0	8	20,0	0,003	
Enough	11	27,5	11	27,5	22	55,0		
Less	10	25,0	0	0,00	10	25,0		
<b>Sum</b>	<b>23</b>	<b>57,5</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Belief</b>								
Believe	6	15,0	15	37,5	21	52,5	0.000	
Not Sure	17	42,5	2	5,0	19	47,5		
<b>Sum</b>	<b>23</b>	<b>57,5</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Induction of Labor</b>								
With Indications	19	47,5	4	10,0	23	57,5	0.001	
Tampa Indications	4	10,0	13	32,5	17	42,5		
<b>Anxiety</b>	<b>10</b>	<b>25,0</b>	<b>0</b>	<b>0,00</b>	<b>10</b>	<b>25,0</b>		
Anxious	22	55,0	8	20,0	30	75,0	0,002	
Not Anxious	1	2,5	9	22,5	10	25,0		
<b>Sum</b>	<b>23</b>	<b>57,5</b>	<b>17</b>	<b>42,5</b>	<b>40</b>	<b>100</b>		
<b>Husband's Perception</b>								
Good	8	20.0	15	37.5	23	57,5	0,002	
Bad	15	37.5	2	5.0	17	42,5		
<b>Sum</b>	Good	8	20.0	15	37.5	23		

Based on table 2, it is shown that of the mothers who gave birth at the age of the respondents in this study were mothers who gave birth by emergency cesarean section (17.5%), 16 mothers who gave birth by elective cesarean section (40.0) and there were 17 mothers who had an age that was not at risk ( 42.6%). 16 people (40.0%) gave birth in an emergency and 1 person (2.5%) gave birth electively. Maternal parity of mothers with cesarean section delivery found that there were 17 primiparous mothers (42.5%), 17 (42.5%) mothers who gave emergency deliveries and 2 (5.0%) mothers who gave elective deliveries 23 mothers had parity multiparity (57.5%), 8 (20.0%) mothers gave birth in an emergency and 15 people (37.5%) gave birth electively. Maternal work factor that there is a significant relationship between parity and delivery by cesarean section. The relationship between good knowledge (20.0%), 2 (5.0%) mothers who gave birth in an emergency and 6 (15.0%) mothers who gave birth electively, 22 mothers had sufficient knowledge (55.0% ), 11 people (27.5%) mothers who gave birth in an emergency and 11 people (27.5%) mothers who gave birth electively, 10 mothers had poor knowledge (25.0%), 10 people (25.0%) mother. Mother's Trust Factors for mothers who gave birth electively. 19 mothers had uncertain beliefs (47.5%), 17 (42.5.0%) mothers gave emergency deliveries and 2 (5.0%) mothers gave elective deliveries. Statistical test results

obtained p value (sig) = 0.000 less than 0.05, it can be concluded that there is a significant relationship between maternal confidence and delivery by cesarean section. Induction of labor that there were 23 mothers with indications (57.5%), 19 (47.5%) mothers who gave birth in an emergency and 4 (10.0%) mothers who gave birth electively. 17 mothers had Tampa Indications (42.5%), 4 (10.0%) mothers who gave birth in an emergency and 13 (32.5%) mothers who gave birth electively. Results of maternal anxiety with 30 anxious mothers (75.0%), 22 mothers 55.0%) mothers who gave emergency deliveries and 8 (20.0%) mothers who gave elective deliveries. 10 mothers had anxiety with no anxiety (25.0%), 1 (2.5%) mothers gave emergency deliveries and 9 (22.5%) mothers gave elective deliveries. Husband's perception with 23 mothers with good husband perception (57.5%), 8 (20.0%) mothers who gave emergency delivery and 15 (37.5%) mothers who gave elective delivery. 17 mothers had a bad perception of their husbands (42.5%), 15 (37.5%) mothers who gave birth in an emergency and 2 (5.0%) mothers who gave birth electively.

### **The Influence of Age on Sectio Cesarean Delivery at Columbia Asia Hospital Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) there are 17 respondents (42.5%) who are included in the age that is not at risk, and as many as 23 respondents (57.5%) are included in the age at risk, and the majority of respondents who give birth by cesarean section at Columbia Asia Hospital Medan City in 2020 is included in the age category at risk. The results of the chi square statistical test on the age variable with  $p = 0.000 > 0.05$ , which means that there is a significant relationship between age and delivery by cesarean section at Columbia Asia Hospital, Medan City in 2020.

The results of this study are in line with research conducted by Dellia Destya Eka Suciawati in 2021 on the relationship between husband's support and wife's anxiety for sectio caesaria in hospitals which said there was a close relationship between age and delivery by cesarean section (Caesarea et al., 2021).

The mother's age factor has an influence on pregnancy and childbirth. Mothers under the age of 20 years or above 35 years are very at risk for pathological delivery as an indication for cesarean delivery. Pregnancy of mothers under the age of 20 years affects physical and mental maturity in facing childbirth. The mother's uterus and pelvis often do not grow to their adult size. As a result, the health and safety of the fetus in the womb is doubtful. In addition, the mother's mentality is not yet mature enough so that she is very doubtful about the self-care skills of the mother and her baby. Dangers that can occur include: the baby is not born yet months old, bleeding can occur before the baby is born or after the baby is born. According to the assumptions obtained where age affects delivery by cesarean section due to a change in thinking that delivery by cesarean section is a type of delivery modern and using advanced technology that does not cause prolonged pain, so mothers want to try and experience the delivery process for themselves without thinking about the side effects that will be caused both short term and long term. Age at risk is usually often encountered problems in childbirth unless there are certain diseases. However, because mothers think that delivery by cesarean section is not painful and fast, pregnant women who do not have problems still choose to give birth by cesarean section.

### **The Effect of Parity on Cesarean Delivery at Columbia Asia Hospital in Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%). There are 17 respondents (42.5%) of primiparous parity and as many as 23 respondents (57.5%) with multiparity parity and the majority of respondents who gave birth by cesarean section at Columbia Asia Hospital Medan City The year 2021 has multipara parity. The statistical test results show that there is a

significant relationship between parity and delivery by cesarean section at Columbia Asia Hospital, Medan City in 2020 with a value of  $p \text{ (sig)} = 0.002 < = 0.05$ .

Based on the results of this study, it is in line with research conducted by Aisyah regarding the Analysis of Factors Associated with the Level of Anxiety in Maternal Sectio Caesarea in the Pandemic Era at Restu Kasih Hospital Jakarta in 2021 where there is a significant relationship between parity and sectio caesaria delivery, where multiparous mothers have a parity level compared to primiparous mothers (Aisyah, 2021).

Parity is the number of children born to a mother, both living and dead. Parity is classified into 3 parts, namely: The primiparous group is the mother with parity 1, the multiparous group is the mother with parity 2-4 and the grande multiparous group is parity more than 4.

In addition, the mother's mentality is not mature enough so that she is very doubtful about the self-care skills of the mother and her baby. Dangers that can occur include: the baby is born not yet full term, bleeding can occur before the baby is born or after the baby is born and while parity also greatly influences the decision of Sectio Caesarea (SC) because parity parity affects the resilience of the uterus. In primiparas, namely mothers who give birth for the first time, the mother has a risk of cesarean delivery due to the mother's ignorance of the indications she faces during pregnancy because the uterine wall is experiencing pregnancy for the first time so that it has an impact on childbirth, in primiparas it is also always based on the age of the mother who is too young so their reproductive organs are immature so pregnancy can easily be disrupted.

In parimipara mothers who give birth for the first time, the mother has a risk of cesarean delivery due to the mother's ignorance about the indications she faces during pregnancy because the uterine wall is experiencing pregnancy for the first time so that it has an impact on childbirth, in primiparas it is also always based on the age of the mother who is too young so that the organs of the mother are too young. -The reproductive organs are immature so that pregnancy can be easily disrupted.

### **The Influence of Employment on Sectio Cesarean Delivery at Columbia Asia Hospital Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) there are 24 respondents (60.0%) who are included in working jobs, and as many as 16 respondents (40.0%) are included in non-working jobs, and the majority of respondents who gave birth by cesarean section in at Columbia Asia Hospital Medan City in 2020 included in the category of working jobs. The results of the chi square statistical test on the age variable with a  $p \text{ value} = 0.005 > 0.05$ , which means that there is a significant relationship between work and delivery by cesarean section at Columbia Asia Hospital, Medan City in 2020.

This study is in line with research conducted by Novianti, et al about the determinants of cesarean section delivery in Indonesia which said that there was a significant relationship between work and cesarean delivery. Mother's employment status affects the decision to give birth by cesarean method. There are several reasons underlying the tendency to give birth by caesarean section, especially mothers who live in big cities who are generally working mothers. Having status as a time-bound worker also encourages mothers to choose cesarean delivery because it has been determined when they have to return to work after delivery. This condition also encourages mothers to choose to give birth by cesarean section.

Based on the assumption that there is a relationship between work and cesarean delivery, it is caused by many working mothers, they work from morning to evening and even overtime. And this is considered a job because it only does work according to their respective authorities. The work carried out is classified as heavy work and requires a lot of energy such as recapitulating data and various other things. And this can affect the mother's decision in choosing the delivery

method. With a heavy workload, the mother will choose the method of delivery by cesarean section because normal delivery does not require a long time for the healing process and can quickly return to activities. Working mothers tend to choose the method of delivery by cesarean section but pay attention to the type of work being done.

### **The Effect of Knowledge on Cesarean Delivery at Columbia Asia Hospital, Medan City in 2020**

Based on the results of a study conducted at the Columbia Asia Hospital in Medan City in 2020, it was found that of the 40 mothers who gave birth by cesarean section, the majority of mothers who gave birth had sufficient knowledge as many as 22 people (55%), and mothers who had less knowledge as many as 10 people (25%). The results of statistical tests showed that there was a significant relationship between mother's knowledge and delivery by cesarean section with  $p$  value ( $\text{sig}$ ) =  $0.03 \leq 0.05$ .

This study is in line with research conducted by Suhartatik (2014) which explains that most pregnant women with the selection of sectio caesarea delivery have less knowledge as much as 52% this is because the mother's education factor is mostly high school and college, so that the mother's level of knowledge is also higher. This is good because usually the higher a person's education, the better the level of knowledge. However, it should be emphasized that it does not mean that someone with low education is absolutely low in knowledge, because knowledge is not only obtained from a formal place but can also be obtained from other people in the surrounding environment.

According to the assumption of the researcher referring to the research above, it is known that there is a relationship between knowledge and delivery by cesarean section. Mothers who have good knowledge are usually accompanied by good education, and we know that from the results of this study, the majority of mothers who gave birth by cesarean section at Columbia Asia Hospital Medan had sufficient education (55%), but education and knowledge enough not to make the mother aware that caesarean section delivery has a greater risk than normal delivery. Knowledge is influenced by various factors that exist around the individual both internal and external factors. The level of knowledge about sectio caesarea is mostly in the sufficient category, this can be influenced by the age level and also the availability of information about the danger signs of pregnancy. Information obtained from various sources will affect a person's level of knowledge, if someone gets a lot of information it can speed up someone to gain extensive knowledge.

### **The Influence of Belief in Cesarean Delivery at Columbia Asia Hospital, Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) there are 19 respondents who believe (47.5%), and 21 people (52.5%). The results of statistical tests showed that there was no relationship between work and delivery by cesarean section at Columbia Asia Hospital Medan City in 2020 with a value of  $p$  ( $\text{sig}$ ) =  $0.001 > 0.05$ .

This study is in line with research conducted by Restavia which stated that there was a significant relationship between belief and cesarean section, from the results of this study it was found that the majority of mothers who gave birth by cesarean section had confidence and confidence as many as 43 mothers or around 67.3% and 16 mothers had high confidence. less than 32.3% of the total deliveries of 59 people (Restavia Widyaningsih, 2018). This is different from the research conducted by Sarmana in 2004 which only 1 out of 28 people agreed that trust can influence mothers to choose sectio caesarea delivery.

Based on the results of the assumptions obtained where due to the belief that links the time of birth with the luck of the child's fate with the hope that if the child is born on that date and time, it will get sustenance and a better life and cesarean delivery makes babies born smarter, babies

born with cesarean delivery to be healthier, cesarean delivery can make children born lucky, body shape changes, and the belief that caesarean delivery will not reduce a mother's affection for her child are some of the myths that are believed and cause caesarean to be commonly chosen by those who come from people at the middle to upper economic level.

### **The Influence of Indications for Delivery on Cesarean Section Delivery at Columbia Asia Hospital, Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) who gave birth by cesarean section, 38 people (95%) gave birth by cesarean section with an indication of delivery by 25 respondents (62.5%) and without indication with 15 respondents (37.5%). The results of statistical tests showed that there was no relationship between medical indications and delivery by cesarean section with  $p = 0.001 < = 0.05$ .

Indications for labor are signs and symptoms shown by the patient to establish a diagnosis and action. The indications for cesarean section are a history of cesarean section, labor dystocia, fetal distress and position abnormalities (Cunningham f. G et al., 2005). This study is in line with the research conducted by Andriani in 2012 on the factors that influence the cesarean section at the Dompus District Hospital which said that there was a significant relationship between medical indications and delivery by cesarean section with  $p \text{ value} = 0.03.s$

Maternal factors in this study which include premature rupture of membranes and maternal obstetric history. Premature rupture of membranes (PROM) is a rupture of the membranes before the time of delivery or before delivery, at an opening  $< 4$  cm in the latent phase. PROM is defined as the rupture of the membranes before the time of delivery. This can occur late in pregnancy or long before delivery. Preterm PROM is PROM before 37 weeks of gestation. Prolonged PROM is PROM that occurs more than 12 hours before the time of delivery, PROM can cause hypoxia and asphyxia due to oligohydramnios, which is a condition where the amniotic fluid is less than normal, which is less than 300 cc. Oligohydramnios also causes cessation of lung development (hypoplastic lung), so that at birth, the lungs do not function as they should. With rupture of the membranes, oligohydramnios occurs, which compresses the umbilical cord, causing asphyxia or hypoxia. There is a relationship between premature rupture of membranes and the act of delivering a cesarean section.

Maternal obstetric history is a history of mothers who experienced complications during pregnancy and previous deliveries that the mother had experienced which made it possible to perform a cesarean section (SC), because if the mother had experienced a previous obstetric history it would be very influential to repeat the history.

According to the researcher, where maternal factors influence the decision of Sectio Caesarea (SC) because maternal factors consisting of premature rupture of membranes and maternal obstetric history have a very significant relationship to the decision of Sectio Caesarea (SC), in which the mother experiences premature rupture of membranes (PROM) can cause hypoxia and asphyxia due to oligohydramnios, which is a condition where the amniotic fluid is less than normal, which is less than 300 cc.

Oligohydramnios also causes cessation of lung development (hypoplastic lung), so that at birth, the lungs do not function as they should. With rupture of the membranes and oligohydramnios that presses on the umbilical cord to occur asphyxia or hypoxia, this he must immediately need help with cesarean section, so that there is a very strong relationship between premature rupture of membranes and the action of delivery by cesarean section and according to researchers, obstetric history also has a relationship which is very significant for the Sectio Caesarea decision because if the mother has a previous obstetric history during previous pregnancies and deliveries, it is possible that this will happen again.

## **The Effect of Anxiety on the Increase of Cesarean Delivery at Columbia Asia Hospital in Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) there are 30 respondents (75%) who are included in the level of anxiety, and as many as 10 respondents (25.0%) are included in the anxiety category not anxious, and the majority of respondents who gave birth by cesarean section at Columbia Asia Hospital in Medan City in 2020 included in the category of anxiety. The results of the chi square statistical test on the age variable with a value of  $p = 0.002 > 0.05$ , which means that there is a significant relationship between anxiety and cesarean delivery at Columbia Asia Hospital, Medan City. In 2020. This research is in line with research conducted by Dellia Destya Eka Suciawati regarding the relationship between husband's support and the anxiety of the wife of sectio caesarea in the hospital in 2021 where feelings of anxiety that cause stress during childbirth result in increased levels of endorphins, adrenocorticotrophic hormones (ACTH), cortisol and epinephrine. At this time there are still many wives who experience moderate to severe anxiety during pre Sectio Caesarea caused by a lack of support and attention by their husbands so that many wives experience stress at the time of giving birth.

The anxiety response experienced by each person is different, when the patient is informed and discusses the scope of the operation, anxiety usually appears, to prevent anxiety at the time of preoperative the nurse must maintain a good relationship with the patient and provide complete and clear information regarding treatment and illness. , so that supportive and protective two-way communication can be established between nurses and patients as well as nurses and family members of patients. Preoperative is a time where before surgery until the patient is on the operating table, at the time of preoperative the patient really needs support from the family, because at the time of preoperative the patient feels anxiety and fear.

According to the results of researchers where anxiety in pregnant women can arise due to concerns about a safe birth process for themselves and their children. Therefore, husband's support is very important in reassuring the wife's feelings, a woman who gives birth naturally will experience a process of pain, in the form of heartburn accompanied by pain in the waist and groin that is getting stronger. This condition is due to a situation that has or will just happen and often causes a woman who is about to give birth to feel scared, worried, and anxious about it. Because of the worries and anxiety of experiencing the pain, he chose a caesarean section to deliver the baby.

## **The Influence of Husband's Perception on Increased Cesarean Delivery at Columbia Asia Hospital, Medan City in 2020**

Based on the table, it is known that from 40 respondents (100%) there are 23 respondents (57.5%) who are included in the perception of a good husband, and 17 respondents (42.5%) including the perception of a good husband, and the majority of respondents who give birth spontaneously. Caesarean section at Columbia Asia Hospital Medan City in 2020 is included in the category of husband's perception is not good. The results of the chi square statistical test on the husband's perception variable with a value of  $p = 0.002 > 0.05$ , which means that there is a significant relationship between husband's perception and cesarean delivery at Columbia Asia Hospital, Medan City in 2020.

The results of this study are in line with research conducted by Intan on the Factors of Delivery Selection for Sectio Caesarea Tampa Medical Indications at Bunda Thamrin Hospital Medan where there is a relationship to the husband's perception of sectio delivery in this case that feelings of excessive fear and anxiety will cause the mother to find it difficult to concentrate and lose confidence. themselves, even mothers who experience severe anxiety can interfere with activities (Intan Salfariani, 2018).

In the selection of childbirth, it is important because it involves the physical and psychological health of the mother in dealing with it and the health of the fetus. With the support of the husband and family in the form of material, attention, information, the higher the level of confidence of pregnant women in determining their choice to choose normal delivery compared to cesarean section.

Based on the results of the assumptions obtained where the findings from research conducted where cesarean delivery can make children born lucky. Those who give birth to children can choose the day of birth as they wish. According to them, by being born at a good time, then later the baby will get all good luck too. This good time can coincide with certain moments, whether it's from the calculation of the Gregorian calendar or other reasons. Especially if the reason for the wife to have a cesarean section is because she loves her husband. They are worried that there will be changes in their vagina after giving birth normally, which will reduce the harmony of the husband and wife relationship, so they consider giving birth more by cesarean section. Understandably, the condition of the birth canal (vagina) will be maintained. In fact, if after normal delivery the mother is diligent in caring for, for example with Kegel exercises, then there is no difference between the vagina the baby's head has passed or not.

## Conclusion

Based on the results of the research that has been carried out, it can be concluded as follows: (1) From 40 respondents it was found that there was an influence of Respondent Characteristics (Age, and Occupation) factors on cesarean delivery at Columbia Asia Hospital Medan City in 2020 and the influence of trust, anxiety factors on cesarean section delivery at Columbia Asia Hospital Medan City in 2020 and there was no effect on parity, knowledge, labor indications and husband's perception of cesarean section delivery at Columbia Asia Hospital Medan City in 2020.

## Suggestion

It is hoped that the hospital and obstetrician who are on duty at Columbia Asia Hospital, Medan City, are expected to facilitate mothers who have a history of cesarean section and want a normal delivery. It is hoped that the hospital will provide information to patients to give birth normally if there is no emergency indication, and information about the risks and long-term effects of cesarean delivery. It is hoped that the obstetrician who is on duty at Columbia Asia Hospital in Medan City will provide an explanation to the midwife and patient that mothers with a history of cesarean section have the opportunity to give birth normally by taking into account the condition of the patient and the fetus.

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