
Summary

Pregnancy, childbirth and facing newborn baby's needs in the early postpartum, are common events in the life of most women, which influence all aspects of their lives (*Cunnigham, et al, 2010*). Caesarean section is not simply a mode of childbirth, it is also an operation, and like any form of surgery, particularly emergency surgery, can cause health problems. Caesarean and delivery increases the incidence of surgical intervention and problems resulting from hospitalization. It is argued that postpartum cesarean mothers experience certain physical and psychological health problems that may affect their future health, and health of their children, and thus affecting QOL in CS women (*Torkan, et al, 2009*) & (*Shah, et al, 2014*).

Nurse play a crucial role in the care for CS women, goal of nursing care should help a woman to bond successfully with their new infants. CS women should develop an additional caring concern immediately in the postpartum period, because they aren't only postpartum patient but post surgical one. In addition to after pain site from their contracting uterus. Nurse she should assess woman's knowledge to guide her and family to return to pre-pregnant state and provide health education about a long list of subjects before the family discharged from the birth facility. They require more thorough teaching and practice (*Pillitteri, 2014*).

Aim of the study:

This work aimed to evaluate the effect of self care guideline on quality of life for women undergoing cesarean section.



Research Hypothesis:

There is a significant improvement in quality of life for women undergoing CS through apply the process of self care guideline.

Research design:

Quasi experimental design.

- **Setting:**

The study was conducted at obstetrics and gynecology department at Benha University Hospital.

Sample:-

Sample type: A purposive sample selection.

Sample size: 150 pregnant women attending the obstetrics & gynecology department at Benha university hospital according to the annual statistics of Benha university hospital.

The studied samples were selected according to the inclusion criteria:-

Either primiparous or multiparous, either elective or emergency CS, multiple gestations were included, free from any medical, obstetric, and psychiatric disorder, at different age, and different socioeconomic status.

Tools of data collection:

Four tools were used:

1- A Structured interviewing questionnaire sheet:

It was constructed and filled by the researcher. This tool consists of four parts:



Part 1: - Personal characteristics such as (age, level of education, occupation, residence, medical history, and family history).

Part 2:- Obstetric history, which include (gravidity, parity, number of abortions, number of still births, and number of living children).

Part 3:- History of current pregnancy, which includes gestational weeks, problem with current pregnancy, Pregnancy complications).

Part 4:- Current cesarean section delivery, which includes date of operation, previous mode of delivery, type of CS, indications of CS).

II- Immediate postpartum assessment for CS women:

Which consists of vital signs, time of breastfeeding, condition of breasts, assessment of incision, reproductive tract, elimination, lower extremities, general weakness, and psychological problems.

III- Women's' self care dairy & Fatigue severity scale:

Which include the following:-

A- Women's knowledge about puerperium: It included women's knowledge about concept of puerperium and its duration, type of lochia, and warning signs of post partum period.

B- Women's knowledge about self care: It included 29 questions as elements of personal hygiene, bathing, breast care, breastfeeding, perineal care, good nutrition, rest and sleep, family planning, lochia, postpartum exercise, and sources of information,ect).

C- Fatigue severity scale for CS women:

It was used to assess effect of fatigue on physical functioning and social life.



IV- Women's quality of life:-

Includes questions related quality of life .The target of tool items includes physical, social, and psychological domain.

Follow up for mother:

This part was used to record data related to postoperative period and starting during the first postnatal visit (7th days of puerperium) and second visit (40th days of puerperium)

Supportive materials (Self care guideline):

It was designed to enhance women self care practices which had positive effect on the quality of life. It was constructed and filled by the researcher in the form of booklet (hand out) using simple Arabic language and different illustrative pictures in order to facilitate understanding of its contents.

Pilot study:

The pilot study was conducted on 10% (15 women) of the total sample. Pilot study was carried out before starting the data collection. This was done to identify any ambiguity of the questions and to evaluate the applicability and clarity of tools.

Methods:-

Ethical considerations:

- The aim of the study was explained to each woman before applying the tools to gain their confidence, Confidentiality, and trust.
- An oral consent was obtained from each woman to participate in the study and woman has the right to withdraw from the study at any time the withdrawal would not affect woman care.

- The study had no physical, social or psychological risks on the participant.
- The research tools didn't embarrass modesty and didn't cause any harm or pain for participant women.

Limitation of the study: -

- Some of the females (8 females) refused to continue the questionnaire and researcher excluded them from the sample.
- Some of the women refused to give their telephone number.
- Some women refused to communicate because of fearing and anxiety due CS operation and family around mother need her to rest and sleep.
- Most of women didn't attended follow up until researcher call them and remember to date of follow up.

The findings of this study can be summarized as follows:

- There is significant improvement in women knowledge performance regarding self care in study group than control group women during postpartum period.
- There is significant improvement were observed in study group than control group in total quality of life dimensions.
- Following guideline and proper self care approach had a positive effect on quality of life.
- The hypothesis of the study was supported through self care guideline which enhances positively mother's quality of life and promotes their knowledge and performance regard self care during puerperium.



Recommendations:

- Integrating self-care concept into the under and postgraduate course of maternal and newborn health nursing Faculty of Nursing Benha University.
- Dissemination of the present study findings in all maternity department and MCH centers in Benha Governorate.
- Increase the level of awareness among women regarding issues of postpartum period using all available mass media as (posters, magazine, and brochure).
- Periodic training program for nurses regarding the importance of effective communications and postnatal education.

Further researches:

- Reapplication of the present study finding on a large sample size and at different settings.
- Study of the outcome is necessary to identify factors affecting quality of life for cesarean section women and seeking early postnatal care.