EARLY MOBILIZATION BEHAVIOR OF MOTHER POST SECTION CAESAREA AT EMBUNG FATIMAH HOSPITAL, BATAM CITY

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ABSTRACT

Early mobilization is a prominent factor in accelerating post-section cesarean recovery and can prevent post-section cesarean complications. The principle of early mobilization in post section Caesarea is carried out gradually and regularly followed by rest and adjusted to the client's physical condition. The purpose of this study was to determine the attitudes with early mobilization behavior in post-section Caesarea mothers in the combined obstetrics ward at RSUD Embung Fatimah Batam City. The research method used descriptive research with a quantitative approach. The research design used cross-sectional. The sample in the study amounted to 50 people from the entire population of post-section Caesarea mothers who were treated in the combined obstetrics ward of RSUD Embung Fatimah Batam City. The sampling technique was accidental sampling. The research instrument uses a questionnaire that has been tested for validity and reliability. The results showed that from 50 respondents with good knowledge, 34 respondents (68%) with good early mobilization behavior, and 16 respondents (32%) with poor early mobilization behavior. This shows the importance of the mother's ability to carry out early mobilization of post-section caesarea mothers to improve more effective recovery in post-section caesarea conditions.

INTRODUCTION

The delivery process faced by a mother sometimes experiences obstacles and must be carried out with surgery, either because of considerations to save the mother and her fetus or the patient's personal wishes (Loomis & Cook, 2012). There are two ways of delivery, namely normal delivery and delivery by sectio caesarea (SC). Delivery by sectio caesarea has a high risk because surgery is carried out by opening the abdominal wall and uterine wall or uterine transabdominal incision, patients with postoperative sectio caesarea will feel pain (Elnakib, 2019).

According to the World Health Organization (WHO), the average standard of sectio caesarea in a country is around 5-15% per 1000 births in the world, government hospitals are on 11% average, while in private hospitals it can be more than 30%. The demand for sectio caesarea in a
number of developing countries is increasing rapidly every year (Ferni et al., 2021).

The birth rate in Indonesia is still high and approximately 15% of all pregnant women experience complications in childbirth, childbirth complications require special handling in childbirth, namely by Sectio Caesarea. Some cases such as placenta previa, preeclampsia, fetal distress and large fetuses performed by vaginal delivery can pose a risk of death to the mother and baby, therefore a method is needed to expel the products of conception through making an incision in the uterine wall through the abdominal wall called sectio caesarea (Oxorn, 2010).

Sectio caesarea is generally performed when there are certain medical indications as an action to end a pregnancy with complications. Based on the Indonesian Demographic and Health Survey (IDHS) in 2003, it was found that only 4.3% of deliveries ended with cesarean section, namely 695 cases out of 16,217 (IDHS, 2003 in Sinaga, 2007). The Health Ministry of Republic of Indonesia (2000) sets the sectio caesarea birth rate for teaching hospitals or provincial referrals at 20% of all deliveries, while for private hospitals 15% of all deliveries (Marfuah, 2012).

Sectio Caesaria is a surgery to give birth to a child through an incision in the abdominal wall and uterus. However, delivery through Sectio Caesaria is not a safer alternative because special supervision is needed for indications for Sectio Caesaria and maternal care after Sectio Caesaria, because without good and careful supervision it will have an impact on maternal death. Therefore, the examination and monitoring were carried out several times until the mother’s body was declared in good health. One of the efforts to prevent this incident can be done early mobilization Early Ambulation (Mylonas & Friese, 2015).

Early mobilization is important in the postoperative period. Early mobilization is an important aspect of physiological function because it is essential for maintaining independence (Kanejima et al., 2020). Early mobilization step by step is very useful to help the patient’s healing process. Tilt to the right and to the left can be started after 6-10 hours after the patient is awake from the operation (Bin Chen, Guanli Xie, 2021).

Another benefit of early mobilization in postpartum mothers can expedite the release of lochia, help the healing process of wounds due to childbirth, accelerate uterine involution, smooth the function of gastrointestinal and urinary devices and increase blood circulation thereby accelerating metabolic expenditure (Ferni et al., 2021).

The early mobilization movement implementation is carried out regularly, intensively and getting better and better, if the mother’s condition is in good condition then the implementation can be carried out 3-4 times a day, for example when getting up in the morning, afternoon and evening (WHO, 2016). Early mobilization affects physiological factors (frequency of disease, cardiopulmonary status, presence of pain, etc.), emotional factors such as depression, anxiety, motivation and developmental factors). Another factor that can influence a person’s behavior is the level of knowledge. The level of patient knowledge can be obtained through health education conducted by nurses in the hope that knowledge about health is better so that knowledge is expected to affect behavior, the knowledge possessed will have an impact on positive behavior (Ross et al., 2017).

The impact of not doing early mobilization result is an increase body temperature, inhibiting the expulsion of blood and remnants of the placenta, causing disruption of uterine contractions, abnormal
bleeding due to disturbed contractions (Ferni et al., 2021). Early mobilization is an important thing to do in preventing complications of Sectio Caesarea. Early mobilization is the most important aspect of physiological function, in this case it is essential to maintain independence. A post sectio caesarea mother will mobilize early if she has knowledge about early mobilization. Knowledge about early mobilization is very important so that post sectio caesarean mothers can do early mobilization well (Ferni et al., 2021).

According to (Sumarah, 2013), with early mobilization the blood circulation will be better so that it will affect wound healing, because wounds require good blood circulation for cell growth or repair, so that the application of early mobilization measures in mothers with post SC is very important in an effort to speed up the process postoperative wound healing.

Late mobilization can cause several organ dysfunctions, including blocked blood flow, and impaired muscle function. Independence in early post partum SC mobilization is important for mothers because if the mother does not mobilize early there will be several impacts, including an increase in body temperature, abnormal bleeding, thrombosis, poor involution, blocked blood flow and increased pain intensity. Another impact caused by delays in early mobilization is the occurrence of infection because blood flow to the wound area is not smooth (Anne L Schafer, 2016).

**METHOD**

The purpose of this study was to determine the attitudes with early mobilization behavior in post-section Caesarea mothers in the combined obstetrics ward at RSUD Embung Fatimah Batam City. The research method used descriptive research with a quantitative approach. The research design used cross-sectional. The sample in the study amounted to 50 people from the entire population of post-section Caesarea mothers who were treated in the combined obstetrics ward of RSUD Embung Fatimah Batam City. The sampling technique was accidental sampling. The research instrument uses a questionnaire that has been tested for validity and reliability.

**RESULTS**

**Table 1. Characteristics of Respondents by Age, Education and Parity**

| Characteristics of Respondents | Frequency | Percentage |
|-------------------------------|-----------|------------|
| Age                           |           |            |
| 17-25                         | 24        | 48%        |
| 26-35                         | 17        | 34%        |
| 36-45                         | 9         | 18%        |
| Education                     |           |            |
| Primary                       | 6         | 12%        |
| School                        | 9         | 18%        |
| Junior High School            | 23        | 46%        |
| Senior High School            | 12        | 24%        |
| Limited Company               |           |            |
| Parity                        |           |            |
| Primipara                     | 22        | 44%        |
| multipara                     | 28        | 56%        |

Based on table 1, it can be seen that the majority of respondents aged between 17 and 25 years were 24 people (48%), high school students were 23 people (46%) and Paritas were mostly multiparous 28 people (56%).

**Table 2. Distribution of Respondents based on Early Mobilization Behavior (n: 50)**

| Behavior   | Frequency | Percentage |
|------------|-----------|------------|
| Good       | 34        | 68%        |
| Less Frequent | 16      | 32%        |

Based on table 2, the distribution of respondents is based on the behavior of the majority of respondents' behavior with a good category with a frequency of 34
(68%) compared to a less frequent distribution with a total of 16 (32%).

**DISCUSSION**

The results of the research on the behavior of early mobilization of postcesarean mothers at Embung Fatimah Hospital, Batam City, most of the behavior of mothers in carrying out early mobilization with a good category of 34 (68%). The results of data analysis showed that 16 (32%) of respondents' behavior of mothers was lacking in early mobilization.

This can be caused by the mother's lack of knowledge about the benefits of early mobilization or because the mother is afraid to move after undergoing the cesarean section. Mothers often feel afraid or feel pain when carrying out early mobilization, so that mothers only carry out early mobilization when guided and supervised by health workers. The role of the nurse needs to be done because it can provide a sense of comfort so that the patient can be comfortable sleeping with a caesarean section (Vedam et al., 2019).

This poor knowledge of mobilization can be caused by the lack of information that mothers receive about early mobilization, where this condition is something that most mothers want to avoid so that they do not seek information about how and the benefits of early mobilization.

Vasra, 2021) says that with higher education a mother will more easily digest all the information obtained and all decisions are based on rational thinking. With high education, a person will more easily digest the information obtained and make decisions based on the results of rational thinking. The higher education, the more experiences can affect insight and knowledge.

Another factor that influences knowledge is education. The results of this study indicate that almost half of the respondents' education is high school, namely as many as 23 respondents or 46%. Judging from the characteristics of education, the respondent's education is classified as good because most of the respondents' education is high school, but this does not guarantee that the respondent's knowledge is indeed good.

Early mobilization is important in the postoperative period. Early mobilization is an important aspect of physiological function because it is essential for maintaining independence (Carpenito-Moyet, 2009). Early mobilization step by step is very useful to help the patient's healing process. Tilt to the right and to the left can be started after 6-10 hours after the patient is awake from the operation (WHO, 2020).

Other benefits of early mobilization in postpartum mothers can expedite the release of lochia, help the healing process of wounds due to childbirth, accelerate uterine involution, smooth the function of gastrointestinal and urinary devices and increase blood circulation thereby accelerating metabolic expenditure (The American College of Obstetricians and Gynecologists & American Academy of Pediatrics, 2017).

In addition, a good attitude supports good early mobilization behavior, or a bad attitude will result in poor early mobilization behavior, this is also in line with health behavior that health behavior is a person's response or attitude to a stimulus related to the prevention of a disease, and health improvement. Respondents with good early mobilization behavior were due to the high motivation in the respondents to recover quickly, besides the health education previously obtained from health workers could support the early mobilization behavior of post sectio caesarea mothers in a better direction. The principle of early mobilization for post sectio caesarea clients is carried out gradually and regularly.
followed by rest and adjusted to the client's physical condition. Early mobilization aims to maintain body functions, accelerate blood circulation so as to accelerate wound healing, help improve breathing, maintain muscle tone, facilitate urinary elimination, restore certain activities so that patients can return to normal and or can meet daily movement needs (Barrier et al., 2015).

The impact of not doing early mobilization will result in an increase in body temperature, inhibiting the expulsion of blood and remnants of the placenta, causing disruption of uterine contractions, abnormal bleeding due to disturbed contractions (Muñoz et al., 2019).

There are 2 categories of behavior that affect health, behavior that is realized intentionally and consciously by someone so that it has an impact that benefits health and harms health. As for the impact if the post-caesarean section patient does not mobilize early, including causing an increase body temperature, if the body temperature increases then the SC patient cannot mobilize, not doing early mobilization can also be caused by abnormal bleeding and poor uterine infusion (Chapman et al., 2013).

Meanwhile, the benefits of early mobilization behavior can make sufferers feel healthier and stronger, improve bowel and bladder function, expedite lochia expenditure, reduce infection, allow midwives or nurses to provide guidance to mothers regarding the importance of early mobilization. According to the researcher, according to the theory, behavior is a person's response or reaction to external stimuli or stimuli (Zhou et al., 2020).

The researcher believes that most of the post partum SC mothers have good behavior, this is because the mothers obey the health education provided by health workers (Doctors, Midwives, Nurses) as well as the support from their husbands or other families who direct and supervise mothers during physical exercise. as early as possible after cesarean section.

**CONCLUSIONS**

Perception of the ability of medical personnel to increase knowledge and behavior of post sectio caesarea patients is very important in helping patients have more abilities so that this is an important component that needs to be considered in helping post sectio caesarea patients.

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