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Assessment Of Maternal Satisfaction Regarding Nursing Care After Caesarean delivery At Nasser Medical Complex

تقييم رضا الأمهات عن الرعاية التمريضية بعد الولادة القيصرية في مجمع ناصر الطبي

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Abstract

Maternal satisfaction plays a crucial role in assessing the quality of healthcare services provided, especially in the context of cesarean sections (CS). With the increasing prevalence of CS, it is essential to evaluate the level of maternal satisfaction with postoperative management. This study aimed to assess the level of mothers' satisfaction with Nursing care after cesarean sections at Nasser Medical Complex.

A cross-sectional, descriptive, and analytical study design was employed. Data were collected through a self-conducted questionnaire administered to a sample of 126 mothers who delivered at Nasser Medical Complex in June 2023. The questionnaire assessed various dimensions of nursing care and satisfaction levels .The findings revealed that the mean score in the general scale of maternal satisfaction with nursing care post cesarean delivery was 3.97, with a standard deviation of 0.61. Moreover, the weighted mean score indicated an overall satisfaction level of 79.4%, signifying an above-moderate degree of satisfaction .Furthermore, a positive relationship was observed between mothers' perceptions of nursing care and their satisfaction levels post cesarean delivery with statistical significance at a level of $\alpha = 0.5$. However, no statistical differences were found in mothers' perceptions of nursing care and satisfaction concerning previous cesarean deliveries, numbers of abortions, or numbers of pregnancies .Significant statistical differences were identified in mothers' perceptions of nursing care and satisfaction post cesarean delivery due to the number of deaths. Additionally, a statistical difference was observed in mothers' perceptions of nursing care post cesarean related to age, with higher satisfaction levels observed among younger patients (less than 31 years old) compared to older age groups.

Post hoc LSD (Least Significant Difference) testing revealed that mothers with three children exhibited higher satisfaction levels with nursing care in general. However, no statistical differences were observed in mothers' perceptions of nursing care and satisfaction post cesarean delivery based on educational levels.

In conclusion, this study provides valuable insights into maternal satisfaction with postoperative cesarean sections at Nasser Medical Complex. The findings emphasize the importance of addressing maternal satisfaction in healthcare delivery, particularly regarding nursing care. Understanding the factors influencing maternal satisfaction can contribute to improving the quality of care provided to post-cesarean mothers and optimizing their overall healthcare experience. The research recommends improving of the nursing care post cesarean sections provided, providing a safe and sound environment, increasing the number of nurses , and the need to prepare educational programs to raise awareness about service recipients and their evaluation .

Keywords: Maternal, satisfaction, cesarean sections, nursing care, postoperative, management,

1.1 Research background :

Cesarean section (CS) is a major abdominal surgery, and the morbidity and mortality rates are greater for women who undergo a cesarean delivery versus those who deliver vaginally. Childbirth can be regarded as a developmental crisis that engenders considerable stress for most women. Stress is increased when the birth occurs by cesarean section because major surgery is an additional life crisis event. Patient satisfaction is a very vaguely defined, yet definite term used in the evaluation of results. With growing emphasis on consumerism and competition in the health care system, patient satisfaction is the single most important criterion that needs to be addressed, irrespective of the nature of practice **(Azari S.,etal2013)**. Patient satisfaction with nursing services gains even more importance, since owing to the nature of nursing practice, patients may judge the overall quality of hospital services on the basis of their perceptions of the nursing care received. Satisfaction with care is a composite and subjective concept with still undefined boundaries and multiple interacting variables, according to which patient satisfaction with nursing care is the degree of convergence between the expectations patients have of ideal care and their perception of the care they really get..

Quality maternal care is defined as an appropriate, satisfactory, low-cost, and accessible service that makes women capable of choosing a healthy life. Health care organizations are operating in an extremely competitive environment, and patient satisfaction has become a key to gaining and maintaining market share. Hospital care services have been categorized as private and public hospitals , The public ones are controlled by the government and people are not required to pay much money. In a public hospital, patient satisfaction is dependent on several factors in addition to surgical results. It is the way you talk to the patient, the degree of importance that is given to his or her problem, the amount of time you spend with them, the amount that you handle personally rather than delegating it to your juniors, and the way you handle the relatives. Other peculiar factors are also seen from time to time. Patients' evaluation of care has become a prominent method of assessing the quality of health care services **(Azari S.,etal2013).** In this study to assess Maternal Satisfaction Regarding Nursing Care Post caesarean Delivery At Nasser Medical Complex.

1.2 Research problem

The prevalence of caesarean section is generally agreed to be higher than needed in many countries, and physicians are encouraged to actively lower the rate, as a caesarean rate higher than 10–15% is not associated with reductions in maternal or infant mortality rates **(WHO 2015).** Although adverse outcomes in low-risk pregnancies occur in 8.6% of vaginal deliveries and 9.2% of caesarean section deliveries (**Caughey A. etal 2022)**.

A caesarean section delivery has become a regular practice around the world when an obstetrical complication is envisaged. The concern is, however, the pain and immobility associated with the surgery postoperatively as well as the impact it might have on the caring of the neonate. mothers breastfeed as soon as they deliver, take care of the neonates and are also expected to visit and feed the neonates if they are admitted to a neonatal unit. However, mothers who had a caesarean section delivery can only start mobilising freely after 24h .This immobility is associated with insufficient pain control or excessive sedation. (**Sharma R. etal. 2012)** It is assumed to be difficult for them to adopt a comfortable sitting position to

breastfeed or even to express breast milk to feed the neonate because of postoperative pain. when mothers cannot breastfeed and move well, it will cause health problems for them, so they need more nursing care. **(Jikijela T. etal 2018)**

1.3 Justification of the study

As far as we know as researchers There are several reasons why this research is justified: Maternal satisfaction is a key indicator of the quality of healthcare services provided. By assessing maternal satisfaction with nursing care, healthcare providers can gain insights into the effectiveness of their practices and identify areas for improvement. This study will contribute to enhancing patient-centered care and ensuring that the needs and expectations of mothers are met. Caesarean delivery is a major surgical procedure that requires appropriate postoperative care to ensure optimal recovery for the mother. Nursing care plays a crucial role in managing pain, promoting wound healing, preventing infections, and providing emotional support during this critical phase. Understanding the level of satisfaction with nursing care can help identify any gaps in postoperative management and guide improvements in care delivery. Maternal satisfaction has been associated with improved patient outcomes, including better compliance with postoperative instructions, reduced anxiety, and enhanced overall well-being. By investigating the factors that contribute to maternal satisfaction, healthcare providers can tailor their interventions to better meet the needs of mothers and potentially improve their postoperative outcomes.
Evaluating maternal satisfaction with nursing care can provide valuable feedback to healthcare providers and administrators. Identifying areas of strength and areas for improvement can lead to targeted quality improvement initiatives, ensuring that the services provided at Nasser Medical Complex align with the expectations and preferences of the mothers who undergo caesarean deliveries. In conclusion, conducting a study to evaluate maternal satisfaction regarding nursing care after caesarean delivery at Nasser Medical Complex is justified as it has the potential to enhance patient-centered care, improve postoperative recovery, optimize patient outcomes, and drive quality improvement efforts.

1.4 General Objective

The aim of this study is to evaluate the maternal satisfaction regarding nursing care after undergoing a caesarean delivery at Nasser Medical Complex.

1.5 Specific objectives

1.5.1 To assess the level of maternal satisfaction with nursing care received after undergoing a caesarean delivery at Nasser Medical Complex.
1.5.2 To identify the specific aspects of nursing care that contribute to maternal satisfaction, such as pain management, wound care, emotional support, breastfeeding support, and communication with healthcare providers.
1.5.3 To explore any factors that may influence maternal satisfaction, including demographic variables (such as age, education, and socioeconomic status), previous healthcare experiences, and expectations regarding nursing care.

1.5.4 To examine the relationship between maternal satisfaction with nursing care and postoperative outcomes, including pain levels, wound healing, postpartum depression, and breastfeeding success.
1.5.5 To provide recommendations for improving nursing care practices based on the findings, with the aim of enhancing maternal satisfaction and optimizing postoperative recovery after caesarean delivery.

1.6 Research Questions

1.6.1 What is the level of maternal satisfaction with nursing care after undergoing a caesarean delivery at Nasser Medical Complex?
1.6.2 What are the factors that influence maternal satisfaction with nursing care, including demographic variables, previous healthcare experiences, and expectations regarding nursing care?
1.6.3 Is there a relationship between maternal satisfaction with nursing care and postoperative outcomes, including pain levels, wound healing, postpartum depression, and breastfeeding success?
1.6.4 Is there a relationship between maternal satisfaction with nursing care and mother sociodemographics ?
1.6.5 What recommendations can be made to improve nursing care practices and enhance maternal satisfaction in the postoperative period after caesarean delivery at Nasser Medical Complex?

1.7 Palestinian Health Care System

The Palestinian Health Care System (PHCS) is consisting of four major providers: Ministry of Health (MoH), United Nation Relief and Work Agency (UNRWA), Non-Governmental Organizations (NGOs) and for-profit private sector (WHO, 2008). The main provider MoH is operating 13 hospitals and 52 PHC facilities, in Gaza Strip (MoH, 2020). Another main component UNRWA is operating 22 PHC facilities(MoH, 2020)

1.8. Nasser Medical Complex (NMC)

The hospital was set up in 1958, and it was officially opened in 1960 and is under Egyptian administration in the Gaza Strip. The hospital capacity was 120 beds with four main departments: surgery, dermatology, as well as having a laboratory room and one operating room. After the beginning of 1966, successive years showed a new boom in the development of new departments and expansion of hospital buildings, especially external departments since the end of the Israeli occupation of the Gaza Strip in 1994. In addition, the hospital administration has a number of established medical centers, outpatient clinics and new buildings that It is set to provide high-quality medical services to residents of the southern region and other areas of the General Service category (Ministry of Health, 2020). According to the annual report of Nasser Medical Hospital (NMC) (2020), it includes three hospitals (Nasser Hospital, Tahrir Hospital and Yasser Hospital) in the hospital (347) beds, and the total number of employees and about 991 divided as follows: Doctor 240 (24.2%), Nursing 350 (35.3%), 401 Medical Technical Administrators and Support.

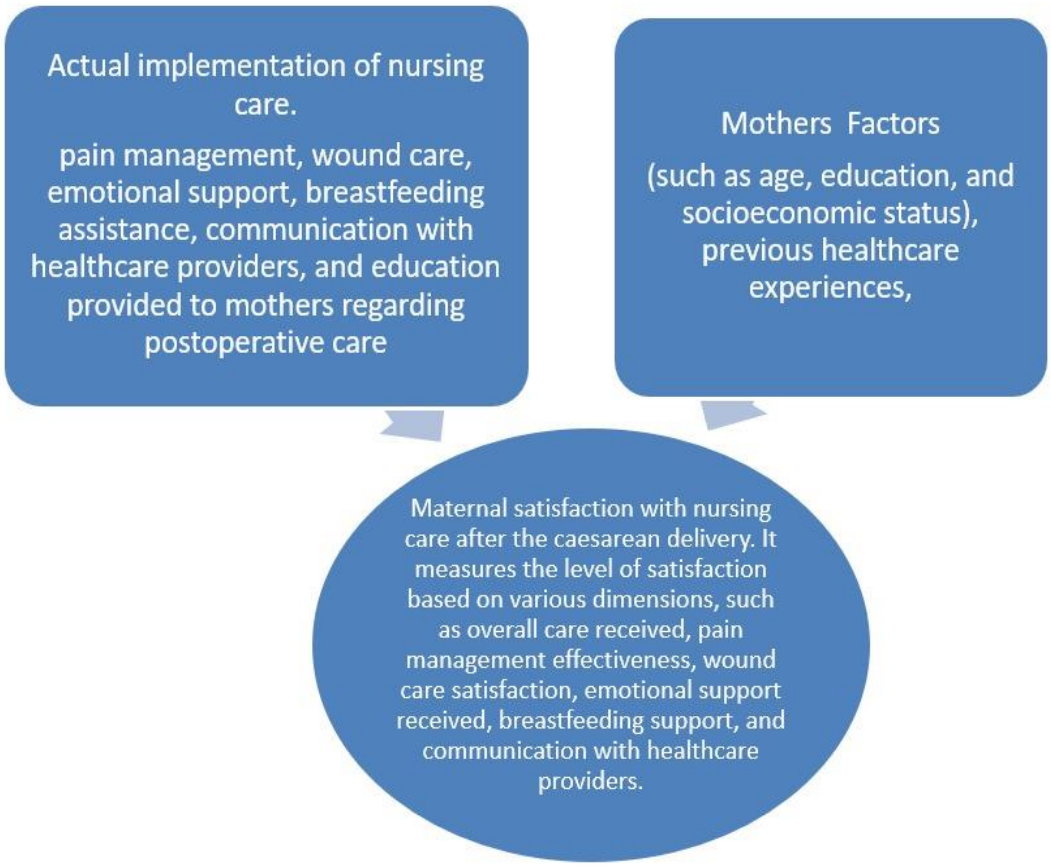

Figure (2.1): Conceptual framework

2.2 Operational definitions

2.2.1 Satisfaction

is individuals' feelings of pleasure or disappointment resulting from comparing their perceptions of a product or service's performance to their expectation levels. (**Santhanamery T.etal.2018)**

2.2.2 Maternal satisfaction

defined as positive evaluation of distinct dimensions of childbirth .) Gejea T. etal 2020) . Maternal satisfaction: it is the satisfaction of the mothers towards delivery care/service) Shiferaw Z. etal 2022)

2.2.3 Caesarean delivery

is the surgical procedure by which one or more babies are delivered through an incision in the mother's abdomen, often performed because vaginal delivery would put the baby or mother at risk **(Tshililo Mashamba 2021)**

2.2.4 Nursing Care

Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of

health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles.(ICN, 2002)

2.2.5 Post op care

or Postoperative care: Care given after surgery until the patient is discharged from the hospital surgicenter and, in some cases, continuing on an ambulatory basis. Postoperative care is) . aimed at meeting the patient's physical and psychological needs directly after surgery DavisCh.2021)

2.3 Patient Satisfaction

Many hospitals make measuring patient satisfaction a top priority, but how should they go about doing it. Of the questions, Frederick Reichsold states, only one question should be asked to clients that really matters (how likely you are to recommend this nursing or nursing service to a friend or colleague) (**Kotler 2016).** Patients' expectations about the value and their satisfaction with the various nursing services on the basis of which satisfaction and acceptance will be given accordingly, and they tell others about their good experiences. Dissatisfied patients will turn into critics and detractors of service to others. Therefore, nurses must be careful to set the appropriate level of expectations, and if they set expectations too low, they may satisfy those who receive the service, and if they set expectations too high, they will disappoint patients. Patient value and satisfaction are the basic building blocks for developing and managing patient relationships **(Kotler, 2012).**

2.4 Caesarean section

CS is a procedure to deliver the baby though the incision made on the uterus. Ideally this is to deliver a viable fetus which is of 22 weeks or fetal weight of 500 g. Contrary to repeated use of caesarean section referring to the laparotomy to have access to perform a hysterotomy. The objective of caesarean section is to save the life of the mother and fetus. **(Tshililo Mashamba 2021) .**A C-section, short for Cesarean section, is a surgical procedure in which a baby is delivered through an incision made in the mother's abdomen and uterus. This procedure is typically done when a vaginal delivery poses a risk to the mother or the baby, or when a vaginal delivery is not possible. (Basaran 2023)

Material and Methods

3.1 Study design

The researcher used descriptive, analytical and cross-sectional design. This design is appropriate for describing the status of phenomena or for describing relationships among variables. It involves the collection of data once during a single period of data collection .

3.2 Study population

The population of study was included hospitalization patient with CS women who admitted to Nasser Medical Complex for evulate level satisfaction nursing care during period of study .
The number of study population 176 women's .as shown in the table (1)

Table (3.1): monthly report of cesarean deliveries in MOH hospitals in May 2023.

No.	Hospitals	Planned	Emergency	Total
1	Al-Shifa Complex	133	257	**390**
2	Nasser Complex	87	89	**176**
3	Al-Aqsa Hospital	63	75	**138**
4	Emirati Hospital	53	70	**123**
5	Kamal Adwan Hospital	52	35	**87**
6	**Total .**	**388**	**526**	**914**

3.3 Setting of the study

The study was conducted cesarean section departments at Nasser Medical Complex at Gaza strip.

3.4 Period of the study

The study conducted at the mid of year 2021. After obtaining approval for the study proposal from MOH in 2023 to offer facilitation for conducting the study in MOH hospitals. Data collected in June 2023.

3.5 Sample and sampling Technique

The sample of the study is non-probability, censuse sampling method was applied on cesarean delivery women At Nasser Hospital during the data collection period .The sample was the total population. The total number of them is 130 mother

3.6 Data collection and study instrument

We was using a structured questionnaire with Women cesarean delivery for the quality of care in the health services provided in the Department of Cesarean section at Nasser Medical Complex.

Study tool

The evaluation questionnaire was adopted as a study tool, where the questionnaire was designed and its questions were formulated in line with the objectives of the study and the variables to be used in the previous study in this field, in order to obtain accurate and useful information that can be built upon and completed in order to develop this field ,Is this questionnaire based on Demographic data And two domines.

1**. Section One**: This section includes first: Personal information

2**. Section Two**: It consists of two domines about the quality of care at Nasser Hospital in Khan Yunis . The evaluation was approved for the second section of 5 marks for each statement as in the table (2).

Table (3.2): for the degree scale of the second section of the questionnaire according to (Likart five-point scale) .

Strongly agree	Agree	Uncertain	disagree	Strongly
5 degrees	4 degrees	3 degrees	2 degrees	1 degree

3.7 Eligibility criteria .

3.7.1 Inclusion criteria for mothers :

1. All postpartum women who delivered inNasser hospital and stay in the postpartum department for 1 - 6 hours.
2. Had cesarean section without any complications

3.7.2 Exclusion criteria

1. Women who had any postpartum complications
2. Women admitted to postpartum department for other medical or gynecological problems.

3.8 Ethical and administrative considerations

An official letter will be obtained from University College of Applied Sciences of Gaza. An approval letter will be obtained from Ministry of Health Committee to access the hospitals and collect data from mothers . The informed consent will be attached to the questionnaire; respondents will be assured that the data will only be used for research purpose, and confidentiality will be maintained. Participants will have the right to refuse to participate or withdraw from the study at any time.

3.9 Limitation

- The study's findings may be limited by the sample size, A smaller sample size could limit the generalizability of the results.
- maternal satisfaction may be influenced by external factors that are beyond the control of nursing care, such as overall hospital environment, interactions with other healthcare professionals, and personal circumstances. 3.9.3 These factors could confound the relationship between nursing care and maternal satisfaction .
- The study focuses on evaluating maternal satisfaction at Nasser Medical Complex, which may limit the generalizability of the findings to other healthcare settings or institutions.
- The study's cross-sectional design provides a snapshot of maternal satisfaction at a specific point in time.
- Despite these limitations, the study will still provide valuable insights into maternal satisfaction with nursing care after caesarean delivery at Nasser Medical Complex and serve as a foundation for further research in this area.
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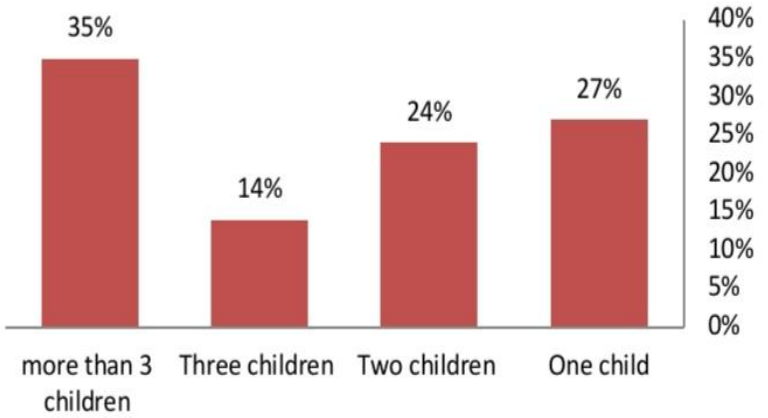
Results and Discussion

. 4. 1 Demographic characteristics of study sample

Personal data was collected according to the study sample. The study sample consisted of 126 mothers with post caesarean delivery at Nasser medical complex. We used the frequencies and percentage of demographic data to detect distribution of participants according to demographic data.

Figure 4.1 : Distribution of participant according to age

Figure 4.1 Shows 35% of participants age was between 31-41 years old, and 33% of participants age was between 25-30 years old while 32% of participants age was between 17-



24 years old

4.2. Distribution of numbers of children including this birth

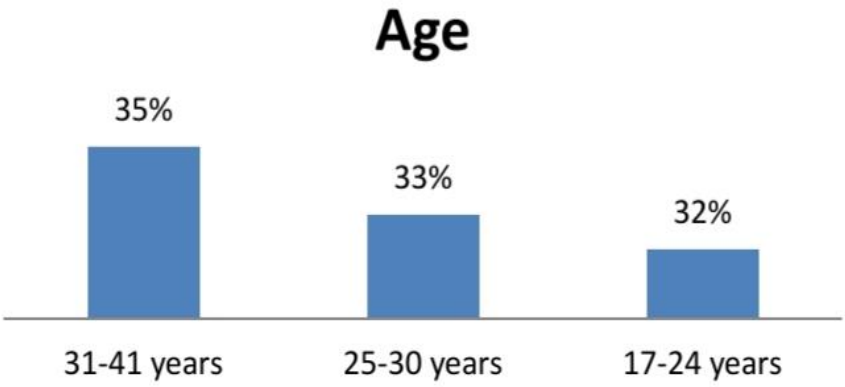


Figure 4.2 : distribution of numbers of children including this birth

Figure 4.2 Shows 35% of participants had more than 3 children, and 27% of participants had more than 3 children one child while 24% of participants had two children and 14% had 3 children.

4.3 Distribution cesarean delivery according to cause.

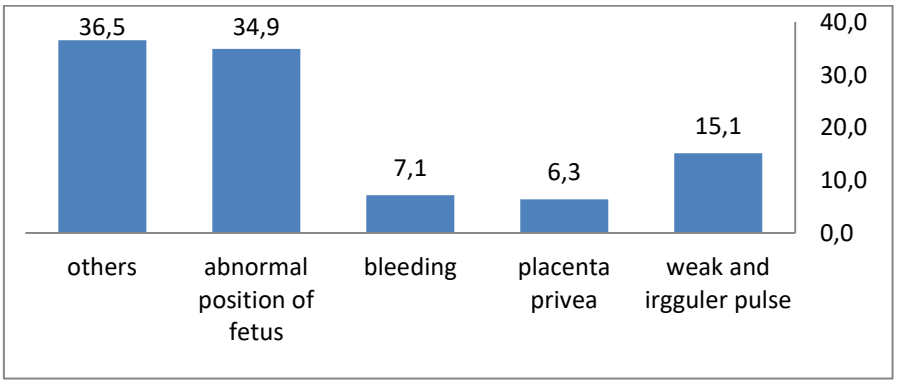


Figure 4. 3 Distribution cesarean delivery according to cause.

Figure 4. 3 Shows 36.5% of participants had other causes related cesarean delivery such as " eclampsia, narrowing in cervix", and 34.9% of participants complain of abnormal position of fetus, while 7.1% of participants complain of bleeding, 6.3% suffered from placenta previa and 15.1% were weak and irregular pulse of fetus.

4.4 Distribution other demographic data

Table (4.4) shows the frequencies and percentage of demographic data. The study sample consisted of 126 mothers with post caesarean delivery at Nasser medical complex.

Table 4.4 : Distribution of study participants according to demographic variables (n=126)

Items	Frequency	%
Education		
secondary school and below	64	50.8
university	57	45.2
post graduate	5	4.0
Types of cesarean delivery		
Planned	87	69.0
urgent	39	31.0
Previous cesarean delivery		
Yes	66	52.4
No	60	47.6
Number of abortion		
no	95	75.4
one time	23	18.3
Two and more time	8	6.3
Number of pregnancy		
one time	32	25.4
two time	30	23.8
three time or more	64	50.8
Number of deaths		
No	104	82.5
0ne	13	10.3
Two or more	9	7.1
Total	**126**	**100.0**

Above in table (4.4). Shows the majority of respondents 50.8% were below secondary school while (45.2%) of participants were "university" degree and 4% were postgraduate. The distribution of participants' according of types of cesarean delivery were 69% were planned to cesarean delivery and 31% were urgent. On other hand 52.4% of participants were Previous cesarean delivery while 47.6% were not.

Furthermore 75.45 from participants were not exposed to abortion while 18.8% exposed to two time of abortion, and 6.3% were two and more time of abortion. Moreover, 50.8% of participants got three time or more of pregnancy and 25.4% got one time of pregnancy while 23.8% of participants got two time. About number of deaths, 82.5% of participants had no deaths in children while 10.3% had one and 7.1% had two or more. That mean most of participants had no deaths in children.

4.5. Criteria for measurements of variables

Table 4.5 Criteria for measurements of variables

score	Cell length	Weighted percent	Interpretation
1	1.0 – 1.80	20% - 36%	Very low
2	1.81 – 2.60	>36% - 52%	Low
3	2.61 – 3.40	>52% - 68%	Moderate
4	3.41 – 4.20	>68% - 84%	Above moderate
5	4.21 – 5.0	>84% - 100%	High

4.6. Descriptive data

4.6.1. First section : nursing care

We used Mean, Standard deviation, Weight mean, and degree of nursing care from mothers' perceptions.

Table. 4.6.1 Mean, Standard deviation, Weight mean, and degree of nursing care from mothers perceptions post cesarean delivery.

N	Questions	Mean	Standard deviation	Weight mean%	degree
1.	I received enough information before the caesarean section	4.1508	0.88605	83.02	Above moderate
2.	Are you experienced any complications during your hospital stay.	2.3413	1.16043	46.83	low
3.	Pain management needs were handled appropriately.	4.1032	1.11592	82.06	Above moderate
4.	The general cleanliness and cleanliness of the hospital and its facilities were good.	4.0556	0.76216	81.11	Above moderate
5.	The hospital provided adequate follow-up care after you were discharged.	3.8968	0.97840	77.94	Above moderate
6.	The medical staff explained the post operative instructions to you clearly.	3.8175	1.03847	76.35	Above moderate
7.	I received adequate pain treatment after cesarean section.	4.0794	0.74408	81.59	Above moderate
8.	There is nothing you think could have	4.0556	0.77259	81.11	Above

	been done to improve your experience at NMC				moderate
9.	The medical staff provided clear and detailed instructions on how to take care of yourself and your baby after a C-section.	3.5952	1.16741	71.90	Above moderate
10.	I received enough information about the recovery process after surgery.	3.6667	1.02762	73.33	Above moderate
11.	Problems and complications were appropriately addressed by the hospital staff.	3.9762	0.76382	79.52	Above moderate
12.	The nurse's response in responding to your call was swift.	4.1905	0.71234	83.81	Above moderate
13.	The nursing team strictly considers your specific or personal needs.	3.9365	0.90108	78.73	Above moderate
14.	The nurse regularly assessed vital signs and pain levels.	4.4365	0.55851	88.73	High
15.	The nurse asked you and monitored the input and output	4.0079	0.83423	80.16	Above moderate
16.	The nurse evaluated and documented the appearance of the wound and drainage.	4.2222	0.61824	84.44	High
17.	The nurse monitored the signs and symptoms of infection or other complications.	3.9841	0.74816	79.68	Above moderate
18.	The nurse assessed and documente your emotional state.	3.8333	1.12960	76.67	Above moderate
19.	The nurse gave painkillers on demand and documented the effectiveness.	4.1667	0.78740	83.33	Above moderate
20.	The nurse has encouraged and helped you with non- medication pain relief measures.	3.8651	0.99078	77.30	Above moderate
21.	The nurse encouraged you to move around as soon as possible after surgery.	3.7540	0.99347	75.08	Above moderate
22.	The nurse helped you getup, get out of bed, walk and move.	3.5159	0.96112	70.32	Above moderate
23.	The nurse examined you for signs of dizziness or weakness while walking.	3.4960	1.00502	69.92	Above moderate
24.	The nurse provided support and assistance as needed.	4.3095	1.58446	86.19	High
25.	The nurse evaluated and documented the appearance of the incision and dressing .	4.0873	0.65751	81.75	Above moderate
26.	The nurse contributed to your awareness of proper wound care and signs of infection.	3.9683	0.78929	79.37	Above moderate
27.	The nurse provided with appropriate dressing changes as requested.	3.6560	1.04035	73.12	Above moderate
28.	The nurse assessed you and documented your breastfeeding	3.8333	1.82757	76.67	Above moderate

	experience and support needs.				
29.	The nurse contributed to providing education and assistance in breastfeeding techniques.	3.5952	1.07464	71.90	Above moderate
30.	The nurse watched for signs and complications of breastfeeding, such as congestion or nipple inflammation.	3.6320	1.94495	72.64	Above moderate
31.	The nurse contributed by providing education on post-operative care and wound care.	3.9603	1.86076	79.21	Above moderate
	Total	3.8792	0.65225	77.58	Above moderate

Table 4.6.1 Shows the highest score in (q,13, q16, q24) whereas mean equal (4.43, 4.22, 4.3095) respectively and standard deviation equal (0.55, 0.61, 1.58) with weight mean equal (88.73%, 84.44%, 86.19%) respectively. That's mean the participants were high satisfied to nursing care related to privacy, assessment, documentation, and providing helping as needed.
The other questions were in above moderate scores degree, additionally in general domain mean score was 3.65 with standard deviation equal 1.04 and weight mean equal 73.12%. that's mean mother perceptions toward nursing care was above moderate degree equal 73.12%. The current results disagree with the study conducted by Kurian (2020), 50% of the postnatal mothers were moderately and fully satisfied with the nursing care received. And agree with study conducted by Al Harazi (2021), (83.3%) were satisfied regarding nursing care.
The researchers believe the high positive perception of nursing care after cesarean delivery is attributed to several factors. Nursing care plays role in ensuring the well-being and comfort of post-cesarean mothers, providing support in pain management, wound care, breastfeeding support, and emotional support. The competency and professionalism of nursing staff, such as skilled and knowledgeable nurses, contribute to positive experiences. Clear explanations, regular monitoring, and timely interventions enhance the perception of quality care received.
Effective communication and empathy are essential in establishing a trusting and comforting environment for mothers. Nurses listen attentively to mothers' concerns, validate their emotions, and involve them in decision-making processes, fostering a sense of being cared for and understood. The overall healthcare facility environment, including cleanliness, accessibility to amenities, and resource availability, also influences the perception of care (Abdelati., 2019).
In addition, The researchers believe individual experiences and expectations can influence perceptions of nursing care. Positive experiences from previous encounters with healthcare providers and a positive attitude towards childbirth and recovery contribute to higher satisfaction levels. Overall, the above-moderate degree of positive perceptions towards nursing care after cesarean delivery can be attributed to factors such as skilled and competent nursing staff, effective communication and empathy, a supportive healthcare facility environment, and individual experiences and expectations.

4.6.2. second section: patients satisfaction

We used Mean, Standard deviation, Weight mean, and degree of maternal satisfaction toward nursing care

Table 4.6.2 Mean, Standard deviation, Weight mean, and degree of maternal

Satisfaction toward nursing care post cesarean delivery

N	Questions	Mean	Standard deviation	Weight mean%	degree
1.	Medical staff responded quickly and appropriately to your needs and concerns during your hospital stay.	4.2778	0.56056	85.56	High
2.	The time the nurses spend with me is enough.	4.0635	0.72383	81.27	Above moderate
3.	The waiting time for the results of the tests and examinations is acceptable.	4.1349	0.61127	82.70	Above moderate
4.	Nursing explains my condition and treatment plan adequately and well	3.8571	1.03316	77.14	Above moderate
5.	Hospital staff deal with crowds and noise effectively	3.9048	1.11304	78.10	Above moderate
6.	There is a high level of system within the hospital.	3.9524	1.01868	79.05	Above moderate
7.	I feel that I have received the appropriate treatment for my illness and there is no need to rely on external transfers.	4.1984	0.71576	83.97	Above moderate
8.	The hospital administration adheres to its promise tome in providing health and treatment servicesand providing the appropriate environment as I expect.	4.2143	0.58797	84.29	High
9.	In general I am satisfied with the services of this hospital.	4.0635	0.89215	81.27	Above moderate
10	I would like to continue receiving service at the same hospital.	4.0476	0.88415	80.95	Above moderate
11	I trust the services provided by the hospital.	3.9444	0.98229	78.89	Above moderate
12	NMC is recommended for other women who need a C-section.	4.1270	0.83890	82.54	Above moderate
13	Were you satisfied with the level of attention and care provided to your newborn by the medical staff?	3.9365	0.96950	78.73	Above moderate
14	Are you generally satisfied with the care you received at NMC during your stay after a C-section?	4.0238	0.93350	80.48	Above moderate
15	Nursing has been respectful and courteous to you and your family members during your stay.	4.3333	0.72664	86.67	High
16	The hospital staff provided you with	3.8413	1.02304	76.83	Above

	adequate support to help you care for your newborn.				moderate
17	You felt comfortable asking questions or expressing your concerns to medical staff.	4.1270	0.97967	82.54	Above moderate
18	The comprehensive care you received during your hospital stay is good	4.1680	0.76975	83.36	Above moderate
19	I was satisfied with the pain management provided by the hospital staff.	4.1667	0.75631	83.33	Above moderate
	Total	4.0731	0.63564	81.46	Above moderate

Table 4.6.2 Shows the highest score in (q1, q8, q15) whereas mean equal (4.2778, 4.21, 4.33) respectively and standard deviation equal (0.56, 0.58, 0.72) with weight mean equal (85.56%, 84.29%, 86.67%) respectively. That's mean the participants were high satisfaction to nursing response to patients need, trust towered health care providers and administrators, and health care providers were providing respect to patients and family.

The other questions were in above moderate scores degree, additionally in general domain mean score was 4.0731with standard deviation equal 0.63564and weight mean equal 81.46%. the level of mother's satisfaction equal 81.46% that's mean mother perceptions toward nursing care was above moderate degree. This result agree with The study conducted by Abdelati (2019), the higher percentage of studied women were satisfied. The study conducted by Korkmaz (2023), The satisfaction level of the mothers in cesarean section was high.

The researchers believe this satisfaction can be attributed to several factors, including the well-being and comfort of mothers, skilled and competent nursing staff, effective communication and empathy, a supportive healthcare facility environment, and individual experiences and expectations.

Nurses play a crucial role in addressing the physical, emotional, and informational needs of mothers, ensuring their satisfaction (Abdelati (2019). The researchers believe Skilled and competent nursing staff, with expertise in pain management, wound care, breastfeeding support, and post-operative care, can significantly impact the overall experience for mothers. Effective communication and empathy are also vital, as nurses actively listen to mothers' concerns, provide clear explanations, and involve them in decision-making.

The quality of the healthcare facility and its amenities also influence satisfaction. A clean, comfortable, and well-equipped facility can make mothers feel more satisfied during the post-operative period. Additionally, individual experiences and expectations, such as previous positive experiences with healthcare providers, positive attitudes towards childbirth and recovery, and realistic expectations, also contribute to higher satisfaction levels.

The researchers believe the high level of mother's satisfaction after cesarean delivery is attributed to the importance of nursing care, skilled and competent staff, effective communication and empathy, a supportive healthcare facility environment, and individual experiences and expectations.

4.7 what is the level of mother satisfaction with nursing care post caesarean delivery at Nasser Medical complex ? We used Mean, Standard deviation, Weight mean, and degree of mother satisfaction toward nursing care

Table 4.7 Mean, Standard deviation, Weight mean, and degree of mother satisfaction toward nursing care

N	Questions	Mean	Standard deviation	Weight mean%	degree
1	Mothers perception towered nursing care	3.8792	0.65225	77.58	Above moderate
2	mother satisfaction toward nursing care	4.0731	0.63564	81.46	Above moderate
	Total	3.9761	0.61734	79.4	Above moderate

The table no. 4.7 Shows the mean scores in general scale was 3.9761 and standard deviation equal 0.61734 and weight mean equal 79.4%. that's mean the level of mother satisfaction with nursing care post caesarean delivery at Nasser Medical complex equal 79.4% in above moderate degree. Ozkan& Bal, (2019). the women who had caesarean has satisfaction toward nursing care in scores equal (81.3%).

The study conducted by Guadie & Demelash., (2023). the women who had caesarean has satisfaction toward nursing care in scores equal 57.7%. Kurian (2020) found 50% postnatal mothers satisfied with nursing care, while Abdelati (2019) found a higher percentage satisfied. The researchers think the majority of mothers who received nursing care after their caesarean delivery at Nasser Medical complex expressed high satisfaction with the services provided. Factors contributing to this satisfaction level include competent nursing staff, effective communication between nurses and mothers, a clean, comfortable, and well-equipped facility, and individual experiences and expectations. Nurses who manage pain, assist with wound care, provide breastfeeding support, and offer emotional support greatly contribute to positive experiences and higher satisfaction levels among mothers .The researchers think the physical environment and amenities at Nasser Medical complex also contribute to the high satisfaction level. A clean, comfortable, and well-equipped facility is conducive to recovery and provides necessary resources, making mothers more likely to express higher satisfaction levels. Additionally, individual experiences and expectations, such as positive experiences with healthcare providers, prior knowledge of the hospital's reputation, and realistic expectations, also influence the level of satisfaction reported by mothers .The researchers believe the satisfaction level among mothers at Nasser Medical complex is above a moderate degree, indicating the importance of competent nursing staff, effective communication, a favorable hospital environment, and individual experiences and expectations.

4.8 Is there the relationship between mothers' perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex ?

To test the question, we use the Pearson correlation between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex ,

Table 4. 8 Correlation between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex

Domain	statistic	Nursing care
Satisfaction	Pearson coloration	0.841
	p-value	0.000*
	N	126

* significant at < 0.05

results shown in table No.(4.8) which illustrate that the p-value equal 0.000 which is less than 0.05, and the value of Pearson correlation is equal 0.818 which is greater than the critical value which is equal 0.246 that means there is a positive relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex at significant level α =0.5.

This means that as mothers' perceptions of the nursing care they received increase, their level of satisfaction with the care also tends to increase. The study conducted by Abdelati (2019), there was a positive association of quality of nursing care with the level of women's satisfaction. The researchers think when mothers have positive perceptions of nursing care, such as perceiving the nurses as skilled, attentive, and empathetic, it contributes to their overall satisfaction. If mothers feel that their needs were effectively addressed, they received appropriate support and guidance, and experienced clear and respectful communication from the nursing staff, it can significantly impact their satisfaction levels.

On other hand, Positive perceptions of nursing care can also be influenced by factors such as the cleanliness and comfort of the hospital environment, the availability of necessary resources, and the efficiency of the care provided. When these factors align with mothers' expectations and needs, it enhances their perception of the care received and subsequently increases their satisfaction.

Additionally, Conversely, if mothers perceive shortcomings or gaps in nursing care, such as inadequate pain management, poor communication, or a lack of support, it can negatively impact their satisfaction levels. Therefore, maintaining a high standard of nursing care that aligns with the expectations and needs of mothers is crucial for ensuring their satisfaction.

Furthermore, there is a positive relationship between mothers' perceptions toward nursing care and their satisfaction post-caesarean delivery at the Nasser Medical complex . Positive perceptions of nursing care, including aspects such as nursing staff competence, empathy, effective communication, and a supportive hospital environment, contribute to higher levels of satisfaction among mothers.

4.9. Is there the relationship between mothers' perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to age?

To test the question we use the one way ANOVA and the result illustrated in table no.(4.9)

Table 4.9 One-way ANOVA test for difference in mothers' perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to age

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	4.168	2	2.084	5.230**	0.007
	Within Groups	49.011	123	.398		
	Total	53.178	125			
Satisfaction	Between Groups	1.468	2	.734	1.841	0.163
	Within Groups	49.038	123	.399		
	Total	50.506	125			
Total	Between Groups	2.644	2	1.322	3.608*	0.030
	Within Groups	45.074	123	.366		
	Total	47.718	125			

* significant at < 0.05

Table no 4.9 shows which in mother perception toward nursing care that the p-value equal 0.007 which is less than 0.05 and the value of F test equal 5.230 which is greater than the value of critical value which is equal 3.07, that's means there are a statistical differences about in mothers perceptions toward nursing care post caesarean delivery at Nasser Medical complex due to age at significant level $\alpha = 0.05$.

On other hand the p-value equal 0.163 which is greater than 0.05 and the value of F test equal 1.841 which is less than the value of critical value which is equal 3.07, that's means there are no statistical differences about mothers satisfaction post caesarean delivery at Nasser Medical complex due to age. And the p-value equal 0.03 which is less than 0.05 and the value of F test equal 3.608 which is greater than the value of critical value which is equal 3.07, that's means there are a statistical differences about mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex according to age.

Table (4.9.1): Multiple comparisons Post hoc for age

Variable	Age	Mean	P value

Nursing care	31-41 years	17-24 years	0.44309	0.002*
		25-30 years	0.21886	0.113
Total	31-41 years	17-24 years	0.35297	0.008*
		25-30 years	0.16903	0.007*

* significant at < 0.05

table (4.9.1), Post hoc LSD test indicated that mothers from the age group betwwen 31-41 years old was higher satisfaction with overall scale , and higher with in domain nursing care from mothers percption compared to older age patients and less 31 years.

This means that the age of the mothers is a factor that influences their perceptions and satisfaction levels regarding nursing care after their caesarean delivery. The current study agree with study conducted by Celik ., (2019). Scores of satisfactions of mother toward nursing care had significant differences due to age at significant level 0.05.

The age of mothers significantly influences their perceptions and satisfaction levels with nursing care post-caesarean delivery. Research at the Nasser Medical complex has revealed significant variations in perceptions and satisfaction levels among different age groups of mothers. Younger mothers may have different expectations, preferences, and unique needs and concerns related to their age and life circumstances. On the other hand, older mothers may have different experiences and perspectives and comorbidity with disease that shape their perceptions and satisfaction levels. Healthcare providers at the Nasser Medical complex must consider these age-related differences to tailor nursing care appropriately.

4.10. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of children ? To test the question we use the one way ANOVA and the result illustrated in table no.(4.10) .

Table 4.10 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of children

Domain	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	5.983	3	1.994	5.156**	0.002
	Within Groups	47.195	122	.387		
	Total	53.178	125			
Satisfaction	Between Groups	2.913	3	.971	2.489	0.064
	Within Groups	47.592	122	.390		
	Total	50.506	125			
Total	Between Groups	4.163	3	1.388	3.887*	0.011
	Within Groups	43.555	122	.357		
	Total	47.718	125			

*At Significant level less than 0.05

Table no 4.10 shows which in mother perception toward nursing care that the p-value equal 0.002 which is less than 0.05 and the value of F test equal 5.156 which is greater than the value of critical value which is equal 3.07, that's means there are a statistical differences about in mothers perceptions toward nursing care post caesarean delivery at Nasser Medical complex due to number of children at significant level

And the p-value equal 0.01 which is less than 0.05 and the value of F test equal 3.608 which is greater than the value of critical value which is equal 3.07, that's means there are a statistical differences about mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of children.

On other hand the p-value equal 0.064 which is greater than 0.05 and the value of F test equal 2.489 which is less than the value of critical value which is equal 3.07, that's means there are no statistical differences about mothers satisfaction post caesarean delivery at Nasser Medical complex due to number of children.

Table (4.10.1): Multiple comparisons Post hoc for number of children

Variable	number of children		Mean diff.	P value
Nursing care	3 children	One child	0.49873	0.007*
		Two children	0.31183	0.095
		More than 3 children	-0.00559	0.974
Total	3 children	One child	0.45353	0.010*
		Two children	0.34129	0.058
		More than 3 children	0.06897	0.681

* significant at 0.05

table (4.10.1), shows Post hoc LSD test indicated to mothers with 3 children more satisifed towerd nursing care and in general scale. The current study agree with study conducted by Celik ., (2019). Scores of satisfaction of mother toward nursing care had significant differences due to number of children at significant level 0.05.

the researchers think mothers with multiple children who have undergone a cesarean delivery tend to be more satisfied with nursing care and express higher levels of satisfaction on a general scale. This is due to their prior experiences with post-cesarean care, understanding of the challenges and demands of caring for a newborn and recovering from a cesarean section, and established support systems. These factors can contribute to a more positive perception of the nursing care provided. However, each individual's experience and perception can vary, and personal circumstances, individual expectations, and the quality of care provided by nursing staff all play significant roles in shaping satisfaction levels. In summary, mothers with multiple children who have undergone a cesarean delivery generally display higher levels of satisfaction with nursing care and express greater overall satisfaction. It is essential to consider each mother's unique circumstances and experiences when assessing satisfaction levels.

4.11. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to educational level? To test the question we use the one way ANOVA and the result illustrated in table no.(4.11)

Table 4.11 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to educational level

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	2.154	2	1.077	2.596	0.079
	Within Groups	51.025	123	.415		
	Total	53.178	125			
Satisfaction	Between Groups	2.078	2	1.039	2.639	0.076
	Within Groups	48.428	123	.394		
	Total	50.506	125			
Total	Between Groups	2.088	2	1.044	2.814	0.064
	Within Groups	45.630	123	.371		
	Total	47.718	125	1.077		

table no.(4.11). which shows that the p- is greater than 0.05 and the value of F test is less than the value of critical value which is equal 3.07 for each domain and in general scale, that's means there are not statistical differences about in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to educational level at significant level $\alpha = 0.05$. That's mean educational level aren't affected factor in mother satisfaction toward nursing care . The current study disagree with study conducted by Celik ., (2019), and Imtithal Adnan., (2020), Scores of satisfactions of mother toward nursing care had significant differences due to educational level at significant level 0.05.

The researchers think healthcare providers at the Nasser Medical complex had programs encourage education and follow up patients need, by recognizing the specific needs, expectations, and preferences of different educational groups, healthcare providers can better address and meet the requirements of each group, ultimately improving their perceptions and satisfaction levels.

4.12. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to types of cesarean delivery? To test the question, we use the independent samples test and the result illustrated in in table no.(4.12)

Table 4. 12 Independent Samples Test for mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to types of cesarean delivery

Field	types of cesarean delivery	N	Mean	Std. Deviation	T	P-value
Nursing care	Planned	87	3.8472	0.69897	-0.820	0.414
	urgent	39	3.9504	0.53498		
Satisfaction	Planned	87	4.0321	0.67015	-0.082	0.324
	urgent	39	4.1645	0.54798		
Total	Planned	87	3.9396	0.65860	-0.989	0.281
	urgent	39	4.0574	0.51406		

table no.(4.12) which shows that the p-value which is greater than 0.05 and the absolute value of T test which is less than the value of critical value which is equal 2.0, that's means there are no statistical differences about between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to types of cesarean delivery. That's mean types of cesarean delivery aren't affected factor in mother satisfaction toward nursing care. The current study disagrees with Celik, E. (2020). mean types of cesarean delivery are affected factor in mother satisfaction toward nursing care

The types of cesarean delivery, whether planned or urgent, do not significantly affect mother satisfaction toward nursing care. Regardless of whether the cesarean delivery was planned or performed as an emergency, the level of satisfaction with nursing care remains relatively consistent.

The researchers think Mothers' satisfaction with nursing care post-cesarean delivery is influenced by factors like nursing staff competence, professionalism, communication, empathy, hospital environment, and individual experiences. Nursing care aims to provide optimal support and assistance to mothers, regardless of the type of delivery. Nurses focus on pain management, wound care, breastfeeding support, emotional support, and other essential aspects of post-operative care. The type of cesarean delivery is not a significant factor in influencing mother satisfaction, but the quality of nursing care, communication, and support received during the post-cesarean period are key determinants.

4.13. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to previous of cesarean delivery? To test the question we use the independent samples test and the result illustrated in table no.(4.13)

Table 4. 13 Independent Samples Test for mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to previous of cesarean delivery

Domain	types of cesarean delivery	N	Mean	Std. Deviation	T	P-value
Nursing care	Yes	66	3.8788	0.66280	-0.007	0.995
	No	60	3.8796	0.64603		
Satisfaction	Yes	66	3.9809	0.63907	1.721-	0.088
	No	60	4.1745	0.62138		
Total	Yes	66	3.9298	0.62325	0.881	0.380
	No	60	4.0270	0.61303		

table no.(4.13) which shows that the p-value which is greater than 0.05 and the absolute value of T test which is less than the value of critical value which is equal 2.0, that's means there are no statistical differences about between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to previous of cesarean delivery. That's mean previous of cesarean delivery aren't affected factors in mother satisfaction toward nursing care. The current study disagrees with Celik, E. (2020). mean previous of cesarean delivery are not affected factor in mother satisfaction toward nursing care

Previous cesarean delivery is not a significant factor in mother satisfaction with nursing care. Whether a mother has had a previous cesarean delivery or not does not have a significant impact on their satisfaction levels with nursing care received after subsequent cesarean deliveries. The researchers think mother satisfaction with nursing care post-cesarean delivery is influenced by factors like nursing staff competence, professionalism, communication, empathy, hospital environment, and individual experiences. Nursing care aims to provide optimal support to all mothers, regardless of their previous cesarean delivery history. The focus is on ensuring the well-being, comfort, and recovery of all mothers, regardless of their previous delivery experiences. Previous cesarean delivery is not a major factor influencing mother satisfaction with nursing care. Key determinants of satisfaction remain the quality of nursing care, communication, and support received during the post-cesarean period, regardless of the mother's previous delivery history.

4.14. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of abortion? To test the question we use the one way ANOVA and the result illustrated in table no.(4.14) .

Table 4. 14 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of abortion

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	.066	2	.033	0.076	0.927
	Within Groups	53.113	123	.432		
	Total	53.178	125			
Satisfaction	Between Groups	1.133	2	.567	1.412	0.248
	Within Groups	49.372	123	.401		
	Total	50.506	125			
Total	Between Groups	.192	2	.096	0.249	0.780
	Within Groups	47.526	123	.386		
	Total	47.718	125			

table no.(4.14) which shows that the p-value equal which is greater than 0.05 and the value of F test equal which is less than the value of critical value which is equal 3.07, that's means there are not statistical differences about in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of abortion at significant level $\alpha = 0.05$. That's mean numbers of abortion aren't affected factors in mother satisfaction toward nursing care. The current study agree with study conducted by Ozkan& Bal, (2019). Whereas no significant deference's in satisfaction scores due to numbers of abortion aren't affected factors in mother satisfaction toward nursing care.

The researchers think the number of previous abortions a mother has had does not have a significant impact on her satisfaction with nursing care following a cesarean delivery. Factors such as the competency and professionalism of the nursing staff, effective communication, empathy, the hospital environment, and individual experiences and expectations play a more substantial role in determining mother satisfaction. Nursing care aims to provide comprehensive support to all mothers, irrespective of their reproductive history. The nursing staff consistently addresses pain management, wound care, breastfeeding support, and emotional assistance. While a mother's reproductive history may have implications for her overall medical background or specific considerations during pregnancy, it does not significantly influence her satisfaction with nursing care after a cesarean delivery. The primary focus of nursing care remains the well-being, comfort, and recovery of all mothers, regardless of their previous abortions. Consequently, the number of previous abortions a mother has undergone is not a major factor that affects her satisfaction with nursing care.

4.15. Is there the relationship between mothers' perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of pregnancy? To test the question, we use the one way ANOVA and the result illustrated in table no 4.15

Table 4.15 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of pregnancy

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	3.521	2	1.761	4.361	0.015
	Within Groups	49.657	123	0.404		
	Total	53.178	125			
Satisfaction	Between Groups	.762	2	0.381	.942	0.393
	Within Groups	49.743	123	0.404		
	Total	50.506	125			
Total	Between Groups	1.858	2	0.929	2.491	0.087
	Within Groups	45.861	123	0.373		
	Total	47.718	125			

table no.(4.15) which shows that the p-value is greater than 0.05 and the value of F test is less than the value of critical value which is equal 3.07, that's means there are not statistical differences about in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to numbers of pregnancy at significant level $\alpha = 0.05$ .In perception of mothers towed nursing care the p-value is 0.015 which is greater than 0.05 and the value of F test is greater than the value of critical value which is equal 3.07, that's means there are a statistical differences about in mothers perceptions toward nursing care post caesarean delivery at Nasser Medical complex due to numbers of pregnancy at significant level .**Table (4.15.1): Multiple comparisons Post hoc for number of pregnancy**

Variable	number of pregnancies		Mean difference	P value
Nursing care	Three time or more	One time	0.38204	0.006*
		Two time	0.26087	0.066

* significant at 0.05

table (7.1), shows Post hoc LSD test indicated to mothers with three time or more pregnancy more satisifed towerd nursing at signifecant lvel 0.05. That's mean number of pregnancy are affected factors in mother satisfaction toward nursing care. The current study agree with study conducted by Ozkan& Bal, (2019). the women who had caesarean has satisfaction toward nursing care in scors equal (81.3%). And agree with study conducted by Celik ., (2019), there are a statistical differences about in mothers perceptions toward nursing care post caesarean delivery due to numbers of pregnancy.

The researchers think The number of pregnancies a mother has experienced can impact her satisfaction with nursing care. Multiple pregnancies may have different needs, concerns, and

expectations compared to first-time mothers. They may have more experience and knowledge about the birthing process and postnatal care, which can shape their perceptions and satisfaction levels. Additionally, they may have unique physical and emotional challenges, requiring additional support and specialized care. Adequate pain management, attentive monitoring, personalized guidance, and effective communication can enhance satisfaction among mothers with multiple pregnancies**.**

On other hand, First-time mothers may have different expectations and experiences, requiring more education and support in adjusting to motherhood, breastfeeding, and postnatal recovery. Healthcare providers should recognize the impact of the number of pregnancies on mother satisfaction with nursing care and tailor care to meet these specific needs and concerns. This can lead to higher satisfaction levels and improved overall experiences for all mothers.

4.16. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of deaths? To test the question we use the one way ANOVA and the result illustrated in table no.(4.16) .

Table 4. 16 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of deaths

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	Between Groups	2.694	2	1.347	3.282	0.401
	Within Groups	50.484	123	0.410		
	Total	53.178	125			
Satisfaction	Between Groups	2.393	2	1.197	3.060	0.050
	Within Groups	48.112	123	0.391		
	Total	50.506	125			
Total	Between Groups	2.024	2	1.012	2.725	0.070
	Within Groups	45.694	123	0.371		
	Total	47.718	125			

table no.(4.16) which shows that the p-value equal which is greater than 0.05 and the value of F test equal which is less than the value of critical value which is equal 3.07, that's means there are not statistical differences about in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of deaths at significant level $\alpha = 0.05$. That's mean number of deaths of children are not affected factors in mother satisfaction toward nursing care. Ozkan& Bal, (2019). the women who had caesarean has satisfaction toward nursing care in scores equal (81.3%).

The researchers think there are some factors that support this result such as nursing skills and training, policy of organization toward continuous education and training in all human field. These factors play a significant role in supporting mothers during their journey, irrespective of their personal experiences with childbirth. By ensuring that the nursing staff is competent and professional, able to communicate effectively, and display empathy towards the mothers, a positive hospital environment can be fostered. This allows for individual experiences and expectations to be acknowledged and addressed, ultimately leading to comprehensive support for all mothers in their childbirth experience.

4.17. Is there the relationship between mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to causes of cesarean delivery? To test the question we use the one way ANOVA and the result illustrated in table no.(4.17) .

Table 4.17 One way ANOVA test for difference in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to causes of cesarean delivery

Field	Source	Sum of Squares	df	Mean Square	F value	Sig.(P-Value)
Nursing care	6.273	4	1.568	6.273	4.045	0.004
	46.906	121	.388	46.906		
	53.178	125		53.178		
Satisfaction	8.521	4	2.130	8.521	6.139	0.000
	41.985	121	.347	41.985		
	50.506	125		50.506		
Total	7.304	4	1.826	7.304	5.467	0.000
	40.414	121	.334	40.414		
	47.718	125		47.718		

table no.(4.17) which shows that the p-value equal 0.000 which is greater than 0.05 and the value of F test is less than the value of critical value which is equal 3.07, that's means there are a statistical differences about in mothers perceptions toward nursing care and satisfaction post caesarean delivery at Nasser Medical complex due to number of deaths at significant level $\alpha = 0.05$.

Table (4.17.1): Multiple comparisons Post hoc for number of children

Variable	Causes		Mean	P value
Nursing care	abnormal position of fetus	weak and irregular pulse	0.48300	0.006
		placenta previa	-0.25406	0.291
		bleeding	.141550	0.535

		others	.368840	.0060
Mothers satisfaction	placenta previa	weak and irregular pulse	0.45353	0.001
		bleeding	0.34129	0.029
		abnormal position of fetus	.068970	0.147
		others	0.77558	.0010
Total	placenta previa	weak and irregular pulse	0.79025	0.002
		bleeding	0.51396	0.070
		abnormal position of fetus	0.29233	0.191
		others	.699240	.0020

* significant at 0.05

table (4.17.1), shows Post hoc LSD test indicated to Multiple comparisons Post hoc for number of children. In nursing care domain mothers with abnormal position of fetus more satisfied towered nursing care compered others cuases. In satisfaction domain mothers with placenta previa exhipeted higher satesfaction than mother with other causes. In general scale mothers with placenta previa exhipeted higher satesfaction towered nursing care than mother with other causes. Causes of cesearin delivery are affected factors in mother satisfaction toward nursing care in favor of abnormal position of fetus and placenta previa. The current studies agree with study conducted by Ozkan& Bal, (2019), Badu ET AL., (2022), and Guadie& Demelash., (2023), The causes of cesarean deliverymay affect maternal satisfaction towards nursing care. The reseachers think mothers who undergo cesarean delivery due to these specific causes may have unique needs, concerns, and experiences that can influence their satisfaction levels with nursing care**.** Abnormal position of the fetus, such as breech presentation, transverse lie, or other malpositions, can present challenges during labor and delivery. Mothers who require a cesarean delivery due to these abnormal positions may have additional anxiety or concerns about the process and outcome. Nursing care that addresses these specific needs, provides clear explanations, and offers emotional support can contribute to higher satisfaction levels among these mothers**.**

Similarly, placenta previa, a condition where the placenta partially or completely covers the cervix, often necessitates a cesarean delivery. Mothers with placenta previa may have heightened concerns about bleeding, complications, and the safety of both themselves and the baby. Nursing care that prioritizes monitoring, provides appropriate interventions, and offers reassurance can positively impact satisfaction levels**.**

Addressing the specific needs and concerns associated with these causes of cesarean delivery can help mothers feel supported and cared for during their post-operative recovery. This includes pain management, wound care, breastfeeding support, emotional support, and providing accurate information about the condition and its management**.**

Nursing staff who demonstrate competence, empathy, effective communication, and a clear understanding of these unique circumstances can enhance mother satisfaction with the nursing care received. Tailoring the care to meet the specific needs of mothers with abnormal fetal position or placenta previa can contribute to higher satisfaction levels and improved overall experiences.

4.18. Conclusion

The satisfaction level of mothers with nursing care post-cesarean delivery at Nasser Medical complex was 79.4%, indicating a moderate degree of satisfaction. A positive relationship was found between mothers' perceptions and their satisfaction, with significant differences observed due to age, number of children, number of pregnancies, and number of deaths. These findings emphasize the importance of considering various factors when assessing mother satisfaction with nursing care post-cesarean delivery. Tailoring care to address the specific needs, concerns, and preferences of mothers within different age groups, with varying numbers of children, pregnancies, and experiences, can contribute to higher satisfaction levels and improved overall experiences. Further research and analysis may be necessary to explore the specific factors contributing to these statistical differences in mothers' perceptions and satisfaction levels. By identifying and understanding these differences, healthcare providers can continue to enhance the quality of nursing care provided to mothers at Nasser Medical complex .

Recommendations

Based on the relationship between mothers' perceptions toward nursing care and satisfaction post-caesarean delivery at Nasser Medical complex , the following recommendations can be made:

- Enhance effective communication between nursing staff and patients, including clear and concise explanations of procedures and treatment options.
- Ensure competent and skilled nursing staff: Continuously invest in training and development programs for nursing staff.
- Offer comprehensive post-operative education: Provide mothers with comprehensive information and education regarding post-cesarean care.
- Empathy and emotional support: Train nursing staff to demonstrate empathy and provide emotional support to mothers.
- Regular evaluation and feedback: Establish mechanisms for regular evaluation of nursing care and seek feedback from mothers.
- Ensure that nursing staff are competent and professional in their approach to patient care.
- Create a comfortable and supportive hospital environment for patients.
- Provide comprehensive support to all mothers, regardless of their reproductive history, including addressing pain management, wound care, breastfeeding support, and emotional support.
- Monitor the intensity of pain and satisfaction with pain management among postnatal mothers after cesarean section.
- Consider participating in clinical trials or research studies aimed at improving postpartum quality of recovery and maternal satisfaction after cesarean delivery.

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المستلخص

يعتبر رضا الأمهات مهمًا في تقييم جودة خدمات الرعاية الصحية المقدمة ، لا سيما مع تزايد انتشار العمليات القيصرية ،فكان من الضروري تقييم مستوى رضا الأمهات. هدفت هذه الدراسة إلى تقييم مستوى رضا الأمهات بعد العمليات القيصرية في مجمع ناصر الطبي. تم استخدام تصميم دراسة ووصفية وتحليلية. تم جمع البيانات من خلال استبيان تم إجراؤه ذاتيًا تم تطبيقه على عينة من 126

من الأمهات اللاتي ولدن في مجمع ناصر الطبي في يونيو 2023. قيم الاستبيان الأبعاد المختلفة للرعاية التمريضية ومستويات الرضا.

أظهرت النتائج أن متوسط الدرجة في المقياس العام لرضا الأمهات عن الرعاية التمريضية بعد الولادة القيصرية في مجمع ناصر الطبي كان إجمالي 79.4٪ ، مما يدل على درجة رضا أعلى من المتوسط.

علاوة على ذلك ، لوحظ وجود علاقة إيجابية بين تصورات الأمهات للرعاية التمريضية ومستويات رضاهن بعد الولادة القيصرية في مجمع ناصر الطبي. ونشيرر النتائج بانه لا توجد فروق ذات دلالة إحصائية في تصورات الأمهات عن الرعاية التمريضية والرضا فيما يتعلق بالولادات القيصرية السابقة ، أو عدد حالات الإجهاض ، أو عدد حالات الحمل. بينما تم تحديد فروق ذات دلالة إحصائية في تصورات الأمهات للرعاية التمريضية ورضاهن بعد الولادة القيصرية في مجمع ناصر الطبي تعزى لعدد الوفيات. بالإضافة إلى ذلك ، لوحظ وجود فروق ذات دلالة إحصائية في تصورات الأمهات عن الرعاية التمريضية بعد الولادة القيصرية في مجمع ناصر الطبي فيما يتعلق بالعمر ، مع مستويات رضا أعلى بين المرضى الأصغر سنًا (أقل من 31 عامًا) مقارنة بالفئات العمرية الأكبر. زاظهرت الدراسة أن الأمهات اللائي لديهن ثلاثة أطفال أظهرن مستويات أعلى من الرضا عن الرعاية التمريضية بشكل عام. ومع ذلك ، لا توجد فروق ذات دلالة إحصائية في تصورات الأمهات عن الرعاية التمريضية ورضاها بعد الولادة القيصرية على أساس المؤهل العلمي. في الختام ، تقدم هذه الدراسة رؤى قيمة حول رضا الأمهات عن الرعاية التمريضية بعد الولادة القيصرية في مجمع ناصر الطبي. تؤكد النتائج على أهمية ارضا الأمهات في تقديم الرعاية الصحية ، لا سيما فيما يتعلق بالرعاية التمريضية.. يوصي البحث بتحسين الرعاية التمريضية بعد الولادة القيصرية ، وتوفير بيئة آمنة وسليمة ، وزيادة عدد الممرضات ، وضرورة إعداد برامج توعوية للتوعية بمتلقي الخدمة وتقييمهم .