

Caesarean health
organization (who)
underscores the
importance of



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Caesarean section (C-section) considered as a public health problem, is one of the most common surgeries in the world¹. The procedure is often performed without medical need, thus putting women and their neonates at risk of short- and long-term health problems. Recently, it has been reported that the rates of C-section continue to skyrocket, particularly in high- and middle-income countries¹². The international healthcare community considered the ideal rate for cesarean sections to be between 10% and 15%^{12,3}. The Malawi government follows the United Nations (UN) indicators, which recommend that a minimum of 5% and a maximum of 15% of all births should be delivered by C-section⁴.

However, the World Health Organization (WHO) underscores the importance of focusing on the needs of the patient and discourages the practice of aiming for target rates². C-section may be necessary when vaginal delivery might pose a risk to the mother or neonate particularly due to fetal distress, prolonged labor, or because the baby is presenting in an abnormal position¹³. Unfortunately, the procedure can lead to significant problems, disability or death, predominantly in settings that lack the facilities to conduct safe surgeries or treat potential complications²³. Previous studies in many settings have reported that the causes of an increase in C-sections are multifactorial and poorly understood⁵. Notably, changes in maternal characteristics (i.

e. higher educational education, rise in maternal age, prior cesarean section, prolonged labor, and increasing maternal Body Mass Index)^{5,6}, infant characteristics (i. e.

baby weight – suspected low infant birthweight or macrosomia, length of the baby) 67 and professional practice styles, increasing malpractice pressure – private hospital status, as well as economic, organizational, social and cultural factors have all been implicated in an increase in C-sections 5. Cesarean section is one of the most important risk factors for postpartum maternal infection which account for approximately 10% of pregnancy-related mortality and it carries a risk of infection 5 to 20 times that of vaginal delivery 8910. It. In Malawi, since 1992, the rates of C-sections have been on the rise as it was reported that only 3% of births occurred with C-section in 1992-2000 compared with 5% in 2010 and 6% in 2015-16 11.

To the best of our knowledge, few studies have until now been conducted to address the factors that affect C-section in Malawi. For better results on C-sections, it is necessary to contextualize the sociocultural determinants in addition to the current healthcare model. Thus, the present study aimed to investigate the associated factors of C-sections from 2004 to 2015 using the population-based data.