

A COMPARATIVE STUDY OF SOCIAL ANXIETY BETWEEN CESAREAN AND NON-CESAREAN SCHOOL CHILDREN

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ABSTRACT

The purpose of the study was to compare the social anxiety between cesarean and non-cesarean school children. For this purpose researcher has selected One hundred (100) students of 5 schools of Purulia District, West Bengal. Comparative research design was adopted for the present study where comparison was drawn from cesarean and non-cesarean school children. Simple Random Sampling Method was used for selecting the sample from total population. Total Population was considering as a total number of male school going students i.e. 100 (20 from each school, 10 cesarean and 10 non-cesarean). Social Anxiety level was measured with the help of Spence Children's Anxiety Scale. The comparison between cesarean and non-cesarean children in reference to social anxiety the 't' test was applied at 0.05 level of significance. Result shows that there is difference between means of Cesarean and Non-Cesarean school children's, because the mean of Cesarean school children's is 71.62 which is greater than Non-Cesarean school children's is 55.72, and their Mean Difference is 15.9 and Standard Error is found 1.623, to see this difference is significant or not researcher applied 't' test. After applying 't' test it was found to be significant as the calculated 't' value (9.793) which is greater than tabulated 't' value (1.984) at 0.05 level of significance, which indicates or shows that there is significant difference in Social Anxiety between Cesarean and Non-Cesarean school children's. Concluding the above study it revealed that there is difference between means of Cesarean and Non-Cesarean school children's, and the Cesarean school children's shows high level of social anxiety as compared to Non-Cesarean school children's this may be attributed that during operation the mother is very stress and tense due to the worry about her children that what will happen by this arising situation cesarean children may face the social anxiety as compared to non-cesarean children.

Keyword: Social Anxiety, Cesarean & Non-Cesarean School Children

Introduction

Humans have evolved to give birth in a social and cultural context and there is evidence those women who are supported emotionally during labor today experience lower rates of medical intervention in the birth process. On the other hand, of course, there are circumstances under which emotional support alone is not sufficient for delivery of a healthy infant and other forms of intervention are essential.

Now days, it has been most probably observed that women request cesarean section even when there is not a clear medical indication that it is necessary for a variety of reasons. In many of the delivery cases, a woman may acquiesce to cesarean section when a doctor suggests it, despite the fact that continuing to labor may have resulted in a healthy, vaginally delivered infant. The word 'acquiesce' addresses issues of power, self-sufficiency and consent, which may all be absent in a high-tech hospital setting. Besides, many women do not have the confidence to challenge or question their attendants. In fact, low confidence has

been shown to be one of the most grounded psychological predictors for elective cesarean section. Consider some of the expressions that are utilized to describe challenges or difficulties to the birth process: 'failure to progress', 'incompetent cervix', 'inefficient contractions', and 'uterine dysfunction'. If a woman who has been in labor for a long time and hears some of these expressions decides to acquiesce when surgery is suggested?

As we know the evolution of upright walking in our ancestors from an ape-like quadruped form involved a major restructuring of the muscles involved in locomotion and the bones associated with each muscle. These anatomical changes for locomotion also led to significant restructuring which lies within the pelvic girdle. The birth canal in different other apes is different it may be elongated (like the overall pelvis) in the anterior posterior plane and maintains this shape and orientation from the inlet to the outlet. It is also shallow throughout. Today virtually all women in societies need help during delivery from families and relatives. The most probable purpose behind

this reason is for emotional support at a time when the normally gregarious female feels vulnerable. In evolutionary terms, the main reason for seeking assistance or help is for emotional support.

The research scholar being a student of physical education has a great interest in games and sports. He has participated in different games and sports throughout all the physical education courses. During his participation throughout all the physical education courses he always thought that the child born through cesarean may be differ with non – cesarean with reference to the various health parameters.

The research scholar himself born through cesarean so based on his personal observation, interest and with further consults of teachers, experts and supervisor decided to undertake the study “A comparative study of Social Anxiety between cesarean and non-cesarean school children”

Methodology

The purpose of the study was to compare the social anxiety between cesarean and non-cesarean school children. For this purpose researcher has selected One hundred (100) students of 5 schools of Purulia District, West Bengal. Comparative research design was adopted for the present study where comparison was drawn from cesarean and non - cesarean school children. Simple Random Sampling Method was used for selecting the sample from total population. Total Population was considering as a total number of male school going students i.e. 100 (20 from each school, 10 cesarean and 10 non-cesarean).

Social Anxiety Test: Social Anxiety level was measured with the help of Spence Children's Anxiety Scale. The Spence Children's Anxiety Scale contains 44 statements or questions, in which 38 questions indicate specific anxiety syndrome whereas 6 questions are positive items and planned to prevent orientation toward anxiety problem. Among 38 questions, 6 are related to obsessive-compulsive disorder; six to separation anxiety; six to social phobia; 6 to generalized anxiety; 5 deals with fear of physical injuries; and the remaining questions reflect panic with agoraphobia. With the prior permission from the principal, class teacher,

and sports teacher it was distributed to the students and the same were collected back after having filled by the students. Scoring was done as per method describe in the manual.

Statistical Analysis

The comparison between cesarean and non-cesarean children in reference to social anxiety the ‘t’ test was applied at 0.05 level of significance.

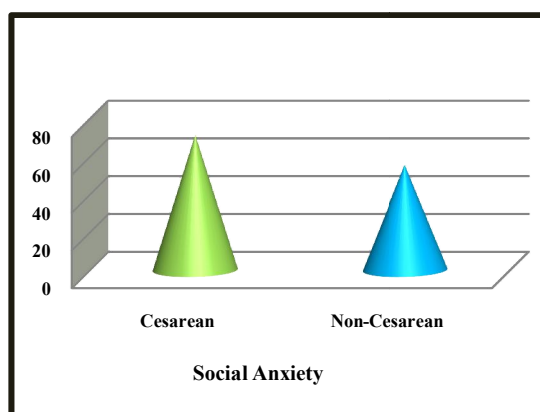
TABLE
Comparison of Social Anxiety between
Cesarean and Non-Cesarean School
Children

SOCIAL ANXIETY		
Children	Cesarean	Non-Cesarean
Mean	71.62	55.72
SD	5.681	9.975
MD	15.9	
SE	1.623	
DF	98	
OT	9.793*	
TT	1.984	

*Significant at 0.05

tabulated ‘t’ at $df_{(98)} = 1.984$

Table reveals that there is difference between means of Cesarean and Non-Cesarean school children's, because the mean of Cesarean school children's is 71.62 which is greater than Non-Cesarean school children's is 55.72, and their Mean Difference is 15.9 and Standard Error is found 1.623, to see this difference is significant or not researcher applied ‘t’ test. After applying ‘t’ test it was found to be significant as the calculated ‘t’ value (9.793) which is greater than tabulated ‘t’ value (1.984) at 0.05 level of significance, which indicates or shows that there is significant difference in Social Anxiety between Cesarean and Non-Cesarean school children's.

GRAPH**Graphical representation of Mean of Social Anxiety of Cesarean and Non-Cesarean School Children****Conclusion**

Concluding the above study it revealed that there is difference between means of Cesarean and Non-Cesarean school children's, because the mean of Cesarean school children's is 71.62 which is greater than Non-Cesarean school children's is 55.72. After applying 't' test it was found to be significant as the calculated 't' value is greater than tabulated 't' value, which indicates or shows that there is significant difference in Social Anxiety between Cesarean and Non-Cesarean school children's. The difference may be attributed that during operation the mother is very stress and tense due to the worry about her children that what will happen by this arising situation cesarean children may face the social anxiety as compared to non-cesarean children.

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