

## The holistic needs of women with hysterectomy: A grounded theory study<sup>☆</sup>



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### KEYWORDS

Holistic needs;  
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**Abstract** The objective of study is to qualitative assess for identify the holistic needs of childbearing age women with hysterectomy. This study use grounded theory qualitative study method. The participants in this study were six childbearing age women post hysterectomy, husbands, family members, and three healthcare workers. This study was conducted in West Sumatra Province with Minang culture which adheres to matrilineal kinship system. The results of this study there are seven elements that develop concept of holistic needs on women with hysterectomy. Consists of the need to deal with sexual problems and pain, to be cared by the family, to be more active, to improve relationships with God and self-acceptance, and community values to accept women with hysterectomy. The needs of women with hysterectomy were holistic needs. Nurses can do assessments to understand holistically the needs of women with hysterectomy.

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### Introduction

Cervical cancer is the second largest death caused by cancer in the world. In Britain, the mortality due to cervical cancer has decreased in the last two decades. However in development countries within 2012 there were 265,000 women

who died due to cervical cancer.<sup>1</sup> One of the cervical cancer treatments is hysterectomy.<sup>2</sup>

Hysterectomy is one of invasive procedure to cut uterine partially or totally.<sup>3</sup> The indications of hysterectomy are abnormal uterine bleeding that caused by cervix, uterine, ovary carcinoma pelvic prolapse; pre-malignancy laceration or because of tumor.<sup>4</sup>

The physical and psychological changes in women who underwent uterine surgery becomes problem in sexual relationship between spouses.<sup>5</sup> The women who underwent hysterectomy have reproduction's dysfunction that may lead stress and be pressed by her family and relatives.<sup>6</sup>

Today, the qualitative studies on hysterectomy are focus in quality of life in women that underwent hysterectomy, but the study that focus on holistic needs of childbearing

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**Table 1** The following are the characteristics of the participants.

No	Age (y.o)	Religion	Ethnic	Education	No of Children	Length of hysterectomy (years)
P1	47	Islam	Koto	Senior high school	Two	10
P2	45	Islam	Jambak	Senior high school	none	2
P3	37	Islam	Koto	Diploma	Two	1
P4	35	Islam	Chaniago	Diploma	one	1
P5	40	Islam	Guci	Diploma	Two	5
P6	39	Islam	Tanjung	Senior high school	Two	2

**Table 2** The following are the characteristics of the participants' husband.

No	Age (y.o)	Religion	Ethnic	Education	Period of marriage (years)
PS1	50	Islam	Jambak	Senior high school	27
PS2	48	Islam	Tanjung	Junior high school	15
PS3	38	Islam	Chaniago	Bachelor	9
PS4	37	Islam	Piliang	Bachelor	8
PS5	43	Islam	Koto	Bachelor	20
PS6	40	Islam	Jambak	Diploma	15

**Table 3** The characteristics of the healthcare workers.

No	Age (y.o)	Religion	Education	Length of work
TK 1	33	Islam	Diploma III of Midwifery	15 years
TK 2	30	Islam	Diploma IV of Midwifery	8 years
TK 3	51	Islam	Diploma IV of Midwifery	25 years

age women with hysterectomy is not conducted yet. That is why the study on holistic needs of women with hysterectomy hopefully can be a concept that can help nurses to understand the holistic needs: bio, psycho, socio, cultural, spiritual, of childbearing age women with hysterectomy.

## Methods

This study used a qualitative method with grounded theory approach. Six couples, which is the women post hysterectomy and three health workers participated in this study. This study has passed the ethical review Faculty of Nursing Universitas Indonesia number 182/UN2.F12.D/HKP.02.04/2018.

The criteria of the participants are childbearing age women with hysterectomy, with age range of 30–47 years old, have maximum two children, with husband and family, and healthcare workers who live in Padang, West Sumatra, Indonesia.

In depth interview and participant observation have been done for data collection. Interview was conducted to the participants, husbands, member of family, healthcare workers, with voice recorder after researcher have got permission from participants. Participants observation was done with a field note.

Data analysis was done by thematic content analysis. The content of analysis based on key words that developed into category. The mutual category was determined into one

theme of study. And then the constructed theme has been being re-analyzed and constructed into theoretical analysis. The result of this theoretical analysis becomes the concept of the holistic needs of childbearing age women with hysterectomy.

## Results

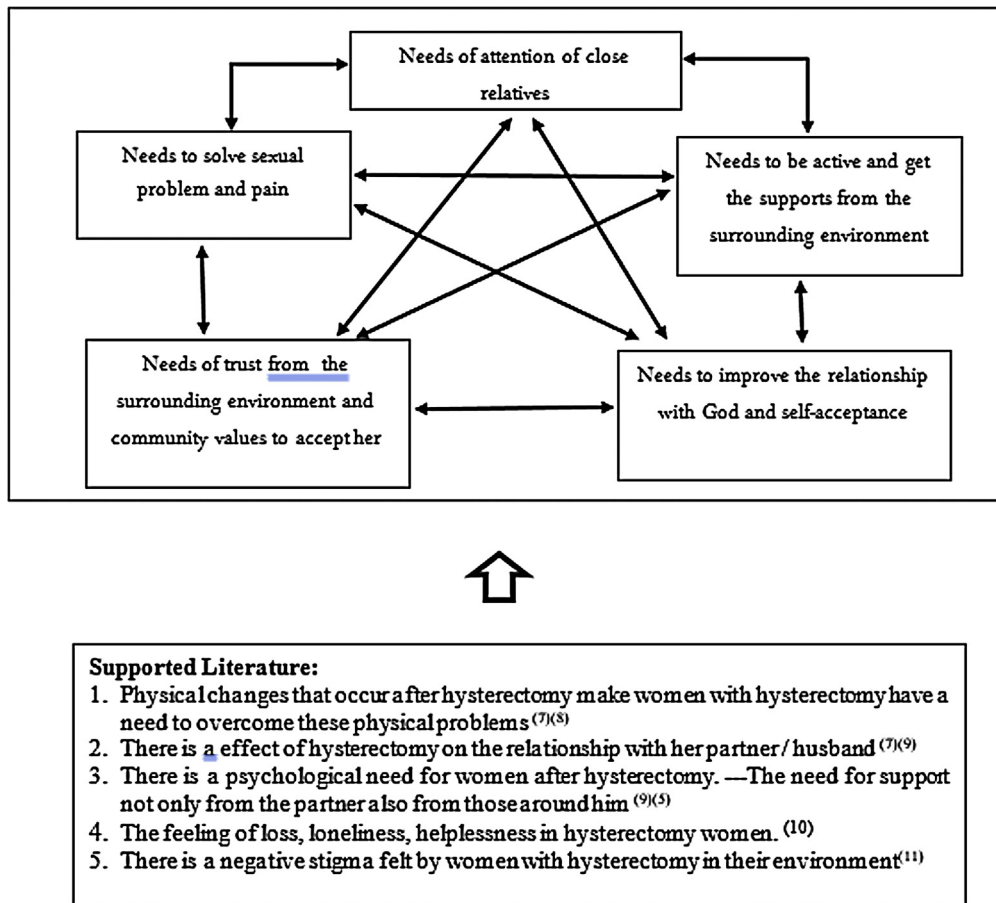
In this study there were six female participants of childbearing age post hysterectomy, six participant husbands and three health workers. Explanation of the characteristics of participants are described in [Tables 1–3](#).

The result of this study is the concept of holistic needs of childbearing age women with hysterectomy is shown in [Fig. 1](#):

That concept is build from the datas participants. Three of six participants revealed that hysterectomy can alleviate the main complain, such as severe abdominal pain and bleeding with blood clot that make them feel anxious about their health. Those complain affects their daily activity. The following are their statements.

*“Vaginal discharge more often, sometimes there is pain in the surgical wound, unable to work hard anymore, no more desire (desire to have sex with your husband), doctors just say there is no more menstruation but not say what to do.” (P1)*

*“There is pain in the surgical wound” (P2, P5)*



**Figure 1** The concept of bio, psycho, socio, spiritual, and cultural needs of childbearing age women with hysterectomy: a Grounded theory.

Other than physical needs, women with hysterectomy also have psychological needs such as needs for attention from the closest relatives and nuclear family because feeling powerless-ness. These supports can be acceptance from the family and those surround them after hysterectomy, and not being judged that they will not be able to give a baby anymore.

The participants revealed that they wanted their family, especially from their husband. They said that they often went to their parent's or family's house to seek supports from their closest relatives to talk or for discussion. These statements supported by the following:

*"I can only surrender, what can I do. there is a different feeling, it seems there is something missing because we can no longer have children, whereas we are women, only have two sons, but I can't help it, just surrender. I just want someone to notice me at the time"* (P1).

*"Early after my surgery is no longer a sense of want to live, there is no encouragement to live. So there are nieces saying 'auntie, just be patient, there are nieces and nephews of this aunt' that is the encouragement of my life, my nieces. Well, we are women, so we should have a uterus, but if we can't help it like this, we can't have children. I cry there is an entertaining niece. Let this be my way of life."* (P2)

Four out of six participants revealed that they were not working anymore after hysterectomy. That decision impacted their family's life but that decision made together with the husband. Two out of six participants revealed that they were still working, they said that by working they can make busy themselves and forgot the guilt and sad feeling. They also said that after hysterectomy, they limited their heavy activity. The following are their statements:

*"I quit my job, shouldn't work by the husband. Ordered to take care of first child, a healthy fast first, shouldn't work hard."* (P1)

In addition to physical, social, and psychological, women with hysterectomies have a spiritual need to accept their conditions. The results of this study revealed that after hysterectomy, they accepted the condition that they could not get pregnant again. They do more reflection, become more religious, joined a religious meeting which is near their home. They do this activity as a form of self-acceptance and to boost their confidence by not accusing their situation or themselves, the need for more attention from their families. The following their statements:

*"After the operation I had no desire to live, feeling useless. Niece and her sister often play to my home, to encourage me. I became more excited and felt that my*

*niece still needed me. respect yourself more because this is the best.” (P2)*

*“I feel grateful that I can still see these children growing up. So now pray more, pray more ‘sunnah’, I pray that I can still look after the children. It’s okay not to have more children, as long as I can see my children grow up.” (P3).*

Culturally, women of childbearing age with hysterectomy want to be respect and there is no negative stigma even though they do not have children, especially not having a daughter. Values and beliefs that make women with hysterectomy feel excluded and isolate themselves.

In Minangkabau culturally a woman is expected to have a first child with a female gender, this is considered better than having a son. Participants revealed that many parents regret the hysterectomy decision made, because most participants only had sons and did not have daughters. Participants also revealed that in the family girls are preferred, especially since the participants are also the first girls in the family so they are expected to have daughters as well. Following are some expressions from participants:

*“Sometimes there is guilt because you can’t have another child because you don’t have a uterus. Yes, there is a feeling, if you have a daughter, it is typical of Minang tradition, it is our legacy when you die. But if there are no daughters, only our name will remain.” (P2)*

## Discussion

The results of this study show that there is a holistic needs of childbearing age women with hysterectomy. The physical needs in women after hysterectomy obtained in this study are the need to overcome sexual problems and pain after hysterectomy surgery. Some complains in sexual problem are decreasing in arousal when having sex with a partner, pain during sexual intercourse, and lack of desire to have sexual relationship with a partner so assume that sex only satisfies a partner only. It also affects the psychological and spiritual and cultural needs of women of childbearing age with hysterectomy.

Women experience signs of early menopause, only experience vaginal discharge, easily tired, cannot work too long. In addition, the pain after surgery is also felt by women of childbearing age. Impact of hysterectomy on women is changing in the menstrual cycle.<sup>7</sup> Changing that occur not only physical but also hormonal in women with hysterectomy so there is a need to overcome these physical problems.<sup>8</sup>

Decreasing in arousal during sex intercourse and feels the vagina dry that happen to those women. Self-image change in women with hysterectomy, who feel that their bodies are not good, which causes unwillingness to have sex.<sup>9</sup> Changes that occur will affect the physical needs of women and must be understood by their partners.<sup>10,11</sup>

This study found also that participants feel of powerless as women because they cannot have more children and feel sad. The uterus is a symbol of fertility, sexuality, especially for women who are still of childbearing age and want to have children.<sup>12</sup> Factor that can influence psychosexual adaptation after hysterectomy is the meaning of the

uterus for women not only as an organ but also a symbol of beauty, youth, strength and source of health. In the absence of uterus psychosocial problems in women with hysterectomy, weakness, depression, fear of losing sexual identity.<sup>13</sup> Women with hysterectomy feel hopelessness and an impact on life and relationships.<sup>14</sup>

Changing in relationships with partners feel more emotional and sensitive felt by women of childbearing age with hysterectomy. So that there is a need to be paid attention of the closest people, especially by husbands because participants feel bad, want to express feeling but do not know with whom. The support and patience of a husband is very important.<sup>15</sup>

This study found that women with hysterectomy tend to withdraw from their environment. Some participants do not want their extended family to know that they have had a hysterectomy and can no longer have children. Whereas other study revealed that women with hysterectomy in America after post-operation socialized with other women normally and all were supportive regardless of their condition.<sup>16</sup>

The results of this study found, women with hysterectomy have a need to improve relations with God so they can accept their current conditions, behave more self-reflection, worship God Almighty, follow the recitation or assembly Moslem group near the house. There is rarely a study of the spiritual in hysterectomy patients.<sup>17</sup>

Another results of this study is in the need of trusting from the environment and community values to accept themselves. This is due to the feeling of being discarded by the community because of the tribal values and beliefs that exist in the community and causing women with hysterectomy to be isolated by themselves from the community because they do not want others to know that they cannot have more children.<sup>6,18</sup>

The stigma makes women with hysterectomy cover themselves from others, except for extended family. Research in African-American women with hysterectomy do not inform their condition and decisions taken to their spouses or families, only to a very trusted people.<sup>19</sup>

In the community value say that the uterus is a symbol of femininity and also as the identity of women.<sup>12</sup> Women are seen as “women” if they have children. It can also affect the social relations.<sup>18</sup>

In the Community Minangkabau having a daughter is a special thing because women are considered as the successors of the family and have an important role in the family especially in continuing family structure. Women in the Minangkabau community have an high position, this is one of the characteristics of Minangkabau culture.<sup>20</sup> In the Minang customary culture adheres to the matrilineal kinship system, which is the maternal line.

So in the Minangkabau tradition a woman is expected to have a first child with a female gender, this is considered better than having a son. The results of this study found that many parents regretted the hysterectomy decision made, because most participants only had sons and did not have daughters. Most families in Minangkabau assume that the daughter is more important, especially since the participant is also the first daughter in the family so she is expected to have a daughter too.<sup>20</sup>

## Conclusion

The needs of childbearing age women with hysterectomy can be seen in their perceptions, including participants and their family feeling about hysterectomy, physical dysfunction, powerlessness. Participants need to be cared more intensively by their family, have needs to be active as usual and get support from the surrounding environment. Besides that, women with hysterectomy are need more closely make their relation to God and also improve their self-acceptance. In cultural, childbearing age women have values and believe that affect women with hysterectomy will isolate themselves and felt being rejected.

## Conflict of interest

The authors declare no conflict of interest.

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