

ORIGINAL ARTICLE

Acceptance of Cosmetic Surgery: Client Perspectives

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Abstract

Background: In the past decade, there has been an increase in the number of cosmetic procedures performed globally. About one-third of individuals who undergo cosmetic procedures are under the age of 35 years. Several factors can influence acceptance of cosmetic surgery including media, religion, and individual factors among others.

Objective: The objective of this current study is to investigate the motivations behind individuals choosing to undergo cosmetic surgery.

Material and methods: This study was a cross-sectional single-center, conducted to assess the attitudes and acceptance of cosmetic surgery among attendees at Cosmetic and beauty centres in the city of Mosul, Iraq between September -November of 2022. All patients at the plastic surgery clinics were given a questionnaire that they were instructed to fill out in their own time. The likelihood of having cosmetic surgery scale, the Rosenberg self-esteem scale, the life happiness scale, and the physical attractiveness scale were used to measure the correlation between these variables and other factors. With a p-value of less than 0.05, the results might be considered reliable. Pearson's correlation coefficient was used for the investigation of correlations (r).

Results: The mean age was 31.47 years, the standard deviation was 2.8, the range of ages was 15-52 years, and the median age was 29.89 years. There was an insignificant weak positive connection between participants' self-esteem and their acceptance of cosmetic surgery ($r=0.052$)

Conclusion: Lower levels of self-esteem and life satisfaction, greater exposure to cosmetic surgery in the media (especially television), increased time spent in front of the TV, and religious affiliation were all found to be significant predictors of future use of cosmetic surgery in the current study.

Keywords: attitudes, satisfaction, body- image, self-esteem.

1. INTRODUCTION

Cosmetic surgery has witnessed a significant increase in popularity over the years, driven by factors such as improved accessibility, technical advancements, and changing societal norms (1, 2). This surge in interest has prompted researchers to delve into the motivations behind individuals opting for such procedures (3). Various internal and external factors have been identified, including the influence of media, evolutionary inclinations, and individual characteristics (4). Recent studies have underscored the importance of self-perception and quality of life as crucial factors affecting the success of cosmetic procedures. Body dissatisfaction has emerged as a critical predictor of the desire for cosmetic surgery, particularly among young individuals influenced by media portrayals and societal beauty standards. Religious beliefs have been relatively underexplored in cosmetic surgery decisions. Religiosity can influence opinions on moral issues (5-8). Additionally, reality television shows have shaped perceptions and expectations around cosmetic surgery (9). While religiosity's impact on cosmetic surgery decisions remains relatively unexplored, it is suggested that traditional religious beliefs may lead some individuals to be less receptive to such procedures due to concerns about vanity (10). The present study examines the reasons that drive people to perform cosmetic surgery.

METHODS

2.1 The design of the study

A cross-sectional study (single center) was conducted in Mosul, Iraq. Data were collected from the city's main cosmetic outlets. The sample selection method was simple random sampling. 320 questionnaires were distributed to Clinic patients who wished to undergo cosmetic surgery.

2.2 study tools

a. Likelihood of having cosmetic surgery scale

Participants were instructed to assume they had won a limitless amount for cosmetic surgery. On the idea that the award was for a highly respected therapy administered by skilled professionals, participants were asked how likely they were to have operations from a predetermined list performed. The probability was recorded on a scale of 0 (no change under any circumstances) to 7 (perform the procedure). The list included 49 of the most common cosmetic treatments, compiled from lists provided by reputable cosmetic surgery centers—both the current research and Brown et al.

b. Rosenberg self-esteem scale

A 10-item RSE scale was used to assess self-esteem. Scoring is accomplished using combination ratings. Responses for low self-esteem are "disagree" or "strongly disagree" on questions 1, 3, 4, 7, and 10, and "strongly agree" or "agree" on items 2, 5, 6, 8, and 9. Two or three correct answers to items 3, 7, and 9 are scored as one item. One or two correct answers out of two for items 4 and 5 are scored as a single item; items 1, 8, and 10 are scored as separate things; and combined correct answers (one or two out of two) to items 2 and 6 are scored as a single item.

c. Life satisfaction scale

The five-point scale is meant to capture an individual's overall subjective evaluation of their quality of life. On a scale from 7 (strongly agree) to 1 (strongly disagree), participants rate their level of agreement with each of the five statements.

d. physical Attractiveness Scale

Physical Attractiveness Scale Estimation (EPA; Swami et al., 2007). The EPA displays a normal distribution of beauty ratings and titles concerning each score ($M = 100$, $SD =$

15). Thus, the number 55 was assigned. Very ugly, 70 unattractive, 85 unattractive, 100 ordinary, 115 appealing, 130 attractive, 145 attractive.

2.3 statistical analysis

In the present study, SPSS software (IBM Corporation, Chicago, IL, USA), version 26, was used for the analyses. The Kolmogorov-Smirnov test was used to determine whether the distribution of all continuous variables was normal. The regularly distributed variables were summarized using means and standard deviations (SD). All categorical variables were summed using count and percentage. “Pearson Linear Correlation Coefficient, Spearman Correlation Coefficient, Regression analysis, Coefficient of Determination- Kruskal-Wallis tests were applied to analyze the collected data. To ascertain whether the effect was significant,

P 0.05 was utilized”.

2. RESULTS

320 people who requested cosmetic surgery at three centers in Mosul, Iraq (65% women, n = 208; 35% men, n = 112) participated in this study. The mean age was 31.47, the standard deviation was 2.8, the range of ages was 15-52, and the median age was 29.89. Most people's openness to cosmetic surgery occurs between 18 and 20. Regarding education, 860 (or 85.3%) respondents had at least a bachelor's degree. Out of the whole population, 339 (33.6%) were unemployed, 383 (38.3%) had jobs outside of the healthcare industry, and 286 (28.4%) worked in the healthcare sector. There was an insignificant, weak positive connection between participants' self-esteem and their acceptance of cosmetic surgery ($r=0.052$)

TABLE 1 Demographic characteristics of the study sample (n=320)

Variable		No.	%
Gender	Male	112	35.00
	Female	208	65.00
Age	<30	118	36.88
	30-44	174	54.38
	>45	28	8.75
Marital status	Single	87	27.19
	Married	233	72.81
Education level	<Bachelor	175	54.69
	Bachelor	69	21.56
	Master	51	15.94
	PhD	25	7.81

TABLE 2 Sex differences and factor analytic results for the likelihood questionnaire

#	Scale	Male (n=112)	Female (n=208)	F level	Loading	
					F1	F2
1	If you are unhappy with your appearance, plastic surgery is a good idea.	4.57	3.70	12.57***		0.83
2	"Cosmetic surgery is useful because it makes people feel good about themselves."	4.81	3.82	15.49***		0.84
3	Plastic surgery may be an option for me in the future.	3.06	2.98	0.31	0.69	
4	People who are unhappy with their physical appearance may consider plastic surgery.	4.63	3.55	20.99***		0.84
5	Having plastic surgery improves a person's self-confidence.	4.70	3.72	17.74***		0.82
6	If free plastic surgery was available, I might try it.	3.50	2.80	5.09*	0.72	
7	If I know plastic surgery is safe, I might try it.	3.43	3.03	1.63	0.79	
8	Sometimes I have the idea of having plastic surgery.	3.02	3.12	0.10	0.73	
9	I'd give plastic surgery a shot if famous people thought it was a good idea, though.	2.55	2.21	1.89	0.76	
10	My attitude to cosmetic procedures is unequivocal.	3.68	4.25	3.04		0.63
11	Plastic surgery is one of the good ideas in preserving my youth.	2.81	2.70	0.17	0.73	
12	Plastic surgery is one of the good ideas in preserving my professional status.	3.01	2.49	4.07	0.74	
13	If I recommend plastic surgery to someone, I would highly consider it.	2.72	2.06	7.70**	0.78	
14	Plastic surgery may increase a person's pride in themselves if they have done well.	3.03	4.40	7.32**		0.58
15	If I thought a little plastic surgery might make me more attractive to other people, I could consider having it.	3.13	2.73	2.28	0.80	

Table 3. Correlations between the significant variables

	Factor 1	Factor 2	Attractiveness	Media	Self-esteem	Life satisfaction	Age	Gender	Religiosity
Factor one									
Factor two	0.71***								
Attractiveness	-0.36***	-0.17***							
Media consumption	0.33***	0.32***	-0.17						
Self-esteem	-0.42***	-0.25***	0.46	-0.26					
Life satisfaction	-0.44***	-0.44***	0.41	-0.17	0.52				
Age	0.00	-0.01	-0.36	0.10	-0.03	-0.9			
Sex	-0.11	-0.26	-0.08	0.00	-0.04	0.22	0.11		
Religiosity	-0.43***	-0.56***	0.00	-0.07	0.07	0.24	0.24	0.19	
Experience of CS	0.01	0.02	0.04	0.31	0.01	0.08	0.16	-0.03	0.08

Correlation $r > 0.20$; *** $P < 0.001$. CS Cosmetic surgery

Table 4. Regression analyses for the significant study variables

	Factor 1		Factor 2	
	Beta	t	Beta	t
Sex	0.05	0.66	−0.14	3.33**
Age	−0.02	0.17	−0.06	1.14
Religiosity	−0.18	2.45**	−0.47	7.47***
Self-esteem	−0.22	2.91**	0.04	0.55
Life satisfaction	−0.08	0.92	−0.34	3.14***
Attractiveness	−0.18	2.33*	−0.07	1.21
F(7, 196) = 7.54***		F(9, 724) = 19.98***		
“Adjusted R2= 0.17”		“Adjusted R2= 0.44”		

* $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$ ”

3. DISCUSSION

The results of the current study showed that low rates of self-esteem and life satisfaction, greater media exposure to plastic

surgery through television programs, time spent watching television, and religiosity are predictors of the possibility of undergoing plastic surgery. Although the associations

between the different measures and scores for the two factors were similar, the regressions showed that the different measures predicted the different factors. The second factor (related to the benefits of plastic surgery) was strongly predicted by the two unique characteristics of the current study, namely religious beliefs and media consumption. Both correlations and regressions indicated that although women were likelier to say they would have surgery, the gender difference in perceived benefits (factor 2) was stronger. The finding that women were not significantly more likely to undergo cosmetic surgery than men is not consistent with almost all previous studies^(10, 11). It would have been expected that increased social and cultural pressure on women to conform to societal ideals of attractiveness (as evidenced by the prevalence of body image and eating disorders among women) would normalize their pursuit of plastic surgery. Studies have also shown real-life biases in favor of attractive women and discrimination against less attractive women in many different areas of society^(12, 13). Given these findings, the results of the present study are surprising. Mindful of the increasing number of men undergoing cosmetic surgery in recent years, plastic surgeons may not target women in their advertisements. Thus, the contemporary view of plastic surgery, as reported by the media, may explain the unusual findings of the current study. Corroborating the findings of Brown et al⁽¹¹⁾, subjective assessments of physical attractiveness were found to significantly affect the likelihood of undergoing plastic surgery. The current study showed that self-esteem was negatively associated with the likelihood of undergoing plastic surgery. People with low self-esteem may be more willing to make cosmetic adjustments to improve their self-

perceptions, thus increasing their self-esteem, although whether this will happen is unclear. People with low self-esteem and low life satisfaction may suffer from depression, which means that cognitive therapy, as opposed to plastic surgery, would be more beneficial. Most plastic surgeons are well aware of patients whose hope for the effects of surgery is unrealistic and could eventually lead to litigation and further depression. The current study addressed media exposure/consumption and attitudes toward plastic surgery. The significant effect of media exposure is not consistent with the study by Brown et al. (11), but it is consistent with the findings of other studies (10, 14). The current study showed that media exposure was not associated with the first factor (likelihood) but with the second factor (benefits) in the regressions. Those who consumed more media believed that plastic surgery brought more benefits.

The current study also focused on religious beliefs and attitudes toward plastic surgery. More religious people are likely to see cosmetic alteration as a direct violation of their religious beliefs. Christian religious authorities strongly endorse the view that people should be less concerned with physical appearance (Philippians 2:3-4) and more with religious matters (Proverbs 31:30). True beauty lies in the spirit of the individual. (1 Peter 3:4) (15). Religiousness strongly determines a person's attitude toward many controversial issues (16-18) and, perhaps not surprisingly, determines attitudes toward plastic surgery. Further research may explore whether this effect is present across all religions because this study examined religiousness rather than a specific religion per se. The role of religious beliefs and values in shaping attitudes toward plastic surgery deserves more research attention.

4. STUDY LIMITATION

1. Self-report Bias: The data collection relied on self-report measures through a questionnaire, which introduces the potential for self-report bias. Participants may not provide entirely accurate or honest responses.

2. Limited Research: Research around cosmetic treatment acceptance and self-esteem is limited, making it challenging to compare findings or draw robust conclusions due to the lack of existing studies.

3. Brief Survey Measures: The study intentionally used shorter scales to maintain a high participation rate and reduce survey abandonment. While this strategy encouraged participation, it might have sacrificed some depth and detail in the results.

4. Confounding Factors: Several

confounding factors could influence the decision to undergo cosmetic surgery, potentially affecting the interpretation of single-factor correlation statistical analyses.

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الموافقة على جراحة التجميل: آراء العملاء

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الملخص

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الخلفية والأهداف: في العقد الأخير، شهدنا زيادة في عدد العمليات التجميلية التي تجرى عالمياً. حوالي ثلث الأشخاص الذين يخضعون لعمليات تجميلية هم دون سن الـ 35 عاماً. هناك عدة عوامل يمكن أن تؤثر على قبول جراحة التجميل بما في ذلك وسائل الإعلام والدين وعوامل فردية أخرى. وتهدف الدراسة الحالية هو التحقيق في دوافع الأفراد الذين يختارون الخضوع لجراحة التجميل.

منهجية الدراسة: كانت هذه الدراسة عبارة عن دراسة مقطعية أحادية المركز، أجريت لتقييم المواقف والموافقة على جراحة التجميل بين الحاضرين في مراكز التجميل في مدينة الموصل، العراق بين سبتمبر ونوفمبر من عام 2022. تم تزويد جميع المرضى في عيادات جراحة التجميل ب استبيان تم تعليمهم بملءه في وقتهم الخاص. تم استخدام مقياس احتمالية إجراء جراحة التجميل، ومقياس تقدير الذات روزنبرج، ومقياس سعادة الحياة، ومقياس الجاذبية الجسدية لقياس الارتباط بين هذه المتغيرات وعوامل أخرى. باستخدام قيمة P أقل من 0.05، يمكن اعتبار النتائج موثوقة. تم استخدام معامل ارتباط بيرسون للتحقيق في العلاقات. (r)

النتائج: كانت العمر الوسطي 31.47 عاماً، وكان الانحراف المعياري 2.8، ونطاق الأعمار كان بين 15 و 52 عاماً، وكان العمر الوسطي 29.89 عاماً. وجدت علاقة إيجابية ضعيفة غير معنوية بين تقدير الذات لدى المشاركين وقبولهم لجراحة التجميل. (r=0.052)

الاستنتاجات: تم العثور في الدراسة الحالية على أن مستويات تقدير الذات والرضا عن الحياة أقل، وتعرض أكبر لجراحة التجميل في وسائل الإعلام (خاصة التلفزيون)، وقضاء وقت أطول أمام التلفزيون، والانتماء الديني هي كلها عوامل متنبئة بشكل ملحوظ باللجوء المستقبلي إلى جراحة التجميل.

الكلمات الدالة: المواقف، الرضا، صورة الجسم، تقدير الذات.

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