

Body Image Satisfaction and Quality of Life among Aesthetic Surgery Clients

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ABSTRACT

Background: A negative body image contributes to poor quality of life, which can lead to more susceptible to many disturbances in physical, psychological and social. The aimed to investigate the relationship body image satisfaction and its relationship to quality of life among aesthetic surgery in Babylon Province/ Iraq.

Methods: The correlational study design approach is done by interrogating members of the study population is conducted in Babylon Prpvince. To conduct the study, a non-probability (purposive) sample of (150) clientele who attend beauty facilities in Babylon Province was chosen. The contentment with one's body image is addressed in the used questionnaire. The questionnaire's dependability was established through a pilot research, and it was subsequently presented to experts for validation. The information was gathered through interview techniques and analyzed using descriptive and inferential statistical data analysis.

Results: Out of 150 participants aged 20-25 years at mean age is 26 (± 4.98), the female clients predominated (82.7%), urban residents (86.0%), the single clients were composed the highest percentage (60.7%), the students clients were constituted the majority (92.0%), clients hasn't had any previous plastic surgery (72.7%), clients wants to have a rhinoplasty (50.7%) to improve their appearance (89.3). There were significant correlation (positive) between body image and quality of life ($r=0.168$; $p=0.040$), and simple liner regression confirmed that the body image had been affected quality of life.

Conclusions: A negative body image contributes to poor quality of life, which can lead to more susceptible to many disturbances in physical, psychological and social. Body image dissatisfaction is associated with marked impairment in aspects of quality of life relating to mental health and psycho-social functioning and at least some aspects of physical health. It is need to be counseling program to attain a realistic, positive perception of their body image and to overcome the negative views about their body image in order to enhance their self-esteem and different dimensions of their quality of life.

Keywords: Body Image, Quality of Life, Aesthetic Surgery, Clients

INTRODUCTION

Many years ago, body image research was primarily focused on female culture; however, more current research and discoveries demonstrate that body image has an impact on both men and women. The findings revealed that men and women have different types of unhappiness and body image dissatisfaction. Some studies have revealed no differences in body image between men and women, while others have indicated that men have a more accurate body image than women, with the exception that most women who are unhappy with their bodies wish to lose weight [1]. Individuals with low self-esteem lack self-confidence and may engage in aggressive conduct in a variety of ways, which may be linked to self-affirmation activities. These effects have a negative impact on the individual's social life and self-esteem, because self-esteem is a behavioral phenomenon that is supposed to be developable, so it can be addressed and treated in a practical way, and it follows that any of the aspects or adjectives can be addressed and treated in a practical way [2]. The concept of body image satisfaction is linked to a person's success in personal and social adjustment, personality development, and crystallizing his own worldview [3]. Male and female secondary school students with body image issues are also reported to be more uncomfortable and anxious in social circumstances. Alexithymia and body image are among the most essential and influential aspects of people's life because of their key role in constructive communication and connection with others. Dissatisfaction with one's body can lead to a slew of problems and psychological issues, all of which can skew one's perception of oneself [4]. This issue emerges when a person's bodily shape does not conform to what the community considers to be ideal. This leads us to emphasize that in many situations, a distorted view of the body image is the cause of a poor self-concept [5]. The importance of loss must be determined or quantified from the perspective of the customers, as they are the most conscious of the value of loss, and life satisfaction is the most important aspect in an individual's awareness of the quality of his life [6]. As a result, the quality of life became the study's focus, as it is a need and need shared by all humans, particularly patients. As a result, the current study's focus

is on aesthetic surgery patients' satisfaction with their body image and how it relates to their quality of life. A favorable body image is linked to mental wellness. A person matures and lives a normal life when he has a healthy body image and "positive" self-esteem [7]. Body image has an impact on a variety of psychological factors, including quality of life. Individual experiences and beliefs, as well as body image perception, all influence quality of life. The WHO defines quality of life as an individual's view of their situation in life in relation to their objectives, aspirations, standards, and concerns in the context of the culture and value systems in which they live. It is a broad notion influenced by a person's physical health, psychological condition, personal views, social interactions, and relationship to conspicuous characteristics of their surroundings in a complex way [8]. Therefore, thus aimed to investigate the relationship body image satisfaction and its relationship to quality of life among aesthetic surgery in Babylon Province/ Iraq

METHODOLOGY

The correlational study design approach is done by interrogating members of the study population, with the aim of describing the studied phenomenon in terms of its nature and degree of existence only.

The questionnaire items was adopted by the researcher the questionnaire based on extensive review of related previous studies and consists of three parts; sociodemographic sheet, body image satisfaction and quality of life.

Part I: This section composed of socio-demographic information which include: clients age, gender, occupation, number of previous plastic surgeries, type of plastic surgery and motivation to plastic surgery.

Part II: Deals with measures physical appearance and body image satisfaction (Appearance Evaluation subscale MBSRQ-AE), was designed and adopted by Herbozo (2004) [9].

Part III: World Health Organization Quality of Life (WHOQOL)-BREF developed by Whoqol Group (1995), which measures about quality of life, health, or other areas of life and composed of 26 items measured on 5-Liker's Scale [10].

Validity was determined by a panel of 11 arbitrators who were asked to comment on each component of the study questionnaire in terms of language appropriateness, correlation with the dimension of study variables to which it was assigned, and suitability for the study population. Data was obtained from nurses to assess the questionnaire's reliability, and the test was delivered to 10 people from the study population who were not part of the initial sample. The Cronbach's alpha was found to be 0.82 for body image scale and 0.78 for QoL scale.

After obtaining the approval of the Babylon Health Directorate and verifying the validity and reliability of the questionnaire. The researcher interviewed himself (face to face) to the participants, explained the instructions, answered their questions regarding the form, urged them to participate and thanked them for the cooperation. The interview techniques was used on individual bases, and each interview took (15-20) minutes after taking the important steps that must be included in the study design.

The SPSS ver-20.0 software application was used to conduct statistical analysis. The information was evenly distributed. Correlation coefficients between body image satisfaction and quality of life. For continuous variables, descriptive data is reported as mean standard deviation, and for categorical variables, it is shown as number (percent). Statistical significance was defined as a p 0.05

RESULTS

Table 4-1 shows the participants' ages; the average age is 26, with the age group 20-25 years old having the highest number of records (n=58; 38.7%). In terms of gender, female clients (n=124; 82.7 percent) outnumbered male clients (n=26; 17.3 percent). The bulk of study participants (n=129; 86.0 percent) were urban dwellers, compared to those who were rural residents (n=21; 14.0 percent). In terms of marital status, the findings show that single clients account for the biggest percentage (n=91; 60.7 percent) when compared to married and divorced individuals. In terms of occupation, the findings show that students clients made up the majority (n=138; 92.0 percent) as compared to working and unemployed clients. In terms of past plastic surgeries, the majority of clients (n=109; 72.7 percent) had never had any, compared to those who have had cosmetic rhinoplasty, dentistry, stomach tuck, and buttocks lift. The majority of the clients in this survey (n=76; 50.7 percent) seek a rhinoplasty to improve their appearance (n=134; 89.3%).

Table 1: Socio-Demographic Characteristics

Variables	Classification	Freq.	%
Age /years (M ± SD=26.57±4.982)	<20years old	9	6.0
	20-25years old	58	38.7
	26-30years old	56	37.3
	31-35years old	17	11.3
	36-40years old	9	6.0
	>40years old	1	.7
Gender	Male	26	17.3
	Female	124	82.7
Residents	Urban	129	86.0
	Rural	21	14.0
Marital status	Single	91	60.7
	Married	56	37.3
	Divorced	3	2.0
Occupation	Students	138	92.0
	Employment	6	4.0
	Unemployed	6	4.0
Types previous plastic surgeries	No	109	72.7
	Rhinoplasty	7	4.7
	Cosmetic dentistry	17	11.3
	Tummy tuck	6	4.0
	Botox and filler	11	7.3
Type of current plastic surgery	Rhinoplasty	76	50.7
	Cosmetic dentistry	14	9.3
	Tummy tuck	13	8.7
	Botox and filler	18	12.0

Motivation for plastic surgery	Tighten the buttocks	22	14.7
	Chin surgery	7	4.7
	Appearance improvement	134	89.3
	Therapeutic and cosmetic	16	10.7

The analysis of body image satisfaction was demonstrate that aesthetic surgery clients experienced with average of 62.14 ± 19.791; the aesthetic surgery clients experienced unsatisfied towards body image (n=78; 52%).

Table 2: Body Image Satisfaction Levels

Weighted	Freq.	%	M ± SD
Unsatisfied (M=28-65)	78	52.0	62.14 ± 19.791
Satisfied to certain limit (M=66-103)	68	45.3	
Satisfied (M=104-140)	4	2.7	
Total	150	100.0	

"M: Mean of total Scores, SD: Standard Deviation for total scores"

The quality of life analysis was demonstrate that aesthetic surgery clients experienced with average of 61.22 ± 29.165; the aesthetic surgery clients experienced moderate quality of life (n=85; 56.7%).

Table 3: Quality of Life

Weighted	Freq.	%	M ± SD
Poor (M=26-60)	58	38.7	61.22 ± 29.165
Moderate (M=61-95)	85	56.7	
Good (M=96-130)	7	4.7	
Total	150	100.0	

"M: Mean of total Scores, SD: Standard Deviation for total scores"

Table 4: Correlation Between Body Image Satisfaction and Quality of Life among Aesthetic Surgery Clients (n=150)

QoL			
Body Image	Spearman's rho	0.168	Sig.
	Sig. (2-tailed)	0.000	
	N	150	

Findings exhibit there were highly significant correlation (positive) between level of body image satisfaction and quality of life (r=0.168; p=0.040).

Table 5: Simple Liner Regression between Body Image Satisfaction and QoL for Aesthetic Surgery Clients (n=150)

Body Image Vs. QoL	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
	1.933	.302	.120	6.410	.000

Findings confirmed that simple linear regression test indicates that significant effect of body image on quality of life among aesthetic surgery clients (p=0.000).

DISCUSSION

One of the objectives of the current study deals with level of body image satisfaction and was demonstrate that aesthetic surgery clients experienced with average of 62.14 ± 19.791; according to the study criteria, the aesthetic surgery clients experienced unsatisfied towards body image. This findings come in line with a cross-sectional, demonstrated in their findings that the most of the 532 participants were dissatisfied with their body image (92.5%) [11]. The aesthetic patients reported higher indexes of body image disturbance [12]. In Western civilization, dissatisfaction with one's physical appearance and body image is a widespread psychological phenomenon [13]. Individuals with excess body weight are more likely to report body image dissatisfaction, but those with normal body weight are also affected [14]. This body image dissatisfaction has an impact on self-esteem and quality of life for both groups of people [15]. It is also thought to be the driving force behind a variety of appearance-enhancing habits, such as weight loss and physical activity [16]. The importance of body image as a psychological component. Body image dissatisfaction has been shown in previous studies to play a role in the choice to seek out the vast variety of body sculpting operations

offered by aesthetic specialists. Individuals who pursue these operations frequently report an increase in body image dissatisfaction, a focus on the characteristic they want to change with therapy, and an improvement in body image after treatment. Excessive body dissatisfaction, on the other hand, is a symptom of a number of recognized psychiatric disorders. Furthermore, the majority of participants were dissatisfied with their physical appearance. Physical appearance is a key underlying component of self-esteem to some extent. Cosmetic surgery enhances a person's physical appearance and creates a good self-image [17]. In plastic surgery, quality of life (QoL) is an important consequence. However, different scales are used by different authors to discuss this topic, making it impossible to compare the results. One of the goals of this research is to evaluate the quality of life of people who go to beauty salons to improve their appearance. The results of the current study revealed that aesthetic surgery patients had a low quality of life, with an average of (M SD=61.22 29.165). This research aligns with the findings of Dreher et al. (2016), who found that the random effect of all aesthetic operations demonstrates that QoL improves following surgery. In the social and physical functioning domains, reduction mammoplasty has improved QoL more than other operations [18]. After plastic surgery, 228 patients who previously had a low quality of life now have a good quality of life. Aesthetic surgery improves physical, psychological, and social health quality of life [19]. Another research of 105 people who underwent elective cosmetic surgery also found that their quality of life improved significantly within six months of surgery. They noticed improvements in their social lives, recreational activities, and friendships. They also saw a reduction in depression [20]. Other research have discovered that patients' health and well-being improves overall. Patients also report less anxiety and a higher sense of self-sufficiency [21]. Patients who undergo aesthetic surgery face a variety of physical, psychological, and social issues. Surgery has been demonstrated to be effective in treating these issues [22]. Based on past research, it has been determined that the individual has a low quality of life in terms of overall body image, which causes him to undertake a cosmetic procedure in order to transform and improve his appearance. To put it another way, the clients had a bad quality of life prior to the cosmetic surgery, and in order to enhance their quality of life, they underwent plastic surgery, not as a treatment, but to improve their quality of life.

There is a widely known theory that states "There is effect of body image satisfaction on quality of life among aesthetic surgery clients". The results show a highly significant (positive) relationship between body image satisfaction and quality of life ($r=0.168$; $p=0.040$). And a simple linear regression test confirms that body image has a significant impact on quality of life among aesthetic surgery patients ($p=0.000$). This research agrees with Lobera and Ros (2011), who found that dissatisfaction with body images causes psychological and social issues [23]. Body images, in other words, have a psychological and social impact on one's quality of life. There is compelling evidence that there is a link between body image perception and quality of life [24]. There is a link between body image and quality of life [25]. The more one's contentment with one's appearance, the higher one's quality of life. Rhinoplasty, on the other hand, improves one's quality of life and self-esteem [26]. Aesthetic surgery patients' quality of life was heavily influenced by their body image [27]. Independent of their relationship with body weight and eating disorder symptoms, body image dissatisfaction is linked to considerable impairments in areas of quality of life related to mental health and psychosocial functioning, as well as at least some aspects of physical health [28] [29]. Body image dissatisfaction as a public health issue may need to be given more attention. The fact that body image dissatisfaction is "normative" does not imply that it is harmless

CONCLUSION

A negative body image contributes to poor quality of life, which can lead to more susceptible to many disturbances in physical,

psychological and social. Body image dissatisfaction is associated with marked impairment in aspects of quality of life relating to mental health and psycho-social functioning and at least some aspects of physical health, independent of its association with body weight and eating disorder symptoms. Greater attention may need to be given to body image dissatisfaction as a public health problem. The fact that body image dissatisfaction is "normative" should not be taken to infer that it is benign

Study Suggested:

1. It is need to be counseling program to attain a realistic, positive perception of their body image and to overcome the negative views about their body image in order to enhance their self-esteem and different dimensions of their quality of life.
2. The work of collective counseling programs by the workers in the beauty centers, through which they provide the clients with psychological support and help them in adapting and accepting the image of their bodies as a result of the physical damage caused by the plastic surgery.
3. Aesthetic surgery improves the quality of life, it is need to conducted studies to investigate the impact and complications of aesthetic surgeries.

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