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Perspective on Aesthetics
Estetiğe Bakış Açısı

Araştırma makalesi
Research article

Evaluation of Nursing Students' Perspective on Aesthetic Surgery

İlknur TURA[1], Sevilay ERDEN[2], Açelya TÜRKMEN[3], Umut Ece ARSLAN[4]

ABSTRACT

Aim: This study evaluated nursing students' personal, social, and intellectual perspectives on aesthetic (cosmetic) surgery.

Material and Methods: This descriptive study was conducted with 1st and 4th-year students studying at the nursing of a state university. A total of 435 students who met the research criteria were included in the study. The data of the study were collected using the Student Introductory Information Form and the Acceptance of Cosmetic Surgery Scale (ACCS). Descriptive statistical analyses were used in the study, and ethical committee and institutional permissions were obtained.

Results: The average age of the students participating in the study was 21.66±3.46. The ACCS personal sub-dimension mean score (23.48±7.01) was found to be higher than the social (12.52±7.55) and intellectual (17.56±8.53) sub-dimension mean scores. In addition, it was determined that the attitude towards plastic surgery was more positive (median=54.00) among 4th-year students.

Conclusion: This study determined that students accepted aesthetic surgery at a moderate level, male students had higher social motivation related to aesthetic surgery, students were affected by the media news in accepting aesthetic surgery, and those 4th-year students had a more positive attitude towards aesthetic surgery. In summary, it can be said that the fact that the students in our sample are both young and health workers affect their attitudes towards plastic surgery positively.

Keywords: Aesthetic/Cosmetic surgery, nursing, student

ÖZ

Hemşirelik Öğrencilerinin Estetik Cerrahiye Bakış Açılarının Değerlendirilmesi

Amaç: Bu çalışma, hemşirelik öğrencilerinin estetik (kozmetik) cerrahiye karşı kişisel, sosyal ve düşünce yönünden bakış açılarını değerlendirmek amacıyla yapılmıştır.

Gereç ve Yöntem: Tanımlayıcı tipteki bu çalışmada, bir üniversitenin hemşirelik fakültesinde öğrenim gören 1. ve 4. sınıf öğrencileri ile yapılmıştır. Araştırma kriterlerine uyan 435 öğrenci çalışmaya dâhil edilmiştir. Çalışma verileri, Öğrenci Tanıtıcı Bilgi Formu ve Estetik Cerrahi Kabul Ölçeği (ECKÖ)kullanılarak toplanmıştır. Araştırmada tanımlayıcı istatistiksel analizler kullanılmış olup etik kurul ve kurum izinleri alınmıştır.

Bulgular: Çalışmaya katılan öğrencilerin yaş ortalaması 21.66±3.46 olarak bulundu. ECKÖ kişisel alt boyut puan ortalamasının (23.48±7.01) sosyal (12.52±7.55) ve düşünce (17.56±8.53) alt boyut puan ortalamalarından daha yüksek olduğu bulunmuştur. Ayrıca estetik cerrahiye karşı tutumun son sınıf öğrencilerinde daha olumlu (ortanca=54.00) olduğu belirlenmiştir.

Sonuç: Bu araştırmada, öğrencilerin estetik cerrahiyi orta düzeyde kabul ettiği, erkek öğrencilerin estetik cerrahi ile ilişkili sosyal motivasyonlarının daha yüksek olduğu, öğrencilerin estetik cerrahiyi kabul etmede medya haberlerinden etkilendiği belirlenmiştir. Özetle, örneklemimizdeki öğrencilerin hem genç yaş grubunda hem de sağlık çalışanı olmasının estetik cerrahiye yönelik tutumlarını olumlu etkilediği söylenebilir.

Anahtar kelimeler: Estetik/Kozmetik cerrahi, hemşirelik, öğrenci

[1]Res. Assist., Cukurova University, Faculty of Health Sciences, Department of Surgical Diseases Nursing, Adana, Turkey, E-mail: ilknurrtura@gmail.com, Tel: +90 322 338 6484 /1132, ORCID: 0000-0002-1371-9458

[2]Assoc. Prof., Cukurova University, Faculty of Health Sciences, Department of Surgical Diseases Nursing, Adana, Turkey, E-mail: sevilaygil@gmail.com, Tel:+90 5393231872, ORCID: 0000-0002-6519-864X

[3]Res. Assist. Dr., Cukurova University, Faculty of Health Sciences, Department of Surgical Diseases Nursing, Adana,Turkey, E-mail: acelyaturkmen2@gmail.com, Tel: 90 322 338 6484 /1132, ORCID: 0000-0001-9178-1778

[4]Assoc. Prof., Hacettepe University, Public Health Institute, Public Health Department, Ankara, Turkey. E-mail: umutars@hacettepe.edu.tr, Tel: +90 03123053141, ORCID: 0000-0002-0884-8079

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INTRODUCTION

Aesthetic (Cosmetic) surgery is an elective surgical intervention that is not medically necessary but primarily performed to improve physical appearance[1,2]. In the literature, the terms aesthetic, plastic, and reconstructive surgery are used Interchangeably. But “plastic surgery” is not synonymous with “aesthetic/cosmetic surgery” and “reconstructive surgery” The term “cosmetic” refers to what is also called aesthetic surgery; it focuses on the appearance of the patient. The American Board of Cosmetic Surgery defines cosmetic surgery as “entirely focused on enhancing a patient’s appearance. Improving symmetry, proportion and aesthetic appeal are the primary goals”[3]. Reconstructive surgery is the opposite of cosmetic surgery. It entirely focuses on restructuring the body’s form after trauma or defect. It may also include bodybuilding procedures to restore or improve the body’s function or overall health[3,4].

Aesthetic surgery is widely used in many countries around the world. It is stated that more than 1.4 million aesthetic surgeries and more than 2.8 million non-surgical aesthetic procedures are performed in the USA[4]. According to the International Association of Aesthetic Plastic Surgery report, approximately 12 million people worldwide have undergone aesthetic surgery; about 4 millions of these surgeries have been performed on the face, 3.5 million on the breast area, and the rest on the body and extremities. It is reported that Turkey is the 6th country where the most aesthetic surgeries are performed, with approximately 360 thousand people undergoing aesthetic surgery. It has been determined that rhinoplasty is performed the most among these surgeries[3,4].

Individual factors such as age, gender, cultural differences, desire to look beautiful and to be liked to affect the attitude towards aesthetic surgery[5-9]. Moreover, social factors such as social acceptance of aesthetic surgery procedures and media news about changing the physical appearance also affect attitudes towards aesthetic surgery[2,10]. When the literature is examined, it is seen that the focus is on demographic, psychosocial, and individual differences associated with considering aesthetic surgery. Studies have shown that women are more interested in aesthetic surgery than men[6,10,11]; it is seen that individuals between the ages of 20-30 mostly want to have aesthetic surgery[12], people with high BMI think of having aesthetic surgery more often[6,13], and it is seen that the physical appearance of individuals affects the attitude towards aesthetic surgery[10,14]. It is essential to evaluate the reasons for application from a psychosocial point of view before any surgical intervention for individuals who will undergo aesthetic surgery. This assessment allows the healthcare professional to tailor treatment and care practices to the patient. In this process, the nurses' point of view, which plays a key role in the patient's compliance towards aesthetic surgery, is essential. The fact that aesthetic surgery is an increasingly popular field requires a good understanding of this field before nursing students graduate. However, students who have not yet started to gain professional awareness and do not work as nurses negatively view aesthetic surgery because they cannot see the risks and complications of surgical operations more clearly. Additionally, the fact that students' bodies in their 20s have not deteriorated yet and being economically dependent on their families can also affect their perspectives on aesthetic surgery. However, a study conducted abroad determined that 91% of students with a mean age of 20.5±3.6 want to have breast augmentation surgery at their current age and facial aesthetics at later ages[14]. In this context, the point of view in aesthetic surgery may also vary according to culture.

When the literature on plastic and reconstructive surgery was scanned, no studies were found to evaluate the point of view of nurses or nursing students on aesthetic surgery in Turkey. In 2005, Hendorson-King developed a scale to motivate students towards aesthetic surgery and evaluate their perspectives on it in their social relationships[15]. In the studies, this scale was used with undergraduate students of different professions abroad.

Aim

There is no research other than the Turkish validity and reliability study of the scale in Turkey, conducted with university students and academics in 2017[16]. It is thought that the point of view towards aesthetic surgery will contribute to the literature and the nurses who will care for these patients that will undergo or have undergone surgery. Therefore, this study evaluated nursing students' perspectives on aesthetic surgery.

MATERIAL and METHODS

Study Design

This study was carried out as a descriptive, cross-sectional study to evaluate nursing students' personal, social, and intellectual perspectives on aesthetic surgery.

Study Sample

This descriptive, cross-sectional study was conducted with 1st and 4th-year students at the nursing of a state university. The reason first-year students were included in the study is that their perspectives on aesthetic surgery as health professionals may not have developed yet due to the lack of clinical experience of the students. Students have cared for at least one patient with aesthetic surgery indications such as burns, wounds, and mastectomy since the first year and the second semester. Furthermore, students' self-perceptions and perspectives may have developed with the courses they took until their last year, such as mental health, psychology, communication, and coping with stress. In this respect, it is thought that there may be a difference between the students in terms of surgery, aesthetics, and body image from the perspective of health personnel.

The population of the research is the 1st and 4th-year students at the Faculty of Health Sciences of a state university in the 2019-2020 fall semester. The sample consisted of a total of 475 students, 183 in the 1st year and 292 in the 4th year, who did not work anywhere as nurses and agreed to participate in the research voluntarily. Since 18 out of 40 students graduated from health vocational high

school and 22 of them did not accept to participate in the research, they were not included in the study.

Data Collection Tools

Data were collected using the Student Descriptive Information Form (SIIF)[7,16,17] and Aesthetic Surgery Acceptance Scale (ACSS).

Data Collection

The study was conducted between March and April 2019. The data collection locations were classrooms where the students would feel comfortable and complete the data collection tools on time. Students were informed about the purpose of the study before data collection by the researcher. The written informed consent form was obtained from those who agreed to participate. They were also informed about how to complete the data collection tools. The researcher was present during the administration of the data collection tools to answer any questions. The data collection lasted for 10 minutes.

Student Introductory Information Form (SIIF): The SIIF consists of a total of 15 questions: age, gender, class, whether the students graduated from a health vocational high school, Body Mass Index (BMI), monthly income of their families, chronic illnesses, how they described themselves personally and physically, whether the students had partners, emphasis on appearance, valued themselves, whether they had undergone aesthetic surgery before, which factors were effective in their decision on aesthetic surgery, and whether they had previous clinical practice in the aesthetic surgery service.

Acceptance of Cosmetic Surgery Scale (ACSS): ACSS was developed by Henderson-King in 2005 for nursing students, and its Turkish validity and reliability were evaluated by Karaca et al. (2017). ACSS is a 7-point Likert-type scale (1=I totally disagree, 7=I totally agree) consisting of 15 items that determine individuals' attitudes towards aesthetic surgery. In this scale, which is evaluated according to its three sub-dimensions and the total scale score, the lowest score is 15, and the highest score is 105. The higher the score is, the more positive the student's perspective on aesthetic surgery is. The sub-dimensions of ACSS are personal items (1st, 2nd, 4th, 5th, and 14th), social items (9th, 11th, 12th, 13th, and 15th), and intellectual items (3rd, 6th, 7th, 8th, and 10th). Item 10 of the intellectual items should be reverse-coded. In the personal sub-dimension of the scale, some evaluations motivate aesthetic surgery, and in the social sub-dimension, some evaluations provide a positive perspective on aesthetic surgery related to the individuals' feeling better in their social relations and social environments. In the intellectual sub-dimension, individuals' opinions about aesthetic surgery are evaluated. In the study of Henderson-King and Karaca et al., the internal consistency of the scale was found to be high (Cronbach's alpha, respectively 0.91 and 0.93)[15,16]. Cronbach's alpha value of this study was determined as 0.90.

Data Analysis

Data were analysed using the SPSS (IBM, IBM SPSS Statistics for Windows, Version 22.0 Armonk, NY: IBM Corp. (Released 2016) at a significance level of 0.05. Descriptive analyses were given using the median (min and max) and frequency tables for variables and ordinal variables. The Kolmogorov-Smirnov test was used to evaluate the fit for normal distribution. According to this result, non-parametric tests were used because the data were not normally distributed. Mann Witney U was used to compare two independent groups (gender, year of study, emphasis on appearance, how would you describe yourself physically? which factors do you think are effective in aesthetic surgery?), Kruskal-Wallis was used to compare three or more independent groups (BMI). Bonferonni test, one of the post-Hoc non-parametric tests, was used to determine which groups caused the significant difference in the intellectual sub-dimension score in BMI. The Kruskal-Wallis test was performed to test the significance of pairwise differences using Bonferroni correction to adjust for multiple comparisons. In addition, Spearman Correlation analysis was used to compare age and scale total score and sub-dimension score averages. The $p<0.05$ level was considered significant in statistical decisions.

Ethical Approval

Permission was obtained from the University Faculty of Health Sciences Academic Committee (dated 01/31/19 No./4), University Faculty of Medicine Non-Interventional Clinical Research Ethics Committee (dated 02/01/2019 No. 85), and students.

RESULTS

Table 1. Distribution of Students' Characteristics (n=435)

Characteristics		**n**	**%**
		435	100
Gender	Female	272	62.5
	Male	163	37.5
BMI	18.5 < (thin)	38	8.7
	18.5-24.9 (normal)	327	75.2
	25-29.9 (overweight)	63	14.5
	30 and over (obese)	7	1.6
Chronic disease	Yes	24	5.5
	No	411	94.5
Year of study	1st Year	183	42.1
	4th Year	252	57.9
Do you have a partner?	Yes	164	37.7
	No	271	62.3
Emphasis on appearance	Yes	341	78.4
	No	94	21.6
Self-worth	Yes	409	94.0
	No	26	6.0
Previous aesthetic surgery experience	Yes	15	3.4
	No	420	96.6
Professional Practice Experience in Any Aesthetic, Plastic, and Reconstructive Surgery Clinic	Yes	74	17.0
	No	361	83.0
Age	**Mean±SD**	**Min-Max**	
	21.66±3.46	18-54	

It was determined that the mean age of the students included in the study was 21.66±3.46, 62.5% were female, and 75.2% had a normal BMI. Moreover, it was determined

that 94.5% of the students did not have chronic diseases, 57.9% were in the 4th year, 62.3% did not have partners, 78.4% of the student's emphasis on appearance, 94% valued themselves, 3.4% had undergone aesthetic surgery before, and 17% were in the aesthetic and plastic surgery clinic in clinical practice (Table 1).

Table 2. Distribution of Personal Thought Characteristics of Students (n=435)

Personal Thought Characteristics			n	%
How would you describe yourself personally?	Jealous	Yes	48	11.0
		No	387	89.0
	Self-confident	Yes	156	35.9
		No	279	64.1
	At peace with himself/herself	Yes	270	62.1
		No	165	37.9
How would you describe yourself physically?	Overweight	Yes	53	12.2
		No	382	87.8
	Thin	Yes	79	18.2
		No	356	81.8
	Ugly	Yes	43	9.90
		No	392	90.1
	Beautiful/Handsome	Yes	234	53.8
		No	201	46.2
	Short	Yes	87	20.0
		No	348	80.0
	Body lines are out of proportion	Yes	52	12.0
		No	383	88.0
Which factors do you think are effective in aesthetic surgery?	Media news	Yes	259	59.5
		No	176	40.5
	Friends, environment	Yes	295	67.8
		No	140	32.2
	Personality structure	Yes	270	62.1
		No	165	37.9
	Health Problems	Yes	134	30.8
		No	301	69.2

Table 2 shows the distribution of personal thought characteristics of the students, 53.8% of the students evaluated themselves as beautiful/handsome, and 62.1% stated that they were at peace with themselves. On the other hand, 67.8% of the students see their friend circles, 62.1% their personality structures, and 59.5% media news as effective factors in aesthetic surgery.

Table 3. Mean Scores of the Scale and its Sub-Dimensions (n=435)

	*Mean±SD	Min-Max
Personal	23.48±7.01	5-35
Social	12.52±7.55	5-35
intellectual	17.56±8.53	5-35
ACSS Total Score	53.57±19.25	15-105

*Mean: Mean Value, SD: Standard Deviation

When the mean scale score is examined, the highest score is the personal sub-dimension score (23.48±7.01) (Table 3).

Table 4 compares some characteristics of the students and their scale median scores. In the social sub-dimension of gender; in the sub-dimension of intellectual in BMI; in grade level personal, intellectual, and total scores; statistically significant difference was found in personal, social and intellectual scores in giving importance to appearance, in social sub-dimension in physical description and in total scores ($p<0.05$). It was determined that this significance resulted from the lean-obese ($p=0.016$) and normal-obese ($p=0.023$) groups. In addition, in the social sub-dimension of media news that is effective in aesthetic surgery; statistically significant difference was found in personal and social sub-dimensions and total scores of health problems ($p<0.05$).

Table 5 shows the correlation between age and the mean score of the scale. According to the information in the table, it was found that there was a positive and significant relationship between age ($r=0.136$) and intellectual ($r=0.140$) sub-dimension scores and the total score ($r=0.140$) ($p<0.05$). Accordingly, as age increases, the total and sub-dimension scores also increase.

DISCUSSION

This study evaluated nursing students' personal, social, and intellectual perspectives on aesthetic surgery. The mean ACSS value of 53,57±19,25 showed that the students had a moderate attitude toward accepting aesthetic surgery. In the literature, Önalan et al. (2021)[18], which examined nursing students' attitudes towards aesthetic surgery, the ACSS mean value was 45.73 ± 17.68 (15–96), and the students accepted moderate plastic surgery. Similarly, Baksi and Tuncer (2021)[19], ACSS mean value was reported to be 56.11±21.80 (15-105).

Individuals' perspectives on aesthetic surgery are affected by many factors, and it is stated in studies that personal factors mostly affect the attitude towards aesthetic surgery[7,8,20,21]. In this study, more than half of the students evaluated themselves as beautiful/handsome and stated they were at peace with themselves. Moreover, a significant proportion of the students stated that their personality structures affected their attitudes towards aesthetic surgery (Table 2). In parallel, the fact that students' personal subscale median scores (24.00) were higher than other subscale median scores (10.00,16.00) support this finding (Table 3). The literature states that personal factors affect the attitude towards aesthetic surgery more than social factors and that most university students do not think of having it at their current age. Still, they mostly think of having breast augmentation surgery in the near future[14,15,22]. As it is seen, the fact that the students are young, the BMI values of the majority of them are normal, their body appearance has not deteriorated due to reasons such as birth and old age, and thus they are at peace with themselves, can be associated with the findings of thinking about aesthetic surgery in the future, not now.

Our study determined a significant relationship between the age and study year of the students and the total score of ACSS and that the older 4th-year students had more positive attitudes towards aesthetic surgery (Tables 4, 5). Similarly, Von Soest et al. (2012)[11] also stated that older individuals wanted more aesthetic surgery. On the other hand, it is indicated in other studies that aesthetic surgery is performed more frequently in young individuals[7,10,23].

Table 4. Comparison of Some Characteristics of Students and Scale Scores Mean (n=435)

	Personal *Median/ Min-Max	Social *Median/ Min-Max	Intellectual *Median Min-Max	Total Score *Median Min-Max
Gender				
Male	24.00/5.00-35.00	9.00/5.00-35.00	16.00/5.00-35.00	51.00/15.00-105.00
Female	24.00/5.00-35.00	12.00/5.00-35.00	15.00/5.00-35.00	52.00/16.00-102
Test/p	Z=-.075 P=0.940	Z=-2.854 **P=0.004**	Z=-.224 P=0.822	Z=-.937 P=0.349
BMI				
18.5 <(thin)	25.50/8.00-35.00	13.00/5.00-31.00	17.00/5.00-35.00[a]	56.00/21.00-99.00
18.5-24.9 (normal)	24.00/5.00-35.00	10.00/8.00-35.00	16.00/5.00-35.00[b]	51.00/15.00-105.00
25-29.9 (overweight)	25.00/7.00-35.00	11.00/8.00-35.00	16.00/5.00-33.00	51.00/23.00-94.00
30 and over (obese)	22.00/8.00-35.00	6.00/8.00-35.00	7.00/5.00-14.00[ab]	39.00/25.00-64.00
Test/p	X^2=3 P=0.280	X^2=3 P=0.220	X^2=3 **P=0.014**	X^2=6.074 P=0.108
Year of study				
1st Year	23.00/6.00-35.00	10.00/5.00-35.00	15.00/5.00-35.00	48.00/16.00-102.00
4th Year	25.00/5.00-35.00	10.00/5.00-35.00	17.00/5.00-35.00	54.00/15.00-105.00
Test/p	Z=-2.226 **P=0.026**	Z=-.631 P=0.052	Z= 2.353 **P=0.019**	Z=2.196 **P=0.028**
Emphasis on Appearance				
Yes	25.00/6.00-35.00	11.00/5.00-35.00	17.00/5.00-35.00	54.00/16.00-105.00
No	22.50/5.00-35.00	8.00/5.00-32.00	13.50/8.00-35.00	44.00/15.00-102.00
Test/p	Z=-3.179 **P=0.001**	Z=-2.753 **P=0.006**	Z=-3.415 **P=0.001**	Z=-3.953 **P=0.000**
How would you describe yourself physically?				
Beautiful/Handsome				
Yes	24.50/6.00-35.00	11.50/5.00-35.00	17.00/5.00-35.00	54.00/15.00-105.00
No	24.00/5.00-35.00	9.00/5.00-32.00	15.00/5.00-35.00	49.00/16.00-102.00
Test/p	Z=-1.345 P=0.179	Z=-2.747 **P=0.006**	Z=-1.317 P=0.188	Z=-2.60 **P=0.039**
Which factors do you think are effective in plastic surgery?				
Media news				
Yes	25.00/5.00-35.00	11.00/5.00-31.00	17.00/5.00-35.00	52.00/15.00-97.00
No	23.00/5.00-35.00	9.50/5.00-35.00	15.00/5.00-35.00	50.00/16.00-105.00
Test/p	Z=-.251 P=0.802	Z=-2.206 **P=0.027**	Z=-1.538 P=0.124	Z=-0.689 P=0.491
Health problems				
Yes	25.00/6.00-35.00	12.00/5.00-35.00	18.00/5.00-35.00	57.00/16.00-100.00
No	23.00/5.00-35.00	9.00/5.00-35.00	15.00/5.00-35.00	49.00/15.00-10500
Test/p	Z=-2.162 **P=0.031**	Z=-2.728 **P=.006**	Z=-1.278 P=.201	Z=-2.542 **P=0.011**

Mean: Mean Value, SD: Standard Deviation, X^2= Kruskal-Wallis Test, Z: Mann-Whitney U Test
a: The groups from which significance originates were determined by the Bonferonni test.
b: The groups from which the significance originated were determined by the Bonferonni test.

Table 5. Comparison of Age and Scale Total Score and Sub-Dimension Score Averages

	n	Age	Personal	Social	Intellectual	Total Score
Age	435	r=1.000	r=0.136 **P=0.005**	r=0.066 P=0.171	r=0.140 **P=0.003**	r=0.140 **P=0.003**

In studies conducted in different cultures, it has been reported that there is no significant relationship between the age of the participants and the ACSS sub-dimension mean scores[2,24,25] and that student status does not affect the attitude towards aesthetic surgery[26]. Despite the different results in the literature, the findings of this study can be explained by the fact that nursing students are young, know aesthetic surgery as a necessity of the profession, and closely follow today's aesthetic trends (Botox, facelift) and plastic surgery practices (rhinoplasty, breast surgery, abdominoplasty).

Our study determined a significant relationship between gender and the social sub-dimension of ACSS and that the social motivation of men related to aesthetic surgery was higher (Table 4). Similarly, a study conducted in Brazil reported that men cared about their physical appearance as much as women considered aesthetic surgery[27]. It has been determined that aesthetic surgery causes negative results such as pain, depression, and low self-esteem, especially men who are not satisfied with their physical appearance consider aesthetic surgery[5,21,28,29,] and the comments and mockery of men about their physical appearance by their friends positively affect their attitudes towards aesthetic surgery[30-33]. Although there are studies in the literature that support women's positive attitude towards aesthetic surgery[5,10,11,34,35], plastic surgery is also popular among men[21,28,36]. This result shows that men's interest in aesthetic surgery has increased. They have started to give more importance to their physical appearance, and they can adapt to social appearance standards to be accepted into social groups and improve themselves.

Acceptance of aesthetic surgery is affected by physical, psychological, and social factors[37]. In our study, it was determined that media news was effective in students' attitudes towards aesthetic surgery in the social sub-dimension ($p<0.05$) (Table 4). In the study of Swami et al. (2012)[8], attitudes towards aesthetic surgery are associated with more internalization of media news about body appearance. The study of Holland et al. (2016)[38] states that spending more time on social media causes exposure to more content related to physical appearance and creates body image anxiety. When the literature is examined, similar results are obtained with these studies[6,13,15,39-41]. It can be thought that the media is an easily accessible and economical source of information, that physicians and hospitals make television programs and social media advertisements about aesthetic surgeries on social media, and that young university students spend more time on social media supports their trust in and positive attitudes towards aesthetic surgery.

It was determined that the ACSS sub-dimension median scores of the students who attached importance to their appearance were significantly higher (Table 4). In the study of Henderson and Henderson (2005)[15], it was stated that the dissatisfaction of men and women with their physical appearance was affected by external factors (how they appear to others). Similarly, other studies have emphasized that the attitude towards aesthetic surgery relates to a dislike of physical appearance[8,14]. Our research result can be explained by the fact that almost all the students participating in the research value themselves since aesthetic surgery delays biological aging.

This study determined that the students found themselves beautiful/handsome and felt better in the social environment (Table 4). In a study conducted to determine the attitude towards aesthetic surgery, it was reported that university students had more positive attitudes towards it for body image changes[42]. Other studies stated that there is a relationship between aesthetic surgery attitude and negative body image[13,43,44]. The result of this research can be explained by the fact that most students like themselves physically and have moderately positive attitudes towards aesthetic surgery.

In addition to physical appearance, health problems are an essential factor that creates a positive perspective on aesthetic surgery. In this study, students thought that health problems were effective in accepting aesthetic surgery, and it was determined that the personal, social sub-dimension and total scores of the scale were significantly higher (Table 4). Studies have reported that individuals' psychological and mental health conditions affect the attitude towards aesthetic surgery, and the elimination of physical discomfort of individuals is effective on both physical and mental well-being[3,45]. Javo and Sørlie's (2009)[23] study states that the attitude towards plastic surgery is associated with body dysmorphic disorder, emotional distress, mental disorders, and eating disorders. Von Soest et al. (2011)[11] reported that eating problems, alcohol use, and suicide attempts also affected attitudes towards aesthetic surgery. Our research result, which parallels the literature, can be explained by the fact that the nursing students in the study know about health problems due to their professional status and the physiological, psychological, and social effects of these problems on people.

CONCLUSION

Consequently, this study determined that the total score of ACSS was moderate and, accordingly, the students accepted aesthetic surgery at a moderate level, the social motivation of male students related to aesthetic surgery was higher, the students exhibited more positive attitudes towards aesthetic surgery as age increases, the students who emphasis on appearance had more positive attitudes of aesthetic surgery, and most of the students thought that health problems affected the attitude of aesthetic surgery. It was concluded that students are frequently influenced by media news and their friends about aesthetic surgery. For this reason, students should be raised awareness and educated about obtaining information about aesthetic surgery from suitable media sources.

Ethics Committee Approval: Cukurova University Faculty of Medicine Non-Interventional Clinical Research Ethics Committee 02/01/2019 No. 85

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Author contributions

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