

What Do You Think of Others who Pursue Cosmetic Surgery? Influences
Associated with Perceptions of Cosmetic Surgery.

by

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ABSTRACT

In the current climate in which it seems like popular media determines normality, it is not surprising to find that reality television, especially programs geared towards elective cosmetic surgery, are correlated with the decision making processes associated with actually pursuing cosmetic surgery. Research suggests that attitudes towards cosmetic surgery have changed dramatically due to the public's exposure to reality makeover shows; these shows have increased the popularity of such procedures and have highlighted and implied that cosmetic surgery is associated with little pain and risk.

In this study, I sought to determine if attitudes toward cosmetic surgery vary as a function of ethnicity and gender, as well as examine the influence of the media on openness to pursuing cosmetic surgery. Examining how others view those who pursue elective cosmetic surgery and the variables associated with those who obtain cosmetic surgery will shed light on the processes associated with the decision to pursue the procedures.

DEDICATION

For my parents, Herman Vergara and Yolanda Elejalde, for their unwavering support and relentless drive to help me succeed.

For my mentors Dr. Charles Negy and Dr. Fernando Rivera for the guidance and support throughout this amazing experience.

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INTRODUCTION

In the current climate in which it seems like popular media determines normality, it is not surprising to find that reality television, especially programs geared towards elective cosmetic surgery, are correlated with the decision making processes associated with actually pursuing cosmetic surgery. Markey and Markey (2010) state that with the lack of criteria to objectively evaluate physical beauty, it is possible that individuals judge their own appearance by sources such as television and print media. Since 1997, there has been an increase of 155% of cosmetic surgery procedures in the United States with women constituting 92% of cosmetic surgery recipients (ASAPS, 2010). Research suggests that attitudes towards cosmetic surgery have changed dramatically due to the public's exposure to reality makeover shows; these shows have increased the popularity of such procedures and have highlighted and implied that cosmetic surgery is associated with little pain and risk. In addition, the shows also have given viewers the idea that recovery time for the patient is minimal and few qualifications are required of the surgeons performing the procedures (Hamilton, Carrithers & Karnell, 2004).

Henderson-King and Brooks (2009) believe that an individual's approval of cosmetic surgery depends on whether the surgery was necessary or elective solely to obtain a higher social standing associated with attractiveness. In a society that seems to be inundated with the latest fad of "going under the knife" or reality television portraying people whose quality of life was enhanced by cosmetic surgery, the media has helped normalize the desire to pursue cosmetic surgery by setting a socially idealized standard of beauty (Swami, Taylor & Carvalho, 2009) and promoting cosmetic surgery as an option to attain physical perfection. Research shows that

media's influence in perpetuating an ideal body (e.g., muscular for men and thin for women), has a negative impact on body satisfaction and the more media exposure people have, the less satisfied they are with their bodies (Nabi, 2009). Further, the prevailing explanations for pursuing cosmetic surgery are intrapersonal and social variables associated with enhancing body image and appearance-based self-esteem and reducing appearance-based rejection sensitivity (Calogero, Pina, Park & Rahemtulla, 2010).

As mentioned, women constitute the majority of cosmetic surgery patients. Other variables associated with cosmetic surgery include ethnicity (specifically being non-Hispanic White), college educated, of a high socioeconomic status and being between the ages of 19 to 35. Research suggests that the reason women pursue elective cosmetic surgery more than men is because physical appearance is the most prominent criterion used to evaluate women in society, therefore leading to more body dissatisfaction and reduced self-esteem among women (Schofiel, Hussain, Loxton & Miller, 2004). Moreover, people's views about body image are influenced by social values promulgated by their respective culture. For example, women in Iran who pursue cosmetic surgery often do so in defiance of fundamental Islam's mandate of women covering most of their bodies; by contrast, women in the U.S. pursue cosmetic surgery primarily to improve their body image and sexual attractiveness (Schofiel et al., 2004).

Ironically, despite increases in cosmetic surgery in the last decade, research has found that an indirect effect of the widespread media coverage on cosmetic surgery is an increase in body dissatisfaction and aging anxiety in the population (Slevec & Tiggemann, 2010). Feminist writers generally consider women who pursue cosmetic surgery in a negative light, and modern feminist writers generally consider female cosmetic surgery patients as pathological (Pitts-

Taylor, 2009). From a feminist perspective, cosmetic surgery is a woman's requirement to maintain an ideal feminine body in order to adhere to patriarchal social expectations and norms.

The general population appears to be open to receiving cosmetic surgery. The procedures are seen as natural for women and are accepted for men, especially when the procedure is associated with career enhancement in order to compete with the younger generation. Still, for both genders, cosmetic surgery is commonly pursued to enhance sexual attractiveness and sexual success (Adams, 2010). This is consistent with previous research indicating that a person's physical appearance is a potent schema that guides social interactions and has revealed that attractive people tend to receive better treatment in regards to employment, education, health care and when selecting a romantic partner (Sarwer, Wadden, Pertschuck & Whitaker, 1998).

Current literature concentrates on the individual's psychological state when pursuing cosmetic surgery and the media's influence on people's body image and self-esteem, but little is known about how a population of students perceives those who choose to have cosmetic surgery and whether the outsider's own body image influences their perception of others who pursue cosmetic surgery. The current study represents an effort to explore these questions. The goals of this study are to determine if there are differences in opinions of individuals who obtain, or want to obtain, cosmetic surgery versus individuals who have not had and do not wish to undergo elective surgery, and to determine if reality television influences people's perceptions of those who obtain cosmetic surgery. The study will include measures of self-esteem, sociocultural attitudes towards appearance of self and others, and general acceptance of cosmetic surgery for the participants as a function of gender and ethnicity. Examining how others view those who pursue elective cosmetic surgery and the variables associated with those who obtain cosmetic

surgery will shed light on the processes associated with the decision to pursue the procedures. In light of our current's culture acceptance of cosmetic surgery, it is expected that participants generally will hold favorable views of those who pursue cosmetic surgery and are receptive themselves to receiving cosmetic surgery. Women are expected to be more favorable toward cosmetic surgery than men given that the majority of cosmetic surgery patients are women.

METHOD

Participants

Participants were 324 (69.8% women, $n=226$; 30.2% male, $n=98$) undergraduate students enrolled in psychology courses (age $M=20.1$, $SD= 2.37$). The majority of participants were Non-Hispanic White (66.4%, $n= 215$) with smaller groups of Hispanic (16%, $n=52$), African American (10.2%, $n= 33$) and Asian American (7.4%, $n= 24$). There was an almost even distribution of participants in terms of class standing, 24.4% were freshman ($n= 79$), 29% were sophomore ($n= 94$), 30.2% were junior ($n= 98$), and 16.4% were senior ($n= 53$).

Materials

Demographics

All participants completed a demographic survey to indicate their age, gender, ethnicity, and class standing. Participants were asked to indicate the highest level of education attained by the parents in order to assess for socioeconomic status. In addition, participants were asked to respond to three questions indicating whether they have had cosmetic surgery and whether parents or friends have had cosmetic surgery.

Sociocultural Attitudes Towards Appearance Scale-3 (SATQ-3)

The SATAQ-3 (Thompson, van den Berg, Roehrig, Guarda, & Heinberg, 2004) is a revised version of the original SATAQ (Heinberg, Thompson, & Stormer, 1995) that assesses the

degree to which individuals perceive that the media influences their attitudes about body image and their propensity toward developing symptoms of disordered eating. Participants respond to the 30 items using a Likert-type scale ranging from 1 (“definitely disagree”) to 5 (“definitely agree”), with higher scores reflecting a greater amount of perceived media influence. The composite SATAQ-3 score is derived by reversing eight items and then averaging responses across all items. In addition, the SATAQ-3 can yield four subscales: Information (SATAQ-I; 9 items measuring the importance assigned to the media as a valuable source of information regarding attractiveness); Pressure (SATAQ-P; 7 items measuring the tendency to compare oneself with the images presented by the media, and the perception of pressure presented by the media to emulate the look promoted by models and actors); Internalization-General (SATAQ-IG; 9 items measuring awareness of the media’s endorsement of ideal body types and internalization of these ideals as personal standards of attractiveness); and Internalization-Athlete (SATAQ-IA; 5 items measuring awareness of the importance of muscularity, tone, and the value of exercise in achieving an attractive body). The SATAQ-3 has been demonstrated to be a valid instrument for use with undergraduates (Karazsia & Crowther, 2008).

The State Self-Esteem Scale (SSES)

The State Self-Esteem Scale is a modified scale comprised of 20 items from the Pliner et al. (1990) and Fleming and Courtney (1984) modified Janis-Field scales. It assesses self-esteem in five domains: academic, performance, social, appearance, and general self-esteem. Each item is scored on a 5-point Likert-type scale with response options ranging from 1 to 5 (1 = *not at all*, 2 = *a little bit*, 3 = *somewhat*, 4 = *very much*, and 5 = *extremely*).

Need For Approval – Short Form (Martin-Larsen Approval Motivation)

To assess participants' need to be approved by others, they completed the Martin-Larsen Approval Motivation Scale-Short Form (MLAM-sf; Martin, 1984). The short form is based on the original, 21-item MLAM (Larsen, Martin, Ettinger, & Nelson, 1976) that was designed to assess respondents' desire to receive positive evaluations and social approval from others. The MLAM-sf contains five counter-balanced statements to which participants respond using a 5-point Likert-type scale, with response options ranging from Strongly Disagree (1) to Strongly Agree (5). Higher scores reflect a higher need for social approval or acceptance. The MLAM-sf has been found to have adequate internal consistency (Cronbach alpha = .67). Construct validity for the MLAM-sf was demonstrated by its inverse correlations with global and social self-esteem and positive correlations with self-monitoring and a measure of inadequacy (Martin, 1984).

Acceptance of Cosmetic Surgery Scale (ACSS)

The ACSS was designed to measure three distinct elements of cosmetic surgery attitudes: the degree to which an individual would consider having cosmetic surgery; acceptance of cosmetic surgery based on social motivation; and, acceptance of cosmetic surgery based on intrapersonal motivation (Henderson-King & Henderson-King, 2005). For the purpose of the current study, the ACSS was modified to be applicable to both females and males. The ACSS is comprised of 15 number of statements to which respondents indicates their level of agreement. Response options range from 1 (strongly disagree) to 5 (strongly agree).

Procedure

Participants who volunteered for the project were asked to answer a questionnaire packet. A letter of consent was provided stating that the study is voluntary and anonymous. After obtaining consent, participants were asked to answer each scale earnestly and to follow directions on each scale given in the packet.

RESULTS

Table 1 shows the means and standard deviations of the study variables obtained by participants as a function of ethnicity and gender. To test for ethnic and gender differences on the primary study variables, a multivariate analysis of variance (MANOVA) was performed on the data. The independent variables (IVs) were ethnicity (non-Hispanic White, Hispanic, African American, and Asian American) and gender. The dependent variables (DVs) were the influence of media (SATQ), attitudes toward cosmetic surgery for self (ACSS), attitudes toward cosmetic surgery for women (ACSW), and attitudes toward cosmetic surgery for men (ACSM). There was no significant overall effect for ethnicity on the DVs (using Wilks' Lambda, $F(12, 828.412) = 1.51, p > .05$; partial eta squared = .02). None of the univariate tests achieved statistical significance except for SATQ, $F(3, 1.814) = 2.83, p < .05$; partial eta squared = .03. Post hoc analyses (Tukey HSD) indicated that, on average, Whites reported being significantly more influenced by the media regarding cosmetic surgery than African Americans ($M_s = 3.17$ and 2.58 [$SD_s = .79$ and $.78$], respectively) ($p < .001$).

There was no significant overall effect for gender, $F(4, 313) = 1.65, p > .05$, partial eta squared = .02). None of the univariate tests for gender effects achieved significance (all $p_s > .05$). Moreover, there was no significant ethnicity X gender effects, $F(12, 828.412) = 1.31, p > .05$, partial eta squared = .02). None of the univariate tests for interaction effects achieved significance (all $p_s > .05$).

Table 2 shows the correlation matrix for all study variables (for all participants combined [$n = 324$]). The more participants reported being influenced by the media regarding cosmetic surgery, the more open they were to obtaining cosmetic surgery for themselves ($r = .48, p < .001$), and the more accepting they were for both women and men to obtain cosmetic surgery ($r_s = .33$ and $.31, p_s < .001$, respectively). Media influence also significantly correlated with self-esteem ($r = .50, p < .001$) and need for approval ($r = .40, p < .001$). Media influence continued to correlate significantly with participants' openness to cosmetic surgery for themselves even after controlling for self-esteem and need for approval (partial $r = .37, p < .001$). Finally, analyses revealed that the more participants were open to cosmetic surgery for themselves, the more positive attitudes they held toward women obtaining cosmetic surgery ($r = .61, p < .001$) as well as men ($r = .63, p < .001$).

Additional exploratory analysis revealed that acceptance of cosmetic surgery significantly correlated with participants' father's education ($r = .21, p < .001$) and mother's education ($r = .12, p < .05$). The higher the level of education the more accepting participants were of cosmetic surgery. Also, those whose family members had had cosmetic surgery were significantly more accepting of cosmetic surgery compared to those whose families had not had cosmetic surgery, $F(1,322) = 18.61, p < .001$, partial eta squared = .04).

Also, media influence correlated significantly with acceptance of cosmetic surgery ($r = .48, p < .001$). After controlling for need for approval, media influence continued to correlate significantly with acceptance of cosmetic surgery, with only a slight drop in the magnitude of the correlation ($r = .41, p < .001$). By contrast, need for approval correlated significantly with

acceptance of cosmetic surgery ($r = .32, p < .001$), yet after controlling for media influence, the correlation between need for approval and acceptance of cosmetic surgery dropped dramatically ($r = .16, p < .01$). These findings suggests that although both media influence and need for approval may significantly influence acceptance of cosmetic surgery, media influence may be a more powerful influence than need for approval.

It is noted here that additional correlation analyses revealed that media influence correlated significantly with openness to pursuing cosmetic surgery for each ethnic group separately, except for African Americans (for Whites, $r = .52 [p < .001]$, for Hispanics, $r = .43 [p < .01]$, for African Americans, $r = .23 [p > .05]$, and for Asian Americans, $r = .42 [p < .05]$).

DISCUSSION

In this study, I sought to determine if attitudes toward cosmetic surgery vary as a function of ethnicity and gender, as well as examine the influence of the media on openness to pursuing cosmetic surgery. The data indicated that, based on the current sample of college students comprised of diverse ethnic groups, there was no significant differences in attitudes toward cosmetic surgery across ethnic groups. In consideration of group mean scores on measures assessing openness toward cosmetic surgery for oneself, women, and men, the participants were overall quite favorable toward cosmetic surgery irrespective of their ethnicity and of the person receiving cosmetic surgery. This finding is consistent with the results of the study by Park, Calogero, Harwin and DiRaddo (2009) that had found that young adults in the U.S. increasingly hold positive views about cosmetic surgery for themselves and others. This pervasive acceptance of cosmetic surgery has been the norm in the last decade (or several decades) in the United States (Hamilton, Carrithers & Karnell, 2004). Overall, the current participants endorsed the value of cosmetic surgery as a means of making individuals feel better about themselves in multiple contexts (relationships, employment prospects, etc.). Current research suggests that a generational effect that reflects a somewhat narcissistic and hyper-individualized young cohort may influence the degree of acceptance of cosmetic surgery by participants to enhance their appearances (Twenge, Konrath, Foster, Campbell & Bushman, 2008).

The results also indicated that, on average, White participants reported being more influenced by the media in terms of their attitudes toward cosmetic surgery than African Americans. Although nothing in the data collected sheds light on this obtained difference, it is possible that this ethnic difference reflects how the preponderance of commercials target the dominant group in the U.S. (i.e., Whites) as reflected by the race of the models used in commercials and advertisements.

A somewhat surprising finding was that women and men did not differ significantly on attitudes toward cosmetic surgery. Historically, cosmetic surgery has been the purview of women (Schofiel, Hussain, Loxton & Miller, 2004). However, in the last decade, men increasingly are pursuing a wide range of body-enhancement treatments (Ricciardelli & White, 2011). Some of these include pectoral implant surgery, nose reshaping, eyelid surgery, liposuction, breast reduction and hair transplantation (ASPS, 2010; Schuster, Negy, & Tantleff-Dunn, in press). Moreover, commercials and advertisements increasingly are targeting men just as often as they target women. The results of my study suggest that body enhancement products and interventions is one area where the two genders have achieved equality.

Collectively, the more participants perceived that they are influenced by the media, the more open they were to pursuing cosmetic surgery for themselves and for women and men. These findings are consistent with a plethora of studies consistently showing a significant relation between media influence and myriad body image problems and the pursuit or willingness to attain cosmetic surgery (Mazzeo, Trace, Mitchell & Walker Gow, 2007; Nabi, 2009; Slevic & Tiggemann, 2010; Swami, Taylor & Carvalho, 2009). Although massive

portrayals of attractive models via multiple forms of media doubtlessly influence people's concepts about the norms of beauty and likely implants desires to improve their own appearances, it also is likely that those who are sensitive to social expectations and pressures may be more attentive to media messages (Marino-Carper, Negy, & Tantleff-Dunn, 2010). In light of this, I examined the relation between media influence and participants' openness to cosmetic surgery for themselves while controlling for self-esteem and need for approval. The magnitude of the relation between media influence and openness to cosmetic surgery declined (r dropped from .48 to .37), suggesting that self-esteem and having a concern for others' approval accounted for some of the observed relation. However, media influence continued to correlate significantly with openness to cosmetic surgery, suggesting that the relation between media influence and openness to cosmetic surgery appears to be rather robust.

Finally, it was found that the more participants were open to cosmetic surgery for themselves, the more favorable they perceived women and men who pursue or obtain cosmetic surgery (stated conversely, the less participants were open to cosmetic surgery for themselves, the less favorable they perceived women and men who pursue or obtain cosmetic surgery). In addition, it was found that the father's level of education and mother's level of education positively correlated with the participants' acceptance of cosmetic surgery and family history of cosmetic surgery correlated with positive attitudes towards cosmetic surgery. Moreover, both media influence and to a lesser extent, need for approval, are correlated with acceptance of cosmetic surgery. All considered, this sample of young adults holds positive views of cosmetic surgery for anyone who aspires to improve their appearances and potentially affect their opportunities in multiple life domains.

These findings yield somewhat conflicting implications. On one hand, individuals have a right to endeavor to improve their self-concept by means of enhancing their physical appearances. As noted earlier, studies show there are real advantages those who are considered attractive. For example, relative to less attractive people, attractive individuals are judged as being more intelligent (Kanazawa & Kowar, 2004). They also are considered more desirable as prospective romantic partners, receive better treatment in employment settings, education, and in regards to health care (Sarwer, Wadden, Pertschuck & Whitaker, 1998). On the other hand, increased social acceptance of cosmetic surgery logically translates into higher numbers of surgeries being performed. Given that most cosmetic surgeries carry various degrees of risk to health (Schuster, Negy, & Tantleff-Dunn, in press), prospective patients probably should equally weigh potential side effects vis-à-vis potential benefits from such surgeries.

Several limitations bear noting about the current findings. Given that the participants were college students, it is unknown if these findings generalize to non-college students. It is possible and even conceivable that adults from the community may not value cosmetic surgery to the same degree as young, emerging adults who are at stage in life where they typically are in pursuit of either temporary or long term romantic partners. Also, the data collected were correlational in nature, precluding the possibility of knowing if the variables have a casual effect on any of the other variables. For example, as much as the media may cause individuals to accept cosmetic surgeries, it also is possible that openness to cosmetic surgeries may cause individuals to be more sensitive to media that promote beauty. The current data do not clarify any potential causal relation between study variables. Last, my study did not differentiate between purely elective surgery versus corrective cosmetic surgery (i.e. types of surgery), preventing the

possibility of knowing if the differences in types of cosmetic surgery could have an effect on the individuals' acceptance of cosmetic surgery.

Table 1 Means and Standard Deviations of Primary Study Variables as a Function of Ethnicity and Gender

VARIABLE		ETHNICITY (N = 324)							
		Whites		Hispanics		African Americans		Asian Americans	
		Women	Men	Women	Men	Women	Men	Women	Men
SATQ	M (SD)	3.34 (.74)	2.81 (.78)	2.92 (.94)	2.93 (1.04)	2.59 (.78)	2.51 (.84)	3.11 (.84)	3.13 (.72)
ACSS		3.00 (.88)	2.71 (.77)	2.76 (.74)	2.44 (.66)	2.56 (.71)	2.62 (.91)	2.90 (1.11)	2.94 (.52)
ACSW		3.25 (.81)	3.13 (.76)	3.03 (.77)	3.32 (.79)	2.97 (.73)	2.95 (.56)	3.20 (.93)	3.77 (.66)
ACSM		3.06 (.71)	2.97 (.77)	2.92 (.75)	2.99 (.78)	2.58 (.90)	2.78 (1.01)	3.00 (1.05)	3.20 (.67)

Note: SATQ = Sociocultural Attitudes Towards Appearance Scale-3 (Thompson, van den Berg, Roehrig, Guarda, & Heinberg, 2004).

ACSS = Attitudes Toward Cosmetic Surgery for Self (author)

ACSW = Attitudes Toward Cosmetic Surgery for Women (author)

ACSM = Attitudes Toward Cosmetic Surgery for Men (author)

Whites' n = 215; Hispanic' n = 52; African Americans' n = 33; Asian Americans' n = 24.

Women's n = 226; Men's n = 98

Table 2 Correlation Matrix for All Study Variables (N = 324)

<i>Variables</i>	Age	SATQ	ACSS	ACSW	ACSM	Self-Esteem	<i>n</i> Approval
Age	--	--	--	--	--	--	--
SATQ	.00	--	--	--	--	--	--
ACSS	.04	.48***	--	--	--	--	--
ACSW	-.07	.33***	.61***	--	--	--	--
ACSM	-.04	.31***	.63***	.76***	--	--	--
Self-Esteem	.12*	.50***	-.31***	-.17**	-.20***	--	--
<i>n</i> Approval	-.08	.40***	.32***	.19**	.19**	-.49***	--

Note: *** $p < .001$; ** $p < .01$; * $p < .05$.

SATQ = Sociocultural Attitudes Towards Appearance Scale-3 (Thompson, van den Berg, Roehrig, Guarda, & Heinberg, 2004).

ACSS = Attitudes Toward Cosmetic Surgery for Self (author)

ACSW = Attitudes Toward Cosmetic Surgery for Women (author)

ACSM = Attitudes Toward Cosmetic Surgery for Men (author)

SCALES

Demographics

- 1) Age _____
- 2) Gender (circle one): Male Female
- 3) Ethnicity: (circle one): White / European American
African American / Black
Asian American
Latino/a or Hispanic
 If Hispanic, please circle subgroup:
 Mexican American
 Cuban
 Puerto Rican
 Central American (if so, please specify country): _____
 South American (if so, please specify country): _____
 Other (If so, please specify country): _____
- 4) Class Standing: (If you are an undergraduate college student currently):
 Circle one: Freshman (0-30 hours)
 Sophomore (31-60 hours)
 Junior (61-90 hours)
 Senior (91 or more hours)
- 5) Highest level of education attained by your father (circle one only).
 Circle one: Elementary 1 2 3 4 5 6
 Secondary (Junior High) 7 8
 High School 9 10 11 12
 Vocational School/Community College 1 2
 College/University 1 2 3 4
 Graduate School/Professional School 1 2 3 4 5
- 6) Highest level of education attained by your mother (circle one only):
 Circle one: Elementary 1 2 3 4 5 6
 Secondary (Junior High) 7 8
 High School 9 10 11 12
 Vocational School/Community College 1 2
 College/University 1 2 3 4
 Graduate School/Professional School 1 2 3 4 5
- 7) Please circle yes or no to the following questions
 - Have you ever had cosmetic surgery before? Yes No
 - Has anyone in your family ever had cosmetic surgery before? Yes No
 - Have any of your friends ever had cosmetic surgery before? Yes No

Sociocultural Attitudes Towards Appearance Scale-3 (SATQ-3)

Please read each of the following items carefully and indicate the number that best reflects your agreement with the statement.

Definitely Disagree **Mostly Disagree** **Neither Agree Nor Disagree** **Mostly Agree** **Definitely Agree**
1 **2** **3** **4** **5**

1. TV programs are an important source of information about fashion and “being attractive.” _____
2. I’ve felt pressure from TV or magazines to lose weight. _____
3. I do not care if my body looks like the body of people who are on TV. _____
4. I compare my body to the bodies of people who are on TV. _____
5. TV commercials are an important source of information fashion and “being attractive.” _____
6. I do not feel pressure from TV or magazines to look pretty. _____
7. I would like my body to look like the models who appear in magazines. _____
8. I compare my appearance to the appearance of TV and movie stars. _____
9. Music videos on TV are not an important source of information about fashion and “being attractive.” -----
10. I’ve felt pressure from TV and magazines to be thin. _____
11. I would like my body to look like the people who are in movies. _____
12. I do not compare my body to the bodies of people who appear in magazines. _____
13. Magazine articles are not an important source of information about fashion and “being attractive.” _____
14. I’ve felt pressure from TV or magazines to have a perfect body. _____
15. I wish I looked like the models in music videos. _____

16. I compare my appearance to the appearance of people in magazines. _____
17. Magazine advertisements are an important source of information about fashion and
“being attractive.” _____
18. I’ve felt pressure from TV or magazines to diet. _____
19. I do not wish to look as athletic as the people in magazines. _____
20. I compare my body to that of people in “good shape.” _____
21. Pictures in magazines are an important source of information about fashion and “being
Attractive. _____
22. I’ve felt pressure from TV or magazines to exercise. _____
23. I wish I looked as athletic as sports stars. _____
24. I compare my body to that of people who are athletic. _____
25. Movies are an important source of information about fashion and “being attractive.” _____
26. I’ve felt pressure from TV or magazines to change my appearance. _____
27. I do not try to look like the people on TV. _____
28. Movie stars are not an important source of information about fashion and “being
attractive.” _____
29. Famous people are an important source of information about fashion and “being
attractive.” _____
30. I try to look like sports athletes. _____

The State Self-Esteem Scale (SSES)

Please read each of the following items carefully and indicate the number that best reflects your agreement with the statement.

1. I feel confident about my abilities.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

2. I am worried about whether I am regarded as a success or a failure.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

3. I feel satisfied with the way my body looks right now.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

4. I feel frustrated or rattled about my performance.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

5. I feel that I am having trouble understanding things that I read.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

6. I feel that others respect and admire me.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

7. I am dissatisfied with my weight.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

8. I feel self-conscious.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

9. I feel as smart as others.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

10. I feel displeased with myself.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

11. I feel good about myself.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

12. I am pleased with my appearance right now.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

13. I am worried about what other people think of me.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

14. I feel confident that I understand things.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

15. I feel inferior to others at this moment.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

16. I feel unattractive.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

17. I feel concern about the impression I am making.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

18. I feel that I have less scholastic ability right now than others.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

19. I feel like I'm not doing well.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

20. I am worried about looking foolish.

1 = not at all 2 = a little bit 3 = somewhat 4 = very much 5 = extremely

Need For Approval – Short Form (Martin-Larsen Approval Motivation)

Please read each of the following items carefully and indicate the number that best reflects your agreement with the statement.

1) I would rather be myself than be well thought of.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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2) I change my opinion (or the way that I do things) in order to please someone else.

Strongly Disagree 1	Disagree 2	Unsure 3	Agree 4	Strongly Agree 5
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3) In order to get along and be liked, I tend to be what people expect me to be.

Strongly Disagree 1	Disagree 2	Unsure 3	Agree 4	Strongly Agree 5
------------------------	---------------	-------------	------------	---------------------

4) I find it difficult to talk about my ideas if they are contrary to group opinion.

Strongly Disagree 1	Disagree 2	Unsure 3	Agree 4	Strongly Agree 5
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5) I am willing to argue only if I know that my friends will back me up.

Strongly Disagree 1	Disagree 2	Unsure 3	Agree 4	Strongly Agree 5
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6) I seldom feel the need to make excuses or apologies for my behavior.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
------------------------	---------------	-------------	------------	---------------------

7) It is not important to me that I behave “properly” in social situations.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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8) If there is any criticism or anyone says anything about me, I can take it.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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9) I am careful at parties and social gatherings for fear that I will do or say things that others won't like.

Strongly Disagree 1	Disagree 2	Unsure 3	Agree 4	Strongly Agree 5
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10) I usually do not change my position when people disagree with me.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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Acceptance of Cosmetic Surgery Scale (ACSS)

Please read each of the following items carefully and indicate the number that best reflects your agreement with the statement according to yourself.

1. It makes sense to have minor cosmetic surgery rather than spending years feeling bad about the way you look.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

2. Cosmetic surgery is a good thing because it can help people feel better about themselves.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

3. In the future, I could end up having some kind of cosmetic surgery.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

4. People who are very unhappy with their physical appearance should consider cosmetic surgery as one option.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

5. If cosmetic surgery can make someone happier with the way they look, then they should try it.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

6. If I could have a surgical procedure done for free I would consider trying cosmetic surgery.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

7. If I knew there would be no negative side effects or pain, I would like to try cosmetic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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8. I have sometimes thought about having cosmetic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
------------------------	---------------	-------------	------------	---------------------

9. I would seriously consider having cosmetic surgery if my partner thought it was a good idea.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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10. I would never have any kind of plastic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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11. I would think about having cosmetic surgery in order to keep looking young.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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12. If it would benefit my career I would think about having plastic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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13. I would seriously consider having cosmetic surgery if I thought my partner would find me more attractive.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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14. Cosmetic surgery can be a big benefit to people's self-image.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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15. If a simple cosmetic surgery procedure would make me more attractive to others, I would think about trying it.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
------------------------	---------------	-------------	------------	---------------------

Acceptance of Cosmetic Surgery Scale (ACSS) Females

1. It makes sense for females to have cosmetic surgery rather than spending years feeling bad about the way they look.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

2. Cosmetic surgery is a good thing for females because it can help them feel better about themselves.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

3. Females who are very unhappy with their physical appearance should consider cosmetic surgery as one option.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

4. If cosmetic surgery can make females happier with the way they look, then they should try it.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

5. If a female could have a surgical procedure done for free she would consider trying cosmetic surgery.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

6. If a female knew there would be no negative side effects or pain, she would like to try cosmetic surgery.

Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
5	4	3	2	1

7. A female would seriously consider having cosmetic surgery if her partner thought it was a good idea.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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8. If it would benefit a female's career she would think about having plastic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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9. Cosmetic surgery can be a big benefit to female's self-image.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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10. If a simple cosmetic surgery procedure would make a female more attractive to others, she would think about trying it.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
------------------------	---------------	-------------	------------	---------------------

Acceptance of Cosmetic Surgery Scale (ACSS)Males

1. It makes sense for males to have cosmetic surgery rather than spending years feeling bad about the way they look.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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2. Cosmetic surgery is a good thing for males because it can help them feel better about themselves.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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3. Males who are very unhappy with their physical appearance should consider cosmetic surgery as one option.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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4. If cosmetic surgery can make males happier with the way they look, then they should try it.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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5. If a male could have a surgical procedure done for free he would consider trying cosmetic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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6. If a male knew there would be no negative side effects or pain, he would like to try cosmetic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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7. A male would seriously consider having cosmetic surgery if his partner thought it was a good idea.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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8. If it would benefit a male's career he would think about having plastic surgery.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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9. Cosmetic surgery can be a big benefit to male's self-image.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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10. If a simple cosmetic surgery procedure would make a male more attractive to others, he would think about trying it.

Strongly Disagree 5	Disagree 4	Unsure 3	Agree 2	Strongly Agree 1
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