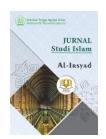


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STUDENTS SATISFACTION WITH THEIR BODY IMAGES AND THEIR ATTITUDES TOWARD PLASTIC SURGERY

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Body image dissatisfaction and increasing interest in cosmetic procedures significant psychosocial challenges among university students. This study examined body image satisfaction levels, areas of physical dissatisfaction, and attitudes toward plastic surgery among University of Zakho students. A descriptive survey approach collected data from 49 students (28 males, 21 females) using a validated 10-item questionnaire measuring satisfaction and attitudes. Analysis revealed hierarchical patterns of body dissatisfaction, with the nose being dissatisfying facial feature (91.8% reported dissatisfaction), followed by hair. The chest area generated highest body dissatisfaction (80% of those reporting body issues), followed by abdomen/buttocks. Students strongly perceived increased prevalence of cosmetic procedures (67.3% agreed "to a large extent") and acknowledged significant media influence (69.4%). While recognizing plastic surgery as necessary for others (particularly women), 65.3% expressed unwillingness to pursue such interventions personally, even if cost-free. Statistical analyses found no significant differences in attitudes based on gender or age variables. Findings suggest educational institutions should implement body image programs while regulatory frameworks ensure plastic surgeries address genuine needs rather than reinforcing unrealistic standards.

Abstract

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A. INTRODUCTION

Body image disorder represents a false, distorted self-perception resulting in unwanted cognitive, behavioral, and emotional symptoms (Mironica et al., 2024). This research examines student satisfaction with body shape and attitudes toward plastic surgery (Kasmaei et al., 2020). Attitudes significantly determine behavior as motivational inclinations that provoke and direct actions (Ateq et al., 2024), bridging individual psychological experiences with broader social behaviors (AlBahlal et al., 2023). Body image perception involves complex cognitive, emotional, and social interactions (Song & Johnson, 2020). The "Body Schema" functions as a pre-conscious spatial reference with minimal individual variation (Walker et al., 2021), unlike the subconscious physical image specific to each person's emotional history (Sindi et al., 2023).



Studies indicate increasing demand for plastic surgery worldwide (Hermans et al., 2022), with potential negative psychosocial consequences post-surgery (Arab et al., 2019). Individuals seeking multiple procedures often experience heightened body dissatisfaction, suggesting complex psychological motivations (Nerini et al., 2024). Research confirms attitudes remain among psychology's most prominent concepts (Di Gesto et al., 2022), particularly in educational contexts (Lee & Lee, 2021). Body image dissatisfaction frequently mediates between social media exposure and interest in cosmetic procedures (Gupta et al., 2023; Hermans et al., 2022). This connection highlights the importance for educational institutions and healthcare providers working with young adults (Jung & Hwang, 2016). University students represent a vulnerable population due to developmental stage and high exposure to idealized media images (Guizzo et al., 2021; Truasheim & Bonell, 2024).

The topic's importance relates to physical appearance satisfaction in group competence (Conboy & Mingoia, 2024; Eldaly & Mashaly, 2022). Body image concerns directly influence social confidence, academic performance, and psychological well-being among students (Mills et al., 2018). The phenomenon of young adults' interest in plastic surgery warrants investigation (Atiyeh et al., 2021) as they navigate identity formation amid media influences promoting idealized standards (Chopan et al., 2019; Al Ghadeer et al., 2021). This research provides critical insights into students' body image perceptions during formative years (Qolamani et al., 2024), revealing complex relationships between media influence, personal boundaries, and cosmetic procedure normalization (AlBahlal et al., 2023). Such understanding matters especially in educational settings where digital technologies shape self-perception (Qolamani et al., 2024). Identifying specific dissatisfaction patterns helps educational institutions develop targeted interventions (Conboy & Mingoia, 2024) while ensuring plastic surgery serves genuine needs rather than exploiting insecurities (Aldosari, 2020). This bridges theory and applications for policy development regionally and beyond (Mortada et al., 2023).

Gender-comparative approaches illuminate how sociocultural factors affect body image perceptions across demographics (Ashikali & Dittmar, 2016). Systematic reviews indicate that approximately 70% of female and 60% of male university students report body dissatisfaction (Alghamdi & Bogari, 2020), with social media usage significantly correlating with both increased concerns and positive attitudes toward cosmetic procedures (Mironica et al., 2024; Truasheim & Bonell, 2024). The research aims to identify dissatisfied areas of the head and body according to descending order, to discover the attitudes of male and female respondents towards physical plastic surgeries according to the severity of each question stated in the research tool, and to check if there are statistical significant differences in attitudes towards physical plastic surgery at the level of statistical significance (0.05) according to the variables of gender and age groups: (20-24), (25-29), (30 and older). The current research is limited to students of the Faculty of Education for evening study at the University of Zakho for the academic year (2021-2022).

Psychological satisfaction represents contentment where situations meet individual desires (Al Ghadeer et al., 2021), described as positive emotional responses to fulfilled expectations (Abbas & Dodeen, 2022). In body image contexts, satisfaction relates to congruence between perceived appearance and internalized ideals, significantly impacting wellbeing (Conboy & Mingoia, 2024). This broad concept encompasses personal, occupational,

and social dimensions indicating wellbeing states (Ashikali & Dittmar, 2016; Mortada et al., 2023). Attitudes in psychology explain decisions and actions through acquired ideas and beliefs from life interactions (Gupta et al., 2023; Zhou, 2022). They may be negative or positive, transforming into behaviors for general and educational situations (Eldaly & Mashaly, 2022). Attitudes comprise social and cultural outcomes from socialization, interaction, and experiences alongside natural environmental conditions (Chan et al., 2023; Lee & Lee, 2021).

The three main attitudinal components include: 1) The affective component involving feelings about social issues (Mortada et al., 2023; Gupta et al., 2023), producing positive or negative responses that may lack clear justification (Lee & Lee, 2021); 2) The cognitive component concerning information, facts, knowledge, judgments, and beliefs related to orientation subjects (Truasheim & Bonell, 2024) - greater knowledge clarifies orientation (Alghamdi & Bogari, 2020). Social media exposure significantly shapes cognitive components toward aesthetic interventions (Hermans et al., 2022). Students showing receptive responses may understand these studies' nature and social role (Di Gesto et al., 2022); 3) The behavioral component representing responses to attitude objects (Zhou, 2022), influenced by socialization controls affecting component strength, social reception, and individual independence (Eldaly & Mashaly, 2022).

Knowledge about issues (cognitive component) may exist without emotional inclination, preventing behavioral manifestation (Truasheim & Bonell, 2024). Students may understand cosmetic procedure benefits and risks yet show no interest in pursuing them due to cultural values (Truasheim & Bonell, 2024). Conversely, emotional attachment may exist despite insufficient information (Mortada et al., 2023), with any component potentially dominating orientation direction (Mortada et al., 2023). Plastic surgery improves appearance or function of visible body parts with deficiencies, damage, or deformities (Arab et al., 2019). Elective procedures correct natural, non-pathological deformities like scars or nasal appearance (Atiyeh et al., 2021). University students often seek rhinoplasty for perceived facial imbalance rather than functional issues, highlighting aesthetic motivations (Arab et al., 2019). Reconstructive surgery restores form and function to damaged tissues from trauma, injury, burns, or congenital abnormalities (Atiyeh et al., 2021).

This study aims to explore University of Zakho students' body image satisfaction levels and attitudes toward plastic surgery, identifying patterns of physical dissatisfaction and detecting gender and age-related differences. Results revealed widespread dissatisfaction with nose and hair facially, and chest and abdomen/buttocks bodily, alongside strong recognition of media influence and plastic surgery normalization. Nevertheless, 65.3% of participants expressed personal unwillingness to undergo such procedures. These findings contribute to understanding the complex relationship between body image and sociocultural standards, supporting the development of educational body awareness programs and regulatory frameworks for cosmetic surgeries.

B. RESEARCH METHOD

This study employed a descriptive survey method to identify attitudes toward plastic surgery among university students (Walker et al., 2021). The research population comprised 716 students from the Faculty of Education/evening study at the University of Zakho, from which 65 questionnaires (9%) were randomly distributed, yielding 49 completed responses for

analysis. Finding no suitable existing instrument, the researchers developed a custom questionnaire with two sections: personal variables and physical satisfaction/attitudes toward plastic surgery. The questionnaire addressed satisfaction with physical appearance, past surgeries, surgery satisfaction, desire for future procedures, and attitudes toward cosmetic interventions related to emotional and mental maturity. Validity was established through five expert arbitrators with a 75% agreement threshold, resulting in reorganization and reformulation of certain items. The final instrument contained 10 items with four response options ranging from "no" to "yes to a large extent" (Jung & Hwang, 2016). Reliability testing using Cronbach's method yielded a coefficient of 0.71. The questionnaire was translated into Arabic and Kurdish, reviewed by a legal translator and psychology professor fluent in both languages, with modifications to suit respondent comprehension levels. Data collection occurred from February 20-28, 2022.

C. RESULTS AND DISCUSSION

The study examined body image satisfaction and attitudes toward plastic surgery among students at the Faculty of Education, University of Zakho. Data collection revealed that 45 participants (91.8%) of the research sample identified at least one area of the head with which they were dissatisfied. The analysis showed that nasal dissatisfaction demonstrated the highest frequency among respondents, followed by hair, cheeks, and eyelids, respectively. Lips, ears, and chin showed minimal dissatisfaction. This pattern of dissatisfaction may be attributed to the cultural and social prominence of these features in determining facial attractiveness, with the nose being particularly central to facial harmony and symmetry in many aesthetic traditions.

Regarding body dissatisfaction, 15 participants (30.6%) reported specific body areas with which they were dissatisfied. The chest region received the highest dissatisfaction rating (80% of those reporting body dissatisfaction), with the abdominal and buttocks regions jointly occupying the second position (approximately 30%). The pelvic region showed the third highest frequency of dissatisfaction (15%). This pattern reflects contemporary aesthetic standards that emphasize chest appearance (whether breast characteristics for females or muscular development for males) and the abdominal region as significant determinants of physical attractiveness. The researchers attribute this to the importance of a harmonious physical self because it indicates the beauty of the individual's body and expresses their health and interest in appearance.

To assess participants' attitudes toward plastic surgery, the researchers employed a severity analysis methodology for each questionnaire item. Table 1 presents these attitudes arranged in descending order of severity scores, representing the intensity of agreement across the sample population. The severity scores were calculated based on weighted responses to provide a numerical representation of attitudinal strength, with higher scores indicating stronger agreement with the statement.

Table 1 Severity and Ranking of Attitudes toward Plastic Surgery Items

Campanaa		The description	Alternatives					Ranking
Sequence of paragraphs	Items		no	Yes, to a small	Yes, to a moderate	Yes, to a large	severity	accordin g to
				extent	degree	extent		severity
1	Do you think that people tend to have plastic	Repetition	1	0	15	33	3.63	the first
1	surgery more than before?	%	2.0	0.0	30.6	67.3	3.03	
2	Do you think that making fun of people's	Repetition	17	11	14	7	2.22	Fifth

	appearance is a convincing factor to push them to undergo plastic surgery?	%	34.7	22.4	28.6	14.3		
3	Do you think that most young people who	Repetition	9	7	15	18	2.86	the
3	undergo plastic surgery really need it?	%	18.4	14.3	30.6	36.7	2.80	fourth
	Do you think that most young women who	Repetition	3	3	7	36		
4	undergo plastic surgery consider it necessary for them?	%	6.1	6.1	14.3	73.5	3.55	the third
5 Do you	Do you find that the media has a role in	Repetition	1	2	12	34	3.61	the
3	increasing plastic surgery in society?	%	2.0	4.1	24.5	69.4		second
D	Do you support individuals who are dissatisfied	Repetition	33	4	6	6	1.69	VIII
6	with their appearance undergoing plastic surgery?	%	67.3	8.2	12.2	12.2		
7	they are dissatisfied with the you think Do	Repetition	38	2	5	4	1.49	Ninth
	operation they performed?	%	77.6	4.1	10.2	8.2	11.7	1 111111
χ ,	Do you think they would like to repeat the	Repetition	30	4	6	9	1.00	Seventh
	operation in that area?	%	61.2	8.2	12.2	18.4	1.88	
9	If Yen has not had any plastic surgery in the past,	Repetition	26	4	9	10	2.06	VI
	does Yen want to have it done in the future?	%	53.1	8.2	18.4	20.4		
10	If you were given the opportunity to have plastic	Repetition	32	4	9	4	1.69	VIII
10	surgery for free, would you do it?	%	65.3	8.2	18.4	8.2	1.07	

Table 1 provides comprehensive insights into students' attitudes toward plastic surgery, organized by severity scores that represent the strength of agreement with each statement. The data reveal a clear attitudinal hierarchy, with the highest agreement (severity 3.63) regarding the increased prevalence of plastic surgery in contemporary society, followed closely by recognition of media influence (3.61) and the perception that young women consider plastic surgery necessary (3.55). Mid-range attitudes include beliefs about young people's genuine need for procedures (2.86) and the limited role of appearance-based mockery as motivation (2.22). The lowest agreement appeared for statements regarding post-operative dissatisfaction (1.49), indicating most participants believe plastic surgery recipients are satisfied with outcomes. Notably, despite acknowledging the normalization and necessity of plastic surgery for others, participants demonstrated minimal personal support for undergoing such procedures (1.69), suggesting a significant gap between societal acceptance and personal willingness to pursue surgical interventions for aesthetic purposes. Similar findings were reported by Di Gesto et al. (2022), who found that university students across multiple cultural contexts recognized increased normalization of plastic surgery while maintaining personal hesitancy toward procedures, suggesting a complex relationship between societal acceptance and individual boundaries.

To examine potential demographic differences in attitudes toward plastic surgery, the researchers compared responses based on gender and age group variables. Table 2 presents the results of the t-test analysis examining gender differences in attitudes toward plastic surgery.

Table 2 *Gender Differences in Attitudes toward Plastic Surgery*

Gender	Number	Mean	Standard Deviation	t-v:	Result		
				Calculated	Tabulated		
Males	28	24.14	4.927	0.83	2.01 (0.05,	No significant	
Females	21	25.43	5.819		df=47)	difference	

Table 2 reveals that the calculated T-value (0.83) is less than the tabulated T-value (2.01) at a significance level of 0.05 and a degree of freedom of 47, indicating no statistically significant difference between male and female attitudes toward plastic surgery. Despite the slightly higher mean score for females (25.43) compared to males (24.14), this difference did not reach statistical significance. This finding suggests that gender does not significantly influence attitudes toward plastic surgery among this university student population, possibly

reflecting similar levels of exposure to media influences and beauty standards across genders, or similar levels of psychological and social awareness regarding individual rights and freedoms. This result contradicts findings by AlBahlal et al. (2023) who identified significant gender differences in attitudes toward cosmetic interventions among university students, suggesting that educational context may moderate the relationship between gender and cosmetic surgery acceptance.

The researchers also investigated potential differences in attitudes toward plastic surgery based on age groups. Table 3 presents the results of a one-way analysis of variance (ANOVA) examining these differences.

Age Group	Number	Mean	Source	Sum of Squares	df	Mean Square	F-value
20-24	24	24.08	Between ages	27.146	2	13.573	0.47
25-29	18	25.67	Within ages	1325.262	46	28.810	-
30+	7	24.29	Total	1352.408	48		•

Table 3 Age Group Differences in Attitudes toward Plastic Surgery

Table 3 demonstrates that the calculated F-value (0.47) is less than the tabulated F-value (3.20) at significance level 0.05 and degrees of freedom 2-46, indicating no statistically significant differences in attitudes toward plastic surgery across the three age groups. The slight variation in mean scores across age groups (24.08 for 20-24 years, 25.67 for 25-29 years, and 24.29 for 30+ years) did not reach statistical significance. This finding suggests that within this university student population, age does not significantly determine attitudes toward plastic surgery, potentially indicating that within this educational context, factors such as shared media consumption, similar social environments, and comparable exposure to beauty standards may have more influence than age-related developmental differences. Research by Hermans et al. (2022) similarly found no significant age-related differences in cosmetic surgery attitudes among university cohorts, suggesting that educational environments may create more homogeneous perspectives that transcend age-related developmental differences.

Body image dissatisfaction represents a significant psychological concern among young adults, with profound implications for self-esteem, social functioning, and mental health. The findings of this study provide valuable insights into how university students perceive their bodies and their attitudes toward surgical interventions for aesthetic purposes. This discussion explores the multidimensional aspects of these perceptions and attitudes while comparing the current findings with previous research. Research by Hermans et al., (2022) found significant associations between social media usage, body image concerns, and cosmetic procedure normalization among young adults, indicating that digital platforms create powerful pathways to physical appearance dissatisfaction. Similarly, Ateq et al., (2024) demonstrated strong correlations between social media use, body dysmorphic disorder development, and positive attitudes toward cosmetic interventions, particularly among university-aged populations. Mironica et al. (2024) further established that body image dissatisfaction frequently mediates between social media exposure and interest in aesthetic procedures, highlighting this relationship's clinical significance in modern educational settings.

The high dissatisfaction with nasal appearance among respondents aligns with previous research suggesting facial features receive disproportionate attention in self-evaluation. The prominence of the nose in determining facial symmetry and proportion makes it a focal point

for self-criticism. This focus on nasal appearance may be influenced by cultural beauty standards that emphasize certain nasal shapes over others, creating perceived gaps between reality and idealized appearance. Similarly, hair dissatisfaction likely relates to cultural associations between hair quality and attractiveness, youth, and vitality. These findings parallel the observations that body image perception involves multiple dimensions, including perceptual, cognitive, and emotional components that interact to form self-evaluation. Sindi et al. (2023) found that facial features, particularly the nose, were most commonly associated with body dysmorphic concerns among young adults, with nasal appearance being a primary focus of dissatisfaction. Similarly, Gupta et al. (2023) demonstrated that social media platforms disproportionately amplify attention to facial features through filters and editing tools, creating unrealistic standards that particularly affect university students' perception of their facial aesthetics.

The finding that chest areas generated the highest body dissatisfaction rates demonstrates the powerful influence of media-promoted body ideals. This likely reflects gendered beauty standards for females regarding breast appearance and for males regarding chest muscularity and definition. This pattern of body dissatisfaction illuminates how contemporary beauty standards are internalized and how they impact self-perception across genders. The significant dissatisfaction with abdominal appearance similarly reflects beauty standards valorizing flat stomachs and defined muscles as indicators of discipline and attractiveness rather than acknowledging natural body diversity. Research has identified that body image is dynamic and significantly influenced by sociocultural factors, supporting our findings regarding the impact of cultural beauty standards on body satisfaction. Conboy and Mingoia (2024) found strong correlations between social media usage and chest/abdominal dissatisfaction, particularly among university-aged populations exposed to idealized body images. Similarly, Mills et al. (2018) demonstrated that exposure to filtered images significantly increased body comparison behaviors, especially regarding chest and abdominal regions.

Students' attitudes toward plastic surgery reveal complex relationships between personal body image, social influence, and decision-making. The strong recognition that people increasingly turn to plastic surgery reflects awareness of changing social norms regarding physical enhancement. This trend may be attributed to multiple factors, including normalization of plastic surgery in media, reduced stigma, increased accessibility and safety of procedures, and growing emphasis on physical appearance in social contexts. Previous studies reported similar findings in their study of Pakistani university students, where a significant percentage of participants expressed interest in undergoing plastic surgery at some point in their lives, indicating this trend is not isolated to a single cultural context. AlBahlal et al. (2023) found similar awareness patterns among Saudi university students, with participants demonstrating high recognition of plastic surgery trends while maintaining personal hesitation toward procedures. Truasheim and Bonell (2024) further confirmed cross-cultural similarities in how university students perceive cosmetic interventions as increasingly normalized in contemporary society.

The strong acknowledgment of media influence on increasing plastic surgery rates demonstrates students' media literacy and understanding of how beauty standards are constructed and propagated through various channels. The media's role extends beyond simply showcasing plastic surgery to normalizing it through celebrity examples, success stories, and

framing procedures as self-improvement rather than vanity. This awareness doesn't necessarily translate to critical resistance against these influences, as evidenced by continued body dissatisfaction despite media literacy. This finding aligns with research that identified media influence as a significant factor in normalizing plastic surgery and shaping perceptions of physical attractiveness.

Interestingly, students believe plastic surgery is necessary for those who undergo it, suggesting a nuanced understanding of motivation beyond mere vanity. This perspective acknowledges genuine psychological distress from perceived physical imperfections, making surgical intervention a means of alleviating distress rather than pursuing arbitrary aesthetic ideals. However, the low support for individuals undergoing plastic surgery solely due to appearance dissatisfaction indicates boundaries around appropriate motivations for surgical intervention. This selective acceptance suggests students distinguish between procedures addressing significant distress versus minor concerns, implying value judgments about proportionality in response to body image issues. These findings support previous research, which found relationships between attitudes toward plastic surgery and psychological factors such as self-awareness. Nerini et al. (2024) identified similar patterns of selective acceptance among university students, with participants distinguishing between procedures addressing psychological distress versus minor cosmetic concerns. Arab et al. (2019) further demonstrated that decision-making regarding cosmetic procedures involved complex negotiations between perceived necessity and personal boundaries.

The finding that most respondents would not pursue plastic surgery even if offered for free challenges assumptions about young adults' relationship with physical enhancement. This reluctance suggests factors beyond cost, such as perceived risks, fear of unnatural results, religious beliefs, or values emphasizing natural appearance, influence decisions about bodily modification. It indicates that while students recognize increased societal acceptance of plastic surgery, they maintain personal boundaries limiting their participation in these practices. This finding contrasts somewhat with previous studies, suggesting potential cultural or contextual differences in willingness to undergo plastic surgery. Di Gesto et al. (2022) observed similar patterns of personal reluctance despite societal acceptance among Italian university students, suggesting cross-cultural consistency in this attitudinal dimension. Mironica et al. (2024) further identified that religious and cultural values significantly predicted personal boundaries regarding cosmetic interventions despite awareness of increasing prevalence.

The lack of significant gender differences in attitudes toward plastic surgery contradicts expectations based on gendered beauty pressures and differs from findings in other studies, which found gender differences in attitudes toward plastic surgery. This finding suggests university education may foster critical thinking about beauty standards across genders, leading to more nuanced evaluations of plastic surgery regardless of gender. Similarly, the absence of age-related differences indicates that attitudes toward plastic surgery among this sample are shaped more by educational and social context than age-related factors. This finding diverges somewhat from other research, which found age-related differences in attitudes toward plastic surgery, suggesting the potential uniqueness of our university sample. Eldaly and Mashaly (2022) similarly found diminished gender differences in cosmetic surgery attitudes among highly educated populations, suggesting educational contexts may moderate gendered beauty pressures. Chan et al. (2023) further demonstrated that university environments created more

homogeneous perspectives on body modification that transcended traditional demographic predictors.

The relationship between body image perception and attitudes toward plastic surgery revealed in this study aligns with previous findings that a more positive body self-image correlates with less tendency toward plastic surgery. Our finding that most participants would not pursue plastic surgery despite acknowledging its prevalence suggests a potential protective factor in university education or the specific cultural context of this sample. Mortada et al. (2023) identified similar protective factors among university students, with educational environments fostering critical evaluation of media-promoted beauty standards. Atiyeh et al. (2021) further demonstrated that higher educational achievement correlated with more nuanced attitudes toward cosmetic interventions, emphasizing psychological rather than purely aesthetic motivations.

This study's findings contribute to understanding the complex interplay between body image perception, sociocultural influences, and attitudes toward aesthetic interventions among young adults. While acknowledging increased plastic surgery trends and media influence, students maintain discerning attitudes about necessary versus optional procedures and personal boundaries regarding surgical enhancements. These results may inform educational interventions addressing body image issues and media literacy among university students, potentially fostering more critical engagement with beauty standards and reducing vulnerability to unrealistic appearance ideals. Abbas and Dodeen (2022) similarly highlighted the importance of educational interventions targeting body image concerns among university students as protective factors against unnecessary cosmetic procedures. Al Ghadeer et al. (2021) demonstrated that comprehensive educational programs addressing media literacy and body image improved self-esteem and reduced interest in cosmetic interventions among young adults, supporting the potential educational applications of our findings.

D. CONCLUSION

This study revealed significant body image concerns among university students, with highest facial dissatisfaction directed toward nasal appearance followed by hair, while chest areas generated the greatest body dissatisfaction, followed by abdomen/buttocks regions. Students demonstrated strong recognition of plastic surgery's increasing prevalence and media's influential role in normalizing cosmetic procedures. Despite acknowledging plastic surgery as necessary for some individuals (particularly women), most participants expressed personal unwillingness to pursue such interventions even if financially accessible. Statistical analyses revealed no significant gender or age differences in attitudes toward plastic surgery, suggesting shared sociocultural influences across demographic groups. These findings indicate complex attitude formations where external awareness of cosmetic surgery's normalization exists alongside personal boundaries limiting acceptance of aesthetic interventions. Educational institutions should implement body image awareness programs focusing on health-centered approaches to appearance satisfaction rather than surgical interventions. Healthcare systems should establish psychological screening protocols for cosmetic surgery candidates to identify underlying body image disorders. Future research directions should explore post-surgical satisfaction outcomes, examine relationships between body dysmorphic disorder and surgical interventions, and investigate correlations between academic performance and cosmetic surgery considerations.

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