



Woman in Development and Politics

Developing a Causal Model of Metacognitive Assessment of Body Deformity in Women Undergoing Nose Surgery Using Psychological Capital and Spiritual Well-Being as Predictors: The Mediating Role of Social Conformity

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Article Info	ABSTRACT
<p>Article type: Research Article</p> <p>Article history: Received: 8 June 2023 Received in revised form: 21 September 2023 Accepted: 15 October 2023 Published online: 20 March 2024</p> <p>Keywords: Metacognitive Assessment of Body Deformity, Spiritual Well-Being, Psychological Capital, Social Conformity.</p>	<p>Introduction</p> <p>According to the International Society of Aesthetic Plastic Surgery (2020) report, the number of aesthetic surgeries worldwide has increased from 20.1 million to 25 million in the last four years. Rhinoplasty, one of the most common and popular procedures globally, is seven times more prevalent in Iran than in the United States. This trend is consistently rising, especially among women. Women seeking aesthetic surgery are not necessarily pursuing beauty but aspire to achieve a normative appearance. The concept of a "normal appearance" is a cognitive construct. Therefore, delving into cognitive mechanisms involved in self-perception and regulation through understanding the underlying psychopathological processes contributes to a deeper comprehension. These mechanisms encompass the domain of metacognition or thinking about thinking. At times, physical attractiveness becomes so crucial that social acceptance and individual success are entirely influenced by an idealized appearance. Consequently, individuals experience high dissatisfaction with their image, leading to a decline in the quality of life and psychosocial well-being, resulting in diminished psychological capital. Psychological capital can act as a protective barrier against stressors and mental health issues, such as anxiety. A research literature review indicates that body image, rather than the metacognitive assessment of body dysmorphic disorder, is influenced by social networks, social factors, and lower social conformity, religiosity, and spiritual well-being. These factors were observed as influential in the inclination towards rhinoplasty, a facet of aesthetic surgery. The primary aim of this research is to assess the fit of casual model of metacognitive assessment of body dysmorphic disorder based on psychological capital and spiritual well-being in women seeking rhinoplasty, with social conformity serving as a mediating factor.</p> <p>Methodology</p> <p>The present research follows a descriptive design, employing correlation analysis and structural equation modeling. The study population comprises all individuals seeking rhinoplasty, and consulting specialists in aesthetic and nasal surgery in districts 1 and 2 of Tehran during the fall and winter of 2023. A purposive sample of 300 participants, women aged 20 to 45 with diverse educational backgrounds, inclined towards rhinoplasty for reasons unrelated to physiological nasal disorders, such as respiratory or chronic infection-related olfactory issues., was selected. Participants had visited designated clinics and expressed willingness to participate in the study. In the statistical analysis section, descriptive statistics, including mean, standard deviation, correlation, and normality of variable distributions, were examined Structural equation modeling was utilized to analyze the data and address the research questions. The data were analyzed using SPSS and Amos software, version 24.</p> <p>Results</p> <p>The findings of the current research did not confirm a direct impact of psychological capital on the metacognitive assessment of body dysmorphic disorder in women seeking rhinoplasty. To elucidate the discrepancy in results compared to past research, it can be</p>

inferred that differences in the study population may contribute to this disparity. The path coefficient between psychological capital and social conformity is negative and significant, indicating that psychological capital negatively and significantly influences social conformity in women seeking rhinoplasty. Individuals with higher psychological capital characterized by increased self-efficacy, optimism, and resilience, perceive themselves as more capable of controlling or influencing situations, leading to reduced conformity to societal norms. The negative impact of spiritual well-being on metacognitive assessment is explained by the positive influence of spiritual well-being on the interpretation of events, thoughts, and positive psychological constructs such as happiness and optimism in women with body image disorders. Spiritual well-being emphasizes self-compassion in facing the shame associated with perceptions and behaviors related to body image, potentially affecting the metacognitive assessment of body dysmorphic disorder. Individuals with higher spiritual well-being believe in superior forces or a higher power that can influence aspects of their lives, including health, allowing them to perceive themselves as responsible. In such circumstances, individuals with higher spiritual well-being are less pressured to conform socially for social harmony and employ active coping strategies, mitigating social pressure for conformity. High psychological capital enhances individuals' psychological capabilities, such as self-efficacy, optimistic hope, and resilience.

Conclusion

The results of the current research indicate that social conformity mediates the effects of psychological capital and spiritual well-being on the metacognitive assessment of body dysmorphic disorder in women seeking rhinoplasty. Psychological capital and spiritual well-being, by influencing individuals' perceived control over coping with negative situations and experiences, as well as fostering positive attitudes towards social pressure, reduce metacognitive assessments of body dysmorphic disorder. Individuals with higher spiritual well-being, relying on their perceived ability to control situations through spirituality, experience less social pressure for conformity. It is suggested that the results of this study, primarily drawn from economically and culturally affluent segments of society, be cautiously generalized to other social classes in Tehran and the broader population. Replication of the research for lower social classes and males is recommended. The current study did not address the cultural differences and the impact of social networks in shaping beauty standards, influencing the inclination towards cosmetic surgery, and determining its outcomes. This variable can be considered in future research. Monitoring social networks within a legal and regulatory framework to align with the culture of human dignity and honor can eliminate idealized body images as tools for modern world objectives and replace them with images aligned with the culture of divine humanity to enhance the thinking of Muslim women. Educational and psychological interventions are recommended to foster body satisfaction and positive attitudes towards it, while discouraging negative attitudes towards cosmetic surgery and its consequences. Creating an environment for physical activity and exercise, especially for girls, contributes to weight management, body fitness, and reduced inclination towards cosmetic surgery among students.

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