A mapping of the ethical, cultural and psychological aspects of attitudes towards Cosmetic Surgery Tourism

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Abstract
This qualitative research maps the attitudes of the cosmetic surgery tourism stakeholders towards the phenomenon from their ethical, cultural and psychological aspects. Utilitarianism, media culture and mental health state that leads to the decision to experience cosmetic tourism, inform the investigation of the aforementioned aspects. There is a pronounced socio-cultural pressure affecting the motive to travel for cosmetic services, combined with the mental health issues ascending largely from culturally prescribed norms. The authors, by utilizing the constructivist genre of grounded theory, established conclusive evidence that a certain amount of emotional well-being does stem from cosmetic surgery, as long as the societal beauty standards are not solely what drove this decision, in the long run. Thus, the postoperative eudaimonia is temporary, and in order to gain physical and psychological benefits from this medical tourism experience in the long term, a positive aging shift in the perception and operations of cosmetic surgery tourism is deemed as necessary, as the findings of this research demonstrate. Finally, future research opportunities should be directed towards the implications of cosmetic surgery tourism on evolution and the establishment of biohacking as a large share of the offered cosmetic tourism services.

Keywords: cosmetic surgery tourism, psychology, society, media culture, utilitarian ethics, ageism, constructivist grounded theory, positive aging, attitudes, evolution

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1. Introduction

In the introduction section, the background will present the different aspects concerning the cosmetic surgery tourism industry operations and its connection to the ethical, psychological and cultural spheres, along with a problematization, which led to the formulation of the research question.

1.1 Background

1.1.1 The cosmetic surgery tourism market
The cosmetic surgery tourism industry has come to the fore in ongoing debates both in the academic and business field. As its name suggests it pertains to the mobility of tourists from their country of origin to another one, after having made the calculative decision to undergo a cosmetic surgical procedure in their selected tourism destination (Reisman, 2010). With respect to the classification of the aforementioned niche tourism, it is regarded as a subset of medical tourism and from a wider perspective of health tourism, since the purpose of this organized travel is to receive medical services that will result in a bodily and thus overall well-being enhancement (Carrera and Bridges, 2006).

In a study conducted by the International Society of Aesthetic Plastic Surgery (2016) on an international basis, it was discovered that the total number of cosmetic procedures of all sorts that were performed globally, amounted to 23.6 million. Despite the vagueness surrounding the figures of cosmetic surgery tourists due to their varying labeling (Franzblau and Chung, 2013), it is estimated that 780 million tourists engage in long-distance traveling for this specific purpose annually (Majeed, Lu and Javed, 2017). The previously mentioned figures indicate that the cosmetic surgery tourism industry has noted an exponential growth during the last two decades (Fetscherin and Stephano, 2016) and there is no sign of slowing down in the foreseeable future (Campbell, Restrepo and Navas, 2020). The universally high demand for elective aesthetic surgeries as part of a tourism package (Campbell et al., 2019) is analogous to the value that the cosmetic tourists extract from the experience in its entirety (Tompson, 2010).

It would be a preposterous claim that the value created within the confines of cosmetic surgery tourism experience and perceived by its consumers, is solely associated with the
discounted prices for aesthetic operations at the medical center of a developing country (Bell et al., 2011). The body of scientific literature is replete with a variety of push and pull factors that grant cosmetic surgery tourism a leading market share of global medical travel (Lunt, Horsfall and Hanefeld, 2016). The value that the plastic surgery-seeking tourists receive from their experience is co-created through an interplay among the treatment suppliers, the cosmetic tourists, their host environment and its culture (Glinos et al., 2010). A positive perception of this specific form of medical tourism and hospitality’s value proposition is noted in terms of reassurance that the anonymity of cosmetic tourists is protected (Lunt and Carrera, 2010) and post-operative care is guaranteed as a fundamental component of a mutually beneficial patient-doctor relationship (Veerasoontorn and Beise-Zee, 2010). However, the service convergence that is one of the distinct features of the cosmetic surgery tourism industry (Wernz, Thakur Wernz and Phusavat, 2014) pinpoints that the tourism experience in the selected destination constitutes a crucial component of the cosmetic tourism market value and is constructed both in the imagination and the reality of its consumer (Rojek, 1997).

In an attempt to understand the value that the tourism dimension creates for cosmetic tourists, it is plausible to utilize the tourist gaze as a frame of the context in which it is active (Urry, 1995). With that being said, the main value proposition of cosmetic surgery tourism lies in gazing upon one’s future self and renewed body in a more confident way and indubitably the myth of a transformative journey is ubiquitous in several cosmetic surgery tourism meccas’ advertising material (Mainil, Platenkamp and Meulemans, 2011). A global map of the destinations where a large influx of cosmetic tourists is observed, includes Thailand, India, United Arab Emirates, Brazil, Mexico and Hungary, as well as Israel and Turkey as its main cosmetic tourism hubs (Cohen, 2010). Despite the similarities of the offered cosmetic services in these destinations, each one of them retains a distinct profile of cosmetic culture that attracts specific target groups of cosmetic tourists (Holliday et al., 2013a).

1.1.2 The stakeholders as value co-creators in cosmetic tourism experiences
Linking up the cosmetic tourists’ appreciation of the services provision with the maintenance of competitive advantage (Aliu et al., 2016) in a rapidly changing market
landscape (Rodrigues et al., 2017), imposes an investigation of how mutual collaborative relationships are formed between the stakeholders of the studied tourism industry and a clarification of those who hold key positions in the partnering fields of tourism and plastic surgery (Karadayi-Usta and Serdarasan, 2020). A widely acknowledged definition of stakeholders that will be employed in this thesis is the one introduced by Freeman (2010), which identifies as stakeholder every individual, group or organization that exerts power in the activities that are taking place in a field or is affected by the practices in a certain area, resulting in benefits or damages for their invested human and financial capital in the sector (Bose, Dong and Simpson, 2019).

Among the multitude of stakeholders that influence the trajectory of the cosmetic tourism phenomenon, those who play a crucial role within its medical domain are the healthcare practitioners, namely the surgeons and nurses (Ruka and Garel, 2015). Their competences and preparedness to deal with any contingent complication cater to prospect cosmetic tourists’ need for trustworthiness (Park et al., 2021) and act as a precious marketing tool for an effective reputation management of the medical center they represent (Guiry and Vequist, 2014). On the other side of this booming enterprise, cross-border cosmetic tourists are equally participating in touchpoint experiences with the front-end employees of luxurious recovery retreats, while they are recuperating from the cosmetic procedures (Ackerman, 2010). This appoints the hospitality workforce as powerful agents of the non-medical counterpart of cosmetic surgery tourism (Bookman and Bookman, 2007). Equally critical to eliciting favorable customer feedback for a cosmetic trip abroad are the facilitating agents, who act as the link between the medical institutions, hotel businesses and the end consumer (Gan and Frederick, 2018). Within the range of tasks that a medical intermediary is expected to moderate, fall the handling of bureaucratic procedures, such as the issue of travel documents and insurance, eliminating ostensibly beneficial offers of cosmetic surgical tourism and securing a frictionless experience for all the involved parties (Dalstrom, 2013).

Overall, a prerequisite for the smooth operation of the cosmetic tourism industry is the adoption of a collaborative spirit among the stakeholders with different interests. Whose common denominator should idealistically be the delivery of high quality cosmetic
services to the patient (Tham, 2018), who decides to travel overseas with the purpose of changing some features of their appearance, while indulging in recreational tourism activities (Ehrbeck, Guevara and Mango, 2008). In order to mobilize every stakeholder of the cosmetic tourism industry in the value co-creation process, it is pivotal to obtain insight not only in the financial aspects (Burns, 2015), but also in the social dimensions of their vested interests in the destination, which until now has been a severe omission in the strategic planning of the cosmetic tourism industry (John and Chelat, 2013).

1.1.3 The role of media in cosmetic surgery tourism narratives

With physical beauty having reached the status of a *lingua franca* (Prum, 2017), countless social media profiles are looking for attention within the contemporary digital society and in the pursuit of it, they have to seek first for medical one, in order to craft the long-awaited outer appearance that will elicit dithyrambic comments (Montemurro et al., 2015). Through the prism of posthumanism, it is partially socially acceptable to harness the power of medical technology combined with the tourism experience, with an aim to reach the putative beauty ideal (Bordo, 1997). Inarguably the posthuman condition, as it is mediated by the plastic surgery’s scalpel and syringes, as well as the vertiginous flow of advertising images for the cosmetic destinations, constitutes a successor to the demarcated epoch of postmodernism (Martin, 2009).

However, self authenticity is at stake, when cosmetic surgery tourism has become affordable and the majority of the cosmetic surgical tourism consumers opt for interventions that are compliant with the normativity of the aesthetically perfect face and body (Davis, 2002). A large number of cosmetic patients have manifested a ‘prosopagnosia’, in a metaphorical sense, since their reconfigured bodily materiality is identical to that of numerous other ones, who share the same beauty standards and selected the same cosmetic intervention from the menu that these medical tourism centers offer (Holliday et al., 2015). The heightened importance that is placed in creating a novel outer appearance as close as to one’s digital avatar and the willingness to endure a certain amount of pain (Alexias, Dilaki and Tsekeris, 2012), play an etiological role to the collective trauma that is implicit in this sector of tourism and concordant with the
attributes of the libidinal economy (Desmond, 2013), a term that was coined first by Lyotard and further analyzed in Malabou’s scholarly work (Malabou, 2012).

Amid this era of change in cosmetic surgery tourism, which is intertwined with the relentless effort to achieve the cookie-cutter image that is gaining popularity across various social media platforms momentarily, concerns over the ethicality and the cultural force of the aforementioned niche of medical tourism and the knowledge management of its psychological motivators arise (Jones, 2008). With that being said, the research undertaken for this thesis aims to provide a mapping of the ethical and cultural aspects, as well as their connection with the psychological ones, that the attitudes of various stakeholders and other relevant entities to the studied phenomenon hold. Prior to delving into the research question, the rationale behind this specific research will be clarified. Moreover, its potential impact on the scholarly and social fields will be presented along with a problematization of the cosmetic surgery tourism phenomenon and an explanation of the main terms utilized within its relevant discourses.

1.2 Problematization of the Cosmetic Surgery Tourism Phenomenon

Applying the concept of problematization in the context of this thesis, which was initially introduced by Foucault (2006) and served as a critique to his earlier body of work, leads to a twofold task. In the first place, to treat the problematization of cosmetic surgery tourism as a type of critique towards a phenomenon that emerged as a result of social fermentations (Barnett, 2015). On a second note, to expose research gaps in the literature related to the studied phenomenon and question established notions surrounding the cosmetic surgery tourism field, in accordance with the stance that Sandberg and Alvesson (2011) adopt towards problematization.

A vast stream of literature has discounted cosmetic surgery tourism to a buzzword within the research field of media (Foley et al., 2019), while other studies in the field of medicine focus primarily on the magnitude of complications that stem from substandard elective surgical services (Melendez and Alizadeh, 2011), that affect not only the individual, but also put an additional strain on the health system of the home countries (Burkett, 2007). Beyond the medical realm of cosmetic tourism, as Edmonds (2010)
postulates, lie its associations with the human psychological condition and self-esteem. In this respect, it is inevitable for scholars to eschew the negative emotions, such as anxiety about one’s self-image that seek alleviation through cosmetic interventions as Griffiths and Mullock (2017) articulate.

The aforementioned academics have also pointed out in their study, the entwinement of cosmetic surgery tourism market with the field of ethics, claiming that this burgeoning industry has rendered the provision of cosmetic services more inexpensive and hence, has conferred benefits to those who are not affluent enough to afford aesthetic procedures in their initial price, advancing an egalitarian shift in the cosmetic surgery industry. With ‘tourismness’ being one of the components that must coalesce with medical expertise to form the studied phenomenon (Bell et al., 2011), it is plausible that a satisfactory amount of research has been directed towards the examination of cosmetic surgery tourism through the prism of the economic force of globalization (Mazzaschi, 2014). Treating cosmetic surgery tourism as a space where surgical services accompanied by tourism experiences constitute a commodity (Johnston et al., 2010) and are configured in a manner that elicits favorable responses from potential buyers, emphasizes the role of promotional imagery and justifies why media and culture are apparent in the cosmetic tourism research (Walker et al., 2019).

With this thesis it is attempted to map and challenge the three dimensions of the attitudes that stakeholders, both organized entities and individuals, display towards cosmetic surgery tourism, namely the ethical, the cultural and psychological ones. Taking into account the above presented contextual orientation of the studied phenomenon through the existent body of scientific literature, it is timely to provide insight into the perspective from which these attitudes’ dimensions will be investigated. Being cognizant of the egalitarian morality that characterizes cosmetic tourism and was presented by Griffiths and Mullock (2017), raises a level of curiosity to examine the ethical perspective of attitudes from an utilitarian ethical standpoint. So within the contours of this thesis, the ethical aspect of attitudes signifies the opinion of the interviewees towards an utilitarian account of the studied phenomenon, which posits that the purchase of aesthetic surgery services is morally right, based on the reasoning that its
outcome fosters renewed image and confidence (Gupta, 2012). Moreover, the cultural angle of the attitudes that enter into inquiry in this thesis is scoped by the traditional and digital media imprint on the public opinion in regards to the elective reconstruction of one’s appearance (Nejadsarvari et al., 2016).

Finally, the focal point of the psychological attributes in the informants’ viewpoints on cosmetic surgery tourism, is referring to the pressure to reverse one’s bodily identity that may originate from mental health issues or being subjected to verbal violence or pressure concerning any imperfections in it (Synnott, 2006). Consequently, this thesis segregates the problematized phenomenon from its previous conceptualizations as a primarily commercial and medical one (Aquino and Steinkamp, 2016) and intends to delineate the three aspects of attitudes towards this admittedly social phenomenon, given that they have not been examined as a synergistic aggregation before. In view of scant research on the attitudes towards cosmetic surgery, as Tam et al. (2012) postulate, the authors intend to map the ethical, cultural and psychological dimensions of stakeholders attitudes towards the phenomenon in question, based on the evidence that morality is culturally and psychologically informed, according to Haidt (2007).

1.3 Research Rationale

Academic cosmetic surgery tourism research has mainly focused on the practicalities and the implications of this phenomenon (Holliday et al., 2013b). Despite the fact that this genre of medical tourism came to prominence almost forty years ago (Goodrich and Goodrich, 1987), the academic discourse on the ethical, cultural and psychological components of various stakeholders’ attitudes has been characterized by paucity, in comparison to other industries of tourism.

To date the research projects conducted by Holliday, Jones and Bell (2019), and Connell, (2006), are the most extensive ones, in terms of providing an account of the interactions between the suppliers and buyers of cosmetic tourism experiences and the financial growth of this branch of wellbeing and medical tourism on a global scale. A bigger picture of the ethical conundrums faced within the healthcare context is drawn by Beauchamp and Childress (2019), but there is a lack of text devoted to the role of the
cultural setting where the moral values of the medicine field are applied to. In the same fashion, the cultural facet of cosmetic surgery tourism is only approached from the standpoint of how it is portrayed in the mainstream media (Heyes, 2007) and its influence on the decision making about elective cosmetic procedures (Majeed et al., 2018).

Therefore, when the authors behind this thesis began the ideation process with regards to possible topics for research, confirmed that the available academic literature on the aforementioned issues is limited and consequently decided to map those missing areas simultaneously. The final decision was made upon the motivation to contribute to the evolution of the academic debate on this particular field and the knowledge that isolating the ethical from the cultural and psychological dimensions of the attitudes is prone to reductionist assumptions (Hu, Yu and Peng, 2018).

1.4 Research Question and Purpose statement
Drawing upon the evidence-led potential of cosmetic surgery tourism that is encompassed within the medical one as part of a globalized economy (Pereira et al., 2018), this thesis sets out to understand the attitudes of various international stakeholders and individuals with an interest towards cosmetic surgery tourism from a cultural and ethical standpoint that also touches upon the psychological one. By delving into the personal views of a complex mesh of stakeholders with regards to this exploding niche of medical tourism (Nassab et al., 2010), a comprehensive picture will be painted of the cultural, ethical and psychological aspects in the attitudes towards the selected tourism field. In addition to this, the aim is to advance research within overlooked domains of cosmetic tourism and further their industrial application by providing the key agents of the cosmetic surgical tourism hubs with insights into how different stakeholders respond to the studied dimensions of the phenomenon. With that said, an evaluation of this research output by those who manage the development of this tourism industry can reform its modus operandi.

With an aim to conduct a field research and handle the intricacies of the differing perceptions of the aforementioned tourism phenomenon, the authors of this thesis
formulated the following research question: What are the ethical, cultural and psychological aspects of the attitudes towards cosmetic surgery tourism?

Given that the research objective of this thesis is reflected in the posed research question and will be achieved through the strategic choice of the grounded theory methodology, the aim and simultaneously the end product of this research work will be the development of a preliminary theory derived from the observations in the empirical domain. The emerged theoretical model will conceptualize the ethos, the culture and psychological forces that inform the attitudes of various international tourism and medicine stakeholders towards cosmetic surgery tourism.

1.5 Theoretical and Practical Relevance

Relevance represents a metric that is used, in order to measure the usefulness of a research in the theoretical or practical field (Mentzer, 2008). Since the background of this thesis’ authors is within the tourism discipline, the aim of this research is to generate a preliminary theory that will enable a more holistic understanding of the ethical, cultural and psychological traits that coexist in one’s outlook towards cosmetic surgery tourism and are analogous to their milieu (Matteucci and Gnoth, 2017). Given that the study of attitudes towards cosmetic surgery tourism is underrepresented within academia and only Delinsky (2005) and Tam et al. (2012) have attempted to document the attitudes towards this overarching between tourism and medicine phenomenon concerning their relation to stereotypes and the social environment of the cosmetic patients, respectively, the theoretical contribution of this thesis intends to abstain from formulaic sequences and silos and become disseminated to novice tourism researchers with an interest in cosmetic tourism (Alvesson and Gabriel, 2013).

Besides the theoretical contribution of this thesis, another objective, is not compromising its practical relevance, since cosmetic tourism is examined from a sociological perspective and the authors endorse the claim that social science is ipso facto bound by some telos (Gerring and Yesnowitz, 2006). The social implications that this thesis aspires to bring are concentrated in the stimulation of a policy debate regarding the mitigation of risks that cosmetic tourists can prospectively face (Nahai, 2009) and the cultivation of phronesis (Bezuidenhout, 2017) in relation to an array of
ethical, cultural and psychological aspects that will culminate in a sustainable transformation of the processes that synthesize the cosmetic tourism experience (Hardy, 2005). With that said, the practical application of this qualititative research is classified under the categories of instrumental and legitimative relevance, given that its output is aimed for dissemination in the managerial positions of the cosmetic tourism industry, in order to dictate a more knowledgeable and sustainable decision making for a series of operational matters (Nicolai and Seidl, 2010).

1.6 Delimitations
The scope of the study is to determine how the different aspects of ethicality from an utilitarian standpoint, psychology from the angle of the mental status linked to the quest of cosmetic tourism experiences and media and culture as molders of the public’s perception of the selected phenomenon, differ for its various stakeholders. The delimitation also concerns the informants’ background, meaning it is essential to note they originate from South Korea, U.S, Sweden, Greece and Romania and their diverse attitudes reflect this and to some extent their age range.

1.7 Definition of Terms
Cosmetic surgery tourism - refers to the opportunity of travel and aesthetic surgery included
Plastic surgery - is the action of undergoing a certain physical transformation
Non-invasive treatments - occurs when no incision is made for certain rectification purposes
Medical facilitator - is a medical tourism professional that links the prospect medical tourist to medical tourism hubs and handles the planning and bureaucratic procedures
Prosopagnosia - the near or non recognition of one’s face
Lacanian oeuvre - the body of scientific work by Jacques Lacan in the field of Psychoanalysis
Pygmalion’s complex - a metaphor from Ovid’s Metamorphoses to show plastic surgeon’s passion with the beauty modifications they perform on their patients
Coalesce - placed together
Egalitarian - a school of thought that advocates for distributive justice
Modus operandi - translates from latin as ‘mode of operating’
Phronesis - cultivation of wisdom
Dithyrambic - refers to an action followed by the praise and enthusiasm of others
Plethora - large amounts of specific things or beings
Aristotelian - concept derived from Aristotle’s philosophical work
Eudaimonia - a state of happiness derived from doing good deeds

2. Methodology
The methodology chapter includes the rationale and strategic direction adopted in this thesis, in relation to data collection, analysis and ethical considerations, with an aim to achieve the defined research objectives and answer the research question.

2.1 Research Philosophy
Expounding on the research philosophy that imbues this thesis, the aim is to clarify the boundaries among the ontological, epistemological and axiological positions adopted in this scientific manuscript (Denzin and Lincoln, 2017). Taking into account the purpose statement and the projected societal relevance of this research, which are to explore varying aspects of the attitudes that stakeholders hold towards cosmetic surgery tourism and initiate a change within the studied sector, this thesis’ research paradigm is defined as constructivist (Matteucci and Gnoth, 2017) and stands at the confluence of a relativist ontological platform (Guba and Lincoln, 1994) and a subjective epistemological orientation (Hayes and Oppenheim, 1997). However, one can argue that the research philosophy of this thesis is an assemblage of a constructivist and a transformative one, on the grounds that the documentation of the stance that stakeholders keep towards cosmetic tourism is realized with the further intention of laying the theoretical foundation for transformative change in the research area, so that eliminates unfair practices (Jackson et al., 2018).
2.2 Research Approach

Critical to the implementation of the research methodology is the selection of the reasoning among deductive, inductive or abductive logic, which will be established upon (Cooper and Schindler, 2014). The research, opted to harness the revelatory potential of inductive reasoning, considering that the studied phenomenon of cosmetic surgery tourism and the attitudes towards it have not been investigated thoroughly in former studies (Tam et al., 2012). Corresponding to the research purpose, which is stated above, the inductive approach is deemed as appropriate, to gain a better understanding of the phenomenon and the meaning that informants place to the researched aspects of ethics, culture and psychology in their perception of it (Saunders, Lewis and Thornhill, 2007). The aftermath of adopting an inductive stance is the construction of a theory on the patterns that were observed in the empirical observations (Bryman, 2012). However, conclusions that are generated in an inductive manner are characterized by a lack of “conclusive proof” (Cooper and Schindler, 2014). This translates into tentative inferences, because the theoretical outcome originates from the observation of a particular setting (Collis and Hussey, 2014).

2.2.1 Rationale for Research Methodology

The reason behind the authors' decision to utilize the constructivist tradition of grounded theory in the study of the cultural, ethical and psychological points encompassed in the cosmetic surgery tourism stakeholders’ attitudes towards this social phenomenon, is based on the favorable properties that this research strategy displays, in order to answer the stated research question. To clarify why the constructivist approach to grounded theory is deemed as optimal for this thesis, it is pivotal to mention that the way that researcher’s preconceptions are handled in this version of the methodology play a catalytic role in the selection of it (O’ Connor, Carpenter and Coughlan, 2018). Therefore, the constructivist perspective on grounded theory as it is presented in Charmaz’s (2014) writings is a more propitious choice for this thesis’ research topic, because within its realm the studied phenomenon is viewed as fluid, which agrees with how it is treated within a growing body of scientific literature (Jobson and Freckelton, 2022) and the researcher is recognized as an active agent, which enhances the researcher’s reflexivity about their course of actions.
Consequently, applying the constructivist strand of grounded theory is beneficial to the investigation of the cosmetic surgery tourism empirical field, because the researcher’s natural proclivity to preconceived notions about the gathered data can only be accepted as coded themes, only if they are prevalent in the collected data (Charmaz, 2014). In that sense, the constructivist genre of grounded theory is successful in counteracting the researcher’s bias during various stages of the research process, since it does not adopt the naive stance that the interpretation of the collected data happens ab ovo (Kelle, 2005).

2.3 Description of Research Methodology

Despite the fact that a multitude of qualitative research methodologies exists, Bryman’s *Social Research Methods* (2012) aided in the selection process of the most fitting one. Concerning the methodology, in order to get an in-depth understanding of cosmetic surgery tourism, as previously described, the inductive research logic was selected. To be more precise, a grounded theory study is conducted within the contours of this thesis. The chain of arguments that led to employing the constructivist genre of grounded theory, is formed by the authors' set of philosophical values that inform the research design (Saunders, Lewis and Thornhill, 2009). Given that the research question revolves around the mapping of the attitudes and their cultural, psychological and ethical aspects that different stakeholders of cosmetic surgery tourism hold, and that the aforementioned tourism phenomenon is evolving simultaneously with the trivialization and pathologization of the human body on social media and post-humanist digital narratives that give birth to new unrealistic beauty standards (Arab et al., 2019), the selected methodology is aligned with the complexity of the topic.

The description of the grounded theory methodology, as it is gleaned from the scholarly work by McCann and Clark (2003), entails the attributes of theoretical sensitivity, constant comparative analysis, coding and taxonomy of data, theoretical memos and diagrams, as well as the use of literature as secondary data source, and theory integration, which distinguish it from others within the qualitative research range. Its history traces back to the book *The Discovery of Grounded Theory*, which was authored
by Glaser and Strauss (1967) and navigates the social researchers on how to establish a foothold on the systematic assemblage and analysis of data that will lead to the emergence of a theory that is directly related to the studied empirical situation. Since quality assurance is a prerequisite for every inquiry, grounded theory as a qualitative research methodology is reported to not hold a prime position in the field of marketing research, on the premise that its coding procedures allude to quantitative methodology (Goulding, 1998).

The constructivist tradition of the selected grounded theory methodology, which is characterized by flexibility and was developed by the sociologist Kathy Charmaz is deemed as more appropriate for the type of research conducted in this thesis, because of the fact that its underpinnings emphasize on the meaning that the interrogated objects construct in relation to the studied field (Charmaz and Thornberg, 2020), which in this case is the cosmetic surgery tourism. To clarify what this genre of grounded theory entails, its ontology is defined as relativist, which posits the existence of a multitude of postmodernist social realities, while its epistemology considers the knowledge as a co-creation of the researcher’s and the respondent’s meaning making experiences and interpretations. With that being said, this research is based on the constructivist paradigm and distanced from the positivist roots of the traditional grounded theory represented by Glaser’s scholarly work (Mills, Bonner and Francis, 2006). However, the mentality that a constructivist grounded theorist should not stray away from, is that the end goal is to come up with a theory tailored to the field under investigation, since it is grounded on its empirical data, and not function as the theory that fits to every social setting (Heath and Cowley, 2004). With that said, the data must be decrypted into reflectable ones that can lead to a theory explaining a certain phenomenon or a cluster of phenomena (Bergin, 2018).

Essential in the whole debate of grounded theory is the acknowledgement that the researcher enters the empirical field without being able to hold in abeyance their preconceptions (Morse, 1994). As Ashworth (1997) underlines, the researcher’s cultural background and assumptions affect the observation process positively and in the same manner the analytical stage of the research can be laden with a plethora of
interpretations, depending on the cognitive style of those conducting the research (Baker, Wuest and Stern, 1992). Overall, as it was already presented extensively in the section about the rationale behind the choice of the constructivist genre of grounded theory, it holds an advantage on tackling effectively the researcher’s cognitive bias.

2.4 Research design
This study asks the research question of what are the ethical, cultural and psychological aspects of the attitudes towards cosmetic surgery tourism. This qualitative study adopts the constructivist grounded theory i.e. Charmaz's grounded theory design. Data are extracted from informants selected by purposive sampling and through interviews.

2.4.1 Sampling
Purposive sampling is a technique widely used in qualitative research and is a non-probability sampling method in which the researcher focuses on specific characteristics of the population, when selecting participants and relies on their reasonable judgment to obtain a representative sample to make the most efficient use of limited resources (Rai and Thapa, 2015).

The criteria applied to the selection of informants in this type of purposive sampling are related to their closeness to the aesthetic surgery tourism business. Starting from those who maintain an amateur type of engagement with the beauty industry, which constitutes one component of the studied socioeconomic field, the second batch of interviewees entailed the stakeholders who are directly involved in the industry. For instance, dermatologists, plastic surgeons and psychologists were classified as a prioritized target group for the data collection. Due to the fact that the above mentioned are indeed connected, it ensured their insights were considered whilst analyzing the interviewees attitudes towards cosmetic surgery tourism (Clay, 2017).

2.4.2 Profile of Participants
The table below describes how the interviewees were selected and on what grounds in a representational manner. The contrasting professions aided the authors in the quest of
deciphering this phenomenon, each introducing a new approach from a professional and personal vantage point.

**Table 1. Participants professions descriptions**

<table>
<thead>
<tr>
<th>Professions</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply Manager</td>
<td>Interviewee’s experience within hospitality industry</td>
</tr>
<tr>
<td>Student with Social Media presence</td>
<td>Social Media is a considerable part of cosmetic surgery meaning those who have a presence on such platforms</td>
</tr>
<tr>
<td>Military Psychologist and Clinical Psychologist</td>
<td>The shrewd reasoning of a psychologist on cosmetic surgery is a crucial perspective</td>
</tr>
<tr>
<td>Student with Social Media presence</td>
<td>Social Media is a considerable part of cosmetic surgery meaning those who have a presence on such platforms</td>
</tr>
<tr>
<td>Head of Tourism programme at University</td>
<td>Insight into the educational aspect of this industry</td>
</tr>
<tr>
<td>Social Media Influencer</td>
<td>Social Media is a considerable part of cosmetic surgery meaning those who have a presence on such platforms</td>
</tr>
<tr>
<td>Division Head of Plastic Surgery Clinic at Public Hospital</td>
<td>Extensive experience in plastic and reconstructive surgery, insight into the medical part of cosmetic tourism</td>
</tr>
<tr>
<td>Dermatologist – Venereologist</td>
<td>Experience in non-invasive cosmetic treatments and Psychodermatology</td>
</tr>
<tr>
<td>Former Hotel employee, SAHM</td>
<td>Work experience within luxury hospitality and former rhinoplasty patient</td>
</tr>
<tr>
<td>Graphic Artist</td>
<td>As creator of visual effects can provide insight into the culture of beautification</td>
</tr>
<tr>
<td>Employee at Dental Tourism sector</td>
<td>Educational and working background in tourism is necessary to understand the attitudes of those engaged in the industry</td>
</tr>
<tr>
<td>Executive Manager at Entrepreneurship Education NGO</td>
<td>Educational background in Media Studies and former experience of otoplasty</td>
</tr>
<tr>
<td>Sales Director in Female Empowerment NGO</td>
<td>Feminist and ethical perspective of the industry</td>
</tr>
<tr>
<td>Home counseling company for teenagers &amp; young adult (former cosmetic surgery patient)</td>
<td>A mental health specialist who has also undergone plastic surgery delivered a considerable amount of insights on the process. the decision making steps and thoughts.</td>
</tr>
</tbody>
</table>
Those characteristics in Table 1., assisted the authors to organize how each opinion proceeded in the different stages of the sub themes and used the raw data to create the emerging theory.

The criteria for the participants, generally, required a vague or developed knowledge of cosmetic surgery tourism, that could extend to the different concepts studied, connecting to cosmetic surgery; such as, ethicality, psychology, media, stakeholders and culture. The participants had to be connected or have personal/academic views regarding cosmetic surgery. Precedently, the authors sought to get psychologists, dermatologists, plastic surgeons and from different cultural backgrounds participants' viewpoints, to get a wider insight on how cosmetic surgery tourism is perceived from different angles.

Equally, the perspectives of activists that advocate against the beauty standards, along opinion makers and doctors who regard mobility for cosmetic surgery as an individual issue and do not regard it, under a negative light or even a social taboo (Holliday et al., 2019). In other words, the participants were selected according to their comprehension of the different perspectives of cosmetic surgery tourism.

Most of the participants either had extended or limited knowledge on the topic, but nevertheless they highlighted important perspectives that were considered when analyzing and formulating the theory. These were the criteria followed for the participants, to ensure it covered the gap in this study field of cosmetic surgery.

2.4.3 Interview guide

In this study, online interviews and face-to-face meetings took place to collect information from the informants. The interviews were conducted in a semi-structured format. The advantage of semi-structured interviews over structured interviews is that interviewees are granted more freedom to give their insight on a topic (McIntosh and Morse, 2015). The main reason for creating a comfortable - safe space for them, was to iterate on the data collected. In order to collect accurate information iteratively, follow-up questions were asked to dive deeper into interest areas. The iterative nature of data collection allowed the team to gain a holistic view of the data collected and to connect the data collected to the literature, in order to generate a wealth of covert knowledge. The researchers developed an interview guide prior to the interviews, with
the goal of not missing the most critical questions to achieve the set goals. The first part of the interview guide covered biographical information about the interviewees, such as their age, educational background, and occupation. In the second section, the core of the interview questions consisted of open-ended questions/topics that focused on ethical, cultural, and psychological aspects. These allowed the interviewees to develop their personal perceptions of cosmetic surgery and its many facets that are important to them. To guide the researcher in gathering accurate information, the interviews were both audio-recorded and transcribed. Interviews were conducted primarily in English to minimize language barrier.

2.5 Data collection

As stated in the above section, when it came to data collection, the qualitative data were gathered with the help of semi-structured interviews. Those interviews were structured with the different themes in mind, which means the list of topics are present, yet the researcher and participant had the ability to explore the topics more in-depth (Bergin, 2018). The data collection strategy for this research consisted of in-depth interviews with fourteen different stakeholders who had knowledge of cosmetic tourism. As suggested by Charmaz (2006), the interview content consisted of open-ended questions/topics and was semi-structured in nature. The interviews were based on themes such as: ethical, cultural and psychological perspectives to explore the attitudes of different stakeholders implicated in cosmetic tourism towards it. Those stakeholders vary, everyone has been involved in this industry either directly or indirectly, it is a global concept. In other words, beauty standards, at one point in time, have had a grip upon choices or perspectives individuals had to make or foreseen (Skolnik, 2020).

The topics were used to lead the interview, they were rather open in order to invite their honest opinions on cosmetic surgery tourism. Furthermore, they were customized depending on the participant, to accommodate their knowledge and made it straightforward (Dolnicar, 2013).

Going back to gathering the data, the selection of respondents, as previously discussed, was done through a non-probability purposive sampling method where the researcher
purposefully selected members within a specific domain that met their criteria to participate in the data collection procedure (Smith, 2017). The data collection was conducted in November and December of 2022, with a total of 14 interviews. Each face-to-face interview was approximately 40 minutes in length. No more interviews were conducted because the 14th participant had reached theoretical saturation. The categories used to code the data appear to be established at this point, and the data were consistently sufficient for theoretical saturation to be reached (Nunkoo and Ramkissoon, 2016).

2.6 Data Analysis
This study conducted in-depth interviews with informants through open-ended questions that were semi-structured in nature. When it comes to the analysis of data from a constructivist grounded theory approach, the thematic categories derived from the reiterated coding process, served as a link between the raw data for the transcription analysis and the theoretical areas of this particular form of medical tourism, and form generalizations from the coding categories. Finally, the three stages of the analysis process, namely open coding, axial coding and selective coding, are essential for transforming the data extracted from the interview transcripts into theoretical recommendations (Sbaraini et al., 2011). In grounded theory, open coding is the breaking down of the extracted data into codes that depict as a summary. Axial coding is connecting the codes into categories to refer to them in an efficient manner; lastly the selective coding is the selection of a main category to group the axial codes, apprehending the main ideas (Williams et al., 2019). In this case, the main categories can accommodate all of the extensive codes.

The analysis chapter contains tables constituting the quotation from the interviewees, those tables are separated as ‘codes’ for the open coding, ‘subcategory’ for the axial coding and ‘main category’ for the selective coding. It was transformed to such headlines for adaptation purposes. Thus, the familiarization with the extracted data led to the codes, which was the starting point, then searching for a common theme - subcategory and grouping them together for the selective coding.
2.7 Ethical Considerations

Since the nature of this qualitative research and the selected instrument for data collection dictated that the authors keep direct contact with the informants, it was of utmost importance to take precautions, in order to ensure that their privacy was honored (Olson, 2018). Prior to elaborating on the applied protocol for the protection of the informants’ human rights, it is essential to make a distinction among the frequently confused terms of privacy, confidentiality, and anonymity. (McNamee, Olivier and Wainwright, 2007). With privacy emanating from the boundaries retained among individuals, Parent (1983) highlights as its three dimensions, the right to deny an inquirer access to one’s personal information, the concept of autonomy in controlling to what extent the researcher can interfere with the interviewee’s personal data and the right to disclosing private information within the desired limits. Moreover, confidentiality refers to the notion that a research participant has agreed to reveal a certain volume of information to the researcher in good faith, but this action comes to tension with a contingent dissemination of the trusted piece of information for scientific purposes or in an accidental occurrence (Zwick and Dholakia, 2004). Lastly, anonymity is closely related to the mechanism employed in an attempt to conceal the details that function as identifiers of one’s identity (Qian and Scott, 2007).

Knowing that ethical principles underpin the research’s validity and reliability (Davies and Dodd, 2002), has led to the enactment of a strategic plan, with an aim to protect the aforementioned values. To safeguard the studied stakeholders or to put it alternatively, subjects, from a possible distress during the physical and digital meetings planned for the semi-structured interviews, there has been a consultation of the Code of Conduct issued by the School of Business and Economics at Linnaeus University. In addition to this, the empirical data collection was carried out according to the European Union data protection protocols, since the studied phenomenon of cosmetic surgery tourism is considered to a large extent a sensitive topic of discussion (Hallem and Barth, 2011). This translates into informing the research participants, prior to conducting the interview, on the principles of the European General Data Protection Regulation (EU) 2016/679 (GDPR), as they are presented in its Article 5 (Swedish National Data Service, 2022).
After having received their consent on contributing to this qualitative study with their personal narratives on the posed research question, the team saw it as fitting to take a final preventative measure and harness the safety advantages that the pseudonymisation bears and thus the participants’ names were replaced with nicknames, to avoid potential breaches of confidentiality. Having articulated clearly the purpose of this thesis and paid attention to any expected non-verbal cues of discomfort during the data collection procedure (Oltmann, 2016), at the end of it, was concluded that these strategies were effective in mitigating the prospects of any potential harm and the informants’ behavior during the interviewing revealed emotions of relief, rather than anxiety on elaborating on the taboo topic of cosmetic surgery tourism (Corbin and Morse, 2003).

2.8 Methodological Rigor
Confronted with the issues of validity and reliability, when conducting a constructivist grounded theory research, the researcher faces the reality of a not universally accepted definition of validity (Creswell and Miller, 2000). According to Golasfshani (2003) the criterion that differentiates a trustworthy research from one that is of low quality stems from the concerns over the quality concepts of validity and reliability that are mainly used in the quantitative tradition. However, reliability should characterize consistently the research from the initial planning stage to the final one of summarizing the findings and concluding (Patton, 2002). In light of the above stated facts on validity and reliability, Lincoln and Guba (1985) agree with the quantitative origins of these terms that are deemed as determinants of a research’s trustworthiness. Despite this, Stenbacka (2001) cautions that the aforementioned concepts must be revised for the purpose of being used in the evaluation of a qualitative research design.

Consequently, to attain the rigor that this empirical research needs to be characterized by, within the predefined naturalistic paradigm, the research team follows certain verification strategies to ensure its presence both during the course of inquiry and post hoc, according to the seminal work that Morse et al. (2002) produced with a focus on the qualitative research’s trustworthiness. Being proactive with tackling issues of validity and reliability in this qualitative research, requires a constant assessment of the methodological coherence, which relies on the capacity of the investigator to be
responsive to changes that happen pertinent to data collection and analysis, as the inquiry progresses and not adhering blindly to instructions, while ignoring the data.

Another step taken into the direction of ensuring this research is compliant with the set standards for scientific knowledge creation, is related to the appropriateness of the sample (Morse, 1991), which was achieved through the collection of data through multiple sources, that were selected according to the logic of purposive sampling and with the purpose of securing a solid categorical and thematic analysis through grounded theory’s methodology (Morse, 2015). To strengthen the appropriateness of the sample, the research team consulted Fugard and Potts (2015) scholarly work, where a detailed account of the desired number of informants is given and leads to the conclusion that a sample size of twelve interviewees is sufficient for reaching theoretical saturation. Another prerequisite for rigor in this qualitative study is the concurrent collection of data and their analysis, which renders the investigating team more theoretically sensitive through constantly and critically reviewing the claims of the interviewed stakeholders, in this case, and as a result increasing the credibility of this social inquiry’s outcomes (Seale, 1999).

Finally, in order to satisfy the theory development condition, whose aim is to guarantee that the emergent theory at the end of this thesis is grounded at the gathered primary data (Meadows and Morse, 2001), is applied the measure of constant comparison of the theoretical model with the existent literature (Dick, 1999).

3. Analysis & Literature Review
The analysis and literature review are combined in this chapter to act in accordance with the grounded theory criteria. There are tables summarizing the interviews and interviewees responses, which are classified into codes, then processed by in the analysis and connected with the assistance of the literature review.
3.1 Interviewees

In the table below, the biographical data for interviewees are presented, the names used are reformulated to ensure anonymity remains throughout the study. The ages range from 21 to ~60, whilst there are students present without a current job but major social media presence and specialists in the different concerning sectors such as mental health - psychologist; and different insightful professionals that have a social presence, who the authors included for the broader picture.

**Table 2. Interviewees’ background**

<table>
<thead>
<tr>
<th>Interviewees</th>
<th>Age</th>
<th>Education</th>
<th>Occupation/Job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maria</td>
<td>47</td>
<td>Hospitality Management and Product Development</td>
<td>Supply Manager</td>
</tr>
<tr>
<td>Katrin</td>
<td>21</td>
<td>Tourism Management</td>
<td>none</td>
</tr>
<tr>
<td>Alexia</td>
<td>36</td>
<td>Master in Psychology (Hypnotherapy and Cognitive Behavioral Psychotherapy)</td>
<td>Military Psychologist and Clinical Psychologist</td>
</tr>
<tr>
<td>Stina</td>
<td>21</td>
<td>Psychology Bachelor</td>
<td>none</td>
</tr>
<tr>
<td>Antonia</td>
<td>63</td>
<td>Tourism Studies</td>
<td>Head of Tourism programme at University</td>
</tr>
<tr>
<td>Lia</td>
<td>~20</td>
<td>Unknown</td>
<td>Social Media Influencer</td>
</tr>
<tr>
<td>Vlad</td>
<td>54</td>
<td>Medicine and Plastic Surgery specialty with burns in the UK</td>
<td>Division Head of Plastic Surgery Clinic at Public Hospital</td>
</tr>
<tr>
<td>Alexander</td>
<td>48</td>
<td>PhD in Medicine</td>
<td>Dermatologist – Venereologist</td>
</tr>
<tr>
<td>Nita</td>
<td>46</td>
<td>BScTourism Management</td>
<td>Former Hotel employee, SAHM</td>
</tr>
<tr>
<td>Eddy</td>
<td>27</td>
<td>Graphic Design &amp; Art</td>
<td>Graphic Artist</td>
</tr>
<tr>
<td>Jonas</td>
<td>41</td>
<td>MSc Tourism Management</td>
<td>Employee at Dental Tourism sector</td>
</tr>
<tr>
<td>Mona</td>
<td>30</td>
<td>BSc Media &amp; Communication</td>
<td>Executive Manager at Entrepreneurship Education NGO</td>
</tr>
<tr>
<td>Irena</td>
<td>63</td>
<td>Sales training</td>
<td>Sales Director in Female Empowerment NGO</td>
</tr>
<tr>
<td>Laura</td>
<td>~60</td>
<td>Bachelor's in psychology and Masters in business communications</td>
<td>Home counseling company for teenagers &amp; young adult</td>
</tr>
</tbody>
</table>
3.2 Findings and Analysis

The following tables represent the coding of the transcripts along the open, axial and selective coding.

Table 3. Coding for mental health pressure

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a therapist, I understand that people who have plastic surgery done, generally have low self-esteem and tend to increase their self-confidence by having repeated cosmetic surgery. This attempt is doomed to failure in the long run, as self-worth and self-confidence are things that come from within and not from external validation.</td>
<td>Plastic surgery is not sustainable in the long run, confidence comes from within</td>
<td>Plastic surgery is a temporary fix</td>
<td>Superficial use of cosmetic surgery</td>
</tr>
<tr>
<td>Cosmetic surgery can be beneficial when it does not turn into compulsive behavior, i.e. the person does not constantly and compulsively resort to repeated operations to correct a physical appearance he/she is unhappy with. Mental health can be positively influenced when...access to cosmetic surgery...services at a maximum level of performance. As a specialist in mental health, I remain of the opinion that a surgeon's scalpel can correct a physical defect, but cannot correct a soul/mental/inner one.</td>
<td>Cosmetic surgery could turn into an addiction if not monitored and therefore a specialist should always be involved in this case</td>
<td>Cosmetic surgery can create happiness but also addiction</td>
<td>Addiction to cosmetic surgery</td>
</tr>
</tbody>
</table>

(full table – see Appendix A)

When discussing mental health pressure, in this scenario, it is referred to the concepts social media and the society, in general, have generated; the beauty standards that are unachievable on average, without some form of cosmetic transformation which leads to occasional menacing consequences. It could backfire, assuming the individual's mental health is unstable thus far, a failed surgery could aggravate their condition (Furnham and Levitas, 2012). Despite that, the opposite is also true, assuming the operation is satisfactory in the eye of the patient, it could improve self-confidence on an appearance level. However, it is worth mentioning, that it is not guaranteed, such happiness will last or it even might create an addiction, where the individual will start trying to ‘fix’
something else, appearance wise. Body dysmorphia, depression and such are some of the main driving psychological factors for cosmetic surgery (Ip and Ho, 2019).

Consequently, there is a connection between cosmetic surgery and the subject of psychology. Prior to exploring the empirical field of cosmetic surgery tourism, the psychological aspect of the attitudes that various stakeholders display towards the aforementioned phenomenon, is defined by the factors that lead an individual to the willingness to travel for cosmetic surgery purpose or the underlying psychological pressure or mental health issues that push someone into this decision. The desire for a specific procedure is backed by various factors, yet, one that is detrimental to analyze is the psychological aspect. As shown in Table 3., in the extracted data, psychology as a concept was predominantly mentioned by the different interviewees in similar manners, being one of the most discussed issues in the interviews.

'Mental awareness', as a main category, seems to be an undiscussed and an undeveloped topic, in the cosmetic surgery sector, where the importance of this was demonstrated by majority of the interviewees. As Stina spoke upon raising awareness of the importance of mental health, by saying "...a lot of these situations could be easily prevented if you…put a higher priority on mental health…and make sure that you were doing it for the right reasons…". In these situations, she referred to regret of a cosmetic procedure, participating in such a decision at a young age might not be ideal, especially if done due to pressure from different external factors, such as social media influences; these trends are highly mutable and should be examined thoroughly. Furthermore, fabricated beauty standards are affecting, especially, the younger generations and those with mental health issues, who are easily influenced by social media (Aparicio-Martinez et al., 2019). Since it is difficult to limit exposure, it is pivotal that awareness and representation of people that do not fit those standards are portrayed more in mainstream culture. Those set trends were discussed by Vlad, the plastic surgeon, mentioning: "I observe that especially young women arrive at an appointment with me showing me pictures of various body and face parts that belong to famous women." It is evident that the exact beauty standards set by society for celebrities, will in turn impact the public, this will be detrimental to those influenced and create a destructive mindset (Yan et al., 2014).
will not prevent youngsters from facing unnecessary comparisons, as Higgins’ self-discrepancy theory posits (Vartanian, 2012). Having said that, the solution now, to their inquiries, will firstly be what is discussed most on social media and between companions, which at the moment is still cosmetic surgery. This popular topic overpowers that of mental health importance (Walker et al., 2021). With cosmetic surgery tourism being associated with the narrative of the ideal corporeal otherness, the explanation of cosmetic tourists' psychological motivations through the Lacanian oeuvre is a logical corollary (Isa, 2003). Lacan’s account of the human body is a construct that is formed through the dialectic between the subject and its socially determined imagery (Persiani, 2001) provides a sufficient explanation for the modern hysteria with obtaining a surgically altered appearance according to the dominant beauty standards.

The practical experiences lived by the interviewees are classified into main categories that represent the grouped unique encounters they've experienced in their lifetime. 'Addiction to cosmetic surgery', as a main category is insufficiently explored since it can be a major issue in cosmetic surgery tourism (Suissa, 2008). Alexia, the psychologist, explained how "...cosmetic surgery can be beneficial when it does not turn into compulsive behavior, i.e. the person does not constantly and compulsively resort to repeated operations to correct a physical appearance he/she is unhappy with." Addiction of any kind is categorized as damaging physically, because that's the most apparent to the eye but what is not apparent, is the mental damage this could cause.

'Superficial use of cosmetic surgery', is mentioned frequently. There seems to be a correlation between cosmetic surgery and short term satisfaction. It can be interpreted, as plastic surgery being insufficient, when it comes to self-confidence. Doing a procedure might be seen as the only solution, which is immediate, yet compared to working on the issue from its root cause, it does not solve the matter in question. It will foster temporary happiness, thus covering up the genuine answer - achieving a ‘healthy psyche’ (Poupard, 2012). As Alexia, the psychologist mentioned, cosmetic surgeries are a "false remedy" and instead use those efforts to invest in "self-compassion, self-acceptance and self-forgiveness". Perchance, it is a long term solution for many young adults, who are extensively influenced by social media and societal pressure. It
seems to be an evident source of dilemma in further themes, if cosmetic surgery is in fact a long term solution that creates happiness; the Precursor of Happiness table analyzes this, truly the root behind those concerns.

On a positive note, it is worth pursuing another main category, the 'Positive aspect of cosmetic surgery and cause'; this entails the constructive aspect behind cosmetic surgery, as well as the affirmative psychological outcomes that come from such procedures. Stina, the psychology major, mentioned individuals with body dysmorphia benefiting from cosmetic surgery by also saying how "...now we live in a time where if you have a problem like that it can be solved by physical means, then you can choose to do that" it does not appear to be such a pessimistic topic. From an existential perspective, the propensity for elective cosmetic procedures aids the individual to cope with the anxiety of mortality as the terror management theory contends (Greenberg, Solomon and Pyszczynski, 1997). Which is something felt by those experiencing body dysmorphia, as Stina touched upon "it affects their mental state and makes them feel anxious or depressed". The aforementioned theoretical underpinning highlights as symbolically defensive behaviors against mortality salience, those who further a more robust embrace of the predominant culture and boost one’s self esteem (Burke, Martens and Faucher, 2010).
Table 4. Coding for socio-cultural pressure

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most of my friends are very skeptical about plastic surgery because most of my</td>
<td>Most people are skeptical of cosmetic</td>
<td>Attitudes of people in society towards</td>
<td>Family and social expectations</td>
</tr>
<tr>
<td>old friends from my childhood are men. When you talk to men about making some</td>
<td>surgery</td>
<td>cosmetic surgery</td>
<td></td>
</tr>
<tr>
<td>changes, I talk about lifting up my eyelids. They were looking at me like it</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>was a stupid thing to say…</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>… I think all people want to look better, all people want to be attractive,</td>
<td>Some people think they can get preferential treatment in society through cosmetic surgery.</td>
<td>Social Preference Subliminal Influence</td>
<td>Personal self-esteem</td>
</tr>
<tr>
<td>regardless of what's going on in society…they would think that then it would</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>give them some kind of an advantage in their social life…if we could change</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the core of society so that people don't feel terrible about just being</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>themselves…I think we should do that…I just don't think that's going to</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>happen anytime soon…</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(full table – see Appendix A)

Plastic surgery tourism has become an increasingly popular and mainstream medical practice in modern society, with many people attempting to change their appearance through procedures, such as breast augmentation, facelifts and liposuction (Campbell et al., 2019). Although some people consider plastic surgery a superficial and unnecessary pursuit, it is actually a relevant and important aspect of contemporary society for a number of reasons. Societal influences on cosmetic surgery come from a variety of sources, and through interviews, it was possible to identify several main areas that were mentioned, including but not limited to, the image conveyed by the media and advertising, job and career development, family and social expectations, and personal self-esteem.

Plastic surgery is closely related to society, they are to a certain extent interrelated. When discussing the socio-cultural pressure on plastic surgery, main categories, such as the influence of pressure from family and social expectations on cosmetic surgery, surface. Certain families or social groups may have specific expectations that make some people feel that a certain part of their body is lacking in meeting the ideal of beauty regarding their appearance, which may produce problematic body imagery such...
as body dissatisfaction (Thompson et al., 1999) and the desire to meet these expectations through cosmetic surgery. For some people, the comments or opinions of others may be a factor in deciding whether to undergo cosmetic surgery. When talking about comments about people around them, each interviewee had either experienced or seen people issuing unsolicited opinions on their appearance, either unintentionally or intentionally. These comments are either from people around them or from social media, and they create insecurities, especially on the younger generations. This leads to the idea of altering a body part. Antonia, who is the head of a Tourism Programme at a University, says that: "...people want to form a clique when they're young, so they're kind of competitive, or they make nasty comments about a person's appearance…” Pointing out that this phenomenon is particularly frequent during adolescence. Working for a company that provides family counseling for teens and young adults, Laura mentioned:

As someone who has spent a lot of time working with teenagers and young adults I see and hear about rude and uncalled-for comments being said to women especially these days with the anonymity of the internet. rude and irrational comments about women, especially these days with the anonymity of the internet…

Another interviewee, Stina, also mentioned how she found society to be extraordinarily strict about the appearance of young girls when she was a child, and how depressing the double standard of people commenting on the appearance of boys and girls was. People who have been victimized by negative comments tend to be less satisfied with their physical attractiveness and appearance, and have higher levels of anxiety and depression. This especially applies to women who have had unkind comments, which makes them more likely to undergo cosmetic surgery (Walker et al., 2021).

Furthermore, when in a group or a certain environment, people tend to have specific expectations of those in the group, so many people have to change themselves to fit the popular aesthetic. One of the interviewees, Katrin, an American student currently studying at a Swedish university, mentioned the cultural differences between the United
States and Sweden, where social expectations in different cultures lead to different local pursuits of beauty, mentioning that

I think in both countries, the beauty standards are very different. Sometimes I just feel like, looked over in Sweden. And then I really want to get this done. But as soon as I get to the states, all of those ones just evaporate.

Another interviewee, a member of the LGBT community, Eddy, mentioned:

As a person that belongs to LGBT community, I am amazed at the pettiness of the comments that people within my community make on others' appearance. I get a vibe that you have to belong to a certain group or tribe to feel empowered. As if you don’t want to look a certain way, then you will become a target for negative comments both in the spots you frequent or online…

Cosmetic tourism industry is portrayed as a feminist act of agency on one hand (Morton, 2014), and other times as an indicator of weakness to counter the fabricated beauty ideals, as they are imposed by the opinion makers of the entertainment and beauty industries and circulated on digital social media platforms (Dolezal, 2010). The dominance of the makeover culture and the popularization of aesthetic enhancements, through meticulously crafted visual storytelling that claims to aid individuals to trade their aging appearance for a more youthful look, has shaped an ageist cultural climate, which marginalizes those who refuse to abide by the beauty norms or cannot afford to, due to lack of financial resources (Bayer, 2005). Interviewees mentioned that: "Although it also upsets me that we have such high beauty standards as a society…", such social pressure drives people's desire for cosmetic surgery.

However, family and social attitudes towards cosmetic surgery also influence people's decision-making, and different levels of acceptance of cosmetic surgery influence the strength of motivation. As Maria mentioned: "Most of my friends are very skeptical about plastic surgery...When you talk to men about making some changes...they were
looking at me like it was a stupid thing to say…” When most of my social circle is skeptical and unappreciative of plastic surgery, the desire for plastic surgery is reduced.

The topic of 'Job and Career Development' is often mentioned. In some industries, appearance may be seen as an important factor in career development (Zebrowski and Montepare, 2008). Maria, who works in the travel industry, mentioned:

In the travel industry, companies may need a certain type of person, depending on what kind of business you have, and the people who work there are part of their brand, and that can put pressure on people as to how they should look…

Eddy, who is a Graphic Artist, mentioned: "I don't want to seem superficial, but I know that in the competitive field that design is, Everything counts from appearance to design talent." A good appearance can help some people improve their self-confidence, be somewhat more competitive for work, or receive preferential treatment, so some people may choose to get plastic surgery, because they want to be successful in the workplace (Zebrowski and Montepare, 2008). Other industries, while not forcing you to pay extra attention to your appearance, do require looking good and decent in professional and social situations to show respect.

'Personal self-esteem' is also a main category, those with lower self-esteem are more likely to want cosmetic surgery (Furnham and Levitas, 2012), and self-esteem can be categorized as the degree to which individuals value and accept themselves and feel good about themselves (Blascovich and Tomaka, 1991). Interviewee Maria mentioned: "I think all people want to look better, all people want to be attractive, regardless of what's going on in society…" Some people may feel dissatisfied with their appearance and want to improve their self-esteem through cosmetic surgery.

Another respondent, Laura, mentioned:

I got a breast reduction done because it was honestly affecting my quality of life, I was expressing a lot of pain for many, I have also gotten botox done... I must say I do feel more confident in myself when I get it done.
Through her cosmetic surgery, she was able to improve the social impact on her quality of life, address the situation she was suffering from, as well as feel more confident in herself, thus improving her self-esteem.

'Images conveyed by media and advertising' is a main category in Socio-cultural pressure towards Cosmetic Surgery Tourism, which has a full impact on the willingness of the cosmetic tourism industry. The rise of platforms such as Instagram and TikTok, these platforms have made the cosmetic surgery industry more visible and made more people aware of cosmetic surgery procedures, thus increasing the demand for cosmetic surgery. Social media has also made it easier to promote and market the cosmetic surgery industry, making it more convenient to access services. Beautiful, perfect images of people often appear in the media and advertising, and people are increasingly exposed to photos of people who have undergone cosmetic surgery and present a highly idealized version of themselves. Interviewee Eddy noted that: "We consume images and this affects our perception of what is acceptable and what is not."

Sociocultural theory suggests that people learn aesthetic standards in a social and cultural context (Thompson et al., 1999). People judge their appearance according to the aesthetic standards defined by the society in which they live. The images conveyed by the media and advertising influence people's standards of beauty. Social media has also made the cosmetic surgery industry more transparent, allowing consumers to better navigate the backstage of the cosmetic surgery industry. Consumers can see the work, reviews, and recommendations of cosmetic surgeons on social media to make more informed decisions (Sorice et al., 2017). Lia, a Social Media Influencer from Korea, mentioned that:

Plastic surgery is popular in Korea, it seems to be recommended in various places, such as subway and bus advertisements, and many people seem to think of surgery easily even if it is not a major defect...

This can create psychological cues and pressure for individuals to try to look similarly perfect and may lead them to want to change their appearance through plastic surgery, even if it is not necessary.
Meanwhile, social media can also bring some negative effects on the plastic surgery industry. Interviewee Eddy mentioned:

...Comparison with the lifestyle that some instafamous people promote has turned a lot of young people feeling inadequate… wondering what if they are not able to afford trips, treatments?

As a mother of two, Nita mentioned:

...if everybody on television and social media portrays it as a necessity, then we move towards dangerous pathways…I am afraid of my boys being tricked into feeling inadequate in terms of physical appearance…

Some teenagers who do not have sufficient thinking skills might follow the media and advertisements without thinking to determine what is true or false. Interviewers also mentioned that some reality TV shows exaggerate the positive aspects of cosmetic surgery travel, causing viewers to ignore the risks involved. In addition, there is a lot of unverified information about cosmetic surgery on social media, which can lead consumers to misunderstand the industry.

In addition, plastic surgery has a positive impact on society. Firstly, plastic surgery can have a significant positive impact on a person's mental health and self-esteem, helping people who have been hit by various negative comments in society to rebuild their self-confidence. Secondly, plastic surgery can be used for medical treatment and reconstruction in society. It was mentioned in the interviews that there are countries that cover the cost of plastic surgery for the elderly to help them achieve a better quality of life and alleviate physical abnormalities due to age. Some mentioned the ability of plastic surgery to repair damage caused by major accidents or injuries and reconstruct body parts such as the ear or nose. These procedures are vital to restore function and improve quality of life for individuals who have suffered physical trauma, yet they are quite expensive, so many interviewees called on society to reduce the burden on residents by including such costs in health insurance. Those who are skeptical of the bona fide purchasers of cosmetic tourism services have shaped an activist movement
that focuses mainly on the social benefits of the reconstructive branch of cosmetic surgery. Its main contributions revolve around helping survivors of acid attacks to gain access to free-of-cost reconstructive surgery (Goswami and Handa, 2020), as well as transgendered or intersex individuals to receive gender-reaffirming medical interventions, without being obliged to subordinate to outdated criteria for eligibility for surgical gender transition, that is mainly applied by Western medical and legal institutions (Dale and Overell, 2018), which result in the medicalization and marginalization of the members of the transexual community (Vipond, 2015). Finally, plastic surgery is a significant socioeconomic contributor, with the global cosmetic surgery market at $63.4 billion in 2021 (Cosmetic Surgery And Procedure Market Report, 2022). The industry provides jobs for many people, including plastic surgeons, nurses and support staff, and generates income through the sale of medical supplies and equipment, among others.

Table 5. Coding for precursor of happiness

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<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
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<tr>
<td>If you're looking for happiness, I don't think there's anything out there. In fact, you have to look inside. If I look good, it can help me be happier. If I feel confident, and I have my makeup, I have my hair, everything looks like that… sometimes it goes too far...just to be something you're not, and you have a vision that if I look like that, then I'll be happy. I don't think cosmetic surgery is an ethical concept of happiness.</td>
<td>True happiness comes from within, it is not appropriate to depend on cosmetic surgery for happiness</td>
<td>Happiness can be achieved without surgery</td>
<td>Happiness comes from within</td>
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(full table – see Appendix A)

One crucial aspect of the posed research question was the exploration of the ethical aspect in the attitudes that different stakeholders of cosmetic surgery tourism hold towards this socio-economic phenomenon. Given that the ethical stance adopted within the confines of this thesis is utilitarian, the informants in this study revealed that different components of the cosmetic surgery tourism experience synthesize a form of eudaemonia, that is certainly not sufficient enough to amount to what the concept of happiness entails in its entirety. It comes from Alexander, who as a dermatologist
highlights the importance of maintaining an aesthetically pleasing skin condition, in order to retain an equally positive psychological condition: "It is proven that the skin condition and the extent to which a patient feels happiness are analogous."

However, Antonia points out the tourism counterpart within this industry as the main source of satisfaction, claiming that: "I'm more inclined to enjoy the trip, if it offers a related service, such as a hotel offering a spa service. I'll be happy to do it. Cosmetic surgery is not my main motivation."

Beyond the notion of happiness that is mostly attributed to cosmetic tourists’ feelings of contentment with the postoperative result of their physical appearance, professionals from the plastic surgery and design field, agree that the creative process of redesigning one’s bodily architecture, can elicit a sense of self-actualization. In another instance, Antonia yields a good understanding of how cosmetic surgery can aid accident victims with lacerated skin sections to regain the normality of their earlier lives and happiness: "For those who have suffered accidents, it does make them happy if some people can fix them and get help through cosmetic surgery...". Despite the fact that most of the informants hold similar views on the cosmetic surgery tourism serving as an element of happiness, citing different contexts that this industry creates the preconditions for the manifestation of this emotion, some of the interviewees provide a demarcation between the illusory hope for happiness that this business sells to prospect clients and what pure happiness means.

A tenable conclusion from the analysis of this empirical category is that every facet of the cosmetic surgery tourism, whether it is pertinent to the medical artistry of a plastic surgeon, the novelty of the tourism experience or the client’s satisfaction with the amelioration of their body image, does not qualify this industry as an inexhaustible source of happiness. The carried out interviews and the coding process corroborate that cosmetic surgery tourism both as a profession and purchased experience facilitates the expression of positive feelings and thus can be more accurately characterized as a precursor of happiness.
The concept of cosmetic surgery tourism acting as a substrate for the enhancement of positive emotions did not emerge as a surprise, given that when one is redirected to the body of published literature on the studied phenomenon, is confronted with a vast strand of it on the halo effect. The effect mentioned above, which is also referred to as “attractiveness halo effect”, stipulates that individuals whose physical traits are assessed as beautiful, are highly likely to be perceived as equally attractive in relation to their personality (Dion, Berscheid and Walster, 1972). Hamermesh and Abrevaya (2013) point out in their research that aesthetically pleasing facial cues are correlated to a certain extent with happiness on the basis that their possessor can capitalize on them in the labor and partner seeking markets. In light of this evidence, it comes as no surprise that the informants who participated in this research did, in fact, demonstrate a belief that cosmetic surgery tourism can confer benefits to one’s emotional wellbeing.

Moreover, the psychosocial well-being attributed to the creative procedure of rebuilding one’s outer appearance, can be equally successfully approached from the theoretical lens of the self actualization, which is placed at the apex of the hierarchical order of needs propounded by Maslow's theoretical model (Howell, Diessner and Robinson, 2017). In the same direction, Amzy (2019) emphasizes that beauty enhancement procedures are promoted on the promise for mastering one’s potential of their bodily capabilities that will follow with certain advantages within the social sphere, insinuating that cosmetic intervention is portrayed as the pathway to self-actualization. Speaking of the empirical category of cosmetic tourism as a precursor of happiness, behooves the research group to seek an interpretation of the findings through the Aristotelian concept of eudaimonia. According to this, a human leading a life that throughout its course aspires to maximize excellence, is considered to be happy (Capuccino, 2013) and given that elective surgery contributes to the betterment of one’s appearance, it is sensible that a large section of the interrogated people perceive this industry as a source of self-fulfillment and positivity. The aforementioned concept of happiness coincides with the feeling of job satisfaction expressed by some interviewees, which also agrees with the findings of a inquiry conducted by Nahai (2019) that the professionals of the plastic surgery specialty enjoy a higher level of fulfillment in comparison to physicians engaged in other fields of medicine.
On the other hand, in the extracted interview transcripts the equation of elective aesthetic surgery with happiness is considered as a frivolous statement and alludes to a problematic ideal of happiness that can be overtly explicated through Veblen’s (1994) theories of conspicuous consumption and invidious comparison. Under the influence of these two motivational forces, an individual is misguided into expenditure for cosmetic interventions, expecting that the beauty modification will gather the admiration of those who will observe one’s renewed looks and will also act as a token of their financial wealth (Rydzefski, 2014). Consequently, the analyzed empirical theme of cosmetic tourism as a precursor of happiness can be approached from a variety of theoretical perspectives that all agree that this industry can contribute to increased wellbeing, but not to a radical shift in one’s emotional condition.

Table 6. Coding for exploitation/ power relations

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<th>Codes</th>
<th>Subcategory</th>
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<td>I would say there was not explicit pressure but it was more passive. That is for my decision to get botox. I actually feel like socially people tried to talk me out of getting a breast reduction. I actually had to go to a different doctor and request a female physician to feel like my request would be taken seriously. I also saw a female doctor because I felt like the male doctor I saw would not listen to me…I explained multiple times that I wanted them as small as possible and it wasn't until I saw a woman that I really felt like my decision and choice was being heard and taken seriously.</td>
<td>Certain professionals were putting their judgment above their patients desires</td>
<td>Professionals should listen more carefully to patients wants</td>
<td>Power dynamic</td>
</tr>
<tr>
<td>The first thought was precisely that these operations are a maximum benefit for people whose medical condition forces them to resort to cosmetic surgery to correct a health problem. Any discovery or novelty in science, medical or otherwise, we humans use it in a positive as well as a negative sense.</td>
<td>Cosmetic surgery is necessary for certain health issues but it can exploited</td>
<td>Cosmetic surgery depends on benevolence more or less</td>
<td>Power dynamic</td>
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(full table – see Appendix A)
Departing from the fact that the paradigm of this research was defined as constructivist and transformative, since one of the objectives of this empirical study is to initiate a knowledge based change within the domain of cosmetic surgery tourism, this empirical category culminated in multiple foci of the theme of power relations that are formed among the manifold stakeholders of this industry. Power relations within cosmetic surgery tourism stemmed as a distinctive concept during the coding procedures and was invoked by the informants from different perspectives that were relevant to their personal associations with the phenomenon.

At the individual level, Laura remarked:

    I actually had to go to a different doctor and request a female physician to feel like my request would be taken seriously. I also saw a female doctor, because I felt like the male doctor I saw would not listen to me…

From the cosmetic patient perspective, the gendered social dynamics underlie even the consultation phase that precedes the aesthetic operation. On the other hand, another informant accentuates that the potential of this form of medical tourism to advance human well-being or turn out to be harmful, depends highly on the medical staff’s sense of duty. Similarly, another interviewee delineates how the skewed perception of this business can lead to marginalization of social groups, who cannot deal with the toxic beauty ideals placed upon them, that necessitate cosmetic interventions and compel them to succumb to peer pressure for aesthetic perfection. Some interviewees raised the issue of the economic disparities that permeate the cosmetic tourism industry with quite divergent observations. Antonia reported that:

    We are talking about a society that is in a good economic situation. This is because medical aesthetic surgery requires a lot of money. This is a world problem or opportunity. A first world problem…

This critique of cosmetic surgery tourism as a topic solely relevant to affluent societies or an attempt of virtue signaling is held as moot. In the conversation with another stakeholder, it was pointed out that the collaboration between tourism and cosmetic medicine has democratized beauty, providing a range of cosmetic services to a wider
target group, with limited financial resources, who aspires to realize their social fantasy of bettering their outer appearance.

Stina spoke eloquently about this branch of medical tourism serving as a form of hope for prospective patients with restricted budgets:

But in many cases, it would be much cheaper to do it elsewhere. Why don't you take advantage of that?...I just think it's a matter of doing research and you can be smart and spend a lot of time looking at a lot of possible best ways to find a really good surgeon or a specific doctor that you have confidence in...I think there are ways that you can use plastic surgery tourism to your advantage...

Few of the responding individuals in this study reflected in an idiosyncratic way upon the modus operandi of cosmetic surgery tourism, shedding a light upon incidents where the cosmetic tourists found themselves in a powerless position due to their gaps in medical literacy. An informant was greatly concerned with the fact that a vast majority of the public in Korea, driven by a mentality of Sic mundus creatus est with constant bombardment of plastic surgery advertisements, ignore any potential post-surgical harm in face of a beauty enhancing procedure. On the same issue, the interviewed dermatologist, Alexander, specified that: "...our job is not only to provide cosmetic treatments, but also to guide the client in the suitable choice of services...", emphasizing that the informative skills of the medical staff and knowledge management have a drastic effect on the outcome of a cosmetic surgery. Overall, the uneven distribution of power, whether it is pecuniary or educational and originates from the supply or demand side was prevalent during the interviews with multiple stakeholders, confirming that the sense of disdain towards the cosmetic tourism industry that circulates in various media outlets is legitimate (Craddock et al., 2022).

Issues such as feminism, boundaries between agency over one’s anatomy and dispelling uniqueness for the purpose of embracing a trendy look, as well as the exploitation of the majority of cosmetic tourists’ ignorance on prospective complications from cosmetic surgery centers that prioritize profit over ethics, are diligently covered in the literature.
The interviewee’s account of being imposed the male surgeon’s take on her personal decision to undergo an elective procedure is cued by the ‘Pygmalion’s complex’, which metaphorically speaking compels the plastic surgeon to view themselves as modern deities, enamored with the creative process of crafting an aesthetically impeccable female body, that in its turn suffocates the free will of the individual being subjected to a cosmetic procedure (Davis, 1998).

Another form of oppression that emerged from the conducted interviews is related to the cultural homogenization that encroaches on minorities right to visibility of their identity in the public sphere, when their natural features do not comply with the current artificial beauty standards (Wimalawansa, McKnight and Bullocks, 2009). In that sense, Debord's (1995) landmark work *Society of the Spectacle* pictures accurately the terms that interviewees utilized in their accounts of cosmetic surgery tourism, as privilege, means of oppression and by product of mass culture, arguing that the individuality is annulled by the spectacle, which turns them into a populace that is attempting to gain a false sense of identity through the consumption of visual cues (Debord, 1995) that serve as a metalanguage for the globalized capitalist structures and culture (Warner, 1993). As a solution to the rampant malpractices and negligence observed within the cosmetic tourism territory according to the interviewed stakeholders’ narration, knowledge dissemination from the physicians’ and medical tourism facilitators’ side tailored to the cosmetic tourist’s needs and level of understanding, could bolster the ethical profile of this industry (Hopkins et al., 2010) and appoint the practitioners not merely as executioners of cosmetic procedures, but as guarantors of a safe aesthetic procedure plan (Tiourin, Barton and Janis, 2022).
Table 7. Coding for Risk Perception

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<th>Extracted data</th>
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<tr>
<td>Most of what I see in the media is negative. People go to more low budget resorts or other places where they do treatments without enough control. So they are using pre-treatment rates and chemicals that are not good for your body…</td>
<td>Negative news in the media about the quality of cosmetic surgery</td>
<td>Safety of cosmetic surgery</td>
<td>Risk of medical issues</td>
</tr>
<tr>
<td>…the only thing I've heard about surgical procedures like plastic surgery travel is the risks and the horror stories and it going wrong. Either a specific material was used in the implant, or the surgery may have been illegal in someone's home country. And then realizing that this material is illegal for a reason because it could be potentially toxic or dangerous. Or people get the surgery and then go home and then just have their own personal issues like being rejected or the implant is not correct and then they have a very difficult time fixing it with their general surgeon or the plastic surgeon that they see at home because the surgeon back at home is not the person who did the surgery or they're like not familiar with the material that was used so they have a very difficult time fixing it…</td>
<td>Potential dangers of transnational cosmetic surgery (ethical aspects and safety)</td>
<td>Due to the risks associated with cross-country treatment</td>
<td>Risk of medical issues</td>
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(full table – see Appendix A)

Another key aspect of the proposed research question is to explore the risk perceptions of the different stakeholders of cosmetic tourism in this phenomenon. Risk perception is the degree to which a person perceives the risk associated with an action or event, and risk perception is a key factor in choosing a destination for cosmetic surgery tourism, where perceived risk can hinder travel. Tourists tend to avoid risky destinations (Chew and Jahari, 2014), and perceived risk can influence their hesitation and delay travel decisions (Wong and Yeh, 2009). As perceived risk is a subjective category, different
people may assess the same situation differently in this regard (Karl and Schmude, 2017).

Based on the mental health stress discussed above, cosmetic surgery is equally at risk regarding the psychological management of trauma. The improvement of psychological status through plastic surgery is not conclusive. Maria mentioned that:

…you're not trying to get to the root of the problem. It can help, but it can also make things worse because things aren't getting better only by changing your face or something else.

Psychological trauma is not necessarily alleviated by cosmetic surgery, and cosmetic surgery does not address the root of the problem. Another interviewee, Katrin, said:

About my mindset that I definitely have two extremes telling me I totally don't need it, and like being true to that. I would either hate it or now it's time to change everything.

She indicated that once plastic surgery begins, psychological extremes can lead to risks.

The most intuitive risk associated with cosmetic surgery travel is the risk of medical problems, a risk that was mentioned most often by the respondents. Based on the fact that cosmetic surgery is a medical procedure, there are certain risks associated with the surgery. These risks include infection, bleeding, anesthesia risks, post-operative complications, etc. If you go abroad for cosmetic surgery, it may be difficult to fully understand the doctor's expertise and to get timely and effective help in case of problems. Maria mentioned that:

Most of what I see in the media is negative. So they are using pre-treatment rates and chemicals that are not good for your body. Some countries lack regulation, different countries or regions have different standards for the training and licensing of medical professionals, and the physicians performing the procedure may not be adequately trained or qualified.
In addition, the facilities in which the procedure is performed may not meet the same standards of cleanliness and safety as those in more developed countries. Another interviewee said:

The only thing I've heard about plastic surgery travel is the risks and the horror stories. Either a specific material was used in the implant and then realized that this material is illegal for a reason because it could be potentially toxic or dangerous. Or people go home after getting the surgery and then just have their issues...and then they have a very difficult time fixing it with the plastic surgeon that they see at home.

Lia, who is a Social Media Influencer from South Korea, said: "Plastic surgery is popular in Korea, but the risk seems to be high. Many people live with side effects until death by performing surgery by unqualified people…" Postoperative complications or some adverse reactions may occur with cosmetic surgery, and these may occur with procedures performed by qualified professionals in a sterile environment, but the risk may be greater when procedures are performed in facilities that do not meet the standards of more developed countries. If complications arise, it may be more difficult to receive follow-up care or treatment abroad, especially if the patient does not speak the local language or is unfamiliar with the healthcare system. There is also a risk of communication barriers between patients and healthcare professionals, and it may be more difficult for patients to fully understand the procedure and make an informed decision. Thus perceived risk has a strong negative effect on attitudes, the greater the perceived risk, the worse the respondent's attitude toward medical tourism (Boguszewicz-Kreft et al., 2022).

Decisions made by tourists are influenced more by perceived risk, than by the actual risk associated with travel to a particular destination (Irvine and Anderson, 2006). The degree of risk perception appears to be of additional importance. Whether patients are clearly aware of the risks associated with cosmetic surgery before making a decision, Jonas, an employee who works in the dental tourism section, said:
To some extent, I believe reality shows have contributed to making our job more known to a wider audience and familiarizing them with some treatments, but that is tricky to the extent that people lose the sense of the risks that are hidden in every cosmetic treatment because these shows usually exaggerate the positive side of the transformation...

The information disseminated on social media tends to exaggerate the positive aspects, causing people to overlook the risks involved. Cost risks include the cost of time and money associated with cosmetic surgery tourism; medical risks include problems related to poor surgical outcomes, the poor performance of medical providers, and adverse conditions experienced by tourists after cosmetic surgery, such as complications; and destination risks include the harsh environment of cosmetic surgery tourism destinations and the potential for legal risks when cosmetic surgery is performed abroad. The destination risks include the harsh environment of the cosmetic surgery travel destination and the legal risks that may be faced when performing cosmetic surgery abroad, which may make it difficult to obtain local legal assistance, if there are problems with the surgery. Therefore, adequate background checks and thorough consideration are very important. Visitors need as much information as possible to minimize or prevent such risks. Information can be retrieved via the Internet, and patients can also obtain other sources of information, such as advice from people who have gone through similar experiences, family members or doctors, or even check the reputation of the medical institution.

3.3 Main emergent theme: Dimensions of Positive Aging

The core category of this grounded theory research on cosmetic surgery tourism, which emerged during the phases of axial and selective coding, is labeled as “Dimensions of Positive Aging”. The evolution of this category was prompted by the fact that it displays the analytical power to contain and tie together the concepts and codes of all the other subthemes in a cohesive manner (Strauss and Corbin, 1998). The argument that positive aging forms the crux among the different empirical themes and the nucleus of the generated preliminary theoretical model, is backed by the fact that the
interrelationships among the subcategories are reflected in the central category’s conceptualization (LaRossa, 2005).

Positive aging, as a varifocal concept, integrates strategies that span across the health spectrum (Teater and Chonody, 2020) and encapsulates the value of a holistic approach towards attaining physical and mental well-being, as an individual ages (Kaushik, 2018). In order to sensitize the reader of this thesis to the manner in which the previously empirical themes have contributed to the elevated core category, it will be laid out an array of the aspects extracted from each category that is subsumed under the main theme of positive aging.

Starting with the psychological aspects of the attitudes that the interviewed stakeholders displayed towards the topic of cosmetic surgery tourism, the issues of low self-esteem and age related insecurities reinforced by one’s social environment, prevailed during the stages of data collection and analysis. One of the statements that were classified under the theme of mental health pressure and echoed by the majority of this research’s informants on the basis of the psychological condition driving one’s urge to modify their appearance with cosmetic treatments to a large extent, was the following, by Stina:

I feel like there's a lot more psychologically going on when someone wants to get cosmetic surgery. I still find it really unfortunate, when I see somebody that has really heavy plastic surgery… And I don't understand why you want to look that way… I'm happy that you're happy. But I also feel like there are a lot more subtle things that people can do. And it's if doing something simple like getting… fillers or getting some Botox on your eyebrows, is going to make you feel better about yourself, then who am I to judge you for that?

Interestingly, Eriksen (2012) compares the two contrasting notions of perceived youthfulness and age concealment through surgical means and asserts that the recipients of cosmetic surgery continue to display distress over the deterioration of their physical appearance as their aging progresses, while those who have opted out of cosmetic interventions appear to maintain a more relaxed mindset towards aging. With regard to
the interactions between one’s psychological well-being and investment in maintenance of an aesthetically pleasant appearance, Öberg and Tornstam (2001) underscore that the placed importance in retaining one’s youthfulness is a contributing factor to ageism and traces back to the consumerist society. With these observations in mind, it is plausible that positive aging as a core concept and practice is implied by the informants, as a response to the toll that has taken to mental health the socioculturally imposed fixation on eternally young looks.

Concerning the link between the sociocultural pressure theme and the core theme of positive aging, the reflections of the interviewed stakeholders suggest that regardless of the origin of pressure to retain a rejuvenated appearance, the lack of ability to preserve aging features at an acceptable level sets the individual up for social stigma. Laura’s opening up on how internalizing societal beauty expectations has afflicted her and shifted her thinking, like the majority of the female aging population does, into equating her value as a human being with the degree to which she still appears presentable, is indicative of why positive aging emerges as a necessity and central theme:

I got a breast reduction done because it was honestly affecting my quality of life. I was expressing a lot of pain for many years. There was also a social component I felt ever since I was young that men would not take me seriously…I have also gotten botox done. Honestly that choice was a little more vain. Like most women I was having a hard time recognizing myself as I got older and I hate that I let society get in my head and tell me that to have value I need to be pretty though I must say I do feel more confident in myself when I get it done so it's a complicated topic and comes with complicated emotions.

Equally critical to the understanding of the association between sociocultural pressure and positive aging is the observation of Lia, that:

…the standard of beauty in Korea is so clear that many people follow it and have similar faces and features, thereby losing their own external speciality and characteristics…
which implies that the lack of a positive aging approach towards beauty poses a threat to the *sui generis* of humankind. In the same direction, Stirling (2010) accentuates the need to devise novel policies within the health and cultural sectors, that will be re-oriented towards a healthy aging embracing lifestyle, rather than continuing to center any effort towards combating the natural process of aging.

Different dimensions of the main emergent theme of positive aging constitute the empirical categories of risk perception and power relations within cosmetic surgery tourism. Both of the aforementioned subcategories consist of codes that depict the negative aspect of the industry in question, conveying implicitly that even after an individual has undertaken the risk of bettering their physical appearance through traveling, in order to undergo surgical procedures, the outcome and the accompanying reactions from those observing the change, are vastly labile and are falsely promoted as a panacea to aging mechanisms. Stina describes the failure of cosmetic surgery tourism in fostering a shift on a level other than skin-deep:

> ...people get the surgery and then go home and then just have their own personal issues like being rejected or the implant is not correct and then they have a very difficult time fixing it with their general surgeon or the plastic surgeon that they see at home, because the surgeon at home is not the person who did the surgery.

Another code that belongs to the conceptual category of power relations and demonstrates that this domain of medical tourism resembles a double-edged sword, presenting both advantages and harm for one’s health, is reflected by Alexia’s narration:

> The first thought was precisely that these operations are a maximum benefit for people whose medical condition forces them to resort to cosmetic surgery to correct a problem. Any discovery or novelty in science, medical or otherwise, we humans use it in a positive, as well as a negative way.

Along these lines, Honigman and Castle (2006) argue that people, especially those belonging to the aging segment of the population, have, for a long time, voluntarily exposed themselves to the calculated risk of beauty enhancement procedures, in order to
fit in the culturally prescribed norms of beauty, without being able to avoid the probability of a unsatisfactory postoperative result.

This leads to the next empirical subtheme, of cosmetic tourism being insufficient in providing true happiness to those who seek a change in their physical and mental condition through this type of experience, which informs the main emergent theme of positive aging. Maria, one of the interviewed stakeholders, comments on cosmetic surgery being portrayed as a source of happiness, illuminating, how espousing a positive aging outlook on one’s growing older appearance can be more effective in boosting one’s mood compared to receiving cosmetic treatments:

If you're looking for happiness, I don't think there's anything out there. In fact, you have to look inside. If I look good, it can help me be happier. If I feel confident, and I have my makeup, I have my hair, everything looks like that… sometimes it goes too far…just to be something you're not, and you have a vision that if I look like that, then I'll be happy. I don't think cosmetic surgery is an ethical concept of happiness.

With that said, the core category of this grounded theory research on the attitudes towards cosmetic surgery tourism, is the positive aging concept. Positive aging epitomizes what the research informants have identified as a catalyst in an inarguably necessary sustainable shift of this industry, given that their perception of it, in terms of ethics, culture and psychology lead to the conclusion that its efforts to deliver a safe cosmetic result, that will increase one’s happiness and social acceptance, have been proven futile to a certain extent.

4. Discussion

In this section, the summary of the findings will be presented addressing the issues raised in the introduction involving the phenomenon, along with a representation of the emerging theme ending the discussion.
4.1 Interpretation of the Findings

This qualitative research on the cosmetic surgery tourism phenomenon, utilizing the constructivist tradition of grounded theory, provides insight into the complex dynamics formed between the ethical, cultural and psychological aspects of the attitudes that various stakeholders of the tourism field in question, hold towards it. The collected data, after being coded according to the specified methodology, resulted in five conceptual subthemes and one core category about 1. Mental health pressure, 2. Socio-cultural pressure, 3. Precursor of happiness, 4. Exploitation and power relations, 5. Risk perception and 6. Dimensions of Positive Aging as the main theme. Whilst the aforementioned empirical themes can seemingly appear as isolated from each other, the reality is that this thesis’ authors theorize that they are correlated and exert strong influence in the emergent main theme, based on the analysis of the empirical data with the help of theoretical underpinnings in the previous chapter.

Moreover, the conceptual themes evolve the knowledge around the rapidly changing industry of cosmetic surgery tourism (Nassab et al., 2010), because they stemmed from interviews with stakeholders of this industry, where they elaborated unhesitantly on their attitudes towards the predefined aspects, providing information on topics that were previously unnoticed from a wider audience, such as Psychodermatology, for instance. Understandably, the findings of this thesis extend beyond previous studies of the attitudes towards those have been the recipients of cosmetic enhancement procedures (Tam et al., 2012), revealing that regardless of the position that a stakeholder occupies within the tourism sector under scrutiny, they perceive the function of this sector both as beneficial and problematic, simultaneously. Evaluating the findings from this angle, it is timely to assemble them in the proposed grounded theory model that will be presented in the following section.

A close observation of the interrelationship between the emerged concepts, the central theme and the investigated aspects of the stakeholders’ attitudes, is pivotal to driving progress towards a sustainable turn within the cosmetic surgery tourism industry, given that until recently has been placed light upon the ageism and the anxiety of the majority
of cosmetic tourists over fixing their aging skin, solely from the perspective of motivation to purchase cosmetic services (Pearl and Percec, 2018), while in this thesis the results demonstrate that positive aging can be integrated as a fundamental principle within the cosmetic tourism industry operations and transform the attitudes towards it.

4.2 The emergent grounded theory model

![Figure 1. Theoretical Model of Positive Aging shift in the attitudes towards Cosmetic Surgery Tourism (Authors, 2022)](image)

The figure presented above represents the grounded theory model of the ethical, cultural and psychological aspects of the stakeholders’ attitudes towards cosmetic surgery tourism. The theoretical framework that is constructed upon the empirical findings is visually represented by a triple-neck round bottom flask and three transfer pipettes. As
Charmaz (2006) explains, the visualization of the emerging categories is of tremendous epistemological value, because it enhances one’s comprehension of the relationship between the different categories of the empirical themes. With this in mind, the presented model will provide an understanding of how the investigated aspects of the stakeholders’ perception of the cosmetic tourism industry and the subcategories that emerged from their coding and were presented in the preceding chapter, support the nascence of the core concept of the positive aging shift within the studied socioeconomic field.

As it is demonstrated in the model above, the central elements of the grounded theory that is named “Theory of Positive Aging shift in the attitudes towards Cosmetic Surgery Tourism” are informed by the research question on the ethical, cultural and psychological aspects of the stakeholders’ attitudes towards the aforementioned tourism phenomenon and the empirical themes that originated from the analytical stage of the gathered data and thus, classified under the respective parts of the initially posed question. The three major taxa of the ethical, cultural and psychological aspects of the stance towards cosmetic surgery tourism symbolize how the stakeholders, that are straightforwardly or indirectly related to this field of medical tourism, view the way it operates in its entirety.

Based on these facts, the theoretical model is narrative in its essence, since it offers an account of the meanings that the interviewed stakeholders attribute to this tourism industry. Starting from the order of the psychological points in their attitudes, it is observed that the inherent risk of a potential cosmetic surgery tourism experience (Ferrer and Klein, 2015), as well as the pressure that the fabricated beauty ideals exert on one’s mental health (von Soest, Kvalem and Wichstrøm, 2011) are dominating this category. Later on, one becomes cognizant of the socio-cultural pressure to pursue an appearance-altering treatment and the intricate mesh of power relations (Holliday, Jones and Bell, 2019) that affect how this industry is perceived on cultural terms.

The third major category conceptualizes how the research informants perceive the ethos of the cosmetic tourism industry from an utilitarian perspective and entails the subtheme of the attitude that it is considered as an antecedent to happiness, but certainly not a
source of it. Taking into account the aforementioned main conceptual elements, the core category of the positive aging shift in cosmetic surgery tourism is situated at the bottom of the flask, because it purposefully implies that the emerged patterns within the ethical, cultural and psychological aspects of the stakeholders’ attitudes are instilled into the main theme and shape its composition. The core category denotes the expressed viewpoints of the stakeholders for a transformation of the industry and the attitude towards it that will be enacted through embracing a positive aging mentality. Finally, this thesis’ grounded theory model revolves around the metaphor of a chemical synthesis reaction, where the three different explored aspects of attitudes and their sub themes react, in order to form a positive aging shift in the attitudes towards cosmetic surgery tourism.

5. Conclusion

_In the final section a conclusion has been reached, where all the themes, analysis and phenomenon are connected to some extent. The exploration of the theoretical and practical contribution of this study is also presented along with the recommendation for future research._

5.1 Theoretical contribution

Ultimately, the four recurring discourses were studied and applied throughout the undertaken paper, the combination of the aforementioned sustained applicable for the duration of the interview process and eventually in the analysis. The connections made between mental health and socio-cultural pressure was only to be expected, since this pair is a constant. The society impacts mental health and mental health in turn impacts the society. These two in relation remain rarely debated with reference to one another. As in the analysis chapter, the beauty standards set by society and culture, overall are associated with all themes scrutinized in the paper. Those above - stated standards are the driving factor behind cosmetic surgery and cosmetic surgery tourism, which overflow the minds of those influenced mostly by such fairytales without consideration of risks. It was voiced on particular occasions the desire for surgery overpowers that of
fear of risk and failure. Meaning, those influenced are affected to the point of despair. Having said that, ever so often, cosmetic surgery shall not suffer from being painted as the villain, the way certain specific concepts the society built should be reconsidered and reevaluated, instead. Repeatedly, cosmetic surgery will rescue or rather improve the lifestyle of accident victims or body dysmorphic patients and many other exceptional cases. Thus, it shall not be a black and white topic, there cannot be a right or wrong, it is all about perspective at the end of the day.

5.2 Implications of the study
Being cognizant of the precipitate increase of the aging society globally and the intensification of the ageism that accompanies this growth and prompts a large part of the population to seek the benefits of a cosmetic surgery tourism experience (Roh et al., 2019), the findings of this thesis can be used as a guide for a cohort of professionals related to this branch of the medical tourism industry, ranging from policymakers, prospect cosmetic tourism employees and entrepreneurs, medical staff trained within the specialty of cosmetic surgery, as well as ombudsman institutions dealing with cosmetic interventions negligence. The novel knowledge created within the confines of this thesis can be equally useful to the media and marketing business field, given that it is a mandate for their smooth operation to keep pace with the quickening speed of change that attitudes towards cosmetic surgery tourism sector present and avoid the spread of falsehood about the latest developments in it (Ashikali, Dittmar and Ayers, 2017). Finally, this research’s findings could assist psychologists that are engaged in the practice of preoperative assessment of a cosmetic tourism client, to rethink the benefits of a potential supplanting of obsolete narratives (Gilman, 1998) with a newly emerged positive aging approach to the future recipients of cosmetic tourism experiences.

5.3 Limitations
For this research, the same attention needs to be paid to the requirements and limitations of the methodology used in the study in order to better improve the validity, reliability and quality of the data in the study. This research aims to explore the attitudes of various international stakeholders towards beauty tourism in terms of culture and ethics, and the
mapping of attitudes regarding cultural and ethical aspects, and to synthesize a theoretical foundation based on observations in the empirical domain by using grounded theory research methods to identify patterns of thinking derived from the coding process.

In empirical research there are two key limitations, first, empiricism cannot prove you are right - only that you are wrong. Second, empirical research generally does not allow probing into meanings, values and the deeper nature of tourism experiences. A subjective approach is needed. In the semi-structured interviews, the quality of data obtained from personal interviews depended more on the skills of the researcher than on other forms of data collection. Furthermore, the ability to obtain information and maintain interest in the topic depends not only on the interviewee, but to a large extent on the efficiency and skill of the interviewer, avoiding potential bias in the interview, and ensuring that the results reflect the interviewee's own views rather than being guided or the views of others, with potential problems of subjective data collection (Smith, 2017). It is also necessary to take into account the time limitation. Since this study was limited to two months, reasonable planning was required to manage time.

5.4 Suggestions for future research
A post hoc reflection on the direction that future researches could follow, includes the testing of the emergent theory of “Theory of Positive Aging shift in attitudes of Cosmetic Surgery Tourism” by following a deductive reasoning and exploring the possibility of extrapolating the findings to a greater area of cosmetic surgery tourism and in general of the medical tourism (Foley and Timonen, 2014). Another proposed focal point of future research is on the ramifications that the interactions between the cosmetic tourists and the local population of non-recipients of beauty enhancement treatments that are residing within the proximity of cosmetic tourism hubs, bear for the societal cohesion of the destination. Inarguably, the global challenge of the rapidly aging population combined with the low fertility rates (Lee et al., 2014) and the fact that cosmetic interventions have allowed their recipients to bypass the human evolutionary mechanisms and hence, increase their chances of appearing more attractive and
consequently more likely to mate (Davis and Arnocky, 2022), calls for further investigation of how tourism can act as a modulator of the forthcoming extreme occurrences. Finally, the rising trend of biohacking as part of a wider transhumanist movement, whose emblem is the adoption of cyborgian appearance (Pio-Lopez, 2021) displays high research interest, especially on possible scenarios of taking over the market share of the traditional cosmetic surgery tourism or rendering them more accessible to a wider audience by establishing a cooperation with the tourism industry (Wright and Zascerinska, 2022).
References


Dick, B. (1999). Sources of rigour in action research: addressing the issues of trustworthiness and credibility. In: *Association for Qualitative Research Conference" Issues of rigour in qualitative research"*, Melbourne, Australia.


### Table 3. Coding for mental health pressure

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a therapist, I understand that people who have plastic surgery done, generally have low self-esteem and tend to increase their self-confidence by having repeated cosmetic surgery. This attempt is doomed to failure in the long run, as self-worth and self-confidence are things that come from within and not from external validation.</td>
<td>Plastic surgery is not sustainable in the long run, confidence comes from within</td>
<td>Plastic surgery is a temporary fix</td>
<td>Superficial use of cosmetic surgery</td>
</tr>
<tr>
<td>Cosmetic surgery can be beneficial when it does not turn into compulsive behavior, i.e. the person does not constantly and compulsively resort to repeated operations to correct a physical appearance he/she is unhappy with. Mental health can be positively influenced when…access to cosmetic surgery…services at a maximum level of performance. As a specialist in mental health, I remain of the opinion that a surgeon's scalpel can correct a physical defect, but cannot correct a soul/mental/inner one.</td>
<td>Cosmetic surgery could turn into an addiction if not monitored and therefore a specialist should always be involved in this case</td>
<td>Cosmetic surgery can create happiness but also addiction</td>
<td>Addiction to cosmetic surgery</td>
</tr>
<tr>
<td>…it is the most important thing to understand the reason behind the want for plastic surgery. If the person…would first be guided towards a therapeutic process they would be much better off from all points of view. Why? Because I believe that cosmetic surgery is only &quot;a false remedy&quot; for apparent defects and the cause of what a person feels as a defect is a deeply inner one. Self-compassion, self-acceptance and self-forgiveness are some of the &quot;remedies&quot; that a person can discover in a therapeutic process and that can truly heal them.</td>
<td>Cosmetic surgery is not guaranteed to solve how one feels about oneself.</td>
<td>Cosmetic surgery scratches the surface of the issue &amp; Specialist guidance is recommended</td>
<td>Superficial use of cosmetic surgery</td>
</tr>
<tr>
<td>I don't think that cosmetic surgery tourism directly affects, but cosmetic surgery in general, used as a solution for psychological disorders, such as even body dysmorphic disorder, affects people psychologically.</td>
<td>Psychological disorders will affect people mentally</td>
<td>People are influenced by external factors</td>
<td>Superficial use of cosmetic surgery</td>
</tr>
</tbody>
</table>
There are a lot of unhappy people in today's society...they go looking for people who can validate them. I think sometimes...surgery and stuff, I think...it's a problem and I want to change it. It's not that I'm putting all my trust in this operation to make me happy. A lot of these people go through the media and they're just like, I need to have this surgery to be happy...I think it's dangerous and unhealthy when you try to fill a hole in yourself by doing something to yourself...

<table>
<thead>
<tr>
<th>Thinking that plastic surgery alone will solve one’s insecurities is unrealistic and unhealthy</th>
<th>Cosmetic surgery scratches the surface of the issue</th>
<th>Superficial use of cosmetic surgery</th>
</tr>
</thead>
</table>

...if only I looked like this, I'd be happy. You see something on social media, like Kylie Jenner or whatever. She was so happy, and she changed. She's a completely different person today...If you're a young girl who feels insecure about yourself and you identify with that kind of person because you don't actually know if that person is happy or not, but that's your idea of happiness. Then that's a bad thing. I don't think you can help people by changing them. If you want to make a person feel good about her or himself. You have to help that person love themselves.

<table>
<thead>
<tr>
<th>Today's beauty standards are damaging younger generations mindset and mental health</th>
<th>People are influenced by external factors</th>
<th>Superficial use of cosmetic surgery</th>
</tr>
</thead>
</table>

You can still have good mental health and have surgery, but you can also have really bad mental health and see it as the solution to your problems and your well-being, and then it's, I think it's a sad thing. It's like, you're not trying to get to the root of the problem. You're just trying to find a quick fix...when you go home, you find all the things that you were unhappy about before...it's still there, even if you look different...

<table>
<thead>
<tr>
<th>Plastic surgery will not fix issues in the long run</th>
<th>Plastic surgery is a temporary fix</th>
<th>Superficial use of cosmetic surgery</th>
</tr>
</thead>
</table>

I feel like people do it to say that it makes them feel good, but then they can't stop. And then it turns into more of an addiction, which is also not great for mental health. I think that if someone is struggling with depression, the way out is not to change your face. I think the best way to get help for mental health is therapy and medicine. And then taking a step back and analyzing your face once you feel like you're in an OK balanced state of mine.

<table>
<thead>
<tr>
<th>Plastic surgery could be addictive and in that case a specialist should get involved</th>
<th>Cosmetic surgery can create happiness but also addiction</th>
<th>Superficial use of cosmetic surgery</th>
</tr>
</thead>
</table>
…you're unhappy with yourself in some way. It may not be a mental issue, but your own confidence is not good enough. Maybe this can be mixed appropriately in other areas as well. But if this helps these people gain better confidence, that's certainly a good thing. It's just a shame that it needs to be done…

<table>
<thead>
<tr>
<th>Plastic surgery can give you a boost of confidence</th>
<th>The gains of undergoing cosmetic surgery</th>
<th>Positive aspect of cosmetic surgery</th>
</tr>
</thead>
</table>

…there are many surgeries that people can have that are permanent…if you did something at a young age because you wanted to and you didn't put that much thought into it…Then 10 years later you regret it. I think a lot of these situations could be easily prevented if you…put a higher priority on mental health…and make sure that you were doing it for the right reasons.

<table>
<thead>
<tr>
<th>Consultation with a specialist pre-surgery might save an individual regret later on in life</th>
<th>Specialist guidance is recommended</th>
<th>Mental awareness</th>
</tr>
</thead>
</table>

Body dysmorphic disorder is a huge problem in that community. It's also like a mental health issue because they like mentally they're not happy with the way they look. Therefore, it affects their mental state and makes them feel anxious or depressed…Now we live in a time where if you have a problem like that it can be solved by physical means, then you can choose to do that. That's really good… I think that's amazing. People can choose to do that now. I think maybe in cases like this, doctors shouldn't feel the need to check with a psychologist because I think for people who are going through this, it could be seen as disrespectful, like you're maybe minimizing their problem and like you just want to get this surgery…

<table>
<thead>
<tr>
<th>Perhaps those suffering from body dysmorphia would not benefit in the same way from a check with a psychologist before surgery</th>
<th>The gains of undergoing cosmetic surgery &amp; Questioning reason behind their decision might seem inappropriate</th>
<th>Positive aspect of cosmetic surgery and cause</th>
</tr>
</thead>
</table>

I've been struggling with body dysmorphic disorder for as long as I remember this fact that you don't, you don't want to take me seriously and that will make them feel better?...I think maybe it's good to ask them, like, have you been seeing a therapist or a psychologist for the last number of years, and maybe if they say yes, then like a pinhole, I think you've talked to your psychologist about that and we can move forward. And then, if they say no, just try to be respectful and say, I still think you should get a second opinion. Just to make sure that this is what

<table>
<thead>
<tr>
<th>Consulting a therapist is not always necessary</th>
<th>The gains of undergoing cosmetic surgery &amp; Questioning reason behind their decision might seem inappropriate</th>
<th>Positive aspect of cosmetic surgery and cause</th>
</tr>
</thead>
</table>
you want and that you're not doing it for inappropriate reasons…

…when it comes to, like, other surgeries, other surgeries that people can do just because they think it's a good trend, then I can understand why maybe having a mental health professional on him might be more appropriate. Because there's a lot of people that, you know, want to get with the times and feel trendy and then they get huge lip implants or similar surgeries because that's what's popular right now. And then 10 years later, when that's no longer a fashionable fad. It's like you can't take it back…

Psychological support, when it comes to cosmetic surgery can be beneficial in specific scenarios to ensure good judgment is practice

Specialist guidance is recommended

Mental awareness

I observe that especially young women arrive at an appointment with me showing me pictures of various body and face parts that belong to famous women. That leads me to a confirmation of the association between mental health issues and cosmetic surgery tourism. Because when someone hasn't a clear self image tries to find a cure in other things… In their eyes a minor fault seems like a catastrophe, but according to my experience even an imperfection can add to one's unique appearance.

Numerous patients could benefit to try to improve their self image before proceeding with surgery

Specialist guidance is recommended

Mental awareness

I am certified in Psychodermatology and there is an immense bibliography on the connection between mental health and cosmetic surgery tourism. Insufficient knowledge of the psychological background of a client leads to erroneous estimation and can aggravate client's emotional state, even after a renewed appearance.

Mental health support is crucial component in this field

Specialist guidance is recommended

Mental awareness

It's an additional pressure to them or another reason to pursue a therapy that will result in enhanced self-esteem…It is said that what cannot be seen is more important that what is visible and I agree with this statement. You cannot offer to a patient a state-of-the-art experience without considering the reason why they have asked for a specific cosmetic procedure.

It's important the analyze the reason behind wanting to pursue cosmetic surgery

Specialist guidance is recommended

Mental awareness
I spent so much time asking myself why I wanted selective surgery and trying to understand the drive behind it. I would like to say that I came to the conclusion that it was for my sole benefit but as I mentioned earlier that I understand that there are more vain reasons behind my desire to get botox done and I also feel like that Okay. As only as I can acknowledge that and understand that even though this is something I want I would still be beautiful and worthy of love without it I think it's ok. Oh and also being grateful for being in an age where I can have this opportunity as well as being financially stable enough to afford it.

I agree that in order to offer a cosmetic surgery client a safe and good postoperative result, the medical staff must, in the first place, understand why the client is asking for a certain result. Take as an example, my thought on a second surgery, regarding my breast’s anatomy after two births. I wouldn’t trust a plastic surgeon that doesn’t care to explore why I am asking to alter this feature of mine, because in my eyes it would seem that this doctor is interested only in making some money and not see my needs on a deeper level. And on another note, when you see so many people wanting to become something totally different than they are, it's important to check why they display this taste and maybe their surgeon should guide them to a more non-invasive and tailor-made to their natural physique procedure.

There can be some type of pressure either from society or those around us to look a certain way which can lead to drastic changes. People are influenced by external factors. Superficial use of cosmetic surgery.

It is evident there is a need to understand why an individual decides to undergo a certain surgery and it is frequently necessary to consult a specialist. Specialist guidance is recommended.

Once again it is plausible to want to understand the reason behind those invasive surgeries and potential specialist consultation might be necessary. Mental awareness.

...I feel like there's a lot more psychologically going on when someone wants to get cosmetic surgery. I do still find it really unfortunate when I see somebody that has really heavy plastic surgery… And I don't understand why you want to look that way… I'm happy that you're happy. But I also feel like there are a lot more subtle things that people can do. And it's if doing something simple like getting… fillers or getting some Botox on your eyebrows, is going to make you feel better about yourself. Then who am I to judge you for that?...

...Mental awareness.

Specialist guidance is recommended.
<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most of my friends are very skeptical about plastic surgery because most of my old friends from my childhood are men. When you talk to men about making some changes, I talk about lifting up my eyelids. They were looking at me like it was a stupid thing to say…</td>
<td>Most people are skeptical of cosmetic surgery</td>
<td>Attitudes of people in society towards cosmetic surgery</td>
<td>Family and social expectations</td>
</tr>
<tr>
<td>… I think all people want to look better, all people want to be attractive, regardless of what's going on in society… they would think that then it would give them some kind of an advantage in their social life… if we could change the core of society so that people don't feel terrible about just being themselves… I think we should do that… I just don't think that's going to happen anytime soon…</td>
<td>Some people think they can get preferential treatment in society through cosmetic surgery.</td>
<td>Social Preference Subliminal Influence</td>
<td>Personal self-esteem</td>
</tr>
<tr>
<td>My job and social responsibilities don't force you to pay extra attention to your appearance. But when I was in the travel industry, it was more like the lowest level of appearance was that you had to be neat and clean… In the travel industry, companies may need a certain type of person, depending on what kind of business you have, and the people who work there are part of their brand, and that can put pressure on people as to how they should look.</td>
<td>The influence of career and social responsibility on beauty</td>
<td>Job requirements for physical appearance</td>
<td>Job and Career Development</td>
</tr>
<tr>
<td>When I'm in the states, I don't feel like I need any work done. And I'm happy that I have a body that's functioning and like, I like the way that I look. But then I feel like every single time I come to Sweden, I'm like, Oh, my gosh, I could do this, enhance my face even more. And I think in both countries, the beauty standards are very different. And sometimes I just feel like, looked over upon in Sweden. And then I'm like, Oh, I really want to get this done. But I feel like as soon as I get to the states, all of those ones just evaporate…</td>
<td>People are influenced by the pressures of different national cultures</td>
<td>Different countries culture lead to cosmetic surgery</td>
<td>Family and social expectations</td>
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</tbody>
</table>
Social media influences my purchasing decisions 100%. I have a list on my tiktok that says products to buy. I do buy it. I go into the makeup store and I go here's my list and it's just coming straight from social media. And could be 100 to $200. I'm like walking in prepared to know that I need to buy all these products.

...my mom in the past really made a lot of comments about my body that made me also insecure about that. When I was at the dinner table growing up, like, I was not allowed to put my own serving. like, that's all I was allowed to eat. Like, it was a bit obsessive. Definitely....

...I definitely think there's a little bit of a social double standard for young girls that I don't like. Because all when I was in elementary school. I definitely felt like my guy friends could just wear jeans and the same t-shirt three days in a row and no one would score a nine. But if I wore the same type of clothes twice in the same week, someone would be like, didn't you dress like that before?... So I definitely feel like the expectations for boys, little boys and little girls are very different and very depressing.

....But I would say that in general, the plastic surgery industry definitely affects society, I think in the long run, because it becomes cheaper and more common. And it's easier to do. I think the perception that people have of plastic surgery, it's going to be destigmatized. I can see that within 5-10 years, the prevalence of older people having minor surgery will probably increase dramatically. I was talking to one of my neighbors who is in her 60s, and as she got older, her eyelids started to droop, she was able to get elective surgery, and it was paid for by her insurance. It did improve her vision, but it also made her feel younger and made her eyes look brighter. She was very happy about that. So I think that even little things like this are becoming more common.
Plastic surgery is popular in Korea, it seems to be recommended in various places, such as subway and bus advertisements, and many people seem to think of surgery easily even if it is not a major defect. And the important thing is that the standard of beauty in Korea is so clear that many people follow it and have similar faces and features, thereby losing their own external speciality and characteristics.

<table>
<thead>
<tr>
<th>The popular culture of plastic surgery has led to a blind convergence of national aesthetics</th>
<th>National Plastic Surgery Culture</th>
<th>Images conveyed by media and advertising</th>
</tr>
</thead>
</table>

I know for my personal stuff, I know that my want for cosmetic surgery is definitely society induced. And I go from one extreme to another. So for anyone wanting and especially for myself, it would be really important to analyze and to write things down in a timespan of like three to five years of what I actually want.

<table>
<thead>
<tr>
<th>Society has strengthened the pursuit of beauty in people</th>
<th>Society drives the desire for cosmetic surgery</th>
<th>Understanding the motivation behind</th>
</tr>
</thead>
</table>

When it comes to my occupation, it is my priority to understand the underlying reason for cosmetic surgery, in order to ensure that my client has realistic expectations from me and my services. Generally speaking a clearer understanding of the motivations behind cosmetic surgery with a focus on the digital media would aid us in the medical field to avoid potential pitfalls in the preoperative consultation stage.

<table>
<thead>
<tr>
<th>By understanding the motivation behind cosmetic surgery, with a particular focus on digital media Helps to better fulfill expectations</th>
<th>It is important to understand the socially induced motivations</th>
<th>Understanding the motivation behind</th>
</tr>
</thead>
</table>

…To be honest I think that reality fashion shows that are more popular right now, do more harm than the transformation ones, because you see that the fashion or imagemakers professionals behave in a rude way towards the contestants and they force them in a sly manner to alter their features, giving them false promises for a future career in the fashion industry.

<table>
<thead>
<tr>
<th>False exaggerations in beauty reality TV shows can mislead people.</th>
<th>Misleading social factors on plastic surgery</th>
<th>Images conveyed by media and advertising</th>
</tr>
</thead>
</table>

I don't have much of an opinion on the tourism part but I have mixed feelings about cosmetic surgery in general. As someone who has gotten selective surgery I definitely see the benefits and understand why people do it. Though it also upsets me that we have such high beauty standards as a society.

<table>
<thead>
<tr>
<th>Society has such high standards for beauty.</th>
<th>Society's beauty standard pressure and critics</th>
<th>Family and social expectations</th>
</tr>
</thead>
</table>
...I got a breast reduction done because it was honestly affecting my quality of life. I was expressing a lot of pain for many years. There was also a social component I felt ever since I was young that men would not take me seriously...I have also gotten botox done. Honestly that choice was a little more vain. Like most women I was having a hard time recognizing myself as I got older and I hate that I let society get in my head and tell me that to have value I need to be pretty though I must say I do feel more confident in myself when I get it done so it's a complicated topic and comes with complicated emotions.

<table>
<thead>
<tr>
<th>Some aspect of society affects people's quality of life and forces people to have plastic surgery</th>
<th>Society's beauty standard pressure and critics</th>
<th>Personal self-esteem</th>
</tr>
</thead>
</table>

As someone who has spent a lot of time working with teenagers and young adults I see and hear about rude and uncalled for comments being said to women especially these days with the anonymity of the internet. I do also have personal experiences with people complaining about my own appearance, be it from strangers or friends and family.

<table>
<thead>
<tr>
<th>People receive bad comments about their beauty from society</th>
<th>Society's beauty standard pressure and critics</th>
<th>Family and social expectations</th>
</tr>
</thead>
</table>

It was always a fine line to walk because I felt the need to look nice and presentable in both professional and social situations but I also knew that if I looked too pretty or done up I wouldn't be taken seriously so it was always a very conflicting challenge to navigate.

<table>
<thead>
<tr>
<th>The contradictory requirements of beauty in the workplace</th>
<th>Contradictory demands on beauty in society</th>
<th>Job and Career Development</th>
</tr>
</thead>
</table>

...socially people tried to talk me out of getting a breast reduction. I actually had to go to a different doctor and request a female physician to feel like my request would be taken seriously...I felt like the male doctor I saw would not listen to me when I explained how small I wanted my breasts to be...until I saw a woman that I really felt like my decision and choice was being heard and taken seriously.

<table>
<thead>
<tr>
<th>Attitudes toward cosmetic surgery vary across gender perspectives in society</th>
<th>Society's different beauty standard &amp; Help to improve the quality of life</th>
<th>Family and social expectations</th>
</tr>
</thead>
</table>
...for me cosmetic surgery can lead to enhanced confidence and happiness, but if everybody on television and social media portrays it as a necessity, then we move towards dangerous pathways...especially after TikTok being established as a famous social media platform for youth, a lot of teenagers feel jealous of what they see and they try to run after every new trend or challenge. Of course, various cosmetic treatments emerge as the latest hot trend and then disappear and I am afraid of my boys being tricked into feeling inadequate in terms of physical appearance.

Well, my family circle holds conservative beliefs on what is good or bad. So, I would say that they approach cosmetic surgery with hesitation, when it comes to the question if it’s really necessary for someone to undergo it or if it is a matter of vanity. But, on the other hand, when I was having discussions with my parents and my sister on my decision to change my nose appearance, they were supportive towards it and even curious to accompany me to the plastic surgeon's office for the consultations prior to the operation.

Concerning my professional social circle, in my former occupation at a luxurious hotel, I cannot share any opinion, because back then cosmetic surgery wasn’t a topic of discussion within the tourism industry of my country. However, my deceased husband’s circle in the food services industry, and to be more specific the women that were working at our cafes were discussing during their free time celebrities going for cosmetic surgery tourism.

As a person that belongs to LGBT community, I am amazed at the pettiness of the comments that people within my community make on others' appearance. I get a vibe that you have to belong to a certain group or tribe to feel empowered. As if you don’t want to look a certain way, then you will become a target for negative comments both in the spots you frequent or online.
Everything that is forced through undercover advertisement affects us. We consume images and this affects our perception of what is acceptable and what is not. Comparison with the lifestyle that some instafamous people promote has turned a lot of young people feeling inadequate. I have friends wondering what’s wrong with them not being able to afford trips, treatments etc.

<table>
<thead>
<tr>
<th>Young people are swayed by what the media and internet celebrities promote</th>
<th>Society drives the desire for cosmetic surgery</th>
<th>Images conveyed by media and advertising</th>
</tr>
</thead>
<tbody>
<tr>
<td>My home country is considered one of the fashion capitals of the world and everyone there places importance on their looks. So it’s not a big deal for someone to travel for cosmetic surgery. The same openness applies to my former classmates at the Design school abroad. When it comes to my current working environment, I see that people take care of their appearance, but even though they portray themselves as liberal in relation to body alteration, I sense that they are in favor of a more natural approach towards aging.</td>
<td>Hometowns and work environments are appearance-conscious and receptive to cosmetic surgery.</td>
<td>Attitudes of people in society towards cosmetic surgery</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Job and Career Development</td>
</tr>
<tr>
<td>...in my field, I get commissions or a more permanent type of collaboration based on my portfolio of previous design work. Imagine that you go to an interview for a dream collaboration and you show up in a messy way, even though you have a perfect CV and portfolio. I don’t want to seem superficial, but I know that in the competitive field that design is, everything counts from appearance to design talent.</td>
<td>Good appearance is important when competing for job opportunities</td>
<td>Society drives the desire for cosmetic surgery</td>
</tr>
<tr>
<td></td>
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<td>Job and Career Development</td>
</tr>
</tbody>
</table>
Table 5. Coding for Precursor of Happiness

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you're looking for happiness, I don't think there's anything out there. In fact, you have to look inside. If I look good, it can help me be happier. If I feel confident, and I have my makeup, I have my hair, everything looks like that… sometimes it goes too far…just to be something you're not, and you have a vision that if I look like that, then I'll be happy. I don't think cosmetic surgery is an ethical concept of happiness.</td>
<td>True happiness comes from within, it is not appropriate to depend on cosmetic surgery for happiness</td>
<td>Happiness can be achieved without surgery</td>
<td>Happiness comes from within</td>
</tr>
<tr>
<td>I think most of what I see through the media, I don't have any real personal connection to it. I see through the media, how other people do it, how it works, and based on that, mostly negative stories about it, surgeries gone wrong…. To attract attention through negative coverage as a way to sell more copies of the magazine or to generate flow to their channels and distribution… One could argue that cosmetic surgery is about a business trying to make money off of people looking for happiness and insecurity. An insecure person looking for happiness.</td>
<td>The illusion of happiness can be achieved through the things that are marketed can be a ploy for profit</td>
<td>Depending solely on cosmetic surgery for happiness is futile</td>
<td>Happiness comes from within</td>
</tr>
<tr>
<td>I believe that medical tourism for plastic surgery has a positive aspect in terms of the possibility it offers to access high quality medical services in clinics equipped with state-of-the-art equipment and therefore aesthetic operations with lower risks of complications and higher success rates.</td>
<td>Traveling for certain surgeries can prove beneficial if the country is better equipped</td>
<td>Cosmetic tourism contributes to happiness</td>
<td>Cosmetic surgery tourism is well founded</td>
</tr>
<tr>
<td>As a business, of course when it comes to tourism, it always wants to make people happy. So the ethical notion of cosmetic surgery being a form of happiness is probably a good perspective to take…For those who have suffered accidents, it does make them happy if some people can fix them and get help through cosmetic surgery.</td>
<td>It is true that it can bring happiness, especially for those with deformities due to accidents</td>
<td>Occasionally cosmetic surgery tourism brings happiness in the long run</td>
<td>Cosmetic surgery tourism is well founded</td>
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</tr>
<tr>
<td><strong>…I think it's rather sad that we need to do this and see ourselves as not good enough in the sense that you want to have surgery and look better…</strong></td>
<td><strong>In general it is upsetting that many call for this procedure to feel happy</strong></td>
<td><strong>Beauty standards are a setback</strong></td>
<td><strong>Happiness comes from within</strong></td>
</tr>
<tr>
<td>For me, rather than traveling for cosmetic surgery, I'm more inclined to enjoy the trip if it offers a related service, such as a hotel offering a spa service…Cosmetic surgery is not my main motivation. But I don't see myself going for cosmetic surgery…Maybe I might have wanted to try it when I was 14? But not now.</td>
<td>At a certain age happiness no longer comes from the outside appearance</td>
<td>Happiness can be achieved without surgery</td>
<td>Happiness comes from within</td>
</tr>
<tr>
<td>I think it's actually an interesting topic because when I was younger, I was really against it…I felt like the type of people that felt the need to get cosmetic surgery, or I just didn't like the fact that we were putting, societally we were putting people in the position to where they felt like they needed to get cosmetic surgery to be pretty. But as I've gotten older, I kind of understand that it's a little bit more complicated than that…I think it's unfortunate that we make people feel like they have to be confident in themselves; they have to look a certain way…</td>
<td>As a society the beauty standards are sometimes unachievable without surgery which is unfortunate</td>
<td>Beauty standards are a setback</td>
<td>Happiness comes from within</td>
</tr>
<tr>
<td>…we're in a more progressive era, people are trying to be more accepting of how people live their lives and how they orient themselves. The first example that comes to mind is people's gender orientation. There are a lot of people who may want to have elective surgery because it makes them feel like they identify more or makes them look more like the gender they identify with…</td>
<td></td>
<td><strong>Occasionally cosmetic surgery brings happiness in the long run</strong></td>
<td><strong>Satisfaction with cosmetic surgery</strong></td>
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<td><strong>Satisfaction with cosmetic surgery</strong></td>
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<tr>
<td><strong>Happiness is a too serious condition to be fulfilled only by cosmetic surgery tourism, but as a dermatologist trained in the field of Psychodermatology, it is proven that the skin condition and the extent to which a patient feels happiness are analogous.</strong></td>
<td><strong>Treating skin conditions can bring happiness to a certain extent</strong></td>
<td><strong>Cosmetic procedures can bring joy</strong></td>
<td><strong>Satisfaction with cosmetic surgery</strong></td>
</tr>
<tr>
<td>After my first cosmetic surgery operation, which was rhinoplasty, I can still recall that I felt happy that I made that decision, to change my nose, which was a feature of mine that was always annoying me. So, I agree that cosmetic surgery can bring you happiness, because I</td>
<td><strong>Certain surgeries that alter one's appearance can bring long term happiness</strong></td>
<td><strong>Occasionally cosmetic surgery brings happiness in the long run</strong></td>
<td><strong>Satisfaction with cosmetic surgery</strong></td>
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<td><strong>Satisfaction with cosmetic surgery</strong></td>
<td><strong>Satisfaction with cosmetic surgery</strong></td>
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experienced this emotion for a long period of time, after the performed nose job.

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<table>
<thead>
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<tbody>
<tr>
<td>When you create something beautiful, you become happy by making</td>
<td>Cosmetic surgery tourism can offer those services at a lower</td>
<td>Cosmetic surgery tourism is well founded</td>
</tr>
<tr>
<td>someone else happy through your result. I agree that cosmetic</td>
<td>price creating happiness for those individuals</td>
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<tr>
<td>surgery tourism combines surgical creativity and affordable</td>
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<tr>
<td>prices for the service and thus is a form of happiness for those</td>
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<td>who need to undergo a cosmetic operation…</td>
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<tr>
<td>For me it is a form of happiness, I can say, in terms of job</td>
<td>Cosmetic tourism and cosmetic surgery in general can create</td>
<td>Cosmetic surgery tourism is well founded</td>
</tr>
<tr>
<td>satisfaction, because when I see that the operation result in</td>
<td>happiness in the long term</td>
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<tr>
<td>the long term is contributing to my client's confidence and</td>
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<td>happiness, I feel that the cosmetic or reconstructive operation</td>
<td>Cosmetic tourism contributes to happiness</td>
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<tr>
<td>I practiced was the reason for it…But I agree that cosmetic</td>
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<tr>
<td>tourism creates to a certain extent happiness or to put it</td>
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<td>alternatively confidence, both for the surgeon and the patient.</td>
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<tr>
<td>Every field has both pros and cons and I would like to do</td>
<td>Certain health issues need to be treated with the help of</td>
<td>Cosmetic surgery tourism is well founded</td>
</tr>
<tr>
<td>justice by saying that because of plastic surgery and its</td>
<td>cosmetic surgery tourism which lead to contentment</td>
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<tr>
<td>collaboration with the tourism industry, many trans people, who</td>
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<td>wanted to transition to another gender, because of their</td>
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<tr>
<td>diagnosed dysphoria, have this opportunity. In addition to this,</td>
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<td>many victims of attacks because of their gender identity have</td>
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<tr>
<td>been able to overcome any type of scars and burns, because of</td>
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<tr>
<td>cosmetic surgery tourism.</td>
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<tr>
<td>I can only speak for my own experience with plastic surgery on</td>
<td>Cosmetic surgery does bring happiness in the long run if</td>
<td>Satisfaction with cosmetic surgery</td>
</tr>
<tr>
<td>my nose and my future plan to have a breast lift. I have</td>
<td>dome properly and assessed by the individual with reasonable</td>
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</tr>
<tr>
<td>already observed the change in my mood, when my nose was</td>
<td>wants</td>
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<tr>
<td>reshaped. I felt more like myself…So cosmetic surgery and</td>
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<tr>
<td>tourism that facilitates these procedures is a way to reclaim</td>
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<tr>
<td>your confidence. For the second operation I’m considering, I</td>
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<tr>
<td>see that a breast aesthetic surgery would make me feel more</td>
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<tr>
<td>feminine and that I reclaim a part of my self-care that I</td>
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<td>somehow lost, because of choosing to become a stay at home</td>
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<td>mother and centering my life on my kids upbringing and</td>
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<tr>
<td>supporting my husband’s</td>
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</table>
### Table 6. Coding for Exploitation/ Power Relations

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main category</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would say there was not explicit pressure but it was more passive. That is for my decision to get botox. I actually feel like socially people tried to talk me out of getting a breast reduction. I actually had to go to a different doctor and request a female physician to feel like my request would be taken seriously. I also saw a female doctor because I felt like the male doctor I saw would not listen to me… I explained multiple times that I wanted them as small as possible and it wasn't until I saw a woman that I really felt like my decision and choice was being heard and taken seriously.</td>
<td>Certain professionals were putting their judgment above their patients desires</td>
<td>Professionals should listen more carefully to patients wants</td>
<td>Power dynamic</td>
</tr>
<tr>
<td>The first thought was precisely that these operations are a maximum benefit for people whose medical condition forces them to resort to cosmetic surgery to correct a health problem. Any discovery or novelty in science, medical or otherwise, we humans use it in a positive as well as a negative sense.</td>
<td>Cosmetic surgery is necessary for certain health issues but it can exploited</td>
<td>Cosmetic surgery depends on benevolence more or less</td>
<td>Power dynamic</td>
</tr>
<tr>
<td>I have witnessed, and not infrequently, inappropriate comments about the appearance of some people in my circle of friends, especially overweight people. Although I have rarely watched reality shows like this, it has once again confirmed to me the rising trend of society to put external beauty first at any cost. I can even imagine a &quot;commercial&quot; dialogue: &quot;Arent you beautiful? It's okay! We put on a mask and make you beautiful! That's how you have to look to be accepted!&quot;</td>
<td>The power society and those around us have is hullabaloo</td>
<td>Society shapes many insecurities</td>
<td>Society is extremely influential</td>
</tr>
<tr>
<td>We are talking about a society that is in a good economic situation. This is because medical aesthetics requires a lot of money. Some people in less affluent countries will think we choose to pay for this, it's not necessary, it's not food on the table nor is it a place to sleep. There will be a big gap in different people's views. This is a world problem or opportunity. A first world problem.</td>
<td>It is a first world problem, having the choice to do a certain procedure compared to other words issues seem banal</td>
<td>The topic of cosmetic surgery is a privileged discussion</td>
<td>Privileged topic discussion</td>
</tr>
<tr>
<td>I think it's from a systemic perspective… I think it's unfortunate that we make people feel like they need to do this. So I think big companies are unethical like modeling agencies and fashion brands to promote certain facial products per se. But like individuals, I don't think it's unethical. As long as you know that by paying for it in an ethical way, if you that's how you want to spend your time, if you want to spend your money, then that's your choice and as long as your choice doesn't hurt other people, I think then you have the right to make that decision.</td>
<td>There is a toxic power relation where enterprises can create trends that harmful, but when it comes to individuals as long as there is no harm created to other people it is seen as acceptable</td>
<td>Society along with fashion businesses shapes many insecurities with profit in mind</td>
<td>Society is extremely influential</td>
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<tr>
<td>I think when it comes to issues like travel, cosmetic surgery. I know that in some cases people may take advantage of foreigners who come to a country or a state and specifically get that procedure done. And because they know that, they may charge them more or something else because they think they can, and I think that's unethical. But when it comes to individuals and they decide to go to another country to have plastic surgery because they think they will get better work there, then if that's what you want to do, then it's going to be better.</td>
<td>Exploitation of tourists who travel for cosmetic surgery can occur</td>
<td>Cosmetic surgery depends on benevolence more or less</td>
<td>Power dynamic</td>
</tr>
<tr>
<td>…If you think about it from a foreign perspective, if you're selling a product for this procedure, you can buy that product in your country or you can go somewhere else and buy a product from another country and it will be a better product. Why wouldn't you buy it from another country where it would be better?...But in many cases, it would be much cheaper to do it elsewhere. Why don't you take advantage of that?…I just think it's a matter of doing research and you can be smart and spend a lot of time looking at a lot of possible best ways, to find a really good surgeon or a specific doctor that you have confidence in… I think there are ways that you can use plastic surgery tourism to your advantage…</td>
<td>It is evident that at times products or procedures are cheaper in other countries which can ease certain burdens individuals carry but it should be taken with a grain of salt</td>
<td>Cosmetic surgery can ease burdens with the right research</td>
<td>Correct research for the most fitting results</td>
</tr>
<tr>
<td>The dominant logic that &quot;the client is always right&quot;, which in the cosmetic surgery tourism industry is proven to be destructive in the</td>
<td>More times than not the specialist can guide the</td>
<td>The correct guidance is</td>
<td>Power dynamic</td>
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</tbody>
</table>
future. I say this with the knowledge that our job is not only to provide cosmetic treatments, but also to guide the client in the suitable choice of services.

<table>
<thead>
<tr>
<th>Future</th>
<th>Patient in the right direction</th>
<th>Recommended</th>
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</thead>
</table>

...So if you don’t mind me saying my point of view, I think Plastic surgery is popular in Korea, but the risk seems to be high. Plastic surgery seems to be recommended in various places, such as subway and bus advertisements, and many people seem to think of surgery easily even if it is not a major defect. In addition, as the plastic surgery business makes a lot of money in Korea, many people live with side effects until death by performing surgery by unqualified people. And the important thing is that the standard of beauty in Korea is so clear that many people follow it and have similar faces and features, thereby losing their own external speciality and characteristics…

<table>
<thead>
<tr>
<th>Future</th>
<th>The beauty standard in Korea can drive people to extreme surgeries that will alter their lifestyle forever, especially if they are performed by unqualified staff</th>
<th>Cosmetic surgery can cause quite the conundrum without the right research</th>
<th>Society is extremely influential</th>
</tr>
</thead>
</table>

Given that I have received the guidance I expect, before traveling for doing a breast surgery, I would make this decision on the basis of a lower price and a reliable medical center that would guarantee a positive outcome after my surgery. I would also go for cosmetic surgery tourism, provided that after having my breast surgery completed, I would have the opportunity to relax in a comfortable space and keep contact with my doctor there.

<table>
<thead>
<tr>
<th>Future</th>
<th>The specialist's guidance can assure the patient and is necessary especially for cosmetic surgery tourism</th>
<th>The correct guidance is recommended</th>
<th>Power dynamic</th>
</tr>
</thead>
</table>

Privilege is what comes first to my mind, when I think of cosmetic surgery tourism. Maybe I am not an objective critic on the topic. But I can say for sure that, in order to become so immersed in keeping up with thousands of aesthetic trends, means that you have the economic and time resources to do so. And it’s the same type of people that work in these types of industries that revolve around beauty, fashion, design etc. However, if you belong to the economically depleted class, you have to find another way to make your dream appearance come true. That’s where cosmetic tourism comes in and succeeds or creates interesting stories at least.

<table>
<thead>
<tr>
<th>Future</th>
<th>It is privilege to have the time to keep up with trends and be able to recreate them surgically, this is also made possible to other less fortunate countries with cosmetic surgery tourism</th>
<th>The topic of cosmetic surgery is a privileged discussion</th>
<th>Privileged topic discussion</th>
</tr>
</thead>
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Table 7. Coding for Risk Perception

<table>
<thead>
<tr>
<th>Extracted data</th>
<th>Codes</th>
<th>Subcategory</th>
<th>Main category</th>
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<tbody>
<tr>
<td>Most of what I see in the media is negative. People go to more low budget resorts or other places where they do treatments without enough control. So they are using pre-treatment rates and chemicals that are not good for your body…</td>
<td>Negative news in the media about the quality of cosmetic surgery</td>
<td>Safety of cosmetic surgery</td>
<td>Risk of medical issues</td>
</tr>
<tr>
<td>…the only thing I've heard about surgical procedures like plastic surgery travel is the risks and the horror stories and it going wrong. Either a specific material was used in the implant, or the surgery may have been illegal in someone's home country. And then realizing that this material is illegal for a reason because it could be potentially toxic or dangerous. Or people get the surgery and then go home and then just have their own personal issues like being rejected or the implant is not correct and then they have a very difficult time fixing it with their general surgeon or the plastic surgeon that they see at home because the surgeon back at home is not the person who did the surgery or they're like not familiar with the material that was used so they have a very difficult time fixing it…</td>
<td>Potential dangers of transnational cosmetic surgery (ethical aspects and safety)</td>
<td>Due to the risks associated with cross-country treatment</td>
<td>Risk of medical issues</td>
</tr>
<tr>
<td>Plastic surgery is popular in Korea, but the risk seems to be high. In addition, as the plastic surgery business makes a lot of money in Korea, many people live with side effects until death by performing surgery by unqualified people. And the important thing is that the standard of beauty in Korea is so clear that many people follow it and have similar faces and features, thereby losing their own external speciality and characteristics… …I think it’s okay for people to fix parts that they have a complex about their face or want to fix because of discomfort, but I think fixing all parts of their face or continuous plastic surgery can deepen the side effects…</td>
<td>Side effects of substandard cosmetic surgery &amp; Pursuing popular aesthetics and thus losing your own characteristics</td>
<td>Side effects of cosmetic surgery &amp; Loss of personal characteristics</td>
<td>Risk of medical issues</td>
</tr>
</tbody>
</table>
You can have good mental health and have surgery, but you can also have really bad mental health and see it as the solution to your problems and your well-being, I think it's a sad thing...... you're not trying to get to the root of the problem. You're just trying to find a quick fix. When we talk about mental health and happiness and everything, you can go and do that trip and do your cosmetic surgery or whatever, and I'm sure you'll be very happy while you're there doing it, but when you go home, you find all the things that you were unhappy about before. And maybe when you go home, it's still there, even if you look different. ...... It can help, but it can also make things worse because things aren't getting better only by changing your face or something else.

<table>
<thead>
<tr>
<th>Psychological trauma cannot always be relieved by cosmetic surgery</th>
<th>Cosmetic surgery does not solve the underlying problem</th>
<th>psychological management trauma</th>
</tr>
</thead>
</table>

The risks, I think in that area, about my mindset that I definitely have two extremes telling me I totally don't need it, and like being true to that. And then I totally do it, need it and be true to that. So I think about myself as a person, I'm a bit of an extremist......it's like, if you get something changed, then you're like, Okay, now I want something else changed...... I think I would definitely fall into that hole. Like, I would either hate it, or I would be like, now it's time to change everything.

<table>
<thead>
<tr>
<th>Risk due to extreme ideas</th>
<th>Psychological extremes of thought</th>
<th>psychological management trauma</th>
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</table>

It would be two conflicting feelings, they could be the desire to get what I want and have the look I want and then also the fear, the fear of if something does go wrong like I'm in the 5% and this surgery will make me go blind or something? I think it's hard to say which one is going to win in the end because I think it depends on what the danger is. I think as the dangers get worse or more likely, I would decide not to have the surgery. But I think statistically, a lot of people like to assume that they won't be in the minority. so,If they learn that 5% of the patients who have this surgery will have temporary motor deficits, like losing fingers and limbs, many people will say, no that's only 5%, I'm not going to be one of those people that won't happen to me. But when the probability maybe goes from 5% to

<table>
<thead>
<tr>
<th>Fluke mentality about the risks of cosmetic surgery</th>
<th>Judging whether to operate based on the probability of risk</th>
<th>Risk of medical issues</th>
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</thead>
</table>
30%, then maybe that person would say, well, maybe I should think more about what my options are and the potential permanent risks.

To some extent, I believe reality shows have contributed to making our job more known to a wider audience and familiarizing them with some treatments, but that is tricky to the extent that people lose the sense of the risks that are hidden in every cosmetic treatment because these shows usually exaggerate the positive side of the transformation.

<table>
<thead>
<tr>
<th>Reality TV exaggerates the positive aspects and makes people ignore the risks involved</th>
<th>Media exaggerates the positive and thus ignores the risk</th>
<th>Risk perception level</th>
</tr>
</thead>
</table>

Having already made the first step in changing my nose’s appearance, I was thinking that a breast surgery after giving birth to two kids could be something worth pursuing. The first time I had my nose done was by a plastic surgeon, who is considered to be top-tier within his area of expertise. So, I was considering going for the second cosmetic operation with the same doctor. However, if I could find a trustworthy cosmetic surgery center in a nearby country with lower prices, I would think of saying yes to this experience.

<table>
<thead>
<tr>
<th>The low price of cosmetic surgery tourism will attract people to choose cosmetic surgery institutions</th>
<th>Due to the risks associated with cross-country treatment</th>
<th>Risk perception level</th>
</tr>
</thead>
</table>

It’s the part of traveling abroad for the purpose of getting cosmetic surgery done that makes me more anxious and thinking about the risk to a larger extent. I would be afraid if the price matches the promised final result and how I could cope with a situation that could take a negative turn.

<table>
<thead>
<tr>
<th>Concerns about whether the price matches the promised end result and how to deal with possible negative scenarios.</th>
<th>Due to the risks associated with cross-country treatment</th>
<th>Risk perception level</th>
</tr>
</thead>
</table>

I am a fan of reality shows with a focus on transformation, because of the aesthetics they present or the funny stories they tell, but I think that sometimes they exceed the boundaries of decency, by portraying the players of these shows as weak or a failure of life, because at some point they neglected their appearance. However it’s beneficial for them that they change their lives for the better, without going into debt.

<table>
<thead>
<tr>
<th>Reality TV shows often feature people who have changed their lives through cosmetic surgery and have not fallen into debt.</th>
<th>Media exaggerates the positive and thus ignores the risk</th>
<th>Risk perception level</th>
</tr>
</thead>
</table>

| Media exaggerates the positive and thus ignores the risk | Risk perception level | |
|-----------------------------------------------------|----------------------| |
As a surgeon who graduated from Military School of Medicine, I think of the risk involved in this branch of cosmetic surgery or tourism or lack of professionalism in the provided services. But I also think, the price aspect, that people are enticed by the low cost compared to the standard variation of prices for treatment in various urban centers.

| The services offered lack professionalism & people are attracted by the low cost of cosmetic surgery. | Due to the risks associated with cross-country treatment | Risk perception level |