


The effectiveness of mindfulness-based cognitive therapy on distress tolerance, body image, and mindfulness in women seeking cosmetic surgery

Amin Roustaei¹, Maryam Koushki², Saeid Yazdi-Ravandi³, Babolah Bakhshi Pour^{4*} , Omid Shokoh Far⁵

1. Department of Psychology, Payame Nour University, Tehran, Iran

2. Department of Psychology, Rudehen Branch, Islamic Azad University, Rudehen, Iran

3. Behavioral Disorders and Substance Abuse Research Center, Hamadan University of Medical Sciences, Hamadan, Iran

4. Department of Counseling, Payame Nour University, Sari, Iran

5. Physician, Managing Director of Skin, Hair and Beauty Clinic, Tehran, Iran

Abstract

Introduction: One of the possible psychological variables in cosmetic surgery applicants is negative body self-concept (including thoughts, feelings, tendencies, and memories of the person concerning the body). Therefore, the present study aimed to investigate the effectiveness of mindfulness-based cognitive therapy on the components of anxiety tolerance, physical self-concept, and well-being in women seeking cosmetic surgery.

Methods: The research method was quasi-experimental with a pre-test-post-test design and control group. The population of the study consists of all women applying for cosmetic surgery who were referred to Shokoofeh Beauty clinic in the first six months of 2020. Among them, 40 people (20 people for each group) were selected by purposive sampling method and then were randomly divided into experimental and control groups. The experimental group received mindfulness-based cognitive therapy in eight ninety-minute sessions, and the participants in the control group did not receive training. Distress tolerance scale, body image concern inventory and mindful attention awareness scale were used to collect data. Data were analyzed using analysis of covariance in SPSS-24 statistical software.

Results: The results showed that there is a significant difference between the experimental and control groups in the distress tolerance, physical self-concept, and mindfulness. Accordingly, the mean scores of distress tolerance and consciousness of the experimental group compared to the control group increased significantly, and the mean scores of physical self-concept of the experimental group compared to the control group decreased significantly.

Conclusion: Due to the effect of this training in increasing the tolerance of distress and consciousness and reducing the negative physical self-concept of cosmetic surgery applicants, the results of research in this field can be used in practice in counseling centers and medical centers, so that in these centers workshops and training courses of mindfulness-based interventions should be considered for counselors and patients.

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Corresponding author

Babolah Bakhshi Pour, Department of Counseling, Payame Nour University, Sari, Iran

Email: Ba_bakhshipour@yahoo.com



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Extended Abstract

Introduction

Today, cosmetic surgery is one of the most common surgeries globally, and its use is increasing more than ever. The International Society of Cosmetic Surgery (ISAPS) announced that in 2013, more than 23 million surgical

and non-surgical methods were performed in the world. In addition, Iran is one of the 10-top countries of cosmetic surgery in the world. Since cosmetic surgery is mainly done to change people's appearance and increase their

self-confidence, so it can be said that cosmetic surgery is the result of a specific psychological pattern. One of the possible psychological variables in cosmetic surgery applicants is negative body self-concept (including thoughts, feelings, tendencies, and memories of the person in relation to the body). Given the ability to control and manage the low negative emotions of people seeking surgery, and the fact that people with low distress levels have difficulty regulating and controlling their emotions when exposed to stress, it may be possible to tolerate confusion (inability to embrace the experience fully). It is considered an annoying and upsetting emotion as one of the possible variables in people applying for cosmetic surgery. The concept of consciousness (a quality of consciousness that is more precisely paying attention to a particular way, that is, purposeful, present, and non-judgmental to the inner and outer world of the mind) is probably related to the structure of the body image or concern for body image and subsequent tendency. Be involved in cosmetic surgery. On the other hand, one of the new therapeutic approaches that are significantly related to the variables of the present study is mindfulness-based cognitive therapy. Therefore, the current research aimed to investigate the effectiveness of mindfulness-based cognitive therapy on the components of distress tolerance, body self-concept, and well-being in women seeking cosmetic surgery.

Methods

The research method was quasi-experimental with a pre-test-post-test design and control group. The study's statistical population consists of all women applying for cosmetic surgery who were referred to Shokoofeh Beauty Clinic in the first six months of 2020. Among them, 40 people (20 people for each of the experimental and control groups) were selected by the purposive sampling method and were then randomly divided into experimental and control groups. The inclusion criteria were an applicant for

surgery, a high score in body self-concept, a low score in consciousness, and distress tolerance. The exclusion criteria were comorbid psychiatric disorders, drug use, and absenteeism in more than three medical counseling sessions. The participants in the experimental group received mindfulness-based cognitive therapy in eight ninety-minute sessions, and the participants in the control group did not receive training. Distress tolerance scale (Simons and Gaher, 2005), Littleton et al.'s Body image concern inventory (2005), and Brown and Ryan Mindful Attention Awareness Scale (2003) were used to collect data. After data collection, the collected data were analyzed by analysis of covariance in SPSS-24 statistical software.

Results

The mean and standard deviation of the age of subjects in the experimental and control groups, respectively, were 31.76 ± 7.28 , 32.44 ± 8.16 . In terms of education, in the experimental group, 12 people had diplomas, six people had bachelor's degrees, and two people had master's degrees. Ten people had diplomas in the control group, eight had bachelor's degrees, and two people had master's degrees. Before analyzing the data, the assumptions of multivariable parametric covariance analysis, Kolmogorov-Smirnov test was used to check the normality of the data. The results of Kolmogorov-Smirnov test showed that the variables of distress tolerance ($Z=0.91$; $P=0.18$), body self-concept ($Z=0.93$; $P=0.27$), and mindfulness ($Z=0.85$; $P=0.24$), were not significant and; thus, the distribution of variables follows the normal one ($P<0.05$).

Also, to test the assumption of homogeneity of variance matrix, covariance box test was used. The results of Box test showed (Box's $M=4.76$; $P=0.512$) the significance level is greater than 0.05. Therefore, the assumption of homogeneity of variance matrices is established. The results of the analysis of covariance in Table 3 showed a significant difference between the experimental and control

groups in terms of distress tolerance, body self-concept, and mindfulness. The mean scores of distress tolerance and mindfulness of the experimental group compared to the control group increased significantly, and the mean scores of body self-concept of the experimental group compared to the control group decreased significantly.

Conclusion

According to the results of this study, it can be said that mindfulness-based interventions are a systematic and intensive approach that aims to acquire new types of control and wisdom based on internal capabilities for relaxation, attention, awareness, and insight. Also, due to the effect of this training in increasing the tolerance of distress and consciousness and reducing the negative physical self-concept of cosmetic surgery applicants, the results of research in this field can be used in practice in counseling centers and medical centers so that in these centers, workshops and training courses of mindfulness-based interventions should be considered for counselors and patients.

Like other studies, the present study has some limitations. For example, due to the lack of long-term access to the cosmetic surgery applicant, it was impossible to conduct a follow-up period to evaluate the continuity of effectiveness. Also, the sample was selected only from the cosmetic surgery applicant of Shokoofeh Clinic in Tehran, and this issue generalizes the results with caution. In line with the limitations of this study, it is suggested that in order to investigate the long-term effects of mindfulness-based cognitive therapy, follow-up studies are performed, and for further generalizability, research is conducted on a larger sample size of cosmetic surgery applicants.

Ethical Considerations

All subjects who received information about the study could leave the study at any time. They were assured that all information would remain confidential and would only be used for research purposes. For privacy reasons, the subjects' details were not recorded. In the end, all of them received informed consent.

Table 1. Results of univariate analysis of covariance on post-test scores of distress tolerance, physical self-concept, and mindfulness

Variables	Sum of Squares	Df	Mean Squares	F	P	ETA
Distress tolerance	697.01	1	697.01	49.28	0.001	0.68
Physical self-concept	567.32	1	567.32	38.18	0.001	0.51
Mindfulness	602.41	1	602.41	42.15	0.001	0.58

Ethical Considerations

Compliance with ethical guidelines

All subjects received information about the study and could leave the study at any time. They were assured that all information would remain confidential and would only be used for research purposes. For privacy reasons, the subjects' details were not recorded. In the end, all of them received informed consent.

Authors' contributions

Amin Roustaei and Babolah Bakhshi Pour: Defined the concepts in choosing the subject and designing the study. All authors performed a search of the research literature and background. Maryam Koushki and Omid Shokoh Far: Collected and analyzed data. Writing and drafting: Saeid Yazdi-Ravandi and Amin Roustaei. All authors dis-

cussed the results and participated in the preparation and editing of the article's final version.

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Conflict of interest

This study did not have any conflict of interest.