

# The middle-aged women's attitudes towards (anti-ageing) cosmetic services in the Czech Republic

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## Summary

Cosmetic/aesthetic surgery has increased in popularity, reflecting the increased consumer demand. Modern women feel compelled to meet near-impossible standards of beauty. Most of those who undergo cosmetic/aesthetic surgery are (middle-aged) women. Women are often under pressure to meet near-impossible standards of beauty. This study examined cosmetic/aesthetic surgery attitudes and perceptions among 516 Czech middle-aged women. It assessed the perception and attitudes towards cosmetic/aesthetic procedures of middle-aged Czech women and determined the possible factors influencing their level of acceptance through a quantitative survey. The research findings are based on an online questionnaire survey. Based on our analyses, we revealed that acceptance and attitudes towards cosmetic/aesthetic surgery among women can be influenced by the variables such as marital status, place of living, fear of ageing, the importance of physical appearance, occupational status, and partner's influence. This study provided a first general look at the situation around cosmetic/aesthetic surgery in the context of the Czech Republic. However, to gain a more comprehensive understanding of the acceptance and attitudes towards cosmetic/aesthetic surgery in the Czech Republic, further research should be conducted across the country to assess the attitudes of the wider population (for example, different age groups).

## Key words

cosmetic surgery – aesthetic surgery – acceptance – attitudes – Czech Republic – middle-aged women

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## Introduction

In recent years, the spectrum of experts has reacted to social changes (for example, an ageing population) and the cultural ideals of society (for example, beauty and youth ideals). These changes have fostered the development and greater availability of cosmetic/aesthetic surgery and new technologies. Cosmetic (also known as aesthetic) surgery "...is where a person chooses to have an operation, or invasive procedure, to change their physical appearance for aesthetic reason" [1]. All these treatments offer different ways to enhance one's appearance and respond to ageing; further, they are perceived as voluntary and unnecessary since they

are carried out without injury or disease to improve the health of the body [2]. We have recently witnessed a significant increase in the number of people using these cosmetic/aesthetic surgery procedures. According to the International Society of Aesthetic Plastic Surgery, there were almost 15 million surgical procedures worldwide in 2022 [3].

These statistical data illustrate the desire of many people to improve their physical attractiveness to feel better in their bodies. While cosmetic/aesthetic surgery procedures are currently popular enhancement possibilities worldwide [4], the acceptance and popularity of cosmetic/aesthetic surgery in the Czech Republic provide an incom-

plete picture of the local trends. On the one hand, many public and private cosmetic/aesthetic surgery clinics are operated in large Czech cities and advertised online. On the other hand, there is no existing official data available on the prevalence and acceptance of cosmetic/aesthetic surgery in the Czech Republic because no national laws require aesthetic surgery clinics gather and publish statistical records of these procedures.

Notwithstanding the lack of official data, cosmetic/aesthetic surgery procedures are becoming more popular in the Czech Republic. According to available information from aesthetic surgery clinics, the number of patients/clients is increasing yearly. Also, our data from

the survey showed that women in our sample, who already have some experience with cosmetic/aesthetic procedures, spent approximately 8,000 CZK per month.

Possible explanations for the increasing demand for cosmetic/aesthetic procedures and products include higher disposable income, advances in the cosmetic industry, the loss of stigma, and how these options are presented in the media and public spaces [5]. Higher disposable income and a decrease in the prices of cosmetic/aesthetic procedures and products have led to many more people being able to afford them as viable options [6,7]. Various factors, such as socio-cultural norms and personal values, shape women's perceptions of cosmetic/aesthetic procedures. Prior research has found that motivations and attitudes toward cosmetic/aesthetic surgery are influenced by basic socio-demographic variables [8,9]. The research also shows that one of the most important factors is gender. Compared to men, women are more likely to report a need for various cosmetic/aesthetic procedures [10–12]. An underlying driver of this need may be social and cultural pressure.

Generally, physical attractiveness and beauty are associated with positive social and cognitive characteristics. Therefore, beauty and the physical attractiveness of the body are of high importance in modern Western societies, predominantly benefitting women in the labour market [13,14] as well as in the education or marriage market [15]. Beauty and physical attractiveness have become important status characteristics for women that help them positively influence the expectations of others [16,17]. Beauty ideals are also often linked to social class; different social statuses and their social, cultural, and economic environments influence the decision to (not) engage in appearance-enhancing practices [8,18]. In particular, socially advantaged women are generally less satisfied

with their appearance, which, in turn, promotes greater consumption of enhancement practices [19,20]. Thus, the use of cosmetic/aesthetic practices is not only related to care for appearance and beauty [21] but is also linked to social status, as confirmed by the research results of Vidovičová and Rabušic [22].

As many studies have reported, marital status and education are two other factors that play a significant role in deciding to undertake cosmetic/aesthetic surgery. Ramshida and Manikandan find differences in the use of cosmetic/aesthetic options between unmarried and married consumers of both sexes [23]. Previous studies also showed that the main reason for undergoing cosmetic/aesthetic procedures is to look more beautiful and to compete in attractiveness with older in the pursuit of marriage [24]. In contrast, in Salehahmadi and Rafie's study, the tendency to undergo cosmetic/aesthetic surgery was prevalent among married women and those with an educational level below a bachelor's degree [25].

Middle age is no longer perceived as a passively populated transition space between youth and old age. On the contrary, it is increasingly becoming a dominant and active phase of life. This phenomenon can be called "stretched middle age" [26]. The concept of stretched middle age suggests that the boundaries between the various generations are blurring, creating an indefinite period of stretched middle age (co)formed by technologies such as cosmetic/aesthetic surgery or social scientific influence. Middle-aged women represent an exciting but still insufficiently researched group. Although these women are not perceived by society as "old", their appearance no longer corresponds to ideals of beauty and femininity due to visible wrinkles [27].

Despite the expansion of this medical specialty, little sociological research attention has been devoted to mapping Czech women's perceptions, attitudes

and acceptance of (anti-ageing) cosmetic/aesthetic surgery. The study aims to fill this research gap by utilizing a survey of (non)acceptance and attitudes toward cosmetic/aesthetic surgery among Czech middle-aged women.

The Czech Republic is a great example of a country with a mix of cultural influences, and it is not possible to make a clear distinction between "West" and "Central Europe" culture. Exploring attitudes towards cosmetic/aesthetic surgery among middle-aged women with a mix of Western and Central cultural backgrounds can be a way of broadening previously published findings. Considering the increasing popularity of the Czech Republic as a health and medical tourism destination [28,29], it is pretty surprising that no academic research has yet investigated the acceptance and attitudes towards cosmetic/aesthetic surgery among Czech women.

## Data and methods

To answer our research question, namely, "What determines attitudes towards cosmetic/aesthetic procedures among middle-aged women?" we used the data from our quantitative survey. Data collection was carried out on the Czech national online panel of respondents of European National Panels s.r.o. This panel has more than 70,000 potential respondents. The sample was taken using the quota sampling method. The sample of respondents was representative of the baseline sample by age, education, settlement size, and region. After data cleaning, the sample consists of 516 respondents. This sample is representative of the core sample by age, education, settlement size, and region. Data collection took place from July 12, 2023, to July 23, 2023.

## Measurement instruments

We used different scale types, namely the Acceptance of Cosmetic Surgery Scale (ACSS) developed by Henderson-King and Henderson-King [30].

This scale was used to evaluate participant's attitudes toward cosmetic/aesthetic surgery. The 15-item scale is composed of three 5-item subscales: (1) The intrapersonal factors; (2) the social factors, and (3) the consider factors. Using a 7-point Likert scale, 1 = definitely disagree to 7 = definitely agree, the participants were asked to indicate their level of agreement with 15 statements. The ACSS was modified for Czech speakers. Therefore, the scale was translated from English to Czech following the back translation procedure.

The second scale used was the Multidimensional Body–Self Relationships Questionnaire – Appearance Scales (MBSRQ-AS), particularly its subscales: Appearance Evaluation subscale (MBSRQ-AE) and Appearance Orientation Subscale (MBSRQ-AO). Appearance Evaluation subscale (MBSRQ-AE) with a 7-point Likert scale, 1 = definitely disagree to 7 = definitely agree; higher mean scores across items indicate more positive appearance evaluation. Appearance Orientation Subscale (MBSRQ-AO), a 7-point Likert scale, 1 = definitely disagree to 7 = definitely agree, higher mean scores across items indicate more positive appearance evaluation [31].

Data were collected and cleaned using an Excel sheet and analysed with STATA software. Descriptive analysis employed frequency and percentages to describe categorical data and means and standard deviations to describe continuous data. To show the relationship between variables, we compared means or used Pearson correlation. To determine the statistical significance of our results, we deployed the P-value of correlation and the P-value from the one-way analysis of variance test (ANOVA).

Based on previous research, we formulated the following hypothesis:

(H1): Women's attitudes towards aesthetic procedures are not randomly distributed in the population concerned but are structured according to the in-

**Tab. 1. Sociodemographic information.**

		%	N
Total		100	516
Age	35–39	27	140
	40–44	33	171
	45–50	40	205
Marital status	single	20	102
	married	47	241
	cohabitation	18	93
	divorced, widow	16	80
Number of household members	1	10	52
	2	22	116
	3	26	135
	4	32	163
	≥ 5	10	50
Financial status (monthly income of the household, CZK)	≤ 24,999	15	78
	25,000–34,999	13	66
	35,000–44,999	16	83
	45,000–59,999	21	107
	≥ 60,000	25	130
	I do not know	10	52
Type of settlement	big city	20	105
	middle-sized city	16	84
	small city	24	123
	bigger village	12	62
	small village, solitude	28	142
Size of settlement, inhabitants	≤ 4,999 inhabitants	40	208
	5,000–19,999	18	93
	20,000–49,999	11	59
	50,000–99,999	8	41
	100,000 and more	22	115
Region	Prague	13	66
	Central Bohemia	15	77
	Southwest	11	59
	Northwest	10	52
	Northeast	14	70
	Southeast	16	83
	Central Moravia	11	55

teraction of objective factors (socio-demographic and socio-economic characteristics, cultural context) and subjective perceptions (attitudes).

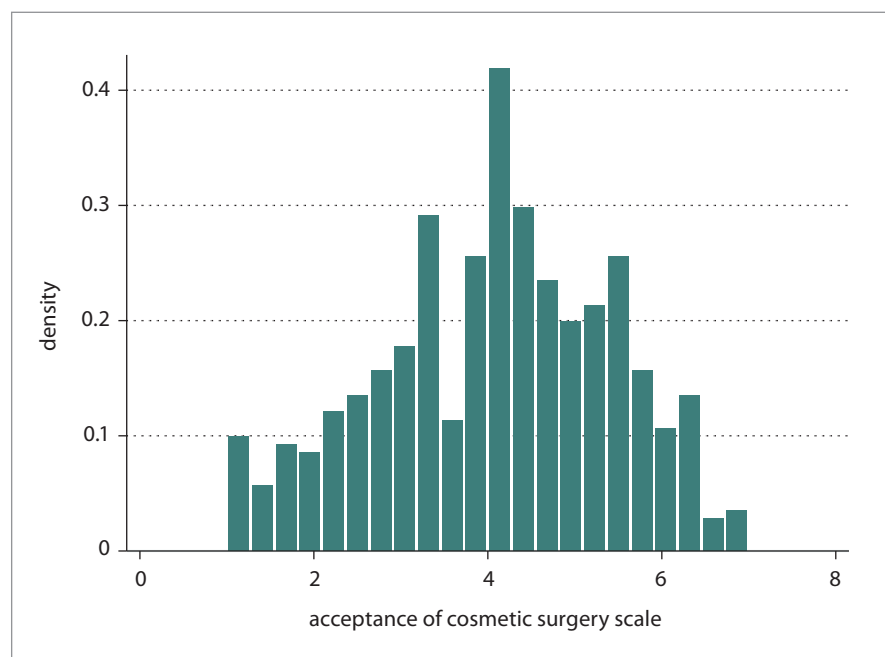
Based on the discussion, Hypothesis 1 is derived.

(H1.1): Women's attitudes towards cosmetic/aesthetic procedures depend-

**Tab. 2. A summary index – Acceptance of Cosmetic Surgery Scale.**

Variable	Min	Max	Mean	SD	N
attitudes	1	7	4.072	1.355	516

SD – standard deviation

**Graph 1. A summary index – the Acceptance of Cosmetic Surgery Scale.**

ing on their (dis)satisfaction with their physical appearance and its importance in everyday life.

(H1.2): There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their socio-economic status (income category).

(H1.3): There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their marital status.

(H1.4): There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their employment status.

(H1.5): There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their place of residence (size and type of residence).

Barret and Robbins report that fear of ageing includes fear of a decline in an individual's attractiveness [32]. Fear of loss

of attractiveness as part of the ageing process is higher among younger, less educated women, employed women, financially dependent women, women living without a partner (separation), or women living in low-quality relationships. Fear of ageing is also one of the most influential motivations to undergo cosmetic/aesthetic surgery among middle-aged women.

(H2): There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their fear of ageing.

Research has focused on partner influence. These studies suggest that women supported by their partners are more likely to undergo cosmetic/aesthetic surgery [33].

(H3): Intimate partner influence is a strong factor for women to undergo cosmetic/aesthetic surgery.

The research received ethics approval from the Committee for Ethical Research of the BLINDED FOR REVIEW (number BLINDED FOR REVIEW).

## Results

This study included 516 women. Of these, 71 (14%) have already had experience(s) with cosmetic/aesthetic surgery procedures (approx. two procedures per woman), 172 (33%) have no experience but are planning to have the procedure in the future, and 273 have no experience with the procedure and are not considering it in the future. Tab. 1 provides more details about the socio-demographic information.

For our analysis, we created a summary index for the Acceptance of Cosmetic Surgery Scale and Appearance Evaluation Subscale (Tab. 2, Graph 1).

### (Dis)satisfaction with own physical appearance and its importance in everyday life

Tab. 3 displays the correlation between (dis)satisfaction with one's appearance and attitudes towards cosmetic/aesthetic procedures. Based on the analysis the correlation was low to non-existent (Pearson's  $r = 0.0623$ ) and statistically non-significant ( $P = 0.1576$ ). Thus, we reject part of the hypothesis; there are no differences in women's attitudes towards cosmetic/aesthetic surgery depending on their dissatisfaction with their appearance.

### Socio-economic status (income category)

The differences in attitudes towards cosmetic/aesthetic procedures by income category are summarised in Tab. 4. The trend is not entirely clear. Women around the median salary (20,000–40,000 CZK) are slightly more positive, and then there is a kind of increase above 50,000 CZK. According to the ANOVA statistical significance test ( $P = 0.0589$ ), the differences are close to no statistical significance.

### Marital status

Tab. 5 summarizes the differences in attitudes towards cosmetic/aesthetic procedures by marital status. According to the analysis, widows (mean 4.77) and divorced (mean 4.29) women have the most positive attitudes towards cosmetic/aesthetic procedures. On the other hand, married, cohabited, and single women do not consider cosmetic/aesthetic surgery procedures. According to ANOVA statistical significance test ( $P = 0.3451$ ), the differences are not statistically significant.

### Employment status

According to our analysis, the most positive attitudes towards cosmetic/aesthetic surgery are towards occupational status 'Others', but the number of participants in this group is very small. Consequently, the most positive attitudes towards cosmetic/aesthetic surgery are held by the self-employed (mean 4.18) and employed (mean 4.13) women, while the least positive attitudes are held by retired women (mean 3.68). Tab. 6 summarizes differences in attitudes towards cosmetic/aesthetic procedures by economic status of participants.

There was only a minimal effect, and Pearson's correlation  $r = 0.0585$  was not significant ( $P = 0.1843$ ).

If I look at the three categories (experience with cosmetic/aesthetic surgery) and compare the average the current importance of appearance in employment, it is highest for women who considering cosmetic/aesthetic surgery (mean 5.05), but not statistically significant (ANOVA  $P = 0.1850$ ) (Tab. 7).

### Place of residence (size and type of settlement)

Tab. 8 summarizes the differences in attitudes towards cosmetic/aesthetic procedures by size and type of residence. Women living in solitude areas have the most positive attitudes towards cosmetic/aesthetic surgery, but the number

**Tab. 3. The correlation between satisfaction with one's appearance and attitudes towards cosmetic/aesthetic procedures.**

Statement	Correlation
Before going out in public, I always notice how I look.	0.2144
I am careful when buying clothes that will make me look my best.	0.1896
I check my appearance in a mirror whenever I can.	0.2177
Before going out, I usually spend a lot of time getting ready.	0.2295
It is important that I always look good.	0.2317
I use very few grooming products.	-0.0896

**Tab. 4. Differences in attitudes towards cosmetic/aesthetic procedures by income.**

Income category (CZK)	Mean attitudes towards cosmetic/aesthetic procedures	SD	N
≤ 14,999	3.61	1.71	20
15,000–19,999	3.78	1.32	28
20,000–24,999	4.47	1.22	30
25,000–29,999	4.21	1.45	33
30,000–34,999	3.99	1.23	33
35,000–39,999	4.18	1.39	45
40,000–44,999	3.72	1.33	38
45,000–49,999	3.74	1.39	34
50,000–59,999	4.17	1.27	73
60,000–69,999	4.38	1.35	64
≥ 70,000	4.26	1.24	66
I do not know	3.77	1.43	52

SD – standard deviation

**Tab. 5. Differences in attitudes towards cosmetic/aesthetic procedures by marital status.**

Marital status	Mean attitudes towards cosmetic/aesthetic procedures	SD	N
single	3.99	1.41	102
married	4.01	1.33	241
cohabitation	4.11	1.38	93
divorced	4.29	1.31	74
widow	4.77	1.62	6

SD – standard deviation

is very small. Women living in cities and towns have the most positive attitudes towards cosmetic surgery. On the other

hand, women living in rural areas have the least positive attitudes towards cosmetic/aesthetic surgery.

According to the ANOVA statistical significance test ( $P = 0.8282$ ), the differences are statistically insignificant.

### Fear of ageing

Tab. 9 summarizes the differences in attitudes towards cosmetic/aesthetic procedures according to attitudes towards ageing. The most positive attitudes are held by people who want to treat old age as a disease, but these are very few in the sample. The most positive attitudes towards cosmetic/aesthetic surgery are therefore those who see old age as part of life, but the difference is only minimal. Most categories have really few cases (Tab. 10).

According to the ANOVA statistical significance test ( $P = 0.5268$ ), the differences are not statistically significant. Thus, we reject hypothesis H5; there are no differences in women's attitudes towards cosmetic/aesthetic surgery depending on their attitudes towards ageing. Tab. 10 summarises attitudes towards ageing concerning experience with cosmetic/aesthetic surgery procedures of participants.

### Intimate partner

As Tab. 11 shows, the correlation between how important appearance is to a partner and positive attitudes toward cosmetic/aesthetic procedures is moderate to strong (Pearson's  $r = 0.2709$ ) and statistically significant ( $P = 0.0000$ ). When we look at the three categories and compare the average importance of appearance to a partner, it is quite high for those considering cosmetic/aesthetic surgery and statistically significant (ANOVA  $P = 0.0005$ ).

If we are looking at the response to the question "Who or what do you think influences people's attitudes towards cosmetic/aesthetic procedures?", 68% of women agreed that a long-term partner influences a woman's attitudes towards cosmetic/aesthetic procedures, and 67% agreed that seeing a new relationship influences women's attitudes

**Tab. 6. Differences in attitudes towards cosmetic/aesthetic procedures by economic status.**

Occupational status	Mean attitudes towards cosmetic/aesthetic procedures	SD	Total (N)
self-employed	4.18	1.43	26
employed	4.13	1.35	357
non-employed	3.56	1.45	34
retirement	3.68	1.49	18
housewife	4.04	1.23	74
others	4.48	1.52	7

SD – standard deviation

**Tab. 7. Experience in comparison with the average importance of appearance in employment.**

Experience with cosmetic/aesthetic surgery	Mean importance of appearance in employment	SD	Total (N)
yes	4.59	2.11	71
no, but I consider	5.05	2.04	172
no, I do not consider	4.70	2.36	273

SD – standard deviation

**Tab. 8. Differences in attitudes towards cosmetic/aesthetic procedures by size and type of residence.**

Size and type of settlement	Mean attitudes towards cosmetic/aesthetic procedures	SD	Total (N)
big city	4.14	1.29	105
medium-sized town	4.19	1.29	84
small town	4.02	1.33	123
bigger village	3.92	1.40	62
small village	4.05	1.46	140
solitude	4.50	1.84	2

SD – standard deviation

towards cosmetic/aesthetic procedures (Tab. 12).

### Discussion

This article examined attitudes and acceptance towards cosmetic/aesthetic services among the Czech middle-aged women population. We aim to map the situation and acceptance of enhance-

ment options across the specific age group of women in the Czech Republic – women who have undergone anti-ageing procedures, those who have not but are considering them in the future, or those who publicly reject and define themselves against these expanded options. This study's results highlight several exciting findings in the Czech con-

**Tab. 9. Differences in attitudes towards cosmetic/aesthetic procedures according to attitudes towards ageing.**

Attitudes to ageing	Mean attitudes towards cosmetic/ aesthetic procedures	SD	Total (N)
Old age is the greatest enemy of man and mankind.	3.87	2.09	16
Old age is a disease that we should treat.	4.80	1.93	3
Old age is just a part of life, nothing more, nothing less.	4.13	1.30	223
Old age is a natural thing given by nature.	4.03	1.33	253
Old age is the reward of a long life.	4.36	1.29	15
Old age? I don't even think about it; I don't care.	3.38	2.12	6

SD – standard deviation

**Tab. 10. Attitudes towards ageing in relation to experience with cosmetic/aesthetic surgery procedures.**

Attitudes to ageing	Yes	No, but consider	No, I do not consider	Total (N)
Old age is the greatest enemy of man and mankind	12.5%	31.3%	56.3%	100.0% (16)
Old age is a disease that we should treat	33.3%	0.0%	66.7%	100.0% (3)
Old age is just a part of life, nothing more, nothing less	14.8%	31.8%	53.4%	100.0% (223)
Old age is a natural thing that is given by nature	13.0%	35.2%	51.8%	100.0% (253)
Old age is the reward of a long life	13.3%	40.0%	46.7%	100.0% (15)
Old age? I don't even think about it; I don't care	0.0%	16.7%	83.3%	100.0% (6)

text and extend previous work on attitudes toward cosmetic/aesthetic services in several ways.

Generally, the results showed that middle-aged women's attitudes and perceptions towards cosmetic/aesthetic surgery are influenced by socio-demographic and personal variables. Previous research has found that women have a more positive attitude toward cosmetic/aesthetic services if they credit physical appearance as having a significant impact on their everyday lives [34]. Brown et al. found that women's lower self-reported physical attractiveness predicts a higher likelihood of undergoing cosmetic surgery [11]. This finding is supported by Delinsky, who shows that a more significant positive attitude toward cosmetic procedures is related to the greater importance of appearance relative to self-esteem and self-evaluation [35]. Additionally, women who are unsatisfied with a specific part

**Tab. 11. Experience with cosmetic/aesthetic surgery and average importance of appearance to a partner.**

Experience with cosmetic/ aesthetic surgery	Mean	SD	Total (N)
yes	5.76	1.88	51
no, but I consider	5.88	1.64	139
no, I do not consider	5.16	1.90	224

SD – standard deviation

**Tab. 12. Motivations influence attitudes towards cosmetic/aesthetic procedures.**

Motivation	Yes	No	Total
new relationship	67.0%	33.0%	100.0% (516)
partner/husband	68.0%	32.0%	100.0% (516)

of the body have a positive attitude toward cosmetic/aesthetic services [36]. In our study, the correlation between (dis)satisfaction with one's appearance and attitudes towards cosmetic/aesthetic

procedures is low to zero. Therefore, the statement that there are differences in women's attitudes towards cosmetic/aesthetic interventions depending on their (dis)satisfaction with their

appearance and its importance in their daily lives was rejected. This result is in contrast with previous research, which has shown that individuals with a negative image of their body have a higher tendency to undergo cosmetic/aesthetic surgery as well as some showed that fear and worries about physical appearance are strong predictors of undergoing cosmetic/aesthetic surgery [37].

In terms of attitudes towards cosmetic/aesthetic services, we selected four socio-demographic factors that we believe may influence women's attitudes, namely employment status [38], place of residence, marital status and economic status (income level) [19]. All factors can influence intrapersonal, social and attitudinal components. Our results showed, the attitudes towards cosmetic/aesthetic procedures by income category are slightly more positive among women around the median salary (20,000–40,000 CZK). There was a slight increase above 50,000 CZK. There are statistically (almost) significant differences in women's attitudes towards cosmetic/aesthetic procedures depending on their socio-economic status. In Saudi Arabia, most people who undergo cosmetic/aesthetic surgery have an average income [24]. Previous research showed that women who are socially advantaged consume enhancement practices more because of their general dissatisfaction with their own appearance [19,20]. Similar results were identified in our study.

According to the analysis, widows and divorced women have the most positive attitudes towards cosmetic/aesthetic procedures. On the other hand, married, cohabited, and single women do not consider cosmetic/aesthetic surgery procedures. The results were not statistically significant, so we had to reject the hypothesis. It was not expected that single women did not consider cosmetic/aesthetic surgery. Previous research indicated that physically attractive women have more success in the

marriage market [15,24,39]. Based on this previous research, we expected that women who are in the marriage market would have a more positive attitude towards cosmetic/aesthetic surgery procedures as beauty is perceived as a primary factor and to have a successful marriage, they needed to be as beautiful as possible. In that fact, cosmetic/aesthetic surgery can be perceived as a possibility to attract more people.

We also asked to what extent appearance is important in the current job. The importance of appearance in employment is highest among women who are considering cosmetic/aesthetic surgery, but the differences are not statistically significant. This result supported previous research, which claimed that more physically attractive people are more successful in the labour market (keeping the job and/or promotion). This research supported the idea that physical attractiveness matters in the labour market and affects earnings [13,14]. Women use beauty and physical appearance as a "weapon" to succeed in society.

The hypothesis that "There are differences in women's attitudes towards cosmetic/aesthetic procedures depending on their fear of ageing" was non-significant, and we rejected it; there are no differences in women's attitudes towards cosmetic/aesthetic surgery depending on their attitudes towards ageing. This resulted in contradiction to the previous research, who claimed that fear of ageing is a strong factor undergoing cosmetic/aesthetic surgery [29].

"The influence of an intimate partner is a strong factor for women to undergo cosmetic/aesthetic surgery", we compared the average importance of appearance to a partner. The correlation was relatively high for those considering cosmetic/aesthetic surgery and statistically significant. To complete the picture, we asked the respondents what they thought was the most common reason why women undergo cosmetic/aesthetic procedures. If we are

looking at the response to the question "Who or what do you think influences people's attitudes towards cosmetic/aesthetic procedures?", 68% of women agreed that a long-term partner influences a woman's attitudes towards cosmetic/aesthetic procedures, and 67% agreed that seeing a new relationship influences women's positive attitudes towards cosmetic/aesthetic procedures.

## Conclusion

The findings presented in this study provide an evidence-based framework that can serve as an essential source of information for scientists and specialists who offer such services in the Czech Republic. Further quantitative and qualitative research is crucial to raise awareness of Czech society's positive and negative attitudes toward cosmetic/aesthetic services. These services are becoming a normative cultural practice and influence individuals and society.

Although this study was interested only in the women population, in the future, involving men in this type of research is also very important; such work is scarce, even taboo, in the sociological field (for an exception, see [40]). The gender imbalance is obvious through analysing the websites for aesthetic surgery clinics. The websites' visualizations and presentations are primarily aimed at women, and many clinics partially or entirely ignore men in their marketing intent [41]. Focusing on men in future research could help to dispel the stereotypical and dominant explanation that cosmetic/aesthetic surgery helps women to solve the "problem" of the gradual loss of physical attractiveness and, further, it would call into question the association of masculinity with disembodiment [40,42].

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## Roles of the authors

Michaela Honelová – main author and investigator, review of the literature, acquisition, critical revision of the manuscript, crafting of the manuscript; Tomáš Doseděl – analysis and interpretation of data, crafting of the manuscript, statistical analysis, critical revision of the manuscript.

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