

MLS PSYCHOLOGY RESEARCH

<https://www.mlsjournals.com/Psychology-Research-Journal>

ISSN: 2605-5295



How to cite this article:

Acosta Zuluada, A., Rondon Álvarez, A. C. & Arango Duran, L. M. (2019). The unconscious image of the body and consumption of surgical aesthetic treatments in three women from the city of Cali. *MLS Psychology Research* 2 (2), 61-78. doi: 10.33000/mlspr.v2i2.364

THE UNCONSCIOUS IMAGE OF THE BODY AND CONSUMPTION OF SURGICAL AESTHETIC TREATMENTS IN THREE WOMEN FROM THE CITY OF CALI

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Abstract. The unconscious image of the body and the consumption of aesthetic treatments is a research project, which counted with the participation of three women of Cali Colombia, who considered themselves consumers of aesthetic treatments. The present study seeks to know the possible relationship between the unconscious image of the body and the consumption of aesthetic treatments. The type of methodology chosen in this research is qualitative with a phenomenological design. The data collection techniques were semi-structured interview Machover human figure test. For analyzing the data, a categorical analysis was used. Within the results it is known that possibly the construction of the unconscious image of the body is given through the signifier or word of the other, as well as the different experiences lived by the participants which have an influence on them and lead them to be conformed or dissatisfied with your body, generating the need to consume aesthetic treatments.

Keywords: Unconscious body image; body consumption of aesthetic treatments, women.

LA IMAGEN INCONSCIENTE DEL CUERPO Y CONSUMO DE TRATAMIENTOS ESTÉTICOS QUIRÚRGICOS EN TRES MUJERES DE LA CIUDAD DE CALI

Resumen. La imagen inconsciente del cuerpo y el consumo de tratamientos estéticos es un proyecto de investigación, en el cual se contó con la participación de tres mujeres de la ciudad de Cali Colombia, que se consideran consumidoras de tratamientos estéticos. El presente estudio busca conocer la posible relación entre la imagen inconsciente del cuerpo y el consumo de los tratamientos estéticos. El tipo de metodología escogida en esta investigación es cualitativo con un diseño fenomenológico. La técnica de recolección de información utiliza es la entrevista semiestructurada y el test de la Figura Humana de Machover. Como instrumentos de análisis se toma el análisis de contenido categorial. Dentro de los resultados se conoce que posiblemente la construcción de la imagen inconsciente del cuerpo se da a través del significante o palabra del otro, así como también las diferentes experiencias vividas por las participantes influye para ello y esto las lleva a estar conformes o inconformes con su cuerpo, generando la necesidad de consumir tratamientos estéticos.

Palabras claves: Imagen inconsciente del cuerpo, cuerpo, consumo de tratamientos estéticos, mujeres.

Introduction

Currently, surgical aesthetic consumption is a phenomenon that is on the rise, since according to research on the subject, in recent years an increase in aesthetic surgeries in Colombia has been reported. It seems to be associated with the perception that people have of their bodies. It is important to emphasize that this perception has changed over time and that the media has contributed to this consumerism, leading people to stereotype the female body as beautiful, slender, young and “perfect.”

It is for this reason that this research acquires social relevance, because aesthetic surgeries play an important role in society and especially in Colombia, as highlighted in a report published in *El País* (2018). This report shows the results found by the International Society of Plastic Surgery. In its latest review in 2017, the results emphasize that, of the countries where people choose to perform aesthetic surgical procedures, Colombia ranks number four. In addition to that, this country is responsible for attending the 26% of foreigners who prefer this country to perform these procedures – an aspect stated by the same report.

In accordance with that, it can be mentioned that the need to maintain a beautiful and slender body is not only a part of the Colombian culture, but there are also other cultures that perform these practices in order to fit into the society. There, the media constantly bombard the minds of people and especially women through their advertising, establishing the need to be beautiful and “perfect,” thus creating a cult of the body, where physical practices are constant. Cortes (2001) says that “the contemporary cult of the

human body, of a young and beautiful body and, moreover, the desire to not age, is a symptom of this culture” (p.29).

Given this, it cannot be denied that the media, such as magazines, television, radio and postmodernism-like posters use the body as the main trading instrument to promote various products, “which is the mass medium par excellence, whose schemas extend to all other media” (Baudrillard, 2009, p. 145). This can be noticed in advertising of well-known brands, where they promote the delusional and dreamy beauty of a face or a standardized body.

It is also known that the performance of cosmetic surgery can become a public health problem, since health risks have been identified for certain women who are willing to have their bodies modified in places not certified by the Colombian National Institute of Food and Drug Administration (INVIMA). This is what the following report published in El País refers to, where Salazar (2014) states that every week a different patient arrives at Del Valle University Hospital, due to bad aesthetic procedures that leave sequels in the body such as resistant infections, masses or tumors and irreversible deformities.

On the other hand, the Colombian National Administrative Department of Statistics, 2013, (DANE) shows in its statistics the death of 49 women in the department of Valle del Cauca, due to complications in surgical procedures producing infections or deformities, because some products are not compatible with the body or create blood clots that can reach both the brain and lungs causing death.

Similarly, in order to understand the unconscious body image, the cases of three women who underwent different aesthetic surgical procedures are taken into account. For this, a conceptual framework is proposed, which works on fundamental concepts such as: psychic topics; psychosexual theory; the Oedipus complex; the castration complex; narcissism; identification; hysteria; the unconscious body image; the three body registers; the real, symbolic and imaginary body; and finally, the body from a social perspective, which leads to identifying the influence of the media, aesthetic consumption and the ideal body.

Likewise, the research method that was worked on is of a qualitative type. The scope of this research is of a descriptive nature, as it seeks to collect information independently. The instruments that were used during the realization of the research are the Human Figure Drawing Test by Karen Machover and the semi-structured interview. The collected information was organized through the analysis of categorical content.

Method

Type of Research

The research is of a qualitative type, because its purpose is “to examine the way in which individuals perceive and experience the phenomena that surround them,

deepening their points of view, interpretations and meanings” (Sampieri, 2014, p.358) – that is, it takes into account the subjectivity or the particularity of the phenomenon that one wants to study, but it does not seek an universal explanation through statistical and numerical foundations.

The research does not attempt to collect information with standardized methods, but rather takes into account the subject's perspective through unstructured interviews. In this way, each participant's speech is expressed, with the aim of providing an authentic and natural description of the studied phenomenon. Likewise, the research is also aimed at accessing their phantasmagorized imaginary reality in order to understand the meaning of the body.

Therefore, the scope of this research is descriptive, since it seeks to collect information independently, in order to “specify the properties, characteristics and profiles of people” (Sampieri, 2014, p.80)

Design

This research is based on phenomenological design, whose “main purpose is to explore, describe and understand people's experiences of a phenomenon and find out the elements in common with those experiences” (Sampieri, 2014, p. 493). Taking that into account, the research includes what the participants' body mean to them, looking into each one of the experiences, and finally analyzes significant and common aspects that are generally held through a case study.

According to Sampieri and Mendoza (2008), the case studies are “Studies, (...) they deeply analyze a unit to respond to the problem, test hypotheses and develop theories” (p.163). They allow to contextualize and analyze in a particular way in relation to what the research wants to answer, being appropriate for the analysis of each participant's background and experiences, because apart from that, “the case study recognizes the privileged space where culture and history ‘deposit’ and form a speaking being” (Serrano, 1997, p.203).

Participants

The sample taken into account for data collection is homogeneous, since the selected units have the same profile, characteristics or share similar features (Sampieri, 2014). The units concern the three selected participants with similar characteristics. For this, inclusion and exclusion criteria were taken into account, allowing the type of participants to be specified for the research.

Inclusion criteria: The selected participants are 20-30 years old females and have used surgical aesthetic treatments at least once.

Exclusion criteria: Participants cannot be men, have children, be married, be without physical modifications at an aesthetic level. Women with eating disorders or

some psychopathological difficulty are also excluded from the study. This is identified by the clinical analysis of the participants' speech and reported directly by them.

Although the three participants have similar characteristics, the aim is to understand the particular significance of their bodies, which are projected in their speech and the human figure drawings.

Instruments

The Human Figure Drawing Test created by Karen Machover in 1949 – This allows to identify each subject's individual traits through the projection in “which the subject expels in herself and locates in the other (person or thing) qualities, feelings and/or desires” (Laplanche 1987, p. 306).

For this reason, the Machover test allowed to establish an unconscious link between the drawing made by the subject and her personality, clarifying the conformation of the unconscious body image, thus confirming it.

For this reason, it is understood that the Machover test allows to understand the psychic situation related to the conflicts, impulses and anxieties that the subject is experiencing. This can be seen in the human figure drawings and in the sheet related to the environment.

Semi-structured interview – It is characterized by its flexibility, allowing interaction with the interviewed people and the identification of lifestyles, habits and infinite details that can generate more precise contextualization of the problem (Sampieri, 2007).

Within the interview, 4 guide questions were taken into account, related to the categories of analysis, which conduct and give meaning to the interview.

Analysis Technique

The collected information was organized through the analysis of categorical content, through which the following categories stand out: Identifying with the mother (IM), Identifying with the father (IF), Meaning of the body (MB), Significance of the body from the viewpoint of the other (SBVO), Dissatisfaction with the body (DB), Aesthetic treatments (AT), Partner (PA), Actions for maintaining the results (AMR), Conformity or non-conformity with the results obtained (CNRO). This will be related and included in the human figure analysis in order to have deeper and more validated knowledge of each case.

Procedure

Phase 1

Firstly, the categories to be taken into account when asking the questions in the semi-structured interview are: mother, father, body and significant experiences.

Phase 2

Several questions will be asked, according to the previously selected categories, such as:

- Tell me about your mother
- Tell me about your father.
- How have you experienced your body over the course of your life?
- Tell me about the experiences in your life that have been meaningful to you.

Phase 3

At this point, the interview format is designed, which will be taken into account during the interview and includes: each participant's personal and family data with their respective genogram, the interview questions and the protocol for applying the human figure drawing test.

Phase 4

Here is where informed consent is built in.

Phase 5

A pre-selection of participants is made, and they are contacted by applying the previously mentioned protocol.

Phase 6

Review of the human figure drawing made by the participants, taking into account the analysis protocol of the Machover human figure test, as well as the review of the interview.

Finally, ethical actions were carried out, such as signing the informed consent by the participants, in which they give their authorization to work with the collected information, as well as making it clear to them that what comes out of the interview and the Machover human figure test is only for academic purposes. The contacted women are totally unknown to the researchers, and no contact is made with any of them.

Results

Participant N° 1

Analysis

A certain identification with her mother can be observed, since during the first stages of life, it is her who initially supplies the child's needs – in other words, from birth children are sensitive to the events that occur around them, and a fundamental part of this process occurs when they hear the tone of their mother's voice. According to Dolto (1996), "the girl is sensitive to the presence of her mother when she needs her. Once she has been satiated and feels good, she will feel more attracted to a man than a woman" (p. 170).

During this identification process, according to the theory, the subject's self takes the partial form of its representation – in other words, "it concerns the identification of the self with a partial aspect of the object," Freud (as cited in Nasio, 1988, p. 144). This may mean that the participant has probably taken on certain characteristics and traits of her mother, which are related to the fulfillment of her goals.

Likewise, she is a woman who worries about her care and likes to be seen by others, which demonstrates a concern in the participant for her physical appearance. This may be related to the need to impact and be sexually attractive – that is, there is an emotional component visible in the relationships established by her, before and after surgery, where the concern about the partner's approval of her body becomes clear.

On the other hand, a person with high somatic concentration and intensified narcissism is observed. When referring to this, they talk about the process experienced by the subject in the initial stages of life, in which all his or her libidinal drive returns to the self.

This process, known as primary narcissism, is initially due to the fact that parents deposit in their children a drive load, related to the fulfillment of their frustrated dreams. In this case, the participant's mother has given her the need to always achieve her goals and desires.

Nevertheless, this first stage changes, presenting itself as secondary narcissism, where the subject understands that, in order to be able to satisfy his or her needs, he or she must comply with the demands of the ideal self (Nasio, 1988). Regarding the participant's speech, the importance of the fulfillment of certain cultural constraints is emphasized when she seeks to be loved or accepted. For this, she fulfills certain demands, those of the ideal self, probably related to a beautiful and slender body, having in this way the body as a means to access the other.

It is likely that, to the world surrounding the participant, she will be appealing, feminine and sensual. But internally, she may feel anguish about how her body is seen from a sexual perspective, leading her to eroticize what is not sexual. This is a symptom of hysteria.

With respect to the participant's body, the significance of her body emphasizes diverse important aspects referring to how uncomfortable she feels with it. Among others, her glutes are the only part that bothers her, and it is a physical trait that she inherits and

identifies with her mother, which Freud denominates (as it was cited in Nasio, 1988) “Partial identification with the local image of the object” (p.148). It should also be mentioned that the significance of the body in women is associated, according to Dolto, with how the body was experienced in childhood. As the author states: “On the one hand, the girl has an intuition of her femininity and her sex, in agreement or disagreement with the pleasure or displeasure of her mother. And of her father with respect to her, and with the pleasure that the feelings of her sex give her in her body” (Dolto, 1996, p. 170).

For this reason, it can be inferred that the participant has related her large glutes to an aspect of being a developed and experienced woman – that is, she visualizes her body in a fragmented way, a way of identifying with the maternal figure, which alludes to the experience of being a woman, of being recognized from the sexual aspect. This is because she has possibly positioned her mother as a sexual being – that is, she places her mother as an object of desire.

What has been said up to this point implies the probability that the participant has associated her body to her childhood experiences, which are possibly linked to a conflict in the construction of femininity, because during the interview she highlights certain experiences that made her uncomfortable in her childhood, such as being seen as an object of desire. Considering this, it is important to refer to Dolto (1996):

With this human environment, the girl has bodily contacts that take on a sense of emotional and ideational harmony or disharmony in her relationship with others, according to other people’s statements and reactions. A phenomenon called introjection occurs and the notion of her femininity is established in the girl by bestowing positive symbolic values that she has thus received from others, which concern her being in the world, her body, her appearance and her behavior (p.170).

In this regard, it can be argued that, depending on the experience lived on the body, it can trigger a positive or negative value of the conception of being a woman (Dolto, 1996).

On the other hand, it is possible to notice evasion and little appreciation of the male figure. The participant in the interview shows a certain dissatisfaction with the relationship she maintains with her father. This may indicate that the fear and lack of confidence that she shows in him may have created a barrier in their relationship.

Nevertheless, the fundamental role of the mother in including the father in his children’s development should be emphasized – that is, if the mother feels positive feelings towards the man, the daughter manages to bond comfortably with him (Dolto, 1996).

It is likely that the poor relationship that the participant claims to have with her father figure was due to the fact that the mother, possibly in the stage of dependence and maternal care, did not allow the father to become integrated into the dyad, leading to conflict in the conception that she has of the father figure and hence the argument of her protest against the male figure.

Participant N°2

Analysis

In this participant, a partial identification with her mother is observed, thus focusing on only one aspect of her mother image. The identification with her father is transformed into a partial identification, Freud (as cited in Nasio, 1988), the self takes significant features of that identifying object, turning into that aspect that she adopted within her representation.

On the other hand, a conflict related to hiding the body can be observed, indicating a fear of exposing the body. Therefore, what Freud (as cited in Nasio, 1991) mentions as a characteristic of hysteria is brought up again: “The contradictory enigma that hysteria raises (...) is the couple of opposites formed by an excessive sexual need and an excessive rejection of sexuality” (p. 47). It is understood that the hysterical subject remains in an unconscious duality between an excessive need and, at the same time, a feeling of disgust over that need. This is seen in the participant when she is unconsciously afraid of showing her body but at the same time enjoys being seen by others.

Likewise, there is evidence of anxiety and emotional conflicts probably at a social and sexual level. The participant has, in some parts of her speech, difficulties establishing pleasant relationships with others. Besides that, there is evidence of lack of confidence in social contacts – situation that she recognizes. “I keep eighty percent of my life to myself, while I share the other twenty percent with very few people.” Therefore, the participant is likely to have objections when adapting to new situations and interaction with others (Machover, 1974).

The test shows guilt over the non-recognition of her father, as she mentions that she does not know him. Concerning this, Dolto says:

The most serious rejection is undoubtedly that of the father who does not want to symbolically and legally recognize his child – it is a symbolic rejection of his or her social humanization. (...). As for the child who has been abandoned, due to pure rejection of his or her emotional value, and considered insufficient to retain emotional interest (...), he or she may feel like a symbol of excrement for both parents (Dolto, 1996, p, 85).

Taking into account what the author mentions, the participant is likely to feel rejected in her social humanization because of her father's abandonment, which can lead to possible feelings of inferiority. To make up for this, she feels “the desire to play with her own attraction in search of honor, attention and satisfaction of her own vanity, trying to value the most visible physical aspect, and trying to call the male’s attention” (Machover, 1974, p. 56). The insecurity with respect to her body makes her need another body that offers her the necessary value. This is what Machover (1974) considers as “individuals who have a faulty and indecisive sense of their body integrity” (p. 80), since it is visible in the human figure drawing.

Taking that into account, the participant is likely to have built an unconscious body image with some conflicts, due to the personal experiences. Those experiences entail that, when looking at herself in the mirror, she will probably see the image she has unconsciously created of her own body, representing it through its body schema. It is important to add what Dolto mentioned when he differences between body schema and

body image. According to this author, the body “is our carnal life in contact with the physical world (...) it refers to the actual body in space, to the immediate experience” (Dolto, 1984, p.18-22).

Unlike the body schema, “the body image is proper to each subject and is linked to the subject and his or her history (...) and is exclusively imaginary” (Dolto, 1984, p. 21). That is why the body image is the representation that each subject makes of himself or herself in relation to all the emotional experiences and through the pleasure or displeasure of the erogenous zones.

Therefore, she takes up again a situation that leads her to build up her concept of unconscious body image, seeing the mark before the conception of her body as a teenage experience. This way, she will present features of inferiority, identifying herself at the same time with that person – what Freud calls partial identification with the local image of the object. “The self operates an identification with other people’s image, considering only that the sexual being, or more exactly with the sexual part of the other” Freud (as cited in Nasio, 1988, p, 148).

Therefore, the participant is likely to experience her body in a partial way because she satisfies her drives in a partial way, which makes her have the notion of a divided or fragmented body. Freud mentions that the subject initially feels and sees the body separately or in sections depending on where the drive is felt (Freud, 1905). This can be observed when the participant throughout her story mentions that, initially, she does not feel comfortable with her breasts, so they are operated, passing that drive to the glutes, which are also operated. And then, she operates her abdomen to be as she says, “*perfect in the sense that I wanted my body according to my perfection.*”

When her body feels fragmented, she may be satisfied with one part of her body after surgery and pass the drive to another part, until she is satisfied with what she has not yet achieved, possibly remaining at fault before her body.

This leads us to talk about the meaning that the participant gives to her body from what she sees in it, Lacan (as cited in Soler, 1983). It is mentioned that, for the subject to give meaning to her body, she needs to shape the image that she observes in the mirror. It is in that moment that the subject gives meaning to the body that she observes. The participant is not happy with what she sees in the mirror so it is difficult for her to make sense of her body and accept it, because the image she sees in the mirror is not acceptable to her, giving meaning to the body she is looking at.

On the other hand, there is dissatisfaction with the relationship with her mother, because she expresses that they do not have an adequate relationship. Because of that, the participant feels that she has been left in permanent dissatisfaction by the mother, due to her first separation with her, which is given previously with the mother's womb, thus interfering with the girl's first loving feeling towards the mother (Nasio, 1988).

Thanks to her speech, the aunt is found out to be the one who plays the role of mother in the relationship with the participant, and the mother is the one who plays the role of father because it is her who imposes the rules. The superego is the one who introduces the rules or authority and means it in such a way that moral and ethical foundations are created, which are given to her in the development of the Oedipus complex. This depends to a great extent on the persistent presence of the father or the

authority of what should be and is not licit to be. Before this, the participant's mother is the one who introduces the rules in her, leading to conflict in the mother-daughter relationship. This is because of the confusion that she has about the role of mother that she expects from her mother and the one that she actually plays, meaning that the participant mentions a possible hostile relationship at times. "It is not that typical mother-daughter relationship in which you want to talk about everything, trust and get some advice."

Because of this, Dolto says that the mother can only play the role of dominant mother and rule introducer, as long as the father is there to give value to that attitude of the mother. On the contrary, the girl enters into an ambivalence between the sex of the mother and what she represents. (Dolto, 1996), because of the lack of a father, the participant is unable to clearly identify what the mother means to her.

As it can be seen throughout the analysis, the participant is insecure about her body because she was not satisfied before and after the procedures. That is why we refer again to Dolto when he talks about how the lack of affection of one of the parents on the child, or excessive love, can lead to insecurity in the subject about their fate or ability to cope with life.

So it can be said that it is possible that, thanks to the value that the participant placed on the language of those close to her, she was led to create the sense of her femininity, as well as the sense that she gives to the language of her current partner, which flatters her body thus giving her possibly a different sense of her femininity.

According to this, Dolto says: "When the girl (...) expresses emotions to communicate with others, she does so from her feeling of being valued by the people around her. This value is given to her during her childhood (...) A daughter is a female human specimen," (Dolto, 1996, p. 170). In view of this, it can be said that the insecurity projected by the participant and the isolation is a consequence of the feelings of security experienced during her childhood.

Participant N° 3

Analysis

Maternal dependence is visible since the mother plays the role of an indispensable figure for the participant. Everything she says makes it all possible to give it all to her or satisfy her, which refers to the previous stages of development, where the mother was the one who fulfilled the nurturing function – that is, there is probably a return to the oral stage, which is not necessarily directly related to the nurturing function of feeding, but in the way in which the participant meant during this phase, the interaction of giving and receiving with the paternal figures and the environment.

Likewise, it can be observed that the mother is the one who influences the participant's decisions, which is the influence of the mother in the object choices. This is due, according to Dolto (1996), to "the introjection of the mother. The latter one allows the desires felt by the mother (...) it is also transformed into the girl's desires" (p.111).

The introjection of the maternal figure is one of the beginnings that gives birth to the identification process, becoming clear between the participant and her mother when she states in her speech: “My mommy works in a restaurant, she works really hard.” And she also refers to it when she speaks about herself: “I have to work hard.” According to this, it can be observed that probably a part of the participant's self has been transformed into a part of the identified object – process known as partial identification, which according to Freud, as it was cited in Nasio (1988), “concerns the identification of the self with partial aspect of the object.”

On the other hand, it is important to emphasize, in the participant's speech, the reference to the continuous loss of her most beloved ones. Some of her losses are her father, the object of external love, and her cousin. Therefore, it can be seen that the participant experiences a constant loss and constitutive lack. This leads her to dissatisfaction, possibly related to the unconformity that she feels about her body, even after the performed procedures, because what she thinks about her body is: “Now I’m feeling normal, I’m such a non-conformist.” As for the lack related to dissatisfaction, it could be mentioned that the participant presents typical features of hysteria – a characteristic of the first state proposed by Nasio (1991) called “an unsatisfied self,” where “the self is constantly waiting to receive from the other, not the satisfaction that fills, but, curiously, the non-response that causes frustration” (p. 15).

On the other hand, there are indicators of conflict at the sexual level, “related more to fears of castration for auto-erotic satisfaction” Machover (1974, p.59). They could be related to what Nasio (1991) highlights: “A hysteric person’s body suffers from being divided between the genital part, surprisingly anesthetized and afflicted by intense sexual inhibitions” (p.14).

The participant’s drawings are what Machover calls a childlike drawing, which could be linked to the possible maternal dependence preserving the love of this apparently asexual figure. This is because of the supposed pre-Oedipus conflict, because of the predominantly hysterical features where she positions herself as an object of desire but not a desiring object, becoming a sexually anaesthetized subject. As Freud (1905, p.74) states: “They did not withdraw their tenderness, or they did it in a very partial way. It's mostly girls: (...) they fully preserve their childlike love (...). Becoming (...) sexually anesthetized [and insensitive].”

On the other hand, there is resistance in assuming her corporeity, probably related due to the inconformity that she says she has in her body when she says: “I was too thin, extremely thin (...) I had lots of fights when it came to what to wear. It was awful.”

Therefore, the participant has referred her body in a devaluing way when she talks about the non-conformity of her body for being “extremely thin.” According to Dolto (1986), the unconscious body image “is inscribed in the relational experiences of need and desire, which are valuing and/or devaluing, (...) are manifested as a symbolization of the variations in the perception of the body schema” (p. 33).

Likewise, the meaning that the participant gave to her body is linked to the devaluing meaning given to it by her mother. Therefore, she refers to it: “*My mom thought it was me who had a problem but neither of those things was true.*” In view of this, it is important to mention what Dolto (1984) says: “The healthy evolution of this subject (...) depends on the emotional relationship between her and her parents. It also depends on that, very early, they offer her information that is true to her physical state” (p. 19).

Discussion and Conclusion

It was found that there is a common aspect that stands out in all three participants, which is the identification with the maternal figure. The concept of identification, according to Freud (as cited in Nasio, 1988) is an intrapsychic process dominated by the unconscious, where the self is transformed into a part of the identified object. Therefore, the identification process is observed in the participants in a partial way, since they have taken a significant aspect of the primary object, the participants have internalized certain characteristics of the mother and have taken them as their own, making them part of the construction of their self.

In relation to this, it can be understood that the identifications that the participants make with the primary object are significant during the construction process of their unconscious body image, as these identifications have allowed them to represent their body image. However, these are reflected in a conflictive way. Because the participants conceive their body image in a partial way, they feel and see their body separately or in sections depending on where the drive is felt (Freud, 1905).

Moreover, the absence of the father has possibly led to difficulties in the symbolic resolution of the Oedipus and castration complex, which makes it difficult for the subject to establish the rules and restrictions of her desires (Dolto, 1984). In the absence of the father, one can observe a conflict in the participants when it comes to assimilating the rules set by their mothers, making a male protest in one of them and showing features of dependence with the maternal figure in the other two.

On the other hand, in P2 and P3 there might be a fear of castration associated with the anguish of separation with the primary love object, since according to Nasio (1988), the castration complex in the girl is the most important situation where the separation with the mother occurs.

In accordance with this, paternal figures play an important role in the construction of the girl's femininity and sex, since according to Dolto, it is associated with how she has experienced this in her childhood – that is to say, the girl conceives her femininity through the speech she hears from her mother regarding the conformity and non-conformity she has about her own body, as well as her father's approval.

Likewise, we can highlight the importance of the paternal figures' opinion, in relation to the body image. It is inscribed, according to Dolto (1984), “in the relational, valuing and/or devaluing experiences of need and desire” (p.21). This is why the unconscious body image is built from the first contact with the caregiver, from the valuing or devaluing opinion that transmits to the child in his or her body schema.

For this reason, in P3's speech, a certain impact is noticed in her opinion when the mother mentions her body in a devaluing way. Unlike P3, P1 expresses in her speech the valuing manner in which her mother refers to her body. Finally, in P2 the importance she gives to the others' opinion is observed, but in this case reflected in the partner, which she does in a valuing way.

In the same way, Dolto puts down an important value to language, understood not only as the opinion but also as the sensory exchanges that occur from experience – that is, the subject relates to others through the signifier, thus giving meaning to her body.

Considering this, it can be said that in the three participants the others' speech influences in such a way that it is likely to affect them in the construction of their unconscious body image, finding in this way certain inconformity with some parts of their body – precisely with those that are allusive to femininity, such as glutes, breasts, abdomen and legs.

P1 shows her dissatisfaction with her breasts and glutes, because according to her speech, they are not suitable for her height. P2 mentions that, when she looks at herself in the mirror, she does not like what she sees and that she has always had a “little girl” type of body. In P3, a contradiction in her story is identified because she says that she is satisfied with her body, but at the same time she shows that she feels normal and dissatisfied. In relation to this, the meaning of the unconscious body image is inscribed in the order of the imaginary, which may be related to the tendency to non-conformity that they claim to have, since according to Bernard (1994), the body is traversed by a ghost and given a meaning by a body.

Likewise, it can be identified that the meanings of her body are linked, according to Dolto (1984), “to the subject and her background (...) and is exclusively imaginary” (p. 21). In relation to this, the experiences mentioned by the participants that led them to build up their body image are taken into account, because it is known that each one lived her body in a different way, leaving marks in them and leading them to build up what they see in the mirror.

According to this, a possible conflict between what they see and what they live can be observed in the participants – that is, the participants perceive their body from the unconscious body image in discordance with the body schema, giving a possible priority to the external part. According to Nasio, as children grow up, they will understand that others will access them through the image that the children observe in the mirror. This is why they begin to give priority to their physical appearance, as what they see is different than what they live. “These images govern our aesthetic choices and, more generally, decide our dreams and our actions” (Nasio 2008, p. 23).

The discordance between body schema and body image is a difference between the real and the imaginary. This possibly generates a constitutive lack in them, in relation to the dissatisfaction with their body. This is a characteristic aspect of hysteria, because according to Lacan (as it was cited in Dellepiane, n.d.), “the lack in being or alignment of the desire of the other” (p.4) is reported in hysteria. Women with these features tend to position themselves as other people's objects of desire, which is visible from the beginning of the Oedipal process. This prevents the father from reaching to his daughter

and leads her to resign herself and feel identified with the maternal figure, taking from its seductive characteristics to gain access to an external object.

On the one hand, an ambivalence can be seen in the participants, as they want to be that object of desire. On the other hand, they fear having intercourse – that is, they probably fear exposing their bodies to their partners, but modifications are made to their bodies in order to be sexually attractive. In view of this, Freud (as cited in Nasio, 1991) mentions that “the contradictory enigma posed by hysteria (...) (is) the couple of opposites formed by an excessive sexual need and an excessive rejection of sexuality” (p. 47).

However, because the body serves as a mediator for making contact with the outside world and thanks to cultural constraints, certain disconformities with the ideal body can be seen in the participants' speech, since they are likely to feel that they do not conform to the stereotypes of beauty marked by society.

This ideal of beauty is related to characteristics of sexually attractive and voluptuous women, which causes a kind of cultural unrest, given that the consumer society has established a single image. According to Cortés (2001), this is a society “without the possibility of variation characterized by flawless bodies and the lack of imperfections that has been promoted by the media” (p.30).

In view of this, the participants have agreed to modify certain parts of their bodies in order to include themselves within the predominant archetypes of beauty established by society, which according to Cortés (2001) is related to “a young, beautiful and slender body” (p.29). However, it should be highlighted that, despite the interventions on their bodies, they remain at fault – that is, dissatisfied and wanting to attract the others' attention.

Finally, narcissistic features are visible in the three participants since they are concerned about how their body is seen, feeling the need to see themselves attractive to others in order to be recognized and loved. This can only be achieved by fulfilling the demands of the ideal self. This ideal is the prototype of beautiful and voluptuous women, which makes the “investment of the elements return and invest in the self” Freud (as cited in Nasio, 1986, p. 66).

In conclusion, it can be said that a relation was found between the surgical aesthetic treatments and the participants' unconscious body image, as this is mediated by different experiences throughout their lives. Another relation was found between the paternal references and the other, located from the identification, resolution of the Oedipus and castration complex, the signifier, and the influence of cultural constraints. This process leads to the identification of the psychic structure that, in the participants' case, is related to the predominantly hysterical features.

One of the outstanding characteristics in the participants is related to the constitutive lack, which probably leads them to try to replace this lack through surgical aesthetic treatments. This makes them part of the prototype of a voluptuous, slender woman that society establishes in order to expand aesthetic consumption.

Another characteristic is the ambivalence, which is visible in the participants' speech and the Machover test results when the participants mention the fear to exhibit their bodies, although at the same time they want to be seen.

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Date received: 06/11/2019

Date reviewed: 03/12/2019

Date accepted: 26/12/2019