

***Des (·) Teta*: Healing ritual for women in the process of breast implant removal.**

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Abstract

In 2011, the Poly Implant Prothese breast implant scandal broke out worldwide. Since then, legal firms have represented affected women, collectively suing TÜV-Rheinland, who certified the quality of PIPs for nearly ten years. However, it is estimated that around 24% of these women cannot remove the implants. On top of this, women have suffered various repercussions. Many have created coping mechanisms to deal with these situations.

We introduce *Des(·)Teta*, a new service that focuses on healing rituals for women during breast implant removal. A non-profit organization delivers the service that offers discounts on the explant surgery and recovery process besides the healing ritual. *Des(·)Teta* highlights the importance of resignifying a traumatic experience. This resignification is embedded by a stamp of the capsule created by the body to protect it. This stamp is a symbol of a new beginning for women.

Keywords: Breast implants, Healing Rituals, Symbolic Meaning, Emotional Services

Introduction: How it all started

According to the International Survey on Aesthetic/cosmetic procedures, (ISAPS, 2011), breast augmentation was the second surgical procedure worldwide, with 1'205,251 procedures by 2010. That same year, the PIP (Poly Implant Prothese) breast implant scandal broke out worldwide. PIP implants are filled with industrial-grade silicone gel not authorized for human use (Daniels, 2012). Using this silicone means that if the implant ruptures and leaks and spreads throughout the body, it can generate immune system responses, such as cancer and, in some cases, death. The situation is even more severe as the rupture rate in PIPs is estimated to be higher

than in other brands (Moschetta et al., 2014). In the wake of the scandal, movements of affected women seeking redress have arisen. An estimated 400,000 women in 65 countries received PIP implants (Groth & Graf, 2019). According to Amaya and Mendoza Toro (2014), half of these women are from Latin American countries, Brazil (25,000), Venezuela (16,000), Colombia (15,000), and Ecuador (5,000).

Over the past ten years, several lawyers and law firms have brought together these affected women and sued TÜV Rheinland, which certifies the quality of PIP implants. However, this process is neither easy nor fast. Before starting the legal process, women must have evidence to identify that their implants are of the PIP brand and become part of one of the existing lawsuits. The law firms ask for some documents to start the case, such as the woman's identity document and the identification cards of the breast implants. Once these documents are approved, the law firm represents the woman.

The legal process is full of uncertainty and frustration, mainly because it is lengthy and time-consuming (Figure 1). Once the legal process begins, there are few things women can do but wait. Also, upon learning of the scandal, many women cannot undergo explantation surgery. Ten years of the process have passed for some women, and no significant novelties have been generated. Those unable to remove the implants describe this situation as living a nightmare, carrying a time bomb inside their bodies (Woman 12, 2021). In addition, as they are passive waits, it is unclear whether the process is still ongoing for many women. Most women would like more information or accompaniment from law firms and are happy when they receive communication or updates.

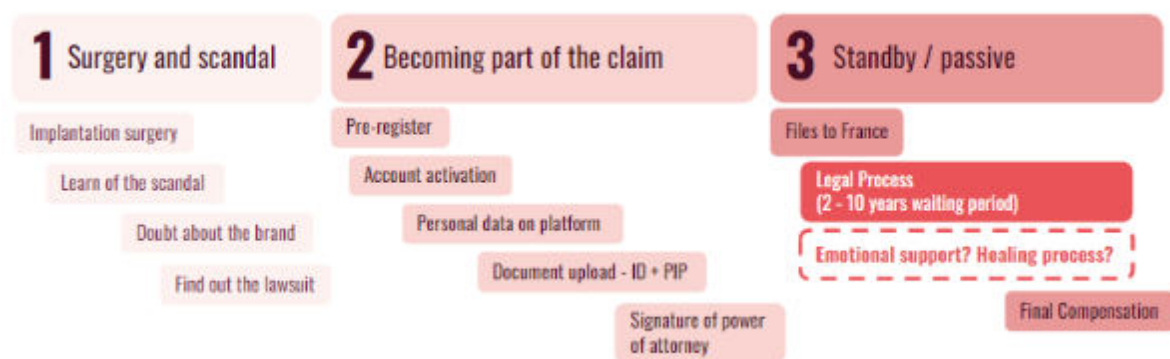


Figure 1. Journey of a PIP breast implant patient who enters class action lawsuit



As of August 2022, the lawsuits were still ongoing at the time of writing this article, and none of the victims represented had received final payment. The courts have authorized interim payments of €3,000 to €6,000 for each affected person. These payments have already been disbursed in several cases and to different groups. However, the effects of PIPs are not only physical or economic. They are also expressed psychologically, at work, or in relationships. In these areas, women often do not have support networks beyond the work done by lawyers and decisions made at the public policy level. Hence, this project's premise proposes how to create strategies and mechanisms from the emotional, to accompany legal processes, such as class action lawsuits.

This article presents an emotional service (*Des (·) Teta*) for Spanish-speaking women affected by the PIP-branded breast implants, whom a law firm with a class action lawsuit currently represents. This service is focused on empowering psychological support by creating healing rituals. Women in some class actions can access benefits that allow them to remove the implants. Besides being positive for the compensation that the women who undergo it will be entitled to, this procedure becomes the starting point for the healing ritual.

Methodology: Navigating the emotional side of the law

Stefan Moriz's (2005) six service design phases were considered to propose this new service. These phases are related to the tasks that must be carried out to design a service; for example, the first one, Understanding, seeks to have a clearer picture of the social context and the needs of the people there. Within the methodological process of the project, we structure the six phases into three central moments. The first one is called "From Coping Mechanism to Healing Rituals" and includes the phases of Understanding and Thinking. In this first moment, we took the transcripts of 15 in-depth interviews with women who expressed a desire to be part of a class action lawsuit from 5 countries. We used grief as a conceptual framework to understand their experience during the process. We found references to healing rituals of women who have had to live this experience. The second is called "From Healing Rituals to Emotional Services and includes the phases of Generating and Filtering. In the second moment, we proposed a four-phase journey of the PIP process to establish the points of intervention of the service. These phases are Initiation, Encounter, Transit, and Longing, and just as in grief, each woman creates infinite individual options to navigate the demand and waiting process, as in grief. The final is the deployment of *Des (·) Teta* as a service and includes the phases of



Explaining and Realizing. In this final moment, we had different types of prototypes, from the accompaniment service to the emotional closure.

We wanted to define this service from an empathy-based deep perception of the affected women's attitudes and situations, as Chase (2004) and Mattelmäki et al. (2013) explore in their empathic design proposal. Working with a group of women who have suffered such an experience of uncertainty and uneasiness implies a great responsibility that cannot be achieved without empathy and respect.

From coping mechanisms to healing rituals: Grief as a framework

As mentioned above, the situation of women affected by PIP is uncertain. Currently, there are law firms that represent them and help them deal with legal issues in order to obtain compensation. However, many of these women face complex realities. To understand their situation in depth, we analyzed and clustered those 15 interviews that were conducted following the COM-B model (Michie, Atkins, & West, 2014). This model is a behavioral framework that considers capability (C), opportunity (O), and motivation (M) as crucial factors capable of changing a person's behavior (B).

The analysis of these interviews made it possible to define the situation of these women as grief. According to Flórez (2002), grief is not only a painful and unexpected process in response to the death of a loved one but is a process in response to a significant loss. For these women, facing this situation is indeed a significant loss.

Kübler-Ross and Kessler (2005) identified five stages of grief: denial (shock and disbelief that loss has occurred), anger, bargaining (what-if thoughts and regrets), depression (sadness), and acceptance (acknowledging) (Table 1). These stages, as described by Kessler (2019), "do not prescribe, they describe," which means that they are a general guideline on a unique and specific process for every person on earth.

Grief Stages	Description	Women's experiences
Denial	There is much information to explore and process. Denial attempts to slow down this process and take it one step at a time rather than risk feeling overwhelmed by our emotions. It helps to minimize the overwhelming pain of the new	Women with breast implants were promised safe implants, and they trusted their doctors. So when they heard about the scandal, they thought, "It cannot be me" or "It is funny. I put a lot of my unwellness down to, I thought, aging and working and this and that; there were a lot of unusual symptoms that I had, and then I started reading and



	reality.	researching, then I was in denial for a while." (Woman 1, 2021)
Anger	There is so much to process that anger allows an emotional outlet. Anger tends to be the first thing one feels when one begins to release the emotions related to the new, impending reality.	"I mean definitely, (...) I was angry, upset that (...) I had put implants in to make me feel better about myself, and then I found out that they were poison and could damage my health" (Woman 7, 2021)
Bargaining	Bargaining is when one is willing to do anything to minimize pain. It is common to rewind the film and wish one could go back and behave differently. One tends to assume that one would not be in such an emotionally painful place if things had been different.	Some women with breast implants regret and feel guilty that they wanted to be comfortable with their bodies and had implants: "Well, yes, I feel a bit guilty that I decided to operate." (Woman 15, 2021)
Depression	It is about coping with what is happening. The loss feels more present and inevitable.	"It was such a deep depression that I wanted to die, and the only reason I have not killed myself is that I am afraid of reincarnation, and I do not want to come back and live life again but put simply, I do not feel as though I want to be alive." (Woman 10, 2021)
Acceptance	It is related to not adding more resistance to the reality of the situation and not struggling to make it different.	"I am just sitting back waiting, and I understand that it is a long process" (Woman 7, 2021).

Table 1. Grief stages compared to women's experiences.

The last stage, "acceptance," does not necessarily imply that the grieving process is over and closed or that the griever is okay with the loss, but that they acknowledged and recognized it. That is why Kessler (2019) introduced a new stage about granting meaning. This stage is related to the individual healing processes that human beings, and in this case, women, undertake to search for that meaning that will take them to the other side. On it, grief can be transformed into something emotionally nurturing that can help move forward with life and away from the fear and paralysis that loss can bring.



Finding this meaning is related to purpose and healing. For some, it is related to emotional relief; for others, it is related to being informed and sharing this information. In some cases, it has an artistic connotation; in others, it relates to logical and pragmatic processes. The important thing is that it becomes healful and meaningful. Consider Amparo's case. She is a victim of PIP implants and is represented in one of the plaintiff groups. When she discovered the scandal, she created a personal Instagram account called @tetamatters, where she documents her process. Her healing process is based on finding a connection to the material. She creates some "ceramic boobs" and then breaks them. This process serves her to detach, resign attachment, and pain through creating, materializing, and breaking. This process allowed her to "symbolically heal the scars of guilt and self-esteem suffered during the process" (Amparo, 2022).

Another example is Angeline Moncayo. Angeline is a Colombian actress and model who suffers from an autoimmune disease caused by breast implants called Asia Syndrome. Her healing process involves making the problem of breast implants visible and preventing other women from experiencing what she went through without having any source of information. As a result of her situation, Angeline created the Instagram account @asiarecovery, which gathers the largest community in Latin America of women suffering from this disease. In her account, she shares different testimonies of women who have had implants and discusses these issues with professionals and experts.

These practices have become meaningful for Amparo, Angeline, and many other women. Ozenc (2016) introduces ritual as an act of symbolism and meaning. As he explains, rituals are "where we create new small moments to spark something meaningful with our target users." The author also explains that a ritual is full of symbolism and meaning. Rituals connect and create inertia of thought and action. They are a way of showing what people care about and value the most. Also, the authors state that Rituals (with a capital R) are a helpful tool to transition from one stage to another, solidify our belonging in a community or interest group and add a narrative and purpose to life. On grief and rituals, Kessler (2019) mentions that they are linked since rituals are a way of finding meaning in loss.

According to Ozenc (2016), a Ritual usually involves a combination of community, awareness, intentionality, and spirituality. Community is a feeling of belonging that connects the person performing the ritual to those who performed it before them and those who will perform it afterward. Awareness & intentionality is the acknowledgment that something special is happening, creating the possibility to



connect to higher meanings. Spirituality is the sense that rituals help people move away from the rational and into the emotional selves.

Ozenc and Hagan (2017) propose that some rituals require artifacts, as symbols, that support them and fill them with greater meaning. These artifacts can act as shortcuts to rethink thoughts or re-feel emotions related to the object that one has, consciously or not, given them. When interacting through the senses with these artifacts, the memory of the emotion or thought comes to life (Pérez Asencio, 2012). The objects then become the anchor to those emotions. In the PIP case, an example of anchoring is when, after the explant surgery, the women receive the implants. Although they are not valuable as legal proof, they are evidence of what the women have gone through emotionally and physically in their relationships and jobs. Implants in that context act as a negative emotional anchor related to the villain of the women's stories. An opportunity arises to create a positive anchor through emotional rituals, and we, as designers, can make meaning possible (Press & Cooper, 2017).

Taking Amparo's and Angeline's experiences as a reference, we collected other projects and movements related to the topics of the project (women's rights, grief communication, and the breast as art). Every example can be understood as a healing ritual. Figure 2 shows a 2x2 matrix where the horizontal axis reflects how efforts are made, from the individual to the collective or group. The vertical axis reflects whether the results are public or private. Four quadrants are created from these two axes: Cathartic Exploration is the union of an individual effort of a private nature. Courageous Manifestation is the union of an individual effort of a public nature. Rising a Community is the union of a collective effort of a public nature. Strengthening Ties is the union of a collective effort of a private nature.



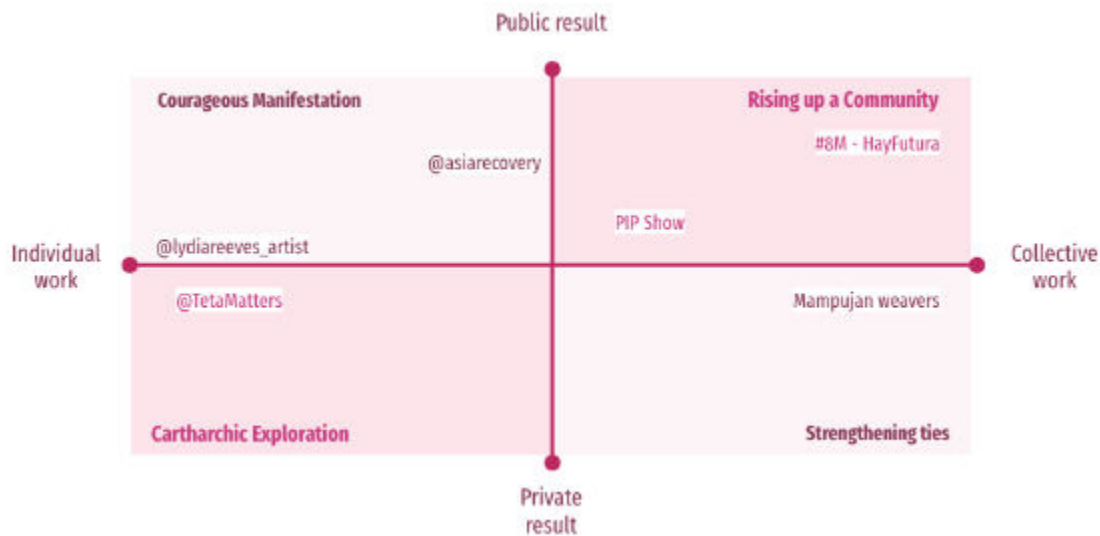


Figure 2. Matrix contrasts individual and collective efforts with private and public results of different projects considered healing rituals.

In addition to @tetamatters (Catharchic Exploration) and @asiarecoveryofficial (Courageous Manifestation), we will explain four more references. Artist Lydia Reeves (@lydiareeves_artist) has a Body Casting project. She proposes that through this project, people understand their bodies beyond the canons of beauty to positively impact how we accept ourselves. She makes pieces of women's torsos and genitalia that she delivers as sculptures, which women can wear or leave as part of the collection. Reeves' Body Casting is located in Courageous Manifestation, as her work as an artist allows the diversity and beauty of female bodies to be shown to the world.

The Mampuján weavers are a collective of Colombian women who come together to sew the stories of war they have suffered into huge tapestries. They have found, in these meetings, in the discussion and storytelling through weaving, a method to support community resilience. The women consider these meetings fundamental to their healing and rebuilding process. They allow them to unite, share their pain, commemorate, and begin to look forward (Mampuján Weavers, Winners of the 2015 National Peace Prize, 2015). This community is a sample of Strengthening ties as the story tapestries are created in the intimacy of their meetings and group sharing. They are not made for display but for remembering and healing.

Artist Camille Lorin inaugurated the PIP Show (2013), which displayed silicone breast implants hanging inside black fishnet stockings. Lorin wanted to move the focus from



the legal claim to the victims and the beauty pressure they faced. The stockings containing the implants were close to breaking, creating a tension resembling the industrial gel inside the PIPs that could spread through the women's bodies at any time. The PIP Show is part of the Rising Community quadrant because many implants are made for women affected. It was open to the public just days after a trial against five managers from the PIP company was held.

Hay Futura is an Argentinian collective of designers with a gender perspective. One of their actions has been marching on the #8M (International Women's Day - March 8th). By making themselves present in the public space on that date, they recognize other women and their like-minded people as part of the movement. They believe that reflecting and acting can fight the patriarchal culture and the suffering, inequalities, injustices, and violence it generates toward women and dissidents at all levels. The #8M from Hay Futura represents the Rising community because going out and marching creates the opportunity to be recognized as an activism collective everyone can be a part of to have a louder community voice.

From Healing Rituals to Emotional Services

The content of the interviews allowed us to identify the most representative moments of the experience of women facing a PIP class action lawsuit. For most women, the process is long and passive; however, women such as Amparo or Angeline have developed emotional strategies to cope with the grief related to their impalements.

For each woman, the journey is different. However, we identified 4 phases along the process, where the behavioral patterns of each phase were associated with moments of positive and negative emotions (Fokkinga & Desmet, 2022). Figure 3 explains the four phases Initiation, Encounter, Transit, and Longing. These phases occur just after they learn about the PIP scandal. In this way, the project aims to find the coping mechanisms and healing rituals women create and use to move forward.



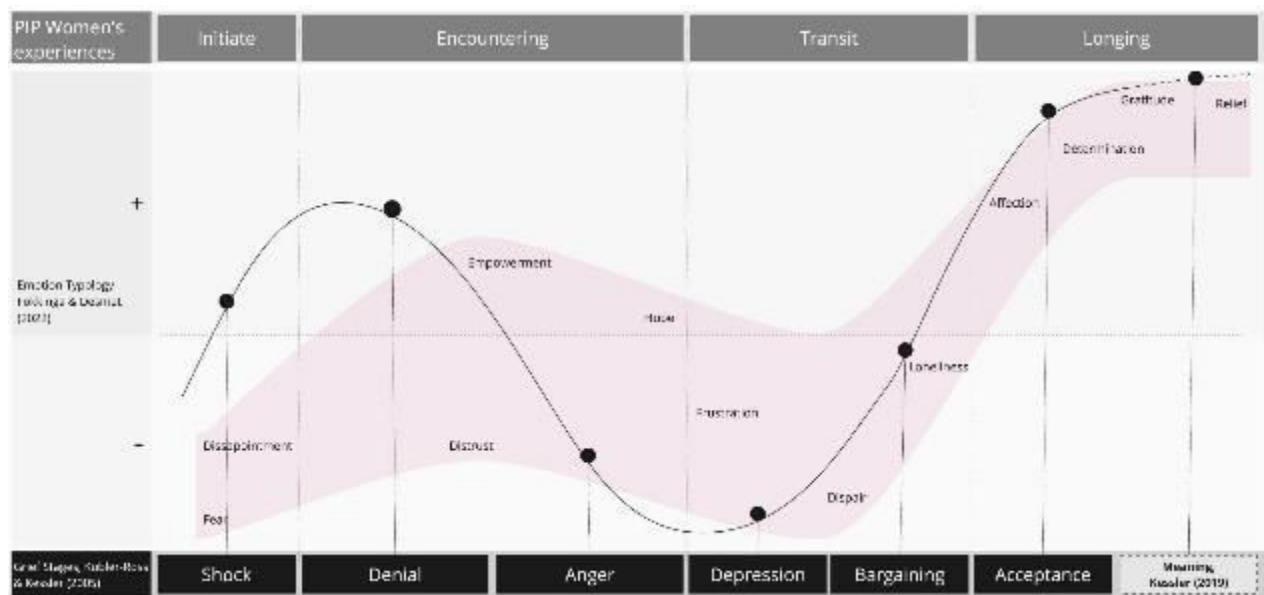


Figure 3. Graph contrasting the Kübler-Ross and Kessler stages of grief with the phases of women's experience and the emotions found in behavioral patterns from Fokkinga & Desmet's typology.

The first phase is called *Initiate*. In this phase, there are two emotions that all women experience. These emotions are (i) disappointment and (ii) fear. Disappointment is related to the blind trust they placed in the doctors. In the interviews, one woman said, *"The doctor told me: I work with these [implants], it is the best thing on the market at the moment, they are French, it is good, many women want it. That was the information he gave me then, and I trusted him"* (Woman 2, 2021). While the fear was related to the implications of having the implants, as one of the states, *"(...) at all times it was like being in a horror movie"* (Woman 13, 2021).

The second phase is *Encountering*. It is the moment of finding the claim and during which the decision-making process of whether or not to become a plaintiff occurs. In this phase, there are three emotions that women may experience. The emotions are (i) hope, (ii) distrust, and (iii) empowerment. Hope is related to some women indicating that it gives them satisfaction to find that someone (a law firm) is on their side and that something is being done, especially after they have endured public or family members' scorn. *"We have people who represent us and are serious people"* (Woman 14, 2021). Mistrust is related to the fact that women think that if the doctor who treated them has already failed them, anyone else in that context can deceive them again. As one of the women expressed, *"(...) [A]fter applying online and then thinking my God, maybe I have been... I am still afraid that I have been robbed."*



(Woman 5, 2021). Empowerment is related to the feeling of being sure they have the right to sue since what happened to them was unjust. As one of the women recounts, *"Some very critical people are like it is their decision, so they suffer the consequences. However, the counterargument is that you made an informed decision, which is not the decision I made to have an inferior product."* (Woman 1, 2021).

The third phase is the *Transit*, where women perform the actions that allow them to sue and experience the waiting time after being represented. In this phase, there are three emotions that women may experience. The emotions are (i) frustration, (ii) loneliness, and (iii) despair. Frustration is related to difficulty finding the evidence needed to start the case. More specifically, those related to the identification cards for the implants, as one of the women says, *"I was not getting much response from my surgeon to have the proof about the implants and the documentation to upload"* (Woman 12, 2021). Loneliness is related to the fact that they feel alone and are looking for support and to be part of a community. As mentioned by one of the women, *"I want to (...) know what other people have gone through, make connections."* (Woman 15, 2021). Despair is related to the long and slow process. Once she can acquire all the evidence, years can go by without receiving information about the legal process. Some women in the first group of claimants have already been waiting for ten years. One woman says, *"I have made other claims. I know that it is a whole process, I know that you have to wait a long time, I know it is hard"* (Woman 12, 2021).

The last phase is the *Longing* phase, which addresses why women engage in the legal process to achieve a positive outcome. In this phase, there are four emotions that women may experience. The emotions are (i) determination, (ii) gratitude, (iii) affection, and (iv) relief. Determination is related to obtaining justice and legitimacy. A favorable judgment implies that women's judgments are not to blame for choosing these implants and that they deserve to be compensated in the case of PIP implants. As mentioned by one of the women, *"(...) [W]e should get justice and benefits for what they have done to us. It was not our fault."* (Woman 2, 2021). Gratitude is related to the possibility of receiving economic compensation. With a favorable judgment, the affected women would recover their money and could make up for decisions they made in the past. As one of the women recounts how she spent her daughter's sweet 16's party money, *"I went to the consultation, and he told me that I had to get them out. (...) He told me how I could continue with them. So with that money that was for my daughter, I spent it on the implants"* (Woman 15, 2021).



Affection relates to feeling part of something and belonging to a support group. In the case of PIP, there are no significant and active support groups for the victims, at least in Latin America. However, it makes them feel united, as one of the women mentions, "*A feeling of a united front*" (Woman 3, 2021). Relief is related to performing the removal or replacement of implants. One out of 4 women has been unable to remove the implants from their bodies, mainly for economic reasons. This situation leads them to experience high anxiety and hypervigilance about new symptoms. In addition, they avoid activities such as jogging or sleeping on their stomachs, fearing that this may affect their health. In short, for them, everyday life and routine become a risk. One recounts, "*As soon as I went out, it played constantly in our mind until we could replace them*" (Woman 6, 2021).

Des (·) Teta: An Emotional Service based on healing rituals

The waiting and passive period of the legal process discussed above presents an opportunity to accompany women from different perspectives fostering emotional healing. As mentioned, affected women go through different stages of grief and experience various emotions. Nevertheless, their journey should always end in acceptance. However, Kessler's sixth stage, creating new meaning, translated to the closure and healing women seek in the end - is presented as an opportunity to intervene in this waiting. Salgado (2021) defines designing for waiting as a space where designers can intervene differently; instead of seeing it as an obstacle, it could be seen as an opportunity to enrich relations and experiences. Viladás (2010) identifies this waiting period as a critical point, a weak touch point that is not currently part of the service provided by law firms - or anyone. In addition, it can contribute to a good user experience for women through the peak-end theory, which explains that users generate memories of the "moment of maximum affective intensity," understood as that moment that defines the personal capacity necessary to face an experience again (Fredrickson, 2000, p. 590). For most women, the experience with PIP implants has a high affectation peak, which means they need more resources to cope with these issues. When they start with the legal process, they must relive many of these moments, making the process very intense and with long waiting periods. This waiting is where *Des (·) Teta* begins to make sense for women facing this process.

One of the milestones for these women during the waiting process is the explantation or implant removal. Both women who have and have not undergone surgery refer to this moment when they can finally get rid of the defective implants. Women who



undergo explantation keep their breast implants as proof. They keep them under their bed or in the wardrobe to remind them of the evil they caused them and what they had to endure. However, we learn that the capsule exists in the explantation process.

Plastic and aesthetic surgeon Dr. Raimundo Cantero (2019) explains that a foreign object in the body creates a fibrous tissue surrounding it. This process is known as encapsulation. This capsule works as a protection or barrier for the body (Figure 4). As the capsules are in direct contact with the (toxic) breast implants, they should be removed. The membrane, however, cannot be kept as it is considered biological material. It must be sent to pathology to assess other potential risks when not immediately discarded.

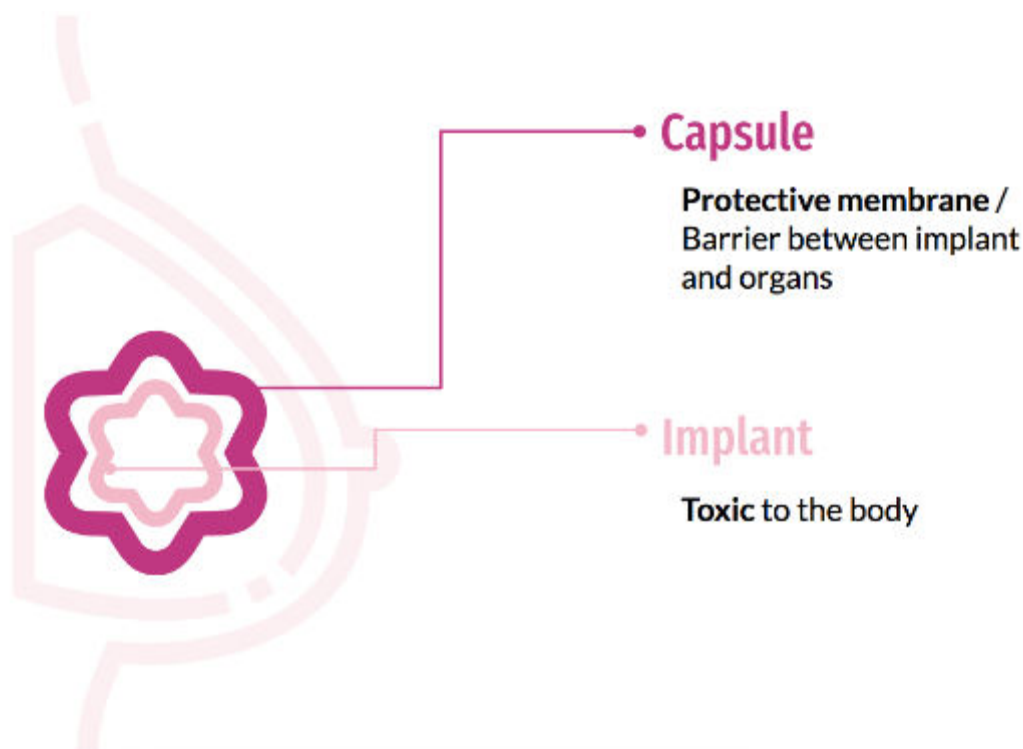


Figure 4. Explanatory diagram of the capsule and implant anatomy

As humans, we tend to imprint different events in our lives, for example, the tree of life impressions made with placentas after giving birth or the hand and foot stamps made on babies (Figure 5). However, this protective membrane the body creates as a barrier to the dangerous implant can leave a unique imprint, like a fingerprint. With this in mind, we devised creating a stamp with these capsules.





Figure 5. From left to right: placenta's stamp, newborn baby footprints, and breast capsule stamp.

The stamp aims to generate well-being by creating a symbol or positive anchor. It establishes a way to fill an emotional void and has a symbolic value that can contribute to women's well-being and emotional repair. The stamp is framed and given to the woman. This delivery acts as a hallmark of quality that the surgery went well, that they no longer have the toxic gel inside them, and that they can begin to give back to other areas of life the attention they have given to their health. Each stamp includes the name and date of removal on the back. This information speaks to what some women who have been explanted know as the rebirth. The stamp immortalizes the imprint of the capsule; with it, the women struggle to get rid of breast implants. Figure 6 shows stamps made from prototyped and actual capsules of explanted women. Doctors were crucial since they allowed the design team to see the tangible outcome when stamping an actual capsule.





Figure 6. Capsule Stamps. Frame from *Des (·) Teta's* Video created by the Design and Architecture Faculty at Universidad de Los Andes, Colombia (2022). Along with the stamp, a message is given to each woman. This message was recorded by women that have been part of this project. To hear the message in Spanish, go to this [link](#).

Des (·) Teta was created by talking and empathizing with women with PIP Implants. Most of them are part of a claim. This project was created in Colombia, but the interviewed women are all around the world, thus making the opportunity universal: The service aims to take advantage of the waiting time during the legal process to offer the possibility of having an explantation surgery that creates a symbolic meaning from the extracted capsule. In the project, the stages of grief and the women's experiences are used to define the phases of the experience and the emotions experienced. The legal process presents an opportunity to offer a service of medical and emotional actions that allow women to heal both physically and emotionally and bring closure to their process during the waiting phase. Figure 7 shows the blueprint of the service where the legal, medical, and emotional actions intersect, and the points of contact that end in creating the stamp are defined. One of the main objectives of this service is to strengthen the community of affected women.

Any woman who has undergone explantation surgery can become a sponsor to help other women heal. When a woman undergoes surgery, a godmother serves as a guide in the process. This godmother is another woman who is part of the



community. She accompanies the woman during the surgery and receives and stamps the capsules. The moment of stamping is part of the healing ritual for them and other women. In addition to the legal process already underway that seeks compensation and recognition, *Des (·) Teta* aims to establish a psychological healing collective where it is possible to resignify and reach the final phase of mourning (finding meaning).

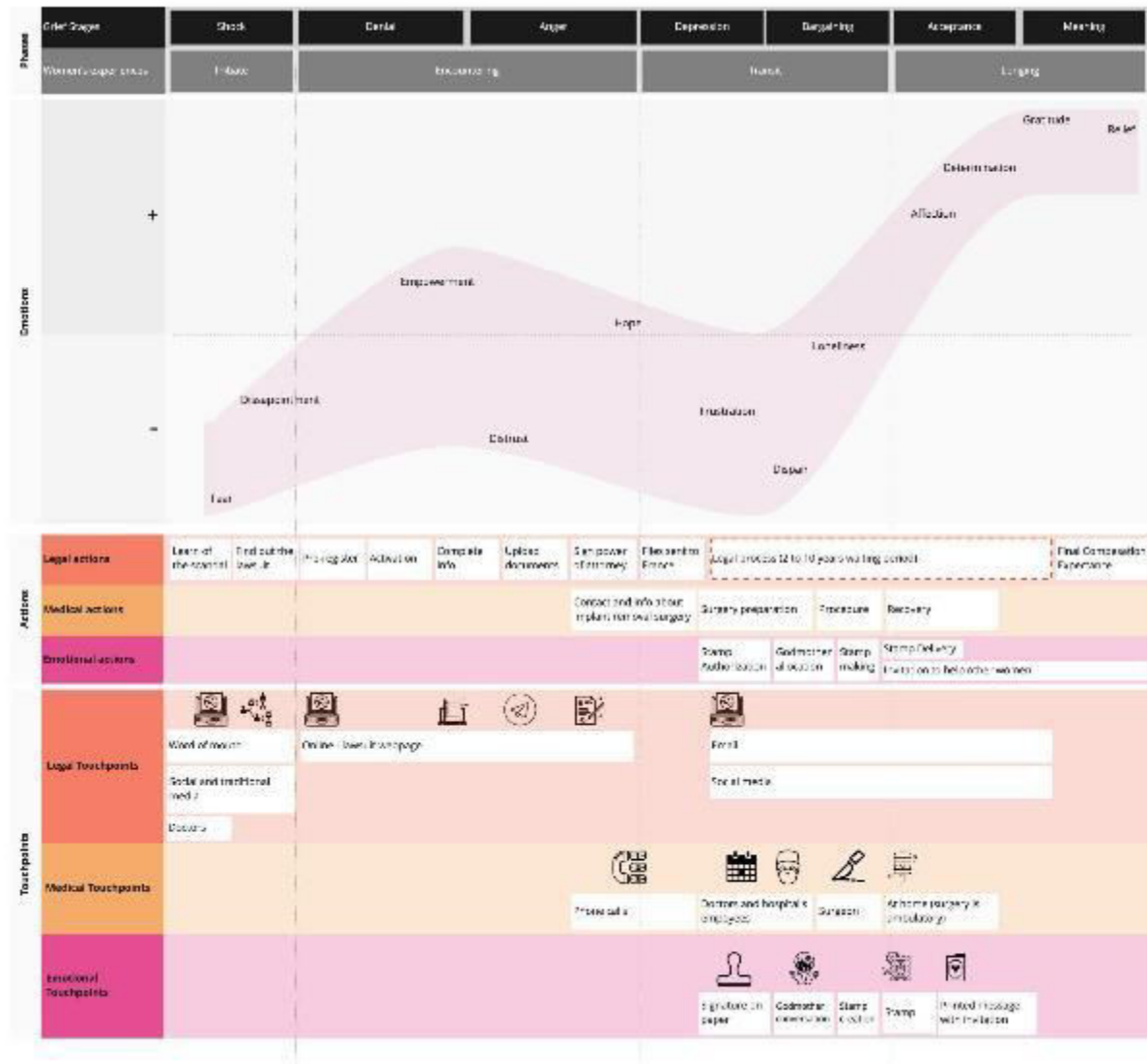


Figure 7. *Des (·) Teta* service design blueprint showing legal, medical, and emotional actions and touchpoints.



Stamping meaning: testing with women

To test the prototypes, women who had already undergone explantation were contacted. Some had PIP implants, and others had different brands, but all were part of the Facebook group "Affected by Breast Implant Disease" (Asian Syndrome). When suffering from this disease, women experience many symptoms, including memory loss, hair loss, stomach upset, irritable bowel syndrome, myalgia, arthralgia, myositis, fever, xerostomia, and neurological symptoms (Shoenfeld & Agmon-Levin, 2011). They are referred from one doctor to another. Tests come back standard, and they begin to be labeled as crazy. However, when the implants are removed, they experience a fast and definitive improvement in their symptoms.

When the prototypes were shown to these women, their reactions were positive. Within their reactions, we identified four essential elements of the stamp's role in enriching the healing ritual experience and the basis of emotional service. The elements are the aesthetic aspect of the stamp, the stamp as an emotional anchor, the stamp as closure, and the stamp as positive recognition of the capsule. The stamp was appreciated as an aesthetic object. A woman mentioned that it looked nice, *"it does not look like an implant or unpleasant. It looks beautiful"* (Woman 8, 2022). Some even talked about making it museum-worthy *"Wow, I think it is spectacular, divine. Like a giant museum. I think the idea is remarkable. It seems like a reminder that the body has been looking for a long time to be well"*. (Woman 8, 2022).

The stamp was understood as an emotional anchor. For these women, the stamp evokes the idea that their bodies could care for them. Some mentioned that they would like to hang it in their homes to remember that the suffering is over. Some women said, *"I would frame it in my room and everything, to have it there at all times and see it"* (Woman 8, 2022) or *"I would hang it here on a wall or my bedside table (...) It is your birth print. (...) I would save it, take a picture, and put it on my Whatsapp profile"* (Woman 9, 2022). Desirability, as a critical aspect of service design (Brown & Katz, 2009), is a valuable contribution from *Des (·) Teta* to the affected women.

The stamp was perceived as a point of closure and a milestone beginning. One woman mentioned, *"Psychologically, it has much value. If you give me that certificate, you are showing me (...) I will become aware of what I had there; now, I do not have it anymore."* (Woman 11, 2022). Another woman ties this closure with an emotional connection: *"Wow. I think it is incredible and impressive. Like everything, I think it marks the end of one stage and the beginning of another. It is very telling. As soon as I saw it, I was moved"* (Woman 4, 2022). Another woman compares it to a



reward *"For me, it is great. It is like keeping the medal from a race after everything you have been through, the months of training, and the things that happen in life that you have to overcome to be able to continue training."* This closure was also compared to a rebirth *"in the Whatsapp group we say: today I am five months old, today I am three months old, and we count like this. It is like a rebirth, and we congratulate each other each month. I saw it, and I said, it is our birth."* (Woman 9, 2022).

The stamp was positive evidence that their bodies were always fighting against toxic breast implants. In most cases, women keep the implants; however, these implants carry a negative connotation. A woman said, *"I had thought about keeping the implants; I saw the girls keep them and post pictures. However, I do not know if I want them because I would not know what to do with them. Nevertheless, this is a real image of something there (...). This (capsule) is what your body did for you, not that filthy silicone. This (capsule) is the protective shield the body wanted to put up."* (Woman 4, 2022). This positive reinforcement is reflected when women identify the capsule as their heroes. As Woman 9 points out: *"In the story, the capsule is the counterpart because it is the one that comes to stop everything. It comes to try to hold with one hand all that wall"* (2022) or Woman 11: *"It is incredible what I did to my body. Incredibly, I have been able to do this to my body. I was putting things in it, and (the capsule) defended myself all the time"* (2022).

At the validations, the possibility was given to propose to the women to make their own stamp, to which one of them excitedly replied, *"Let us do it, I would love to. (...) I think it would be great, tremendous"* (Woman 8, 2022). Another one also stated that she would like to have their stamps even though she already had her implants removed, *"I think it is a great idea. If you do it, I want it. Too bad I do not have my capsules. I keep my prostheses in my cupboard. Because I read that the ideal is to keep it for two years for whatever happens. You have them as a test. I often look at them, and it brings me down to earth. I look at them, and I say, here I am"*. (Woman 9, 2022). She also mentioned the idea of doing workshops to co-create symbolic stamps for women who have already been explanted.

Results and next steps

The *Des (·) Teta's* stamp contributes beyond physical and mental health and economic compensation. It is a service with symbolic value that seeks to contribute to emotional well-being. It also creates meaning as a final stage of the grieving process, allowing the affected women to move forward with their lives and put the implant nightmare side. For there to be symbolic reparation, there must be physical



reparation. That is why the service involved creating alliances with key stakeholders such as law firms, plastic surgery clinics, and hotels so that women that have not taken the implants out of their bodies can access the surgery at a better price and in a safe hospital with the best care.

As the explanted woman receives one of the stamps, the woman can donate the other to *Des (·) Teta*. These stamps will be saved, and when a significant number are collected, a museum exhibition based on the explanation images will be created to help raise awareness of both the problem of breast implants and the work of *Des (·) Teta*. The funds raised from the exhibition will be donated to more women who wish to have breast implant explantation but cannot afford to pay for it.

Figure 8 shows the steps to follow in the 2x2 matrix, considering the women's reactions to the stamps and the referents studied. In the Catharchical Exploration quadrant, it is suggested that the women take the stamps home. In the Courageous Manifestation quadrant, museum-type exhibitions of the stamps were proposed. In the Raising a Community quadrant, co-creation workshops, such as @tetamatters style ceramic workshops, are proposed to create symbolic elements. In the Strengthening ties quadrant, the profile of the godmothers as guides for other women who enter the process is proposed.

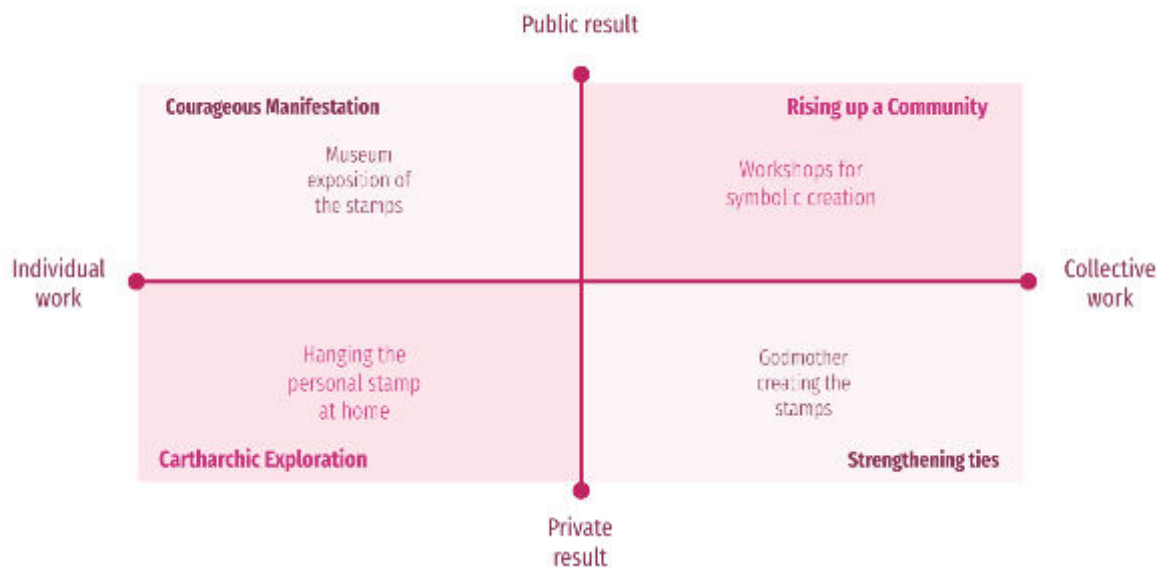


Figure 8. Possible outcomes of *Des (·) Teta*'s projects identified in the 2x2 matrix.



Reflections and conclusions

Throughout this project, we have seen legal and health services for women affected by PIP implants exist. However, accessing these services takes effort and money for many of these women. First, although to be represented by a law firm in a situation like this, they do not have to pay anything but to request an explanation, they do have to pay. In some cases, there are agreements between hospitals and law firms to give some discounts to perform the explantation procedure and thus have better evidence to mount the case. However, for most women, it is not just a financial compensation or a health issue but an event that marks them for life.

Des (·) Teta is an emotional support service for women represented by law firms who collectively want to claim damages caused by PIP implants. However, the success of this service depends mainly on the results and processes of the legal and health services. In that order of ideas, and taking as a reference Patrick Jordan's pyramid (2000) that has three components: functionality, usability, and emotionality, the basis of this service (functionality) is that the class action has a favorable outcome for women. The next level (usability) is that there are mechanisms within the health system that allow them to undergo the explantation. In addition to being a good health practice, we know in advance that it becomes evidence for the process. However, many women cannot access it because of the high costs and because such procedures are usually not covered by insurance. Moreover, the last level (emotionality) contemplates symbolic healing, represented by the seal and that ideal of a new beginning.

Like any service that seeks to solve a problem or improve a situation, essential tools were used to understand, frame, define, design, and implement the service. However, as the objective was not to solve something but to help heal, we translated the three levels as economic compensation (functionality), physical healing (usability), and symbolic healing (emotionality). All three are linked and are necessary to function.

When *Des (·) Teta* was proposed for the Association of affected women, the aim was to enhance the possibilities of offering ways to enable these three levels of healing. Although the women had legal accompaniment, their physical and mental health was on the margins. Therefore, to ensure physical healing, agreements were sought with hospitals that performed the explantations with two purposes: to have the implants as proof and to use the capsule (tissue produced by the body to cover the implant) to generate a common and unique symbol that would unite the women.



Arriving at the symbolic element was challenging and required understanding the physiological explanation process. Additionally, this process has a negative connotation for women, and we found great potential and interest in adding meaning to these unwanted experiences.

Similar to Stickdorn et al.'s (2018) idea of offering a common language to people, *Des (·) Teta* offers the option of creating a visual symbol through the protective tissues of each of the women. This symbol allows them to heal their process, to recognize themselves as part of a collective, and to speak in the same language about the experiences of grief they have had to go through during the last years. *Des (·) Teta*, in itself, proposes a service of a common healing language.

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Woman 11, virtual interview transcription, May 2022.

Woman 12, virtual interview transcription, November 2021.

Woman 13, virtual interview transcription, November 2021.

Woman 14, virtual interview transcription, November 2021.

Woman 15, virtual interview transcription, November 2021.

