“I Don’t Like the Way I Look”: WHAT CAN BURN TEAMS DO TO PROMOTE POSITIVE BODY IMAGE IN PATIENTS WITH BURNS?

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Overview

• CAR
• Psychological challenges of visible burn scarring
• Societal context
• Individual differences in adjustment
• What can burn team members do to promote positive body image & resilience?
Where is UWE?
The Centre for Appearance Research (CAR): Established 1994

- 28 psychologists; professors, academic staff, researchers, PhD students
- World’s largest research group in this field
- Internationally renowned for excellence in body image & appearance research
Applied Research: Collaborative working.....

- Universities
- Charities
- Health professionals
- Schools
- Industry
- Media
- Policy makers
- Governments
PSYCHOLOGICAL CHALLENGES OF BURN SCARRING

• Range of challenges can result from mild – severe burns
• Innovations in burn care have reduced mortality rates
  – More surviving with extensive scarring
• Appearance often reported to be the worst aspect post-burn (Griffiths et al 2017)
NEGATIVE IMPACTS ON BODY IMAGE COMMON

Contributory Factors:

• Pain
• Loss of function (NVC; digits; limbs)
• Changes in skin sensation
• Impact of treatment
  – Emollients; massage (up close & personal)
  – Pressure garments
• Scarring
  – Repeat surgery
  – Slow process of scar maturation
NEGATIVE IMPACTS

• Self perceptions (self esteem; body image)
  – Need to build new sense of self/identity; often at odds with previous identity
    • The mirror moment; the inability to recognise oneself is a profound psychological disruption
    • Prevailing appearance norms & ideals
  – May experience a range of negative emotions about themselves (disgust; shame…..)
“I just wanted to die. I couldn’t stand looking at myself, I looked like a Frankenstein. I couldn’t look into a mirror; I was having nightmares about it all” (Male, adult)

“Like…. Appearance is the biggest challenge ‘cause I used to wear shorts and skirts all the time but I've kind of stopped that now” (Female, adolescent)

Griffiths et al, 2017
BODY IMAGE & SOCIAL FUNCTIONING

• ‘Endless’ questions from others; lack of anonymity (MacGregor, 1962; Partridge, 2006)

• Fear of negative reactions from others
  – Self consciousness
  – Humiliation; shame
  – Stigma

• How people (are perceived to) respond can have a big impact on self perceptions
“I felt.....like... self-disgust because when they (other people) heaved.. actually physically heaved when they saw my arm, I ought to hide away and I felt like a leper” (C, adult)

“...people in my school, they said like if you didn’t have your burn you would be really pretty..” (C, adolescent)

Griffiths et al, 2017
RELATIONSHIPS

• First encounters challenging
  – Social skills crucial (NVC may be affected)

• Social avoidance can be a barrier to friendship & relationship formation

• Intimate relationships (Sharratt, 2017)
  – Visibility & The Big Reveal

• Time is not a great healer for all….Social anxiety persists many years post burn (Phillips, 2005)
ADJUSTMENT IS MULTIFACTORIAL

Social determinants/cultural specifics

Generic psychosocial constructs

Cleft specific issues

LIFESPAN
SOCIAL CONTEXT

- Unprecedented levels of attention on ‘looks’
- Ideals more extreme
- Appearance dissatisfaction ‘normative’
- Majority of adolescents and adults have significant appearance concerns
INFLUENCE OF SOCIAL CONTEXT STARTS YOUNG…Childhood (2 years +)
She started on her make-up...

She sat under a lamp for 20 minutes.

Eyeshadow over Natalie’s eyelids, with a darker silver colour on the outer edges.

Foundation over the whole of Abbie’s face...

Red and pink eyeshadow over Abbie’s eyelids, with a touch of plum on the outer edges.

Once Abbie’s make-up was completed.

Karen took sections of Abbie’s hair...

“His hair’s really cool – mega spiky – and I LOVE my make-up! I’ve always wanted a top like this cos it’s so...”
Parents & Family......

• Modelling their own appearance dissatisfaction and internalised beauty ideals
• Pressure to look a certain way
  – (e.g., wear certain clothes, lose weight, have surgery, wear makeup, cover up their visible difference)
• Body Talk; Appearance-related teasing
Adolescence & Adulthood
SOCIAL CONTEXT

• Peers (appearance talk; teasing; bullying)
• Family
• Teachers; health care providers
• Media
  • Broadcast media (TV; films)
  • Advertising & marketing
  • Social media
Boys' body worries exposed!

It's not just us girls who worry about our bodies. Boys get the bod blues too. Turn over to find out what bugs these boys about their bits...

Stefan, 17
Loves pizza and playing the guitar

Tom, 17
Likes football and parties

Dan, 19
Sporty and loves reading
Looking at video gaming magazines makes boys want to get more muscles

Source: Prof. Kristen Harrison, University of Illinois study, 181 boys, average age 8.8 (2007)
THINK SMALL.
Jane Jones
Born on 15 March 1992
Add your information
Edit Profile

Education and work
Share your experiences

Wall
Info
Photos
Friends

Find friends
Best friends
Real Picture

ID card

Facebook Picture
Social Media

Positive correlation between social media use &

- Appearance dissatisfaction (Fardouly & Vantarian, 2015)
- Lowered mood (Fardouly et al 2015); appearance discrepancies (Fardouly et al 2015)
- Repeated comparisons between appearance of self and others (Vantarian & Day, 2013)
Positives of social media?

- Creating own content…. 
- More diversity? 
- #diversity #loveyourbody #everybodyisagoodbody #bodypositivity #bopo

- #alopecia (235,000 posts) 
- #ichthyosis (1,702 posts) 
- #cleftlip (34, 583) #cleftstrong (42,123)
siann91x #selfie #work #barmaid #girl #ombrehair #mallboob #kyliecosmetics #glasses #beachwaves #type1diabetes #diabadas #clefthouse #strongwoman #pout #typeonediabetic #hastings #staypositive #floral #playsuit #studentnurse #clefflip
iz_0407 You beaut❤️❤️

carlyfindlay I love the details on this top. Pleats and cute prints.
feelingostomistic Hope you're enjoying your little escape X

snowballdall Cute shirt
faigele I love that shirt!
melaninmagiczone Love everything about this pic 💜💜
devorevintage Love this blouse :) you are beautiful X

181 likes
MARCH 18
Add a comment...
What are the messages in our social context telling us?

- ‘Norms’ more extreme & unachievable
- Diversity in appearance less acceptable
- Should strive to achieve ideals
- ‘Work’ is expected; plastic surgery the holy grail for many

Beauty ‘myths’
- Happiness
- Relationship success
- Social success
- Occupational success
Prevalence of Body Image Distress?

Responses range from profound despair to positive restructuring of self perceptions

• Estimates vary....>70% have reported significant levels of social anxiety & social avoidance (Clarke et al, 2014)
Individual Differences…..

Body Image is **NOT** strongly predicted by:

- Age
- Extent or severity of disfigurement
- Whether or not they are currently receiving hospital treatment
- Visibility of main area of concern

- Females more negatively affected

(Rumsey et al 2012; Wisely & Gaskill, 2012)
What are the key psychological processes & outcomes?

12-17 years

18+ years

Psychosocial

Appearance

Cognitive

Other
RESILIENCE (IN ADULTHOOD)

- Disposition (Optimism; sociability)
- Social skill
- Self esteem built on factors other than appearance
- A lower reliance on the opinions of others for self esteem
Outlook on life

this glass is now half-empty.
SELF ESTEEM

- Appearance
- Fun to be with
- Good social skills
- Academic
- Sports
- Other
Pre-existing(nature) or taught (nurture)?

- Amenable to intervention (CBT; SST)
- Post traumatic growth…..burn can trigger re-evaluation of self perceptions; self definition in those who adjust positively (Baillie et al 2014)
Influencing Change?
Influencing Change....Challenging!

Multidisciplinary care crucial...
- Burn team is trusted
- Regular contact with patient & family
- Key source of information & support

Psychological care is responsibility of ALL team members
(with varying levels of skill)
TRAINING TO IMPROVE UNDERSTANDING & SKILLS

ROUTINE DATA COLLECTION

OFFER SUPPORT & APPROPRIATE REFERRAL

PROVIDE PATIENT CENTRED CARE

PROMOTE RESILIENCE... NOT THE BEAUTY MYTHS
ROUTINE DATA COLLECTION

Improve current levels of understanding

• Achieve consensus about a Core Outcome Set (COS)
• Regular follow up
• Audit & research
EDUCATION & TRAINING

1. Improve your understanding of
   • Social and individual factors influencing body image and resilience
   • Key pressure points; how to identify signs and symptoms of risk

2. Improve your communication skills
IMPLEMENT PATIENT CENTRED CARE

1. Engage in regular conversations with patients
   • Ask key questions
   • Foster an ethos of care in which body image & social functioning can be discussed at all stages of treatment (& beyond) without the patient feeling they are failing to cope, or feeling stigmatized
2. Adopt a normalising rather than a pathologising approach

- Maintain a focus on the patient as a normal person, rather than someone defined by their condition
- E.g. Refer to the ‘patient with a burn’ rather than ‘the burn patient’
"It's remarkable what modern surgery can do..."
3. Involve patients in treatment decision making

- They may not share your enthusiasm for multiple treatments
- Don’t decide for them; give them permission to get off the treatment treadmill
- Ensure you fully understand the patient’s perspective physical, psychological & social expectations of outcome
  - Involve a psychologist (refer if necessary)
  - “I just want to look normal”. What do they mean?
Understanding motivations for treatment & expectations of outcome

**Looking** normal: “I just want to look like I used to”
“I want to blend in with the crowd

**Feeling** good in myself: wellbeing:
- Self confident at work; school
- Relaxed in social settings

**Behaving** as normal: doing everything my friends and colleagues can

“I just want to be normal”
PATIENT CENTRED CARE

4. Implement routine measurement of patient centred outcomes (PROMS)
   – At key stages of treatment
   – At key developmental stages
   – At key points of transition and/or social change
Concerns about scarring:
“How bothered are you about how your wounds/ scars look overall”

Avoidance behaviours:
“I avoid certain situations or activities (e.g. swimming) because of my burn wounds/ scars”

Social skills:
“I’m ok talking to new people about my burn wounds or scars”

Romantic relationships:
“I feel ok when a boy/girl friend sees my burn scars”
PROVIDE SUPPORT & ADVICE

Promote resilience

• Positive outlook on life (don’t blame it all on the burn)
  – Aesthetics and function are not the (only) way to have a good quality of life

• Focus on positive attributes rather than aesthetic or functional ‘deficits
  – *Unique appearance; special smile; your experience helps re success in overcoming challenges*

• Bolster self esteem
  – Focus on the patient’s strengths as well as weaknesses/deficits
  – Encourage parents/family to do the same
Help patient to develop a toolbox of interventions & strategies

- Prepares patients for a wider range of situations or challenges
- Avoids over-reliance on any one strategy

- Self esteem
- Social skills training
- Information
- Camouflage
- Peer support
WHAT CAN BURN TEAMS DO?

0: General population & societal campaigns

1: Targeted campaigns including whole school interventions, patient condition-specific leaflets, health professional training,

2: Stand alone interventions with no professional input and self-help manuals

3: Self-administered intervention facilitated by a trained professional (e.g. online)

4: Counselling / therapy from a specialist

Complex specialist-led therapy
DEVELOP & USE APPROPRIATE REFERRAL PATHWAYS

• To authoritative advice
  – Changing Faces
  – Dove Self Esteem materials

• Online interventions
  – Face It; YPFaceIt

• Referral routes for specialist intervention
  (Ideally …..multidisciplinary care offered routinely at all levels…..)
School Programmes

- Media literacy skills
- Appearance-related teasing
- Promote positive attitudes towards diversity in appearance
- Challenge appearance ideals
Free Being Me is a program designed to build body confidence and self-esteem for young people. It is an innovative and non-formal education program for 7 to 14 year olds. It is based on the latest research that provides ways to increase young people’s body confidence through fun, learning activities.

This program is being rolled out across Australia now!

For more information please contact your local State team to find out more! Resources are available through your local Guide Retail Store or online via www.girlguides.org.au.

www.free-being-me.com selfesteem.dove.com
LEVEL 2
Body Image Interventions

GROWING IN CONFIDENCE

Uniquely Me
A parent's guide to building girls' body confidence
Level 3: Online interventions

Face IT

YP Face IT

www.faceitonline.org.uk

http://www.ypfaceit.co.uk
DON’T BE PART OF THE PROBLEM: AVOID FUELLING THE BEAUTY MYTHS

• Messages about beauty are everywhere; plastic surgeons are ‘miracle workers’; ensure expectations of aesthetic gains are realistic
• Avoid an excessive focus on achieving the best possible aesthetic outcomes (& undue pressure for multiple procedures)
• Cut out ‘appearance talk’ in clinic
  o Use factual descriptors (after surgery your scars will be flatter) rather than value judgements (better looking);
Bust the Beauty Myths…..

• Educate yourselves & your patients/families about
  • How first impressions, friendships & relationships work
  • What makes people happy & psychologically resilient
• Don’t over-promise the likely psychological gains from treatment (more self confidence; more positive mood; changes in the behaviour of others) – advertisers, media & celebrities will do this for you - focus on the physical gains
Conclusions

• Significant levels of appearance concern & negative body image in patients with burns – big component of adjustment

• Backdrop of increasing focus on appearance in society

• Appropriate support and advice often lacking

• Positive adjustment is possible

• All team members have a part to play
Centre for Appearance Research

Appearance Matters 8
12–14 June 2018, Bath, United Kingdom
www.uwe.ac.uk/appearancematters
The Centre for Appearance Research presents...

Appearance Matters: The Podcast!

Investigating everything related to the psychology of how we look.

Join our listeners from around the globe to hear:
- The latest research in appearance psychology.
- Features with leading experts in the field.
- Perspectives from clinicians, charities and organisations, and individuals affected by appearance-related concerns.
- Top tips for students and early career researchers.
Resources

Education & Training:
nichola.rumsey@uwe.ac.uk
http://www1.uwe.ac.uk/hls/research/appearanceresearch.asp

www.facevalue.cc

Information & support materials:
www.changingfaces.org.uk
www.ihem.no (for HCPs/parents - craniofacial care)

Online interventions:
heidi2.williamson@uwe.ac.uk