SELF-ACCEPTANCE THROUGH A CHANGE OF PERSPECTIVE IN PERSONS WHO HAVE GONE THROUGH FACIAL BURN DISFIGUREMENT

[1]Crysta Mae Dixie D. Bacusmo, [2]Chaira Gift G. Casinillo,
[3]Stephanie Marie Z. Paglinawan, [4]Angela Marie F. Tan, [5]Johnny J. Yao Jr.

[1, 2, 3,4,5] Velez College – College of Nursing, Cebu City, Philippines

Abstract: **This study is about the process in which an individual has to go through when encountering a facial burn disfigurement. A Constructivist Grounded theory was used in knowing and understanding the process undergone by these persons. A total number of ten persons who have gone through facial burn disfigurement were interviewed. Data analysis of data gathered emerged a theory, the Self-Acceptance through a Change of Perspective with the first category "Adjusting to the New Me" which explains how they reacted initially towards their new facial appearance. The second category "Adjusting to How Society Perceives Me" explains onto how the informants adjusted to the comments of the society and the general norms of society in their new appearance. The last category "Moving Forward" entails the process wherein our informants continue to become optimistic of the change of their appearance. The researchers have found out that the informants had to go through a process of acceptance by a change of perspective. Regardless of the fact whether or not they were self-conscious before, they all had an unpleasant reaction upon initially seeing their face. They looked at their situation in a different angle and saw it as a God's plan which resulted to accept their facial appearances.**

Keywords: **Kathy Charmaz, constructivist approach, facial burn disfigurement, grounded theory.**

I. INTRODUCTION

Burn injury is an unforeseen event that constitutes a physical as well as a psychological trauma for the person affected [1]. Body image esteem or satisfaction relates to perceptions about one's physical appearance and the degree to which a person is satisfied with his/her appearance [2]. The researchers aim to identify and further understand the process of how a person would be able to cope up with a phenomenon caused by burns which would result into physical disfigurement. The researchers have identified that there hasn't been much research about burn disfigurement specifically in the Philippines. The researchers have also identified that most studies regarding this topic are mostly quantitative studies. If ever our informants have fully accepted their new appearance, not only will we look into the aspect and experiences but also on the process of how the informants coped up with the disfigurement. This study is done in hopes of promoting awareness towards the society on how burn victims would be able to cope up with their physical differences because of a burn. The researchers would like to be advocates for these individuals. The study was conducted in Cebu province in the preferred place of the informants or in their specific houses.

Introduction: Methods: Results: **Discussion:** *Keywords*

II. THE STUDY

A. Aim

This study aimed to develop a substantial theory based on the processes and experiences of persons who have gone through facial burn disfigurement in Cebu province.

B. Methodology

The type of qualitative research that is applied is grounded theory. Grounded theory enables an individual to seek out and conceptualize the latent social patterns and structures of the areas of interest through the process of constant comparison [3]. The constructivist approach by Kathy Charmaz was utilized by the researchers. A constructivist approach places priority on the phenomena of study and sees both data and analysis as created from shared experiences and relationships with participants [4].

C. Informants

Inclusion criteria includes: persons with facial burn disfigurement for at least 4 months after the incident; healing of the burn usually takes the longer time of 4–5 weeks and treatment of the burn is completed within 3 weeks [5], the researchers gave an allowance of 2 months for the informant to cope up with the burn . The informant must also be at least 18 years of age, may he or she be single or married, have a self- perceived disfigurement, and those who scored 0-5 in the Patient Health Questionnaire (PHQ-9) were also included in the study. The researchers utilized the said depression scale since this was easy to administer and was uncomplicated. Exclusion criteria includes: persons who also suffered depression after the accident, and individuals with burns that have affected their ability to see, hear, or speak.

D. Instrument

The instruments that were used were the researchers themselves. A semi-structured interview guide was utilized by the researchers which they constructed together. Semi-structured interviews consist of several key questions that help to define the areas to be explored, but also allowed the interviewer or interviewee to diverge in order to pursue an idea or response in more detail. Also allows for the discovery or elaboration of information that is important to participants but may not have previously been thought of as pertinent by the research team [6]. The researchers made use of field notes for memo writing to be able to take note of certain behaviours, events, and activities throughout the interview. A voice recorder was utilized to record down the whole conversation.

E. Ethical Considerations

The researchers respected the authority of the informants by asking permission for them to join the study and that they may withdraw anytime during the study if ever they feel uncomfortable. The researchers maintained privacy and confidentiality of the informants by giving them pen names and by keeping the recordings in a safe container with lock. The researchers ensured that the informants received the incentives promised by the researchers which served as a token of appreciation.

F. Data Analysis

The researchers started with Initial coding thru word-per-word or line-per-line coding in which the researchers assigned a word or phrase which best fit to describe the line. Next is the Focused coding in which the researchers picked the significant data as a result from the initial coding. Then next is the Axial coding in which we linked the subcategories to the categories. Then lastly is the Theoretical coding in which the researchers linked all the categories as result they generated a substantial theory.

III.   RESULTS

Category 1:

"Adjusting to the New Me". The first category will explain how each informant felt when they first saw themselves in the mirror for the first time. This will also tackle on how they adjusted to their new appearances. It was found upon the researchers that some of the informants' reactions could change their perceptions on seeing their new faces. Their reactions changed or stayed the same after seeing their new appearance. The moment that they're aware of how they look portrayed a sense of shock. After some time when they have integrated their feeling, they would either feel dislike and worry.

Subcategory 1: "Disliking one's own appearance"

Disliking one's face is considered as distasting or perceiving a negative view towards self. Disliking oneself is somehow due to a change of their appearance which made them not contented or uncomfortable with the sudden change.

From what Prima stated, *"It's nothing. It's okay. That's it. I'm not that particular with my face"*

Subcategory 2: "Worrying about how I will look in the future"

The informants felt worried after the seeing their new appearance since they show interest and importance of what will happen to their faces, will it heal or not.

As Jean stated, *"Of course, you'll feel worried because you'd question "will this still be healed?"*

Subcategory 3: "Taking my time to look at myself again"

Being self-conscious in the first place may have played a part, they took time in even looking at themselves in the mirror.

From what Kayla stated, *"it's true but it took me awhile, I didn't look at the mirror. It didn't look like this, but after some time I got used to it. But if I were given a chance , I would go back to it."*

Subcategory 4: "Finding and applying ways for treatment"

After the stage of self-contemplation and realizing that enhancement of their scars due to whatever burn, the informants went on to a process of finding ways in order for the scars to heal or to disappear.

As Perla stated, *"it will really go back, I did everything and searched anything that can help in recovering my face, whenever I read and see something, I buy those..I will really buy it"*.

Discussion:

Researchers reported that trauma experience from a burn injury and the subsequent hospitalizations were "life-changing events" that altered the participant's "perspective on life." [7]. Sustaining a severe burn, and in particular a facial burn, is a devastating and traumatizing injury. They also reported that a significant proportion of patients who sustained a severe burn were left to contend with noticeable scars throughout their lives. Furthermore, patients with a facial burn found becoming aware of, and seeing their altered appearance, both painful and distressing. Sustaining a severe burn, and in particular a facial burn, is a devastating and traumatizing injury.

Some of the most common reasons for medication non-adherence include: Cost of treatment (e.g. skipping insulin doses when money gets tight). They would want to have there illnesses cured but due to money constaints they are left with the decision of not doing anything about it. This may be the result of psycho-logical denial and a lack of investment in their facial appearance. Some have an extreme level of body image concern that significantly affects their quality of life [8].

The exact cause of worrying varies from person to person but can include such functions as experiences, stressful like events, are excessive criticisms [9]. Worrying can be maintained by some factors including but not limited to of perceptions and beliefs of others, information and data by their perspectives.

The face is often the seat of recognition for a human being and living with a change in the appearance of one's face as a result of injury, disease, burns or trauma is always a challenging task. Various medical, personal, social and psychological variables influence the process of adaptation and it is often difficult predict the course of adaptation in many cases [10].

In one study it showed that a larger scar size, living alone and aetiology of injury were significantly related to self-consciousness and anxiety levels, although gender, age, socio-economic group, location of scar, satisfaction with appearance, and number of scars were not. General self-consciousness gradually improved at 6 months but social self-consciousness and anxiety stayed the same. The presence of scars made them more aware and conscious of their self perceptions after the incident [11].

Category 2:

"Adjusting to How Society Perceives Me" Most of our informants have undergone a process of adjusting onto what the society's perception of them with their new appearance. Our Informants also felt embarrassed because of how society would look at them differently because of the accident. Most of the informants sought advices and help from their family and friends in regards to their new appearance like what corresponding treatment, encouragements for a boost in the self-esteem, and constant support which made them to stay optimistic 'til they have fully accepted the sudden changes of their appearance.

Subcategory 1: "Feeling Embarrassed"

Feeling embarrassed is defined as, not being confident and just feeling constant shame about your appearance. You don't feel comfortable in your own skin due to the changes of the incident.

As Lolit stated, *"my face looks really bad at that time and I feel embarrassed..the whole time I was just covering my face..when I'm at our store, I usually don't go outside..I am really embarrassed at that time, I always stay inside our house..if ever I go out, I cover my face except for my eyes..even though some part of my face are healed, I still cover my face."*

Subcategory 2: "Seeking and receiving help and support from family and peers"

Since our informants underwent a sudden incident which caused them to have an alteration in their appearance, they ought to seek mostly emotional and physical support which was really what the informants needed in adjusting to society.

Perla also stated, "My children will just say 'it's okay mom, it's only little'. But my son, he's very good in boosting my self-esteem. 'My mom is so beautiful!'"

Discussion:

Sometimes, the influence of other people's appraisals of ourselves on our self-concept may be so strong that we end up internalizing them. For example, we are often labelled in particular ways by others, perhaps informally in terms of our ethnic background, or more formally in terms of a physical or psychological diagnosis. The labelling bias occurs when we are labelled, and others' views and expectations of us are affected by that labelling [12].

A very important factor in recovery from any trauma is family support and culture. It is well known that the joint family system in India provides greater social support to the patient compared to the west where nuclear families prevail.

Facial trauma leads to disfigurement which also affects the social image of the patient. Patients may express unhappiness regarding facial appearance after facial trauma and this may often led to social withdrawal and isolation. They may feel inferior to others in social presentation and may often feel a stigma associated with facial disfigurement [13].

We are most likely to be embarrassed when we believe we have not lived up to what society asks of us or when we are on the receiving end of undesired attention [14]. The experience of embarrassment alerts you to your failure to behave according to certain social standards, which threaten the beliefs you hold concerning how others evaluate you as well as the ways in which you evaluate yourself [15]. Embarrassments usually result from accidental behaviours that lead you to feel negatively about yourself--even when you had no intention of violating a social standard [15].

Anything from a small blemish on the face to having a widespread skin disorder can lead to embarrassment, humiliation and other negative body-image experiences. Face preferences affect a diverse range of critical social outcomes, from mate choices and decisions about platonic relationships to hiring decisions and decisions about social exchange. These negative experiences, together with the influence of other considerations and society's expectations, can diminish self-esteem and self-confidence, increase self-consciousness and create a loss of sense-of-self and isolation [16].

Category 3:

"Moving Forward": A person who is moving forward looks at the silver lining and is hopeful and looks at the brighter side in a dark picture. Having a positive mindset about life and not giving up on trials and problems. Being in a situation like what our informants have undergone is not an easy process of coping. Some of our informant looks a brighter picture as a way of accepting the tragedy.

Subcategory 1: "Looking at a different angle"

Age and Family made each of our informants look at their injury in a different angle. Some of our informants stated that they have accepted their appearance because they are getting older and that they've already felt security towards their spouses, children, and their family in general. They started to look at a different angle in order for them to see what they have.

As "Perla" verbalized, *"what's important is that my family is okay. And then forget about the people. I am not thnking about them, just my family. My family is okay. And as time passed, they got used to it that i look like this."*

Subcategory 2: "Seeing and experiencing God's Plan"

Seeing and experiencing God's plan made our informants to be thankful with the experience they went through and that the Almighty gave them another chance to live despite of the disfigurement. It gave them strength and empowerment to go through with life with the change the acquired due to burn.

As Gregor stated, *"I was able to accept it because I just perceived it as God's experience to me."*

Discussion:

Older individuals frequently encounter experiences that may foster the use of acceptance because they are beyond individuals' control. Further theoretical support for the idea that age is associated with increased acceptance comes from the literature on wisdom. Wisdom has been defined as a knowledge system that governs the conduct and understanding of life [17].

The cultural attitude towards illness, recovery, the sick role, work and disability are other factors that would help or impede this process [18].

In some conducted researches, relation between depression and religion, is examined, it is indicated that in general, religious people have less depressive disorder or they have depressive symptom and their time of recovery are shorter [19]. Having God with them served as a better purpose and enhanced their outlook in life. With the presence of faith and religiousness, their overall perception of the incident was taken into a different angle and made them optimistic.

Victim of trauma may redirect the overwhelming emotions they experience toward other sources, such as friends or family members. This is one of the reasons why trauma is difficult for loved ones as well. It is hard to help someone who pushes you away, but understanding the emotional symptoms that come after a traumatic event can help ease the process [20]. Despite of their facial burns, the informants is still thinking about their family. Such selflessness is highly observed even though of their individualized struggles and the heavy process they've gone through.

IV. CONCLUSION

The researchers have found out that the persons who have gone through facial burn disfigurement had to go through a process of acceptance by a change of perspective. Some of our informants were always self-conscious even before the injury, while other weren't. But regardless of how they looked at themselves before, all of them weren't pleased with how they looked after the injury. They were being actively involved in the treatment of their scars and being continuously supported by their family and peers. They didn't let time heal their worries and scars. They all changed their perspective; they looked at their situation in a different angel and saw it as a plan from God, and in return were able to accept their facial appearances. Instead of focusing on what they've lost, they started to focus on what they have. The core category "A change in perspective" was observed when the informant's negative perception slowly faded and then a change of attitude begin to emerged when they truly started looking at the more important and significant events in their lives.
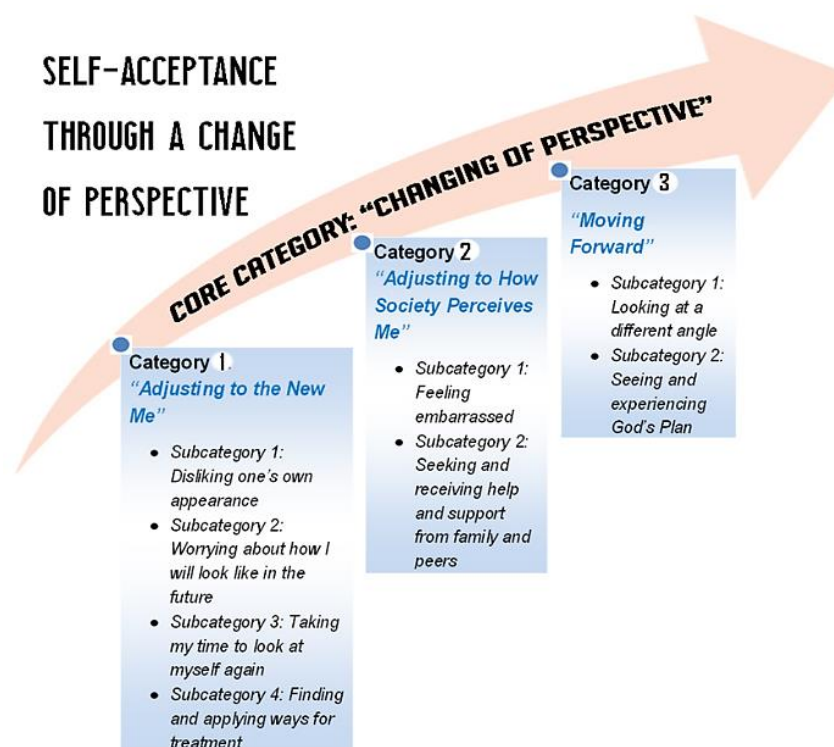

Fig 1: Grounded Theory Model

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