

YOUR PERSONAL MAKEUP APPLICATION

Cleansing skin thoroughly is essential. Use a Gentle Foaming Cleanser or any gentle glycerin soap. Cleanse with delicate circular strokes; rinse with warm water. Cleansing with a sea sponge is easy and gentle to the skin. <u>Remove all makeup before bed and moisturize.</u>

Moisturize face and neck with a moisturizer that has a <u>sunscreen with SPF30</u>. Use gentle upward and outward strokes. Blot excess moisturizer with tissue if necessary.

Apply Makeup with a damp makeup sponge. Use a "pat, pat pat" motion to cover areas of deeper discoloration or scarring needing more coverage. "Feather" edges around jaw/neckline for a blended and sheer makeup look. Cinema Secrets makeup also has sun screen in it.

Powder sets the makeup. Work powder into puff—make a <u>taco shape</u>! Apply powder with light "pat, pat, pat" motion—like a butterfly move gently over your face. Do the <u>touch test</u> to find any moist areas and powder again. Dust off excess powder with a blush brush. After powdering, if any area of discoloration shows through, apply more makeup to that area and powder again.

Blush: apply a small amount of blush to <u>blush brush</u> and blot excess on tissue. Apply blush beginning at hairline and sweep through to mid-cheek. Repeat gently until color is natural and the depth you desire.

Eye Shadow #1: use <u>fluff brush 4</u> to apply eye shadow on the eyelids. Apply from the base of the eyelashes up to the eyebrows.

Eye Shadow #2: use <u>chisel angle fluff</u> to apply shadow to crease of eye only. Avoid lid of eye. Reuse eye shadow #1 again if necessary.

Eyeliner: apply close to lashes of upper lid with sharp eyeliner pencil.

Mascara: apply with even upward motion to top lashes. May want to use several coats.

Eyebrows: use eye shadow color and <u>angle detailer brush</u> and/or a very sharp eyebrow pencil and follow form of brow bone to create soft eyebrow. OR order EAZY Brow form.

Lip Liner: with lip pencil make a curved "X" on the upper lip area under center of nose to form the bow of the upper lip. Draw an even lip line beginning at the "X".

Lipstick: apply with <u>lip brush</u> inside the lip line, blot with tissue and reapply lipstick. Lip gloss may be added. Long lasting lipsticks can help retain lipstick longer.



CREATIVE COSMETICS PRODUCTS USED

<u>Cinema Secrets</u>: make-up foundation, sponges, puff, powder, brushes, super sealer, make-up brush cleaner. <u>25% discount</u> for burn survivors.

Eazy Brow: a hands-free, adjustable eyebrow mask to create eyebrows with eye shadow or eyebrow pencil.

MAC Cosmetics: eye shadow, lip liner, lipstick.

Dermablend Leg + Body Makeup with SPF 25 sunscreen

• Dermablend Leg + Body Tips and Tricks Tutorial

Find at your local drug store or supermarket:

- Maybelline mascara
- **Botanics**: cleansing milk for stressed skin
- JASON Vitamin E moisturizing cream
- **Sea Sponge**: for gentle skin cleansing
- L'Oréal Sublime Bronze tinted self-tanning lotion: helps blend donor sites and/or give a tan without being in the sun



WHY IS AN IMAGE ENHANCMENT PROGRAM IMPORTANT?

Created for Winnipeg Health Sciences Centre by Linda Forbes Duchart, MSc, + Lisa Bailes

The Psychology of Appearance

The face is important for overall body image It is a representation of the individual It provides a means for communication

(Cole, 1998; Cunningham et al, 2002)

There is great value placed on physical appearance. We are a society of first impressions. A stereotype exists: a desirable face shape translates to positive personality traits and high intelligence. (Kammerer-Quayle, 2006).

Sociological and historical influences have contributed to this stereotype: children's movies, books and adult popular culture are filled with examples of evil characters being scarred or disfigured. Freddy Kreuger from *Nightmare on Elm Street*, *Phantom of the Opera*, Darth Vader and Scar from *The Lion King* are examples.

People are influenced by appearance:

- Job recruiters have a negative perception of disfigured applicants (Stevenage & McKay, 1999)
- People stand/sit farther away from disfigured individuals (Houston & Bull, 1994; Rumsey et al., 1982)
- Teachers' expectations are lower for disfigured children (Walters, 1997)
- Common reactions to disfigurement are rejection, over-hearty acceptance, or plain embarrassment (Goffman, 1970). This has devastating consequences for the disfigured individual (Kammerer-Quayle, 1993, 2006; Lansdown et al., 1997; MacGregor, 1990):
 - Focus of negative judgment and prejudice
 - o Dealing with stares, hurtful comments, intrusive questions
 - Decreased body image and self-esteem
 - Depression
 - o Difficulty making friends, marrying, obtaining a suitable job

How Image Enhancement Can Improve Self-Image and Ease Social Reintegration

Facial and body differences receive less significance and importance during rehabilitation because it is regarded as cosmetic and not a functional impairment. Disfigurement, however, can cause as much impairment in one's life as does a functional impairment (Dion et al., 1972; Elks, 1990).

Plastic and reconstructive surgeries do a great deal to help the facially disfigured, but have limitations (Kammerer-Quayle, 1993, 2006):

- Discoloration, scarring and asymmetry in facial features is inevitable
- Many burn survivors are left with a feeling of hopelessness

The use of cosmetics provides a beneficial effect on how others perceive a person, on selfperception and on quality of life (Aydogdu et al., 2005; Graham & Jouhar, 1980; Holme et al., 2002; Kanzaki et al., 1998; Kent, 2002). Creative cosmetics can be described as a form of "fluid prosthesis" (Roberts, 1986).

Make-up is an essential component of facial restoration (Rose, 1995) BUT cosmeticians may not be trained to appropriately deal with scarring, and discoloration and restoring eyebrows and lip lines. Using cosmetics to disguise disfigurement may provide more problems than it solves without the appropriate programs of adaptive skills. Even if scars are covered, the disfigurement is still there (Roberts, 1986).

An Image Enhancement program includes correct application of products, medical etiquette, terminology, communication skills and confidentiality. The patient must be treated as a whole person, and not just for the disfigurement. Caring touch and a sensitive patient approach must be used (Roberts, 1986).

Members of the burn team are in a unique position to provide an I.E. program. Complete healing from a trauma involves more than just healing an open wound, improving range of motion or "fixing" the face. We must help burn survivors to accept their disfigurement and feel comfortable functioning within their environment.

Looking their best can ease community re-entry for burn survivors. Introduced early, an I.E. program may offer hope to survivors, help develop new images of themselves and resolve the loss of former image (Kammerer-Quayle, 1992 & 1993).

Goals of Creative Cosmetics:

- Reduce redness/discoloration/scarring, therefore creating a consistent skin tone
- Restore missing or asymmetrical features: eyebrows, lip line
- Enhance features, such as the eyes, thereby reducing focus on scarred areas

Acknowledgements:

Thank you to Barbara Kammerer Quayle, our Image Enhancement mentor, for her support and assistance in every stage of this workshop development. Barbara assisted with the information provided in this handout and was instrumental in securing The Book of Image Enhancement and BEST wallet cards.

References

Aydogdu, E., Misirlioglu, A., Eker, G., & Akoz, T.

(2005).ostoperative camouflage therapy in facial aesthetic surgery. Aesthetic Plastic Surgery, 29, 190-194.

- Cole, J. (1998). About Face. Cambridge: The MIT Press.
- Cunningham, M, Barbee, A, & Philhower, C. (2002). Dimensions of facial physical attractiveness: The intersection of biology and culture. In G. Rhodes and L. Zebrowitz (Eds.), Advances in visual cognition, Vol. 1. Stamford, Conn.; JAI/Ablex.
- Dion, K., Berscheild, E., & Walster, E. (1972). What is beautiful is good. Journal of Personality and Social Psychology, 24, 285-290.
- Elks, M. (1990). Another look at facial disfigurement. Journal of Rehabilitation, 56, 36-40.
- Goffman, E. (1970). Stigma: Notes on the management of spoiled identity, Penguin.
- Graham, J. A., Jouhar, A. J. (1980). The importance of cosmetics in the psychology of earance. International Journal of Dermatology, 22: 153–6.
- Holme, S.A., Beattie, P.E, Fleming, C. J. (2002). Cosmetic camouflage advice improves quality of life. British Journal of Dermatology; 147: 946–949.
- Houston, V., & Bull, R. (1994). Do people avoid sitting next to someone who is facially disfigured? European Journal of Social Psychology, 24, 279.
- Kammerer Quayle, B. (1992). Image of people with visible disfigurement and disabilities. In: M.G. Brodwin, F. Tellez,
 S. Brodwin (Eds.), Medical, Psychosocial, and Vocational Aspects of Disabilities, Athens, GA: Elliot & Fitzpatrick, Inc., 139-150.
- Kammerer-Quayle, B. (1993). 5 STEPS to Self-Esteem for the facially disfigured. Skin Inc., July/Aug, 42-49.
- Kammerer Quayle, B. (2006). Behavioral skills and image enhancement training for burn survivors: Essential interventions for improving quality of life and community integration. In: Achauer B, Sood R, (eds). Burn surgery: Reconstruction and rehabilitation. Philadelphia: Saunders Elsevier. p. 396-409.
- Kanzaki, J, Ohshiro, K, Abe, T. (1998). Effect of corrective make-up training on patients with facial nerve paralysis. Ear, Nose & Throat Journal, 77, 270-274.
- Kent, G. (2002). Testing a model of disfigurement: effects of a skin camouflage service on well-being and appearance anxiety. Psychological Health, 17, 377–386.
- Lansdown, R., Rumsey, N., Bradbury, E., Carr, T., & Partridge, J. (1997). Visibly different: Coping with disfigurement. Oxford: Butterworth.
- Macgregor, F. C. (1990). Facial disfigurement: problems and management of social interaction and implications for mental health. Aesthetic Plastic Surgery, 14, 249-257.
- Roberts, R. (1986). Cosmetic camouflage. Nursing. 3, 190-195.
- Rose, E. (1995). Aesthetic restoration of the severely disfigured face in burn victims: a comprehensive strategy. Plastic and Reconstructive Surgery, 96, 1573-1587.
- Rumsey, N., Bull V & Gahagan, D. (1982). The effect of facial disfigurement on the proxemic behavior of the general public. Journal of Applied Social Psychology, 12, 137.
- Stevenage, S, & McKay, Y. (1999). Model applicants: The effect of facial disfigurement on recruitment decisions. British Journal of Psychology, 90, 221.
- Walters, E. 1997. Psychological research on visible difference in adults. In R. Lansdown, N. Rumsey, E. Bradbury, et al (Eds), Visibly different: Coping with disfigurement. London: Butterworth-Heinemann, 112-130.