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ACQUIRING A FACIAL DIFFERENCE

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Early days

When one acquires a facial difference, it is usually sudden and unexpected. A rapid series of events follows, that likely includes many medical consultations and surgeries. Decisions must be made rapidly, and commitments are acted upon with little time for reflection. It may be a life changing time filled with high anxiety. Nevertheless, people without positive peer support of places like AboutFace can lessen the feelings of being just swept along by events. People can and do adjust, often at different rates. The resiliency of people dealing with a new facial difference has been remarkable. This adjustment is characterized by many of the following features. The first type of challenge facing patients who have an acquired a facial difference relates to the cause of the loss. If it was by some particularly traumatic event, there may also be symptoms of post-traumatic anxiety, such as sleep disturbances and nightmares. If a feared disease like cancer caused the loss, there is lingering concern about recurrence. In either case, the individual will be faced with the necessity of accepting the loss and continuing a healthy life.

Loss

A person with an acquired facial difference has unique issues to deal with than those who have a congenital difference. Acquiring a difference requires accepting a loss. Loss is a state of being without something one has had and valued (Peretz, 1970). Loss can be a very traumatic and painful experience that can often trigger a set of emotions similar to experiencing the grieving process of losing a loved one. It is normal for a person who is grieving to go through stages of denial, anger and bargaining, depression and acceptance. The stages of this process may precede or follow the surgical/ prosthetic rehabilitation. Depending on where one is in the rehabilitation process, these stages of grieving can affect how well one is able to cope with and accept the results of the rehabilitation process.

Denial

Denial is often the first stage of the grieving process. A person uses denial as an unconscious defense mechanism so as not to have to deal with the pain of their loss. However, refusal to acknowledge painful realities, thoughts, or feelings can be detrimental to a person's psychological well-being. There are feelings about changes in identity, and how one will relate to family and friends in the future and in turn how they will relate to the affected person. The facial difference has the potential to affect the social functioning of the person. Not surprisingly, this is the basis for anxiety about future relationships.

Anger

Anger is the second stage of the grieving process. Anger is a strong emotion of displeasure for what we regard as a wrong toward ourselves. In acquiring a facial difference anger is often directed toward family and caregivers who are trying to help. Understanding that this expression of anger is part of the affected persons attempt to process their circumstances. This knowledge can assist in preventing problematic situations during the care process.

Anger also effects ones perceptions. An angry outlook will negatively impact the results of treatment. Coping mechanisms include developing an "attitude" that defines the problem. This takes considerable energy; so support mechanisms are important for the affected person. In addition, the person's pervious social adjustment may help adjusting to the new situation.

Bargaining

At this stage, the individual seems to accept the inevitability of the loss, but still looks for ways to diminish the impact of it. People seek ways to escape the reality if even for a short time, to delay the prospect of



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having to do the work in facing their loss. For example, people may choose to defer definitive rehabilitation treatment for what seems like poorly defined reasons. Under these circumstances, this choice is entirely reasonable. It's just that more time is needed to adjust.

Depression

As facing the long-term reality of one's loss the challenge can seem to be "uphill" all the way. It is not surprising then that a person may become depressed. Depression can be characterized by an inability to concentrate, insomnia, and feelings of extreme sadness, dejection, and hopelessness. It can last a short time, or it can persist for months. A person who has acquired a facial difference can feel hopeless about the future, and powerless to change it. These feelings need not go on indefinitely. Time and support can help an individual to come to terms with their loss.

Acceptance and Support

Acceptance is the mental attitude that allows an individual to come to terms with their loss. Acceptance of the loss is an important last step for an individual with a facial difference to continue to function effectively and happily in every day life situations. The facial difference is a challenge that must be met like any other challenge in life. A more positive approach to family, friends and work becomes evident, and one wants to get on with life, leaving the unhappy events behind. At this point affected people are much more receptive to the results of treatment, and more successfully adapt to any changes in routine required by the new circumstances.

Conclusion

Often, people are remarkably resilient and adapt amazingly well to treatment for facial differences. While it is recognized that this resilience relates not just to surgical, prosthetic treatment social/emotional treatment is equally important, and often needs just as intensive care as the surgical side. This can be accomplished though a well-integrated multidisciplinary craniofacial team has demonstrated very favorable results.

AboutFace is a national charitable organization dedicated to helping individuals with facial differences and their families. We support individuals whose differences are present at birth or acquired as a result of disease or trauma. If you or someone you know has a facial difference and would like more information, contact AboutFace at 1-800- 665-FACE or www.aboutface.ca.

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