



Camouflage Therapy

Conquering Children's Emotions

by Victoria L. Rayner

CHILDHOOD—IT IS A TIME when an individual's personality is shaped. Growing up and maturing isn't easy for most children. The process can be even more difficult for children with facial or body disfigurements such as birthmarks, or scarring caused by accidents, cancer or burns.

The children with facial disfigurements I have worked with report that people react negatively toward them. I've been told that often, even teachers respond less positively to children with facial scarring or birthmarks than to children without such disfigurements. The San Francisco-based Center for Appearance and Esteem's statistics indicate that these children also are seen as less adept in a wide range of activities and behaviors; they are perceived as less sociable, more dishonest, less able to solve their own problems, and their friendship is less sought, leaving them feeling socially isolated.

Considering the enormous impact of facial or body disfigurements on the developing child's sense of self, it seems logical that a child's self-concept will improve by visually minimizing them. Camouflage therapists, estheticians who have been trained to work with these clients, can derive enormous satisfaction from working with these children and contributing their skill to help normalize the children's appearance.

The decision to send children for cosmetic therapy usually comes from the fam-

ily physician. However, sometimes the decision is made by the child once concerns begin to develop over the disfigurement. This can happen at any age.

THE PARENTS' ROLE. When children are scheduled for a cosmetic therapy treatment, so are the parents or guardians. Their assistance is mandatory in all cosmetic therapy encounters with children since the adults must make the appointment, provide the transportation, and are responsible for paying for the services. The parents' involvement also is a major component in determining children's responses, and one over which you have no control. Parents change the environment by their presence alone, and are an additional element that can't be ignored. Children often look to the parents or guardians to provide positive or negative feedback in an attempt to discern whether or not the cosmetic solution is viable.

Generally, the parents of disfigured children try to protect them from potentially unpleasant social interactions. This interference sometimes leads to their immaturity and a greater dependency on the parents. Children of overly protective parents may have poorly developed verbal skills, which can inhibit them from expressing their concerns. These children are withdrawn and might be excessively dependent on their parents or siblings during the cosmetic therapy process.

Your awareness and understanding of these dynamics when working with young clients plays a vital role in the positive outcome of the therapy, and ultimately will prevent negative feedback from the parents.

Portions of this article are taken from "Cosmetology Therapy with Disfigured Children," the third chapter of *Clinical Cosmetology: A Medical Approach to Esthetic Procedures* written by Victoria L. Rayner in collaboration with Rochelle B. Wolk, PhD, and published by Milady, Albany, New York, 1993.

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DEALING WITH EMOTIONS. In addition to dealing with the children's facial disfigurements, be prepared to deal **with** the parents' emotions. Some parents feel responsible for, and guilty about, the disfigurements, and have not resolved these feelings. The parents might deny or minimize the need for such treatment subconsciously, even when they agree to obtain cosmetic therapy services for their children.

A strong indication **that parents are burdened with such emotional issues** might be if **they** regularly fail to keep appointments or habitually arrive late. After the session, the **disturbed** or guilt-ridden parents will "forget" what cosmetic techniques they were taught, "delay" buying the necessary cosmetics or misplace them once purchased.

The situation can become even more confusing if you are not aware of these dynamics--when the children want **to use cosmetics**, while their parents deny or minimize **the need for them**. You might feel forced to confront the parents in order to help the children. However, this is not recommended. Instead, control the situation by balancing the demands of both the child and **the** parents. Address the desire that most parents have to make their children more comfortable both personally **and** socially. This can be accomplished by focusing on the children's discomfort with their disfigurements, rather than **the** actual disfigurements. Also, praise **the** parents for their response to their children's emotional needs.

Another problem you might encounter when working with young clients and their parents is the parents' desire to **have other** minor blemishes corrected in addition to the disfigurement. This can be

emotionally detrimental to children if they feel that their physical appearance does not please their parents, particularly when the imperfections are minor.

Use good judgment to prevent being manipulated into a situation that potentially can be damaging to the child's self-esteem. Before **the** application begins, meet with parents to ask about their expectations to prevent **future** misunderstandings. Then, inquire about expectations for the cosmetic application with the children. This will help clarify any underlying issues.

Not all parents **have** guilty feelings about their **children's** facial disfigurements. Parents who **have** made a healthy adjustment to their children's appearance will recognize the importance and benefit of cosmetic therapy for social and emotional development. Should children with substantial **disfigurement**

actively reject the camouflage treatment, these parents would not coerce the application, or the issue.



Visually minimizing children's disfigurements will improve their self-concept.

THE TEACHING PROCESS.

Providing cosmetic therapy to children involves teaching. Parents must be asked not to interfere in the teaching **process**, and be advised that the ultimate goal is for them to step back and gradually permit their children to apply the camouflage makeup independently.

Children's ability to independently apply the makeup **depends** more on dexterity than age. Their ability to comprehend instructions is another factor. As a rule, most children under 10 will require parental assistance with the fine-motor aspect of the application. Instructions must be tailored to each child's ability. By the time children are 12, parental help usually is no longer needed.

Occasionally, parents want to take full responsibility for the application process **even though**

the children have the skill and maturity to do so. You can wean parents away from this desire by asking them to write down the entire application process one step at a time. Instructions must be carefully worded so the children easily can understand them. When working with children, notice **the** subtle indications from young clients as to when they need assistance. Body language, such as a frown, crossed legs and arms, or rigid posture, are strong indicators of which way to proceed.

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THE APPLICATION. A session can run from 60-90 minutes, depending on the work to be done. As they practice at home, children eventually will decrease this time to about 20 minutes.

When working with children, keep it simple. Since the young clients eventually will perform the camouflage process alone, no more than two cover creams should be used to achieve the correct color match. A third cover cream shade will complicate the process and confuse the child. Intricate corrective makeup techniques are only as valuable as the ability of the client to duplicate them. Application tools such as pencils or crayons are preferred to brushes because younger children are familiar with using them.

The application method should be broken into a simple, numbered sequence. In addition to writing down instructions, a cassette tape can be made so the children and parents can listen to instructions as they perform the systematic application procedures.

When working with young children, the benefits of a

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to medical professionals. Raymer also is the director of several camouflage therapy clinics, all located in teaching hospitals, and is a well-known author and lecturer in the field of clinical cosmetology.

regular skin care routine also should be emphasized. Long-term contact with camouflage solutions can lead to **comedonal** impactions, commonly referred to as breakouts. In addition to instructions on application of the camouflage creams, write out a detailed cleansing routine including specific recommendations, noting that cover creams should be removed before vigorous exercise or sleeping.

ADOLESCENT ISSUES. The use of cosmetics on adolescent boys is a major issue and should be addressed at the beginning of the session. The client is more likely to accept the **masking** of his physical disfigurement with cosmetics if it is explained that the cover cream preparations are not to be confused with traditional makeup.

Explain that these cosmetics have a thick paste-like consistency and are more opaque than traditional makeup. The combination of waxes and the thick ointment base is what makes them different from other foundations. Failing to explain this **distinction before a treatment** begins will make it hard to convince young male clients that a cosmetic solution has potential benefits. Referring to cover creams as anything other than opaque preparations for concealing skin conditions or scarring will doom the procedure to failure even

before the session begins. When working with the male adolescent, respect his need for **masculine** identity. If the client feels pressured, he is certain to remain aloof, and will not feel comfortable during the session. Some young males have a short attention span and might exhibit frustration with the sometimes complex and **time-consuming camouflaging process, therefore a great** deal of guidance and patience is required on your part. The camouflage procedure should be reviewed with the client, who should be guided through the necessary steps to complete the application. The young male client **should be reminded** not to expect immediate perfection. This will prevent him from becoming discouraged during the treatment.

Be aware of adolescents who are seeking a solution for pitted acne scars. Acne scar formations are difficult to disguise because cover creams can't improve the texture of the skin. In addition, this problematic skin condition can be complicated further due to the added oil in the cover creams. This oil is what makes them waterproof. A good camouflage alternative for skin scarred by active acne is theatrical pancake makeup. It has little to no oil, and is thick

enough to conceal redness or hyperpigmentation.

MARKETING SERVICES.

Training in cosmetic camouflage therapy is offered at post-secondary schools. These institutions often are listed in trade and medical journals, and usually include class schedules. A good way to get started is to form a working relationship with local physicians, including dermatologists and plastic surgeons. Certified training facilities can help with the networking it takes to begin a referral system.

Cosmetic therapy sessions should be priced according to your level of education and expertise. The fee should include the consultation, custom-blending of the products, the lesson and products used during the session. Children can learn the techniques required to apply and remove the camouflage creams in one session. However, a follow-up session might be necessary if the child or parents have a hard time understanding your instructions.

A cosmetic therapist can have an enormous impact on the lives of children with facial disfigurements.

SPECIAL NEEDS All children have special needs. When working with younger clients with facial disfigurements, there is an entirely different set of age-related variables. Written parental consent must be obtained before any independent contact with children is made. Many states also require estheticians who suspect child abuse to report it to the local child welfare protection agency, or risk incurring a fine, imprisonment, or both.

By offering cosmetic therapy to children with facial or body disfigurements, you can make an enormous impact on their lives. It can help boost their self-esteem and make their journey through life a little less painful. Offering these sessions also is a wonderful way to make your role as an esthetician even more rewarding and fulfilling. ■

(Editor's note: For more information on dealing with children and corrective makeup, see "Through a Child's Eyes" by Linda Seidel in the January/February 1994 issue of Skin Inc.® magazine.)



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