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Armouring & Facial Difference: Moving Beyond Psychology By Victoria Pileggi

The impact of facial difference on the lives of individuals is a topic studied widely within the discipline of psychology over the last fifty years. Among the most commonly cited results are the experience of self-doubt, low self-esteem, poor self-confidence, unfavourable body image, and negative self-images in children and youth with facial differences (Lansdown, Rumsey, Bradbury, Carr, & Partridge, 1997; Millard & Richman, 2001; Rumsey & Harcourt, 2004; Turner, Thomas, Dowell, Rumsey, & Sandy, 1997). Previous research also suggests that individuals with facial differences are subject to psychosocial difficulties at “higher-than-expected rates” (Maris, Endriga, Speltz, Jones, & DeKlyen, 2000) including: internalizing and externalizing disorders (Pope & Snyder, 2005; Speltz, Morton, Goodell, & Clarren, 1993); negative self-evaluations (Kapp-Simon, 1986; Broder & Strauss, 1989); difficulties with peers (Kapp-Simon & McGuire, 1997); and learning problems (Broder, Richman, & Matheson, 1998; Richman, 1980; Richman, Eliason, & Lindgren, 1988; Tobiasen & Speltz, 1996).



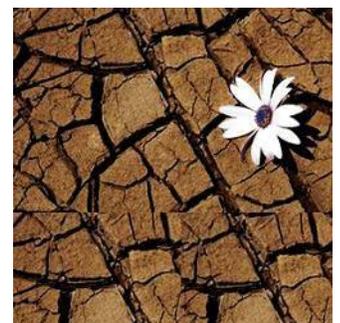
Much of the literature on how families are impacted by facial differences reviewed above is informed by the deficit model of disability. It is assumed with these frameworks that by possessing a disability or difference, the individual's quality of life must be reduced (Rice, 2014). Disability and difference are framed as insurmountable, permanent barriers to a “normal” life, often serving to strip the affected individual of a sense of dignity and invalidating their unique sense of self. Families of those who are touched by disability and difference are also subjected to the same stigma, oppression and reduced quality of life (Austin, 2009). As such, the literature positions the parent-child relationship as pathological by focusing exclusively on the problems faced within the community of individuals and families with facial differences.



However, according to disability theorists, positioning “disabled families” as dysfunctional only serves to further marginalize the family and individual in a time when they require social support (Read, 2000; Ryan & Runswick-Cole, 2008). Additionally, these conventional views of families are overly-simplistic and individualistic; they fail to address how families negotiate an understanding of their child's disability or difference, and elide the pressures of disablement from society that exert a damaging influence on familial relationships (McLaughlin, Goodley, Clavering, & Fisher, 2008). For Cole (2004), it is not the process of caring for a child with disabilities that is distressing, but rather the barriers that families have to face when accessing services and support that destabilize the familial unit. Moreover, research from within disability studies suggests that families

today are better able to see impairment as part of the mainstream continuum of human experience than those forty years ago, and as such, consider their family dynamic ordinary rather than “special” (McLaughlin et al., 2008).

Past research in the field has also largely failed to consider or explore the ways in which barriers are overcome by individuals and families touched by facial difference. Thus, future research should begin to shift away from the deficit model and towards highlighting what Pope (1999) calls “points of opportunity”; instances in which the family affected by facial difference find effective ways of dealing with the challenges it faces, and enhance the child's potential for adaptive psychological adjustment. For instance, Meyerson (2001) suggests family support, faith, and humor are factors that influence resilience in children with facial differences. Similarly, children whose families develop a “story” for explaining their difference to others early in life are better able to understand that their difference is not shameful, and cultivate positive coping strategies for the future (Pope, 1999). In one of the first studies of its kind, Klein et al. (2006) discuss how mothers of children with facial differences take a proactive role in helping their children overcome limitations by: helping their child manage staring and teasing; talking to teachers at school; facilitating play dates with peers; and encouraging independence.



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Studies such as these that look to acknowledge the unique and adaptive ways that individuals and families flourish can enlighten researchers and clinicians to a new way of thinking about facial difference.

In the process of researching for my Master's thesis on the mother-daughter relationship, I began to look outside the confines of psychological research and disability studies to understand the ways in which other marginalized groups promote resilience. I began consulting research in critical race studies, and in doing so, it became clear that a number of parallels could be drawn between the community of Black women and the community of women with facial differences. Resilience is a resounding theme in literature written by Black women such as Maya Angelou, Toni Morrison, and bell hooks. Belonging to two minority identities, Black mothers and daughters maintain a "perilous social position in society" (Bell & Nkomo, 1998, p. 285). As such, African-American girls and women must acquire various skills to prepare them to withstand and overcome the numerous obstacles that society presents over the course of their lives. Specifically, they "must learn what it means to be a Black woman in a society that has not granted them the traditional 'courtesies for femininity'" (Greene, 1990, p. 211).

According to Black feminist sociologists Bell and Nkomo (1998), armoring is a particular form of socialization whereby young Black girls are taught the attitudes and "socially legitimate behaviours" for the two contexts in which they live, so to develop a sense of psychological power that affords them self-protection in the face of racism and sexism. By developing this armour, they are able to preserve a sense of dignity, self-respect, beauty and self-worth, even when society's standards may seek to erode these qualities. In most cases, Bell and Nkomo state, the mother is primarily



responsible for "arming" their daughters; communicating with them about the roles they should adapt, expectations they should meet, and abilities and methods they should employ to flourish in a society that devalues them not only as women, but as Black women. In the study by Bell and Nkomo (1998), mothers afford their daughters different types of armour, stemming from their own distinct values and experiences. Some mothers stress that their daughters be respectable by regulating their sexuality and carrying themselves in a dignified manner. Other daughters are taught to develop courage by developing their own individual beauty ideals and sense of style. Mothers also aim to instill the belief that their girls can do whatever they want to do with poise and intellect. These messages are aided by

selective exposure, whereby parents purposefully choose to subject their girls to activities and communities that reinforce positive self-images, boost social skills, and increase confidence. Daughters are also taught to be self-reliant, independent, and strong in the face of physical and emotional pain, often to the point of becoming "invincible".

Women and girls with physical and facial differences are labelled with an identity that remains similarly devalued by mainstream society and are likewise denied "courtesies for femininity", and as a result, may experience a destruction of self-worth over time. Considering this, girls with facial differences may be taught similar psychological strengths to defend their sense of self in a society that looks to erode it. Specifically, mothers may "arm" their daughters to face some of the social stigma associated with disability and difference. It is critical however, to make a distinction between the mothers and daughters of the Black community and those affected by facial difference. As Greene (1990) states: "It would seem logical that a young Black woman's understanding of what it means to be a Black woman may...be heavily influenced by her mother's phenomenological understanding of racism and sexism and their respective roles in shaping her mother's own life" (p. 212). In this regard, young Black girls look to their mothers as role models; women who have existed at the intersection of the same minority identities as they have. The same cannot always be said for mothers of girls with a facial difference. Like other young girls, as those with facial differences begin to struggle with "becoming women", they seek out "like others" to envision their gendered selves. Without these role models, it becomes difficult to experiment with gender, tomboyism, femininity, and other variations of gendered identities (Rice, 2014). Examining the difference between mothers with and without facial differences in the lives of girls living with facial difference is critical. Mothers who have personally struggled with developing a sense of femininity, faced social barriers associated with difference and disability, and been subject to repeated and intrusive medical practices may in fact be better suited to arm their daughters, as they speak from a place of experience.

The objectives of my Master's thesis, which is now in the data collection phase, include: exploring mothers' role in their daughters' navigation of social interactions, family adjustment, and encounters with the medical system; examining

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the ways in which mothers help their daughters transition through adolescence, and develop a sense of self, body and gender; understanding what facial differences can uniquely contribute to a girl's sense of self and the mother-daughter relationship; and analyzing the way in which a woman might mother differently when she too is living with a facial difference. In my proposed qualitative analysis of mothers and their daughters with facial differences, I hope to examine whether armouring themes arise within the focus groups and individual interviews. I also hope to develop an understanding of how these messages may be communicated from mother to daughter, and the ways in which they are interpreted by each woman. I aim to decipher the ways in which the armour used by women with facial differences, if any, differs from those proposed by Bell and Nkomo, given their unique experiences in social and family settings, as well as their encounters in the medical system. Moreover, it is my hope to incorporate mothers both with and without facial differences into my analysis, to compare and contrast their experiences of raising a daughter with a facial difference, and to examine their daughters' feelings around what strength and resilience their mothers lives and experiences may have provided them. Moving forward, my doctoral research, commencing in September 2014, will be examining similar processes in the father-daughter relationship, broadening the scope of current literature to include stories from another necessary and influential person in the family unit who is often omitted from psychological research on facial differences. Stay tuned for results!



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