



Growing Up with Burn Injuries – Has it Changed Over Time

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Introduction

Growing up with disfigurement and functional limitations resulting from childhood burns can be challenging. Initial stages of care involve painful surgeries/dressing changes, strenuous physical & occupational therapy, pressure garments and time away from family/school activities. Few studies have examined the voiced issues faced by youth while maturing with burns. This study’s purpose was to determine if experiences in the post-injury phase differed between more recently burn-injured youth vs. young adults burned as children.

Population & Results

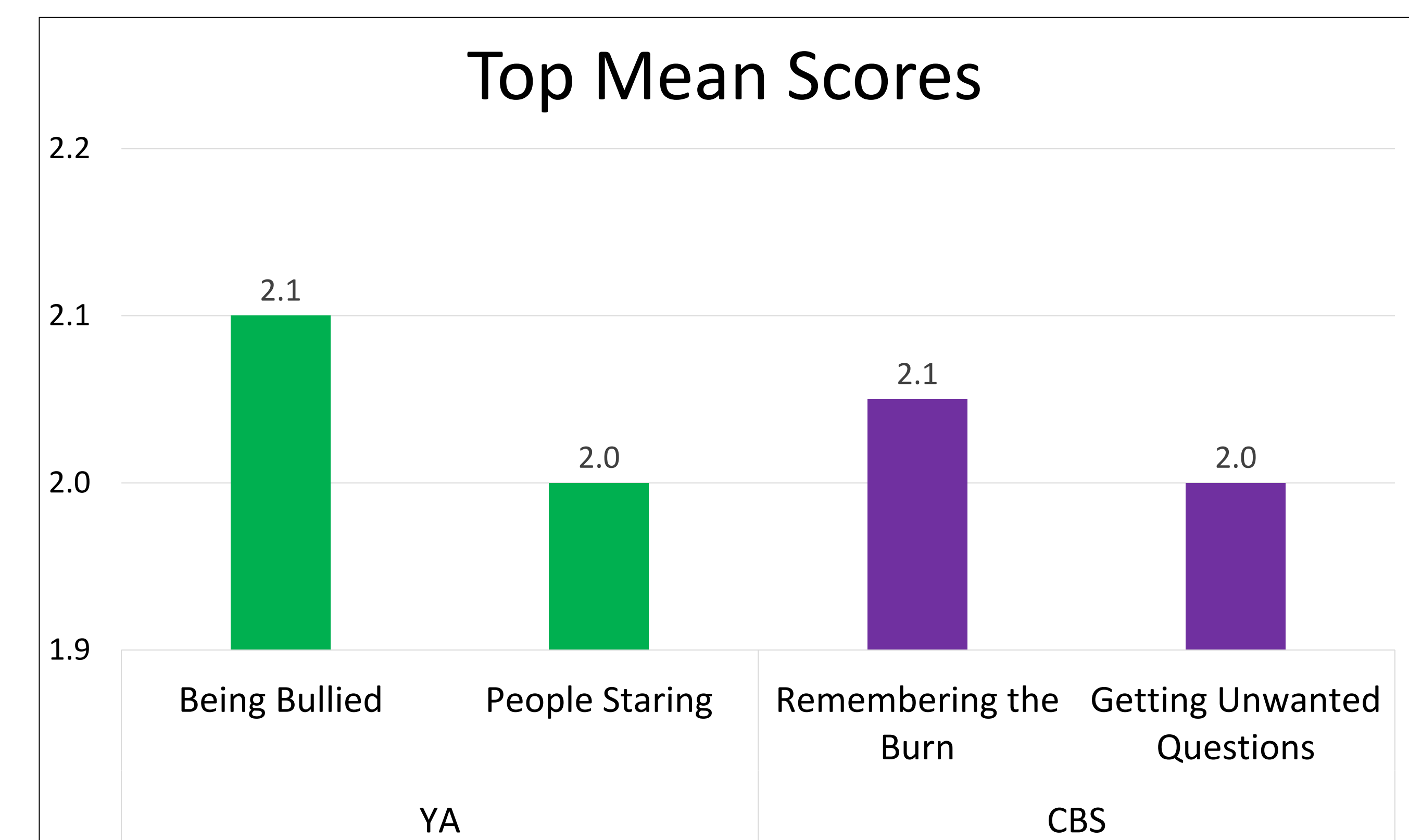
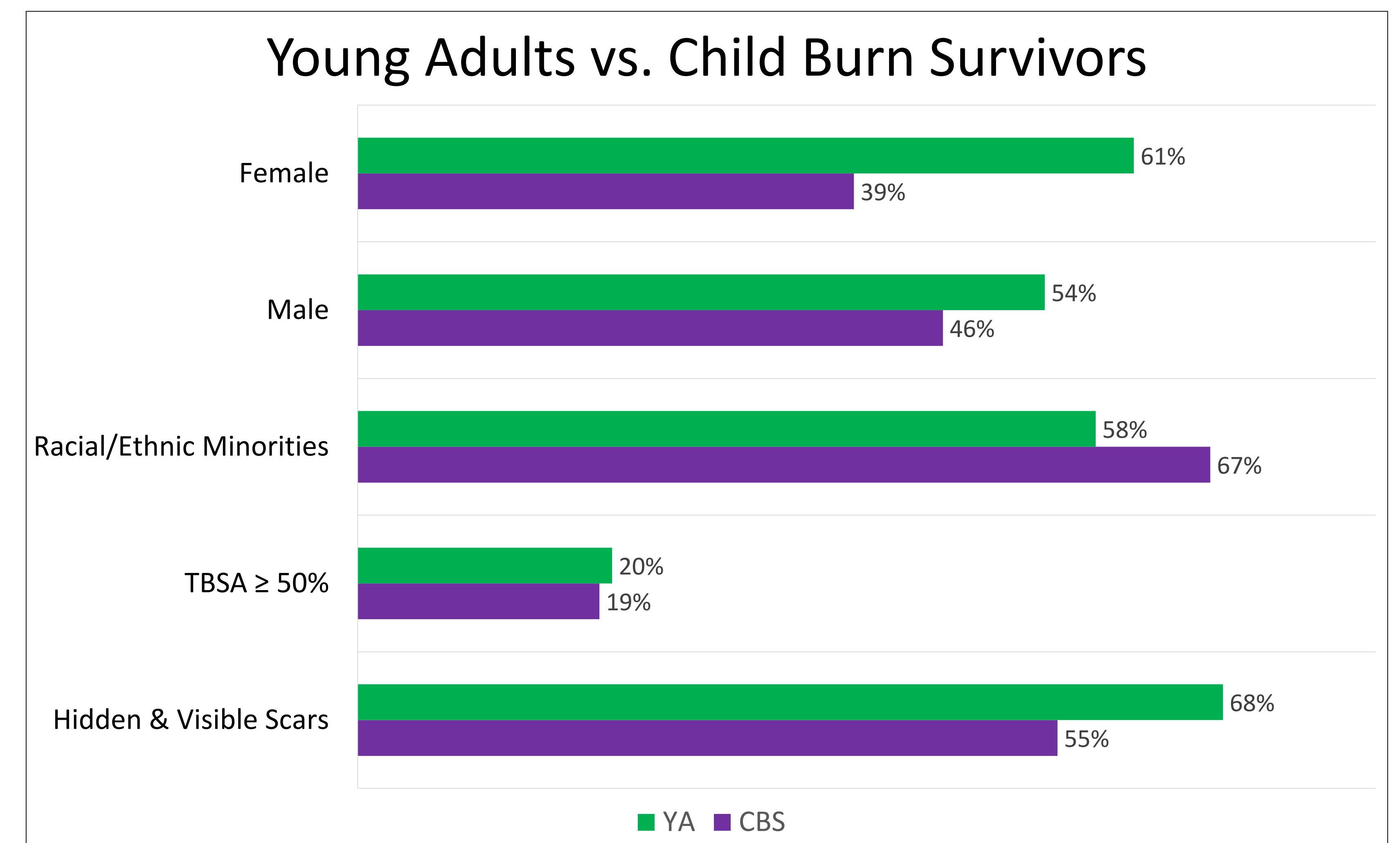
A prior study asked Child Burn Survivors (CBS -10-16 yrs.) and Young Adults (YAs -17-25yrs.) to answer the statement: “The hardest thing about being burned is...” The most common issues included: People Staring, Getting Unwanted Questions, Being Bullied, Remembering When I Was Burned, Having Additional Surgeries and My Scars. The current study asked participants to rate items on a 4-point scale from (1) Not at all to (4) Really a lot. The YAs were asked to consider issues they encountered maturing with burns. Child Survivors (CBS, n = 147) had a mean age of 13.4 years and YA Survivors (YA, n = 81) had a mean age of 19.1 years. The CBS group reported that *Getting Unwanted Questions* was more problematic than the YA Group (p = 0.003). YAs shared that *Being Bullied* was their biggest problem vs. CBS, significantly more so (p= 0.01).

Conclusion

Bullying appears to be less of a problem for current child burn survivors than those previously burned. The difference may be due to a recent emphasis placed on anti-bullying in US schools. Findings highlight an ongoing need to address the psycho/social issues related to burns.

Funding

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Applicability to Practice

- Teaching interventions like the Phoenix Society’s *Rehearse Your Response* can help youth address unwanted questions and staring.
- Providing children an opportunity to process the injury event may also improve their ability to cope with burn stressors.
- Results endorse the delivery of supportive strategies which complement surgical/medical treatment and should help improve their social interactions/quality of life.