

Psychosocial aspects of cleft lip and palate in adolescence: a narrative literature review.

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Psychosocial aspects of the leporine lip and palate in adolescence: a narrative review of literature

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Abstract: Cleft lip and palate is a congenital craniofacial malformation that can cause functional, aesthetic, and psychosocial repercussions, especially during adolescence, a period marked by intense emotional and social transformations. This study aimed to analyze the psychosocial impacts of cleft lip and palate in adolescents, focusing on depression, anxiety, and self-esteem. This is a narrative literature review conducted in the PubMed, BVS, LILACS, and Google Scholar databases, using descriptors in Portuguese and English related to the topic, without restriction on the publication period. Studies involving adolescents aged 12 to 18 years with cleft lip and palate were included, with eight studies selected after applying the eligibility criteria. The results demonstrated that the psychosocial impacts are not exclusively associated with the presence of the malformation, but also with social, emotional, and contextual factors, such as social acceptance, communication difficulties, and family support.

It was observed that adolescents with cleft lip and palate may present similar levels of self-esteem to adolescents without the condition, although concerns related to facial appearance and speech may influence social and emotional behaviors. Furthermore, family support and positive interpersonal relationships proved to be important factors for psychosocial adaptation. It is concluded that the psychosocial impact of cleft lip and palate in adolescence is multifactorial, reinforcing the importance of multidisciplinary and biopsychosocial approaches in the comprehensive care of these adolescents.

Keywords: Cleft lip and palate. Adolescent. Depression. Anxiety. Self-esteem.

Abstract: Cleft lip and palate is a congenital craniofacial malformation that may lead to functional, aesthetic, and psychosocial repercussions, especially during adolescence, a period marked by intense emotional and social changes. This study aimed to analyze the psychosocial impacts of cleft lip and palate in adolescents, focusing on depression, anxiety, and self-esteem. This narrative literature review was conducted in the PubMed, VHL, LILACS, and Google Scholar databases, using topic-related descriptors in Portuguese and English, without publication date restrictions. Studies involving adolescents aged 12 to 18 years with cleft lip and palate were included, and eight studies were selected after applying the eligibility criteria. The results showed that psychosocial impacts are not exclusively associated with the malformation itself, but also with social, emotional, and contextual factors, such as social acceptance, communication difficulties, and family support. Adolescents with cleft lip and palate may present self-esteem levels similar to those of adolescents without the condition; however, concerns related to facial appearance and speech may influence social and emotional behaviors. In addition, family support and positive interpersonal relationships were identified as important factors for psychosocial adaptation. It is concluded that the psychosocial impact of cleft lip and palate during adolescence is multifactorial, underscoring the importance of multidisciplinary, biopsychosocial approaches in the comprehensive care of these adolescents.

Keywords: Cleft lip and palate. Teenager. Depression. Anxiety. Self-esteem.

1. Introduction

Cleft lip and palate is one of the most prevalent craniofacial malformations in the world. worldwide, with an estimated global incidence of 1 in 700 live births, being considered a an important public health problem (ROLLEMBERG ET AL., 2019). In Brazil, data from the Study The Latin American Collaborative Study on Congenital Malformations (ECLAMC) indicates that clefts Cleft lip and palate correspond to approximately 3.28 cases per thousand births, highlighting their significant occurrence in the national scenario (BARROSO ET AL., 2023).

From a dental standpoint, adolescents with cleft lip and palate require specialized monitoring is necessary, as they frequently present with dental problems. occlusal anomalies and structural impairments that require orthodontic interventions, prosthetic rehabilitation and continuous preventive maintenance (GLAESER ET AL., 2018).

Although surgical and therapeutic advances have increased survival and quality of life... Despite the challenges faced by affected patients, significant gaps still persist in understanding the lives of those affected. of the functional and psychosocial repercussions of cleft lip and palate in adolescence, a phase marked by intense physical, cognitive, and emotional transformations occur, since during this period, the construction of Identity and the valuation of body image play a central role in development. human (RAMALHO ET AL., 2023; Paiva et al., 2020).

Another interesting factor is that adolescents with cleft lip and palate may face challenges. specific issues related to facial appearance, speech, and social interaction, which can increase the vulnerability to feelings of exclusion, stigmatization and low self-esteem (GLAESER ET AL., 2018). Furthermore, the presence of the cleft, associated with possible functional and aesthetic sequelae, may to compromise, in addition to oral communication, integration into groups and school performance, impacting the emotional and social well-being of these young people (PAIVA ET AL., 2020).

Despite the importance of this topic, most studies on cleft lip and palate It focuses on the early stages of life, with an emphasis on surgical approaches and interventions. dental issues in children. Conversely, there is a scarcity of scientific studies investigating specifically the repercussions during adolescence, a period that demands continuous monitoring and differentiated rehabilitation strategies (PAIVA ET AL., 2020).

Given this context, the present study proposed a narrative literature review with the objective to identify the available evidence regarding possible psychosocial problems associated with cleft lip and palate in adolescents.

2 Methodology

2.1 Data source and search strategy

The research was conducted through a narrative literature review, using the following databases: PubMed, BVS, LILACS, and Google Scholar data were used. The following descriptors were employed for the search: in English and Portuguese, both separately and in combination, related to the central theme of the study. The descriptors used were: "Depression", "Anxiety", "Self-esteem", "Self-concept". "Psychosocial", "Psychology", "Depression", "Anxiety", "Self-esteem" and "Psychosocial".

The search was conducted between March 14, 2026 and March 21, 2026, in Portuguese and English. without date restrictions. Among the articles found, all those that met the criteria were selected. based on eligibility criteria assessed through reading of titles and abstracts.

2.2 Eligibility Criteria

Studies involving adolescents with cleft lip and palate were included in this research. For inclusion in this review, trials were selected randomized clinical trials, cohort studies, case-control studies, systematic reviews, and meta-analyses. Conversely, studies involving children and adults or with a specific age range were excluded. different from the standardized one in this research, as well as studies involving other types of fissures and Fissures of syndromic origin. Furthermore, case reports and expert opinions were excluded. in vitro and animal studies and duplicate studies.

Although this is a narrative review, different study designs were included. with the aim of obtaining a broad and comprehensive view of the psychosocial aspects in adolescents with cleft lip and palate. Furthermore, the methodological quality assessment was carried out in a way... descriptive, considering methodological clarity, sample adequacy, and coherence between the objectives and results.

For this narrative review, the PECO strategy was used to guide the selection of studies. and the formulation of the guiding research question. In this context, the guiding question for this The research stated that "Adolescents with cleft lip and palate have psychosocial problems such as..." Depression, anxiety, and self-esteem compared to adolescents without cleft lip and palate?", being:

P (Population): Adolescents with cleft lip and palate

E (Exposure): Cleft lip and palate

C (Comparison): Adolescents without cleft lip and palate

Outcome: Psychosocial problems



2.3 Data Analysis

The data extracted from the selected studies were analyzed qualitatively and descriptive, considering the main findings related to psychosocial aspects, such as depression, anxiety and self-esteem, which allowed for a comparison between adolescents with and without cleft lip and palate. labiopalatine.

3. Narrative Literature Review

Cleft lip and palate are congenital malformations resulting from the failure of the fusion of the Facial processes during embryonic development, between the fourth and tenth week of pregnancy (PHALKE; GOLDMAN, 2024). They can involve only the lip, only the palate, or both. presenting variations in extension, laterality, and severity, which directly influences function. oral health, facial aesthetics, and dental development (PHALKE; GOLDMAN, 2024).

3.1 Clinical aspects and characteristics of cleft lip and palate

Cleft lip and palate can involve only the lip, only the palate, or both. presenting variations that directly influence oral function, facial aesthetics, and the dental development (PHALKE; GOLDMAN, 2024).

From an anatomical point of view, they can be classified according to their location in relation to the Incisive foramen: pre-foramen (anterior lip and palate), transforamen (passing through the foramen), and post-foramen (posterior palate). The extent varies from incomplete, when it involves only part of the structure, a complete case, when it extends to the nasal cavity, which determines distinct functional impacts. such as difficulties with feeding, speech and breathing (CALVASINA, 2024).

Among the labial forms, the unilateral form is the most frequent, generally affecting the left side. while bilateral cleft palate presents greater anatomical and functional complexity. In the palate, clefts Complete deformities affect the hard and soft palate, and can compromise the velopharyngeal joint and production. of phonemes. Associated dental alterations include agenesis, supernumerary teeth and Malocclusion, which requires individualized clinical planning (CYMROT ET AL., 2010).

In addition to aesthetic and dental implications, these malformations can affect breathing and predispose to nasal obstructions and upper respiratory tract infections (COSTA ET AL., 2018). A A detailed assessment of the anatomy of the lip and palate is essential for planning surgical interventions. dental and speech therapy, allowing for the optimization of function, appearance, and quality of life. (CYMROT ET AL., 2010).

3.2 Psychosocial repercussions of cleft lip and palate in adolescents

Teenagers face specific challenges stemming from physical changes and typical social changes during this phase. Aesthetic and functional changes can directly impact self-esteem. Socialization and self-image perception influence psychological well-being and engagement in school and social activities (GLAESER ET AL., 2018).

From an aesthetic point of view, lip and palate deformities affect facial symmetry and the smile, being determining factors in the adolescent's personal and social perception (CALVASINA, 2024), which reinforces the importance of integrated interventions that combine clinical treatments, speech therapy and psychological support to minimize the impacts on social and emotional life (PAIVA ET AL., 2020).

The psychosocial repercussions include the risk of stigmatization, social exclusion, and impairment of interpersonal relationships (CALVASINA, 2024). In adolescents, these consequences can intensify feelings of anxiety, insecurity, and social withdrawal, making a multidisciplinary approach focused on emotional support and the promotion of social inclusion fundamental (PAIVA ET AL., 2020).

Continuous assessment of functional, aesthetic, and psychosocial outcomes allows for adjustments in therapeutics and guidance for health policies aimed at improving quality of life (GLAESER ET AL., 2018). Furthermore, the need to consolidate evidence on clinical management is highlighted, and the psychosocial impact, identifying gaps and supporting future research (CALVASINA, 2024).

3.3 Depression

Depression is a state of profound sadness that lasts for an extended period and affects the way a person thinks, feels, and acts. In adolescents, it can manifest as discouragement, lack of interest, irritability, low self-esteem, and difficulty relating to others. (CREPALDI ET AL., 2019).

In the case of adolescents with cleft lip and palate (CLP), depression is not solely due to appearance or scarring. Most of the time, it is more linked to factors such as social experiences, negative traits, communication difficulties (such as speech problems), and insecurity in social situations. (ALIGHIERI ET AL., 2023).

Depressive symptoms are understood from a psychosocial perspective, in which the presence of facial differences is not the primary factor associated with emotional distress, but rather the...



The way adolescents perceive their own appearance and experience their social relationships. Adolescents Those with less social acceptance and a more negative self-image tend to present more symptoms. Depressive symptoms, while positive friendships and greater social support act as factors of protection. In this way, the social context and the quality of interactions play a central role. in the development of depressive symptoms in this population (FERAGEN ET AL., 2010).

3.4 Anxiety

Anxiety has also been considered a possible psychosocial impact of the craving. Cleft lip and palate in adolescence. However, as observed in depression, some studies do not They show significant differences in anxiety levels between adolescents with and without the condition. (CASTILHOS ET AL., 2024).

The literature suggests that anxiety is more associated with contextual and individual factors than with the individual. that is related to the fissure itself. Among these factors, gender stands out, with the highest level of anxiety observed. among female adolescents, regardless of the presence of malformation (CREPALDI ET AL., 2019).

Furthermore, aspects related to communication, especially speech difficulties, can contribute to the emergence of insecurity in social situations. The reduced intelligibility of Speaking can generate fear of judgment and avoidance of interactions, indirectly influencing levels of anxiety (ALIGHIERI ET AL., 2023).

3.5 Self-esteem

The self-esteem of adolescents with cleft lip and palate is multifactorial, influenced by Individual, social, and emotional factors. Contrary to common expectations, evidence suggests that These teenagers may exhibit levels of self-esteem similar to those of individuals without it. condition, which demonstrates the capacity for adaptation throughout development (CELESTINO ET AL., 2024).

However, self-esteem is directly related to self-image, especially to Perception of facial appearance. Studies show that concerns about aesthetics can influence... Social behaviors, such as withdrawal and insecurity, impacting how the individual... positioning in interpersonal relationships (RICHMAN, 1983).

Furthermore, satisfaction with appearance can be influenced by therapeutic interventions. Biopsychosocial approaches demonstrate positive effects on self-image acceptance.

contributing to the strengthening of self-esteem (MANNADATH; JAYAN, 2023). Another factor Relevant refers to social support, which plays a fundamental role in the development of Self-esteem. Positive family and social relationships promote greater emotional security and better self-esteem. adaptation to the difficulties imposed by the condition (CAETANO ET AL., 2025).

3.6 Other related problems

During adolescence, romantic relationships constitute a significant milestone in psychosocial development, being directly associated with identity construction and The need for social acceptance. In this context, conditions involving changes in appearance. They can intensify feelings of vulnerability, especially in situations of exposure. interpersonal (FERAGEN ET AL., 2016).

Evidence suggests that adolescents with cleft lip and palate tend to have lower risk factors. Involvement in romantic relationships, possibly due to concerns about appearance. and with peer acceptance. However, this lower engagement is not associated in a way These findings did not significantly increase depressive symptoms or reduce overall self-esteem. They suggest that, although the condition influences certain social experiences, its effects on the Emotional well-being does not occur in a direct or uniform way (FERAGEN ET AL., 2016).

Additionally, it is observed that the female gender presents greater vulnerability. psychosocial, evidenced by higher levels of anxiety and depression, as well as less self-esteem, regardless of the presence of cleft lip and palate. This data reinforces the importance to consider individual factors in the analysis of the emotional impact in adolescence (CASTILHOS ET AL., 2024).

4. Results

The database search identified 273 references related to the proposed topic. After After applying the eligibility criteria and reading the titles and abstracts, 8 studies were included. In this review, the selected studies involved adolescents with cleft lip and palate in the age range... The study included children aged 12 to 18 years and assessed psychosocial aspects, mainly depression, anxiety, and self-esteem, through different validated instruments. The 8 studies included in this review are presented in Table 1, with the main characteristics of each article (Table 1).

Table 1 – Summary of results found in the selected scientific articles

| Author/Year | Country | Age of participants before | Evaluation method | Statistical difference | Key results |
|---------------------------------|-----------------------------|----------------------------|-----------------------------------------------------------------------|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CASTILHOS <i>et al.</i> (2024) | Brazil | 12–18 years | GAD-7, PHQ-9, Scale Rosenberg | It doesn't mean <i>va</i> | Adolescents with cleft lip and palate did not show higher rates of depression, anxiety, and low self-esteem than adolescents without cleft lip and palate. Females showed higher rates of depression, anxiety, and low self-esteem, regardless of whether they had a cleft lip or palate. |
| ALIGHIERI <i>and al.</i> (2023) | Belgium | 15–18 years | Audio and audiovisual samples | Yes | Lower speech intelligibility was associated with more negative peer attitudes, especially among boys. |
| CREPALDI <i>et al.</i> (2019) | Brazil | Average 15 years | SF-36 | It doesn't mean <i>va</i> | Quality of life was not affected by cleft lip and palate; however, females showed worse scores in relation to mental health and emotional problems. |
| FERAGEN <i>et al.</i> (2016) | Norway Average age 16 years | Average age 16 years | Self-reports, HSCL-25 (abbreviated version HSCL-7), CHASQ, SPPA | It doesn't mean <i>va</i> | The prevalence of romantic relationships was lower among adolescents with cleft lip and palate, which had little impact on depressive symptoms and self-esteem. |
| FERAGEN <i>et al.</i> (2010) | Norway Average age 16 years | Average age 16 years | HSCL-25 (abbreviated version HSCL-7) | Yes | Boys with visible facial differences due to cleft lip and palate presented with less severe depressive symptoms. |
| LIAO <i>et al.</i> (2006) | China | Adolescents | Standardized self-esteem scale used in Chinese psychological studies. | It doesn't mean <i>va</i> | Adolescents with cleft lip and palate have normal self-esteem, although they exhibit specific patterns of psychosocial adaptation and emotional self-regulation. |
| RICHMAN <i>et al.</i> (1985) | States United | 14–17 years | Facial perception and behavior | Yes | Adolescents with cleft lip and palate who experience greater difficulty with psychosocial adjustment tend to distort their facial and social self-image, which is associated with greater difficulties in psychosocial adaptation, even in the absence of diagnosable depression and anxiety. |
| RICHMAN (1983) | States United | Adolescents | Self-reports and objective personality assessment | Yes | Concerns about facial appearance have been associated with difficulties in social adjustment and greater social introversion in adolescents with cleft lip and palate. |



5. Discussion

This narrative review highlights the psychosocial impact of cleft lip and palate on Adolescence is multifaceted and cannot be understood in a linear fashion. Although the condition is often associated with potential emotional and social harm, the findings demonstrate that These effects vary according to individual, subjective, and contextual factors.

Regarding depression, studies show consensus in indicating that the symptoms Depression is more associated with negative social experiences than with the presence of depression itself. of the fissure. Feragen et al. (2010) emphasize that the negative perception of one's own appearance, associated The difficulty of social acceptance exerts a strong influence on the development of suffering. emotional. This finding is similar to the observations of Alighieri et al. (2023), who highlight the Communication difficulties, especially those related to speech, are factors that can generate insecurity and social isolation. Therefore, it is clear that the emotional impact of the fracture is... directly related to how the adolescent is welcomed into their social environments and family members.

Regarding anxiety, studies present some discrepancies. Castilhos et al. (2024) did not identify significant differences in anxiety levels between adolescents with and without cleft lip and palate.

Other authors point out that specific factors, such as speech difficulties and fear of judgment, can contribute to the emergence of insecurity in social situations. Alighieri et al. (2023) suggest that changes in speech intelligibility may lead adolescents to avoid certain interactions, favoring withdrawal behaviors. Furthermore, Crepaldi et al. (2019) highlight a higher prevalence of anxiety among female adolescents, evidencing Individual and emotional aspects also exert an important influence in this process.

Regarding self-esteem, the studies analyzed show relevant results and, in some positive aspects. Celestino et al. (2024) demonstrate that adolescents with cleft lip and palate They may exhibit levels of self-esteem similar to those of individuals without the condition, which indicates an important capacity for adaptation throughout development. However, Richman (1983) It emphasizes that concerns related to facial appearance can still negatively influence the social behavior, fostering feelings of insecurity and withdrawal. In this context, Mannadath and Jayan (2023) reinforce the importance of therapeutic approaches with a focus biopsychosocial, demonstrating that adequate support contributes significantly to the Greater acceptance of self-image and emotional strengthening.

Another aspect widely discussed by the authors refers to the importance of social support and

familiar. Caetano et al. (2025) highlight that positive interpersonal relationships act as factors of Emotional protection, promoting better psychosocial adaptation and greater emotional security. This understanding is also shared by Feragen et al. (2010), who point to social acceptance and the bonds of friendship as fundamental elements for reducing emotional suffering and the Strengthening self-esteem.

Feragen et al. (2016) observed that adolescents with cleft lip and palate tend to exhibiting less involvement in romantic relationships, possibly due to insecurities related to facial appearance and fear of rejection. Furthermore, they emphasize that this factor is not... It is directly related to higher rates of depression or lower self-esteem, which demonstrates that The psychosocial impacts of cleft lip and palate do not occur uniformly among all individuals. Findings show that the emotional experience of adolescents with cleft lip and palate does not depend not only physical condition, but also factors related to social interaction, family support, to lived experiences and how each individual emotionally copes with their own condition.

Although the findings of this study contribute to the understanding of the topic, some Limitations must be considered when interpreting the results. The main one relates to... the design adopted, since, in this study, although there were no date restrictions, the following were included only studies in Portuguese and English. Furthermore, since this is a narrative review, the analysis The interpretation of the results was only qualitative and descriptive, which may limit the... Generalizing the conclusions to other contexts and populations.

Therefore, it is recommended that future investigations broaden the scope of research on the proposed topic. with the extension of studies to other languages and with more robust methodological approaches, to that the results may contribute even further to the scientific literature and even explore... Variables not yet addressed.

Final Considerations

The psychosocial impact of cleft lip and palate in adolescence is complex and influenced by... predominantly due to social, emotional, and contextual factors, rather than physical condition. in itself. Symptoms such as depression, anxiety, and changes in self-esteem vary according to the experiences of social acceptance, communication difficulties, and family support, which highlights the The importance of positive interpersonal relationships and biopsychosocial therapeutic approaches for better emotional adjustment.



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