UV20422 Shaping and colouring eyebrows

This unit is about providing tinting and tweezing techniques to enhance the shape and colour of the eyebrows. It covers the use of a variety of consultation techniques to establish the treatment and outcomes required by the client. To carry out this unit you will need to maintain effective health, safety and hygiene throughout your work.

Learner Name: NameText

Level

2

Credit value

4

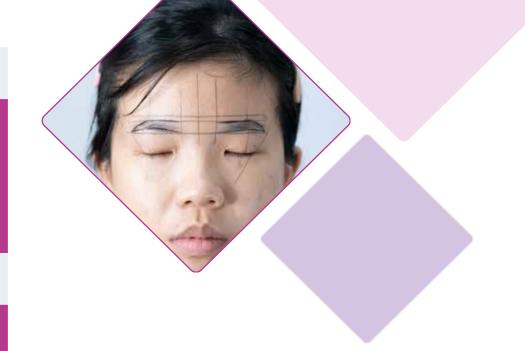
GLH

30

Observation(s)

3

External paper(s)





Shaping and colouring eyebrows

Learning outcomes

On completion of this unit you will:

- 1. Be able to prepare for shaping and colouring eyebrow treatments
- 2. Be able to provide shaping and colouring eyebrow treatments

Evidence requirements

1. Environment

Evidence for this unit may be gathered within the workplace or realistic working environment (RWE).

2. Simulation

Simulation is not allowed in this unit.

3. Observation outcomes

Competent performance of Observation outcomes must be demonstrated on at least three occasions.

4. Range

All ranges must be practically demonstrated or other forms of evidence produced to show they have been covered.

5. Knowledge outcomes

There must be evidence that you possess all the knowledge and understanding listed in the 'Knowledge' section of this unit. This evidence may include projects, assignments, case studies, reflective accounts, oral/written questioning and/or other forms of evidence.

6. Tutor/Assessor guidance

You will be guided by your tutor/assessor on how to achieve learning outcomes and ranges in this unit. All outcomes and ranges must be achieved.

7. External paper

Knowledge and understanding in this unit will be assessed by an external paper. There is **one external paper** that must be achieved. The criteria that make up the paper are highlighted throughout this unit.

Achieving observations and range

Achieving observation outcomes

Your assessor will observe your performance of practical tasks. The minimum number of observations required is indicated in the evidence requirements section of this unit.

Criteria may not always naturally occur during a practical observation. In such instances you will be asked questions to demonstrate your competence in this area. Your assessor will document the criteria that have been achieved through oral questioning.

Your assessor will sign off an outcome when all criteria have been competently achieved in a single client service.

Achieving range

The range section indicates what must be covered. Ranges should be practically demonstrated as part of an observation. Where this is not possible other forms of evidence may be produced. All ranges must be covered.

Your assessor will document the portfolio reference once a range has been competently achieved.



Observations

Learning outcome 1

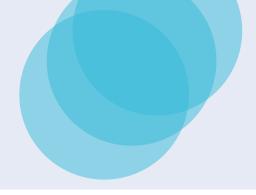
Be able to prepare for shaping and colouring eyebrow treatments

You can:

- a. Prepare yourself, the client and work area for a shaping and colouring eyebrow treatment
- b. Use suitable consultation techniques to identify treatment objectives
- c. Identify influencing factors
- d. Provide clear recommendations to the client based on factors

^{*}May be assessed through oral questioning.

Observation	1	2	3	Optional
Date achieved	QTF	QTF		
Criteria questioned orally	QTF	QTF		
Portfolio reference	QTF	QTF		
Assessor initials				
Learner signature				



Learning outcome 2

Be able to provide shaping and colouring eyebrow treatments

You can:

- a. Communicate and behave in a professional manner
- b. Position yourself and the client correctly throughout the treatment
- c. Select and use products, tools and equipment taking into account identified factors
- d. Use colouring techniques taking into account identified factors
- e. Use tweezing techniques taking into account identified factors

- f. Follow safe and hygienic working practices
- g. Identify contra-actions and take appropriate action during treatment
- h. Provide suitable aftercare advice
- i. Complete the treatment to the satisfaction of the client
- j. Evaluate the results of the treatment with the client

^{*}May be assessed through oral questioning.

Observation 1	2	3	Optional
Date achieved QTF	QTF		
Criteria questioned orally			
Portfolio reference			
Assessor initials	QTF		
Learner signature			



Notes

Use this area for notes and diagrams.	
QTN	

Range

*You must practically demonstrate that you have:

Used all consultation techniques	Portfolio reference
Questioning	QTF
Visual	QTF
Manual	QTF
Reference to client records	QTF

Dealt with a minimum of 1 necessary action	Portfolio reference
Encouraging the client to seek medical advice	QTF
Explaining why the treatment cannot be carried out	
Modification of treatment	

Covered all types of eyebrow shaping	Portfolio reference
Total re-shape of eyebrow	
Maintenance of original eyebrow shape	

Worked with a minimum of 2 colouring characteristics	Portfolio reference
Fair	
Red	
Dark	
White	

^{*}It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

*You must practically demonstrate that you have:

Working with a minimum of 1 hair type	Portfolio reference
Terminal	
Vellus	

Taking into account hair growth pattern	Portfolio reference
Direction of hair growth	
Hair loss	

Provided all types of advice/instructions	Portfolio reference
The individual and practitioner's legal rights and responsibilities	
Pre and post-treatment instructions and care	
Restrictions and associated risks – avoidance of activities which may cause contra-actions	
Future service needs	

^{*}It is strongly recommended that all range items are practically demonstrated. Where this is not possible, other forms of evidence may be produced to demonstrate competence.

Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

Achieving the external paper

The external paper will test your knowledge of the criteria highlighted. A **pass mark of 70%** must be achieved.

Your assessor will complete the following table when the 70% pass mark has been achieved.

Paper	Date achieved	Assessor initials
1 of 1	QTF	QTF



^{*}This is not an exhaustive list.

Knowledge

Learning outcome 1

Be able to prepare for shaping and colouring eyebrow treatments

You can:		Portfolio reference/ Assessor initials*
e.	Describe salon's requirement for client preparation, preparing yourself and the work area	QTF
f.	Identify different consultation techniques used to identify treatment objectives	QTF
g.	Describe the factors that need to be considered when selecting techniques, products and equipment	QTF
h.	Describe the environmental conditions suitable for shaping and colouring eyebrow treatments	QTF
i.	Describe the safety considerations that must be taken into account when providing shaping and colouring eyebrow treatments	
j.	Identify a range of tools and equipment for shaping and colouring eyebrow treatment	
k.	Identify products and their key ingredients	
I.	Describe the types of eyebrow treatments available	
m.	Describe the types of tests that are carried out before providing an eyebrow tinting treatment, interpret and record the results accurately	
n.	Describe the relationship between eyebrow shape and the client's facial characteristics	
0.	Describe contra-indications that prevent or restrict eyebrow treatments	

^{*}Assessor initials to be inserted if orally questioned. Requirements highlighted are assessed in the external paper.



Learning outcome 2

Be able to provide shaping and colouring eyebrow treatments

You can:		Portfolio reference/ Assessor initials*
k.	Describe how to communicate and behave in a professional manner	
l.	State the importance of positioning yourself and the client correctly throughout the treatment	
m.	Describe safe and hygienic working practices	
n.	Describe contra-actions which might occur during and following treatment and how to respond	
0.	Describe the aftercare advice that should be provided	
p.	State the importance of completing the treatment to the satisfaction of the client	
q.	State the methods of evaluating the effectiveness of the treatment	
r.	Describe methods of minimising discomfort during eyebrow shaping treatments	
S.	State the importance of cleansing the eye area correctly	
t.	Describe the normal response of the skin to eyebrow shaping treatments	
u.	State the basic ingredients of tinting products	
V.	Describe the chemical reaction which creates the tinting effect	
W.	Describe the structure and the main function of the skin and hair	
х.	Describe the main diseases and disorders of the skin, hair and eyes.	
у.	State how to maintain a record of products used	

^{*}Assessor initials to be inserted if orally questioned. Requirements highlighted are assessed in the external paper.



Notes

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Unit content

This section provides guidance on the recommended knowledge and skills required to enable you to achieve each of the learning outcomes in this unit. Your tutor/assessor will ensure you have the opportunity to cover all of the unit content.

Learning outcome 1: Be able to prepare for shaping and colouring eyebrow treatments

Management of health and safety at work:

Clean, tidy, safe standards of working, remove spillages, report slippery surfaces, remove/report obstacles, clear access to trolleys and equipment, clean/disinfect/sanitise/sterilise work areas/surfaces, equipment and tools as appropriate, no smoking/vaping, eating, drinking or drugs.

Infection Prevention: Infection prevention and control measures, universal and standard precautions, for example, hand hygiene – handwashing, hand sanitising, respiratory hygiene, cough etiquette, use of PPE, safe management of working environment and treatment resources, for example, cleaning, disinfection, sanitisation, sterilisation of working areas/surfaces, equipment and tools, safe management of linen, safe disposal of waste.

Personal protective equipment (PPE): Use appropriate personal protective equipment for self and client, for example, the use of gloves when using cleaning chemicals.

Regulations: Working in accordance with current health and safety legislation: Health and Safety at Work Act, Management of Health and Safety at Work Regulations, Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), Health and Safety (First Aid) Regulations, Manual Handling Operations Regulations, Control of Substances Hazardous to Health Regulations (COSHH), Personal Protective Equipment at Work

Regulations (PPE), Electricity at Work Regulations, Workplace (Health, Safety and Welfare) Regulations, Provision and Use of Work Equipment Regulations, Equality Act, Data Protection Act (UK General Data Protection Regulations (GDPR)), Environmental Protection Act

Electricity at work: Checking/visual check of equipment, no trailing wires, ensure equipment is portable appliance testing (PAT).

Manual handling: Moving stock, lifting, working heights, unpacking, posture, deportment, balance weight, protect back, prevent slouching, avoid straining or overreaching.

Reporting of injuries, diseases and dangerous occurrences regulations:

Accident book, reporting diseases, local byelaws, code of conduct, risk assessment.

Control of substances hazardous to health regulations: Replace lids, ventilation for vapour and dust, avoid overexposure to chemicals, correct use of chemicals, follow storage, handling, use and disposal, correct disposal of contaminated waste, products, check end date, packaging, store away from heat, damp and direct sunlight, dispose of contaminated waste in a closed top bin, relevant manufacturer's instructions.

Hazards and risks: A hazard is something that has the potential to cause harm, a risk is the likelihood of a hazard happening.

Hazards: Require immediate attention, level of responsibility, report, nominated personnel, duty to recognise/deal with hazards.

Risk: Determine the level of risk, to reduce a potentially harmful situation, judgement of salon hazards, who, what, level of risk, interpret results, conclusions, record findings, regular reviews.

Reasons for risk assessment: Staff, visitor, client health and safety, minimise hazards and risks, maintain safe environment, legal requirement.

Employer responsibility: Current and valid liability insurance, display health and safety rules (covering staff, employees, clients, fire evacuation), provide regular training, accurate record keeping, monitoring.

Liability insurance: Employer's, public, professional indemnity.

Security (cash): Staff training, point of sale, regular banking, in transit.

Security (people): Staff, clients, visitors, children, personal belongings, systems security, emergency evacuation, storage, client records, business information.

Equipment: only used for intended purpose, safe usage, handling, storage, cleaning, lifting, visual checks, worn, faulty, repairs, maintenance, Portable Appliance Testing (PAT), correct disposal of contaminated waste, records.

Hygiene:

General – Clean/disinfect work area/ surfaces, clean/sterilise/sanitise tools and equipment, fresh towels for each client, place dirty towels in covered bin, dispense products with a spatula, pump or spray, use disposables as appropriate to treatment, no smoking/vaping, maintain personal hygiene, replace loose lids (uncapped bottles and pots) sanitise therapist's hands before, during and after treatment.

Sterilisation – autoclave, glass bead, chemical, UV cabinet for storage only.

Disinfection – heat or chemical methods, bactericides, fungicides, viricides, UV cabinet for storage only.

Disposal of waste: Lined waste bin, organisational policies and procedures for disposal of waste – non-hazardous, clinical, sharps, mixed municipal, general and confidential, recyclable; environmental protection, single use items, dispose of all waste in accordance with manufacturers' instructions.

Towels: Wash regularly and efficiently, use fresh/single use towels for every client, place dirty towels in a covered bin.

Environmental working practices:

Effective and energy efficient working practices, for example lighting, heating and ventilation to meet the Workplace (Health, Safety and Welfare) Regulations (or local regulation requirements to the country being delivered in) for client and employees, water conservation, environmental waste management.

Sustainable working practices: For example, use products with ingredients from sustainable sources, minimal and sustainable packaging, recyclable, bio-degradable or compostable options for products, disposable and single-use items, record product usage, paper-free appointment systems and pricelists.

Work area: Prepare in accordance with organisational requirements and health and safety standards, clean and hygienic – clean/disinfect/sanitise/sterilise work area, tools and equipment, sufficient ventilation, appropriate room temperature, lighting, ambience, music, hygienic set up of couch and trolley, effective, ergonomic positioning of necessary products, tools and equipment to allow for ease of access, movement and safe practice, preparation of props for client support.

Therapist health and wellbeing: Maintain correct posture when performing treatment, sitting, lifting and carrying, use working methods to avoid work related injuries, for example, repetitive strain injury (RSI), perform regular hand exercises, maintain correct standing posture, even weight distribution, ensure own positioning delivers appropriate techniques, prevents injury, promotes optimum results, allows for visual checks, maintain appropriate space between client and self. Regular water/rest breaks to prevent dehydration and fatigue. Prevent contact dermatitis – wear gloves when using chemicals, wash and dry hands regularly and use moisturiser/barrier cream as appropriate.

Professional appearance: Clean professional uniform, no jewellery, no piercings, hair neatly tied back (fringe secured), closed in footwear, personal hygiene and cleanliness (shower/bath, cover cuts and abrasions, deodorant or antiperspirant, avoid use of overpowering fragrance), oral hygiene (clean teeth, fresh breath), nails (clean, short, polish-free, good condition and maintained).

Professional ethical conduct: Follow health and safety and organisational policies and procedures and code of conduct, demonstrate integrity, respect, flexibility and adaptability, co-operate with others, value client(s), use appropriate language, maintain a polite, cheerful and welcoming manner (friendly facial expressions, positive attitude, eye contact, open body language), maintain confidentiality, demonstrate respect for clients, colleagues and competitors, avoid gossip, take pride in work, maintain punctuality, uphold employer and client loyalty, work within limits of own authority and competence, engage in and document Continuous Professional Development (CPD) to maintain best practice

Client preparation: Consult with client, perform any necessary pre-treatment tests, provide headband, maintain client comfort, privacy and modesty, client positioned correctly, removal of contact lenses, removal of eye make-up.



Communication:

Verbal – speaking manner and tone, professional, supportive, respectful, sensitive to client, appropriate vocabulary and open questioning related to treatment.

Non-verbal – eye contact, body language, listening.

Written – electronic, digital or paper-based, clear and concise, attention to spelling, grammar and presentation of written information.

Visual aids – Photographs, colour charts, digital media, magazines and images, can provide inspiration and assist the client's understanding.

Adapting and tailoring approaches – for different clients, for example, new and existing clients, according to age, health conditions.

Clarification – checking client understanding of proposed treatment and expected outcomes, checking client's comfort and wellbeing throughout the treatment.

Record keeping: Accurate appointment systems, stationery, loyalty rewards, acknowledgement of occasions, consultation record keeping, refer to existing records, ensure information is concise, accurate and in logical order (name, address, contact details, age range, lifestyle profile – work status, medical history, contra-indications, general health and wellbeing, diet and fluid intake, sleep patterns, stress levels, sport/hobbies, recent activities, reason for treatment, treatment history, allergies/ hypersensitivity, contra-actions, patch/ allergy alert tests, current skincare regime, treatment requirements, client preferences and expectations, skin and hair analysis, adaptations and modifications, recommendations, treatment plan including products, expected outcomes, alternative treatment options, client informed consent and signature), update record at the end of the treatment, update at each visit, maintained electronically/digitally/ paper-based, documented and stored in compliance with current data protection legislation, for example General Data Protection Regulations (GDPR).

Consultation techniques: Consultation environment (face to face or digital), client requirements, client satisfaction, client expectations and aftercare, informed consent and signatures, visual, manual, questioning, listen, client information references.

Contra-indications:

Absolute contra-indication – An absolute contra-indication is a condition that prevents the treatment from being carried out and may require referral.

Examples of contra-indications that may prevent treatment (absolute contra-indications) – Severe asthma, contagious skin disorders – bacterial (impetigo), viral (herpes simplex, herpes zoster), fungal (tinea corporis), systemic medical conditions, conjunctivitis, severe skin conditions and eye infections, acne, boils and warts, parasitic infestations (for example, scabies), known allergies, hypersensitive skin, recent operations in area, undiagnosed lumps/pain, positive skin test (allergy alert test), abrasions, open wounds, sutures, rashes.

Relative contra-indication – A relative contra-indication is a condition that requires an assessment of suitability for the treatment and/or if adaptions are required.

Examples of contra-indications
that may restrict treatment (relative
contra-indications) – Insulin dependent
diabetes, pigmentation disorders, sunburn,
psoriasis, eczema, cuts and abrasions,
broken bones, respiratory conditions and
pregnancy, minor eczema, minor psoriasis,
minor cuts, minor abrasions, minor
bruising, hyperkeratosis, skin allergies,
styes, facial piercing, watery eyes.

The importance of recognising suspicious skin irregularities and lesions and referral to a relevant healthcare professional.

Treatment objectives: Client needs and suitability, client agreement, realistic outcome, product choice, colour range/selection, suitable techniques to meet identified outcomes (hair and skin condition, hair base colour), environmental factors, realistic outcome, additional services, client needs, suitability, duration, cost.

Recommendations to client: Pre-treatment instructions on treatment process, expected physical sensations, expected and unexpected adverse reactions, outcomes, fees and options, adaptations and modifications, further treatments to enhance eyebrow appearance, agree colour selection for eyebrow tinting, agree shape for eyebrow shaping. Post-treatment advice/aftercare.

Aftercare advice: Avoidance of activities that may cause contra-actions (no additional eyebrow treatments for 24 hours, avoidance of sun and heat, avoidance of perfumed products). Length of time between treatments (eyebrow shape 2-3 weeks dependant on hair growth, eyebrow tinting 3-4 weeks). Contra-actions and how to identify and treat. Record all aftercare advice on record card.

Home care advice: Products to use at home (non-oily make-up remover, soothing antiseptic lotion for eyebrow shaping), removal of make-up around the eye area, further treatment recommendations.



Skin sensitivity/allergy alert test (record results): Accurately record all products and site of patch test on record card, obtain client signature and date.

Skin sensitivity/allergy alert test (interpret results):

Positive – red, itchy, irritated, swelling, sore.

Negative – no change to skin.

Carrying out patch/allergy alert test:

Cleanse area (either crook of elbows or behind ears), apply each product to the area with a cotton bud, allow to dry, leave on minimum of 24 hours, explain positive and negative reactions, (remove product with damp cotton wool. If positive reaction experienced – record products used and where placed, on the record card with date.

Importance of sensitivity/allergy alert test: Follow manufacturers' instructions to prevent allergic reaction – if not carried out invalidation of insurance policy.

Learning outcome 2: Be able to provide shaping and colouring eyebrow treatments

Client treatment needs:

Evaluating the shape: Realistic and achievable to client's natural shape (angular, arched, straight, thin, thick), growth pattern, age of client, cultural factors, fashion, face shape, consideration of any correction for eye shape.

Benefits – eyebrow shape: Removal of superfluous hair, enhance natural eyebrow, enhance eye make-up, and give definition to the face.

Assessing for eyebrow tinting:

Colour requirements, realistic and achievable, age of client, client's normal make-up, hair colour, eye colour, cultural factors, and skin tone.

Benefits – evebrow tinting:

Add colour, define eyebrows, holidays and special occasions, clients who do not wear make-up, clients who swim or do sports.

Examples of additional eyebrow treatments available: lamination, shaping, (tweezing, waxing, threading), Tinting (micro-pigmentation/microblading).

Products for eyebrow shape: Skin cleanser, soothing/antiseptic lotion.

Products for eyebrow tint: Non-oily eye make-up remover, toner, petroleum jelly, tint (all colours), peroxide, skin stain remover.

Tools for eyebrow shape:

Sterilised tweezers (slant, claw, pointed), orange wood stick (for measuring), eyebrow brush/mascara wand, sterilised scissors, eyebrow pencil, eyebrow powder, sharpener, ice pack, skin warming (heated towel, warmed cotton pads).

Tools for eyebrow tinting: Spatula, orange wood stick or brush, mixing bowl, eye pads or eye shields.

Equipment: Headband, towel to protect client, magnifying lamp, eyebath, couch (semi-reclined), trolley, bowl, mirror, disposable gloves, jar or vessel for tweezers, cotton buds, tissues.

Treatment technique – eyebrow shaping:

Measuring – use orange wood stick, measure against inner eye and outer eye, record excess hair.

Cleanse – each eyebrow with skin cleanser, brush eyebrow with mascara wand or eyebrow brush.

Tweezers – stretch skin, remove with hair growth, wipe removed hairs on to tissue/cotton wool, apply pressure to minimise discomfort.

Soothing antiseptic lotion – damp cotton wool, use ice pack for excessive swelling or erythema, brush eyebrows into shape. Show client result.

Face shapes to consider: Oval, round, long, square, heart, diamond.



Treatment technique – eyebrow tinting:

Petroleum jelly – remove product with spatula, apply with orange wood stick or disposable brush to skin surrounding brow, apply to both eyebrows, and avoid hair.

Tint – mix tint according to manufacturers instructions and eyebrow tinting protocal, use mixing bowl, mix using brush or orange wood stick, use immediately (follow manufacturer's instructions).

Application – apply evenly, from root to tip to first eyebrow, apply to second eyebrow.

Removal – Remove tint according to manufacturers instructions and eyebrow tinting protocal, show client result, if not dark enough tint can be reapplied.

Contra-actions: Establish is it is an expected reaction or an unexpected/adverse reaction.

In the case of expected reactions – provide immediate post-treatment aftercare and advice for homecare immediately following treatment.

In the case of an unexpected/adverse reaction – discontinue treatment, take remedial action, record unexpected/adverse reaction, advise on homecare and how to access remedial medical care if required.

Possible expected reactions – mild erythema, mild swelling.

Possible unexpected/adverse reactions

sensitivity or burning sensation,
 hyperaemia, urticaria, abrasion, eyebrow
 hair loss.

Staining caused by tint left on the skin

 use skin stain remover, actions taken recorded on record card.

Evaluation: Client expectations, client satisfaction, implications of incorrect application, visual, verbal, written feedback, repeat business. Record outcomes and feedback on client record card.

Factors to consider: Existing eyebrow shape, hair growth pattern (direction of hair, hair loss), hair colour, face shape, features, skin colour, eye colour, any adverse skin and eye conditions, client expectations, facial piercing, contraindications, age, previous treatments, fashion trends and cultural factors.

Hair type: terminal, vellus.

Hair classification: straight, curly, very curly.

Hair structure: Arrector pili muscle, hair follicle, inner root sheath (Henle's layer, Huxley's layer, cuticle layer), outer root sheath, vitreous membrane, connective tissue sheath, root (bulb, matrix, dermal papilla), sebaceous gland, shaft (medulla cortex, cuticle).

Hair functions:

Eyebrows – cushioning, protection, prevention of sweat running into eyes.

Skin:

Epidermis – basal cell layer (stratum germinativum), prickle cell layer (stratum spinosum), granular layer (stratum granulosum), clear layer (stratum lucidum), horny layer (stratum corneum).

Dermis – blood and lymph supply, fibroblasts – collagen, elastin, hair, sebaceous glands, arrector pili muscle, dermal papilla, sweat glands (eccrine and apocrine), sensory nerve endings.

Hypodermis – subcutaneous layer, adipose tissue, adipocytes.

Functions of the skin – protection, heat regulation, absorption, secretion, elimination, sensation, formation of vitamin D, melanin production, process of keratinisation.

Examples of diseases and disorders of the skin, hair and eyes: Conjunctivitis, Styes, blepharitis, ringworm, impetigo, boils, scabies, headlice, folliculitis, watery eyes, milia, eczema, psoriasis, dermatitis, ingrowing hairs.

Chemical process – tinting: Tint and peroxide mixed, chemical reaction, cuticle scales lifted, small particles of tint pigment enter cortex, pigment particles swell, pigment prevented from releasing from hair, oxidation process.