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Have We Really Made Strides With Inclusivity and Diversity in Aesthetics?

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In the summer of 2020, in the wake of the Black Lives Matter movement, many aesthetic brands, companies and institutions committed to becoming more inclusive. Now, almost three years later, we examine steps taken within the industry to promote diversity and inclusion of BIPOC (Black, Indigenous, and People of Color) communities. Here, leaders in the field share the notable strides that have been made and areas where there's still room to grow.

It seemed back then we were on the precipice of real change, but where are we now? For Birmingham, AL dermatologist Corey Hartman, MD, success is hard to measure in three short years. "It will continue to be an ongoing process," he stresses. "It was enlightening in 2020 to see companies doing the work and trying to make a difference some had [already] been doing while others just stepped it up."

Questions quickly arose of how sincere these efforts were and if they could be sustained. Not everyone was as committed as they said, or if they had good ideas they didn't implement them. "Companies like Allergan really did a good job," he adds. "They really were a leader in this. It was something that they committed to and they immediately went into action and created advisory boards."

Increased Representation

New York facial plastic surgeon Eunice Park, MD notes one of the biggest improvements is the increased awareness from patients. “There are more patients that have been underrepresented minorities in healthcare who are wanting to be heard,” she explains. “They haven’t had a real voice in the past. If you look at outcomes, access to health care, and medical complications, the data shows a real disparity.”

“There has been an increasingly loud voice from patients demanding more,” adds Oakland, CA plastic surgeon **Steven Williams, MD**. “I think that has been extremely beneficial because it really continues to put pressure on the system to improve.”

Inclusive Materials

Montclair, NJ, dermatologist Jeanine Downie, MD says one major step forward is the push to feature more skin of color in textbooks. “Having diverse pictures within those textbooks is so important, so that people can learn how different skin disorders and diseases look different in different races and ethnicities,” she explains. “There are also more skin of color courses at many of our meetings currently.”

“We have also made it a point as educators to teach medical students and residents with pictures of diseases in different skin tones,” says Phoenix, AZ dermatologist Dr. Karan Lal. “We now have special sessions at annual meetings focusing on skin of color. I for example am on the Diversity, Equity, and Inclusion committee for the American Society of Dermatologic Surgery and we have created mentorship programs to improve diversity within our specialty.”

Diverse Patient Outcomes

Testing how aesthetic treatments and medicines affect all skin types is one way that the industry is catching up to treating a diverse patient population. “They’ve started to do more in-depth clinical trials that focus on issues that affect people with skin of color and how we age differently,” Dr. Hartman explains, noting an uptick in participation of people with melanated skin in existing trials.

Leadership Roles

Aesthetic leadership associations have had low minority representation in the past, but recent appointments have shown a progress in diversity. Dr. Williams, the recent president elect of the American Society of Plastic Surgeons will be the organization’s first African American president. His mission, he says, is to ensure the organization meets the needs of all patient populations, including those who have felt underserved in the past.

Dr. Susan Taylor, founder of the widely recognized Skin of Color Society was recently elected as the first African American female president of the American Academy of Dermatology. She is the sixth female and first dermatologist of African American descent chosen as president-elect of the association. “I bring a wealth of knowledge and experience into this position, and I plan to use that to tackle some of the most pressing issues dermatologists are facing,” noted Dr. Taylor.

Room to Grow

While there is more work to be done, the key opinion leaders we spoke with say we're getting somewhere. "The discussions that we're having are about historical or systemic bias," says Dr. Williams. "We can make progress with diversity, better representation, and more opportunity for people in this field, however the challenge with answering those problems from the past is we won't see the change for a decade."

Dr. Downie says eventually, inclusion and equity should be seen as important in terms of generating higher revenue for companies. "These are my hopes for the future because we are unfortunately not here yet," she says.

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