

Multidisciplinary Impact and Ethical Response to Skin Bleaching and Colorism

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To the Editor:

When encountering patients from diverse cultural backgrounds, dermatologists often face scenarios where individuals express concerns about skin issues linked to the use of skin bleaching products. Not uncommonly do we see women of African or Asian descent presenting with skin discoloration and irritation, as well as a history of use of skin bleaching products due to their common use in native communities. Although seeking assistance for their skin disease, may intend to continue using skin bleaching products due to having never experienced any issues with them in the past.

Given the cultural background and family practice of using skin bleaching products to maintain a "brighter skin" complexion, a multidisciplinary approach is warranted. This approach will allow us to address the complex interplay of the cultural, psychological, social, and ethical factors involved with this dilemma, utilizing the principle of beneficence. By engaging professionals from various fields, we can create a more comprehensive and effective strategy. This collaborative effort ensures that our interventions are culturally sensitive, socially responsible, and ethically sound, ultimately leading to more meaningful and sustainable outcomes for patients facing similar challenges.

Psychologists can offer significant contributions in addressing skin bleaching by focusing on the psychological and emotional aspects of this problem. Many individuals who engage in this practice suffer from body dysmorphic disorder and low self-esteem.¹ Cognitive-behavioral therapy (CBT) can help these patients develop a healthier self-image and cope with societal pressures. Dermatologists are also essential to achieving non-maleficence, providing safe skincare alternatives, and educating patients about the risks of bleaching. By working together, these professionals can create comprehensive treatment plans that address both the psychological and dermatological concerns related to skin bleaching.

Public health professionals and dermatologists can both address skin bleaching by combining their expertise in community health and medical care. They can develop guidelines for other

healthcare providers to recognize and address skin bleaching practices among their patients. This can include pamphlets on identifying signs of skin bleaching, understanding the cultural and psychological motivations behind it, and providing appropriate counseling and treatment options. By educating primary care physicians, nurses, and other healthcare workers, this initiative ensures a consistent and informed approach across different levels of healthcare. This comprehensive understanding enables providers to offer empathetic and culturally sensitive care that will guide patients towards both autonomous and safe skincare practices.

Religious leaders such as rabbis, imams, and priests can play a crucial role in addressing colorism, which is a driver of this skin bleaching. Colorism, the preference for lighter over darker skin, affects many communities and has a multitude of historical roots. Faith leaders have platforms in their communities that they can leverage to address these potentially harmful beliefs. Studies show that religious leaders can influence health behaviors not only on an individual level but also on the greater community.² Faith leaders can catalyze positive changes in skin health attitudes and practices within their communities by incorporating messages of justice that promote the acceptance of all the diverse skin tones.

CONCLUSION

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