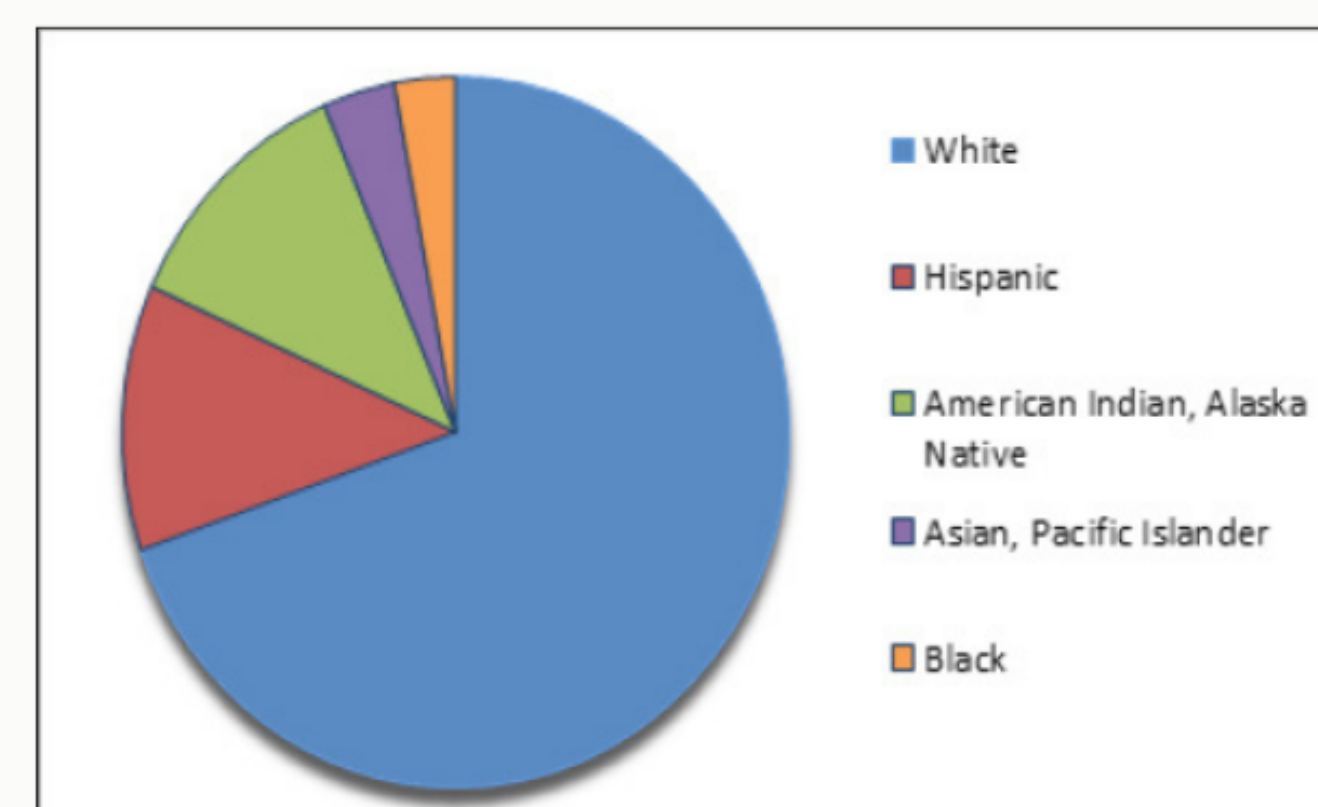


## Introduction

Inequities in dermatologic health outcomes exist at every level of care delivery including: disease prevention, screening, diagnosis, and treatment.

Despite significantly lower incidence of skin cancer, African Americans are diagnosed at later stages with greater degrees of lymph node involvement, leading to **disproportionate mortality** when compared to lighter skinned individuals.

### The Facts



Incidence of Skin Cancer by Race/Ethnicity

- 5- year melanoma survival rate for:
  - African Americans --> 71%
  - Caucasians --> 93%
- Squamous cell carcinoma is the most common skin malignancy among African Americans.
- It is more difficult to detect skin cancer in African Americans, Asians, Filipinos, Indonesians and native Hawaiians because 60-75% of tumors arise on areas of less pigmented skin that are not usually exposed, unlike Caucasians where skin cancers arise in UV exposed skin.

Frequently used medical education materials have significantly smaller percentages of skin of color images as compared to lighter skin.

Studies have subsequently identified greater visual diagnostic accuracy of skin conditions in lighter skin than in darker skin by U.S medical students.

**OUR MISSION?** To address the theory that increasing exposure to skin of color pathology within medical education and training will help to reduce the disparity that exists.

## Methods

A cross-sectional electronic REDCap-administered survey has been designed and distributed to all dermatology residents in US-based ACGME-accredited programs as of August 2022. Participants are asked about their own basic demographics (including gender, racial and ethnic identity, and training level) and about their programs' (including geographical location, proportion of patients of each Fitzpatrick skin type, and whether their program has a dedicated skin of color clinic).

This data will be correlated with the participant's diagnostic accuracy of corresponding images of common dermatologic conditions in lighter and darker skin.

It is imperative to establish an evidence-based understanding of the factors associated with dermatologic clinical acumen among patients of all skin tones.

Such knowledge can then be used to implement or expand upon existing dermatologic curricula within medical schools and residency training programs to ultimately minimize the disparity that exists and **provide equitable dermatologic care to all.**

## Objectives

- To understand the factors behind U.S dermatology resident diagnostic accuracy of characteristic skin conditions in darker skin tones versus lighter skin tones in order to inform medical education and training curricula.

## The Future

By 2044, minorities will constitute **greater than 50%** of the U.S. census. It is necessary now more than ever to address this disparity.

**Education is the KEY!** Education of at-risk individuals themselves AND their health care providers about the unique dermatologic concerns and needs of darker skinned individuals is of great importance. The motive behind this research project is to address whether increased exposure to skin of color pathology within residency training leads to higher diagnostic accuracy of skin conditions in darker skinned individuals.

Dermatological organizations such as the Skin of Color Society, Women's Dermatologic Society, International League of Dermatological Societies, and many more are all taking initiative in addressing the lack of diversified education, research, care, and leadership within the field of Dermatology.

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