

Assessing Pediatric Dermatology Access for Black Patients with Skin Disease

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BACKGROUND

Racially minoritized (Black, Hispanic, American Indian/Alaska Native (AIAN)) youth face unique barriers accessing dermatology care.

The negative effects of untreated skin disease disproportionately impact youth from racially and ethnically minoritized communities:

- Poorer quality of life
- Greater school absenteeism
- Higher number of visits to control extensive disease

We characterized how often minoritized youth access pediatric dermatology via the PEDSnet national database.

METHODS



PEDSnet database = A national pediatric learning health system composed of multiple children's hospitals

Our study included PEDSnet patients who were diagnosed with a skin condition

We extracted the following patient data:

- Demographics
- Skin diagnoses
- Healthcare (specialty care) engagement
- Rx history

RESULTS

Figure 1. Percentage of patients with skin disease who *did not* receive care from a dermatologist, stratified by race/ethnicity. (NHPI: Native Hawaiian and Pacific Islander; AIAN: American Indian and Alaska Native)

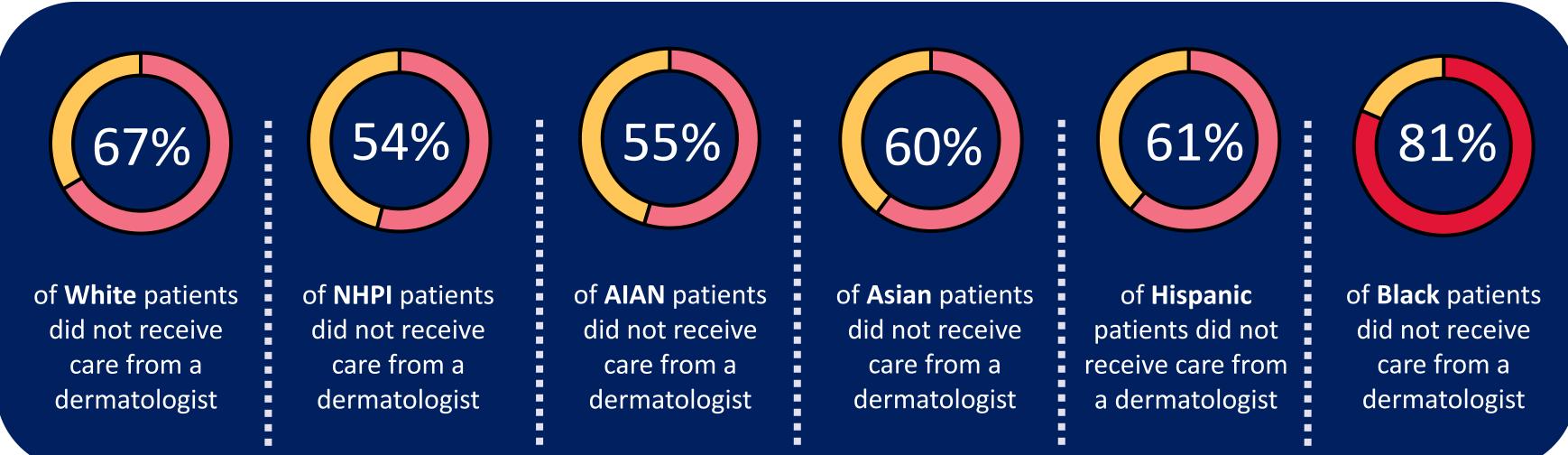
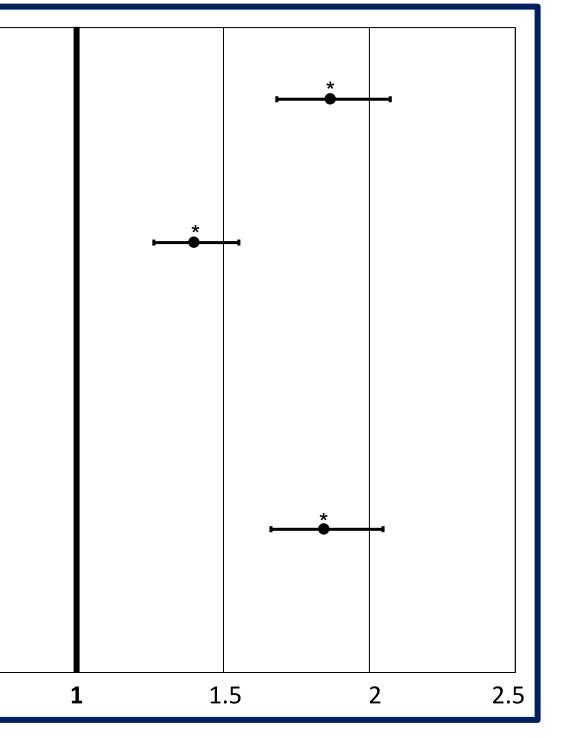


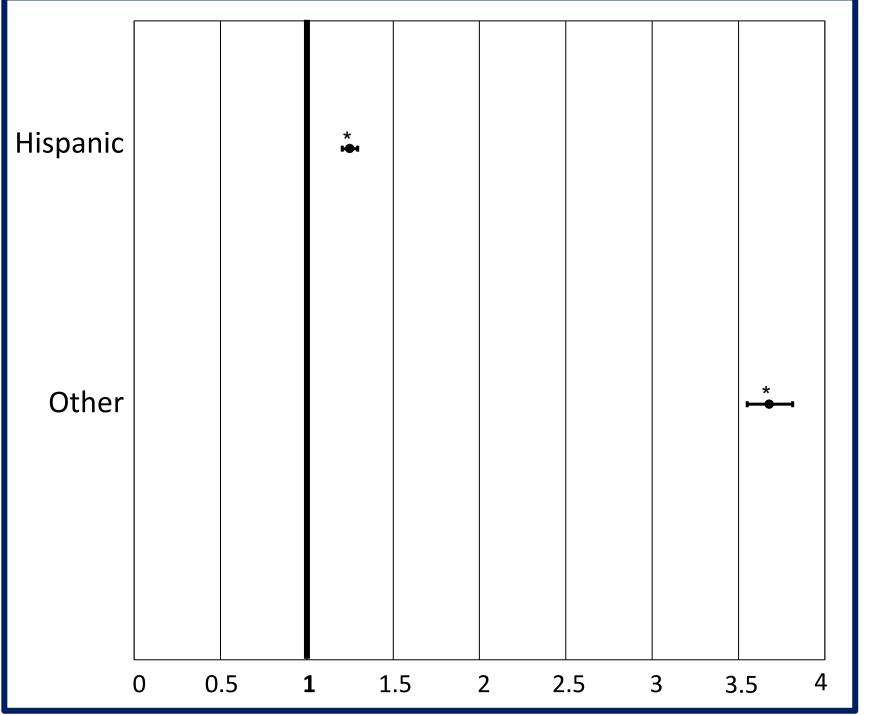
Figure 2. Likelihood of seeing dermatology, stratified by race. "White" race is reference. * = statistically significant difference

AIAN		
Asian		
Black		⊷ ••
NHPI		
	0	0.5

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> Figure 3. Likelihood of seeing dermatology, stratified by ethnicity. "Non-Hispanic" ethnicity is reference. * = statistically significant difference.







CONCLUSIONS

Most notably, 81% of all Black patients with skin disease did not receive care from a dermatologist.

Black patients with a skin condition are onethird as likely to see dermatology.

There are ongoing disparities in receiving dermatology care, past studies suggest:

- Inadequate familiarity in the delivery of culturally competent dermatology care
- Workforce shortage
- Barriers related to socioeconomic status, language proficiency, geographic variation

IMPLICATIONS

There are substantial differences in pediatric dermatology access for racially minoritized patients.

Future directions include further quantitative investigation within PEDSnet & exploring why youth from racially minoritized communities access pediatric dermatology care less.

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