Landmark global study reveals critical inequities in access to dermatological care

First comprehensive global assessment by the International League of Dermatological Societies (ILDS) and L'Oréal Dermatological Beauty and spans 158 countries and 97% of the world's population.

Only one in six countries worldwide has enough dermatologists to meet the healthcare needs of its population, with wealthier nations almost nine times more likely to have adequate dermatology workforce levels versus lower-income countries, according to the first comprehensive global assessment of access to skin health.

Published in JAMA Dermatology, the Global Access to Skin Health Observatory Study, a collaboration between the International League of Dermatological Societies (ILDS) and L'Oréal Dermatological Beauty, examines the distribution of dermatologists alongside barriers to accessing dermatological care, training, and specialist services across 158 countries, representing 97% of the world's population.

More than two billion people worldwide live with skin disease, one of the most common health conditions globally and among the top ten leading causes of disability. Yet 74% of countries report that skin health is not a national government priority. The Study supports implementation of the World Health Assembly's 2025 Resolution on Skin Diseases as a Global Public Health Priority, providing data to help move from commitment to action.

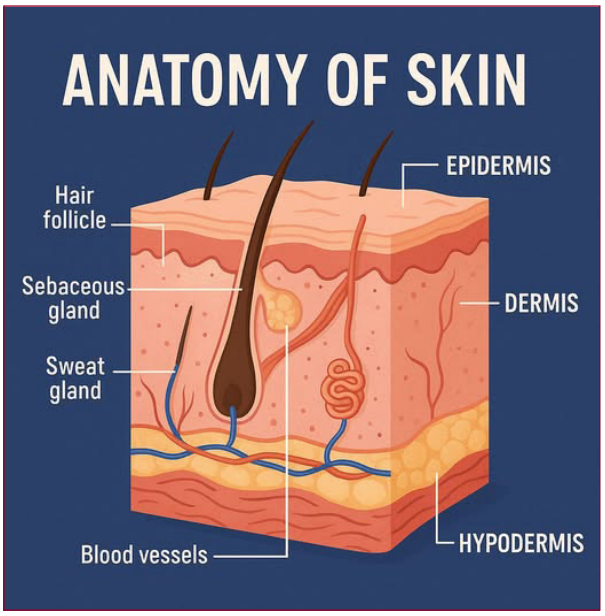
A global shortage of dermatologists

The Study establishes an evidence-based benchmark for the dermatology workforce needed to provide adequate care. Globally, there are an average of just 2.66 dermatologists per 100,000 people, compared with the 5.63 per 100,000 the Study estimates are needed for adequate care, leaving the vast majority of countries over 80% below the benchmark.

The disparities are particularly stark between higher- and lower-income countries. Dermatologist density ranges from just 0.37 per 100,000 people in low-income countries to 5.05 in high-income countries. No countries in Africa or South-East Asia currently reach the benchmark.

The scale of the disparity can be seen in countries with similar populations. Australia and Niger each have around 27 million people, yet Australia has more than 600 dermatologists, while Niger has just eighteen. Similarly, Japan and Ethiopia each have populations of around 130 million, but Japan has more than 7,000 dermatologists, compared with around 200 in Ethiopia.

Access to specialised services is also severely limited in economically disadvantaged countries, with an estimated



Skin anatomy

90% reporting inadequate access across dermatological subspecialties, including paediatric dermatology, dermatological surgery and dermatopathology.

Dr. Esther Freeman, the Study's Principal Investigator, Vice Chair of the International Foundation for Dermatology (IFD), and Associate Professor of Dermatology at Harvard Medical School said: "This is the first time we are turning anecdote into data we can act on. The Global Access to Skin Health Observatory gives us, for the first time, a truly data-driven view of what access to care looks like for the billions of people living with skin disease around the world. Where you live should not determine your access to skin health but today, it does. Our job is to identify these gaps and work together as a global community to address them."

A growing crisis of dermatological deserts: where you live can determine your access to care

The inequalities are not only between countries, but within them. Globally, 79% of dermatologists are based in urban areas, rising to 91% in low-income countries, leaving rural and remote populations significantly underserved. This distribution can lead to "dermatological deserts" or areas with severely limited access to skin health services.

Access is further constrained by the concentration of dermatologists in the private sector, limiting availability for patients reliant on public health systems.

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Overall, 42% of countries report poor or extremely inadequate access to dermatological care, rising to around two-thirds among the world's lowest-income countries. Critically, the burden of skin disease is highest precisely where access to care is lowest.

Non-specialists filling the gap

Where dermatologists are absent, care frequently falls to primary care physicians, nurses, pharmacists and community health workers. Primary care physicians often have equal or greater responsibility for diagnosing and treating skin conditions, despite many non-specialist providers receiving little or no formal dermatology training.

This task-shifting reflects widespread workforce shortages: 89% of low-income countries and 94% of African countries report insufficient provider capacity. At the same time, professional standards for dermatologists are largely consistent worldwide: 89% of countries require both a medical degree and formal dermatology residency training. This suggests inequalities are being driven by systemic barriers to expanding the dermatology workforce rather than differences in professional qualifications.

The Study also identifies significant gaps in dermatological education. In the African region, approximately half of countries (46%) have no dermatology training programs.

From evidence to action

The findings identify concrete opportunities for change, including expanding regional dermatological training programmes, upskilling frontline healthcare workers, and leveraging AI and telemedicine to bring diagnosis and specialist expertise for diverse skin tones closer to underserved patients.

The Study data is housed within the Skin Observatory Data Explorer, an interactive platform enabling ministries of health, organisations, researchers and other stakeholders to access and analyse the data. Users can filter information by country, region and other variables, share insights and download information for reports, presentations and strategic planning. New data will be added over time, enabling the Observatory to track progress and support long-term change. The full results and interactive Skin Observatory Data Explorer are available at skinobservatory.org

Professor Henry W. Lim, President of the ILDS, said: "The findings of the Study support the implementation of the World Health Assembly Resolution on Skin Diseases as a Global Public Health Priority. The Study will continue to grow, with data added over time, helping us track progress and support long-term change. With skin diseases among the top ten leading causes of disability worldwide, we invite all stakeholders to work with us to turn this vital knowledge into positive outcomes for those living with skin diseases."

Myriam Cohen-Welgryn, President of L'Oréal Dermatological Beauty, said: "As the world leader in dermocosmetics, we have both the power and the responsibility to act. L'Oréal Dermatological Beauty is committed to increasing access to skin health in the world and supporting the dermatologists and healthcare workers driving change around the world because access to skin health should be a right, not a privilege. We are proud to support the Global Access to Skin Health Observatory through our Act For Dermatology programme."



Large pigmented basal cell carcinoma,
Courtesy of Richard P. Usatine, MD

The Global Access to Skin Health Observatory is a collaboration between the ILDS and L'Oréal Dermatological Beauty through the L'Oréal Act For Dermatology programme.

About the International League of Dermatological Societies (ILDS)

The ILDS has 242 member organisations across 113 countries, representing more than 170,000 dermatologists and other dermatology professionals worldwide. It holds 'official relations' status with the World Health Organization (WHO) and champions the inclusion of skin health in global health policy – promoting education, clinical care, research and innovation globally.

About the International Foundation for Dermatology (IFD)

The IFD was established by the ILDS to improve skin health in underserved regions of the world. It supports projects all over the world including Africa, the Asia Pacific region and South America. The IFD is critical to helping the ILDS achieve its goal of 'Skin Health for the World.'

About L'Oréal Dermatological Beauty

L'Oréal Dermatological Beauty is dedicated to pioneering sustainable and life-changing dermatological solutions for all. This mission is brought to life through its portfolio of five iconic, complementary brands: La Roche-Posay, CeraVe, Vichy, SkinCeuticals, and Skinbetter Science. Leveraging unparalleled scientific leadership and long-term partnerships with healthcare professionals worldwide, LDB delivers advanced skin and haircare solutions tailored to every individual need, from addressing skin pathologies to enhancing aesthetic well-being. L'Oréal Dermatological Beauty is committed to increasing access to skin health worldwide through its programme L'Oréal Act For Dermatology, a €20 Million investment in global skin health initiatives.