

Socioeconomic Impact of Ethnic Cosmetic Surgery: Trends and Potential Financial Impact the African American, Asian American, Latin American, and Middle Eastern Communities Have on Cosmetic Surgery

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ABSTRACT

The popularity of cosmetic surgery has increased around the world, and whereas in the past, the patient base consisted of mainly Caucasian individuals, interest in this field has grown among persons of varying ethnic backgrounds. Growing interest enables ethnic populations to contribute to the economic growth of the cosmetic surgery industry and impact the direction of the field in the future. Minority populations accounted for 22% of the cosmetic procedures performed in 2007, with the most common being liposuction, Botox[®] generic botulinum toxin type A (Allergan, Inc., Irvine, CA), and chemical peels. Ultimately, changes in the population characteristics of the plastic surgery patient will alter the techniques of plastic surgeons that treat ethnic patients to cater to their physical differences. Factors such as increased cultural acceptance of plastic surgery, growing ethnic populations, and media emphasis on personal appearance have contributed to the increase in minorities seeking out cosmetic surgery. Escalating economic power within these populations has created an additional potentially lucrative market for interested plastic surgeons.

KEYWORDS: Minority, ethnic, economic, cultural, social, acceptance, cosmetic, population, financial, African American, Latin American, Caucasian, Asian American, Middle Eastern

The popularity of cosmetic plastic surgery has drastically increased over the past 10 years. This is mainly due to the fact that the public has grown more comfortable and accepting of cosmetic surgical procedures. The American Society of Plastic Surgeons (ASPS) recently reported that cosmetic surgical procedures have increased

142% and nonsurgical procedures have increased 743% since 1997.¹ Plastic surgeons nationally and locally say that several factors are behind the trend. Increased media exposure to TV shows such as, "Extreme Makeover" and "Dr. 90210" has influenced the overall growing interest in cosmetic surgery and has sparked discussions in living

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Cosmetic Surgery in the Ethnic Population: Special Considerations

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rooms across the nation. In addition, cosmetic surgery is often viewed as a luxury comparable with that of purchasing a car or taking a costly vacation. In support of this, the American Academy of Cosmetic Surgeons' 2006 Consumer Perception Survey revealed that given the necessary disposable income, 46% of surveyed consumers would prefer cosmetic surgery to luxuries such as expensive vacations and high-end vehicles.²

It is of no surprise that with the growing popularity of cosmetic surgery in the general population, its interest has trickled over to various ethnic populations. The African American, Latin American, Asian American, and Middle Eastern communities have developed a growing attraction to this field and have the potential to provide an enormous contribution to this industry in the future. According to the American Society for Aesthetic Plastic Surgery (ASAPS), minority patients accounted for 22% of the 11.7 million cosmetic procedures performed domestically in 2007.¹ Latin American individuals represented 8.8% of that group, African Americans represented 6.3%, Asian Americans represented 4.5%, and all other groups represented 1.9%. The ASAPS president, Richard A. D'Amico, states that the plastic surgery patient profile is changing, and whereas the majority of patients remain Caucasian women, cosmetic plastic surgery procedures were performed on almost as many Latin American patients as on male patients.³ As a result of this surge, minority patients requesting cosmetic procedures are becoming an increasingly important patient base in aesthetic surgery.

Moreover, the ASAPS reported that between 2006 and 2007, ethnically oriented cosmetic surgical procedures grew at almost twice the rate of cosmetic surgical procedures at large (annual increases of 13% and 7%, respectively). This was primarily driven by strong growth in procedures customized for Latin Americans, African Americans, and Asian Americans (Table 1).^{3,4}

The most common procedures sought out collectively across these groups were liposuction, Botox[®] botulinum toxin type A, and chemical peels. Rhinoplasty was the most common in African Americans and in Middle Eastern ethnic groups, breast augmentation

for Latin Americans, and blepharoplasty for Asian Americans. Increases in these demographic categories are considerably higher when compared with ASAPS data from 2000. Since then, cosmetic plastic surgery procedures have increased 173% in Latin Americans, 129% in African Americans, and 246% in Asian Americans.³ The ASAPS largely attributes these increases to improved public awareness and acceptance of the field (and its benefits) along with escalating economic power within ethnic groups.^{3,5}

PATIENT MOTIVATIONS

Historically, cosmetic surgery has not been as widely accepted in ethnic populations. This is mainly because in the past, many ethnic individuals believed that cosmetic surgery equaled sacrificing aspects of their ethnicity. However, for minorities, cosmetic surgery is no longer viewed as a sign of self-hatred or a rejection of racial identity.⁶ In fact, the goal of many ethnic women has shifted and is now to enhance their natural ethnic beauty.⁷ Non-Caucasian patients presenting for cosmetic surgery tend to have similar motivations and desires as those of their Caucasian counterparts, such as diminishing the appearance of aging, improving body contour and definition, enhancing symmetry, and modifying tissue volume. In fact, many of the commonly requested procedures do not vary significantly with race (i.e., liposuction, breast reduction, Botox, and injectable fillers). However, procedures involving the nasal and periorbital areas are more ethnically sensitive in nature. Therefore, techniques used for these structures should improve aesthetic appearance without distorting ethnic identity.⁸

Traditional Caucasian-centered techniques blend well with the surrounding Caucasian features; however, when applied to the ethnic patient, they tend to distort natural structural relationships and damage ethnic identity. Plastic surgeons offering ethnically specialized procedures should aim to coordinate aesthetic ideals with cultural and patient-specific preferences. Renato Saltz, M.D., of the ASAPS Public Education Committee, articulated that "being aware of cultural differences is more than just speaking the language; it's also about understanding how patients want to enhance their natural beauty. For example, South American women typically want smaller breasts and larger buttocks than the average Caucasian American female."⁹

Improvements in the technical aspects of ethnic cosmetic surgery and the greater willingness of plastic surgeons to tailor their care to minorities have synergistically enhanced the options for minority patients while reducing their risk of ethnically incongruent outcomes. Therefore, plastic surgeons recently have made more of an effort to preserve ethnicity with varying surgical techniques in cosmetic procedures such as rhinoplasty and blepharoplasty.

Table 1 Minority-Specific Cosmetic Procedure Volume, ASAPS, 2007

Race	Number of Cosmetic Procedures (2007)	Percentage Increase in Procedures, % (2006–2007)
Latin American	1,011,000	8
African American	847,800	8
Asian American	767,800	26

Source: American Society of Plastic Surgeons. Cosmetic plastic surgery procedures for ethnic patients up 13 percent in 2007. Available at: http://www.plasticsurgery.org/media/press_releases/Cosmetic-Plastic-Surgery-Procedures-for-Ethnic-Patients-Up-13-Percent-in-2007.cfm. Accessed April 1, 2008.

Table 2 U.S. National Population Characteristics, 2006

Race	U.S. Population (millions)	Percentage of total U.S. Population, %	Population Growth, % (July 2005 to July 2006)	Median Age (years)
Caucasian	198.7	66.4	0.26	40.5
Latin American	44.3	14.8	3.4	27.4
African American	40.2	13.4	1.3	30.1
Asian American	14.9	4.98	3.2	33.5

Source: Bernstein R. Minority population tops 100 million. U.S. Census Bureau News. Available at: <http://www.census.gov/Press-Release/www/releases/archives/population/010048.html>. Accessed February 20, 2008.

Table 3 U.S. National Population Income Distribution

Race	Per Household		Per Capita	
	Median Income, \$ (2006)	Percentage Growth in Real Median Income, % (2005–2006)	Median Income, \$ (2006)	Percentage Growth in Real Median Income, % (2005–2006)
Caucasian	52,423	0	30,431	1.8
Latin American	37,781	1.7	15,421	3.1
African American	31,969	0.3	17,902	2.7
Asian American	64,238	1.8	30,474	8.0

Source: DeNavas-Walt C, Proctor BD, Smith J. Income, poverty, and health insurance coverage in the United States: 2006. U.S. Census Bureau, Available at: <http://www.census.gov/prod/2007pubs/p60-233.pdf>. Accessed April 7, 2008.

POPULATION GROWTH

Reports from the U.S. Census indicate that as of 2006, Latin Americans compose the nation's largest ethnic minority group (Table 2). They also represent the nation's fastest growing ethnic segment. In 2006, almost half of the U.S. national population growth was composed of Latin American origin. Furthermore, the U.S. Census estimates that by 2050, the U.S. Hispanic segment will grow to over 102 million and comprise 24% of the nation's population.¹⁰

The second largest ethnic minority group, African Americans, grew more slowly, but still at a rate faster than that seen with Caucasians. Census estimates expect this group to increase to 26 million people. The Asian American ethnic segment demonstrated strong growth in 2006 and is estimated to reach 33.4 million by 2050.¹¹ This surge in non-Caucasian populations is likely to occur primarily in urban neighborhoods and their surrounding suburbs, where many plastic surgery practices are located.¹² The 2006 U.S. Census data also identified Asian Americans as the population with the highest median income and largest annual income growth rates (Table 3).¹³ Similarly, the 2000 U.S. Census identified those of Middle Eastern origin with median earnings exceeding the national medians (\$41,687 vs. \$37,057 for men; \$31,842 vs. \$27,194 for women).¹⁴

Wealthier minority groups are likely to display greater demand for cosmetic surgery given the positive correlation between disposable income and luxury purchases (i.e., cosmetic surgery). Economically, the ethnic demographic population has made a significant contri-

bution to the cosmetic industry. As previously mentioned, ethnic persons accounted for ~21 to 22% of all cosmetic surgical procedures in 2007. In that year, about \$13 billion was grossed for all cosmetic procedures reported to the ASPS. Therefore, by a crude estimation, it can be inferred that the ethnic population possibly contributed approximately \$2.86 billion to this industry. Demographic shifts have also rendered ethnic populations more diverse, and minorities have become more affluent, thus giving them greater expendable incomes that are potentially applicable toward cosmetic procedures.¹⁵

CONCLUSION

Currently, 34% of the nation's population is composed of ethnic minorities, and these groups represent the fastest growing segments in the United States. These minority groups wield significant economic clout and are positioned to continue their exponential economic growth with resulting expansion in disposable income. According to studies by institutions including the Selig Center (University of Georgia, Terry College of Business), expected growth in buying power of these minorities will continue to far outpace that of the Caucasian population.¹⁶ Plastic surgeons positioned to capture these growing markets must pay attention to the concerns of these minority groups and cater to their needs accordingly.

Mainstream forces continue to broaden the public's understanding of the options and benefits of plastic surgery while erasing the stigma once associated

with it, both for traditional and ethnic patients.¹⁷ Increasing public acceptance of cosmetic surgery, expanding media coverage, and a greater number of general cosmetic procedures as well as ethnically sensitive procedures have all contributed to the explosive growth seen in the field. This increasing awareness and prevalence increases rates of first-hand exposure and encourages others to consider undergoing these procedures. The rapid growth of these ethnic communities, their escalating economic power, and their increasing awareness and acceptance of plastic surgery techniques have created burgeoning markets for ethnic plastic surgery that are likely to surpass other cosmetic modalities.

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