

# Does Thailand's Society Believe That Having Facial Acne is a Problem? A Qualitative Data from In-Depth Interviewing Thai Young Adults in Bangkok

Nunthakun Muansong\*

\*(Mahidol University International Demonstration School, Nakhon Pathom, Thailand

Email: nunthakun.21@gmail.com)

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## Abstract:

Acne vulgaris is an inflammatory condition caused by the buildup of oil and dead skin cells within hair follicles, leading to whiteheads, blackheads, or pimples, and can significantly impact social and psychological well-being. In Thailand, perspectives on acne vary, especially within the context of Thai “sculptured” beauty standards, which shape specific views on acne. This study aims to understand how these perceptions influence Thai citizens' opinions and mindsets. This study uses qualitative research, which is an in-depth interview with 10 Thai citizens in Bangkok. The findings revealed that there has been a mutual agreement on the matter that acne appearing on themselves is considered as a negative consequence; however, it being on others is a natural occurrence and should be neutralized. As acne causes certain negative effects, participants decided it would be more beneficial to seek treatment by searching through the internet: advertisements for skincare and other alternatives. Thus, this study has the potential to be used as comprehensive information about acne to reduce misinformation, uplift citizens' mental health—especially to those who are new to the concept of acne—and to raise awareness on current misconceptions of acne.

*Keywords* — acne, attitudes, acne treatment, Thai society

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## I. INTRODUCTION

Could there be peculiarly unfair treatments and pessimistic opinions towards people with facial acne, specifically in Thailand? And could this lead to a drop in mental health? Possibly, because there are numerous Thai individuals who have misunderstood the causes of acne and what it is, eventually associating it to the lack of sanitation. Which indeed could lead to irrelevant jokes and commentating, corresponding to Thai culture, towards people diagnosed with facial acne, therefore lessening their self-esteem. Nevertheless, there are multiple Thai citizens who have a positive understanding of the topic [11]. Acne or acne vulgaris is defined as a disease found in the sebaceous gland, enhancing the development of

comedones referred as blackheads or whiteheads, in the clinical field. In which, it could evolve into inflammatory papules or pustules [2]. Referring to a paper written by the Department of Medicine, University of Western Ontario and Acne Research and Treatment Center, they supplied evidence upon the impact of Acne vulgaris on psychosocial health. By investigating qualitative data gained from case-control and cross-sectional survey, researchers concluded that acne is related to mental health as well as influencing self-esteem [10]. To understand Thai opinions towards acne and prevent its impact on the lifestyle of Thai people who have acne problems, attitude studies with qualitative data therefore need to be conducted and analyzed for the results for solving possible issues and further

intervention to prevent social issues toward acne as well as developing Thai mental health.

### **Perception and attitudes toward acne**

Yahya (2009) studied the rate of facial acne found amongst African teenagers, the reason being that study has not been conducted there. The main target participants were students within the age range of 11-19, in Kaduna, Nigeria. The applied method was a cross-sectional survey. The students who were randomly selected, by a particular sampling technique, were asked to answer a questionnaire which contained basic questions relating to their experience with pimples/acne, for example the period of pimple development, medical treatments etc. Once the survey was completed, the diagnosed participants were examined daily and each individual was arranged by the severity and presence of acne. The findings revealed that the rate of acne in Nigeria were as common as in other countries, however for severity it was fairly lesser. Another factor discovered was that ideas upon acne were fairly negative, making the participants unpleasant, even so it did not affect the scholars' lives. The author eventually suggested that the causes and treatments of acne should be targeted educationally and the awareness should be raised.

In addition, Su and colleagues (2015) studied the beliefs and perceptions of acne and its influence towards a person's mental health. The participants included 456 Singaporean students, where there were more female attendees than males. The method carried out was quantitative, where surveys were handed out to 3 institutions. Within the survey there were questions covering the subject of the effect of acne on social life. The findings revealed that more than 50% of the participants felt self-conscious and embarrassed by their facial acne. Towards the beliefs the individuals had, fortunately, the majority acknowledged the fact that acne was not transmissible. Moreover, plenty of the participants believed in the effectiveness of treatment and were satisfied with the outcomes. The authors implied that even though patients may have more accurate understandings about acne, it is still continuing to have psychosocial impacts on them. Nevertheless, with the present's beauty standards

society is increasingly aware of the situation. Thus, workshops upon this matter should be set up to promote patients to seek medical treatments.

### **The effects of acne on quality of life and social appearance anxiety**

Hosthota and colleagues (2016) studied the commonness of acne and its correlation with a person's quality of life, social appearance, anxiety and complementary alternative medicine (CAM) treatment methods. The major method carried out was a cross-sectional survey, where questionnaires were distributed amongst undergraduate and graduate students, in Turkey. The self-reported questionnaire consisted of 4 significant sectors; graphic description of acne characteristics, CAM questions, quality of life scale, and the social anxiety scale. The dependent variables were the 4 main subjects; the judgement of acne severity, the individual's quality of life, etc. Whilst, the independent variables would be the participants' characteristics; gender, age, sex, etc. The study revealed that the majority of the students agreed that the impacts and severity of acne complements their social anxiety, hence, physical appearances provide a first impression that could affect that individual's quality of life. Therefore, more than 50 percent of the students were irritated by acne prevalence. Nevertheless, there was not a defined relationship between CAM treatments and the participants' quality of life. The researchers suggested that future evidence and factual information should be brought upon this topic.

## **II. METHODS AND MATERIALS**

### **Study design and participants**

An online in-depth interview was conducted to collect qualitative data with a number of 10 participants among Thai adolescents who are raising and living in Bangkok, Thailand, from February 12, 2024 to May 25, 2024. Participants were asked about their perceptions, attitudes and experiences related to acne and their views toward people who suffer from acne in Thai society. Participants who were uncomfortable or unable to

answer questions from a predetermined list of interview questions were excluded from this study.

### **Ethical consideration**

This study was conducted with determination of research ethics involving human subjects as a significance. The study design and procedure were carried out in compliance with the international guidelines for human research protection as the Declaration of Helsinki, Belmont Report, CIOMS Guideline and International Conference on Harmonization in Good Clinical Practice (ICH-GCP). Respect for person, beneficence/non-maleficence and justice were taken into account. Snowball sampling was used to randomize volunteers and volunteers had to meet the qualifications of being Thai, over 18 years and willing to participate in the study.

### **Interview questions**

A list of in-depth interview questions was listed for use in interviewing participants. Participants were interviewed in-depth in Thai with questions covering three main issues: participants' attitude toward self with acne, participants' attitude toward others with acne and acne treatment preferred by participants including their experiences. The questions for participants' attitude toward themselves with acne issues were "What do you think about acne?", "Have you ever had acne problems?", "How do you feel about yourself when you have acne?", etc. The questions for participants' attitude toward others with acne issues were "How do you feel about others with acne?", "How do you feel about others who suffer from acne?", etc. The questions for participants' acne treatment experiences and their preferences were "How have you treated your acne?" "How effective is the acne treatment you choose?" "What methods would you like to use to treat acne in future?" and other questions related to their said experiences.

### **Qualitative data analysis**

A descriptive analysis was conducted to show the demographic characteristics of participants which included sex and age. For qualitative data, thematic analysis was used to

recognize and identify themes of the participants' responses. Responses were analyzed and organized into themes based on the frequency as provided by the participants. The themes were systematically organized with additional explanations as stated by each participant for description of their attitudes and experiences toward acne.

## **III. RESULTS**

### **Participants' characteristics**

A total of 10 randomized participants from snowball sampling of Thai young adults living in Bangkok, Thailand were recruited and collected their data in this study. The participants were Thai who were able to communicate and understand in Thai. They were 4 men and 6 women and their ages were between 23-28 years with an average of 25.2 years. All participants resided and domiciled in the Bangkok metropolitan area.

### **Participants' attitudes toward self with acne**

All 10 of the participants had negative opinions towards the occurrences of acne. Most of them are associated with hygiene, stress and self-esteem; with at least 2 participants agreeing with one another per category. Whilst, only one participant mentioned how having acne did not fit Thailand's beauty standard. On the contrary, one-fifth of the participants mentioned that it was personally concerning and unnatural for them to have these occurrences because normally they would have no-acne, clear skin. Moreover, one participant mentions comparing themselves to people who do not have acne and why they can not have fair skin.

### **Participants' attitudes toward others with acne**

Even though all 10 of the participants agreed that having acne on themselves was negative, they were neutral with others having it. Half of them said that it is normal human behavior. Furthermore, three-tenths of the participants empathize with other patients.

### **Acne treatment experience and preferences**

Within the answers of all 10 of the participants, 4 main treatment methods were stated including, meeting a doctor; letting them prescribe necessary medications, finding suitable skin care; including facial cream, face masks, dab creams, etc., participating in laser programs and taking oral-medication. From the 4-methods skincare seemed to be the most preferable, having 9 out of 10 participants mentioning it. Followed by doctor meet-ups, 6 out of 10, then oral-medication, 3 out of 10 and laser programs, 2 out of 10.

Four-fifth of the participants stated that the internet was the main channel of access. 3 main online channels on the internet would be Facebook, TikTok and Twitter. With TikTok having the highest popularity, 4 out of 8 mentions. Then, a tie with Facebook and Twitter sharing the 2 out of 8 mentions. Followed by a tie of having 5 participants per category, between either having a family member or a friend recommending, mainly dermatologists, to them. Finally, only one participant mentioned that their partner had suggested they find suitable skincare.

After participants had used their selected skincare, 6 out of 9 participants had positive feedback and outcomes. Whilst, only 1 had a negative response and the other 3 stated a neutral response. Furthermore, participants who chose to meet a dermatologist, all of them had a positive response.

Even though the majority of the participants had a positive response. If given the chance, 6 out of 10 of them would like to try alternative skincare treatments, such as other brand's cream, dab creams, etc. 3 out 10 would like to meet a dermatologist, if the acne worsens. The final 2 methods: making a clinic reservation and doing Rejuran had a tie of having 2 participants per category. Nevertheless, 2 out of 10 of the participants were still hesitant about this decision. The reasons for the decision and the advertising channels consisted of the internet, friends and colleagues, and on-site shops. Advertised through the internet at the rate of 7 out of 10. TikTok and Twitter being the most, 5 out of 10. Followed by Facebook at 2 and YouTube at 1. Considering the fact that a person could be

advertised by multiple platforms. Secondly, 4 participants' decisions were suggested by friends and colleagues. Finally, only 2 participants went on-site and were driven by the shop's sales.

### **IV. DISCUSSION**

This qualitative research investigated Thailand's societal beliefs on having facial acne, along with unique treatment methods. The findings of this study revealed that multiple participants had a negative attitude towards acne on themselves, especially associating it with hygiene, stress and self-esteem. Although they had negative views towards themselves, they were neutral with each other's facial acne. Furthermore, some participants empathize with those patients. It had been recorded that, 9 out of 10 participants decided to seek skincare treatments, by mainly searching through the internet. The participants mentioned that the results of the skincare products were fairly positive. However, 6 out of 10 desire to seek superior alternative skincare treatments; such as consulting a dermatologist, laser, Rejuran or even minimizing to consume counter-skincare, due to either slow, unfulfilling, neutral responses or high prices of current treatments.

As observed by the collected data, it was found that participants had a drop of self-esteem and self-confidence when they had acne. In the category of perspective towards self, it recorded that 1 out of 5 of the participants had gone through this experience or similarly with stress; where another 1 out of 5 of the participants had relevantly stated. To this circumstance, there has also been another study providing evidence that the major problem that acne has caused is the loss of self-confidence, on daily living activities. Wisuthsarewong and colleagues (2019) studied acne beliefs and treatment-seeking behavior among Thai teenager and adult acne patients. They found that almost 90 percent of their participants suffered from low confidence, being the highest, followed by beauty, embarrassment, social activities, working, depression, couple finding, etc. Moreover, a study of Su and colleagues (2015) that surveyed the relationship between acne and psychological impacts among Singaporean students also found this evidence. Over half of their

participants recruited revealed feeling embarrassed or self-conscious because of their acne. From these two empirical evidences, it can be seen that within society, especially Thai, this belief is significantly dispersed.

Moreover, it was found that the majority of the participants currently use skincare and over-counter drugs. Comparing this to another study which stated that participants, who consulted doctors, initially used vitamins and over-counter drugs to prevent acne [11]. Due to this evidence, it could be determined that Thailand's society uses over-counter drugs before visiting a doctor. In addition, evidence from finding, the reason being that the price is cheaper, there are more advertisements and it's rather easier to acquire. However, in the case of alternative treatments participants from this study also mentioned consulting a doctor, due to the fact that the current products are quite slow, ineffective and unfulfilling. This explanation is valid towards the other study as it correlates to their prior-acne treatment options. From the evidence provided, it can be determined that Thailand's society uses over-counter drugs before finding a doctor, if the results do not satisfy them.

Apart from the factors of the treatment itself, the ways of seeking could also be separated into 2 main sections; ones that are currently in use and alternative ones. Findings have determined that, ones that are currently in use, the participants' biggest influence would be from the internet and followed by their family and friends. While the alternative treatments mostly relied on the internet. This collected data was very similar to the other study, due to the fact that the highest source of information would be friends and digital media, even so, there is also a minute difference whereas the internet comes out as the highest source, in both current and alternative selections. This could be that the internet is more accessible and provides a well-rounded knowledge about acne, nevertheless another study stated that self-treatment using the internet does not have the most valid proper knowledge about it [7]. Since, the information is not proper and is very varied, it causes the treatment to become unsuccessful thus patients would visit a doctor once it is already unsuccessful.

Thus, it should be thoroughly processed and it is rather suggested to visit a doctor. Therefore, it can be concluded that Thailand's society relies mostly on friends and the internet.

As for the participants' views towards themselves and others, the results presented that every one of the participants view acne on themselves as a negative factor. However, when met with other people who too have acne, ten out of ten of the participants view it as a normal natural occurrence, and they often neutralize it. These results seem rather contrary due to the fact that one states that they are not pleased if they experience acne, but are neutral with others, even though both have acne. It could be that when acne appears on the participants themselves, as humans they may put higher importance towards themselves than others, and assuming that they are able see the acne everyday it enables them to focus on that miniature detail on their face causing a sensation to fix it and get treatment, as soon as possible. From the collected data, the attitude towards acne and their treatment methods could not be evaluated, since the differences between the two variables are not valid enough to be proven as evidence for their relationship and connections.

## **V. LIMITATIONS**

The limitations that were presented during this study included personal fundings, the amount of time, the accessibility to the participants, the limited numbers of participants and that it was carried out as qualitative research. Beginning with the topic of personal fundings, it disabled the study to expand and collect further groups of participants and the selected participants were recruited by using the snowball sampling method. This method was an efficient way to collect participants in a limited amount of time and suitable for this study, however it impeded the aspect of diversity. Furthermore, the chosen participants were from the same social group making the results rather complementary. Not only had it been a consequence from the factor of personal fundings, it was also due to limited accessibility towards a vaster participant pool. Another additional factor that had appeared was the amount of time spent on

data collection. This study's data collection length was conducted in a span of a month, therefore reducing the time required to search out for more participants.

## VI. RECOMMENDATION

From the limitations presented in this study, recommendations including new variables, a more diverse range of subjects, new sampling techniques and further correlation, could be developed. The new variables, such as inserting in the participants' familiarity of acne, awareness towards acne or personality types, could induce a larger number and more in-depth data for the analysis section. The variety of participants could also enhance the overall collection and analysis of data, since it could show more correlating and contrasting results, thus drawing out various conclusions. Onto the topic of sampling, another method that could be used is the simple sampling method, since it could reach and cover larger masses of participants; considering age and gender, and acquire a more diverse dataset.

## VII. CONCLUSION

In conclusion, the participants' attitudes toward two views; towards self and towards others, per participant were presented. There had also been a mutual agreement amongst the majority of the participants' views that acne appearing on themselves is considered a negative consequence, however it being on others is a naturally occurring incident and should be neutralized. Due to the negativity caused by acne, through every view,

participants decided to seek treatment by searching through the internet. Furthermore, it had also been said by some of the participants that the internet provides a variety of advertisements for skincare, along with their comparative alternatives, such as lasering, rejuvan, etc.

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