



# Global Regulatory Challenges in the Aesthetic Beauty Clinic Business

Siska Diana Sari<sup>1</sup>

<sup>1</sup>Faculty Of Law, PGRI University Madiun. E-mail: [siskadianasari@unipma.ac.id](mailto:siskadianasari@unipma.ac.id)

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### Corresponding Author:

Siska Diana Sari, E-mail:

[siskadianasari@unipma.ac.id](mailto:siskadianasari@unipma.ac.id)

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## Abstract

*Regulation of beauty clinic is very important to maintain patient's safety and wellbeing. In addition, it also involves physician and beautician licensing and certification. This regulation is intended to ensure competency and commitment to patient's health and safety, and beauty clinic should comply with the legal requirement for its operation, including getting licensed and certified needed, attending appropriate sanitation and cleanliness practices, ascertaining the safety of equipment and product used, and protecting patient's privacy and confidentiality. This regulation also help maintain reputation and trust in beauty clinic business entirely. Incompliance with regulation results in the unlawful action. The states in the world should protect the patients of esthetic beauty clinic as the form of legal guaranty and certainty as well as justice.*

## 1. Introduction

One of popular assumptions about beauty industry is that this industry exploits people's insecurity through featuring illusive beauty myth<sup>1</sup>. Beauty is a powerful force of nature that has captured and enraptured us forever. Every human being inherently knows what beauty means to them personally, yet its full essence is still elusive to the inquisitions of the greatest minds<sup>2</sup>. Trend and standard of beautiful women now are glowing white face, and thin and/or slim body. Research shows that 80% of Asian consumers consider skin whitening to be the most important property of skincare cosmetics, and more than 50% consider their anti-aging effect to be important<sup>3</sup>.

The legal aspects of beauty clinic businesses are regulated by the Consumer Protection

<sup>1</sup> Paula Black, *The Beauty Industry Gender, Culture, Pleasure*, 1st Edition (London: Routledge, 2004) <https://doi.org/https://doi.org/10.4324/9780203097649>.

<sup>2</sup> Peter A. Adamson Blake S. Raggio, 'Global Prepectives On Beauty, Facial Plastic Surgery Clinics of North America', 2022, xxx, 433-448 <<https://doi.org/https://doi.org/10.1016/j.fsc.2022.07.001>>.

<sup>3</sup> Li&Fung, 'Research Centre. China's Cosmetics Market', 2011 <[http://www.funggroup.com/eng/knowledge/research/industry\\_series20](http://www.funggroup.com/eng/knowledge/research/industry_series20)> Diakses pada 20 Oktober 2023. Jam 20.30 WIB.

Law and the Civil Code. Recent cases have included the Ria Beauty case and the lack of BPOM (Indonesian Food and Drug Authority) documentation by beauty businesses. As of this writing, there are no definitive figures on the number of beauty clinics in Indonesia.

To consumptive community, women's body is shaped as a commodity and put amid the promotion of consumer goods and it is published through mass media. In a consumer society, female body is formed as a commodity, and placed at the center of the consumption. In a consumer society, the female body, therefore, is a kind of investment according to capitalist ideology. Capitalist ideology bearers such as advertising, billboards, posters, and TV fashion reality shows do not only show ideal body image but also show how to reach and consume those images. From the perspective of these mass media, women are portrayed to be tall, slim, young attractive, and charming for social approval. In mass media, women are portrayed to be tall, slim, young attractive, and charming for social approval<sup>4</sup>.

The motivation to look beautiful is not enough.<sup>5</sup> It must be followed by healthy and safe standards, because the majority of women who are obsessed with being beautiful with all treatments tend to ignore the risk of skin cancer for example<sup>5</sup>. In consumer culture, a woman with her body has a particular place. Her body is thus located in the center of consumption, defined as 'missing', 'flawed', and 'insufficient'. They can remedy these deficiencies and reach ideal beauty standards by only buying commodities for her body. To reach these changing beauty and fashion perceptions, women are inclined to buy commodities that are imposed by consumer culture<sup>6</sup>. The concept of perfection of the body is introduced to entice people to undergo physical transformation<sup>7</sup>. What has been labeled a "body-changing culture" is being popularised and becoming pervasive in many societies, and now includes changes to almost all parts of the body, especially the most intimate ones, through a growing list of surgical procedures<sup>8</sup>.

Every woman is beautiful with her own uniqueness affected by genetic and culture she brought since she was born. Beauty face is a characteristic of a face that provides a perceptual experience of pleasure, meaning, or satisfaction. There is evidence that a preference for beautiful faces emerges early in child development and that the

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<sup>4</sup> Sarah Ditmar, Helga;Howard, "'Professional Hazards? The Impact of Models' Body Size on Advertising Effectiveness and Women's Body-Focused Anxiety in Professions That Do and Do Not Emphasize the Cultural Ideal of Thinness'", *British Journal Of Social Psychology* 43, no. 4 (2004): 477-97.

<sup>5</sup> Carla Finger, "Brazilian Beauty: Brazil's Cosmetic Surgery Industry Is Thriving, But Why Is Beauty So Important?," *The Lancet* 362 (2003).

<sup>6</sup> Özlem Özdemir, "Perception Of Beauty And Fashiion Among Young Adult Women In The Context Of Consumer Culture," *The Journal Of International Social Research* 8, no. 41 (n.d.).

<sup>7</sup> Napat Chaipraditkul, "Thailand: Beauty and Globalized Self-Identity through Cosmetic Therapy and Skin Lightening," *Ethics in Science and Environmental Politics* 13, no. 1 (2013): 27-37, <https://doi.org/10.3354/esep00134>.

<sup>8</sup> Berer Marge, "Cosmetic Surgery, Body Image and Sexuality, Reproductive Health Matters" 18 (n.d.), [https://doi.org/10.1016/S0968-8080\(10\)35518-2](https://doi.org/10.1016/S0968-8080(10)35518-2). Accessed on January 21, 2024, at 01.30 p.m.

standards of attractiveness are similar across different genders and cultures<sup>9</sup>. Physical appearance has been considered an inseparable part of daily human existence<sup>10</sup>

The legal aspects of beauty clinic businesses are regulated by the Consumer Protection Law and the Indonesia Civil Code. the Consumer Protection Law is regulated by Law Number 8 of 1999 concerning Consumer Protection, while the Civil Code is a Dutch legacy norm that is still in effect today.

This research used an mixed method empirical juridical and doctrinal, through approaching the problem studied with legal characteristics in accordance with the life reality within society. This research can be used as a measure to give input to the government, in this case the legislatures authorized to make policy, to govern, and to decide the change necessary to meet justice and law certainty amid society.

This research's state of the art is to make the states conscious and more aware of beauty clinic development in the world, and the realization of healthy condition should be supported with some factors: healthcare service in accordance with standard quality and standard medical service and drug and health equipment safety. The attempt of providing law protection to patients, particularly the patients of esthetic beauty clinic, is desirable to minimize the case of users' loss and likewise, to maintain the credibility of beauty clinic. The practice of beauty clinic corresponding to the law enacted is the form of law protection necessary to undertake by the states in the world. This research aims to study the global challenge related to the regulation in esthetic beauty clinic business due to the more developing era also followed with the development of technology, science, and art and people's lifestyle, particularly related to body treatment. Law and regulation (Consumer Protection Law and the Indonesia Civil Code) related to the practice of esthetic beauty clinic prevailing today are varied in providing law protection to the patients and in ensuring good and appropriate service of beauty clinic in accordance with medical standard and regulation effective in each of states. Regulation is less tight and strict about licensing, organization, supervision, and evaluation of esthetic beauty clinic; therefore, the type of punishment in the regulation should be adjusted with time development to provide law certainty and justice to all related parties.

The problem to be studied is how to navigate global challenge of regulation in the esthetic beauty clinic business. The urgency or the priority of research is the Development of science, technology, and learning based on law about global challenge of regulation concerning esthetic beauty clinic, recommending the states in the world regarding the regulation of esthetic beauty clinic. These research series give scientific contribution to the regulation in the states in the world to meet the patients' right: right to health, right to healthcare service, and right to law protection, and the rights of employers, owners, and all parties undertaking the business of esthetic beauty clinic.

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<sup>9</sup> Germano Vera Cruz, "Cultural Study of Facial Beauty Cross-Cultural Study of Facial Beauty, Journal of Psychology in Africa Cross," *Journal Of Psychology in Africa* 23, no. 1 (2013): 87-90.

<sup>10</sup> Czechowicz, Harry, de Chumaceire, Cora L.Díaz, "Psychosomatics Of Beauty And Ugliness: Theoretical Implications Of The Systems Approach," *Clinics in Dermatology* 6 (1988). Accessed on January 23, 2024, at 08.20 p.m.

## 2. Research Methods

This research used an mixed method empirical juridical and doctrinal, through approaching the problem studied with legal characteristics in accordance with the life reality within society. This research uses library literature study data sources. This research can be used as a measure to give input to the government, in this case the legislatures authorized to make policy, to govern, and to decide the change necessary to meet justice and law certainty amid society.

## 3. Results and Discussion

### 3.1 Dynamics of Esthetic Beauty Clinics

The factors triggering the keep-developing and advance business of esthetic beauty clinic are women's orientation to beauty, global trend beauty, metrosexual phenomenon, and consumptive behavior today. Metrosexual men are women-oriented men. Metrosexual men are also represented as normal or straight, sensitive and educated figures but they prioritize femininity they have. The characteristics of metrosexual men, as suggested by Kartajaya, are: (1) commonly living and residing in big cities with information access opportunity, interaction and lifestyle undertaken obviously affect their existence, (2) coming from wealthy circles and having a lot of money, (3) having urban and hedonistic lifestyle, (4) following intensely the fashion development in the world, and (5) commonly having interesting and dandy appearance and paying much attention to appearance and body treatment.

The beauty clinic industry in Indonesia is experiencing rapid growth. The author notes that this is partly due to the increasing trend of social media, which demands a person to appear handsome and beautiful. This growth is not accompanied by adequate legal provisions, as there are very few laws related to beauty clinics; even those that exist are only superficial, such as the Consumer Protection Act, the Health Act, and the Civil Code.

Global challenge of regulation in the business of esthetic beauty clinic is a form of state obligation to meet the world community's right to provide service in the esthetic beauty clinic. Globalization influences the fulfillment of world community's right, leading to the more demand for right fulfillment<sup>1112</sup>. The effect of globalization is that this self-care lifestyle is a prospect for the beauty business. The esthetic beauty clinic is a healthcare facility providing medical service for an individual's appearance condition organized by the authorized medical personnel<sup>1314</sup>. However, it has negative side, when

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<sup>11</sup> "CONSUMER RIGHTS AS CONSTITUTIONAL RIGHTS-A COMPARATIVE ANALYSIS OF SOME SELECTED JURISDICTION\*," n.d.

<sup>12</sup> David Oughton and John Lowry, "Text Book An Consumer Law" (London: Blackstone Press Limited, 1997), 1-2.

<sup>13</sup> I.G. Ayu Ketut Rachmi Handayani, Pujiyono, and S.D. Sari, "Forensic and Toxicological Tests for Protecting the Patients of Esthetic Beauty Clinic as the Constitutional Right in Indonesia," *Indian Journal of Forensic Medicine and Toxicology* 14, no. 2 (2020).

patients have complication in their treatment and even worsens their skin condition. Meanwhile, the findings of studies show that the short-term use of anti-aging hormone results in diabetes and blood glucose intolerance<sup>15</sup> and the long-term use leads to potential cancer risk<sup>16</sup>.

### 3.2 Some problems of esthetic beauty clinic

The states in the world should ideally be more sensible to time change and science development and trend occurring today, and they should be present and control this esthetic beauty clinic business because the state's responsibility is, among others, to ascertain the guaranteed fulfillment of all citizens' rights<sup>17</sup>. The provider of beauty clinic service should also ensure the patients' safety and security rather than promote its product and service advertisement only and thereby give the people promise and dream only. We are bombarded with advertisements for any one of thousands of different products, both prescription and over-the-counter, that claim to be able to restore our youthful appearance, banish wrinkles, tone skin, and remove cellulite, among other promises that often sound, and probably are, too good to be true<sup>18</sup>.

The protection of esthetic beauty clinics' patients also improves in several states with majority Muslim populations with the demand and obligation for using *halal* (rightful) product<sup>19</sup>. This indicates that there is a relationship between health care and beauty by combining modern regulation in Islamic perspective<sup>20</sup> and consequently, the states should control product and service use in the esthetic beauty clinic to prevent them from being contradicted with *halal* principle<sup>21</sup>.

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<sup>14</sup> Ramzi S. Musharafieh Bishara S. Atiyeh, Mohamed Kadry, Shady N. Hayek, *Aesthetic Surgery and Religion: Islamic Law Perspective* (Springer Science, Business Media, LLC 2007, 2007).

<sup>15</sup> Zarina Alias and Norishahaini Mohamed Ishak Yaman, "Beauty Treatment and Spa Design from Islamic Perspective, AcE-Bs 2012 Bangkok ASEAN Conference on Environment-Behaviour Studies, Bangkok, Thailand," *Procedia - Social and Behavioral Sciences* (Bangkok, Thailand, July 2012).

<sup>16</sup> Direktorat Jenderal Bina Pelayanan Medik. Departemen Kesehatan Republik Indonesia, *Pedoman Penyelenggaraan Klinik Kecantikan Estetik Indonesia*, (Departemen Kesehatan, Jakarta, 2007).

<sup>17</sup> <[https://www.shs-conferences.org/articles/shsconf/pdf/2018/15/shsconf\\_icolgas2018\\_02003.pdf](https://www.shs-conferences.org/articles/shsconf/pdf/2018/15/shsconf_icolgas2018_02003.pdf)>.

<sup>18</sup> Koblenzer, Caroline S., "Psychosocial Aspects Of Beauty: How And Why To Look Good," *Clinics in Dermatology Journal, Elsevier* 21 (2003), <https://doi.org/10.1016/j.clindermatol.2003.11.010>.

<sup>19</sup> Yaman, "Beauty Treatment and Spa Design from Islamic Perspective, AcE-Bs 2012 Bangkok ASEAN Conference on Environment-Behaviour Studies, Bangkok, Thailand."

<sup>20</sup> Norishahaini Mohamed Yaman, Rostam Alias, Zarina Ishak, "Beauty Treatment and Spa Design from Islamic Perspective," *Procedia, Social And Behavioral Science* 50 (2012), <https://doi.org/http://dx.doi.org/10.1016/j.sbspro.2012.08.053>, Diakses pada 20 Januari 2024, Jam 21.00 WIB

<sup>21</sup> De Guzman M.L.R.E., "Personality And Beauty: Psychosocial Issues In Cosmetic Surgery Volume," *Asian Journal of Psychiatry* 4 (2011), <https://doi.org/http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emed10&NEWS=N&AN=70531354>. Diakses 20 Januari 2024, Jam 19.45 WIB

Considering the result of study conducted by the authors, several important points should be considered and regulated such as: Executive personnel of medical service, Medical procedure taken, Types of equipment the beauty clinic has, The governmental institutions providing operational permit of beauty clinic are varying between one region and another, The use of chemicals, drugs, and cosmetic products such as steroid, mercury, hydroquinone, and its derivation (Ayu Ketut Rachmi Handayani et al., 2020), Legality of beauty clinic training institution, Legality of beautician, Operational licensing and supervision of beauty clinic, Product and service advertisement of esthetic beauty clinic, Beauty clinic's responsibility for any unexpected conditions, Method of resolving service case in esthetic beauty clinic, Online service system, and Medical esthetic tourism practice.

### **3.3 .Challenge related to the regulation of esthetic beauty clinic in several countries**

Esthetic practices have grown in many places throughout world in the last years, including Indonesia. The regulation of beauty clinic, particularly in Indonesia has governed specifically in the Guidelines of Esthetic Beauty Clinic Organization issued by the Minister of Health in 2007<sup>22</sup> and generally there have been other legislations related to beauty clinic, health law and patient protection law.

This research used a comparative study related to the frame of esthetic regulation in Hong Kong, Florida-United States, South Korea, Singapore, and United Kingdom in the classification of esthetic procedure, competency requirement to carry out esthetic procedure, regulation of medical apparatuses related to cosmetics and healthcare facility and protection of people who undertake esthetic procedure. The author chose these countries because they have a pattern of consumer protection legal regulations that is not much different from Indonesia and there are many references that write about the existence of beauty clinics on the internet.

Many studies have defined the type of esthetic procedure carried out by medical practitioners only. The level risk inherent is a common criterion adopted in other states to classify esthetic procedure. Singapore has taken further step through requiring the procedure supported by low or very low-level scientific evidence to be carried out in the justified action only<sup>23</sup>.

In Europe, the standard for esthetic surgery service including into a set of pan-European service standards for esthetic surgery practice and factors considered when classifying esthetic procedure involves anesthesia level needed and facilities where the esthetic procedure is taken<sup>24</sup>.

To protect the security of people undertaking esthetic procedure, Singapore has

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<sup>22</sup> Direktorat Jenderal Bina Pelayanan Medik. Departemen Kesehatan Republik Indonesia, Pedoman Penyelenggaraan Klinik Kecantikan Estetik Indonesia, (Departemen Kesehatan, Jakarta, 2007).

<sup>23</sup> Arrangement O F Regulations et al., "No. S 683," 2023, 1-187.

<sup>24</sup> Mariana Ferreira et al., "Overview of Cosmetic Regulatory Frameworks around the World," *Cosmetics* (MDPI, August 1, 2022), <https://doi.org/10.3390/cosmetics9040072>.

established *Guidelines on Aesthetic Practices for Doctors* ("Guidelines on AP") containing the level of competency and the qualification of medical practitioners required to carry out esthetic procedure<sup>25</sup>.

In Florida, there is also a requirement stating in the service of beauty clinic surgery procedure should be carried out by medical practitioners having attended appropriate training and having skill<sup>26</sup>. Based on rule 61G5.22.006, give examples of course requirements for cosmetology practice. Practitioner must take a five-credit course in Florida Law and Regulations. They are also required to take a four-credit course in HIV and AIDS. The sanitation course, which requires practices related to keeping your tools of the trade free of germs that can infect your customers, is worth 10 credits. The Face and Contraindication Technique carries a heavier load, at 66 hours. The courses in product chemistry, hair removal, and makeup, are eight, 2.5, and two hours, respectively. The rules give the greatest weight to Skin Theory, Disease, and Disorders, part of the required curriculum – a total of 85 hours of coursework<sup>27</sup>.

Responding to the recommendation from the report on regulatory framework for esthetic practice, UK government is developing training standard for practitioners carrying out surgery and non-surgery procedures. Hong Kong and South Korea have not established the requirement of related competency for medical practitioners to carry out esthetic procedure<sup>28</sup>.

Based on the comparison of rules about esthetic beauty clinic in Hong Kong, Singapore, United States, United Kingdom and South Korea, only South Korea does permit several esthetic procedure carried out not to be defined as medical practice. Regulation system in South Korea related to beauty salon prevents it from engaging in esthetic practices. Florida also has established a regulatory system dedicated to beauty sector. Under the system, cosmetologists are required to meet the requirements of training specified by the licensing authority and passed successfully through the licensing test before training. In Hong Kong, Singapore and Inggris, there has been no regulation of qualification for beauty generally. However, the service in beauty clinic in Singapore and some regions in United Kingdom is required to have relevant training before they can operate Laser or Intense Pulsed Light instrument for esthetic procedure<sup>29</sup>. UK government also develops the appropriate accredited qualification for non-surgery service procedure in esthetic beauty clinic and should examine the performance of esthetic procedure by non-medical practitioners under the supervision of quality professional clinician<sup>30</sup>.

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<sup>25</sup> Kantara Sinhaneti and Jitmanee Pullawan, "Thailand, A BEAUTY Hub for Everyone?," n.d.

<sup>26</sup> <<https://www.leaf.tv/articles/florida-laws-for-an-esthetician/>>.

<sup>27</sup> Ibid.

<sup>28</sup> South Korea, "The Body, Cosmetics and Aesthetics In," 2015, <http://crc.ehess.fr/index.php?170>.

<sup>29</sup> Singapore Medical Association. (2008) Regulating Aesthetic Practices. Available from: <http://news.sma.org.sg/4003/Forum.pdf> [Accessed November 2023].

<sup>30</sup> Health Education North West London. (2014) Non-surgical cosmetic interventions update. Available from: <http://nwl.hee.nhs.uk/wp-content/uploads/sites/481/2014/04/Non-surgical-cosmetic-interventions-update.pdf>. [Accessed November 2023].

To ensure safety and efficacy, cosmetic products are regulated and controlled worldwide. However, the regulatory approaches of each country may be significantly different and impact the competitiveness and economic viability of the industry<sup>31</sup>. The use of cosmetic-related medical devices such as high-power laser and/or IPL device is subjected to registration/licensing in Singapore, Florida, and United Kingdom. In these places, there is a requirement for this device operator, medical practitioners or those with accredited knowledge and skill. For example, in Singapore only those having attended training or having qualification needed can file application for class-3b laser-operating license, while those registered as medical practitioners and dentist can be permitted to operate class-4 laser. Hong Kong government devises to introduce a regulation about medical devices and is considering to apply control to the use of cosmetic-related medical devices through, among others, restricting the use of several devices for the registered health professionals<sup>32</sup>.

All esthetic practice venues in foreign countries are subjected to mandatory safety standards of healthcare facilities where esthetic procedures are performed. Particularly for liposuction procedure, Singapore and Florida has stipulated the strict requirement in the term of supporting staff and adequate tools and equipment. Some incidents occurring in the service of esthetic beauty clinic in South Korea has encouraged the government to improve the standard safety of health care facilities, particularly the working standard of anesthesia and medical devices to deal with emergency<sup>33</sup>. In United Kingdom, the regulator of healthcare service provider is now reviewing scheme inspection and criteria assessment for facilities where esthetic surgery procedure is carried out. Meanwhile, Hong Kong devises to change regulatory system for private health care facilities, including those for the high-risk esthetic procedure to be done.

In relation to the protection of people undertaking esthetic procedure, several places abroad have learnt to introduce or devise to introduce specific mechanism or stages to improve the community protection. For example, South Korea has just introduced a regulation to restrict esthetic-related advertisements in public transportation and in near-school areas. In Singapore, medical practitioners providing liposuction or the procedure supported with adequate evidence necessary to get clients' approval before doing the procedure. Similarly, United Kingdom is considering to tightening the control over irresponsible advertisement and promotional practices, and should introduce a need for medical practitioners engaged in esthetic surgery practice to get informed consent from their clients.

Singapore is the only state to introduce a mandatory cooling-off seven-day period to those undertaking liposuction<sup>34</sup>. Several beauty service providers accredited under voluntary accreditation program are also asked to offer cooling-off period at least for five week days for service package offered to their client. The different feature of

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<sup>31</sup> Ferreira et al., "Overview of Cosmetic Regulatory Frameworks around the World."

<sup>32</sup> Legislative Council Secretariat. (2014a) Proposed regulatory framework of medical devices. Updated background brief submitted to the Panel on Health Services of the Legislative Council for information on 16 June 2014. LC Paper No. CB(2)1754/13-14(05).

<sup>33</sup> International Trade Administration, "Medical Device Regulatory Requirements for Korea.," 2008.

<sup>34</sup> Ministry of Health, "Revision of Licensing Terms and Conditions for Liposuction Services.," 2014.



recovery system in South Korea is the mediation mechanism implemented by the states to resolve medical dispute, including the one related to esthetic practices<sup>35</sup>. In early October 2012, there were four cases reported, in which some women suffered from septic shock after receiving intravascular infusion from beauty treatment center<sup>36</sup>. A woman then died, while the other three were sick severely. In June 2014, another woman died after undertaking liposuction procedure in hair transplantation center. This incidence has stimulated public interest in such issues as the difference between medical procedure and beauty service, regulation of esthetic-related medical device, health care facility regulation where the medical esthetic procedure is highly risky to be carried out, regulation of beauty sector in carrying out esthetic procedure and mechanisms to improve the safety of people undertaking esthetic procedure. Based on the survey on certified plastic surgeons throughout world conducted by International Society of Aesthetic Plastic Surgery (ISAPS) in 2013, more than 23 million surgery and non-surgery esthetic procedures have been carried out by certified plastic surgeon in the world in 2013 and most of surgery and non-surgery esthetic procedures were taken in United States this year<sup>37</sup>.

Each of states in United States of America has its own regulatory frame to govern medical and beauty salon sector in taking esthetic procedure. Florida is one of many states in United States that has enacted strict regulation in the performance of esthetic service procedure. Based on the regulation of esthetic service, a procedure is required to be carried out by medical practitioners or health practitioners or assistant doctor under the supervision of a medical practitioner<sup>38</sup>.

In South Korea, an esthetic procedure, involving acupuncture including tattoo and ear piercing, is considered as medical practices that should be undertaken by licensed medical practitioners<sup>39</sup>. Under medical system, the Law of medical service has been regulated, stating that license medical practitioners can do any medical practice including esthetic procedure. On the other hand, the beauty treatment center can provide only skin treatment services as specified in the Law of public health supervision and they cannot use each of medical devices or drugs.

In Singapore, all invasive and minimal-invasive esthetic procedures such as botulinum toxin ("Botox") injection and laser for skin rejuvenation should be carried out by medical practitioners regulated in self-regulatory framework of medical profession<sup>40</sup>. Beauty sector can provide certain non-invasive esthetic procedure such as removing laser removal and being subjected to the regulation of Penal Code and other relevant laws.

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<sup>35</sup> <<https://k-medi.or.kr/eng/lay1/S239T377C378/contents.do>>.

<sup>36</sup> Korea Joongang Daily, "Deaths Highlight Plastic Surgery Risk," 2013.

<sup>37</sup> *International Society of Aesthetic Plastic Surgery*, 2014.

<sup>38</sup> The Florida Senate. (2014) CS/CS/CS/SB 746: Health Care Clinic Act. Available from: <http://www.flsenate.gov/Session/Bill/2014/0746/?Tab=BillHistory> [Accessed November 2023].

<sup>39</sup> Korea Legislation Research Institute. (2010) Medical Service Act. Available from: [http://elaw.klri.re.kr/eng\\_service/lawView.do?hseq=21627&lang=ENG](http://elaw.klri.re.kr/eng_service/lawView.do?hseq=21627&lang=ENG) [Accessed November 2023].

<sup>40</sup> Legislative Council Secretariat. (2012) Information Note on Regulation of aesthetic practices in Singapore. LC Paper No. IN02/12-13

Compared with other places studied, United Kingdom has adopted a less strict regulatory approach in which beauty sector is allowed to do non-surgery esthetic procedures more widely<sup>41</sup>. Meanwhile, the surgery esthetic procedure should be carried out under clinical regulation organized by qualified medical practitioners but non-surgery procedures such as *Botox* and dermal filler injection and laser treatment can be carried out by non-medical practitioners and medical practitioners in beauty clinic or treatment center. Identifying the need for providing uniform standard to regulate the provision of esthetic procedure by medical and non-medical practitioners, the United Kingdom government has just completed the framework of study for esthetic practice and started to improve its regulation to protect public safety and interest better.

Just like in United Kingdom, in Sweden the service procedure of esthetic clinic containing surgery component is carried out by medical practitioners while the non-surgery one can be carried out by either medical or non-medical practitioners<sup>42</sup>. A report of study released by Swedish National Health and Welfare Council<sup>43</sup> in June 2012 revealed that the regulatory framework did not provide adequate protection for those undertaking esthetic procedure. Following the release of report, Swedish government was assigned to conduct a research to determine the adoption of this procedure or other procedures to improve the protection of people undertaking service procedure in esthetic beauty clinic. This Swedish regulatory framework is similar to UK's and is still on studying process until today.

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<sup>41</sup> The Royal College of Surgeons of England, "Professional Standards for Cosmetic Practice The Royal College of Surgeons of England," 2013.

<sup>42</sup> Research Office, "Regulation of Aesthetic Practices in Selected Places," 2014.

<sup>43</sup> <<https://www.socialstyrelsen.se/en/regulations-and-guidelines/national-specialised-medical-care/medicalreview>>.

**Salient features of the regulatory framework of aesthetic practices in selected places**

	Hong Kong	Florida of the United States	South Korea	Singapore	The United Kingdom
<b>Regulation of ambulatory facilities in which aesthetic procedures are performed</b>					
Regulatory framework	<ul style="list-style-type: none"> <li>The existing legislation governing private healthcare facilities mainly cover private hospitals and non-profit-making medical clinics.</li> <li>The Government is planning to revamp the regulatory framework for private healthcare facilities to cover ambulatory facilities in which high-risk aesthetic procedures are performed.</li> </ul>	<ul style="list-style-type: none"> <li>Except for some medical spas, most types of ambulatory facilities are regulated under the respective registration or licensing systems.</li> <li>The facilities concerned are required to comply with a set of mandatory standards which may include services, staffing, equipment and supplies, and safety and sanitary conditions.</li> </ul>	<ul style="list-style-type: none"> <li>Medical clinics shall comply with the general facility standards and safety requirements prescribed by the Ministry of Health and Welfare. However, there are no specific requirements on equipment for dealing with emergencies and anaesthesia work.</li> </ul>	<ul style="list-style-type: none"> <li>Medical clinics should have in place functional and effective facilities and equipment for medical and surgical purpose, and maintain resuscitation facilities for emergency use. Clinics should be equipped and staffed to a level commensurate with the procedure performed.</li> </ul>	<ul style="list-style-type: none"> <li>Facilities providing surgical aesthetic procedures are regulated by CQC. In response to the Review Report, CQC will review the existing inspection scheme and assessment criteria used.</li> <li>Facilities providing certain non-surgical aesthetic procedures e.g. laser treatments may be subject to regulatory control of the local authorities. The qualifications framework for service providers which is under development may cover relevant topics to ensure their safety standards.</li> </ul>
Requirements on personnel performing anaesthesia for	<ul style="list-style-type: none"> <li>No mandatory requirements are set.</li> </ul>	<ul style="list-style-type: none"> <li>Specified types of anaesthesia such as peri-operative medication and sedation, and general anaesthesia must be</li> </ul>	<ul style="list-style-type: none"> <li>No mandatory requirements are set.</li> </ul>	<ul style="list-style-type: none"> <li>Specified types of anaesthesia such as general anaesthesia must be performed by an anaesthetist, or a medical</li> </ul>	<ul style="list-style-type: none"> <li>No mandatory requirements are set.</li> </ul>

**Salient features of the regulatory framework of aesthetic practices in selected places**

	Hong Kong	Florida of the United States	South Korea	Singapore	The United Kingdom
<b>Protection of persons undergoing aesthetic procedures</b>					
Specific mechanisms/measures to enhance protection of persons undergoing aesthetic procedures	<ul style="list-style-type: none"> <li>Raising public awareness on the risks associated with aesthetic procedures through various media channels; and</li> <li>screening of advertisements related to aesthetic procedures to detect if there is any suspected breach of the relevant legislation.</li> </ul>	<ul style="list-style-type: none"> <li>Mainly putting in place general protection or redress mechanisms, such as the complaint mechanisms set by the respective regulatory authorities to handle complaints against malpractice of licensed practitioners in the medical and beauty sectors.</li> </ul>	<ul style="list-style-type: none"> <li>Imposing restrictions on aesthetic-related advertisements in public transportation and in areas close to schools;</li> <li>issuing booklets to educate students about the negative effects of and unhealthy obsession with cosmetic surgery; and</li> <li>having established the Korea Medical Dispute Mediation and Arbitration Agency for resolving medical disputes, including those relating to aesthetic procedures.</li> </ul>	<ul style="list-style-type: none"> <li>Prohibiting medical doctors from advertising on procedures supported by low level of scientific evidence;</li> <li>mandating the provision of cooling-off period and information disclosure to persons undergoing liposuction procedures, and requiring written consent from them; and</li> <li>requiring medical practitioners to obtain written consent from persons undergoing procedures that are supported by low level of scientific evidence.</li> </ul>	<ul style="list-style-type: none"> <li>The relevant authorities have been working on the recommendations of the Review Report to provide evidence-based information to persons undergoing aesthetic procedures, and to include a consent process in the future code of ethical practice for aesthetic surgery; and</li> <li>the guidance note for the Advertising Codes has been updated to address issues related to the advertising and promotion of aesthetic practices.</li> </ul>

The differences of regulations related to beauty clinic in several state are represented in the table below:

Tourism medical problem. In the presence of globalization making the world borderless, results in phenomenon in health and beauty world; it is called medical tourism<sup>44</sup>. Medical tourism is market driven—it is shaped by the complex interactions of myriad medical, economic, social and political forces<sup>45</sup>. Medical tourism is commonly perceived and popularly depicted as an economic issue, both at the system and individual levels. The decision to engage in medical tourism, however, is more

<sup>44</sup> Siska Diana Sari, "PERLINDUNGAN HUKUM WARGA NEGARA DALAM PRAKTEK MEDICAL AESTHETIC TOURISM," n.d., <http://ejurnal.unisri.ac.id/index.php/glbctz/article/view/3372>.

<sup>45</sup> MBA Michael D. Horowitz, MD and PhD and Jeffrey A. Rosensweig, "Medical Tourism – Health Care in The," 2007.

complex, driven by patients' unmet need, the nature of services sought and the manner by which treatment is accessed. In order to beneficially employ the opportunities medical tourism offers, and address and contain possible threats and harms, an informed decision is crucial<sup>46</sup>. Medical tourism presents important concerns and challenges as well as potential opportunities. This trend will have increasing impact on the healthcare landscape in industrialized and developing countries around the world<sup>47</sup>. Clinical outcomes, risks and patient satisfaction arising from medical tourism depend on four key factors: patients' background, surgical procedures, the surgeon and the surgical facilities<sup>48</sup>. Much medical tourism is short distance and diasporic, despite being part of an increasingly global medical industry, linked to and parallel with the tourism industry. Intermediaries (medical tourism companies) are of new significance. Opportunities are diffused by word of mouth with the internet of secondary value. Quality and availability of care are key influences on medical tourism behaviour, alongside economic and cultural factors. More analysis is needed of the rationale for travel, the behaviour of medical tourists, the economic and social impact of medical tourism, the role of intermediaries, the place of medical tourism within tourism (linkages with hotels, airlines, travel agents), ethical concerns and global health restructuring<sup>49</sup>. This research proposes decision-making process in opting for or against medical care abroad, and engaging in medical tourism, including considerations of the required treatments, location of treatment, and quality and safety issues attendant to seeking care. Accordingly, on medical tourism practice, the imperative of access to health information and the current regulatory environment which impact on this increasingly popular and complex form of accessing and providing medical care<sup>50</sup>.

Regarding the relationship between physician and patient, along with the change of community, the relationship between physician and patients is getting more complex, as characterized with the shift of pattern from paternalistic to partnership, the position of physician is equal to that of patient (physician is a partner for patient). Emerging practices highlight the proposition that aligning legal and health care through medical-legal partnership can help communities/health care institutions lower barriers to basic needs. The medical-legal partnership approach in the clinic setting combines the knowledge, training, and resources of health care, public health, and legal professionals and staff to address and prevent the social determinants of health caused by legal needs<sup>51</sup>.

Citizens should obtain guarantee and law protection from the government's action for some reasons: firstly, because in some cases citizens and civil legal entities depend

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<sup>46</sup> Vivien Runnels and P. M. Carrera, "Why Do Patients Engage in Medical Tourism?," *Maturitas* 73, no. 4 (2012): 300-304, <https://doi.org/10.1016/j.maturitas.2012.08.011>.

<sup>47</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2234298/>

<sup>48</sup> Neil Lunt and Percivil Carrera, "Medical Tourism: Assessing the Evidence on Treatment Abroad," *Maturitas* 66, no. 1 (2010): 27-32, <https://doi.org/10.1016/j.maturitas.2010.01.017>.

<sup>49</sup> John Connell, "Contemporary Medical Tourism: Conceptualisation, Culture and Commodification," *Tourism Management* 34 (2013): 1-13, <https://doi.org/10.1016/j.tourman.2012.05.009>.

<sup>50</sup> Runnels and Carrera, "Why Do Patients Engage in Medical Tourism?"

<sup>51</sup> Megan Murphy, Johnna S., Lawton, Ellen M., and el, "Legal Care as Part of Health Care The Benefits of Medical-Legal Partnership," *Pediatric Clinics of North America* 62 (2015): 1263-71.

on government's decisions and stipulations like beauty clinic practice license. Secondly, the relationship between government and citizens does not run in equal position. Citizens are on the weaker position compared with the government. Thirdly, various disputes between citizens and government concern the regulation intervening unilaterally with the life of citizen. Decision and decree making based on the free authority (*vrijebevoegdheid*) will give an opportunity of infringement of citizens' right. The government should give law protection to the state administration over its action well and correctly according to the law<sup>52</sup>.

The last challenge related to the regulation of esthetic beauty clinic concerns online and offline services, the presence of esthetic beauty clinic providing registration, consultation, and product purchasing services through online social media such as WhatsApp or other communication applications. The author thinks that it is an impact of globalization, but in practice the law protection concerning it is very weak, because all processes are carried out through social media, web, or other online application and there is neither direct consultation nor examination between patient and physician. Nevertheless, to some patients this is very convenient and efficient. The online consultation application of the beauty clinic was acceptable to use. Customer placed importance on speed, ease of use, convenience, time saving, cost saving, and safety, which could contribute to their decision to accept and use<sup>53</sup>.

#### 4. Conclusion

The time progress along with technology, science, and art and human lifestyle develop leads to the need for new regulation to organize new trend occurring globally. The states in the world should develop regulation about important matters in the practices of beauty clinic. It is not only about its business sustainability but also about the protection of patients' right.

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<sup>52</sup> A Ilyas, "Menggali Perlindungan Hukum Dalam Hukum Administrasi Negara," *Pustaka Media, Jakarta, Hal*, no. February (2020): 0-4, <https://doi.org/10.13140/RG.2.2.23610.47049>.

<sup>53</sup> Suvarak Mullao, "Exploring The Acceptance Of Thai Consumers For Using A Mobile Medical Consultation Services Application For Beauty Clinics A Thematic Paper Submitted In Partial Fulfillment Of The Requirements For The Degree Of Master Of Management College Of Management E," 2021.

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