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Skin Protection for (SPF) Kids Program¹

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Keywords:

Skin cancer; Prevention; School age children; Evidence based practice; Sun exposure; School health; Health promotion Skin cancer is increasing faster than any other cancer in the United States. Individuals who have had excessive sun exposure during childhood and adolescence set the stage for the development of skin cancers later in life. In 2009, there were more than 1 million newly diagnosed cases of skin cancer in the United States. This primary prevention program combined the guidelines in the literature resulting in a unique evidence-based program for teachers and informational guidelines for parents. These guidelines were used in classrooms and at home, supporting intervention among school-age children, specifically those in kindergarten through fifth grade.

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Problem

THERE IS A lack of knowledge and understanding among parents and teachers regarding the importance of sun protection in children (Gritz et al., 2007; Mickler & Rodrique, 1997; Nelson & Luczon-Peterman, 2001; World Health Organization [WHO], 2002, 2003a, 2003b). A review of several state skin cancer intervention projects found that although their primary design was to increase the knowledge of children, it was important to target parents and caregivers because their actions can set the foundation for lifelong sun exposure practices for children in their care. Parent and caregiver involvement has also been shown to aid in the policy development process and help promote sun protection activities. It also presents an opportunity for parents and teachers to act as role models for children, as well as protect themselves from excessive sun exposure (Graffunder et al., 1999; WHO, 2003a, 2003b).

Incidence

Skin cancer, with more than 1 million cases a year in the United States, is increasing faster than any other cancer. Since 1975, the incidence of melanoma has increased by 172.2%

(National Cancer Institute [NCI], 2010a, 2010b, n.d.). Melanoma, the deadliest type of skin cancer, accounts for approximately 6% of these cases. Although the number of cases is small in comparison to other skin cancers, melanoma accounts for 75% of all skin cancer deaths (Eakin, Maddock, Techur-Pedro, Kaliko, & Derauf, 2004). Between 2003 and 2007, the national incidence of melanoma was 20.81 per 100,000. This was higher than Alabama's rate of 15.9 per 100,000 for the same period. In comparison, Alabama's statewide incidence rate to Baldwin County in the southern part of the state, which borders the Gulf of Mexico, Baldwin County's rate was slightly higher at 18.6 per 100,000 (NCI, 2010a, 2010b). Comparing the mortality rate for Alabama melanoma cases to that of the U.S. rate of 2.67 per 100,000, Baldwin County had a higher recorded death rate from melanoma of 3.4 per 100,000 (NCI, 2010a, 2010b). These statistics, coupled with a potentially preventable disease, made Baldwin County an area of interest for a primary skin cancer prevention program.

Background Information

Exposure to sunlight in childhood is a risk factor for skin cancers later in adult life (Glanz, Saraiya, & Wechsler, 2002). To potentially decrease the incidence of skin cancer, strategies for skin cancer prevention in children and the parent or caregivers should be implemented as early in the developmental process as possible. In the United States, there has been little research demonstrating a correlation

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between education and a decrease in the incidence of skin cancer. In Australia however, they have been educating about and practicing sun-safe behavior for more than two decades. These initiatives have resulted in the Australian incidence of melanoma and other skin cancers leveling out in young people and has actually declined in some instances (Kenfield et al., 2005; Marks, 1999; McCarthy, 2004; Montague, Borland, & Sinclair, 2001; Staples et al., 2006).

Healthy People 2010 (2005) developed several objectives related to skin cancer prevention. One objective was to increase the proportion of persons (including children) who use at least one of the following protective measures that might reduce the risk for skin cancer: avoid sun between 10 a.m. and 4 p.m., wear sun-protective clothing when exposed to the sun, use sunscreen with a sun-protective factor greater than or equal to 15, and avoid artificial sources of ultraviolet light. Another objective was to reduce deaths from melanoma to less than 2.5 per 100,000 persons (U.S. Department of Health and Human Services, 2001).

In an attempt to help reduce the significant impact of skin cancer and with the guidance of Healthy People 2010 (2005), a primary prevention program was proposed that shared information with parents and teachers about skin safety for their children. This program encouraged them to make policy change and sustain a school environment that was sun safe. It also aimed at training the teachers and educating parents of ways to teach children about certain sun protection measures. These steps played an important role in helping to achieve national health objectives. It did this by increasing those who used sun-protective measures, which in turn may reduce the risk for skin cancer.

Purpose of the Project

The purpose of the Skin Protection For (SPF) Kids Program was to:

- Develop an evidence-based primary prevention project that shared information with parents and teachers about skin safety for children, specifically those in kindergarten through fifth grade.
- Explain to the teachers and the parents how to make policy change and sustain a school environment that was sun safe.
- Describe to the teachers and the parents ways to teach children about certain sun protection measures through the program and handouts.
- Increase those who use sun-protective measures.

Review of the Evidence

The Cancer Library, Center for Disease Control and Prevention, Cochrane database, PubMed, Google Scholar, Medline Plus, and National Guideline Clearing House databases were searched to locate published literature for review. Various search terms were used alone and in combination and include skin cancer prevention in children, school health, sun exposure, and health promotion. Because of limited research, the date range for articles was left open so that a comprehensive review could be completed. This allowed for the most relevant data to be included, with a focus on the most current information. Fifty-five publications were reviewed with varying levels of evidence ranging from I to VII. Level I evidence, the highest level, included systematic reviews and evidence-based clinical practice guidelines. Level VII, the lowest level of evidence, included the opinion of authorities and/or reports of expert committees (Melnyk & Fineout-Overholt, 2005). Thirty-nine publications were included in the review (Table A, Appendix A). Those included focused on sun-safety programs for children using various methods, including short-duration presentations, multiunit presentations, peer education, parent and caregiver programs, and community-wide programs. Literature reviews, systematic reviews, and established peerreviewed practice guidelines were also included. Reports not included were abstracts and unpublished reports.

The review supported those individuals who have excessive sun exposure during childhood and adolescence setting the stage for development of skin cancers later in life. With significant sun exposure at an early age, children have more time to develop skin cancer. Exposure to sun early in childhood and blistering sunburns prior to age 20 years have been associated with an increased risk of developing malignant melanoma (Glanz, Saraiya et al., 2002; Weinstock et al., 1989; Zanetti, Franceschi, Rosso, Colonna, & Bidoli, 1992). One study showed that children between the ages of 9 and 10 years sustain more sun exposure than adolescents between the ages of 14 and 15 years. In the same study, it was estimated that the majority of lifetime sun exposure takes place during youth and that 50% to 80% of lifetime cumulative sun exposure occurs prior to age 18 years (Stern, Weinstein, & Baker, 1986). Research has also shown that children spend around 10 hours per week outdoors while at school (Hall, Jorgensen, McDavid, Kraft, & Breslow, 2001).

The literature showed multiple studies about implementing preventative interventions with children. These prevention efforts in schools through education regarding sun protection can significantly decrease adverse health effects and health care costs (Buller, Buller, Beach, & Ertl, 1996; Eakin et al., 2004; Glanz, Saraiya et al., 2002; Saraiya et al., 2004; WHO, 2003a, 2003b). A school-based curriculum that includes sun protection activities is an excellent way for children to develop skills to protect themselves early in life (Buller et al., 1996; Geller, Rutsch, Kenausis, & Zhang, 2003). School-based health curricula have been successful with other health issues, but few have addressed skin cancer prevention (Buller, Loescher, & Buller, 1994). Studies suggest that enhancing a child's knowledge often result in changes within their families practices (Buller, Goldberg, & Buller, 1997; Buller et al., 1994; Fork, Wagner, & Wagner, 1992; Gritz et al., 2007).

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