Targeting children through school-based education and policy strategies: Comprehensive cancer control activities in melanoma prevention

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1. Reading of the CME Information (delineated below)
2. Reading all the articles in this supplement
3. Achievement of a 70% or higher on the online Post Test
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CME INFORMATION AND DISCLOSURES

Statement of Need:
Healthcare providers continue to underreport melanoma even though cancer reporting requirements mandate such reporting. Additionally, providers may be unaware of recent trends and descriptive epidemiology regarding melanoma which includes the fact that nonwhites have a higher mortality rate from melanoma than do whites.

Target Audience:
Dermatologists, dermatopathologists, general physicians, and public health professionals.

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Learning Objectives
After completing this learning activity, participants should be able to describe recent trends in the epidemiologic patterns of melanoma, including ethnic disparities in melanoma mortality; identify when a private practice dermatologist is required to report melanoma cases to a cancer registry; locate and access central cancer reporting registries (http://apps.nccd.cdc.gov/cancercontacts/npcr/contacts.asp); and recognize and access national and state-based sources on surveillance systems for sun protection behaviors.

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Background: Primary school-based educational strategies are proven interventions to raise children's awareness and knowledge about sun safety.

Objective: We highlight barriers and facilitators to implementing interventions across multiple populations in 3 state comprehensive cancer control programs/partnerships that implemented primary school-based sun-safety educational programs.

Methods: Using a case study approach, we collected semistructured program information and evaluation results from New Mexico's Raising Awareness in Youth about Sun Safety Project, the Sun Protection in Florida Project, and the Arizona SunWise Program.

Results: Each program used different strategies for implementing school-based educational programs in their respective state based on local needs, funding constraints, and unique characteristics of their populations. Barriers to implementation included difficulties reaching schools and school administrators and changes in staff workload. Facilitators to implementation included using innovative recruitment approaches (mini grants, school assemblies), having community partners, reaching out to educators in various settings, and having program advocates within schools. Each program placed emphasis on supplementing educational programs with sun-safety policies.

Limitations: We only present a case study from 3 comprehensive cancer control programs/partnerships. Rigorous evaluation methods are needed to test the effectiveness of the various strategies that were used to implement these programs on a population-based level.

Conclusion: Partnerships and program advocates are important for successfully implementing and sustaining sun-safety programs. Innovative strategies for reaching school administrators are likely needed to effectively implement sun-safety programs and policies. School policy and environmental change are important and valued components of sun-safety programs. (J Am Acad Dermatol 2011;65:S104.e1-11.)

Key words: children; educational interventions; evidence-based practice; melanoma; public health; school-age populations; skin cancer.

Melanoma is one of the deadliest forms of skin cancer. Incidence rates are increasing in the United States.[1] Intense, intermittent exposure to ultraviolet (UV) light is strongly linked with melanoma.[2] Childhood sunburn is an important risk factor for melanoma, and may increase risk by nearly 2-fold.[3] Although findings in migrant and residential studies vary, many indicate that residing in a sunny location

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