A Hispanic/Latinx Community-Based Educational Intervention to Address Health Disparities in Malignant Melanoma

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Introduction: When compared to non-Hispanic White patients, there is overwhelming evidence that malignant melanoma in Hispanic/Latinx patients has a higher mortality rate, due largely to more advanced stages, thicker tumors, and regional and distant metastases present upon diagnosis. Educational interventions have been used previously within dermatological settings to successfully increase awareness and screenings in an effort to reduce mortality. The objective of this study is to implement an educational community-based intervention to modify the knowledge, behavior, and confidence within the Hispanic/Latinx community of Hampton Roads regarding malignant melanoma to address this disparity in prognosis through early detection and prevention.

Methods: A brief Spanish-language educational intervention and take-home patient literature were created, drawing from validated sources such as the American Academy of Dermatology (AAD) and the Skin of Color Society (SOCS). The topics covered include susceptibility to melanoma, sun-safe behaviors, and guidelines regarding when to see a dermatologist for suspicious lesions. To test the efficacy of this educational intervention, the study will compare pre- and posttests completed immediately prior to, following, and three months after the intervention. A convenience sampling method will be used for participant acquisition in community centers, health fairs, and primary care clinics in Hampton Roads, VA. Eligibility criteria include Hispanic and/or Latinx individuals aged between 18-89 years old. Through RedCap, surveys and educational intervention will be completed on provided tablets or on the participants' own devices.

Anticipated Results: This study is designed to collect data from a diverse range of ages and backgrounds within the Hampton Roads Hispanic/Latinx community. The aim is to modify the knowledge, behavior, and confidence regarding melanoma and its prevention among the Hispanic/Latinx population.

Conclusion: Through providing melanoma education that is both culturally and linguistically appropriate, it may be possible to increase knowledge, behavior, and confidence regarding malignant melanoma. Study findings will inform more comprehensive community-based educational programming as well as targeted efforts to improve access to clinical services in an effort to address disparities in mortality related to malignant melanoma.