

## Understanding inequities in melanoma prevention within the Latinx community: a qualitative exploration

Rachel J Mesia PhD, Patricia Rodriguez Espinosa PhD MPH, Hayden Hutchison MSW MPH, Nadia Safaeinili PhD, Laurel J Finster MPH, Vijaytha Muralidharan MBChB MRCP, Beth A Glenn PhD, Robert W Haile DrPH MPH, Lisa Goldman Rosas PhD MPH, Susan M Swetter MD

### COMMUNITY PARTNER

Cancer Research Center for Health Equity at Cedars Sinai Cancer Institute

### ABSTRACT

**Background:** Melanoma mortality rates remain high among individuals of lower socioeconomic status (SES) and racial/ethnic minorities. To better understand inequities in melanoma prevention and care, a qualitative study was conducted in Northern and Southern California among lower SES Non-Latinx White (NLW) and Latinx populations living in urban and semi-rural areas.

**Methods:** In 2019, 19 focus groups were conducted with 176 adult participants, who were homogeneously stratified by region, community type, self-reported ethnicity, and English/Spanish language. Topics included: Awareness of melanoma risk, prevention, and screening practices; Acceptability of prevention strategies; and Barriers to melanoma prevention and care. Interview transcripts were coded with a hybrid inductive and deductive approach, then analyzed by themes using a socioecological framework.

**Results:** Social relationships were identified as important influences for health behaviors. However, Latinx and semi-rural participants had minimal conversations about melanoma prevention with their peers and family. People with brown or darker skin tones were less aware of melanoma and perceived a lower risk for skin cancer. Rural residents, Latinx, and low SES participants reported challenges with healthcare access, including out-of-pocket costs, past experiences with physicians diminishing patient concerns, and limited confidence in a rural-based physician's medical expertise or resourcefulness to make medical referrals.

**Conclusions:** Some of the key factors that influence melanoma prevention and care across the individual, interpersonal, community, and health systems/policy level of the socioecological framework include risk perception, gender norms, social and beauty norms, distance and transportation, high cost, referrals and long wait times, and mistrust. Future recommendations include 1) implementing health education interventions involving navigation strategies for individuals and families, and 2) addressing the identified barriers across the socioecological spectrum that affect melanoma prevention and early detection, particularly among men, individuals of lower SES, and Latinx populations.

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