Racial Disparities in Melanoma Knowledge and Skin Self-Exams: Outcomes of a Video Intervention in Rural Georgia

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BACKGROUND AND AIMS

Melanoma remains the deadliest form of skin cancer, accounting for a disproportionate share of skin cancer-related mortality despite relatively low incidence.[1,2] Early detection is critical, with 5-year survival rates approaching 99% in Stage I disease compared to 27% in advanced-stage melanoma.[2] However, significant disparities persist, particularly among rural populations and individuals with skin of color, who experience higher mortality rates due to reduced access to dermatologic care, lower health literacy, and underrepresentation in public health education efforts.[2,3]

MATERIALS AND METHODS

This prospective study evaluates the impact of a brief, low-cost educational video intervention on melanoma knowledge, lesion recognition, and self-skin examination (SSE) behaviors in a rural, underserved population. Conducted at a regional cancer center in Albany, Georgia, USA, participants completed pre-intervention, immediate post-intervention, and 3-month follow-up surveys. The intervention consisted of a 5-minute, visually driven video designed at a fifth grade reading level, covering melanoma risk factors, ABCDE (Asymmetry, Border Irregularities, Color variation, Diameter >6 mm, and Evolution) criteria, sun protection, and SSE techniques.[1]

RESULTS

The intervention resulted in significant improvements across all primary outcomes, including melanoma knowledge, confidence in lesion identification, recognition of ABCDE criteria, and frequency of SSE. Notably, these improvements were sustained at 3-month follow-up, demonstrating durable retention of knowledge and behavioral change.[1]

From an equity perspective, participants with the lowest baseline awareness demonstrated the greatest gains, suggesting that the intervention effectively reached those at highest risk for delayed diagnosis. Importantly, racial disparities in melanoma knowledge and SSE practices narrowed following the intervention, highlighting its potential to address long-standing gaps in dermatologic health education.[1]

These findings underscore the value of accessible, point-of-care educational tools in mitigating structural barriers to early melanoma detection. In resource-limited settings where access to dermatology is constrained, empowering patients with the knowledge and confidence to perform SSE may reduce dependence on specialty care

and facilitate earlier presentation of suspicious lesions.[3]

The scalability and cost-effectiveness of this intervention further strengthen its public health relevance. A brief, standardized video can be easily implemented across diverse clinical environments, including primary care offices, oncology clinics, and community health centers, without requiring additional personnel or infrastructure. Given the substantial cost differences between early- and late-stage melanoma treatment, even modest improvements in early detection may translate into significant reductions in healthcare expenditures.[4]

CONCLUSION

In conclusion, a short, literacy-conscious educational video delivered at the point of care can produce meaningful and sustained improvements in melanoma knowledge and self-examination behaviors while narrowing racial disparities in awareness. This scalable, patient-centered approach represents a practical strategy to improve early detection and reduce inequities in melanoma outcomes, particularly in underserved and rural populations.[1]

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