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RESPONDING TO DISPROPORTIONATE SKIN CANCER RATES
AFFECTING ADULT MEN AGED 18-60

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A Capstone Paper submitted in partial fulfillment of the requirements for a Master Sustainable
Development at SIT Graduate Institute in Brattleboro, Vermont, USA.

8 August 2023

Advisor: Aynn Setright

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ABSTRACT

Skin cancer is a deadly disease that kills significantly more men than women every year. At the same time, women are more than twice as likely to apply daily sun protection factor (SPF) than men. This research study explores how key stakeholders within the skin care industry have responded to the data showing increasing disparities between male and female skin cancer rates. To fulfill the objectives of this research study, qualitative data was collected from six semi-structured interviews with adult males between the ages of 18 and 60. The interviews were intentionally designed to engage with the American, adult male's personal knowledge of skin cancer and elicit perceptions and experiences with skin care and skin protection. Findings indicated that most men were consciously unaware that skin cancer affected them at higher rates than it did women. The findings also demonstrated that men tended to perceive activities and products related to the skin as rooted in aspects of feminine beauty. Because societal standards for men do not historically center on beauty, they do not feel that engaging with skin care products, including skin protection products, is relevant to their everyday life. By increasing visibility of the issue, dismantling harmful gender stereotypes, and conducting further intersectional research, men will be more likely to understand the relevancy of good skin protection behaviors, and institute preventative measures to mitigate their overall risk of dying from skin cancer.

Keywords: Skin cancer, skin care industry, skin protection, gender, masculinity, melanoma, preventative health

Introduction

Skin cancer is the most common form of cancer in the United States, and rates of diagnosis are not slowing down. One in five Americans are expected to develop skin cancer, or melanoma, by age 70 (Skin Cancer Foundation, 2023). When digging deeper into the numbers, it doesn't take long to realize that adult, white men are the most at-risk demographic for developing and dying of skin cancer. This is true at any age, but most prominently in men aged 18-60 (American Academy of Dermatology, 2022). The Skin Cancer Foundation estimates that about 8,000 people will die of melanoma in 2023, and of that number, over two-thirds will be men. Even though there is an overwhelming amount of data that shows a significant gap between men and women's cancer rates, there are an abundance of risk factors that can be analyzed to determine which are the most detrimental to good skin health.

One of the most consequential risk factors for developing skin cancer is not practicing adequate skin protection behaviors during youth and young adulthood. Unfortunately, men aged 18-60 are significantly less likely than their female counterparts to apply daily use of sun protection factor (SPF) or to develop a basic skin care routine at all. This raises many questions about how skin protection, sunscreen, and other SPF products are perceived by men, if perceived at all. As a member of the affected population, I can reflect on my own relationship with skin care, which developed at a young age due to issues with eczema. My knowledge acquisition of skin care behaviors and products were always framed through a health care lens.

In present day, current trends in technology have changed the way people perceive and access their skincare. Traditionally, skin care has been primarily associated with makeup, beauty, and women, but as the COVID-19 pandemic has bolstered public interest in personal health and hygiene, skin care products have expanded into new markets including male dominated health

spaces. Still, very few brands and product lines make a point to use messaging that draws attention to high skin cancer rates in men. With more influence and revenue than ever before, I am interested in researching the ways that major skin care industry players are addressing higher rates of melanoma skin cancer diagnoses in adult men (18-60 years). In this context, major industry players include dermatologists, skin care product producers and male product consumers.

Literature Review

Melanoma Prevalence in Men

Melanoma is the most dangerous form of skin cancer, and it disproportionately affects men at higher rates than women. It is caused primarily by exposure to ultraviolet light (UV) via sunlight or artificial tanning. Compared to women, men have thicker skin which contains more collagen and elastin to keep the skin firm. These characteristics also make the skin more prone to damage from ultraviolet (UV) rays, which leaves men at considerably higher risk for skin cancer diagnosis (Liu-Smith et al., 2017). By age 50, men are more likely than women to develop melanoma. This number jumps by age 65, making men two times as likely as women of the same age to get melanoma. By age 80, men are three times more likely than women in that age group to develop melanoma (American Academy of Dermatology Association).

While the physical composition of the skin can't be easily changed, there are several ways to utilize preventative skin protection products. Unfortunately, several studies have concurred that men typically have less knowledge about skin cancer and skin care in general. One survey found that nearly two-thirds of men believe women's skin is more sensitive to ultraviolet (UV) rays (Repinski, 2020). Another survey conducted by the National Cancer Institute in 2025 found that less than 15% of men regularly use sunscreen or SPF on exposed

areas of the skin. With this in mind, I researched how various players in the skin care industry are addressing this knowledge gap and its subsequent impact on melanoma and nonmelanoma skin cancer diagnoses in men.

SPF, Sunscreen, and Masculinity

SPF is a measure of how much UV radiation is required to produce sunburn on protected skin (i.e., in the presence of sunscreen) relative to the amount of solar energy required to produce sunburn on unprotected skin (U.S. Food & Drug Administration, 2017). As the SPF value increases, sunburn protection increases to an extent. According to National Health Interview Survey (NHIS) data, approximately one third of adults usually or always use sunscreen or SPF when outdoors in the sun for one hour or more. One important finding showed that it's possible that sunscreen can reduce risk of developing melanoma by 50%, however, its use is particularly low among certain groups such as men, non-Hispanic blacks, those with less sun sensitive skin, and those with lower incomes (Holman et al, 2015). One proposed explanation is that sun safety is a feminine concern that is at odds with traditional male roles. This suggests that adherence to masculine norms can serve as a barrier to sun safety and thus, can increase skin cancer risk (McKenzie et al, 2018).

Future sun safety interventions could use these findings to address the impact of gender norms when targeting men. In more recent years, the chronicle of sunscreen has moved away from the realms of beauty and tanning and is now built on the foundation of sun protection education within our communities. As an increasing number of people are learning about the importance of sun protection, more thought is also being given to the long-term impact sunscreen ingredients have on the environment and our health (Drissi et al, 2021). The next chapter of sunscreen, soon to be written, will continue to move forward in the pursuit of the ideal

sunscreen: one that not only protects against UVA and UVB radiation, but is also a formulation that allows for the best user compliance.

While current studies seem to show that wearing sunscreen reduces rates of melanoma occurrence by half, it is still impossible to rule out confounding variables. For example, people with higher rates of melanoma risk might be more naturally prone to using sunscreen, but still develop melanoma. Because studies on this are relatively new, the results are still early and inconclusive. In lieu, some argue that all campaigns addressing sun protection should promote sun avoidance, which shifts the focus to creating intentional areas for shade and using clothing to cover as much of skin as possible.

Skin care and Skin Protection

Both skin care and skin protection are important practices to follow if one wants their skin in the best health condition. However, there are many people who find the skin care industry as a whole to be vague in its purpose. They might perceive it to prioritize beauty or luxury or comfort, when in reality, the skin care industry comprises many different products for many different purposes. In a world run heavily on advertisements and media marketing, it is important to note the difference between the terms “skin care” and “skin protection” and to explore how those differences affect the way people view those specific products.

Skin care is a broad market that can be segmented by product, cost, user, and distribution, among other demographics. It generally encompasses those products used on the face and on the body, as detailed in figure 1. Lotions with SPF fall under the umbrella of “skin protection”, meaning they are designed primarily to protect against the sun’s harmful rays. In a study by the National Center for Health Statistics in 2020, 12.3% of men and 29.0% of women aged older than 18 years always used sunscreen when outside on a sunny day. The percentage of men who

always used sunscreen was lowest among those aged 18–29 years (8.2%) and increased to 13.7% among those aged 30–44, 13.0% among those aged 45–64, and 13.6% among those aged ≥65 years (Quickstats, 2020).

Figure 1: Skin care product range



Even though skin cancer rates are considerably higher for men, they are almost three times less likely to apply sunscreen. Trends suggest that the conflation of skin care and skin protection have led to the perception that sunscreen, and skincare products generally, are intended for females only, and subsequently, that our society has unintentionally gendered SPF as feminine through messaging that appeals to stereotypically female gender norms. Psychiatrist W. Scott West gives examples where sunscreen is associated with protecting "delicate" skin or beauty ideals, rather than being framed as a doctor-recommended source of environmental protection against known carcinogens. "Advertising is a representation of well-established gender norms, and when sunscreen is gendered as feminine, not only are men less likely to be exposed to the messaging, but they're less likely to find it relevant to them," he says. "In some cases, they might consider that messaging at odds with their masculinity (Ourisman, 2021)."

Where Does the Skin Care Industry Stand?

When society reached a tipping point in its views on the dangers of artificial tanning, the skin care and makeup industry played a huge role in convincing young women that there were less harmful alternatives to achieving skin satisfaction (Gamba et al., 2013). With rates as disproportionate as they are, it is logical that future efforts should also focus on increasing melanoma awareness and early detection strategies among young adult males. When it comes to marketing grooming products toward men, they tend to want immediate, visible results to be convinced of the product's worth. For example, "More men have taken to [hair color] because, unlike moisturizers, you can immediately see a tangible benefit," (Bittar 2004).

The role that gender plays in mainstream skin care is double-edged. It cannot be ignored because men and women have clearly distinct skin needs (physically and aesthetically), but many dermatologists have the perception that one's skin care should not follow specifically male or female guidelines. The American Academy of Dermatology assures that the most important factors to look out for when putting together an effective skin care routine are skin type (normal, sensitive, oily, dry or combination) and areas of concern (Braun, 2020). This will be a difficult ask for the SPF industry, which would need to address a specifically gendered issue in disproportionate skin cancer rates among men.

Health and Education

The skin care industry cannot be viewed so narrowly as to only include sellers and buyers. There are outside influences that also play a role in framing the issue of higher skin cancer rates in men. Although it's the most common form of cancer in the U.S., most public schools do not implement any regulated education program that promotes wearing sunscreen every single day from a young age (Slevin, 2014). Skin protection knowledge can vary greatly

across the United States depending on geographic location, occupation, and social activities. Regardless, it is still recommended that everyone apply sunscreen at least once a day to reduce the risk of melanoma, and interventions driven by the public health and medical community educating school leadership and policymakers about the importance of sun safety are needed regardless of level, location, or size of the school.

The Centers for Disease Control (CDC) published a pamphlet of guidelines specifically addressing sun safety in schools. It has five target audiences: school administrators and board members, principals and nurses, teachers and coaches, community healthcare providers, and parents. Figure 2 summarizes the objectives for each group, and it is apparent that they heavily advocate for clothing choice as the main form of skin protection, even going so far as to say that hats and shirts should be as indispensable during outdoor practice as sports equipment. In regard to sunscreen, the CDC is clear that parents are ultimately responsible for providing their children with sunscreen, while coaches and teachers share the responsibility to enforce application while at school (Centers for Disease Control, n.d.). Sunscreen is not provided to educators or school staff when they take their classes out for recess or coach athletic teams.

Table 1: Sun Safety at Schools Pamphlet: Centers for Disease Control

Target Audience	Objectives
School Administrators and Board Members	<ul style="list-style-type: none"> • Adopt, communicate, and enforce simple sun safety policy • Conduct sun safety training and programs for all staff • Enhance the school’s physical environment
Principals and School Nurses	<ul style="list-style-type: none"> • Ask parents to provide hats and sunscreen • Encourage students and staff to wear protective clothing • Make sure that the school health committee addresses health issues such as sun safety

Teachers and Coaches	<ul style="list-style-type: none"> • Integrate sun safety lessons into the full range of academic subject areas • Remind students to practice sun safe behaviors routinely • Choose locations with shade for outdoor activities
Community Healthcare Service Providers	<ul style="list-style-type: none"> • Deliver presentations about skin cancer prevention to students, families, and school staff • Assess patients’ sun exposure patterns • Serve on the school’s/district’s school health council
Parents and Guardians	<ul style="list-style-type: none"> • Make sure your children wear hats, cover-up clothing and sunglasses • Be a good role model by practicing sun safety yourself and encourage your children to make sun safety a habit • Develop partnerships to help support environmental improvements

Paradigms

Throughout an initial review of existing literature, several theories appeared regarding beauty and gender. One theory is that skin care is more closely related to beauty than it is health, which promotes a gendered dichotomy in the way men and women approach skin care and skin protection. Even for a product like sunscreen, men are hesitant to use it because they view it as a “girly product” (Repinski, 2020). Another similar theory provides that men are also less knowledgeable about the dangers of sun exposure. A survey conducted by the American Academy of Dermatology found that far fewer men than women know various facts about sun exposure, including that there’s no such thing as a healthy tan or that a base tan cannot protect against UV rays. If it is the case that gender norms can be tracked as the root of why men won’t use sunscreen or other skin protection products, then it can be deduced that adherence to masculine norms can serve as a barrier to sun safety and thus, can increase skin cancer risk (McKenzie et al., 2018).

Research Design and Methodology

This research study's design explored trends in skin care and skin protection using a qualitative study of the United States, adult male perspective to discover whether skin care industry players are engaging men about skin protection and high rates of skin cancer in adult males. The selected research design was beneficial to the study because of its flexibility for the integration of "multiple perspectives, data collection, tools, and interpretive strategies" (Marshall & Rossman, 2016, p. 19). By engaging in a semi-structured interview methodology, the study enabled the incorporation of methods that generated qualitative data and provided an opportunity to explore both the context of the issue and the specific study of skin protection habits in adult males. Further exploration into the research design and methodology, including sampling and methods, data analysis approach, and ethical considerations is provided below.

Sampling and Methods

The research methods utilized for data collection in this qualitative study included a review of existing literature on skin care, skin protection, and skin cancer, along with six semi-structured interviews with adult males between the ages of 18 and 60. The six participants of the study included men of different races, social classes, and occupations. They all live in, or around, Richmond, Virginia and are familiar with skin care as a major industry. The participants were recruited through already established social networks. All participants were contacted via email or mobile phone and asked for their voluntary participation in the study. If multiple participants resided in the same household, they were instructed not to discuss interview questions or topics related to interview questions with one another.

For initial outreach and to achieve a good response rate, all participants were contacted via email or mobile phone and provided with an invitation letter to participate in a semi-

structured interview. The semi-structured interviews utilize researcher-participant reciprocity by creating an exchange between the empirical data as it is collected, analyzed, and embedded in one's design framework (Galleta, 2013). Each interview took place in one sitting and was structured to create openings for an unencumbered narrative on the part of the participant as well as more direct questions regarding the study focus. A benefit to utilizing this method is that there is space for researchers and participants to engage in a critical reflection of the data in real-time.

Engaging the researcher and participant in critical reflection during the interview itself yields further texturing in the analysis and interpretation of the findings. Participants were given the option of remaining anonymous or providing a pseudonym, which allowed them the opportunity to share insights about topics they might not feel comfortable speaking about forthrightly in an in-person or interview setting. The semi-structured interviews allowed for the opportunity to learn more about their thoughts and perceptions on the topic of the study. The interview guide utilized for this research study can be found in Appendix A.

Data Analysis

The research data from the virtual interviews was organized and stored on a cloud-based, encrypted platform. The qualitative data results for this study were individually transcribed and evaluated by the researcher. To ensure a thorough examination of the data collected, each survey and interview was coded and transcribed following a list of 21 selected codes which identified key variables for emergent themes related to skin care, skin protection, and skin cancer. The list of selected codes can be found in Fig. 3 below, and includes the following categories: gender roles, education, skin protection, occupation, social activities, longevity, beauty, and aesthetics. Following the transcription and coding of data, the researcher engaged in an extensive data analysis which consisted of identifying trends, code co-occurrence, and similarities within and

across all participants' experiences and perceptions to ensure credibility in the findings and complete a thorough analysis of the data.

Table 2. List of Codes

Accessibility	Advertisement	Aesthetics
Application	Beauty	Cancer
Climate Change	Cost	Health
Education	Gender	Harmful Effects
Longevity	Marketing	Occupation
Self-Image	Skin Protection	Social Activities
Sunscreen	Time Spent Outdoors	Youth

Ethics of Research

To ensure a safe research design and methodology were incorporated into this research study, ethical considerations were implemented to protect all participants and acknowledge potential topic sensitivities. The informed consent protocol was initiated from the start of the research study and all participants were provided consent for the study by providing signatures on a specialized informed consent document. Participation in the study was voluntary and there was no risk for participants to feel pressured to join the study because there was no existing power differential between the researcher and participants. Participants were given the option but not required to provide identifying information. Prior to participating in the semi-structured interviews, participants were required to review and sign a participant informed consent form to ensure the researcher shared all the essential information with participants pertaining to the study and that participants acknowledged potential risks. A template of the participant informed consent form can be found in Appendix B. To ensure privacy during recruitment, data collection,

and within the study's results and analysis, all participants were informed and in control over the extent to which information they provided was shared. The data collected in this study will be stored for up to five years and then discarded, however, the summarized results of the data will be preserved.

Limitations of the Study

The chosen research design and methodology for this study provided an opportunity for an in-depth exploration of the issue specific of United States, adult males, and their skin care behaviors. perspective. Although the study included access to plenty of American men aged 18-60, the study itself had limitations. The main limitation of the research study was the restricted time in which the study could be implemented. Due to the limited time, the scope of the research study, including participant numbers, was restricted. For example, if more time was available, the study could have included additional interviews with dermatologists and other skin health professionals. Additionally, with more time, the study could have sought to evaluate the perspectives of other participant group types, such as the perspectives of major skin care brands and health educators. Another limitation of the research study was the lack of existing research on the subject matter, specifically at the intersection of skin care and gender. While there was plenty of research confirming that men suffer and die from higher rates of skin cancer, there was very little, accessible research done on men's skin care product utilization and behavior patterns. This could be due to the fact that the issue is constantly evolving and requires that the researcher take many complex factors into account. As research on that topic accumulates, there should be more insight into which behavioral risk factors have the most potential to affect change. These factors may include age, race, social status, and pre-existing conditions.

Researcher's Positionality

My personal and professional experiences, as well as my education, affect how I interact with the world and leave me with inherent biases. Born, raised, and currently living in Richmond, Virginia, I come from a biracial household, where my sister has brown skin like my Puerto Rican mother, and my father and I are white. Both of my parents grew up in a low-income neighborhood just outside of Washington D.C. After marrying, they moved to the suburbs of Richmond, VA to start a family in a community-centered environment. The community inevitably grew to consist almost entirely of white middle class families. Race, gender, and other social constructs were never discussed because the idea of "different" barely existed at those intersections within the community.

As a member of the affected population of this capstone (young adult males), I am keenly positioned to tell the story about skin health and skin protection. I have lived with Eczema since I was 10 years old, and it absolutely left physical and mental impacts throughout my childhood and young adult life. However, there was a silver lining in the fact that I have been forced to care about skin protection during a time period where air pollution and climate change are contributing to higher rates of skin cancer. It wasn't until 3 years ago that I began to notice the benefits of developing good skin protection habits from a young age. Through sheer curiosity, I landed upon an article in Harper's Bazaar called, "Men Would Rather Die than Wear Sunscreen. Why?" This was my first exposure to skin cancer trends, and that men had significantly higher rates of getting and dying from skin cancer.

The topic of skin health intersects with many other constructs including race, social status, and age, but I chose to focus on gender because it was an experience I felt more comfortable navigating. My interest in topics of gender stems from my experience growing up as

a gay man who surrounded himself almost exclusively with female friends and family. Within the gender paradigm, I explored research on norms, psychology, and even biological explanations as to why men are more likely to die from skin cancer. Knowledge previously gained through my general interests in topics of gender allowed me to comfortably navigate terms like “toxic masculinity”, “heteronormativity”, and “hegemony”.

Findings

The findings of this research study are based on the data collected from the completed six semi-structured interviews conducted with participants. While the participants will remain unnamed, the table below provides some initial insights into the demographical information relevant to the study.

Table 3: Participants at a glance

	Age	Occupation	Approx. hours spent in the sun per week	Applies sunscreen at least once each day?
Participant #1	36	School Aide	5-10	No
Participant #2	60	Educational Administration	10-15	No
Participant #3	30	Painter/Self employed	0-5	No
Participant #4	47	IT security engineer (remote)	0-5	No
Participant #5	59	Engineering/Sales	0-5	No
Participant #6	25	Painter/Self employed	0-5	Yes

Skin Cancer and Melanoma

Data cited in the literature review establishes that skin cancer disproportionately affects men at higher rates than women. Specifically, that by age 65, men are two times as likely as

women of the same age to get melanoma, and by age 80, men are three times more likely than women in that age group to develop melanoma (American Academy of Dermatology Association). This information guided several questions in the interview, which were specifically geared toward asking questions about the participants personal experiences with melanoma. Findings indicated that most men were consciously unaware that skin cancer affected them at higher rates than it did women. Prior to the interviews, only one participant was aware that skin cancer affects men at significantly higher rates than it does women of the same age; however, five participants (all over the age of 30) knew of at least one person who had contracted or died from skin cancer. One participant mentioned at least two different men in his family who had died of skin cancer (B.R., 13:25).

Of the six interviewed, three participants had previously lived in metropolitan beach cities. For those three, it was common to know of someone in the community who dealt with melanoma related health problems. One participant noted that, “a lot of my friends' parents grew up laying out on the beach daily...I know a few of them have had mild cases [of skin cancer].” (K.S., 27:11). Another participant mentioned that after moving from St. Petersburg, Florida to Richmond, Virginia, he noticed “a lot fewer advertisements about sunscreen. Even local news stations [in Florida] would remind people to make sure you apply sunscreen before you head out” (N.S., 14:58). The other three participants who have spent the past ~30 years in central VA did not have as much anecdotal experience with skin cancer, or exposure to messaging about sun risks and protections in general.

Knowledge of Skin Protection

Throughout the semi-structured interviews, the terms “skin care” and “skin protection” were used interchangeably, which revealed a divide in the way men view these two terms. When

the participants were asked questions about skin care, they frequently defaulted to discussing relevant trends and products related to face cleansers, serums, moisturizers, and make-up. These questions also generated the most conversation about marketing and advertisements. One participant summed up a commonly mentioned theme that "from an advertising perspective, the manufacturing of skin care products are marketing towards women" (P.T., 11:45). The appeal tends to favor beauty and aesthetics before skin health. On social media apps like Tik Tok and Instagram, "You see these really 'dewy' faces that are stressing the need for this or that product, and as generations are seen in public less, they are seen online more and have to shape a personality around their facial features" (K.S., 12:57).

When the topic of protection was brought up, the conversation expanded to include topics like sunscreen use, protective clothing, and SPF. Conversation about product advertisements was mostly absent, although one participant brought up an interesting take that "sunscreen is marketed towards the idea of fun in the sense that it's about the beach, and they want to keep it about being fun...And I think it's one of those kind of awkward things where if you start bringing in terms like 'skin cancer' and 'melanoma', all of a sudden we're not [having fun]" (B.R., 25:33). At the same time, discussions ventured away from beauty and aesthetics and toward analyzing themes of health and education in the U.S. Only one participant went to the dermatologist semi-annually to check for moles (D.C., 6:37), and none of them were aware that daily application of SPF 30 reduces the risk of getting skin cancer by 50%. At least one disagreed with that fact altogether. Knowledge acquisition about skin protection methods and good skin health in general is expected to be taught in public school health class; however, most public schools in the United States are not federally mandated to implement any regulated education program that promotes wearing sunscreen every single day (Slevin, 2014). When asked how they acquired their skin

health knowledge, the participants responded that it was predominantly through friends, dermatologists, social media, and female family members.

Trends in the Skin Care Industry

On Gender

It was abundantly clear throughout the interviews that these men view skin care as a female driven industry, and that this perception subconsciously extends to behaviors of good skin health and skin protection. The findings also demonstrated that men tended to perceive activities and products related to the skin as rooted in aspects of feminine beauty. For participants over 40 years old, this was ingrained through traditional gender roles. One participant mentioned that “males were not known for their beauty, but I think female society norms have dictated that a woman needs to take care of her hair or skin or body” (P.T., 10:21). To address this, many skin care companies have begun to offer “gender-specific” products to get men generally interested in routine skin care behavior. One participant acknowledged that he used a facial scrub that was marketed to men (N.S., 1:32). These products are generally colored blue or black and tend to highlight masculine-associated words including “tough”, “fight”, and “treatment” on the labels.

Another general trend that stood out during the interviews was the amount of influence women played in helping the men develop basic skin care practices. These men trusted the women in their spheres of influence when it came to decisions of product usage and quality. Four participants acknowledged that the products they currently use were acquired through a mother, spouse, or close female friend. For one participant, this also included specific mention of skin protection, "My mom in particular has always brought up, when going anywhere, just always asking about putting sunscreen on my face for protection" (B.R., 5:19).

On Age

The interviews revealed a strong relationship between age and self-image— specifically that the older the age, the less concerned a participant was about their self-image. "In the same way that my skin is aged-- you can see the crow's feet to the sides of my eyes and the wrinkles in my forehead. Those things have never been something that had bothered me, nor have I felt shamed or judged based upon my skin" (P.T., 21:22). In some ways, this disinterest in maintaining a "desirable" self-image could also dissuade many from continuing to practice good skin protection measures later in life. This is particularly worrisome because the rates of skin cancer diagnosis in men increase with age.

Another emerging trend on the topic of skin protection is the concept of "preventative versus responsive" health care. Participants under the age of 40 generally spoke about sun protection with a forward-thinking outlook. They preferred to look at skin health preventatively by having a medical professional examine their body. One participant said that his idea of skin protection is "to go to the dermatologist and get things checked so you can catch something early. I fully believe that you can still develop Melanoma or skin cancer, even if you are using all of these expensive products" (K.S., 21:40). In contrast, participants over the age of 40 spoke about skin health in terms of responsive care. One participant said, "I do not apply anything to my skin, not even lotion on arms and legs and things of that nature. Typically, it's only when I feel like I've got an issue or a problem" (P.T., 8:21).

On Education

In the absence of a legitimate skin health curriculum implemented in public schools, I wanted to look at the alternate ways people acquired their skin health knowledge. All participants were familiar with SPF and sunscreen, but some had more knowledge than others.

One factor that impacted this was previous diagnosis of a skin health issue. For example, one participant spoke of his experience with eczema. "I notice that I have flare ups with eczema, which I've had since I was a little kid, so in that sense, I definitely have maintenance every time I get out of the shower" (K.S., 6:47). Having previous skin health issues was a major indicator of whether a man would be more or less intentional about preventatively applying sun protection measures. Another participant who struggled with cystic acne, said the experience of searching for one product to solve his issues, led to the development of an entire routine. "I would definitely try a lot of things out in my teenage years. More recently, I've found out what works for me, and I really keep a strict morning and night routine, so I can prevent further face troubles" (S.R., 1:43).

As with most industries, skin care has undergone rapid transformation in the last 2 decades due to advances in technology and social media. Not only do these platforms provide more outlets for companies to sell their products, but it also gives them enhanced visibility and the ability to influence discourse. These social media apps also have the ability to track your interests and use that information to constantly curate the content you see online. One participant noted that he had recently turned to social media for a skin care solution. "I picked up a TikTok suggestion, it's actually worked wonders for me. I washed my face with head and shoulders shampoo. The zinc in it is supposed to help with acne" (N.S., 1:54). Many dermatologists and aestheticians have YouTube and Tik Tok accounts where they can post videos of their guidance and expertise to millions of people en masse. A general consensus among participants was that the swell in social influence has "something to do with the younger generations actually paying more attention to themselves and their health" (N.S., 5:07).

Recommendations and Looking Forward

The goal of this project was to research the ways that major skin care industry players are addressing higher rates of melanoma skin cancer diagnoses in adult men (18-50 years). After analyzing the data findings, there are three target areas that require further consideration looking forward. These target areas address increasing visibility and relevancy of the issue, dismantling harmful gender stereotypes, and conducting further research on the topic.

Increase Visibility and Relevancy of the Issue

In the last 20 years, increased technological advances have led to an abundance of easily accessible research on UV rays and skin cancer. There is no doubt that skin care companies undergo significant amounts of research and development and have that data readily accessible to utilize in their public marketing campaigns. One participant acknowledged that compared to when he was growing up in the 1960s, he sees many more advertisements that promote sunscreen from a health perspective, "Back growing up, you never heard UV protection at all and didn't even hear any of that in the commercials" (D.C., 28:33). However, all participants agreed that good skin health is not marketed toward men as seriously as it should be. For that reason, it is incumbent on multiple stakeholders to boost the visibility of this issue. Companies and retailers that carry sunscreen and other products containing SPF should increase messaging about men's skin cancer risk. Schools should provide adequate curriculum to all students about the risks of sun exposure and the best ways to practice good skin health. Doctors and medical professionals should encourage men to get regular screenings for skin cancer. And lastly, policy makers should pass laws to ensure that all of these resources are easily accessible and free to the general public.

Dismantle Harmful Gender Stereotypes

In addition to raising the profile of this issue, there is also an element of changemaking that must occur. All participants acknowledged that men have a relative stubbornness and pride when it comes to their health and bodies. One person summed it concisely, saying that he thinks “there's a certain stubbornness with masculinity that would prevent men from even addressing something that would be changing in their bodies” (K.S., 32:59). It’s difficult not to presume that this perception has a widespread effect on how men perceive “skin care” versus “skin protection”. When speaking about skin protection, many of the participants took the opportunity to acknowledge their own biases and reckon with how societal gender bias has affected their perceptions and behaviors. When speaking about skin care, the participants older than 40 spoke about skin care in reference to make-up, beauty, and aesthetics, while participants younger than 40 tended to speak about self-image, technology, and social status. One participant reflected by saying “our predisposed notion is that he [man] is tough and doesn't need to put anything on his skin to protect himself” (N.S., 21:14). It is very reasonable to suggest that men’s lack of sunscreen use (and general sun protection measures) can be somewhat attributed to the perception that practicing skin care, and thus skin protection, is a feminine activity. Debunking this viewpoint is crucial to addressing the high rate of skin cancer deaths for adult men.

Conduct further intersectional research on skin protection behavior

Pure experimental design calls for the isolation and control of one variable to see how it affects a given outcome. To observe and research human behavior, there needs to be a recognition that humans are made up of complex systems and multiple variables interact with one another all at once. A primary objective of this project was to compile qualitative research from multiple disciplines and present it to illuminate the multiplicative effects of interdependent

categories and factors. The semi-structured interviews were intentionally designed to engage through the lens of gender roles but also remained open-ended enough to collect qualitative data related to age, race, social status, and accessibility. It's a bit ironic because in a sociological context, intersectionality is rooted in privilege, and the affected population of this research study is white, adult men. However, in the context of men's health, there is a need to consider how structural factors and men's socially defined characteristics affect the relationship between sex, gender, and health (Griffith, 2012).

Conclusion

This research study presented several key trends. Men undoubtedly get (and die from) skin cancer at significantly higher rates than women, with the disparity increasing with age. Men also do not tend to prioritize skin care because they associate it with femininity and beauty. There is less societal expectation for men to look beautiful, so they are not concerned with practicing skin care. These perceptions of the skin care industry can dissuade men from engaging in skin protection behaviors, which are much more rooted in health and medicine. As a result, men are significantly less likely to apply daily coverage of SPF 15 than women are, despite the fact that men tend to work in outdoor occupations and spend more average time in the sun per week.

Addressing the disparity in skin cancer rates is a two-step process. People need to first be convinced of the issue, before accepting a possible solution. While there is enough existing research to support the first step, there has still not been an effective information campaign taught in public school health classes. Most men are not seeking out protection methods to mitigate their risk. In fact, most adult men are completely unaware that skin cancer is an issue that disproportionately affects them. To accommodate all of the risk factors that make adult men

more vulnerable to getting skin cancer, there needs to be a holistic approach to protection that is clear and accessible. Part of this approach will be directed at dismantling stereotypes of hegemonic masculinity where it intersects with health. Caring for one's skin, especially to prevent skin cancer, should not be marketed for consumption as either masculine or feminine, but universal.

Coming off the heels of the COVID-19 pandemic, the skin care industry is enjoying an overall boom in its size, wealth, and influence. Rates of men using skin care are at an all-time high, which shows promise that regular skin protection could become an adopted behavior by men in the future. Additionally, men are becoming more likely to care about and seek out knowledge about maintaining healthy skin, because they are starting to care about beauty and health as a societal achievement within reach. With more visibility and support for the issue at hand, men will be more likely to understand the relevancy of good skin protection behaviors and begin adopting them from early ages.

References

American Academy of Dermatology. (2022). Melanoma strikes men harder.

<https://www.aad.org/public/diseases/skin-cancer/types/common/melanoma/men-50#:~:text=Men%20are%20more%20likely%20to,than%20women%20to%20develop%20melanoma>

Bittar, C. (2004). Men's Grooming: Past the Surface. *Brandweek*, 45(45), 24–28.

Braun, F. (2020, May 4). Skin deep: Is the future of skincare gender neutral? *Vogue India*.

<https://www.vogue.in/beauty/content/skin-deep-is-the-future-of-skincare-gender-neutral>

Centers for Disease Control. (n.d.). Sun Safety at Schools: What you can do.

Skin Cancer Primary Prevention and Education Initiative.

https://www.cdc.gov/cancer/skin/pdf/sunsafety_v0908.pdf

Drissi, M., Carr, E., & Housewright, C. (2021). Sunscreen: a brief walk through history.

Proceedings (Baylor University. Medical Center), 35(1), 121–123.

<https://doi.org/10.1080/08998280.2021.1966602>

Everett Jones S., Guy G.P. Jr. (2017 May 1). Sun Safety Practices Among Schools in the United States. *JAMA Dermatol*; 153(5):391-397.

Fortune Business Insights. (n.d.). Skincare Market Size, Share, and COVID-19 Impact Analysis.

Date Accessed: Nov. 10, 2022.

<https://www.fortunebusinessinsights.com/skin-care-market-102544>

Galletta, A. (2013). *Mastering the Semi-Structured Interview and Beyond : From Research Design to Analysis and Publication*. NYU Press.

Gamba C.S., Clarke C.A., Keegan T.H.M., Tao L, Swetter S.M. (2013 August).

Melanoma Survival Disadvantage in Young, Non-Hispanic White Males Compared With Females. *JAMA Dermatol.* 149(8):912–920.

<https://jamanetwork.com/journals/jamadermatology/fullarticle/1699365>

Griffith, D. (2012, Apr 21). An intersectional approach to Men's Health. *Journal of Men's Health* 106-112. Mary Ann Liebert, Inc. Publishers

Holman, D. M., Berkowitz, Z., Guy, G. P., Jr, Hawkins, N. A., Saraiya, M., & Watson, M. (2015). Patterns of sunscreen use on the face and other exposed skin among US adults. *Journal of the American Academy of Dermatology*, 73(1), 83–92.e1.

<https://doi.org/10.1016/j.jaad.2015.02.1112>

Liu-Smith, F., Farhat, A. M., Arce, A., Ziogas, A., Taylor, T., Wang, Z., Yourk, V., Liu, J., Wu, J., McEligot, A. J., Anton-Culver, H., & Meyskens, F. L. (2017). Sex differences in the association of cutaneous melanoma incidence rates and geographic ultraviolet light exposure. *Journal of the American Academy of Dermatology*, 76(3), 499–505.e3.

<https://doi.org/10.1016/j.jaad.2016.08.027>

Marshall, G. & Rossman, C. (2016). *Designing qualitative research* (6th ed.). Thousand Oaks, CA: Sage Publications.

McKenzie, C., Rademaker, A., & Kundu, R. (2018 Dec 7). Masculine norms and sunscreen use among adult men in the United States: A cross-sectional study. *Journal of the American Academy of Dermatology*. <https://doi.org/10.1016/j.jaad.2018.11.053>

Ourisman, J. (2021 Sep 1). Men Would Rather Die than Wear Sunscreen. Why?.

Harper's Bazaar.

<https://www.harpersbazaar.com/beauty/skin-care/a37709102/sunscreen-for-men-preventing-skin-cancer/>

QuickStats. (2020). Percentage of Adults Aged ≥ 18 Years Who Always Use Sunscreen When Outside for >1 Hour on a Sunny Day, by Sex and Age Group — National Health

Interview Survey, United States. *MMWR Morb Mortal Wkly Rep* 2022;

<http://dx.doi.org/10.15585/mmwr.mm7122a5>

Repinski, K. (2020 June 17). Why Men Don't Wear Sunscreen — and How to Start.

Water's Edge Dermatology.

<https://www.wederm.com/2020/06/17/why-men-dont-wear-sunscreen-and-how-to-start/>

Saleh, M., Awwad, O., Abdel Jalil, M., Al, Q., Saleh, M., Al Thaher, Y., & Abdelghany, S.

(2022). Correlation of skin cancer and actinic keratosis-related knowledge and sun protection behaviors and sunscreen use among a sample of Jordanian population. *Journal of Cosmetic Dermatology*, 21(12), 7066–7074

<https://doi-org.reference.sit.edu/10.1111/jocd.15377>

Skin Cancer Foundation. (2023 Jan). Skin Cancer Facts & Statistics: What You Need to Know.

<https://www.skincancer.org/skin-cancer-information/skin-cancer-facts/>

Slevin, T. (2014). *Sun, Skin and Health*. CSIRO Publishing.

U.S. Food & Drug Administration. (2017 July 14). Sun Protection Factor (SPF). Center for Drug Evaluation and Research (CDER).

<https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/sun-protection-factor-spf>

Appendices

Appendix A – Interview Guide

Before we start our interview, please read over the following information and list of questions.

Men are more likely to die of skin cancer than women. This is true at any age, but most prominently in young men aged 18-50 (American Academy of Dermatology, 2022). It is also true that men in that age range are significantly less likely to apply daily use of SPF, or to have a basic skin care routine at all. But as the COVID-19 pandemic has bolstered public interest in personal health and hygiene, skincare products have expanded into new markets including male dominated health spaces. With more influence and revenue than ever before, **I am interested in researching the ways that major skin care industry players are addressing higher rates of melanoma and nonmelanoma skin cancer diagnoses in young adult men (18-50 years)? Are there any active campaigns to address this issue?** Major industry players can include dermatologists, skin care product producers and male product consumers.

Topics covered in this interview include:

Skin care Industry – A specific segment within the cosmetics industry that includes creams, lotions, and powders, which improve the quality and health of the skin and provide nourishment. These products are used daily by a number of people for various purposes such as moisturizing, hydrating, and cleansing, among others (Fortune Business Insights).

Melanoma - Melanoma is the most dangerous form skin cancer, and it disproportionately affects men. It is caused primarily by exposure to ultraviolet light (UV) via sunlight or artificial tanning. Compared to women, men have thicker skin which contains more collagen and elastin to keep the skin firm. These characteristics also make the skin more prone to damage from ultraviolet (UV) rays, which leaves men at considerably higher risk for skin cancer diagnosis (American Academy of Dermatology Association, 2022).

Sunscreen/SPF - According to National Health Interview Survey (NHIS) data, approximately one third of adults usually or always use sunscreen when outdoors in the sun for 1 hour or more. Use is particularly low among certain groups such as men, non-Hispanic blacks, those with less sun sensitive skin, and those with lower incomes. These groups may benefit from guidance on alternative methods of sun protection (Holman et al, 2015).

On skin composition and gender - A man's skin contains more collagen and elastin, fibers that give the skin firmness and keep it tight. Research shows that these differences make men's skin more likely to be damaged by the sun's ultraviolet (UV) rays (American Academy of Dermatology Association, 2022).

On gender and perceptions of skin care - One proposed explanation is that sun safety is a feminine concern that is at odds with traditional male roles, which could suggest that adherence to masculine norms can serve as a barrier to sun safety (McKenzie et al, 2018).

Background and Connection to Skincare:

1. Please tell us your name and give a brief introduction about your personal and professional background.
2. Please state, if any, your proximity to skincare or skincare products.
3. Please share any experiences or perceptions about the skincare industry (influencers, products, etc.).
4. When thinking about skin care products, how do you feel about the following values?:
 - Health and Safety
 - Aesthetics and Beauty
 - Price
 - Ingredients
 - Popularity
5. How do you perceive skin care rituals through the lens of gender or sex?
6. How do you perceive skin care rituals through the lens of social status and wealth?
7. How do you perceive skin care rituals through the lens of race?
8. Do you perceive a difference between skin care and skin protection?

On perceptions and experiences with melanoma (skin cancer):

9. How do you feel about trends in skin protection?
10. What do you know about melanoma? If relevant, please feel free to share about any personal experiences.
11. What is your perception about how someone might get melanoma?
12. What do you know about sunscreen/SPF? If relevant, please feel free to share about any personal experiences.
13. Do you agree with (or conditionally accept) the following statements?:
 - “Men are more likely to develop and die from melanoma at any age [compared to women]” (American Academy of Dermatology).
 - “1 in 5 men regularly apply SPF each day, compared to nearly 1 in 2 women” (Holman et al.).
 - “Using regular daily use of SPF 15 sunscreen can reduce your risk of developing melanoma risk by 50 percent” (Skin Cancer Foundation).
14. Why would someone wear (or not wear) SPF every day, knowing it directly contributes to better health?
15. To what extent do you agree with the following statement?:
 - As the largest influencer of skin products, the face and skin care industry should play a more active role in addressing higher rates of melanoma and nonmelanoma skin cancer diagnoses in young adult men (18-50 years).

Appendix B – Participant Informed Consent Template

TITLE OF THE STUDY: THE SKIN CARE INDUSTRY’S RESPONSE TO DISPROPORTIONATE RATES OF MELANOMA SKIN CANCER DIAGNOSES IN YOUNG ADULT MEN (18-50 YEARS)

RESEARCHER NAME: AARON J THOMPSON

My name is Aaron Thompson, and I am a student with School for International Training located in Brattleboro, Vermont; although I am currently based in Richmond, Virginia. I would like to invite you to participate in a study I am conducting (for partial fulfillment of my MA in Sustainable Development. Your participation is voluntary.

Please read the information below, and ask questions about anything you do not understand, before deciding whether to participate. If you decide to participate, please sign this form and you will be given a printed or electronic copy of this form.

PURPOSE OF THE STUDY

The purpose of this study is to collect qualitative data from semi-structured interviews that will help guide my overall research question, which is to researching the ways that major skin care industry players are addressing higher rates of melanoma and nonmelanoma skin cancer diagnoses in young adult men (18-50 years).

STUDY PROCEDURES

Your participation will consist of answering about 15-20 questions related to skin care, skin protection, skin cancer, and masculinity. This interview should take no more than 60 minutes of your time. For convenience, I am proposing to host this interview in a private Zoom meeting that would be recorded with cameras on, however, if you do not wish to be audio/video-recorded, we can absolutely find an alternate method that is more comfortable.

POTENTIAL RISKS AND DISCOMFORTS

Some of the topics touched upon are sensitive, so it is possible that some questions will touch upon moments of lived experience that might be socially and psychologically triggering. I have provided an interview guide with background information, a brief list of the topics we will cover, and a list of the questions that will be asked.

Other than that, there are no foreseeable risks to participating in this study and no penalties should you choose not to participate. During the interview you have the right not to answer any questions or to discontinue participation at any time.

POTENTIAL BENEFITS TO PARTICIPANTS AND/OR TO SOCIETY

For anyone participating in this study, they will undoubtedly be prompted to reflect on their history of skin care and skin protection. For some, it might inspire them to take better care of the body's largest organ, especially if they know they are part of a high-risk population.

CONFIDENTIALITY

Interview data will be stored on a password protected computer device, that only I will have access to. Interview data will include documents and recordings that contain personally identifiable information (PII) including your name, organization, and any other personal details you should wish to share during the course of our interview. After five years, all files and information related to this project will be deleted. If you should prefer to not have any personally information used in the final paper or presentation, an appropriate pseudonym can be used to keep your identify confidential.

FUTURE USE OF DATA

The information collected in this study will not be used for future research studies or distribution.

VOLUNTARY PARTICIPATION AND WITHDRAWAL

Your participation is voluntary. Your refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled. You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights, or remedies because of your participation in this research study.

RESEARCHER'S CONTACT INFORMATION

If you have any questions or want to get more information about this study, please contact me at aaron.thompson@mail.sit.edu.

RIGHTS OF RESEARCH PARTICIPANT—IRB CONTACT INFORMATION

In an endeavor to uphold the ethical standards of all SIT proposals, this study has been reviewed and approved by the SIT IRB. If you have questions, concerns, or complaints about your rights as a research participant or the research in general and are unable to contact the researcher please contact the Institutional Review Board at irb@sit.edu or:

School for International Training, Institutional Review Board,

1 Kipling Road, PO Box 676,
Brattleboro, VT 05302-0676, USA
+1-802-258-3132

“I have read the above and I understand its contents and I agree to participate in the study. I acknowledge that I am 18 years of age or older.”

Participant’s signature: _____ Date:

Researcher’s signature: _____ Date:

OTHER CONSENT ITEMS

Consent to Quote from Interview - I may wish to quote from the interview with you either in the presentations or articles resulting from this work. Initial one of the following to indicate your choice:

_____ I agree to consent to quote from an interview

_____ I do not agree to consent to quote from an interview

Consent to Audio/Visual Record Interview. Initial one of the following to indicate your choice:

_____ I agree to consent to audio record an interview

_____ I do not agree to consent to audio record an interview

Consent to Have Recordings Played in Public - I may wish to record the interview with you and play that recording in public, either a conference or classroom presentation. Initial one of the following to indicate your choice:

_____ I agree to consent to audio record an interview and that the recording be used in a conference (classroom) presentation.

_____ I do not agree to consent to audio record an interview and that the recording be used in a conference (classroom) presentation.