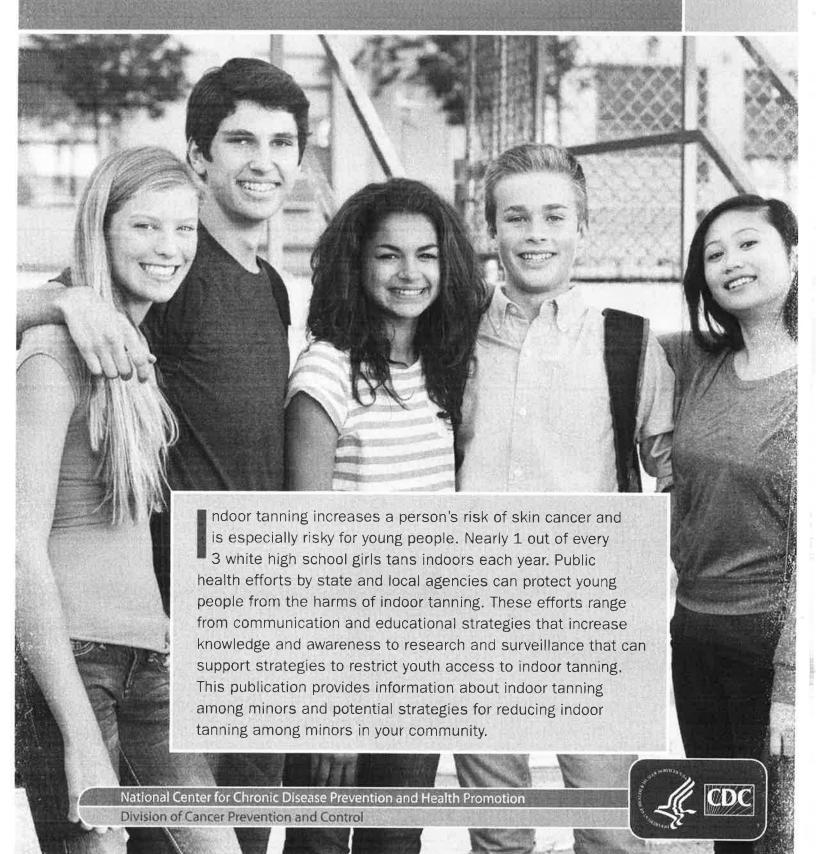
# REDUCING INDOOR TANNING AMONG MINORS

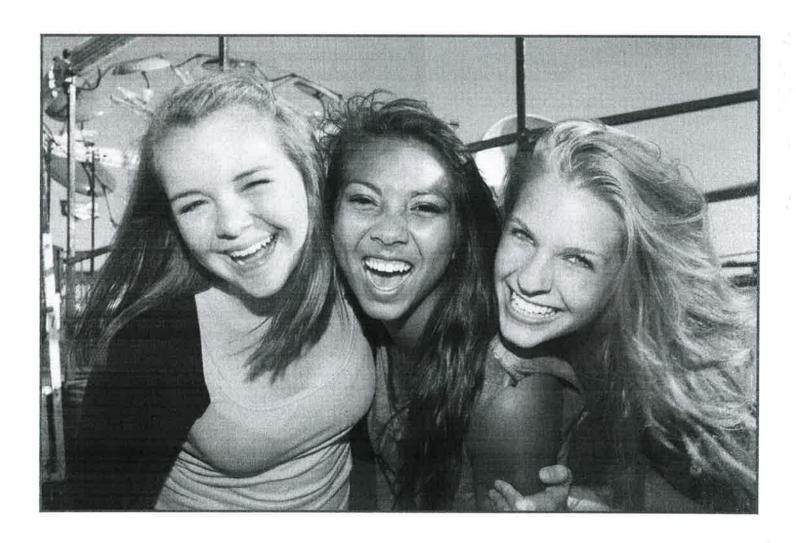


kin cancer is the most common form of cancer in the United States. Most cases of skin cancer are caused, in part, by exposure to ultraviolet (UV) radiation from the sun or from indoor tanning. Limited UV exposure from the sun can have benefits such as improving a person's mood and stimulating the body's production of vitamin D. Excessive UV exposure from indoor tanning and sunbathing offers no additional health benefits and increases the risk of harms from UV exposure.

Indoor tanning in particular may expose users to excessive levels of UV radiation, which are harmful and easy to avoid. Excessive UV exposure increases a person's risk of skin cancer, including melanoma, which can be deadly. Protecting young people from the harms of indoor tanning may help prevent future cases of skin cancer.

#### SKIN CANCER FACTS

- Skin cancer has been identified as a serious public health problem by the US Surgeon General.
- The most common types of skin cancer are basal cell carcinoma and squamous cell carcinoma. These forms of cancer can usually be treated, but they can be disfiguring and expensive to treat.
- Melanoma is a less common but deadly form of skin cancer.
- More than 400,000 new cases of skin cancer in the United States each year may be related to indoor tanning.



Short-term cosmetic effects from indoor tanning may be more apparent than the long-term health risks. In addition to increasing skin cancer risk, indoor tanning can lead to premature skin aging, such as early wrinkles and age spots, and potentially blinding eye damage.



UV photography showing skin damage from UV exposure not yet visible in normal lighting



Potential premature skin aging caused by UV damage to the skin



Potential vision loss caused by UV damage to the eye

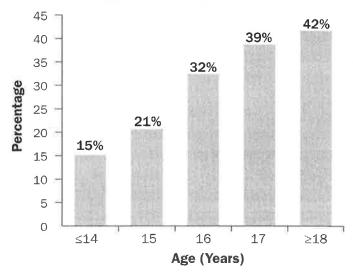
#### INDOOR TANNING AMONG MINORS

Nearly 1 out of every 3 white high school girls used an indoor tanning device such as a tanning bed, tanning booth, or sun lamp during the last 12 months, according to national data from 2013. Some girls start when they are 14, and some start even younger.

The use of indoor tanning often begins during adolescence and increases with age until the late teens or early to mid-20s. A person's risk of skin cancer increases with each indoor tanning session and is highest among those who started tanning at a younger age.

According to 2013 Youth Risk Behavior Survey (YRBS) data from the Centers for Disease Control and Prevention (CDC), about 13% of high school students, 20% of high school girls, and 27% of girls in the 12th grade had used an indoor tanning device, such as a sunlamp, sunbed, or tanning booth (not including a spray-on tan), one or more times during the previous 12 months.

# PERCENTAGE OF WHITE HIGH SCHOOL GIRLS WHO TAN INDOORS



Percentage of non-Hispanic white female high school students who tanned indoors in the past 12 months based on data from the 2013 national Youth Risk Behavior Survey.

Girls are more likely to tan indoors than boys, and non-Hispanic whites are more likely to tan indoors than members of other racial and ethnic groups. In addition, most people who tan indoors say they do it often—10 or more times a year. Adolescents are

more likely to tan indoors if their parents do it or allow them to do it. Girls who first tan indoors with their mothers tend to start at a younger age and are more likely to become habitual indoor tanners than girls who initially tan indoors alone or with a friend.

#### **HOW TO REDUCE INDOOR TANNING AMONG MINORS**

CDC and its partners can work together to reduce the harms of indoor tanning. For example, at the federal level,

- The US Food and Drug Administration regulates indoor tanning devices as both medical devices and radiation-emitting electronic products.
- The Federal Trade Commission investigates false, misleading, and deceptive advertising claims about indoor tanning.
- The Internal Revenue Service collects a 10% tax on indoor tanning services.
- CDC and other federal agencies provide evidence-based information about the harms of indoor tanning and the effectiveness of interventions to reduce or prevent these harms.

Efforts to prevent harms caused by indoor tanning are also underway at state and local levels, and these efforts vary from state to state. Although the knowledge about what works continues to grow, current evidence suggests that the following strategies may be most successful:

# Restrictions on Access Restrictions on Use by Minors

Indoor tanning at any age increases the risk of getting skin cancer, but it is particularly risky for young people. Emerging evidence suggests that laws that restrict access, particularly those that include age restrictions, may be effective in reducing indoor tanning among minors.

# TYPES OF LAWS RESTRICTING INDOOR TANNING ACCESS AMONG MINORS

**Age restrictions:** Indoor tanning is prohibited for minors under a certain age.

**Parental accompaniment:** Parents must accompany minors under a certain age when they tan indoors.

**Parental consent**: Parents must provide written consent before a child under a certain age can tan indoors.

Many states and local communities have passed laws that restrict indoor tanning among minors, but compliance and enforcement varies.

## Restrictions on Unsupervised Indoor Tanning

Unsupervised tanning beds are sometimes available in locations such as gyms and apartment complexes. Unsupervised indoor tanning makes enforcement difficult and may hinder efforts to protect minors from the harms of indoor tanning.

### **Enforcement**

Routine inspection of tanning facilities and equipment is the first step to making sure that policies that restrict access for minors are enforced. State or local health agencies are usually responsible for this enforcement. Fines for violations may increase the likelihood of compliance. The revenue from fines can be invested in future efforts to support continued enforcement over time.

# Restrictions on Misleading Advertisements

Product marketing has a powerful effect on behaviors and social norms. Advertisements that claim indoor tanning is safe or risk-free are false and misleading. Research has shown that children and teens can be influenced easily by these marketing strategies and may not understand the long-term health risks associated with indoor tanning.

## **A Comprehensive Approach**

Evidence suggests that a comprehensive approach that addresses the personal, social, economic, and environmental factors that influence health is the best way to improve health behaviors. This approach

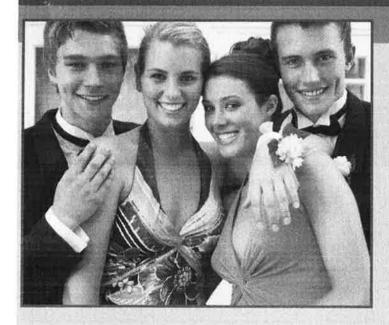
requires collaboration and coordination across many sectors at national, state, and local levels.

Beyond legislative approaches, strategies to reduce indoor tanning among minors may also include interventions that focus on individual behavior change. Examples include messages tailored for specific audiences; activities that involve parents, doctors, and schools; and mass media campaigns.

A comprehensive approach also requires that efforts be assessed, monitored, and evaluated to track and measure their short-term and long-term effects. Evaluation results can be used to identify which strategies are most effective and sustainable and to guide future prevention efforts.



## POLICIES & PRACTICES FOR CANCER PREVENTION



#### YRBS INDOOR TANNING QUESTION

During the past 12 months, how many times did you use an indoor tanning device such as a sunlamp, sunbed, or tanning booth? (Do not count getting a spray-on tan.)

- A. 0 times
- B. 1 or 2 times
- C. 3 to 9 times
- D. 10 to 19 times
- E. 20 to 39 times
- F. 40 or more times

## WHAT COMPREHENSIVE CANCER CONTROL PROGRAMS CAN DO

CDC's National Comprehensive Cancer Control Program (NCCCP) helps prevent and control cancer by supporting the efforts of comprehensive cancer control (CCC) programs to

- Develop data-driven cancer control plans.
- · Set up and convene statewide cancer coalitions.
- Implement and evaluate state cancer control plans.

The NCCCP supports programs in all 50 states, the District of Columbia, 7 tribes and tribal organizations, and 7 US Associated Pacific Islands/territories. Your CCC program can help to reduce indoor tanning among minors in your area through the following activities:

# **Collect and Analyze Data**

 Conduct an environmental scan to identify indoor tanning legislation in your area. Most of this information can be found on the Indoor Tanning Restrictions for Minors website of the National Conference of State Legislatures.

- Work with your state's YRBS coordinator to add a question on indoor tanning to your state's YRBS (if it is not already included). The YRBS monitors priority health risk behaviors among high school students in most states and territories every 2 years.
- Use YRBS data to assess indoor tanning use among high school students in your state.
- Use your state's cancer registry data to examine melanoma incidence and death rates in your area. Look at trends over time by age group, race, and ethnicity.
- Look for other data that may be available for analysis. Examples include administrative data on the number and locations of tanning salons and other businesses that provide indoor tanning in your area.
- Monitor changes in data over time to determine if your efforts to reduce indoor tanning among minors are making a difference.
- Develop a survey on a specific topic, such as whether primary care doctors in your area are counseling minors about skin cancer prevention.

# Identify and Engage Potential Partners

- Educate CCC coalition members about melanoma rates and trends in your area.
- Identify potential partners at local and national levels and ask them to help you educate key stakeholders on strategies to reduce indoor tanning among minors.
- Share current data on skin cancer rates and indoor tanning use with partners.
- Collect information about indoor tanning that you can give to partners and stakeholders.
- Encourage melanoma survivors to share their stories and serve as champions for skin cancer prevention in their community. Survivors can include young adults and teens (with parental permission).
- Survey key partners to identify their needs and what resources they can add to your efforts.

- Share resources from national experts.
   Examples include CDC's Burning Truth communication initiative, the Truth About Tanning infographic, and the Sun Safety for America's Youth Toolkit, as well as skin cancer fact sheets from the US Environmental Protection Agency. These resources are available online.
- Partner with health systems and medical societies to promote US Preventive Services
   Task Force (USPSTF) recommendations to prevent skin cancer. The USPSTF recommends behavioral counseling on how to reduce UV exposure for young people aged 10-24 years who have fair skin. The USPSTF has not found enough evidence to recommend counseling for other age groups or for skin cancer screening in the general population.
- Partner with local colleges and universities to develop and evaluate strategies to reduce indoor tanning among young people.



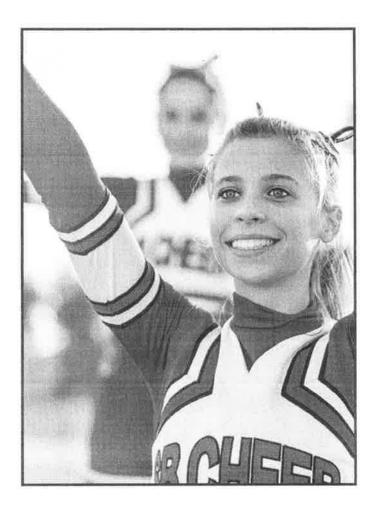
#### **Measure Your Effects**

Use CDC's Comprehensive Cancer Control Branch Program Evaluation Toolkit (available online) to develop an evaluation plan to help you measure the effects of your efforts to reduce indoor tanning among minors. Develop your evaluation plan before intervention activities begin, if possible, to ensure that appropriate evaluation questions and data sources are in place to capture baseline information.

Share your evaluation results with other CCC programs to help identify effective strategies that can be replicated in other areas.

#### RESOURCES

For more information about CDC's efforts to reduce the harms of indoor tanning among minors, see our Promising Practices Brief: Indoor Tanning Among Minors website. This site provides information about potential partners that can support your efforts and references for all scientific data cited.



## **More Information**

Division of Cancer Prevention and Control

National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention

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www.cdc.gov/cancer/promoting\_prevention.htm • Twitter: @CDC\_Cancer