Occupational Skin Disease Prevention: An Educational Intervention for Hairdresser Cosmetology Students

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Disclosures

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- Learner Objectives
 - Describe OSD background and discuss the importance of worksite health promotion in hairdresser cosmetology students.
 - Evaluate the impact of the educational intervention on occupational skin disease knowledge and use of preventive practices by hairdresser cosmetology students.

Background

▶ Occurrence

- More than 13 million Americans have occupational skin exposures that can result in the development of occupational skin disease (OSD). (Centers for Disease Control and Prevention [CDC], 2012)
- Cosmetology professionals have been identified as high risk for development of OSD. (Centers for Disease Control and Prevention [CDC], 2012)
 - ► Wet work employees

Global Expenditures

- > \$ 5 billion EUR in Europe (European Cooperation in Science and Technology, 2012)
- > \$33 million in Australia (Cahill et al., 2012)
- Over \$1 billion in the United States (CDC, 2012)



High Individual and Societal Costs

► Personal Costs

- ► Health care
 - Provider visits, medications, disability, and workers' compensation (Cashman, Reutemann, & Ehrlich, 2012)
- Impact on quality of life
 - Long-term illness, social isolation, unemployment, or career change (Lerbaek, Kyvik, Ravn, Menne, & Agner, 2008; Meding, Lantto, Lindahl, Wrangsjo, & Bengtsson, 2005)



► Societal Costs

- Increased disability and worker compensation payments
- Decreased worker productivity (Cashman, Reutemann, & Ehrlich, 2012; Sell, Flyvholm, Lindhard, & Myygind, 2005)

Literature Review

- Educational interventions reduce prevalence and severity of OSD in wet work occupations (Wilke, Gediga, John, & Wulfhorst, 2012).
- Structured education significantly improves disease specific knowledge of OSD (WIKe, Gediga, John, & Wulfhorst, 2014)
- Education and use of preventive measures reduce OSD symptoms
 - Use of protective gloves, cotton glove liners, barrier creams, moisturizers, and proper hand washing

(Bauer et al., 2002; Bregnhøj, A., Menné, T., Johansen, J.D., & Søsted, H. (2012); Held, Mygind, Wolff, Gyntelberg & Agner, 2002; Sell, Flyvholm, Lindhard, & Myygind, 2005)

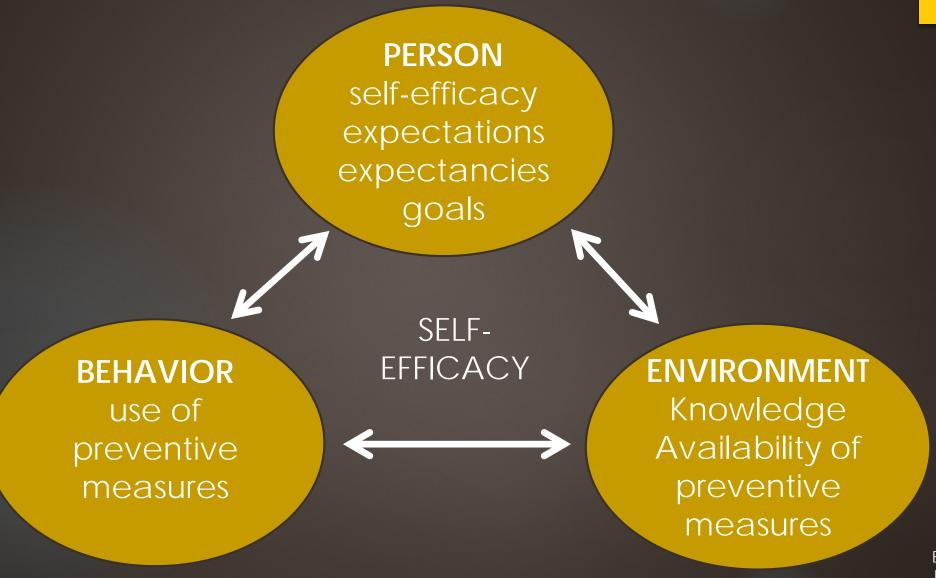
Research related to OSD in cosmetologists in the U.S. is lacking (Warshaw et

Problem Statement

Literature suggests hairdresser cosmetologists frequently develop OSD which can result in high costs to society and the individual. (Lysdal, Sosted, Andersen, & Johnsen, 2011; Warshaw et al., 2012; Cashman, Reutemann, & Ehrlich, 2012)

Health promotion and disease prevention interventions should be utilized to influence reciprocal interactions between the person, their environment, and their behaviors.

Theoretical Framework: Social Cognitive Theory



Bandura, 1986; Bandura, 2004

Clinical Questions

- In cosmetology students, does an educational program on OSD and prevention increase.....
 - knowledge of OSD and prevention over three to four weeks?
 - use of preventive practices for OSD over three to four weeks?
 - ▶ intention to use preventive practices for OSD over three to four weeks?
- In cosmetology students, is there a relationship between:
 - perceived self-efficacy and use of preventive practices for OSD?
 - perceived self-efficacy and intention to use preventive practices for OSD?



Study Methodology

- Quasi-experimental design
 - Single group pre-test and post-test
- Educational intervention on OSD and prevention
 - Pretest given immediately before the intervention with a posttest 3-4 weeks later
 - Paper and pencil

- Statistical Analysis
 - Descriptive
 - ▶ Paired-samples t-tests
 - Pearson product-moment correlation coefficient
- Protection of Human Subjects
 - **WKU IRB**
 - Anonymous Survey

Study Questionnaire

The Cosmetology
 Occupational Skin Disease
 Prevention Questionnaire
 (COSDPQ)

Reliability

Demographics

- SCT Determinants Evaluated
 - Self-efficacy
 - Knowledge
 - Intention
 - Behavior
 - Expectations
 - Expectancies



Sample and Setting

- Convenience sample
 - Conducted at 4 cosmetology schools



► Inclusion criteria:

currently enrolled students in a participating cosmetology school and willing and able to provide informed consent.

► Exclusion Criteria:

inability to understand the English language, age less than 18 years and anyone currently receiving medical treatment for OSD.

Results: Characteristics

Characteristics	Completers	Non-completers	p
	(n = 52)	(n = 28)	
Mean age (SD)	24 (8.3)	23 (6.6)	.733
Mean training months (SD)	7 (4.6)	11 (3.8)*	.0001
Female, n (%)	50 (96)	26 (100)	.186
Training program, Hairdresser, n (%)	52 (100)	25 (100)	0.55
Education			.305
High school graduate or GED, n (%)	26 (50)	11 (41)	
Trade, technical or vocational, n (%)	4 (8)	1 (4)	
Some college, no degree, n (%)	21 (40)	12 (44)	
College degree, n (%)	1 (2)	3 (11)	
Note. Sample sizes may vary due to missing data.			

Results: Paired Samples T-Tests

Outcome	Pretest M(SD)	Posttest M(SD)	р	95% CI	n
Knowledge	5.87(2.08)	7.55(1.44)	<.0001	-2.47, 1.94	47
Intention Scale	13.24(3.31)	15.60(3.47)	<.0001	-3.19, 2.72	50
Behavioral Scale	17.10(4.10)	19.47(4.46)	<.0001	-4.28, 4.16	50
Gloves frequency	1.42(1.14)	2.37(2.04)	<.0001	-1.64, 1.38	41
Moisturizer frequency	1.76(1.79)	2.22(2.06)	<.0001	-1.22, 1.47	47
Handwashing frequency	6.63(4.25)	7.31(5.20)	.9645	-1.07, 2.80	42
Expectations	4.50(.67)	4.60(.63)	<.30	28, .56	51
Expectancies	3.39(.72)	3.68(.54)	<.0019	47, .53	51

Discussion

- ► Findings similar to the literature
 - ► Educational intervention on OSD and preventive measures showed significant improvements in knowledge (Held et al., 2002; Wilke et al., 2014)
 - Significant improvements in frequency of moisturizer application and use of gloves (Bregnhøj et al., 2012; Sell et al., 2005)
 - Decreased wearing of finger rings after an educational programme (Held, et al., 2002)
- No significant increase in handwashing frequency

Implications

- Helps meet government health promotion and disease prevention initiatives and goals.
 - Healthy People 2020
- Identifies educational interventions for OSD which have the potential to increase knowledge of OSD, use of preventive practices, and decrease incidence of OSD.
- Promotes workplace health and safety
 - Health promotion, disease prevention, and general safety for employees contribute to overall health and well-being of an individual.

Limitations

- Convenience sample
- Findings are not generalizable
- Threats to internal validity
 - ► No comparison group
 - History
 - ▶ Testing
 - ► Attrition
- Short duration of the study





Future Research



- Replication of current study with increased geographical diversity.
 - Longitudinal studies
- ▶ OSD prevention strategies and interventions in the U.S.
 - Cosmetology industry
 - Other occupations considered at high risk for development of OSD.

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Questions?

