

Seeing Spots: Addressing the Silent Epidemic of Acne in Outlandia's Youth

Acne is the most common chronic disease among adolescents in Outlandia (Outlandia Department of Health, 2010). Long considered a benign rite of passage, acne actually has far-reaching effects on the health and well being of adolescents, significantly affecting success in school, social relationships, and general quality of life. Yet large portions of the state's population are unable to access treatment for acne. The Secretary of Health's Report on Adolescents' Dermatologic Health in Outlandia (2010) is a call to action for policymakers and health professionals to improve the health and well being of Outlandia's youth by increasing access to dermatologic care.

Scope of the Problem

Acne is five times more common than the common cold in adolescents (Outlandia Secretary of Health, 2010). The group at highest risk of acne—youth between the ages of 11 and 21—accounts for nearly 20 percent of Outlandia's population (U.S. Census Bureau, 2010). In a recent study of youth enrolled in public high schools in Outlandia, 70 percent had mild to moderate acne and 15 percent were in urgent need of dermatologic care (Halberstam, French, and Ramsey, 2009).

Effects of Acne

Untreated, acne can lead to significant physical, emotional, and social problems (Acne Eradication Program, 2009). These problems are preventable if the disease is treated early. However, acne is both progressive and cumulative, becoming more complex and costly to treat over time. At worst, untreated acne may lead to irreversible damage over the lifespan (AEP, 2009).

Effects of Untreated Acne

- Infection
- Overly-long bangs
- Poor body image
- Low self-esteem
- Low social status
- Poor school attendance

Sources: Acne Eradication Program, 2009; Reinhardt and Callahan, 2007

Access to Dermatologic Care

Prevention and early intervention are critical to avoid the long-term negative effects of acne. But American adolescents, particularly those living in poverty, have limited access to dermatologic care, resulting in unnecessary disease, discomfort, and school absenteeism. While children living in poverty suffer the same levels of acne as their more affluent peers, they are only half as likely to receive dermatologic care (Acne Eradication Program, 2009).

Currently, Outlandia has 56 practicing dermatologists (Outlandia Department of Health Professions, 2010). However, just 18—less than one-third—accept Medicaid (Outlandia Department of Medical Services, 2010), likely due to low reimbursement rates. Nationally, only

about one in five adolescents enrolled in Medicaid received a single dermatologic visit in a year (National Dermatologic Health Study, 2005).

Compounding the problem of access to care, over one-third of the State's population lives more than five miles from a store that sells benzoyl peroxide products (Outlandia Department of Health, 2010).

Children living in poverty suffer the same levels of acne
but are half as likely to receive dermatologic care

A Call to Action

As the most widespread, chronic adolescent health condition, acne is costly to youth, families, and the state. Statewide efforts to prevent acne and increase access to dermatologic care are critical to improve the dermatologic health of adolescents in Outlandia.

The Outlandia Department of Health (ODH) has undertaken two important initiatives in an effort to improve adolescents' dermatologic health. A pilot program to distribute facial cleansers to high schools is intended to encourage students to wash their faces after physical education classes. The ODH also is educating health care providers about the importance of early detection and treatment for acne, as well as the need to collect and maintain dermatologic information within general health records.

These initiatives are important first steps toward addressing the silent epidemic of adolescent acne in Outlandia. But further action is necessary to improve access to dermatologic health care. The Secretary of Health's Report on Adolescents' Dermatologic Health in Outlandia (2010) calls on policymakers and health professionals to:

- Increase the number of dermatology graduates,
- Create incentives for dermatology graduates to practice in underserved communities,
- Provide ongoing education about dermatology to pediatric primary care providers, and
- Promote insurance coverage for dermatologic health services.

Support for these efforts will significantly improve the physical and emotional health of Outlandia's youth.

[This area would include endnotes and your organization's contact information.]

Seeing Spots: Addressing the Silent Epidemic of Acne in Outlandia's Youth

Acne is the most common chronic disease among adolescents in Outlandia (Outlandia Department of Health, 2010). Long considered a benign rite of passage, acne actually has far-reaching effects on the health and well being of adolescents, significantly affecting success in school, social relationships, and general quality of life. Yet large portions of the state's population are unable to access treatment for acne. The Secretary of Health's Report on Adolescents' Dermatologic Health in Outlandia (2010) is a call to action for policymakers and health professionals to improve the health and well being of Outlandia's youth by increasing access to dermatologic care.

Scope of the Problem

Acne is five times more common than the common cold in adolescents (Outlandia Secretary of Health, 2010). The group at highest risk of acne—youth between the ages of 11 and 21—accounts for nearly 20 percent of Outlandia's population (U.S. Census Bureau, 2010). In a recent study of youth enrolled in public high schools in Outlandia, 70 percent had mild to moderate acne and 15 percent were in urgent need of dermatologic care (Halberstam, French, and Ramsey, 2009).

Effects of Acne

Untreated, acne can lead to significant physical, emotional, and social problems (Acne Eradication Program, 2009). These problems are preventable if the disease is treated early. However, acne is both progressive and cumulative, becoming more complex and costly to treat over time. At worst, untreated acne may lead to irreversible

Effects of Untreated Acne

- Infection
- Overly-long bangs
- Poor body image
- Low self-esteem
- Low social status
- Poor school attendance

Sources: Acne Eradication Program, 2009; Reinhardt and Callahan, 2007

You can probably come up with a better title, but this one at least conveys a sense of urgency with the phrase "silent epidemic."

The first paragraph focuses on the main points: Acne is very common; acne is harmful if left untreated; access to care is inadequate; policymakers and health professionals can improve adolescent health by increasing access to care.

This rewritten brief is organized in clear sections:
How many are affected?
What are the effects?
How big is the problem of access?
What should be done to solve the problem?

In the original brief, statistics on prevalence were scattered throughout. Here, they are consolidated into a single section and pared down to the most striking and/or relevant. You could put back in the statistics about prevalence nationally if it is important to show how the prevalence in Outlandia compares to the rest of the country: "Nationally, around 25 percent of middle school students and 75 percent of high school students have at least one pimple (Acne Eradication Program, 2009)."

The general message, that acne leads to significant physical and emotional problems, is conveyed in the body of the text. A sidebar is used to break up the text-heavy page and to highlight specifics that might get lost in a longer paragraph.

damage over the lifespan (AEP, 2009).

Access to Dermatologic Care

Prevention and early intervention are critical to avoid the long-term negative effects of acne. But American adolescents, particularly those living in poverty, have limited access to dermatologic care, resulting in unnecessary disease, discomfort, and school absenteeism. While children living in poverty suffer the same levels of acne as their more affluent peers, they are only half as likely to receive dermatologic care (Acne Eradication Program, 2009).

Yes, you can start a sentence with “but.” And “and.”

Currently, Outlandia has 56 practicing dermatologists (Outlandia Department of Health Professions, 2010). However, just 18—less than one-third—accept Medicaid (Outlandia Department of Medical Services, 2010), likely due to low reimbursement rates. Nationally, only about one in five adolescents enrolled in Medicaid received a single dermatologic visit in a year (National Dermatologic Health Study, 2005).

Compounding the problem of access to care, over one-third of the State's population lives more than five miles from a store that sells benzoyl peroxide products (Outlandia Department of Health, 2010).

A Call to Action

As the most widespread, chronic adolescent health condition, acne is costly to youth, families, and the state. Statewide efforts to prevent acne and increase access to dermatologic care are critical to improve the dermatologic health of adolescents in Outlandia.

The Outlandia Department of Health (ODH) has undertaken two important initiatives in an effort to improve adolescents' dermatologic health. A pilot program to distribute facial cleansers to high schools is intended to encourage students to wash their faces after physical education classes. The ODH also is educating health care providers about the importance of early detection and treatment for acne, as well as the need to collect and maintain dermatologic information within general health records.

You could put the information on existing efforts in a different section if you preferred.

These initiatives are important first steps toward addressing the silent epidemic of adolescent acne in Outlandia. But further action is necessary to improve access to dermatologic health care. The Secretary of Health's Report on Adolescents' Dermatologic Health in Outlandia (2010) calls on policymakers and health professionals to:

- Increase the number of dermatology graduates,
- Create incentives for dermatology graduates to practice in underserved communities,
- Provide ongoing education about dermatology to pediatric primary care providers, and
- Promote insurance coverage for dermatologic health services.

Support for these efforts will significantly improve the physical and emotional health of Outlandia's youth.

Readers scanning the brief should be able to quickly identify the recommendations and understand what they are being asked to do.

You could highlight the recommendations even more by putting them in a text box with “key points.”