



**African-Caribbean
Cancer Consortium**

Meeting Report 2010

Building Capacity to Address Cancer Health Disparities in Populations of African Descent: Establishing International Networks and Successful Collaborations

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The third international conference of the AC3 was held on November 11-12, 2010 at the Wyndham Miami Airport Hotel & Executive Meeting Center. The theme was *“Building capacity to address cancer health disparities in populations of African descent: a focus on prostate cancer.”* Presentation of research and discussions of the status of the ongoing collaborative studies and future studies were accomplished. There were 27 conference attendees that represented institutions from various countries; six (22%) of these attendees were students. Table 1 shows the breakdown of countries represented at the workshop and the attendees’ respective institutions. Fourteen abstracts were selected for either oral or poster presentations. All abstracts were reviewed and scored by two independent reviewers, and those with higher scores were selected for presentation during the oral poster sessions. The presentation of abstracts (oral and poster) provided an excellent opportunity for participants to share their research efforts with fellow colleagues.

Table 1: Conference attendee country and institutional affiliations, attendance	
Country	Institution
Africa	University of Benin Teaching Hospital
The Bahamas	Princess Margaret Hospital, Nassau University of the West Indies, The Bahamas
Jamaica	University of the West Indies, Mona Campus
Trinidad & Tobago	Dr Elizabeth Quamina Cancer Registry of Trinidad and Tobago; Takare Health & Recreation Group
United States	Albert Einstein College of Medicine of Yeshiva University Columbia University* Florida A&M University Howard University* Moffitt Cancer Center NIH, Fogarty International Center Prairie View A&M University* State University of New York, Downstate Campus* University of Pittsburgh University of Florida University of Louisville Thomas Jefferson University University of Pennsylvania
*Institutions represented by students	

Scientific presentations

The conference began with a welcome and opening presentation by Dr. Camille Ragin, the Principal Investigator of the AC3, who provided an overview of the consortium’s goals, a

recap of the last two conferences, summary of ongoing research studies, and ongoing AC3 training initiative for students as well as investigators from developing countries. At the time of the conference, there were 63 AC3 members, many of whom were actively engaged in collaborative research studies. The objectives of the conference were outlined and the reasons for the conference theme, *“Building capacity to address cancer health disparities in populations of African descent,”* were highlighted. Dr. Ragin emphasized the challenges that developing world researchers face due to limited resources for research conduct and training infrastructure. The recognized shortage for minorities in cancer research, particularly in the United States, was also presented as another reason for capacity building. The mechanisms by which the conference objectives sought to build capacity to promote cancer research in minority populations were outlined (Table 2). Dr. Ragin emphasized that capacity building not only promotes diversity in cancer research but also helps to improve research skills through training, thus promoting high-quality, innovative research.

Table 2: How the AC3 2010 conference agenda addressed the need to build capacity to promote cancer research in minority populations

1. A focus group session “International Collaborations: what works and what does not”
2. Session on how to start a cancer registry while considering limited resources
3. Project development workshop
4. Session on NIH funding opportunities for international research & grant writing tips

The keynote presentation by *Edith Mitchell, MD, Thomas Jefferson University, Philadelphia, USA* discussed the factors associated with the increased cancer burden that exists in African American adults, and outlined the socioeconomic issues that have been implicated in the increased incidence and mortality of cancer in Black adults and the rationale behind them. The presentation ended with a summarization of different approaches to reduce the existing disparities in cancer and its treatment in Black American adults. Subsequent scientific sessions included presentations on Cancer Risk: Genetic, Lifestyle & Environment; Cancer Prevention: Knowledge, Attitudes and Perception; Cancer Outcomes: Survivorship and

Response to Therapy. Research presentations covered various cancers, but special emphasis was made on studies involving prostate cancer disparities. An overview of the prostate cancer problem in men of African ancestry and a conceptual framework revealing the independent and joint contributions of culture, environment, behavior, ancestry and genomic variation was described by *Timothy Rebbeck, PhD, University of Pennsylvania, USA*. Other presentations addressed the risk of prostate cancer in Jamaican men as it relates to serum and dietary calcium intake and associations of genetic variants on chromosome 8q24 as well as the *GST* gene in Caribbean and African men. *Hayley Thompson, PhD, Albert Einstein College of Medicine of Yeshiva University, USA* described psychological constructs related to cancer behaviors and outcomes across people of African descent. Special topic sessions included a presentation on “How to start a Cancer Registry” by Veronica Roach, Cancer Registrar, from *Dr. Elizabeth Quamina Cancer Registry* in Trinidad & Tobago.

Improving Diversity in Cancer Research through Training and Mentorship

The first day of the conference concluded with a project development workshop where three projects were presented, representing the areas of genetic epidemiology, behavioral science and cancer control. Presenters benefited from valuable critics and suggestions for project improvements. Student training has always been a priority of the AC3 and serves as one key mechanism by which diversity in cancer research might be achieved. Dr. Yvonne Njage from the National Institute of Health, Fogarty International Center’s Division of International Training and Research led the discussion on effective training and mentorship that ultimately improves diversity in cancer research. Special oral presentations from student trainees concluded this Session; the topics included “Disparities in Endometrial Cancer Survival for a Brooklyn Cohort” by Ashley Creque, a student intern from the State University of New York, Downstate Minority Summer Training Program, and “Pesticide Exposure and Prostate Cancer Risk” by Brionna Davis-Reyes, a trainee from the Department of Defense-Congressionally

Directed Medial Research Program-funded Training Program in Prostate Cancer. Poster presentations by other participating students were also judged, and the Best Poster Award was awarded to Kevin Xu for his study on “Relationships between Oncologist Gender, Participatory Decision Making, Anxiety, and Inner-City Breast Care.”

International Collaborations: what works and what does not

Even with the successful collaborations established through the AC3, there are still many challenges and limitations to progress in the cancer health disparities field. A number of these barriers were identified during a focus group session entitled “*International Collaborations: What Works and What is Worthless*” and are summarized in Table 3.

The Black population in the United States, often referred to as African American, in reality consists of a diverse Diaspora of African ancestry involving native African American and immigrant Caribbean and African sub-populations. The incidence and mortality patterns of cancer in the Caribbean islands as well as Africa have not been well studied due to multiple levels of challenges and barriers, and this has resulted in immigrant populations lacking comparative data for specific cancers in the immigrants’ home countries. Therefore, there is a significant need for building research resources and infrastructure to promote cancer research in the Caribbean and Africa. Findings from the focus group confirm that while the AC3 members unite under a common goal to move cancer research forward, it is clear that we are in different places in terms of resources, expertise and infrastructure. The membership of the AC3 share a common vision and fully recognize that successful collaborations are accomplished when there is appropriate funding available; resources must facilitate synergy and collaborators must contribute to scientific expertise and leadership. Through collaboration, Caribbean investigators must lead their own efforts in their respective geographic regions. Therefore, while efforts to promote collaboration must persist, there needs to be a concerted effort to build capacity through training as well.

Table 3: Comments from Focus Group Session “International Collaborations: What Works and What is Worthless”

Researcher-level Challenges
“Funding”
“Absence of Ethics Committees”
“Failure to contribute to scientific writing of co-authored manuscripts”
“Limited access to peer-review journal articles”
“Lack of cancer surveillance data”
“Limited statistical analysis skills”
“Lack of respect and trust”
“Difficulty establishing trusting collaborative relationships”
“Difference in research priorities on collaboration”
“Unable to establish collaborations due to limitations in resources and infrastructure”
Institutional-level Challenges
“IRB requirements: Framework may differ across collaborating institutions”
“Collection of biological samples: Differences in funds and resources among institutions affect storage”
“Databases: limited data management skills /surveillance data collection”
Country-level Challenges
“Access to bio-specimens in low resource environments”
“Funding to support: Setting up the infrastructure, doing the research”
“Turf issues”
“Visa/Travel/funding issues for foreign investigators”
“Vacation myth”

Conclusions:

All participants were asked to complete evaluation forms for both meeting dates. Out of the returned forms, 95% of the participants were very satisfied with the overall conference experience. The majority of participants learned “much more” after attending workshops on “Innate Immunity Predictors of Prostate Cancer Outcome” and “How to Start a Cancer Registry” than they knew prior to attending the conference. When asked “What was the most beneficial aspect of all sessions?” 40% of the respondents mentioned international collaborations. Participants felt it was beneficial to “hear and learn about challenges of international

collaborations,” “create a network and chance to collaborate,” “network with other members of the consortium,” and “learn about potential collaboration with other individuals.”

A huge emphasis was placed on issues surrounding capacity building, training, and collaboration through the focus group “International Collaborations: What Works and What is Worthless;” summarizing the feedback from the evaluations, the importance of the message was received. Not only did participants gain useful knowledge from this session, but also mentioned that they would like to know more.

The conference ended with a consensus on specific efforts needed to promote collaboration through capacity building. Some of these efforts include: 1) link AC3 members from low-mid income countries (LMIC) to expertise that will support their research needs; 2) expand career development and training efforts; 3) develop standardized protocols for biospecimen collection, storage and processing; 4) continue to seek support for collaborative research through various grant mechanisms involving US, Caribbean and/or African investigators who are members of the AC3.