MEETING REPORT
African–Caribbean Cancer Consortium Scientific and Training Conference 2017

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ABSTRACT
The sixth International African–Caribbean Cancer Consortium (AC3) Conference was held 6–9 October 2017 in Miami, Florida, U.S.A. The conference was open to all researchers, trainees, clinical and public health professionals, and community members, and served as an international hub for the United States, the Caribbean, and Africa. Sessions included AC3 collaboration meetings, cancer surveillance and research skills training workshops, and a community cancer prevention conference.

Key Words Disparities

INTRODUCTION
In response to continued health disparities and lack of research focused on black people globally, the 2017 African–Caribbean Cancer Consortium (AC3) Scientific and Training Conference was held 6–9 October 2017 in Miami, FL, U.S.A. The technical planning, education and training, and scientific review committees included 3 Fox Chase Cancer Center staff, 2 student volunteers, 5 community advocates, and 11 AC3 member–researchers representing other academic institutions in the United States, Africa, and the Caribbean. The theme of the conference was “Defining and Achieving the Milestones in Cancer Care, Collaboration and Research for Populations of African Ancestry.” Various sessions held at the conference provided an opportunity for AC3 investigators to gather in one place to present collaborative works and to discuss the future direction for those studies. It also provided valuable research skills training and broad-based education through a community cancer prevention conference.

Participants
The conference was open to researchers, students, and community participants. Of the 120 attendees at the 2017 AC3 Scientific and Training Conference, 90 came from the scientific community, and 30, from the general community. Most attendees were scientists with doctorates (21%), medical doctors [MD or MD and PhD (16%)], and master’s level professionals [MPH, MS, MA, or MBA (12%)]. Students constituted 8% of the conference attendees (PhD and nursing students), and scientific support staff with BS degrees constituted 7%. Another 4% of attendees were nurses [RN (2%)], and for 2% of attendees, educational status was unknown. All attendees were provided with a scientific program booklet, which included the conference agenda and scientific abstracts. Community participants also received a community program booklet.

To optimize the conference impact and to encourage participant collaboration, the training sessions were scheduled at the beginning of the meeting on 6 October, AC3 Collaboration meetings were scheduled for a half day on 7 October, and the Scientific Program was scheduled for 8–9 October. The collaboration, training, and scientific sessions were tailored for researchers, clinician–scientists, scientific support staff, students, post-docs, and other health professionals. The Community Educational Session was tailored for members of the general community. Most of the community members resided in the Miami area; participants in the Scientific and Training Conference represented academic institutions and medical centres across the United States, Africa, and the Caribbean.
TRAINING SESSIONS

Cancer Surveillance Workshops
The goals for the cancer surveillance workshops (csws) were to review the administrative processes of cancer registries in the United States, the Caribbean, and Africa, and to learn the processes used for data collection and to note commonalities and differences in data collection. There were 3 individual training sessions:

- csw i included topics on how to maximize the knowledge shared to improve the quality of data collection practices and how to achieve completeness and accuracy of data collection.
- In csw ii, participants discussed the next steps to pooling cancer registry for data analysis.
- In csw iii, participants learned about
  - the importance of comparability and completeness of indicators in population-based registries.
  - important techniques—and past pitfalls—in deriving population-based cancer endpoints.
  - how to critically evaluate their own sources of data and to determine which types of research are feasible with given data.

To supplement the csw training sessions, the World Health Organization’s International Agency for Research on Cancer Caribbean Cancer Registry Hub provided an overview of the Caribbean Cancer Registry Manual – Data Collection and Operating Procedures Module and described how the Caribbean Cancer Registry Hub will support cancer registration in the Caribbean.

Research Skills Workshops
The research skills training workshops (rsws) were devoted to early-stage investigators—for example, post-docs and research faculty with no prior history of substantial research funding such as U.S. National Institutes of Health (nih) R01 funding. Three major, in-depth sessions were held. The Caribbean Regional Center for Research Excellence led rsws i–ii. The training faculty were affiliated with the University of the West Indies, Fox Chase Cancer Center, and City of Hope. Training faculty from the U.S. National Cancer Institute (nci) led rsw iii.

In rsw i, “Best Practices in Community-Based Participatory Research,” participants learned about the rationale for academic–community research partnerships, community-based participatory research, and how to form a community-based participatory research partnership, and community-based participatory research resources. In rsw ii, “Standardized Research Data Collection and Management—REDCap,” participants learned how to use REDCap (Research Electronic Data Capture: REDCap Consortium, Vanderbilt University, Nashville, TN, U.S.A.) to design a basic online questionnaire, set up a research study, set up and manage users with data security, perform data entry and manage study data, export data and generate summary reports, and use some advanced features. The training used a mix of slide presentations and participatory worksheets. Participants used their own or shared laptops to complete worksheet exercises after each presentation segment. In rsw iii, “Grant Writing,” participants learned about the features of a successful application, the nih grant process (including roles and responsibilities of key players), approaches for communicating and interacting with nih program staff, the nih review process, and the funding selection process at the nci.

COLLABORATION SESSIONS

In addition to the general networking facilitated by the conference, Collaboration Sessions and AC3 General Assembly Meetings were held.

A newly funded research centre to support AC3 members in the Caribbean was unveiled during the general assembly of AC3 members. This Caribbean Regional Center for Research Excellence was made possible through an nci Center for Global Health P20 award (1P20CA210294) between Fox Chase Cancer Center and the University of the West Indies. The Caribbean Regional Center for Research Excellence will focus on chronic diseases (cancer, diabetes, heart disease, and stroke). The grant builds on regional networks and partnerships within the AC3 and is the planned first step toward developing a broader network of Caribbean centres of excellence, which will increase research collaboration to address chronic diseases throughout the region. The centre will strengthen research infrastructure, resources, and the expertise needed to reduce the burden of these chronic non-communicable diseases.

The planning activities have several components: research enhancement activities for investigators, a community needs assessment, a research needs assessment and planning for outreach, and biorepository/biomarker and methodology/biostatistics cores. During the AC3 General Assembly discussions, members of the AC3 urologic cancer group made a suggestion to add a clinical needs assessment to the foregoing activities. Participants acknowledged that the launch of the centre will help to strengthen research collaborations in the Caribbean by addressing many of the research, resource, and funding needs that had been identified during the 2017 and prior AC3 conferences1–3.

Other AC3 General Assembly sessions involved discussions about strengthening AC3 collaborations in Africa and strengthening AC3 collaborations between the United States, the Caribbean, and Africa. The existing alliance between the AC3 and the Prostate Cancer Transatlantic Consortium, with networks in West Africa and the United Kingdom, has already been a productive one and will continue to grow.

Speed Research Dating
The goal of the Speed Research Dating activity was that participants share their research interests and identify others with similar interests, ideas, and experiences with whom they could collaborate. The activity involved approximately 30 participants who assembled into small groups. Participants were then encouraged to discuss problems they were addressing in their research or scientific writing, or to share ideas and build connections through which future research collaborations could be developed.
Five themes emerged from the discussions:

- **Publications**
  Participants highlighted a need for readiness for publication. An AC3 working paper series was suggested as a forum in which participants could present their draft publications to receive feedback.

- **Funding**
  There is a need to develop a funding plan to disseminate overseas funds for ongoing and upcoming research collaborations. A follow-up call to discuss those opportunities was suggested.

- **Infrastructure Support**
  Participants expressed the need to learn how to highlight the strengths of their institution, not just its weaknesses.

- **Statistical Support**
  A cluster of general biostatisticians and standard boilerplate epidemiology statistics that members can use as a resource for grant planning are needed.

- **Support to Young Investigators**
  A need was expressed for more early-stage investigator awards.

The participants agreed that the AC3’s current NIH-funded P20 (1P20CA210294-01) could be used to address those 5 themes.

**AC3 Research Working Group Sessions**

The Research Working Group meetings provided an opportunity for AC3 collaborators to present AC3 studies and discuss future directions. Participants were AC3 members from the United States, the Caribbean, and Africa. The sessions, led by the AC3 leadership team, consisted of smaller group meetings dedicated to the research themes in the subsections that follow.

**Women’s Cancers**

**Leaders:** Dr. Sophia George, Sylvester Comprehensive Cancer Center, University of Miami (breast/ovarian cancer); Dr. Kimlin Ashing, City of Hope Comprehensive Cancer Center (cervical/breast cancer); Dr. Darron Halliday, University of the West Indies–The Bahamas (cervical cancer); and Dr. Raleigh Butler, University of the West Indies–The Bahamas (ovarian cancer)

The leaders provided an overview of various studies that were either under development or recently initiated. Discussions raised awareness of specific needs:

- A repository of breast and gynecologic tissue from the Caribbean and Africa
- Cell lines developed from women identified as Afro-Caribbean or Caribbean
- Expertise for testing genetic markers, and interpreting and analyzing existing data (a possible webinar was suggested)

**Urologic Cancers**

**Leaders:** Dr. Valerie Odero-Marah, Clark Atlanta University; Dr. Robin Roberts, University of the West Indies–The Bahamas; and Dr. Belinda Morrison, University of the West Indies–Jamaica

Participants had diverse skill sets that included functional genomics, urology, epidemiology, basic science, radiation oncology, clinical pathology, population genetics, and behavioral science. From that diverse expertise, the group identified areas of mutual research interest and divided into smaller working groups to facilitate joint projects and publications. The subgroups focused on these topics:

- Health services in various regions
- Treatment and access to treatment
- Environment and genetics in African ancestry: biologic, behavioral, and environmental determinants of health disparity

**Upper Aerodigestive Tract Cancers**

**Leaders:** Dr. Samuel Gathere, Kenya Medical Research Institute; Dr. Kellie Alleyne-Mike, St. James Medical Complex, Trinidad; and Dr. Camille Ragin, Fox Chase Cancer Center

These participants had areas of expertise covering genetics, epidemiology, and the clinic. As a unifying theme, most participants in the research group had either ongoing or prior work in HPV (human papillomavirus) and head-and-neck cancer. Discussions focused on pooling existing data to create a first collaborative publication about HPV and p16 testing. It was noted that some sites had the expertise and infrastructure to perform such testing, but others did not. To address that limitation, collaboration to share expertise and infrastructure was discussed. Follow-up meetings were to be scheduled to further discuss that issue.

**Gastrointestinal Cancer**

**Leaders:** Dr. JoAnn Oliver, University of Alabama, and Dr. Daramola Cabral, California State University, Monterey Bay

A newly formed research working group with a primary interest in cancers of the colon and rectum, the colorectal cancer (CRC) working group, had its first face-to-face meeting in 2017. Its goal is to establish collaborative research that will further efforts to improve CRC outcomes in people of African ancestry. The group members expressed interest in epidemiology research that would extend the current understanding of the predictors of CRC screening use, with the goal of improving the uptake of CRC screening, early
Inflammation and Obesity
Leader: Dr. Camille Ragin, Fox Chase Cancer Center

The group established that collaborations in prostate cancer already ongoing between group members have resulted in several publications relating to genetic polymorphisms in inflammation and the interaction of genetic markers with obesity and prostate cancer. Existing collaborations span several institutions: Clark Atlanta University, Fox Chase Cancer Center, North Carolina Central University, University of Louisville, University Hospital Center—Pointe-à-Pitre, and the University of the West Indies. Based on the expertise currently represented in the group (urology, pathology, genetic epidemiology, basic science, and nutrition epidemiology) and the foundational collaborations already ongoing, the group decided, after discussion, that the common interest was to focus on research collaborations in inflammation genetics and obesity. The group agreed that, to develop a plan for future project ideas, they would organize a follow-up video call to present the existing data generated by members of the group and the existing scientific evidence on specific topics.

SCIENTIFIC SESSIONS

The Scientific Program
Two keynote addresses were given. On 6 October, Dr. Matthew Schlumbrecht, Sylvester Comprehensive Cancer Center, University of Miami, spoke about “Bridging the Health Equity Divide in Gynecological Cancers in the Caribbean.” Then, on 7 October, Dr. Folake Odedina, University of Florida, discussed the “Actionable Agenda for Clinical Trials in Blacks Globally.” Other notable presenters included Dr. Derrick Aarons, Caribbean Public Health Agency, who spoke about ethics concerns in global cancer research, and Dr. Thomas McGowan, The Cancer Centre Bahamas and The Cancer Centre Eastern Caribbean, who spoke about practical challenges in establishing a research program in the Caribbean. Plenary Session presentations focused on the topics of clinical care and outcomes; cross-cutting factors for achieving health equity in the African diaspora; ethics concerns; challenges and successful models for global cancer research; cancer and the African genome; and translating biomarkers for cancer prediction, progression, and treatment for populations of African ancestry.

Poster Presentations
Abstracts were accepted for poster presentations related to all cancers that affect black populations. All presenters were required to submit a scientific and a lay abstract, the latter being a paragraph-form summary of 250 words maximum in lay language (that is, in language understandable by the general public). Abstract topic areas included: cancer prevention, community-based participatory research, cancer genetics and genomics, cancer treatment and survivorship, cancer surveillance, health policy and ethics concerns, and basic science. The abstracts were categorized and selected (based on scores) as oral presentations or flash presentations during the poster session. The purpose of a flash presentation was to allow for a brief overview of all the posters, thus providing an opportunity to advertise for the poster. In-depth discussions were subsequently held at the posters during the poster session.

Community Education
Participating scientific professionals and 30 community members attended the Community Education program. This segment of the program was hosted by community partners at a venue nestled within the Miami community. This half-day session was devoted primarily to community participation and was interactive, consisting of a panel of researchers and cancer advocates whose presentations were followed by a discussion and question-and-answer period. Topics relevant to the African diaspora covered “Cancer 101,” prostate cancer, colon cancer, breast cancer, and cervical cancer.

Community members in attendance completed a pre-test in which a series of 19 statements was presented and responses were recorded on a 5-point Likert scale (strongly agree, agree, neutral, disagree, strongly disagree). The statements dealt with

- cancer knowledge, such as the definition of cancer and its symptoms, and satisfaction with one’s knowledge about specific cancer types.
- perceptions and beliefs about cancer treatment, such as whether cancer is treatable, and ways to treat and prevent cancer.
- the availability of cancer information from community-based organizations, one’s doctor, and other sources.

At the end of the session, attendees completed a post-test featuring the same statements to determine whether a shift had occurred in their knowledge and perceptions of cancer.

The pre-test results revealed that participants felt they knew how to define cancer, but needed more information about cancer. They believed that cancer was treatable, and they felt comfortable talking to their doctor about cancer. The participants felt neutral about all other statements. The post-test revealed that, in addition to the beliefs found in the pre-test, participants had become more aware of the symptoms of cancer and of their chances of developing cancer. They also became more satisfied with their knowledge about gynecologic and lung cancers. They were satisfied that they understood their options if they were diagnosed with cancer, and they were satisfied that they were knowledgeable about ways to treat and prevent cancer and where to obtain more information about cancer.
CONFERENCE EVALUATIONS

In all training sessions, most participants reported that they had learned much more or somewhat more from the activities (Figures 1–2). Participants felt that the most beneficial aspects of the training sessions were learning about the potential use of REDCap and support for Caribbean and African research. Other valuable discussion topics during the training sessions included current research and the generation of ideas, the importance of cancer registries in the Caribbean being on the same page to enrich data, and information about grant writing (who to contact at NCI and best practices to receive grants).

Similarly for the Collaboration Sessions, most participants reported that, based on their prior knowledge, they learned much more or somewhat more about participating researchers and their teams. Figure 3 shows the amount learned by research working group participants. The most beneficial aspect of the Collaboration Sessions was learning about projects in the Caribbean. Participants also highlighted the benefit of having the ability to share and learn about research conducted by others, of developing an action plan for collaboration and pursuit of grant funding, and the opportunity to gain perspectives from others.

With respect to the Scientific Sessions, participants commented that the sessions involved cutting-edge research, that the biomarker session drilled to the core science at the root of disparity issues, that fascinating advances were being made in genomic research in cancer, that there was a need for more presentations of research involving men of African descent, that the connections shared with Africa and the Caribbean are valuable, and that learning more about the 1000 Genomes Project and how to use the resulting data was informative.

Other general comments applauded the quality of the conference, the opportunities to develop and begin planning projects, the quality of the sessions (small and long enough to develop relationships between participants), the diversity of expertise in the AC3 membership, the good conference organization, and its educational and inspirational nature. Of the responding participants, 91% indicated that the conference fulfilled their reason for attending; 94.6% strongly agreed that the conference staff were helpful and courteous; and most were satisfied with the registration process, conference content, and general sessions.

SUMMARY

The Scientific and Training Conference 2017 provided an opportunity for AC3 members to collaborate and discuss plans for their studies. Participants in the Scientific Sessions became familiar with studies currently being conducted and increased their knowledge about the issues related to disparities in cancer and its treatment for populations of African ancestry. Researchers also gained a better understanding of the barriers related to minority participation in biomedical research and clinical trials. Participants in the community conference left knowing......
more about modifiable behaviours such as dietary intake, exercise, smoking, alcohol use, and sexual practices that contribute to cancer risk. Community participants also learned more about the progress of current research, the overall importance of research into cancer prevention and treatment, and the value of participating in biomedical research or clinical trials. Altogether, we believe the 2017 AC3 Scientific and Training Conference was a success.

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CONFLICT OF INTEREST DISCLOSURES

We have read and understood Current Oncology's policy on disclosing conflicts of interest, and we declare that we have none.

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