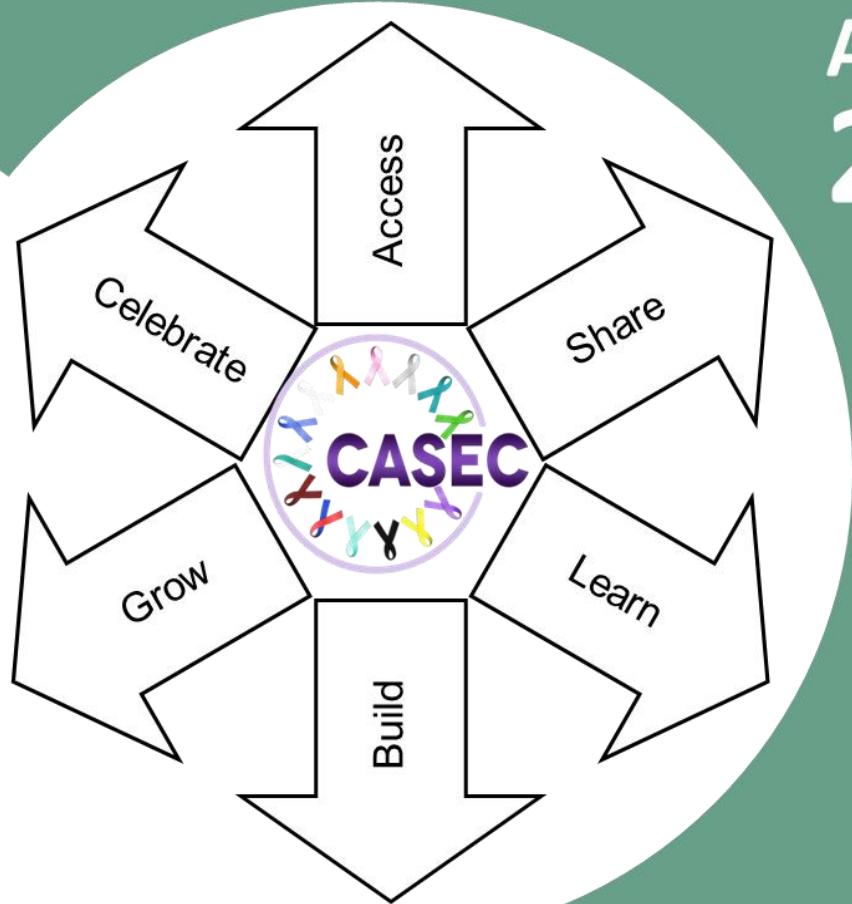


REPORT



CANCER
CONFERENCE

CASEC INFORMATION EXCHANGE BRIDGING THE CANCER CARE GAP



April 27
2019



**"Tell me and I forget.
Teach me and I remember.
Involve me and I learn."**

Benjamin Franklin



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This is a report on the proceedings of the 2019 CASEC Information Exchange, the annual cancer conference organized and conducted by The Michael and Mauritia Patcha Foundation (The Patcha Foundation, MMPF), and members of the conference collaborative team.

This publication has been prepared to facilitate the exchange of knowledge and to stimulate discussion, and together with the presentations, videos, photographs and other materials from the conference, make up the legacy of the CASEC Information Exchange 2019.

Patcha Foundation publications are available on the foundation website at www.patchafoundation.org, or via email when requested through casec@patchafoundation.org.

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Together, Let's Fight Cancer and...WIN!

EXECUTIVE SUMMARY

The Health Equity Report for the District of Columbia 2018 surmises that despite wide improvements in health outcomes over the last decade for the residents, across neighborhoods, there are significant differences in health outcomes. Health outcomes have not improved for everyone at the same rate due to health disparities and inequities that are generated by differences in income, race, and geography. The report showed that the residents and neighborhoods experiencing disproportionately poor health outcomes are predominantly African American and fare worse when measured by nine key drivers of opportunities for health: education, employment, income, housing, transportation, food environment, medical care, outdoor environment and community safety. [Go here for the summary report.](#)

The report further surmises that the baseline health assessment derived is intended to inform and reframe the health discussion, to start new conversations and to take actions to improve the health and wellbeing of the District residents.

Ward 8 is a neighborhood of Washington, DC. Ward 8 is also home to the highest proportion of African Americans and residents with the lowest household incomes in the District of Columbia.

According to the CANCER.GOV interactive [Incidence Rates Table](#), Washington DC has the highest rate of cancer incidence (477 per 100,000) compared to the national rate (443.6 per 100,000).

According to the DC Cancer Consortium in the [District of Columbia Cancer Control Plan 2018 – 2018](#), Washington DC's Ward 8 has the highest incidence of breast cancer (173.9 per 100,000) in the District.

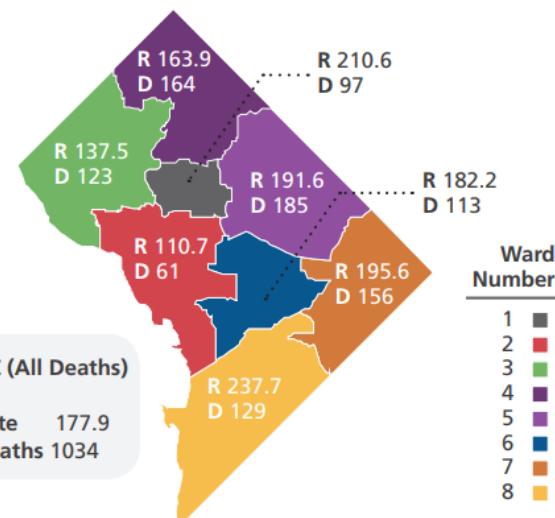
Table 1. Age-Adjusted Mortality Rates by Ward for Prostate Cancer, 2008 (per 100,000 persons, age-adjusted to 2000 US standard)

Ward	Rate
Ward 1	25.8
Ward 2	25.5
Ward 3	13.1
Ward 4	27.6
Ward 5	24.1
Ward 6	47.0
Ward 7	30.0
Ward 8	98.9

Table 3. Age-Adjusted Mortality Rates by Ward for Female Breast Cancer Deaths Occurred in 2008, DC Residents¹⁶

Ward 1	21.0
Ward 2	24.5
Ward 3	19.8
Ward 4	22.1
Ward 5	40.5
Ward 6	28.5
Ward 7	29.9
Ward 8	39.0

Washington, DC data by ward



Data source: District of Columbia Vital Records, 2013.

Rates are per 100,000 persons and are age-adjusted to the 2000 U.S. standard.

Note: ~ Data are suppressed if fewer than 16 cases are reported in the specific category.

Effective conversations for improved health outcomes must optimize partnerships, take full advantage of the wide resources available and actively explore opportunities for collaboration and capacity building in low resource communities. The CASEC Information Exchange (CIE) is part of the new conversation to improve the health and wellbeing of the District residents and residents in low resource settings in the USA and globally.

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INTRODUCTION

The CASEC Information Exchange (CIE) is a unique and free conference that is focused on cancer disparities and improving health outcomes for the poor and disenfranchised in the community.

While the main theme of the CIE conference is Bridging the Cancer Care Gap, the conference is structured to allow an integrated discussion around this theme. Cancer can affect a person's entire mind and body, a single organ or an entire region of the body. The 2019 CIE conference structure included a scientific, holistic, and community approach to the disease now and for the future that includes all of the nine key drivers of opportunities for health found in the Health Equity Report for the District of Columbia 2018: education, employment, income, housing, transportation, food environment, medical care, outdoor environment, and community safety.

This report provides a summary of the 2019 CASEC Information Exchange that took place at the R.I.S.E. Demonstration Center, S.E. Washington DC, on April 27, where renowned speakers, presenters, panelists and the community dialogued, shared, networked, and collaborated on various aspects of the conference theme. This report is based on the discussions that occurred and is intended to inform participants and the community, to stimulate discussion among participants and the community, and to strategize for the way forward.

This conference was a collaborative effort initiated by the Patcha Foundation and coordinated by the foundation and the conference planning team.

Ray Michael Bridgewater - Assembly of Petworth

Pastor Ricardo Payne - The Lighthouse Baptist Church

Leslie Jackson - TAJS Solutions

Stella-Maris Adamu, Marie Jones, Rosalie Ngachie, Pajoe Bonie Chungong - Patcha Foundation CIE Planning Committee

BACKGROUND

- There is a call for new conversations and actions from the baseline health assessment of the Health Equity Report for the District of Columbia 2018.
- According to the Centers for Disease Control (CDC), factors that contribute to health disparities in cancer include low socioeconomic status (SES), high risk behaviors, exposure to carcinogens, poor treatment, barriers to access health care services, and poor social environment. Multiple programs addressing these disparities already exist, however, due to these factors, the programs are not readily available to or accessed by Africans, people of African Descent and other minority groups. [Link here to the Centers for Disease Control \(CDC\) web page on Factors That Contribute to Health Disparities in Cancer for more on this issue.](#)
- According to the World Health Organization (WHO,) cancer is shaping up to be the primary health care issue facing Africans in the diaspora and on the continent. The cancer care gap is growing wider. While cancer mortality rates in advanced countries have declined in recent years, Africans and people of African descent continue to be burdened with ever increasing cancer deaths. The social and economic effects are devastating. Effective solutions must include building sustainable partnerships with stakeholders in advanced countries that are on the forefront of cancer treatment, education, innovation, and research.

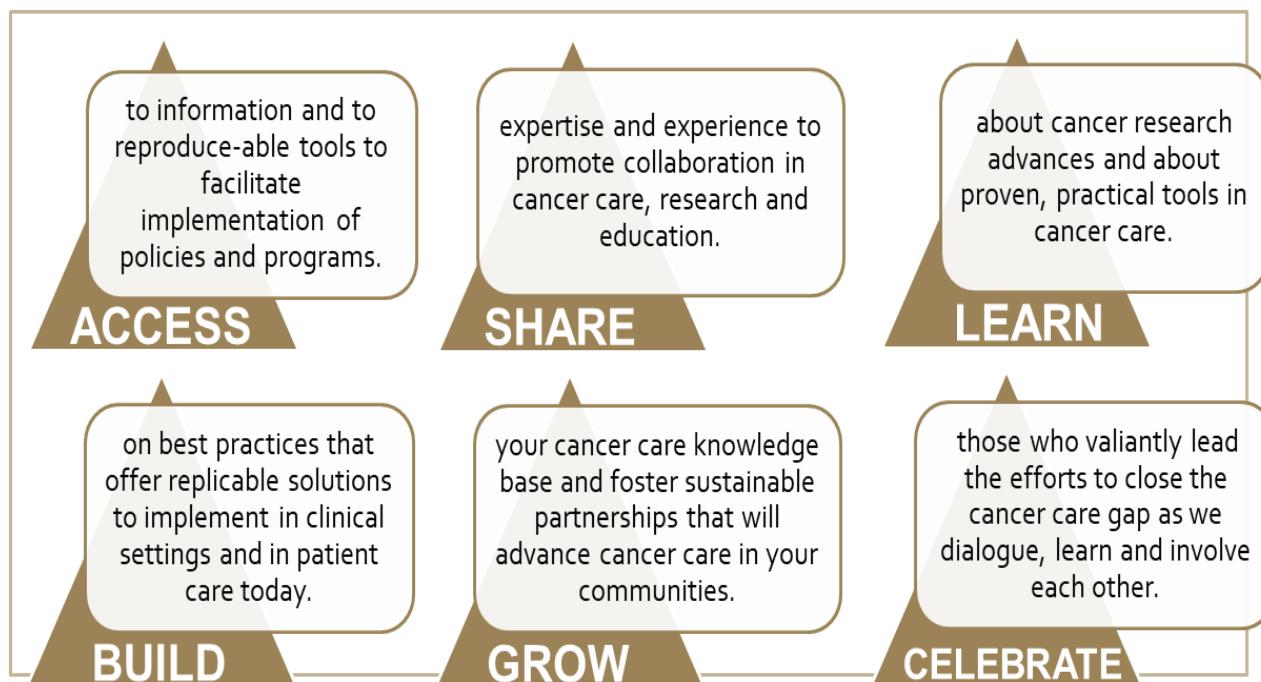
In response to the above, the CASEC Information Exchange is part of the new conversation. The CIE response is incubated in these statements:

- Cancer affects us all and no one should die from it because they are poor.
- Empowering through awareness/education is the first step in overcoming barriers to care.

GOAL

The CASEC Information Exchange is a forum that engages renowned experts and the community in a dynamic exchange about the disparities and challenges in cancer care in disenfranchised communities of African descent as well as in other ethno-economically underserved communities, in order to provide tools and build partnerships to bridge the gap, build capacity, improve outcomes, and reduce the cancer burden.

CONFERENCE OBJECTIVES



EXPECTED OUTCOME

The exchange of information between clinicians, researchers, educators, community leaders, key stakeholders and other attendees offered the latest perspectives to understanding solutions including those that may already exist, and the challenges to implementing them. The conference outcome included identifying objectives and processes for the way forward, proposing workable solutions, suggesting means of implementation, and identifying stakeholders and benchmarks to accomplish the objectives.

TARGET PARTICIPANTS AND BENEFITS OF PARTICIPATION

The conference was open to everyone including: cancer practitioners, researchers, NGO and non-profit managers, health policymakers, frontline staff in cancer care: oncologists, nurses, pharmacists, social workers and other clinicians, the community (cancer patients, survivors, caregivers), and other cancer care stakeholders.

The conference provided an opportunity for participants to network and to learn; to be at the forefront of knowledge and experience sharing for personal empowerment to achieve improved and beneficial health outcomes; to empower and strengthen the community by strengthening knowledge-base about available and accessible resources; to make a real impact in the fight against cancer, and in personal and the community's health; and to simply be a part of the unique gathering of stakeholders in the DMV (District, Maryland, Virginia).

THE PATCHA FOUNDATION

The Patcha Foundation was established in 2008 to educate women about breast cancer and to empower them with tools, like breast self-exam, to increase cancer survivorship. Since 2012 the foundation has expanded to include advocacy for a reduction in the prevalence of all cancers and other chronic conditions like HIV/AIDS, cardiac disease, diabetes and hypertension.

Our goal is to reduce the impact of cancer on African communities in the diaspora and on the continent.

Our Mission

To eradicate diseases through an effective mobile health delivery system by improving the living conditions of people in disadvantaged communities through the creation, support and distribution of economic and knowledge-based development systems, agro-industrial methods for sustainable living, education, and life-improving infrastructure.

Our Vision

To become the pre-eminent health, educational, economic empowerment, and life-improving delivery system in impoverished regions of the world

Knowledge
is like a
garden.
If it's not
cultivated,
it cannot
be
harvested.
African proverb

**together,
let's fight cancer
and...WIN!**

CONFERENCE AGENDA

9:00 am to 9:20 am Greeting Mamadou Samba – Director, DC Mayor's Office of African Affairs (MOAA)

9:25 am to 10:25 am Cancer Research, Treatment, Clinical Trials and Medical Advancements: Diversifying Clinical Trials and Community Engagement

Objectives: Diversification of clinical trials and strategies for engaging communities of color.

- ✓ Strategies for diversifying clinical trials and engaging communities of color to increase participation.
- ✓ Explain the steps for qualifying for clinical trials
- ✓ Pfizer Breast Cancer Clinical trials program.
- ✓ Highlight clinic trials successes, current recruitment activities for clinical trials, advance cancer research program or academic scholarship and fellowship opportunities for college / graduate students or research professionals

Josephine Garnem - Program Manager, Gilchrist Immigrant Resources Center, East County: Moderator

Dr. Janeen Azare - Field Medical Director, Breast Cancer US Medical Engagement, Pfizer Inc.

Organizational Presentation: Florencia Gonzalez - Community Network Manager - GHUCCTS

10:30 am to 11:40 am Collective Impact: Community Based Strategy

Objectives: Address community capacity building and mobilization; Developing a how-to strategy for building a community-led / community-built organization

- ✓ Strategies and best practices for community capacity building and mobilization. (for Veterans, African Immigrants, Faith-based health ministry, returning citizens)
- ✓ Strategies and best practices for community-based and community-led initiatives to address social determinants, cultural competency and health disparities and inequities focusing on Cancer / Maternal childcare / HIV-AIDS / STD health & environmental, mental health
- ✓ Recommendations for improving culturally sensitive healthcare quality and standard of care (race and health equity) for under-served & vulnerable populations (people of color, African and other immigrant populations).

Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Thelma Jones – Founder / Board Chair, Thelma D. Jones Breast Cancer Fund

Dr. Romuladus Azuine – Founder/Executive Dir, Global Health & Education Projects, Inc.

Rev. Samuel Nixon, Jr. - Founder, HUMBLE 1 & Board Member, Pan African Christian AIDS Network (PACANET) - USA

Ambrose Lane, Jr. – Chair / Founder, Health Alliance Network Ward 5, 7 & 8

Rosalind Parker, Esq - CEO and President, Building Resources in Communities Inc. (BRIC)

Organizational Presentation: Dr. Lisa Fitzpatrick – Founder / CEO, Promoting Practical Health

11:45 am to 12:30 pm Goya Foods Sampling

Presentation: I Heart Health Expo Alli Mofor - Founder and COO of I Heart Health Expo

Presentation: LoveMyself Pledge Campaign Gabrielle Dibonge – Patcha Foundation Junior Board Member, Breast Cancer Survivor

12:40 pm to 12:55 pm Spirit of Community Award

Samuel Buma – President of B.E. Capital Group – USA, Chairman, Patcha Foundation: Presenter

Recipient: **Thelma Jones** - Thelma D. Jones Breast Cancer Fund

Recipient: **Ambrose Lane Jr.** – Health Alliance Network

1:00 pm to 2:30 pm Women's Health and Wellness: Mind, Body & Soul

Objectives: Examine and explore effective community-based strategies for addressing the health and wellness of women of color (HIV-AIDS, STD-STIs, breast and cervical cancer, maternal childcare, high-risk pregnancy & domestic abuse).

- ✓ Examine family health status across the life span from cradle to rocking chair by identifying the health and social factors that continue to lead to poor outcomes for women of color and the immigrant population. How can we do better? (effects of poverty, unemployment, education status, housing, racism, access to healthcare, pre-natal care, mental health, health insurance)
- ✓ Strategies, policies and best practices that address social determinants, cultural competency and health disparities. (gynecological cancer screening and testing programs, early diagnosis & treatment, education & awareness clinical trials & research)
- ✓ Share recommendations for improving culturally sensitive healthcare quality and standard of care (race and health equity) for under-served & vulnerable populations (people of color, African and other immigrant populations)

Tammy Boyd – Chief Policy Officer, Black Women Health Imperative: Moderator

Dr. Sombo Pujeh Fiakpo – Public Health Consultant, OSSIE

Dr. Chesahna Kindred – Dermatologist, Department of Dermatology, Howard University College of Medicine

Dr. Janet Unonu – Health and Nutrition Officer, Edward C. Mazique, Parent Child Center, Inc

Davene White – Director, HUH CARES, Howard University Hospital

Organizational Presentation: Imani Boykin - Metastatic Breast Cancer Learning Experience [HUMBLE], Howard Univ

1:00 pm to 2:30 pm Men's Health & Wellness: Teach Him Right

Objectives: Examine and explore effective community-based strategies for addressing the health and wellness of men of color including men who are in prison or returning citizens, veterans, immigrants, gay or bi-sexual (mental health, cancer, HIV-AIDS / STD-STI, Diabetes, prostate and colorectal cancer).

- ✓ Examine family health status across the life span from cradle to rocking chair by identifying the health and social factors that continue to lead to poor outcomes for men of color and the immigrant population. How can we do better? (effects of poverty, unemployment, education status, housing, racism, access to healthcare, mental health, religion, health insurance)
- ✓ Strategies, policies and best practices to increase community-based and community-led patient centered initiatives that address social determinants, cultural competency and health disparities. (screening and testing programs, early diagnosis & treatment, education & awareness clinical trials & research)
- ✓ Share recommendations for improving culturally sensitive healthcare quality and standard of care (race and health equity) for under-served & vulnerable populations (people of color, African and other immigrant populations)

Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Dr .Charles Brown – Medical Case Manager, Us Helping Us, People into Living

Roach Brown – Host, Crossroad Radio Show Inner Voice

Cecil C. Byrd II, MA PA - Executive Director, National Association of Concerned Veterans

Marc Clark - Program Manager, National Council on Urban Indian Health

Dr. Keith Gregory – Senior Director, Radiation Oncology & Proton Therapy, INOVA Health System

Organizational Presentation: Joshua Ross – Program Manager, DC - African American Male Wellness Walk

2:35 pm to 3:55 pm Finding Funding - Investing in Healthcare Infrastructure

Objectives: Identify the most effective ways of funding health-related programs and projects.

- ✓ The many factors that contribute to a successful proposal submission.
 - Importance of an evaluation, data gathering, and sustainability plan in proposal writing
 - Importance of cultural competency
 - How to ask for or recognize when to address capacity building funding
- ✓ Share recommendations & provide overview of public policy to improve social determinants of oral health
- ✓ Corporate responsibility: What is it? What is its significance?
 - Describe the criteria to qualify for global or local (USA) humanitarian funding focusing on maternal and child health, food security, infectious diseases, pandemic outbreaks, disaster response, technology, medical equipment, medical surveillance, media campaign, women equality, social / economic sustainability)
- ✓ Overview of the health initiatives (projects or programs) that are part of this year's funding cycle or next year's including:
 - Community-owned / community-led patient-centered initiatives that can or will address social determinants, cultural competency and health disparities.
 - Screening and testing programs, early diagnosis & treatment, education & awareness, clinical trials, research
 - Health & racial equity
 - Conferences, workshop, training, guest lecturer, STEM Program etc.

Shyrea Thompson - Founder / Director, The IRIS Collaborative, LLC: Moderator

Dr. Malcolm E. Beech, Sr. - Chairman & CEO, African Diaspora Business Roundtable

Tesha Coleman - Division Chief of the Cancer Program Division of the DC Department of Health

Veola Green - Executive Managing Partner and Principal at The International Institute of Family Development

Luana Kiandoli - Co-Chair, Maryland Liberia Sister States Program

2:35 pm to 3:55 pm Faith, Caregivers and Cancer - How to Preserve and Strengthen Family Relationship

Objectives: Address how to preserve and strengthen family relationships especially in time of a health crisis

- ✓ Share how cancer survivors can reconnect with their inner selves and avoid mental & physical isolation
- ✓ Discuss how families and caregivers thrive, find meaning & maintain hope in face of challenges of caring for a love one
- ✓ Connection between cultural stereotypes and stigma, religious belief and practice, spirituality and the willingness to accept Western medicine in the African immigrant community
- ✓ Planning for life changes including estate planning and medical Power of Attorney
- ✓ Share recommendations for improving family health quality and standard of care for under-served & vulnerable populations (people of color, African and other immigrant populations).

Donna R. Gayles - Patient Advocate, Capital Caring: Moderator

Dr. Chimene Castor - Associate Professor, School of Nursing & Allied Health, Howard University

Apria Gallman - Caregiver Advocate, Apria Speaks

Rev. Evelyne Samuel - Ambassador at Large

Erick R. Tyrone - Estate Planning Attorney, Tyrone Law Firm LLC

Dr. Ayeshia Quainoo - Chief Empowerment Officer, The Ultimate Care, LLC

Organizational Presentation: Ayo Handy-Kendi – Founder of Optimum Life Breathology & Transcendence Breathwork

4:00 pm to 4:45 pm Oral Healthcare In DMV

Objectives: Address the state of oral healthcare for people of color in the Tri-State Region.

- ✓ Address the challenges of Dental Healthcare in the tri-state region for People of Color and other vulnerable populations (dental coverage for children & seniors, cost & policy, access to dental care, veterans & prison population, pain reduction & opioid crisis, racism, health equity, cultural competency). How can we do better?
 - Challenges and best practices in oral health care for people diagnosed with diabetes, heart disease, oral cancer, HIV-AIDS, STD /STI.
 - Challenges of the special needs and developmentally challenged populations.
- ✓ Strategies, policies and best practices to increase community-based and community-led patient centered initiatives that address social determinants, cultural competency and oral health disparities (screening and testing programs, early diagnosis & treatment, education & awareness clinical trials & research)
- ✓ Current trends and future practices to consider when training future Dentists.
- ✓ Share recommendations for improving culturally sensitive oral healthcare quality and standard of care (race and health equity) for under-served & vulnerable populations (people of color, African and other immigrant populations).

Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Dr. Joseph E. Baptiste – Former Commissioner, Maryland Governor's Commissioner on Caribbean Affairs

Dr. Oswald J. Cameron-Morales – President, Hispanic Dental Assoc DC Chapter, Healing Hands

Dr. Nathan Fletcher – Dental Director, Amerihealth Caritas

Dr. Cletus Fonmedig – Owner, Rosedale Smiles

Organizational Presentation: **Dr. Hazel J. Harper** – Program Manager, National Dental Association

4:45 pm to 5:00 pm Closing Remark, Final Assessment, Prizes, Close

Stella-Maris Adamu – President, Patcha Foundation

Leslie Jackson - Host - CEO of TAJS Virtual Solutions, Executive Administrator of The Light House Baptist Church

Pastor Kevin Jackson – Pastor, The Light House Baptist Church

“Education is our passport to the future, for tomorrow belongs to the people who prepare for it today.”

Malcolm X

“Education is for improving the lives of others and for leaving your community and world better than you found it.”

Marian Wright Edelman

“If access to health care is considered a human right, who is considered human enough to have that right?”

Paul Farmer



THE OPENING REMARKS

Mamadou Samba

Director, DC Mayor's Office of African Affairs (MOAA)

"If we're not counted, we are not included in those conversations that are being held to identify resources, budgets for the African community."

Mamadou Samba recognized that cancer is a critical issue facing Africans and people of color in the DMV. He emphasized the need for comprehensive data to quantify and qualify the diaspora African community.

The Office of African Affairs is the only office of African affairs in the USA to support Africans to have active information resources to improve the lives of Africans in the District and to try to bridge gaps in healthcare including cancer.

There is a need to have: more platforms like this conference, to be counted, to be included in the discussion, and to discuss stereotypical and taboo issues within the African communities. For example in African communities it is more difficult for Africans to go to African doctors because of apprehension that [on a social level] the doctor knows the patients or knows someone in the community who knows the patients who may eventually find out about their health issue.

There is a need to have discussions about preventive care, and cancer screening that will make our communities stronger. In African communities the hospital has typically been a place to go to die.

[Go Here for audio of this remark](#)



There is a need to partner with other organizations. The DMV has the second largest African population in the USA but there is not a partnership exchange among geographical separations so that we can come together as one, as Africans, instead of Nigerians focusing on Nigerian issues, Ethiopians focusing on Ethiopian issues, or Ghanaians focusing on Ghanaian issues. There is an urgent need for more partnerships, a change in mindset, and the creation of an exchange where Africans can come together as one community to advocate on common and diverse issues.

The upcoming census is a great opportunity to ensure that everyone is counted so that Africans are included in conversations and policies pertaining to health, including cultural and ethnic determinants of health behavior.

He encourages the Patcha Foundation and other community organizations to work closely with the Mayor's office and take advantage of some of the resources available, including grant money.

"To keep the body in good health is a duty... otherwise we shall not be able to keep our mind strong and clear."

Buddha

CANCER RESEARCH, TREATMENT, CLINICAL TRIALS AND MEDICAL ADVANCEMENTS: DIVERSIFYING CLINICAL TRIALS AND COMMUNITY ENGAGEMENT

"We need people to participate in trials to understand the science behind it [high mortality rates in Ward 8] because genetically we're so different..."



Michael

Josephine Garnem - Program Manager, Gilchrist Immigrant Resources Center, East County: Moderator

Dr. Janeen Azare - Field Medical Director, Breast Cancer US Medical Engagement, Pfizer Inc.

Florencia Gonzalez - Community Network Manager - Georgetown-Howard Universities Center for Clinical and Translational Science (GHUCCTS): Moderator

Dr Azare talked about disparities in breast cancer outcomes, access and awareness to cancer care. While the breast cancer incidence rate for blacks is about as high as non-Hispanic whites, the mortality rate for blacks is higher by about 10%. More than 150000 women in USA are living with breast cancer. Survival rate is 96% whereas if diagnosis is metastatic, survival rate is 26%. Dr. Azare discussed some breakthrough advancements in breast cancer.

Blacks make up 12% of the population but only 5% participate in clinical trials compared to 83% whites. Participating in clinical trials help address disparities by gender, age, ethnicities, as well as help test for differences in outcomes and to ensure safety with new medications. She explained about Pfizer's Blue Button program and collaboration with the Cancer Support Community and their Frankly Speaking About Cancer program.

Florencia Gonzalez presented on accessing cancer focused clinical trials. Participating in clinical trials helps others, gives access to new treatments, contributes to advancing knowledge and when minorities participate, it helps to diversify representation needed in research.

Who can participate in a clinical trial is determined by Inclusion criteria which are part of the trial's protocol. The protocol explains every aspect of the study, test, medication, inclusion and exclusion criteria.

She explained about GHUCCTS partners for research, and how to find and access studies that are being done:

- Clinical Trials .gov shows what trials are done internationally.
 - At ResearchMatch.org, you can get matched with a trial.
- GHUCCTS Is involved in community engagement services to assist with recruitment and mentor for community engaged research.

Strategies for diversifying clinical trials, to increase participation for communities of color: educational program for investigators working on studies, to build relationships and to have a diversified staff to encourage trust, adequate information of clinical trials and why participate, partner with community churches / centers, understand culture sensitivity and educate physicians about it.

Prioritizing inclusion of various populations: participate in community health and outreach events where information is shared, community advisory board where various segments are represented to get perspective and representation of diverse groups. Implementing a new expanded demographic form that distinguishes nationality and ethnicity to understand participants' origin.

Steps for qualifying for clinical trials: Trials are conducted at hospitals, cancer centers, universities and other health facilities. Speak to your physician about the trial. If you participate in a clinical trial you will at least receive standard of care and drug to test a new therapy.

To participate in research on a professional level can offer: Training opportunities for medical students and post graduates, workshops, and mentorship opportunities especially for those interested in being clinicians. Opportunity as patient advisory member. The African community is not well represented in the current advisory board.

Regarding stigmatization issues with clinical trials: open conversation, education are needed. Procedures and policies are in place to protect participants, there's informed consent, and an internal review board that does oversight. FDA has Clinical trial snapshot that looks at efficacy and safety of trials in terms of race and gender.

[Go Here for audio of this session](#)

COLLECTIVE IMPACT: COMMUNITY BASED STRATEGY

*"My people perish
for the lack of
knowledge."*



Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Thelma Jones – Founder / Board Chair, Thelma D. Jones Breast Cancer Fund

Dr. Romuladus Azuine – Founder/Executive Dir, Global Health & Education Projects, Inc.

Rev. Samuel Nixon, Jr. - Founder, HUMBLE 1 & Board Member, Pan African Christian AIDS Network (PACANET) - USA

Ambrose Lane, Jr. – Chair / Founder, Health Alliance Network Ward 5, 7 & 8

Rosalind Parker, Esq - CEO and President, Building Resources in Communities Inc. (BRIC)

Dr. Lisa Fitzpatrick – Founder / CEO, Promoting Practical Health

The objective of the panel was to discuss issues related to community capacity building.

This panel comprised of community members who founded and are running grassroots organizations that strive to fill the vacuum in resources and care for the disenfranchised. The objectives centered on engaging and empowering the community through education and the dissemination of information and knowledge. The resources that are needed might be available but often times the community is not connected or aware. Community based organizations engage in education, policy, advocacy and the importance of a unified approach to problem resolution.

Some highlights for community based organizations:

- Her Story Matters <https://www.herstorymatters.com/> recognizes and celebrates women of color who have survived breast cancer, also known as cancer champions
- Healthy Holiday Brunch promotes healthy eating during the holidays
- University of Kansas Community Toolbox <https://ctb.ku.edu/en> is a valuable planning tool for community organizations
- It's important to draw on the various communities, including church and work
- Managing a successful community organization requires dedication, sacrifice, and planning

- Surround your organization and cause with cheerleaders, critics and champions, and recognize that no one has all the answers. There is power in diversifying your board and influencers.
- Healthcare accounts for only 20% of your overall health. Other influences include where you live, where you work, stress, and diet
- This is a labor of love, a marathon not a sprint

*"If you want to go fast, go alone.
But if you want to go far, going
together is a valuable founding
principle.
Working together has a greater
impact than working alone."*

[Go Here for audio of this session](#)

WOMEN'S HEALTH AND WELLNESS: MIND, BODY & SOUL

"When you take the group at the bottom and lift them up, everyone wins."



Tammy Boyd – Chief Policy Officer, Black Women Health Imperative. Moderator

Dr. Sombo Pujeh Fiakpo – Public Health Consultant, OSSIE

Dr. Chesahna Kindred – Dermatologist, Department of Dermatology, Howard University College of Medicine

Dr. Janet Unonu – Health and Nutrition Officer, Edward C. Mazique, Parent Child Center, Inc

Davene White – Director, HUH CARES, Howard University Hospital

Imani Boykin – Metastatic Breast Cancer Learning Experience [HUMBLE], Howard Univ

This panel addressed community-based strategies for dealing with health equity issues affecting women of color. Examples of the issues include cancer, HIV/AIDS and maternal child mortality. Policies give us the power to demand the equitable distribution of resources, and address institutional racism that result in Black communities being sicker and dying faster than white communities. Black communities experience longstanding systemic issues like lack of resources, healthy foods, access to quality health care. Women are charged to take responsibility for themselves and their families, being fully present in the community, and making sure that the kids do not end up raising themselves and being exposed to the hazards of drug abuse and gang activity.

Some highlights and call to action:

- Reject the current movement to substitute the term implicit bias for racism.
- There is general consensus that people of color and Black women specifically, do not receive the same standard of care as the general population, and are more likely to be ignored by the health care establishment. Therefore African Americans are encouraged to patronize Black health practitioners who are more culturally sensitive.
- African Americans suffer from internalized white supremacy against themselves stemming from a historic lack of respect for Blacks, resulting in a preference of white doctors.
- The contract for the new hospital to be built in Ward 8 has been awarded to GWU. The long term implications could be devastating to Howard University, including possibly the closing of the med school and reduction in number of Black doctors in years to come. Therefore, the community is encouraged to contact Vincent Gray to advocate for Howard University being a part of the new hospital to be built in Ward 8.
- More trust building is necessary, and the African diaspora must come together, realizing that there is strength in unity.
- Know who the decision makers are in your community and put them to work for your needs. That way Blacks can influence the businesses that come into the community.
- Get on the health transition team after every election so Blacks can have a seat at the table and a voice in the process.
- Be involved in the school system which shapes the future of our children and future generation. Participate. Get on boards and commissions. Participate in research. Participate in the census so that African Americans are fully represented.
- Get screened and stay healthy. Early detection of diseases can save your life.
- Encourage STEM education that will result in more doctors and scientists in the future.
- Organize and advocate to exact change.

[Go Here for audio of this session](#)

MEN'S HEALTH...TEACH HIM RIGHT

"How do we get the community involved? It starts with our influencers."



Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Dr. Charles Brown – Medical Case Manager, Us Helping Us, People into Living

Roach Brown – Host, Crossroad Radio Show Inner Voice

Cecil C. Byrd II, MA PA - Executive Director, National Association of Concerned Veterans

Marc Clark - Program Manager, National Council on Urban Indian Health

Dr. Keith Gregory – Senior Director, Radiation Oncology & Proton Therapy, INOVA Health System

Joshua Ross – Program Manager, DC - African American Male Wellness Walk

While there is poor, inadequate, and substandard treatment in the community, in prison getting treatment for cancer is affected by a number of things:

- A copay, \$5, will be required to seek medical care. Prisoners make about 23 cents an hour working in prison.
- Guards can use their own prerogative on whether you get your medicine or go to a medical facility regardless of whether the prisoner is crying in pain.

Returning citizens also find it difficult to battle cancer because of lack of insurance. The medical and religious community can have a big impact to change things, to speak out and to turn on systems of oppression.

We deal with historical trauma and generational challenges, and have inherited burden that is passed on and it has practical significance including oppression. We're always in fight mode, in contention mode. Going forward we must realize that we have to take hold of our lives because we have our families.

African American men are 1.6 times more likely to get prostate cancer and more die from it than white men. This is due to a number of things including cultural habits, access to care, genetics, nutrition, stigmas about prostate tests. A lot of black men die from it because of lack of education on how to use the healthcare system. Things hold black men back because they ignore symptoms, do not understand risk factors, and feel violated from screening exams. African American men are a high risk group and should get PSAs and rectal exams sooner than the average recommendation. Early detection is the way to survive. Men of color are reluctant to seek healthcare.

How can the community advocate for black men?

We need to educate and inform. Our schools are inadequate. Prisons are incubators for all kinds of disease. African Americans have a problem with trusting public health and it goes back to Tuskegee. We do not trust health information that we receive, choosing to depend instead on what is read in check out lines. We need to learn to trust but verify. We need access to legitimate information that we trust, and to take what we hear and apply it to our lives. We need community health workers, patient navigators to come alongside us as we deal with health issues. Sometimes, they come from the Church. How do we decide who to trust and what information to trust?

What can we do better?

Starts with the schools. Educate. Parents need to get involved. Community health workers should partner with schools to educate.

How do we get information to the people and get the community involved?

It starts with our influencers. People's day to day priorities are generally not about healthcare but parents should educate their children on health issues. Ministers should talk about preventive care in Churches where they have a captive audience. Individuals should talk about it on social media where they have a following.

You have to have a support system: a navigator, an advocate, someone you trust, someone who can help to communicate with the medical professional.

Joshua Ross discussed the African American Male Wellness Initiative.

[Go Here for audio of this session](#)

FINDING FUNDING - INVESTING IN HEALTHCARE INFRASTRUCTURE

*"Diversified Funding:
if you are only going to
one stream, and that
stream dries up, what
happens when that
stream dries up?"*



Shyrea Thompson - Founder / Director , The IRIS Collaborative, LLC: Moderator

Dr. Malcolm E. Beech, Sr. - Chairman & CEO, African Diaspora Business Roundtable

Tesha Coleman - Division Chief of the Cancer Program Division of the DC Department of Health

Veola Green - Executive Managing Partner and Principal at The International Institute of Family Development

Luana Kiandoli - Co-Chair, Maryland Liberia Sister States Program

Department of Health:

DC Department of Health's cancer programs division has a comprehensive cancer program for cancers including breast, cervical and colorectal cancer. They provide free services to uninsured and underinsured District residents and work with qualified Health Centers specifically in Wards 7 and 8 where the most disparities exist. For about 20 years, their breast and cervical cancer programs have provided services to promote early detection through annual mammography screening and cervical cancer screening, and ensures that a woman diagnosed with cancer gets proper treatment. They are currently initiating a patient navigation system.

Funding Africa

- The International Institute will provide small loans and are willing to underwrite women-owned businesses to go back to the continent and partner with other women to create the bridge in agriculture, security and transportation initiative programs. There's nothing more powerful than women coming together, understanding the economic temperature, and build so that they can have a legacy for the children.
- How do we create opportunity where we get to thrive? One way is through food as our food is our medicine. An example initiative that is reshaping Africa's rural food systems: The Cold Store Initiative has 5 components to it: 1)addresses a nation's national development plan to support the people. 2)self-contained solar powered, compartmentalized units for food items provided by black owned companies as it is important to buy and source black. 3)addresses education opportunities for the youth by Con Academy, 4)addresses how to support the farmers because "if the farmer is sick, my food is sick and I am sick", 5)addresses liberties not just freedom.
- Building manufacturing plants so that raw products can be used within the country to make other products instead of importing from another country.

Integrated Approach:

What is required is an integrated approach to healthcare that includes educating individuals, providing resources and looking at the environmental impact. Medical equipment is a pinnacle in making medical programs work but it must be utilized, maintained and validated.

Making a Difference:

It is important to invest in education opportunities for youth. Have ready technologies and seek opportunity for health. Join the ProBiznetwrok.org for information about doing business in Africa.

Cultural competency in Funding Proposal

Cultural competency is important in any proposal. Having input from the society makes it possible for the people to have ownership of the program which makes the program more sustainable. Find out from the target population if the implemented proposal will work.

Best practices in formulating Grant:

Put a lot of time into the proposal. Have the following items already formulated before applying for a grant:

- Mission, goals, objectives, aims, concrete background.
- What does the data show?
- Why is the proposal needed?
- Use evidence from researched tested projects and not anecdotal information.

[Go Here for audio of this session](#)

CAREGIVERS AND CANCER - HOW TO PRESERVE AND STRENGTHEN FAMILY RELATIONSHIP

"She might have 3 kids, but she is 100% my parent, not one-third, and requires 100% care from me."



Donna R. Gayles - Patient Advocate, Capital Caring: Moderator

Dr. Chimene Castor - Associate Professor, School of Nursing & Allied Health, Howard University

Apria Gallman - Caregiver Advocate, Apria Speaks

Rev. Evelyn Samuel - Ambassador at Large

Erick R. Tyrone - Estate Planning Attorney, Tyrone Law Firm LLC

Dr. Ayesha Quainoo - Chief Empowerment Officer, The Ultimate Care, LLC

Ayo Handy-Kendi – Founder of Optimum Life Breathology & Transcendence Breathwork

This session started with Ayo Handy-Kendi of Optimum Life Breathology and Transcendence Breathwork, who conducted a breathing exercise for all participants present, and educated on proper breathing technique.

This panel explored the ways that faith and spirituality can help in coping with cancer. The overriding issue in this conference discussions is that the zip code determines the resources available and the state of health of the residents. The same is true regarding resources available to cancer care givers.

Coping skills for caregivers, highlights and call to action:

- Maintaining a relationship with God and having a prayer life
- Journaling, particularly releasing steam when being verbal might be counter productive
- Blogging
- Having a Better Board of things you want to do and places you want to go and drawing motivation from that
- Nursing home placement might be an answer that benefits the patient and the caregiver
- Take time for and care of yourself. You are number 1.

- Laughter is healing
- Reduce stress
- Include other family members in the process as long as they are a positive difference; be open to receiving help.
- Be able to recognize and manage negativity.
- Power of Attorney makes decision making easy in the event the patient can no longer decide for themselves.

[Go Here for audio of this session](#)

ORAL HEALTHCARE

"If you want the answer to a question, open a book. The dentists here are your book."



Ray Michael Bridgewater - President/CEO – Assembly of Petworth: Moderator

Dr. Joseph E. Baptiste – Former Commissioner, Maryland Governor's Commissioner on Caribbean Affair

Dr. Oswald J. Cameron-Morales – President, Hispanic Dental Assoc DC Chapter, Healing Hands

Dr. Nathan Fletcher – Dental Director, Amerihealth Caritas

Dr. Cletus Fonmedig – Owner, Rosedale Smiles

Dr. Hazel J. Harper – Program Manager, National Dental Association

This panel discussed the challenges of Dental Healthcare for people of color and other vulnerable populations.

Challenges of dealing with the consumer include education, affordability and compliance. Dental copays are not always affordable. An informed consumer of dental healthcare is a priority.

The future of healthcare should be integrated with a focus on health care, dental care and mental care, mind, body and spirit. There is a need to push for education of consumer and the dentist on the link between oral health and morbidity and mortality in the minority population.

This panel also discussed the dental needs of the disabled community and how to meet the challenges. The panelists stressed on team work with other medical disciplines from which the patients are referred, the social worker, and family/caregivers; follow up and compliance. There was suggestion that the more challenging cases may be better treated in a hospital rather than a private clinic.

Some highlights and call to action:

- Oral health is an intricate part of overall health and the focus should be on prevention.
- Oral and dental health is linked to prematurity and low birth weight babies, kidney disease, Alzheimer's disease, diabetes, cardiovascular and lung conditions and gastrointestinal issues.
- Recommend dental assessment prior to surgery for joint replacements, hip replacements and cardiac surgery.
- Health professionals, social workers, psychologists, business people and lawyers have to work together.
- Dental student loan debts are \$300,000 to \$400,000, which stays with them into retirement, thus keeping them from practicing in the neighborhoods of color where they are needed the most. This underscores the need for debt relief programs.
- NDA HealthNow is an acronym for Health Equity Access Literacy Technology and Hope National Outreach on Wheels. It is an NDA program in partnership with Amerihealth Caritas and it is currently in 7 cities. It provides mobile dental care and prenatal oral care to underserved communities of color.
- Curriculum is being developed to integrate oral health, physical health and mental health in a one stop professional office where patients will be able to consult with a doctor or dentist in the same office. Amerihealth currently offers A1C, BMI and other tests in the dental office.

[Go Here for audio of this session](#)

SOME PRESENTATIONS

I Heart Health Expo

Alli Mofor - Founder and COO of I Heart Health Expo

"Know your risk factors."

I Heart Health Expo is a non-profit organization designed to create awareness of heart disease and promote intervention and healthy lifestyles in the community. The prevalence: 1.5 million African Americans die annually from cardiac disease and stroke. 44% are male. 1 in 3 women will die from cardiovascular disease; that is 1 woman every 80 seconds. Some of the reasons why include:

- Heart attack symptoms for women are different than for men. Most women do not experience a crushing chest pain. The symptoms are more subtle and therefore not as readily recognizable by the health care providers.
- Food desserts: unhealthy diet high in fats and carbs, and lacking in fruits and vegetables



Some highlights and call to action:

- Know your risk factors including family history, lipid/cholesterol profile, blood pressure and diabetes numbers.
- Promote primary prevention.
- Experiment with low salt food preparation, utilizing spices from other cultures.
- Eliminate canned foods which are high in salt and sugar and exacerbate heart failure.
- Shop at the farmer's market and increase fruits and vegetables in the diet.

I Heart Health Expo is available to participate in community events and will provide screening and nutrition counseling.

[Go Here for audio of this session](#)

Breathology

Ayo Handy-Kendi – Founder of Optimum Life Breathology & Transcendence Breathwork

"As I breathe through, I was able to release the pain of an abused person that couldn't talk it out."



The breathing technique opens up portals of energy allowing us to breathe through pain, loss and grief and into forgiveness. Unforgiveness is the first violent act against our selves. Oxygen is the first food our body needs. We breathe 30,000 times a day and yawning is a sign of a lack of oxygen. We can live 21 or more days without water, 45 or more days without food, but only about 8 minutes without oxygen, the breath of life. Man is a self-healing machine and the way we breathe can impact disease outcome.

[Go Here for audio of this session](#)

Love Myself Pledge

Gabrielle Dibonge – Patcha Foundation Junior Board Member, Breast Cancer Survivor

"If you can share the pledges, that creates connections...so that we can get information out to people that need them."



Join the Patcha Foundation on Social Media. Everyone was encouraged to take the Love Myself Pledge. Follow the Patcha Foundation on Facebook. Create more connections by sharing your pledges and other Patcha Foundation postings with your network. Use hashtags: #MMPF #CIE2019 #CASEC.

[Go Here for audio of this session](#)

SPIRIT OF COMMUNITY AWARD



Thelma Jones

Thelma D. Jones Breast Cancer Fund (TDJ Fund)

<http://www.tdjbreastcancerfund.org>

[Visit Thelma D. Jones Breast Cancer Fund on Facebook](#)

In her own words, a summary...

"I am a full time volunteer at the TDJ Fund. I am grateful for working with the Patcha Foundation in helping to make a difference in improving the health outcomes of others especially in our vulnerable populations throughout the diaspora and here at home. I was reminded of a quote on my website by Dr. Martin Luther King Jr., which says *In all the works of humanity, injustice in health care is the most shocking and inhumane.* Our health and wellbeing are the most important elements for longevity and the Patcha Foundation believes that good health is central to efficient and good living. Yet we live in a world where there is so much lacking in health equity, barriers in healthcare exists and disparities loom largely in our communities. It takes all of us in a committed and dedicated manner to move the needle forward and to help save lives. The call to action for this conference is to continue the dialog to bridge the healthcare gap. This conference has provided the initial tool to bridge the gap and build capacity."

Ms. Jones' call to action was a pledge to commit the Patcha Foundation to the World Bank so that the work done by Patcha Foundation can have greater sustainability."

Ambrose Lane Jr.

Health Alliance Network

[Health Alliance Network Profile](#)

[Visit Health Alliance Network on Facebook](#)

In his own words, a summary...

It's not just that I love my work, but it's that I love my people. We have to take a stand to say never again will we suffer the consequences that we have suffered the world over. We must work diligently in our communities every single way we can with the talent that each of us has. Each of us is great in our own rights with the God given talent that He only has given you. With the talent that God gave me, I pledge that I will use all of it to my last dying breathe to help people in my city, in my community and all around the world. The scripture says "as you have done for one another" In other words, if you have clothed me, if you have fed me, if you have visited me in prison. That is our call to what we must do to fulfill God's purpose. I encourage all of you in your own way to do what you can. Open up your hearts, open up your doors, open up your minds to collaboration and then move from faith to action because faith without works is dead."

Mr. Lane pledged his willingness to collaborate with conference participants to move the ball forward as we work together to help the community.

[Go Here for audio of this session](#)

"Of all the forms of inequality, injustice in health care is the most shocking and inhumane."

Dr. Martin Luther King, Jr.

PATCHA FOUNDATION CHAIRMAN'S MESSAGE



Samuel Buma
President of B.E. Capital Group – USA

"What's more important is to stop being reactive and to start being proactive in the cancer care."

What's more important is to stop being reactive and to start being proactive in the cancer care. His vision is to see the Patcha Foundation become bigger and larger than the Cancer Foundation itself in America. We can only get there by putting in place a strategic plan. Nothing functions without the resources. There are many challenges to cancer care, and they can be exterior challenges, challenges within ourselves, or cultural. Across the globe, something about black people makes them hesitate to seek treatment for diseases and that has to stop. Many diseases show up in pockets across the world, but the only disease that affects everyone is cancer. We each know someone who is/has dealt with cancer. First defense against sickness is to educate yourself about the disease. Do not depend on the doctors to provide you with all the necessary information about your disease and care. With cancer, intervention must be at early stages. At stage 4, there's not much to do. We must target our resources and everything we have towards a proactive approach to fight this disease. We cannot depend on the white man to do for us what we need to do for ourselves. Ignorance is part of the problem.

[Go Here for audio of this session](#)

HOSTS



Leslie Jackson
CEO of TAJ'S Virtual Solutions, a concierge administrative company and currently serves as executive administrator of The Light House Baptist Church under the leadership of Pastor and Mrs. Ricardo W. Payne.



Pastor Kevin Jackson
Pastor, The Light House Baptist Church.
Invocation

"The greatness of a community is most accurately measured by the compassionate actions of its members."

Coretta Scott King

COMMUNITY GIVE-AWAY ITEMS

Participants helped themselves to various give away items donated by Goya Foods. Winners of the business card draw received GOYA Foods gift basket, and small appliances and a book donated by the Lighthouse Baptist Church and TAJS Virtual Solutions. Pens and information packets were donated by TeamBest. The Patcha Foundation acknowledges and appreciates all donors of the give-away items.



CONFERENCE ASSESSMENT

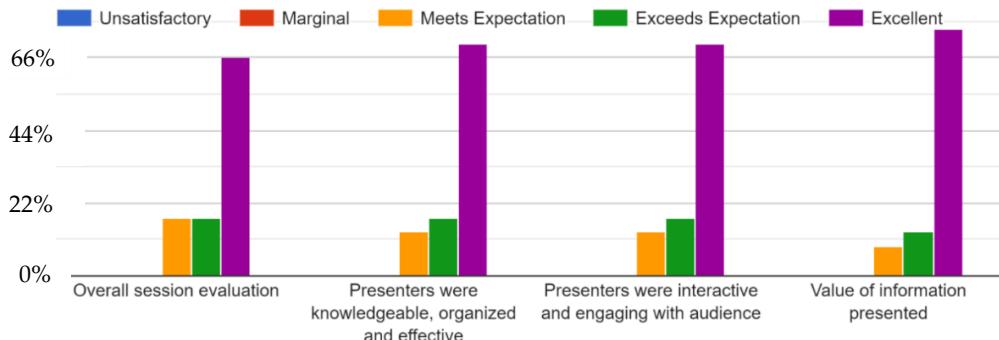
The Patcha Foundation is able to analyze participant satisfaction as well as capture common themes and action items. Conference evaluation surveys were distributed during the conference. This was the primary conference assessment tool. Other non-tracked assessment was verbal feedback from participants during and after the conference. The verbal assessment is noted but not used in analysis.



EVALUATIONS

44% of participants completed the CASEC Information Exchange conference evaluation forms. The evaluation survey was designed to collect qualitative data and identify some common themes that are helpful in understanding how effective the conference was, and helpful to synthesize participant expectations and satisfaction.

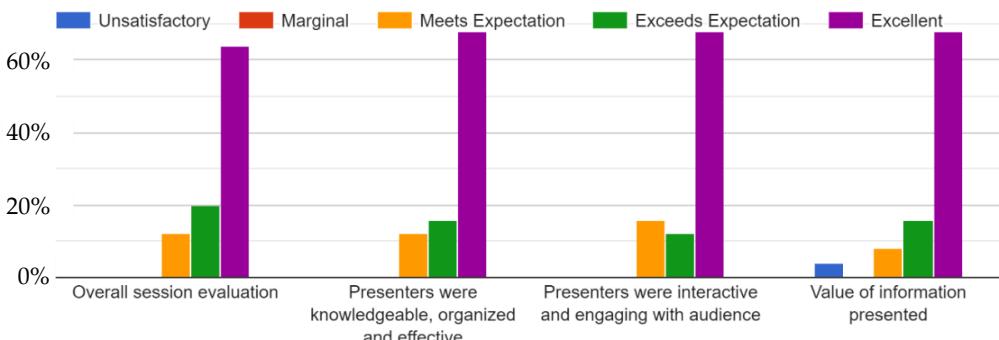
Cancer Research, Treatment, Clinical Trials and Medical Advancements: Diversifying Clinical Trials and Community Engagement



Comments:

- Technology problems hurt the presentation
- Time cut short due to slides not being ready and technical problems. Presentation should have been ready
- Most informative
- Very useful

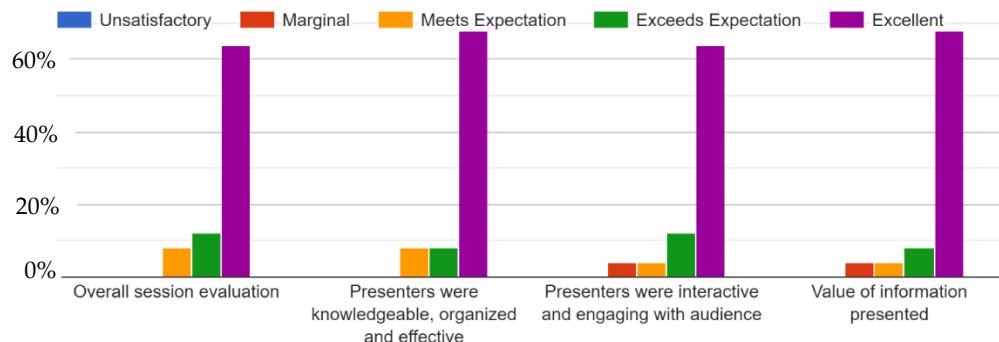
Collective Impact: Community Based Strategy



Comments:

- Inspiring but didn't see as much connection with cancers
- Excellent panel
- Great info
- Not long enough
- Great work and networking about the group

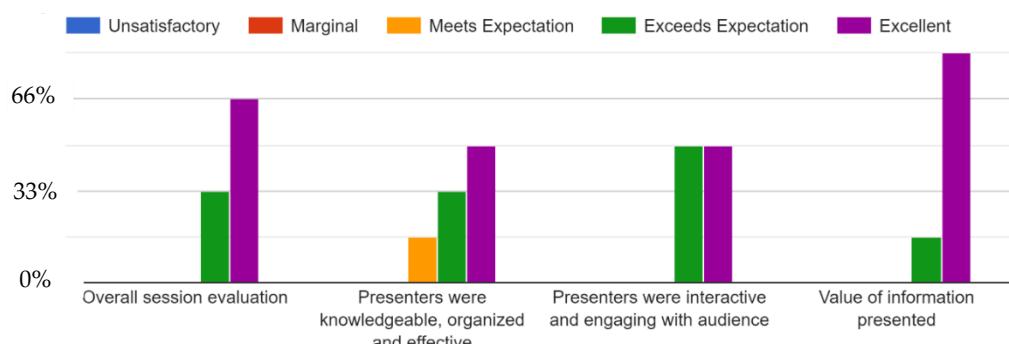
Women's Health and Wellness: Mind, Body & Soul



Comments:

- Enjoyed! Would love more information and sessions on selfcare related to cancer prevention
- Excellent-engaged, more time needed. Breathing was incredible
- Very great presentation, awesome panel and moderator
- Excellent, full of advice • Great tips to take home and actionable items

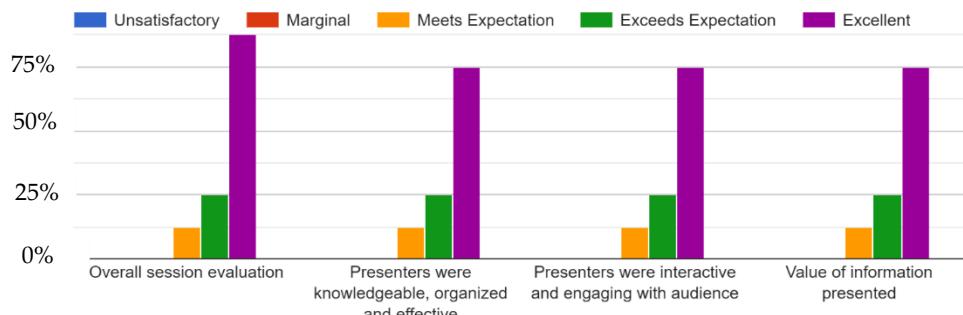
Men's Health and Wellness: Teach Him Right



Comments:

- A five person panel is difficult to moderate in the time allocated. Perhaps consider a smaller number or longer breakout time.

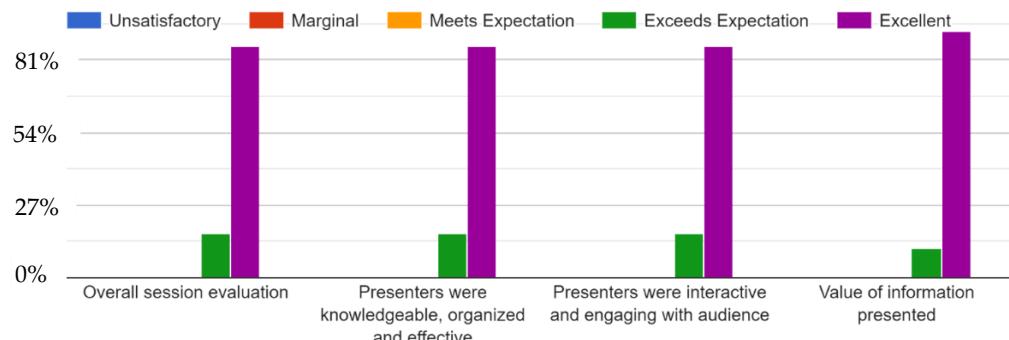
Finding Funding - Investing in Healthcare Infrastructure



Comments:

- None

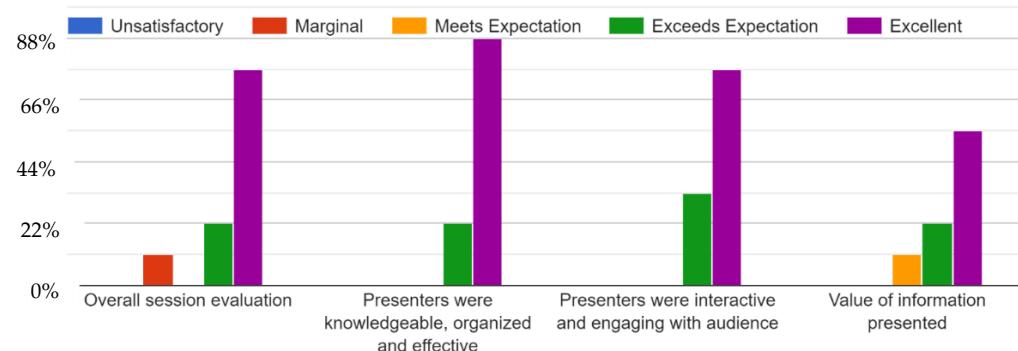
Faith, Caregivers and Cancer - How to Preserve and Strengthen Family Relationship



Comments:

- Panel was phenomenal and absolutely needed
- Attorney Tyrone was excellent, relevant and humorous
- Excellent presentation, panelist, moderator. Not enough time
- More time to discuss
- Excellent advice

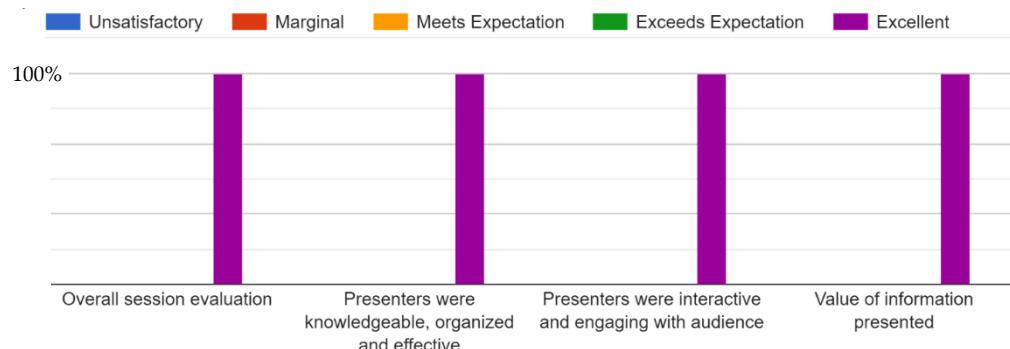
Oral Healthcare in the DMV



Comments:

- They were a bit boring in how they presented the information
- Excellent panel
- Well needed session
- Very informative, great panel and moderator
- More time to discuss
- Great takeaways for preventative health

Organizational and Other Presentations



General Comments on Presentations:

- Excellent conference
- Excellent
- Awesome!
- Very well planned
- Awesome
- Very informative

Comments on I Heart Health Expo Presentation

- Excellent
- Loved. On point and timely. Perfect and prompted need for change
- Awesome
- Great presentation

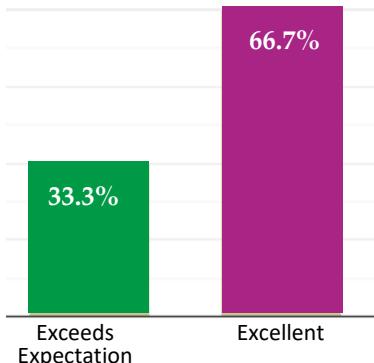
Comment on Goya Foods Sampling / Demo

- Excellent
- Delicious
- Excellent and high quality and healthy products.
- It was good to see how to cook without salt.
- The highlight of the conference! Surprised the food was tasty and loved the giveaway
- Nice addition
- #outstanding
- Good
- Yummy! Lunch was great!
- I enjoyed the food. I don't eat meat and the food was superb!! Thank you
- The food was delicious
- A wonderful treat, the giveaways were a hit good resource on cooking without salt

Comments on the LoveMyself Pledge Campaign

- Excellent
- Creative and powerful
- Pledge was useful
- Great. I liked the #ilovemyselfpledge
- The Lovemyself campaign gave me something to think about and it felt good knowing that I was doing 90% of the pledges
- Wish that was a little longer--too short
- Useful info and great presentation. Great way to get the info out
- It is great for pledges. It's the application. A process of accountability will be helpful to people.
- Great presentation

Overall, how do you rate the conference?



General Comments:

- Very nice
- Definitely enjoyed the sessions and panel. Consider bringing in younger people, demographics
- The audio visuals were a challenge. More working microphones were needed.
- Food and venue and overall atmosphere were excellent
- This conference is wonderfully done
- Very well planned conference
- This was an awesome conference. You touched on just about every area. Keep up on everything so the masses can be informed.
- This conference was well worth the early morning from Baltimore
- Very well executed, glad to be a part and share what I know so that I can be helpful
- I will recommend instant evaluation feedback tools. More effective.

COMMON THEMES

Participants wanted more time allotted for Q&A, breakout sessions and action planning. They appreciated the opportunity to collaborate and network with peers. The following themes were recorded as responses to specific questions asked on the evaluation survey.

Reasons for attending the CASEC Information Exchange

- | | |
|---|--|
| <ul style="list-style-type: none">• I am interested in community health and development• For information• Board member of Thelma D Jones Breast Cancer Fund• Information and advocacy• To learn from experts• Empowerment• Excellent lunch• Improve knowledge• Invited as a presenter and award recipient, gained knowledge, information and expanded network | <ul style="list-style-type: none">• Invited guests to participate• To learn• I supported Ambrose and Thelma receiving their award today• Two time breast cancer survivor who loves to attend these types of events to learn info that I can pass on• Information gathering and networking• To fight cancer.. Parent in laws passed from cancer• Panelist and wanted to hear the info• Invited with very little lead time to plan• First time-invited as a panelist |
|---|--|

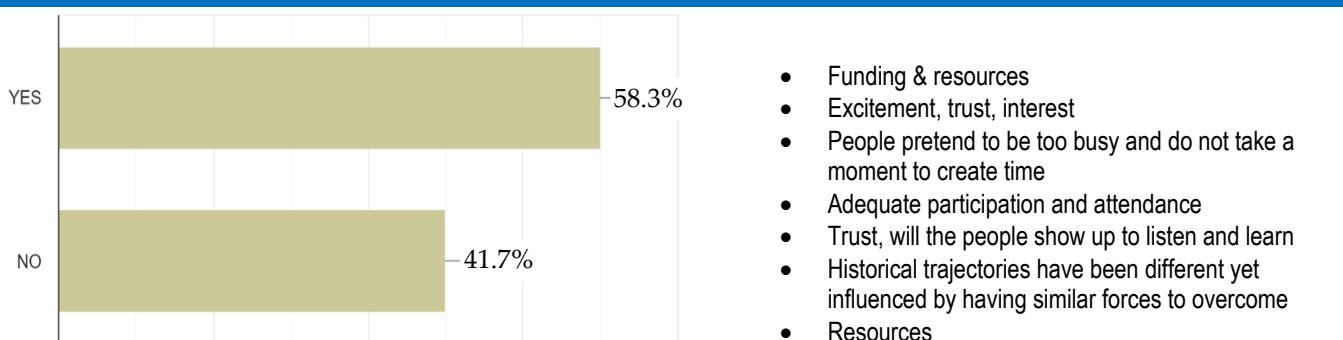
Did the conference provide practical tools you can implement in your community?

- | | |
|--|---|
| <ul style="list-style-type: none">• Yes• Some ideas about Board constitution was well received.• Yes. Practical new ideas and reminders to enhance access to healthcare• Absolutely networking and connection | <ul style="list-style-type: none">• Very informative• Yes, a lot of information• Improve educate awareness advocacy• Definitely, I learned the importance of addressing cancer disparities of the cellular level and how stress impacts cancer |
|--|---|

What would you like to see implemented in your organization/community?

- | | |
|---|---|
| <ul style="list-style-type: none"> • More of these • Prevention interventions • More concentrated information sessions • Getting more people aware of their health • More collaboration and support • More information to be provided • More 101 breast health training/education. | <ul style="list-style-type: none"> • More workshops on chronic diseases, physical activity and nutrition • Teen transition program, mentoring high school students • Information was received that will be shared with my care project network • Inclusion of all the African groups into American groups? • How to share this info with the masses and determine how to act on them • Greater collaboration between serving agencies and African Americans • Youth mentorship program |
|---|---|

Any perceived barriers to accomplishing the identified task? If yes, please explain.



What topics would you suggest for next year's conference?

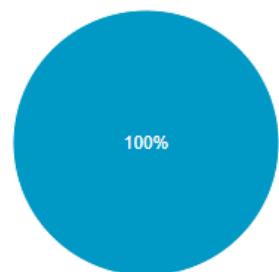
- | | |
|---|---|
| <ul style="list-style-type: none"> • Sample poster session • Longer session including women's mental health • Knowing yourself as a black person, health risks associated to being black • Mental health • Biases in the medical community, caregiving • Caregivers section should be longer • How to use social media for public health | <ul style="list-style-type: none"> • Women's health panel • Sexual health while dealing with cancer or major disease and preventative health, maternal health after being diagnosed • Financing health care, funding and competition for funding • Cancer is a broad disease spectrum. It will be helpful to focus on about 1-2 and discuss. Because that allows more information to be shared especially with the rapid advancement of treatments. |
|---|---|

What speakers would you suggest for next year's conference?

- | | |
|---|--|
| <ul style="list-style-type: none"> • No suggestions • Women speakers on mental health • Dr. Chesahna Kindred • Dr. Lucille Campbell | <ul style="list-style-type: none"> • Dr. Richard Kennedy (former Chief Medical Officer, World Bank Group) • Barbara Palmer aka courageous diva • Take the love myself... • Same speakers |
|---|--|

How do you feel about the conference holding on a Saturday?

Indicate what day is best for you to participate.



- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

How might the Patcha Foundation improve the conference?

- Add small poster presentations
- Two day conference forum. Bring in a celebrity to be the main speaker
- Keep it up
- End at 4, 5 is too late
- Consider partnering with PR team to increase attendance. A lot of great information missed
- The conference is too long, so either do a half day or incorporate some working out
- Some panelists take too long
- Debrief session online after conference or written summary of action items
- Shared planning with youth serving agencies to consider a research forum for young scholars high school - graduate school
- Reduce the number of presentations to possible 3-4 so to give more time for deeper discussions.

CONTINUING THE DIALOGUE

To continue the dialogue and to blog visit the Forums-Feedback pages on the Foundation website or join us on social media. The Patcha Foundation will select at least one item from the conference evaluation feedback to work on before the next conference in April 2020. The Patcha Foundation will continue to solicit input from conference panelists and attendees. The Foundation also plans to disseminate information about the implemented program by presenting at a health conference, sharing via various media and /or publishing in a health journal.

Online Forum & Blog: www.patchafoundation.org/conferences/forum-feedback.

Also join us on social media: use #MMPF #CIE2019 #CASEC to continue the dialogue.

Twitter: @patchaf

Facebook: Michael and Mauritia Patcha Foundation

CONCLUSION

While acknowledging that steps should be taken to improve future conferences, the Patcha Foundation believes that the goals for this information exchange were accomplished.

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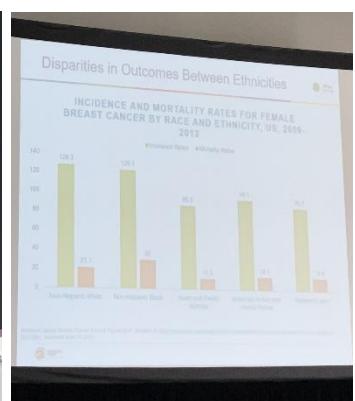
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DVD



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