



Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas

Meeting Report

1 October 2021

Virtual Meeting

9:00am–12:00pm (Eastern Time)



Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas

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Abbreviations and Acronyms

CARPHA	Caribbean Public Health Agency
GICC	WHO Global Initiative on Childhood Cancer
IARC	International Agency for Research on Cancer
PAHO	Pan American Health Organization
SCI	SickKids-Caribbean Initiative
St. Jude	St. Jude Children's Research Hospital
WHO	World Health Organization

Acknowledgments

The Pan American Health Organization/World Health Organization (PAHO/WHO), St. Jude Children's Research Hospital (St. Jude), and SickKids-Caribbean Initiative (SCI) wish to thank the participants of the Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas, held online on 1 October 2021, for their contributions.

The Organizing Committee members were: Ms. Silvana Luciani, Dr. Mauricio Maza, Dr. Liliana Vasquez, Dr. Soad Fuentes-Alabí, Dr. Karina Ribeiro, Dr. Sara Benitez (PAHO/WHO); Dr. Monika Metzger, Dr. Catherine Lam, Dr. Alejandra Gonzales (St. Jude); Dr. Sumit Gupta, Dr. Avram Denburg, and Ms. Margaret Manley (SCI).

Appreciation is also expressed to the representatives of PAHO/WHO Caribbean Subregional Program Coordination; Caribbean Public Health Agency (CARPHA); PAHO/WHO country offices; ministries of health; and the Caribbean Association for Oncology and Hematology.

Executive Summary

As part of the WHO Global Initiative on Childhood Cancer (GICC), and in follow-up to the initial Caribbean meeting in 2020, PAHO, in collaboration with SickKids-Caribbean Initiative (SCI) and St. Jude Global, organized the Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas, held on 1 October 2021 via Zoom, to continue discussing how to improve pediatric cancer care in the Caribbean subregion. Some 47 (out of 59 total) participants, representing nine countries, took part in the meeting.

The objectives of the meeting were to present the current status of the GICC and a situational landscape of childhood cancer in the Caribbean; to review the outcomes, progress, and follow-up on commitments and plans discussed at the Caribbean childhood cancer meeting held in February 2020; and to identify critical priorities and joint activities for the 2022–2023 biennium for subregional and national activities in pediatric cancer care, including national childhood cancer plans, treatment protocols, access to medicines, workforce development, and registries.

The meeting included presentations from experts on the situational analysis of pediatric cancer in the Caribbean, review of the commitments Caribbean countries made in the workshop of February 2020, advances in the SCI and St. Jude Global collaboration activities in the Caribbean countries, and the implementation strategy of the GICC.

As preparatory work, several subregional key activities established during the 2020 meeting were reevaluated and prioritized. As part of the prioritization exercise, 22 participants voted during the preparatory phase and the meeting. The key activity identified for prioritization was the development of a subregional communication campaign on common childhood cancers.

In a breakout group exercise, small virtual groups discussed countries' priorities and opportunities for improvements around four topics: health services and registry, oncological medicines, human resources, and governance. The participants were actively engaged in providing insight into the national and regional priorities and activities related to implementing the GICC at the national and subregional level through their contributing to the large and small group exercises.

Over the next biennium, PAHO/WHO, SCI, St. Jude, and collaborators will work diligently to ensure that the GICC continues to serve as a robust framework for prioritizing childhood cancer care. The work must be sustained with political will and national and regional leadership to increase awareness, multisectoral use, and accessibility of the GICC among key partners, ultimately strengthening regional and national implementation of the GICC.

Introduction

As part of the WHO Global Initiative on Childhood Cancer (GICC), and in follow-up to the initial Caribbean meeting in 2020, PAHO, in collaboration with SickKids-Caribbean Initiative (SCI) and St. Jude Global, organized a Caribbean-wide, multistakeholder virtual meeting to continue discussing how to improve pediatric cancer care in the Caribbean subregion.

This report summarizes the information gathered from the Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas, held on 1 October 2021 via Zoom. Some 47 (out of 59 total) participants, representing nine countries (Annex 1), took part in the meeting.

Purpose of the Meeting

The objectives of the meeting were:

- To present the current status of the GICC and a situational landscape of childhood cancer in the Caribbean.
- To review the outcomes, progress, and follow-up on commitments and plans discussed at the Caribbean childhood cancer meeting held in February 2020 in Trinidad and Tobago, involving Ministry of Health representatives, pediatric oncologists, and foundation representatives, as well as PAHO officers.
- To identify key priorities and joint activities for the 2022–2023 biennium for subregional and national activities in pediatric cancer care, including national childhood cancer plans, treatment protocols, access to medicines, workforce development, and registries.

The meeting included presentations from experts on the situational analysis of pediatric cancer in the Caribbean, review of the commitments Caribbean countries made in the workshop of February 2020, advances in the SCI and St. Jude Global collaboration activities in the Caribbean countries, and the implementation strategy of the GICC.

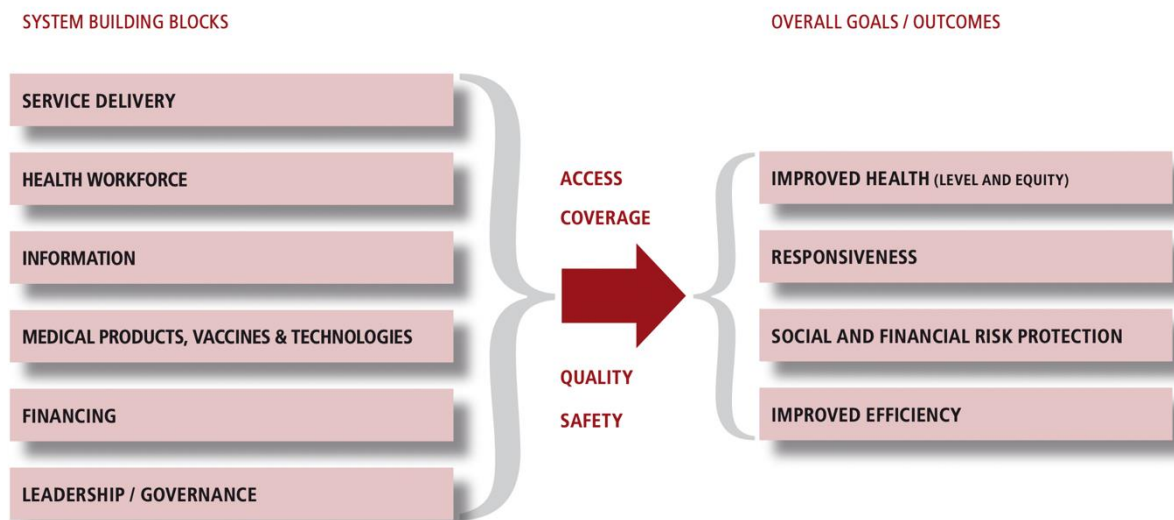
Summary of Discussions

WHO Priority Setting for Caribbean Subregional Health Priorities

When the health system is strengthened, it is feasible to improve the six WHO health system building blocks and *manage their interactions* in ways that achieve more *equitable* and *sustained* improvements across health services and health outcomes. *People* are often listed as the seventh building block. *People* refers to individuals, households, and communities as civil society, consumers, patients, payers, and producers of health through knowledge, attitudes, behaviors, and practices. Strengthening a health system takes a long time. Efforts must be tailored to a specific country or region.

The meeting aimed to identify key subregional prioritized activities for effective implementation in the 2022–2023 biennium, within the six WHO health system building blocks (see Figure 1). To achieve this goal, the PAHO GICC team requested the subregion countries' committees to complete two tasks, as described below.

Figure 1. The WHO Health System Framework



Source: World Health Organization. Everybody's Business: Strengthening health systems to improve health outcomes – WHO's Framework for Action. Geneva: WHO; 2007.

Task 1: Develop a list of subregional key activities that could be supported by PAHO and partners

During the Caribbean meeting in Trinidad and Tobago on 11–12 February 2020, the Caribbean subregion identified within the six health system building blocks four prioritized key activities to strengthen the health system for childhood cancer care (Table 1). As preparatory work, the subregional key activities chosen during the 2020 meeting were reevaluated. In addition to those activities already listed, if necessary, new key activities were provided to be analyzed.

Table 1. WHO Health System Framework: Four prioritized subregional key activities to strengthen the health system for childhood cancer care, identified during the Caribbean Meeting in Trinidad and Tobago, 11–12 February 2020

The Six Building Blocks: Key Areas of Health Systems	Prioritized key activities within the subregion aligned with the Six Building Blocks Key Areas to strengthen health systems for childhood cancer care
1. Service Delivery (SDK) Good service delivery comprises <i>quality, access, safety, and coverage</i> .	Development/adoption of treatment guidelines.
2. Health Workforce (HWK) A well-performing workforce consists of <i>human resources</i> management, skills, and policies.	
3. Health Information Systems (HISK) A well-performing system ensures the production, analysis, dissemination, and use of <i>timely</i> and <i>reliable</i> information.	
4. Medical Products & Technologies (MPK) Procurement and supply programs need to ensure <i>equitable access, assured quality, and cost-effective use</i> .	Estimation of costs of medicines and use of tools.
5. Financing (FGK) A good health financing system raises <i>adequate funds</i> for health, <i>protects people</i> from financial catastrophe, allocates resources, and purchases goods and services in ways that <i>improve quality, equity, and efficiency</i> .	Support for the development of a network of foundations to help children with cancer in the Caribbean.
6. Leadership & Governance (LGK) Effective leadership and governance ensures the existence of <i>strategic policy frameworks</i> , effective <i>oversight</i> and coalition-building, provision of appropriate <i>incentives</i> , and attention to <i>system design</i> and <i>accountability</i> . (Family Support & Community Engagement)	Subregional communication campaign.

Source: World Health Organization. Everybody's Business: Strengthening health systems to improve health outcomes – WHO's Framework for Action. Geneva: WHO; 2007.

Task 2: Assess need vs. feasibility of the subregional key activities that could be supported by PAHO and partners

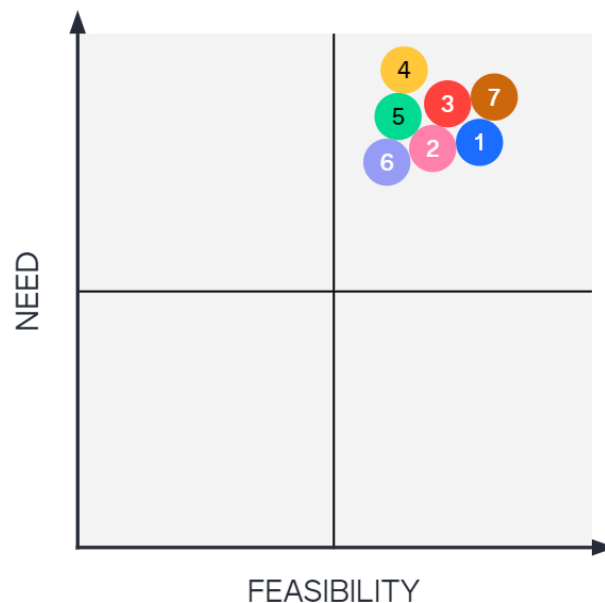
The final list of prioritized key activities within the six building blocks of health systems included seven key activities (Table 2). The PAHO GICC team then sent a survey to the participants to fill out as a second task. Each subregional participant assigned a score to each of the seven prioritized key activities in terms of both its *Need* and *Feasibility*. The PAHO team summarized the key activities from each participant’s list.

Table 2. WHO Health System Framework: Seven prioritized subregional key activities to strengthen the health system for childhood cancer care, identified during the current meeting

The Six Building Blocks: Key Areas of Health Systems	Prioritized key activities within the subregion aligned with the Six Building Blocks Key Areas to strengthen health systems for childhood cancer care
1. Service Delivery (SDK) Good service delivery comprises <i>quality, access, safety, and coverage</i> .	Development/adoption of standardized, regional treatment guidelines and strengthen care pathways.
2. Health Workforce (HWK) A well-performing workforce consists of <i>human resources</i> management, skills, and policies.	Training and capacity building of health care workforce, including specialists, and establish a network of health professionals in pediatric cancer.
3. Health Information Systems (HISK) A well-performing system ensures the production, analysis, dissemination, and use of <i>timely</i> and <i>reliable</i> information.	Strengthen the availability and dissemination of data from childhood cancer registries (data for action) and institutionalize childhood cancer registries.
4. Medical Products & Technologies (MPK) Procurement and supply programs need to ensure <i>equitable access, assured quality, and cost-effective use</i> .	Strengthen regional mechanism to support timely access to affordable and appropriate medicines.
4. Medical Products & Technologies (MPK) Procurement and supply programs need to ensure <i>equitable access, assured quality, and cost-effective use</i> .	Improvement of diagnostic services (immunohistochemistry, molecular and cytogenetic analysis).
5. Financing (FGK) A good health financing system raises <i>adequate funds</i> for health, <i>protects people</i> from financial catastrophe, allocates resources, and purchases good and services in ways that <i>improve quality, equity, and efficiency</i> .	Advocate for increased investment in pediatric cancer within Member States.
6. Leadership & Governance (LGK) Effective leadership and governance ensures the existence of <i>strategic policy frameworks</i> , effective <i>oversight</i> and coalition-building, provision of appropriate <i>incentives</i> , and attention to <i>system design</i> and <i>accountability</i> . (Family Support & Community Engagement)	Subregional communication campaign on common childhood cancers.

As part of the prioritization exercise, 22 participants voted during the preparatory phase and the meeting. The key activity identified by the prioritization process was the development of a **subregional communication campaign on common childhood cancer** (Figure 2). As a formal commitment, the participants agreed to meet regularly as a subregional working group to establish a timeline and stakeholder mapping.

Figure 2. Priority-setting for Caribbean subregional key activities to strengthen the health system for childhood cancer care (2022–2023)



- 1** SDK: Development/adoption of standardized, regional treatment guidelines and strengthen care pathways.
- 2** HWK: Training and capacity building of health care workforce, including specialists, and establish a network of health professionals in pediatric cancer.
- 3** HISK: Strengthen the availability and dissemination of data from childhood cancer registries (data for action) and institutionalize childhood cancer registries.
- 4** MPK1: Strengthen regional mechanism to support timely access to affordable and appropriate medicines.
- 5** MPK2: Improvement of diagnostic services (immunohistochemistry, molecular and cytogenetic analysis).
- 6** FGK: Advocate for increased investment in pediatric cancer within Member States.
- 7** LGK: Subregional communication campaign on common childhood cancers.

Countries' Priorities and Opportunities Related to Childhood Cancer in the Caribbean

The tables below provide a summary of the groups' responses to the two questions related to the care of children with cancer in their countries.

1. What are the main priorities of your country related to this topic for the 2022–2023 biennium	
Sub-priority areas	Summary of group responses
Health services and registry	<ul style="list-style-type: none"> ✓ There is important ongoing work on registries in the Caribbean countries as part of the collaboration with SCI. ✓ A main challenge is to link the population-based registries to hospital-based registries in the subregion with more detailed and clinically tailored information. ✓ It is essential to have high-quality data to evaluate the results from childhood cancer activities. ✓ SCI has a community of data managers, with regular meetings before the COVID-19 pandemic. ✓ There is an excellent opportunity with the work and foundation by SCI and critical stakeholders on the cancer registry in the Caribbean. Sustained efforts must be made to ensure continued resources. ✓ In Jamaica and other countries, delays in diagnosis and treatment are significant. ✓ Some of the proposed subregional activities would benefit the countries.
Oncological medicines	<ul style="list-style-type: none"> ✓ It is vital to improve equity and access by expanding the limited reimbursement by different insurers. ✓ The main priority must be to ensure free access to oncological medicines for children up to 14 years. ✓ In the Caribbean countries, the cost of drugs is high, and sustained procurement is a challenge. ✓ Access to high-quality generic drugs is limited. ✓ Medicines procurement is part of the main prioritized strategic activities within the National Childhood Cancer Plan (NCCP). ✓ PAHO supports agreements with ministries of health that promote regional centralized procurement to lower the cost and support the sustainability of medicines procurement and supply through the creation of a central warehouse. ✓ The region needs to learn more about the advantages of working with the PAHO Strategic Fund for medicines procurement.
Human resources	<ul style="list-style-type: none"> ✓ Human resources: training of oncology pediatricians and nurses. ✓ A basic registry training will be launched soon, as an important collaboration with the International Agency for Research on Cancer (IARC), PAHO, SCI, and CARPHA, designed for the Caribbean countries. ✓ Training in pharmacy: chemotherapy mixing and handling are essential and a priority. ✓ Training of pathology specialists and on surgical oncology is needed.

	<ul style="list-style-type: none"> ✓ Some colleagues have been trained by SCI in the country. There is a need of training for nurses. ✓ There is a big gap in local training. The pandemic negatively affected the continuation of education. Evidence-based practices are crucial. ✓ Training of human resources is essential. There is a need to develop and expand pathology services (decentralized from the primary referral facility).
Governance	<ul style="list-style-type: none"> ✓ Funding for continuing education and communities of practice is essential. ✓ SCI phase 2 support ends in March 2022. Later on, SCI subregional activities will include remote consultations to support local specialists. ✓ The main challenge is the sustainability of the cancer registry: funding is needed to ensure data collection. ✓ Financing for the next biennium should address allocating resources for diagnostic services (decentralized services). ✓ Funding for the training of health care personnel. ✓ Strengthening the surveillance and monitoring system – access to real-time data (yearly reports) and research – including the University of Guyana. ✓ There is good political will in Guyana to develop a national strategy as a national program or a Childhood Cancer Plan. ✓ Priorities include developing a governance structure and financing (an option is to divert funds from other areas to finance childhood cancer initiatives). ✓ A robust monitoring and evaluation system for the programs needs to be introduced. ✓ Proposed initiatives considered are to decentralize the pathology services (reduce burden), train more personnel for pediatric cancer, strengthen the surveillance system, and include an area for research in the medical curriculum. ✓ The migration of health care workers to other countries is the main challenge.

2. What opportunities do you see in the (actual or potential) collaboration with PAHO – St. Jude – SCI?	
Sub-priority areas	Summary of group responses
Health services and registry	<ul style="list-style-type: none"> ✓ In health services, strategic approaches such as developing cancer protocols, communication campaigns for early detection of pediatric cancer, improving access to medicines, and health care worker training are essential steps. ✓ In primary care, early diagnosis programs are critical. ✓ Achieving sustainability for the registry activities is a challenge and must be addressed as a priority. ✓ Further conversations should focus on providing a subregional platform for the pediatric cancer registry. ✓ Building capacity for training data managers will help in sustainability.

	<ul style="list-style-type: none"> ✓ The training materials from the masterclass from Global Initiative for Cancer Registry Development (GICR) are excellent. It would be ideal to expand the availability of this resource to other colleagues in the Caribbean.
Oncological medicines	<ul style="list-style-type: none"> ✓ A good option would be to promote a regional, centralized medicines procurement initiative to increase demand and reduce cost. ✓ Improving the availability of oncology medicines through the PAHO Strategic Fund mechanism seems like a good option for several countries. ✓ PAHO Strategic Fund could grant access to high-quality medicines, reduce prices, and reduce medication shortages. ✓ It is essential to start working with the policymakers (Ministry of Health) and PAHO Strategic Fund through conversations to start a mechanism to improve procurement. ✓ The presence of the international stakeholders could facilitate the advocacy mechanisms in the procurement aspects. ✓ This work should be encompassed with the development of adapted guidelines. ✓ Access to essential drugs (chemotherapy) is essential, but so is access to supportive care drugs to reduce toxicity. ✓ The main challenge is to improve the technology for diagnosis, reagents, in pediatric cancer.
Human resources	<ul style="list-style-type: none"> ✓ St. Jude provides training opportunities for fellowships (pediatric oncology). Applications are closed now, but individual requests from countries for potential applicants are possible. ✓ PAHO and St. Jude are developing short-term (6-month) training for pediatricians. ✓ It is essential to negotiate with institutions to ensure sustainability for the registry and training activities. ✓ There is a registry training course organized by CARPHA, IARC, SCI, and PAHO. Further collaboration from the pediatric cancer team at PAHO would be needed.
Governance	<ul style="list-style-type: none"> ✓ Collaboration and co-funding for pediatric training staff are much needed. ✓ Sustaining a strong community of practice around pediatric oncologists is important. ✓ The central aspect is to ensure prioritization of funding for cancer registries, research, and a database system on cancers. ✓ Solutions are needed to retain health care workers after being trained. ✓ Pediatric oncology nursing training partnership opportunities with St. Jude are to be deployed to the region. ✓ The role of PAHO to assist in advocating to governments to absorb the cost of data managers is essential. ✓ It would be important to make sure that relevant documents about the childhood cancer framework are translated into English.

Conclusion

The participants in the Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas were actively engaged in providing insight into the national and regional priorities and activities related to the implementation of the GICC at the national and subregional level through their contributing to the large and small group exercises.

The groups' responses to breakout session questions demonstrate the high level of engagement and interest this group of representatives has in the CureAll framework and strengthening the health system indicators in the Caribbean. PAHO/WHO informed the participants that a subregional working group would be formed, and their input would be included in the PAHO documents.

Over the next biennium, PAHO/WHO, SCI, St. Jude, CARPHA, and the Caribbean Association for Oncology and Hematology will work diligently to ensure that the GICC continues to serve as a robust framework for prioritizing childhood cancer care. The work must be sustained with political will and national and regional leadership to increase awareness, multisectoral use, and accessibility of the GICC among key partners, ultimately strengthening regional and national implementation of the GICC.

List of Participants and Affiliations

Country	First name	Last name	Organization	Job title
PAHO/WHO – St. Jude – SCI Secretariat				
United States	Anselm	Hennis	PAHO/WHO	Director, Department of Noncommunicable Diseases
United States	Silvana	Luciani	PAHO/WHO	Unit Chief, Noncommunicable Diseases
United States	Mauricio	Maza	PAHO/WHO	Advisor, Cancer Control
United States	Liliana	Vasquez	PAHO/WHO	Childhood Cancer Consultant
United States	Soad	Fuentes-Alabi de Aparicio	PAHO/WHO	Childhood Cancer Consultant
United States	Karina	Ribeiro	PAHO/WHO	Childhood Cancer Consultant
United States	Sara	Benitez	PAHO/WHO	Cancer Consultant
United States	Monika	Metzger	St. Jude Children's Research Hospital	Director, Central and South America
United States	Catherine	Lam	St. Jude Children's Research Hospital	Director, Health Systems; Co-Director, WHO Collaborating Centre for Childhood Cancer
Canada	Margaret	Manley	Centre for Global Child Health, Hospital for Sick Children	Senior Manager
Canada	Sumit	Gupta	Hospital for Sick Children	Pediatric Onco-hematologist
Canada	Avram	Denburg	Hospital for Sick Children	Pediatric Onco-hematologist
Participants				
Barbados	Elisa	Prieto	PAHO/WHO	NCD and Mental Health Advisor
Barbados	Patrice	Lawrence	PAHO	Advisor
Barbados	Cheryl	Alexis	Queen Elizabeth Hospital	Consultant
Bahamas	Corrine	Sin Quee-Brown	Princess Margaret Hospital	Paediatric HAEM ONCO
Belize	Jorge	Polanco	PAHO/WHO	Specialist, NCD and Family Health
Belize	Ramon	Yacab	KHMHA	Medical Oncologist

Belize	Edwin Vicente	Bolastig	PAHO/WHO	HSS Advisor
Guyana	Latoya	Gooding	Giving Hope Foundation	Medical Director
Guyana	Martin	Campbell	Ministry of Health	Technical Officer – Cancers
Guyana	Lachmie	Lall	Ministry of Health Chronic Diseases Unit	Coordinator
Guyana	Daniel	Albrecht	PAHO/WHO	Advisor
Guyana	Donnickher	Glasgow	Ministry of Health	Registered Nurse
Guyana	Karen	Roberts	PAHO/WHO	Specialist, NCDs and Family Health
Jamaica	Sharon	McLean-Salmon	Bustamante Hospital for Children	Paediatrician Haematologist Oncologist
Jamaica	Tamu	Davidson	Caribbean Public Health Agency	Head Chronic Disease and Injury
Jamaica	Michelle	Harris	PAHO	Advisor, NCDs and Mental Health
Jamaica	Michelle	Reece Mills	University Hospital of the West Indies	Doctor
Jamaica	Carol	Lord	Ministry of Health and Wellness	Programme Development Officer
Saint Lucia	Owen	Gabriel	OKEU	Physician
Saint Vincent and the Grenadines	Shari-Ann	Davis-Andrews	MCMH	Pediatrician
Suriname	Aartie	Toekoen	Hospital	Pediatrician
Suriname	Els	Dams	Ministry of Health	Medical Oncologist
Trinidad and Tobago	Sarah	Crooks	Caribbean Public Health Agency (CARPHA)	Programme Coordinator, IARC Caribbean Cancer Registry Hub
Trinidad and Tobago	Heather	Armstrong	CARPHA	Senior Technical Officer
Trinidad and Tobago	Marisa	Nimrod-Dyer	Caribbean Association for Oncology and Hematology	Chief Executive Officer
Trinidad and Tobago	Chevaughn	Joseph	The Just Because Foundation	President/Founder
Trinidad and Tobago	Taraleen	Malcolm	PAHO/WHO	NCD Advisor
Trinidad and Tobago	Curt	Bodkyn	The UWI	Paediatric Oncologist

United States	Tara	Rowe	PAHO	Administrative Assistant
United States	Sonia	Ortiz	PAHO	Administrative Assistant
United States	Gilka	Tellez	PAHO	Administrative Assistant
United States	Alejandra	Gonzalez Ruiz	St. Jude	Program Coordinator, Health Systems Unit, WHO Collaborating Centre for Childhood Cancer
United States	Jemi	Atunlese	St. Jude	Project Coordinator
United States	Jhon	Spencer	St. Jude	Research Data Specialist
United States	Keva	Thompson	PAHO/WHO	NCD Advisor

Annex 1. Countries Participating in the Caribbean Subregional Meeting on Childhood Cancer: CureAll Americas

Where are you joining us from today?

