



1st International Paediatric HIV/AIDS Symposium in Africa

Leaving no child with HIV behind: Efficiencies, innovation and stakeholder engagement in service delivery

Call for abstracts

All abstracts must focus on paediatric HIV (infants and children 0-15 years old), including the perinatal and in utero periods, studies on mother-baby pairs and HIV-exposed uninfected children. We encourage work that introduces new ideas, as well as analyses of both successes and failures. Authors are invited to submit abstracts focusing on solutions for the **implementation knowledge gap**. We particularly encourage abstracts focusing on lessons learned through country programmes, project or policy implementation or management.

Abstracts for IPHASA will be considered in one or more of the following topics:

- Topic A: Innovative HIV testing services for infants and children
- Topic B: Prevention of mother-to-child HIV transmission (PMTCT), including HIV-exposed and uninfected children
- Topic C: Paediatric HIV care, treatment, monitoring and psychological support
- Topic D: Optimizing care for children amid Covid-19 and other public health emergencies
- Topic E: Community engagement, primary healthcare, strengthening of health systems and improvement of quality

Please read the following guidelines carefully before submitting your abstract:

- Abstracts can be submitted only online via the platform. Submissions by fax, post or email will not be considered. The deadline to submit your abstract is **27 August 2021**.
- All abstracts must be written in English.
- It is the author's responsibility to submit an abstract with the correct wording. Any errors in spelling, grammar or scientific fact in the abstract text will be reproduced exactly as the author has typed it. Abstract titles will be subject to copyediting if the abstract is selected for presentation.
- Co-submissions of abstracts to IPHASA and ICASA are permitted.

Policies for submission

Copyright policy

Abstracts should not include libellous or defamatory content. Material presented in abstracts should not violate any copyright laws. If figures, graphics and/or images have been taken from sources not copyrighted by the author, it is the author's sole responsibility to secure the rights from the copyright holder in writing to reproduce those figures, graphics and/or images for both worldwide print and web publication. The author must bear all reproduction costs charged by the copyright holder.

Resubmission policy



An abstract that has been previously published or presented at a national, regional or international meeting can be submitted to IPHASA only if there are new methods, findings, updated information or other valid reasons for resubmitting.

If preliminary or partial data have been published or presented previously, the submitting author will be required to provide details of the publication or presentation, along with a justification of why the abstract merits consideration for IPHASA. The Symposium Committee will consider this information when making final decisions.

If the author neglects to provide these required details and justification, or if evidence of previous publication or presentation is found, the abstract will be rejected.

Plagiarism

The symposium organizers regard plagiarism as serious professional misconduct. All abstracts are screened for plagiarism and, when identified, the abstract and any other abstracts submitted by the same author are rejected. In addition, the submitting author's account and scholarship application, if one has been submitted, will be cancelled.

Ethical research declaration

The symposium supports only research that has been conducted according to the protocol approved by the institutional or local committee on ethics in human investigation. Where no such committee exists, the research should have been conducted in accordance with the principles of the [Declaration of Helsinki of the World Medical Association](#). The IPHASA Committee may enquire further into ethical aspects when evaluating abstracts.

Abstract submission process

Account

Authors must create an account to submit an abstract. More than one abstract can be submitted through an account. After an abstract has been created, modifications can be made until 27 August 2021.

Choosing a topic

The topic is the general heading under which the abstract will be reviewed and later published in the IPHASA materials, if accepted. The topic that best describes the subject of the abstract should be chosen by the author. During the submission process, you will be asked to select one topic for your abstract.

Abstract structure

IPHASA offers two options for abstract submission:

Option 1

This is suited for research conducted in all disciplines. Abstracts submitted under Option 1 should contain concise statements of:

- **Background:** Indicate the purpose and objective of the research, the hypothesis that was tested, or a description of the problem being analysed or evaluated.
- **Methods:** Describe the study period, setting and location, study design, study population, data collection and methods of analysis used.

- Results: Present as clearly and in as much detail as possible the findings and/or outcomes of the study. Please disaggregate data by age and gender where possible and summarize any specific results.
- Conclusions: Explain the significance of your study's findings and/or outcomes for HIV prevention, treatment, care and/or support and future implications of the results.

The following review criteria will be used in scoring abstracts submitted under Option 1:

1. Is there a clear background and justified objective?
2. Is the methodology and/or study design appropriate for the objectives?
3. Are the results important and clearly presented?
4. Are the conclusions supported by the results?
5. Is the study original and does it contribute to the field?

Option 2

This is suited for lessons learned through programme, project or policy implementation or management. Abstracts submitted under Option 2 should contain concise statements of:

- Background: Summarize the purpose, scope and objectives of the programme, project or policy.
- Description: Describe the programme, project or policy period, setting and location, the structure, key population (if applicable) and activities and interventions undertaken in support of the programme, project or policy.
- Lessons learned: Present as clearly and in as much detail as possible the findings and/or outcomes of the programme, project or policy. Include an analysis or evaluation of lessons learned and best practices. Please summarize any specific results that support your lessons learned and best practices.
- Conclusions/next steps: Explain the significance of the findings and/or outcomes of the programme, project or policy for HIV prevention, treatment, care and/or support and future implications of the results.

The following review criteria will apply to abstracts submitted under Option 2:

1. Is there a clear background and justified objective?
2. Is the programme, project or policy design and implementation appropriate for the objectives?
3. Are the lessons learned or best practices important, supported by the findings and clearly presented?
4. Are the conclusions/next steps supported by the results and are they feasible?
5. Is the work reported original and does it contribute to the field?

Disaggregated sex and other demographic data in abstracts

Authors are encouraged to provide a breakdown of data by sex and other demographics, such as age, geographic region, race/ethnicity and/or other relevant demographic characteristics in submitted abstracts, when appropriate. Your abstract should include the number and percentage of female and male (and additional breakdown by gender, age and/or ethnicity if appropriate) who participated in your research or project, and results should be disaggregated by sex/gender and other relevant demographics. Analyses of any gender-based differences or any other differences between sub-populations should be provided in the Results or Lessons learned sections, if relevant.

Font



A standard font, such as Arial, should be used when formatting the text. This helps prevent special characters from getting lost when copying the text to the online abstract submission form.

Word limits

The abstract body is limited to 350 words. Titles are limited to 30 words.

A maximum of two tables and/or graphs in total can be included. A graph/image (in JPG, GIF or PNG, ideally at least 600dpi) counts as 50 words and a table counts as five words per row (50 words maximum).

Common reasons for abstract rejection:

- Abstract poorly written
- Not enough new information
- Clear objective and/or hypothesis missing
- Linkage between different parts of the abstract not comprehensible
- Duplicate or overlap with another abstract
- Erroneous or unsupported conclusions

Reasons for abstract rejection (specific to Option 1):

- Methods (either quantitative or qualitative) inadequate and/or insufficient to support conclusions
- Summary of essential results inadequate and/or missing.

Reasons for abstract rejection (specific to Option 2):

- Description inadequate and/or insufficient to support conclusions
- Lessons learned inadequate and/or missing.

Recommendations

- If English is not your native language, have your abstract reviewed by a native English speaker before submission.

Submission confirmation

After submission of the abstract, a confirmation email will be sent to the abstract submitter. In order to receive confirmation, please ensure that emails from iphasa@iasociety.org are not marked as spam by your email provider.

Abstract review and selection process

Abstract review

All submitted abstracts will go through a blind peer-review process carried out by the IPHASA Committee. Each abstract will be reviewed by at least two reviewers.

Abstract selection

Abstracts can be selected for oral presentation and/or poster walk. We are pleased to offer free registration to the presenting authors with an accepted abstract.

Notification of acceptance or rejection to corresponding author

Notification of acceptance or rejection will be sent to the submitting (corresponding) author by September 2021. Please note that only the corresponding author will receive an email concerning the abstract; this author is responsible for informing all co-authors of the status of



the abstract. Authors whose abstracts have been accepted will receive instructions for the presentation of their abstract.

Publication of accepted abstracts

The submission of the abstracts constitutes the authors' consent for publication. If the abstract is accepted, the authors agree that their abstracts are published under the [Creative Commons Attribution 3.0 Unported \(CC BY 3.0\)](#) licence. The licence allows third parties to share the published work (copy, distribute, transmit) and to adapt it for any purposes, under the condition that IPHASA and authors are given credit and that in the event of reuse or distribution, the terms of this licence are made clear. Authors retain the copyright of their abstracts, with first publication rights granted to the IAS.

Accepted abstracts may, therefore, be published on IPHASA websites and publications, such as the IAS abstract archive and the *Journal of the International AIDS Society* (JIAS). Moreover, co-submissions of abstracts to IPHASA and ICASA are permitted under the conditions of strict compliance with the ICASA Embargo Policy.