# International Conference on Health and Hepatitis in Substance Users Abstract Guidelines

INHSU welcomes submissions of abstracts and workshop proposal for original contribution to the field in the following scientific themes.

We encourage submissions that:

- Highlight specific characteristics or sub-populations (e.g. gender, age)
- Are from low and middle-income country settings

Theme	Explanation
Epidemiology and Public Health Research	Abstracts will present research on the social, cultural,
	environmental, occupational, and economic factors
	that determine health for people who use drugs.
Clinical Research	Abstracts will present research that seeks to improve
	the prevention, diagnosis, and treatment of disease and
	injury in people who use drugs.
Social Science and Policy Research	Abstracts may include empirical or non-empirical
	(conceptual/theoretical) studies which focus on social,
	structural, cultural, material and policy contexts. They
	may include evaluations of policies, analysis of policy
	making processes, analysis of stakeholders to policy,
	and analysis of policy statements.
Models of Care and Programs	Abstracts will focus on real-world examples of
	innovative models of care, programs, or interventions
	to enhance health care delivery for people who use
	drugs.

# **Presentation and Workshop Types**

The highest ranked abstracts following peer review will be offered Oral presentations. Where possible, presentations with a similar theme will be grouped together.

Presentation Type	Time Allocation	Explanation
Research – Based Oral Presentations	10 minutes presentation and 5 minutes of question time OR Short Oral 3 minutes presentation and 2 minutes question time	Oral presentations on original research findings, case studies, completed projects and theoretical analysis. Presentations should be well structured, rigorous and demonstrate novel contribution to knowledge, to theory and/or practice.
Models of Care and programs – Oral Presentations	10 minutes presentation and 5 minutes of question time OR Short Oral 3 minutes presentation and 2 minutes question time	Oral presentations describing and analysing issues and solutions to problems in clinical practice, community engagement, education and health promotion. Presentations should be well structured, rigorous and demonstrate a novel contribution to knowledge and practice.
Workshop	90 minutes	Workshops are highly interactive and will be structured to enable discussion. They will address any of the conference themes.



		Innovative models for workshop design are encouraged. There are very limited workshop sessions available.
Discussion Space Sessions	45-60 mins	The discussion space provides a forum for interactive conversations on specific topics. If speaker talks are included, they are short and do not include PowerPoint presentations, the majority of time is allocated to dialogue, networking, debates, and idea sharing in an informal and yet structured space.  Sessions are limited to 20-30 people
Poster Presentations	Permanently displayed during the Conference	A poster viewing session will take place for delegates to discuss the posters with their authors.

# Keywords

The following keywords are to be used to assist with appropriate allocation of reviewers. Please select from the following:

- o Biomedical Sciences (e.g. laboratory-based)
- Biostatistics
- Cascades of care/linkage to care
- Clinical Sciences
- Community engagement
- Diagnostics and testing
- Drug policy
- Drug treatment
- Drug Use
- Education
- First nations / indigenous health
- Harm reduction
- Health Economics
- Health Services and Systems
- Hepatitis B
- Hepatitis C
- o HIV
- Law and human rights
- Lived and living experience
- Mobile outreach
- Modelling
- Nursing
- Other
- Prevention
- Primary care
- Prison / Correctional Health
- Reinfection
- Safe supply
- Tertiary care



# Selection Criteria

Abstracts will be favoured at review if they incorporate:

- Original data of high quality
- o An analysis that extends existing knowledge
- Showcase an innovative model of care / program / intervention

In balancing the program, the committee may require authors to present their work in an alternate format (e.g. as a poster or oral poster presentation rather than oral abstract presentation).

# **Epidemiology, Public Health and Clinical Research Abstracts**

All abstracts will be reviewed by three independent peer reviewers.

All abstracts will be provided a score out of 20 points based on the following criteria:

- Background and clarity of objectives of the study (1-5)
- Appropriateness of the study design and methodology (1-5)
- Appropriateness of the study results (1-5)
- Conclusions and significance of contribution (1-5)

# **Social Science and Policy Research Abstracts**

All abstracts will be reviewed by three independent peer reviewers.

All abstracts will be provided a score out of 20 points based on the following criteria:

- Background and clarity of objectives (1-5)
- Quality and appropriateness of approach (1-5)
- Quality of analysis or relevance to policy or practice (1-5)
- Conclusions and significance of contribution (1-5)

#### **Models of Care and Programs Abstracts**

All abstracts will be reviewed by three independent peer reviewers.

All abstracts will be provided a score out of 20 points based on the following criteria:

- Background and clarity of objectives of the model of care/program/intervention (1-5)
- Description of the model of care/program/intervention (1-5)
- Evidence of the effectiveness of the model of care/program /intervention (1-5)
- Conclusions and significance of contribution (1-5)

#### **Workshop Submissions**

All workshop proposals will be reviewed by three independent peer reviewers.

All workshop proposals will be provided a score out of 20 points based on the following criteria:

- Background and clarity of objectives of the workshop (1-5)
- Educational value of the workshop and applicability of content to the conference themes (1-5)
- Quality of the workshop structure, evidence of interactivity, innovative format, methods (1-5)
- Expertise and experience of proposed speakers/facilitators (1-5)

#### **Discussion Space Submissions**

All Discussion Space proposals will be provided a score out of 20 points based on the following criteria:

- Background and objectives of the discussion (1-5)
- How well suited the topic is to a discussion space environment, will it encourage debate and idea sharing?
- How well suited the topic is to a discussion space environment, will it promote dialogue and networking? (1-5)
- Expertise and experience of proposed speakers/facilitators (1-5)



# **Preparation Guidelines**

# Epidemiology, Public Health and Clinical Research-Based Abstracts

- Background: A description of problem or study rationale, study objectives, or hypothesis tested
- Methods: The method employed or approach taken
- Results: In summarized form, must include data but do not include a table. The results can also include one graph or figure.
- Conclusion: A brief description of the main outcomes of the study. Include knowledge or insight
  that conference attendees will gain from the presentation, explanation of how conference
  attendees can apply the skills and/or knowledge within their communities and how the study
  contributes to evidence-based knowledge

# Social Science and Policy Research-Based Abstracts

These abstracts may use the above headings, or the following (as appropriate):

- Background: description of the problem
- Approach: theoretical underpinnings and approach to analysis
- o Analysis: Main arguments, findings or outcomes
- Conclusion: Knowledge or insight that conference attendees will gain from the presentation, explanation of how conference attendees can apply the skills and/or knowledge within their communities and how the study contributes to evidence-based knowledge

# Models of Care and Programs Abstracts

- Background: A description of the problem or rationale for the development of the model of care/program, objectives of model of care/program / intervention
- Description of model of care/intervention: A description of how the model of care/program / intervention works and why it is innovative (e.g. setting, population, messaging, implementation)
- Effectiveness: Data to support why this model of care/program has been effective (for example, increased number of people tested for HCV, linked to care, treated, etc.). Must include data but do not include a table. The results can include one graph or figure.
- Conclusion and next steps: Description of main outcomes. Include knowledge or insight that
  conference attendees will gain from the presentation, explanation of how conference attendees
  can apply the skills and/or knowledge within their communities and how the presentation
  contributes to evidence-based knowledge.

#### Workshop Submission

- Background and aims: A description of why the workshop is needed and the key learning objectives for participants
- Description of workshop: An overview of the content to be covered and intended audience
- Methods and format: A description of how the workshop will be structured
- Number of delegates: Minimum number of people (excluding speakers) for workshop to be viable and maximum number of people (excluding speakers) before workshop becomes unworkable
- Speakers/facilitators: list names and short biography (60 words max for each)

# **Discussion Space Submission**

- o Description of session: What is the topic and why is discussion needed
- How will the session meet the following objectives:
  - a. Encourage debate and idea sharing
  - b. Promote dialogue and networking
- Facilitators: who will facilitate the discussion (include short biography (60 words max for each))



# **Submission Guidelines**

Abstract Preparation Guidelines for all Submission Types

There are five abstract templates available to be downloaded, please ensure you use the correct one depending on the type of presentation you are submitting:

- 1. Epidemiology, Public Health and Clinical Research Template
- 2. Social Science and Policy Research Template
- 3. Models of Care and Programs Abstract Template
- 4. Workshop Proposal Template
- 5. Discussion Space Proposal Template

#### All abstracts must:

- Use Calibri 11-point type only
- Use single line spacing only
- o Format Microsoft Word (.doc or .docx) file only
- Leave one line between paragraphs
- Specify all abbreviations in full at the first mention, followed by the abbreviation in parentheses, thereafter abbreviation only should be used
- Be written in English
- Checked thoroughly for spelling and grammar
- Not include references
- Maximum 300 words

#### All abstracts must include:

- 1. TITLE: in BOLD and UPPERCASE at the top of the abstract
- 2. Authors:
- Principal author to appear first
- Underline the name of the author who will be presenting the paper
- Use surname followed by initials (do not use full stops or commas between surname and initials)
- Omit degrees and titles
- Use superscript numbering after the author's name to indicate affiliations
- 3. A Disclosure of Interest Statement

The International Network on Health and Hepatitis in Substance Users (INHSU) recognise the considerable contribution that commercial partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.

Please include a disclosure of interest statement in your abstract for any contributions received relevant to this work. Please see the example below:

"Dr Smith has received funding from Metabolism Corp. No pharmaceutical grants were received in the development of this study."

**Note:** If accepted into the conference program, you will be requested to include a disclosure of interest slide at the start of your presentation (e.g. slide 2) or include such statements in your poster.



#### Online Abstract Submission

Abstracts must be submitted electronically through the online submission site. You can access the site via the conference website. You will be required to enter:

- Preferred presentation type
- Authors' and/or presenter names (indicate presenting author and contact details: address, telephone and email). Note: Abstract / workshop presenters will be required to fund their own attendance at the conference and should not submit an abstract / workshop submission if this is not possible. Scholarships are available however, authors should ensure they are able to fund their own travel if need be
- Authors' affiliations
- Abstract title
- o Abstract as a word document (maximum 300 words) plus a disclosure of interest statement
- Short biography of presenter (maximum 50 words). This information will be used by the session chair for introduction purposes and may be published in conference literature

Please contact the Conference Secretariat conference@inhsu.org or +61 2 8204 0770 if you are unable to lodge your abstract via the website or if you have any queries. We recommend using Firefox, Google Chrome or Safari as your browser to access the online submission site.

By submitting an abstract all authors agree to release the license to the Conference organisers and give permission to publish the abstract in the conference handbook, website, application, USB key etc. and in so doing certify that the abstract is original work.

Note: If your abstract does not conform to the guidelines, including if it is over 300 words in length, it will be returned to the submitting author to revise.

# **Awards**

INHSU Early Career Awards will be provided to the top-ranked postgraduate abstract in each theme (Epidemiology and Public Health Research, Clinical Research, Social Science and Policy Research, and Models of Care and Programs).

INHSU Community Award will be provided to the top-ranked abstract submitted by someone with lived/living experience of drug use and/or HCV and/or other infectious diseases.

