

IAS 2019 Track categories

Track D - Social, behavioural and implementation science

The track category is the heading under which your abstract will be reviewed and later published in the conference printed matters if accepted. During the submission process, you will be asked to select one track category for your abstract.

| Infrastructure and service delivery models for the scale up of HIV services | | |
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| D1 | Methodological challenges to scale up and optimization of services | |
| D2 | Impact evaluation of differentiated service delivery | |
| D3 | Provider and facility determinants of outcomes | |
| D4 | Methods to improve provider quality, supply and tailoring of services | |
| D5 | Healthcare workers and volunteers: training, mentoring, retaining, task shifting, safety | |
| D6 | Demand creation for HIV services | |
| D7 | Partnerships: Academic-community, public-private | |
| D8 | Community-led initiatives | |
| Strategies to increase uptake of and retention in HIV services | | |
| D9 | Feasibility and acceptability of emerging HIV prevention strategies | |
| D10 | Operational challenges in implementing HIV services | |
| D11 | Socio-economic challenges in implementing HIV services | |
| D12 | Uptake of HIV testing | |
| D13 | Update of HIV prevention | |
| D14 | Adherence to HIV treatment | |
| D15 | Retention in HIV services | |
| D16 | Linkage between HIV testing and prevention services | |
| D17 | Linkage between HIV testing and treatment services | |
| D18 | Indicators of quality of care | |
| D19 | Use of e-health/m-health | |
| Integration of HIV services with other programmes | | |
| D20 | Integration of HIV services with TB programmes | |
| D21 | Integration of HIV services with non-communicable disease programmes | |
| D22 | Integration of HIV services with sexual and reproductive health and rights programmes | |
| D23 | Integration of HIV services with other health programmes | |
| D24 | Integration of HIV services with other development programmes | |
| D25 | HIV services for migrant and mobile populations | |
| D26 | Integration of HIV and viral hepatitis services | |
| D27 | Integration of HIV services and opioid substitute therapy | |
| D28 | Integration of prevention interventions with care/treatment | |

| D29 | Cross-collaborations: governmental/non-governmental and local/regional/national | |
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| Diagnost | ics/HIV and common co-morbidities | |
| D30 | Feasibility and acceptability of emerging technologies | |
| D31 | Scale up of paediatric diagnosis | |
| D32 | Scale up of point-of-care technologies | |
| D33 | Scale up of viral load monitoring | |
| Sustainable financing and health economics | | |
| D34 | National financing initiatives and country ownership | |
| D35 | Transitional financing | |
| D36 | Impact of donor agencies' policies and international financing initiatives | |
| D37 | Impact of financial crises | |
| D38 | Leveraging HIV funding to strengthen health systems beyond HIV programmes | |
| D39 | Political economy of HIV | |
| D40 | Innovative financing mechanisms (e-financing, partnerships, etc.) | |
| Health systems strengthening | | |
| D41 | Changes in policy and practice | |
| D42 | Capacity-building initiatives | |
| D 40 | Translation, incorporation and use of key implementation research findings into | |
| D43 | programmes and practice | |
| D44 | Reduction of socio-structural barriers and stigma discrimination | |
| D45 | HIV services in the aftermath of humanitarian crises and natural disasters | |
| Monitori | ng and evaluation | |
| D46 | Monitoring and evaluation of prevention | |
| D47 | Monitoring and evaluation of testing | |
| D48 | Monitoring and evaluation of treatment and care | |
| D49 | Monitoring and evaluation of HIV cascade | |
| D50 | Monitoring and evaluation of health systems | |
| Social sc | ience theories, methods, and social production of knowledge | |
| D51 | Social and behavioural concepts and theories | |
| D52 | Strengthening social and behavioural data collection and analysis | |
| D53 | Mixed methods, integrated approaches and synergies in HIV research and intervention | |
| D54 | Qualitative and ethnographic methods in HIV research | |
| D55 | Knowledge translation and dissemination of research and programme outcomes | |
| D56 | Community engagement in research and research dissemination | |
| D57 | Role of social and behavioural science in biomedical responses | |
| D58 | Research data disaggregation by factors such as sex, age, race/ethnicity, sexual orientation, etc.) | |
| Living wit | th HIV | |

| D59 | Positive health, dignity, psychological well-being, and mental health |
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| D60 | Adaptation to living with HIV for individuals, families, and communities |
| D61 | Experiences and impacts of antiretroviral therapy |
| D62 | Growing up with HIV: specific needs and interventions for children and adolescents |
| D63 | Ageing with HIV: evolving and additional needs and responses |
| D64 | Prevention interventions and their effects on the lives and relationships of people living with HIV |
| D65 | Sexual and reproductive health, fertility, family planning, pregnancy, and abortion |
| D66 | HIV and the workplace: discrimination, unemployment, return to work, and rehabilitation |
| D67 | Living with HIV and co-infections and/or co-morbidities |
| D68 | Pain management and palliative care |
| D69 | HIV cure representations and perceptions |
| Social an | d structural drivers and contexts |
| D70 | Conceptualizing social and structural factors and their impacts |
| D71 | Socio-economic differences: poverty, wealth, and income inequalities |
| D72 | Dynamics of social status and power: sex, gender, age, race/ethnicity, sexual orientation, disability |
| D73 | Economic transitions and social and cultural changes affecting HIV and the HIV response |
| D74 | Intergenerational and/or transactional sex |
| D75 | Migration and HIV |
| D76 | Violence and conflict: political, social, structural, interpersonal, and family-based |
| D77 | Sexuality- and/or gender-based violence and exploitation, including in conflict settings |
| D78 | Prisons and other closed settings |
| D79 | Criminalization |
| D80 | Media, cultural and religious representations of HIV and of key populations |
| Key popu contexts | lations and other vulnerable populations: behavioural, social, and cultural issues and |
| D81 | Gay, bisexual, and other men who have sex with men |
| D82 | People who use drugs (including by injection) |
| D83 | Sex workers |
| D84 | Transgender people |
| D85 | Adolescent girls and young women |
| D86 | Migrants and displaced persons |
| D87 | People in prisons and jails |
| D88 | Other populations vulnerable in specific contexts |
| Behaviou | ral, social, and structural aspects and approaches |
| D89 | Awareness, information, and risk perception regarding HIV transmission and prevention |
| D90 | HIV services in healthcare settings |

| D91 | Promotion of abstinence, monogamy and/or sexual fidelity |
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| D92 | Sero-adaptive behaviours: preference, practice, and impact |
| D93 | Condoms and lubricants |
| D94 | Voluntary medical male circumcision |
| D95 | Antiretroviral therapy, including treatment as prevention |
| D96 | Pre-exposure prophylaxis |
| D97 | Post-exposure prophylaxis |
| D98 | Risk compensation: conceptualisation, assessment, and mitigation |
| D99 | Combination HIV prevention |
| D100 | School-based sexual education, life skills and gender equality education |
| D101 | Community-based approaches, including empowerment, outreach, and service delivery |
| D102 | Social, political, and legal advocacy |
| D103 | Community mobilization and demand creation |
| D104 | Couples- or family-centred approaches |
| D105 | Prevention of vertical transmission |
| D106 | Financial incentives, micro-finance, and other economic approaches |
| D107 | Safe housing, social protection and other care and support for people affected by HIV |
| D108 | Development and poverty alleviation |
| D109 | Interventions to reduce stigma and discrimination |
| D110 | Harm reduction |
| D111 | Traditional and complementary health care approaches |
| D112 | Access to appropriate healthcare services, including for co-infections and co- morbidities |