1ST INTERNATIONAL STEERING COMMITTEE MEETING

7th - 8th June 2018
SUMMARY

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AGENDA
1st International Steering Committee meeting

7th – 8th June, 2018 Kigali Convention Centre, Kigali, Rwanda

AGENDA

OBJECTIVES:
I. Finalize the Theme and objectives of the 20th edition of ICASA
II. Select an appropriate logo from the shortlisted logos.
III. Agree on the key dates and road map
IV. Review ICASA abstract titles and sub-titles
V. Identify best strategy for resource mobilization
VI. Ratify the communication strategy of the 20th edition of ICASA
VII. Propose ICASA 2019 draft plenary session topics and speakers

CHAIRS:
Prof. John Idoko, President of ICASA 2019 / Society for AIDS in Africa (SAA)
Dr. Diane Gashumba, Vice President of ICASA 2019 / Minister of Health (Rwanda)

<table>
<thead>
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<th>Activities</th>
<th>Discussion Lead</th>
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<tbody>
<tr>
<td>9:00</td>
<td>Registration of participants</td>
<td>Secretariat</td>
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<tr>
<td>9:15</td>
<td><strong>Opening Session</strong></td>
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<td>Welcoming address</td>
<td>Conference President &amp; Vice - President</td>
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<td>Opening remarks</td>
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<td>Introduction of participants</td>
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<td>Endorsement of the agenda</td>
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<td>9:35</td>
<td><strong>Session 1: Presentation of SAA/ICASA</strong></td>
<td>SAA SG</td>
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<td>Presentation of SAA and ICASA Management structure</td>
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<td>9:50</td>
<td><strong>Session 2: Presentation of proposed ICASA 2019 Thematics / objectives</strong></td>
<td>ICASA 2019 President</td>
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<td>Presentation of the various proposed thematic for final selection</td>
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<td>10:50</td>
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<td>11:05</td>
<td>Session 3: Presentation of ICASA 2019 proposed logo</td>
<td>ICASA 2019 Vice President</td>
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<td>Presentation of the shortlisted 10 best logos to the ISC for final selection</td>
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<td>11:45</td>
<td>Session 4: Presentation of ICASA 2019 Key date and road map</td>
<td>Head Of local Secretariat</td>
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<td>12:00</td>
<td>Lunch</td>
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<td>13:00</td>
<td>Session 5: Presentation of ICASA 2019 marketing plan</td>
<td>ICASA Director</td>
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<td>Presentation of the marketing plan and identification of best strategy for resource mobilization</td>
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<td>13:20</td>
<td>Session 6: Communication strategy</td>
<td>Head Local Secretariat</td>
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<td>Presentation of the proposed communication strategy for ICASA 2019</td>
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<td>13:35</td>
<td>Session 7: Presentation of the draft preliminary program</td>
<td>ICASA Director</td>
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<td>13:45</td>
<td>Break</td>
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<td>14:00</td>
<td>Session 8: ICASA 2019, Plenary session topics and proposition of speakers</td>
<td>Scientific Chair</td>
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<td>Group discussion and proposition of plenary topic &amp; speakers (Scientific, community and Leadership)</td>
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<td>15:00</td>
<td>Session 9: Presentation of various committee draft propositions</td>
<td>Chair &amp; Co-Chair</td>
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<td>The Scientific, community and leadership committee presentations &amp; recommendation</td>
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<tr>
<td>15:45</td>
<td>Review and wrap up of ISC meeting day one</td>
<td>ICASA 2019 President &amp; Vice –President</td>
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<tr>
<th>Time</th>
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<tr>
<td>9:00</td>
<td>Session 10: Review of Abstract title and sub-title</td>
<td>Scientific committee chairs</td>
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<td>Review of Abstract title and sub-titles</td>
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<td>10:00</td>
<td>Session 11: Review of upcoming milestones and meetings</td>
<td>ICASA Director</td>
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<td>10:15</td>
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<td>10:30</td>
<td><strong>Session 13: Evaluation of the ICASA 2019 1st steering Committee meeting</strong>&lt;br&gt;Evaluation form to be filled by participant</td>
<td>Secretariat</td>
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<tr>
<td>11:00</td>
<td><strong>Wrap up speech day 2 and end of the first ISC</strong></td>
<td>ICASA 2019 President &amp; Vice President</td>
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<tr>
<td>11:45</td>
<td>Press Conference on spot / Press release</td>
<td>High Table</td>
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<tr>
<td>12:15</td>
<td>Lunch</td>
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LOGISTIC MEMO
Logistics Memo: 1ST ISC meeting ICASA 2019

Date of meeting: 7th to 8th June, 2018

Arrival date: 6th June, 2018
Departure date: 9th June, 2018
City: Kigali, Rwanda
Venue: Kigali Serena Hotel
Contact focal person: PAMELA RUYUKI
Email: PRuyuki@serena.co.rw
Tel: +250 788 184 500

Dear Steering Committee Member,

We are pleased to welcoming you in Kigali the Host Country of the 20th International Conference on AIDS and STIs in Africa, ICASA 2019. Kigali, Rwanda has been selected as the venue for this prestigious conference that we are sure will be a success with your support to foster the end of HIV/AIDS in Africa. The conference has negotiated a good rate for accommodation at Kigali Serena Hotel.

Directions: from Kigali International Airport to Kigali Serena Hotel

![Map showing directions from Kigali International Airport to Kigali Serena Hotel]
TRANSPORTATION & VISA

Transportation
Transportation from Airport to Kigali Serena Hotel has been secured by the organizers with the hotel shuttle if we receive your itinerary on time, at least 30 May, 2018.

Visa

Focal Person to facilitate visa at the point of entry: Dr. Sabin Nsanzimana Email: sabin.nszanzimana@rbc.gov.rw, Tel: +250 78 875 2475/ +250 78 8418 569

HOTEL ACCOMMODATION & MEALS

Standard rooms have been negotiated at Kigali Serena Hotel at the unique rate of 130 USD, bed and breakfast.

WEATHER AND TEMPERATURE
Logistics Memo

We look forward to welcome you in Kigali.

Have a safe trip.

Luc Armand Bodea
ICASA 2019 Director
Coordinator
Permanent Secretariat
Society for AIDS in Africa (SAA)
ICASA Organizer
Accra- Ghana
Office Direct: (+233)(0)302913739
Email: lucbodea@icasa2019rwanda.org
Website: www.icasa2019rwanda.org
20th ICASA RWANDA
Date: 2nd -7th December 2019
ICASA 2019 CHARTER
Charter of the 20th International Conference on AIDS and STIs in Africa
(ICASA 2019)

Introduction

The purpose of this charter is to set out the governance, programmatic and organizational structure of the conference, as well as to identify the rights and obligations of the institutional partners, the local partner, the Ministry of Health of Rwanda and the Society for AIDS in Africa (SAA).

Definitions

ICASA 2019

The 20th International Conference on AIDS and STIs in Africa (ICASA 2019) is jointly organized by the SAA and the Ministry of Health representing the government.

The 20th International Conference on AIDS and STIs in Africa in this document will be referred to as “ICASA 2019” or “the Conference” when talking about the conference in general.

Society for AIDS in Africa

The (SAA) is the custodian\(^1\) and organizer of the International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA).

The SAA in partnership with the Ministry of Health has overall responsibility for the management of the conference, including managing and safeguarding the conference’s financial resources and reserves. The SAA will be responsible for monitoring and evaluation of the conference and its impact on the epidemic.

Local Partner: THE MINISTRY OF HEALTH

SAA has selected Rwanda as Host Country, with Kigali as the venue for the 20th International Conference on AIDS and STIs in Africa 2019. The decision was made on the basis of interest expressed by the government, academia, as well as institutions to host the conference. The host country has also met the specifications following SAA call for applications.

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\(^1\) ‘Custodian’ refers to an individual or entity responsible for safeguarding an asset, in this case the Society for AIDS in Africa.
In designating the Host Country as Local Partner, the SAA reserves the right to end the contract with the Ministry of Health should any significant developments occur in relation to the selection criteria\(^2\).

Appointment of Rwanda as Host Country of ICASA 2019 is only ratified by the signature of this hosting agreement between the SAA and the local partner, the Ministry of Health.

**The Institutional Partners**

The institutional partners are organizations or institutions that help shape the vision and content of the conference; they also have the institutional memory of ICASA conference, namely:

- SA FAIDS
- AfriCASO
- SWAA
- NAP+
- One international organization representative of people leaving with HIV and AIDS from another continent and nominated by SAA
- UNAIDS Secretariat, chair of the UNAIDS co-sponsoring organizations
- WHO
- International AIDS Society (IAS)

Where appropriate and cost effective, the SAA secretariat will identify tasks and activities for the institutional partners to implement. These activities will be undertaken in accordance with contracts entered into between the conference and the respective institutional partners. These activities could include, but are not limited to:

- communications, marketing and outreach;
- Fundraising;
- abstract activity or workshop proposal submission assistance;
- programme development

**Relation to and the role of the Conference Secretariat**

The secretariat is made of the international secretariat of the conference at Ghana, SAA head office and of the local secretariat at Kigali. Both secretariats staff will compose the conference secretariat staff. The Conference Secretariat staff will ensure on-going management, coordination and support for the conference committees and for the implementation of the program activities under the supervision of the conference director.

\(^2\) See nomination criteria of ICASA host country in the annex.
The staff will advise and make recommendations pertaining to:
- Program activity objectives;
- Potential programming ideas and initiatives;
- Review and selection criteria for nominations, submissions and applications;
- Budget guidelines.
- Communications and outreach program.
- Conference tours operators program.

The conference secretariat staff will also:
- Screen program activity applications and execute the approved selection process;
- Prepare for working group meetings by creating meeting agendas and related documentation and all logistical arrangements;
- Act as liaison between the conference committees, scientists, leadership and community.

**Secretariat Staff**

- **International Secretariat (Accra)**
The following key positions in ICASA 2019 international secretariat will be filled by the SAA Secretariat: conference director, registration coordinator, two registration assistants, exhibition and marketing plan manager, marketing and satellite officer, conference program manager, two programme officers, Onsite Logistics and Volunteers Manager, project accountant, accounts officer, Onsite accounts officer, scholarship coordinator, communication manager, website manager, logistics officer, IT manager with two support staff, social media officer.

- **Local Secretariat (Kigali)**
The following key positions will be filled by the local secretariat: local secretariat coordinator, logistics Officer, marketing and sponsor officer, scientific and leadership program coordinator, communication officer, community program coordinator, project accounts officer, Accommodation and transport officer, 2 administrative assistants, IT officer, scholarship officer plus 2 support staff.

**Conference Governance Structure and Program Building**

An integrated governance structure exists. One relates to the operational aspects of the conference i.e. matters pertaining to the financial obligations that the SAA undertakes in conjunction with the local partner and the other relates to the content of the conference event managements.
The SAA and the ICASA 2019 Coordinating Committee (ICC) are responsible for the budget and financial decisions, with input from the International Steering Committee (ISC).

**ICASA 2019 Coordinating Committee (ICC)**

**Membership**
The ICASA 2019 Coordinating Committee will consist of representation from the two parties, namely the SAA and the Ministry of Health tasked with ensuring the operational success of the conference. The purpose of the ICASA 2019 Coordinating Committee is to ensure the creation of a financial, political, programmatic and logistical appropriate conditions in which the conference can take place. The Committee will strive to achieve consensus. (See notes below on course of action when consensus not achieved)

Total membership of this committee will be (6), with 3 members nominated by the SAA; two nominated by the Local Partner, and the resident representative of UNAIDS or WHO.

**Responsibilities**
- The Conference budget will be developed jointly by the Local Partner, the MH and SAA secretariat in consultation with the ICASA 2019 Coordinating Committee (ICC), the International Steering Committee (ISC) and approved by the SAA Executive Council.
- The ICASA 2019 Coordinating Committee will review the Conference Budget and the financial planning of the Conference and state of preparedness for the conference at each meeting.
- To resolve any ad-hoc problem related to hosting the Conference in the designated country

**Notes**
- SAA President or a person designated by the SAA Executive Council will chair this committee and the local vice-chair of the conference will be the committee co-chair.
- Where consensus is worked for but not achieved, decisions may be taken by majority vote. With the exception of:
  - Situations where the chair representing the SAA disagrees with the majority of the Committee regarding issues that have serious financial implications on the Conference budget; the action in question may be placed on hold until the Executive Council of SAA makes a decision.
  - In exceptional circumstances, when it is necessary to fulfill financial responsibilities, both (Chair and Co-Chair) in agreement with each other may
make a decision and take action prior to a final decision by the SAA Executive Council. Information will be provided on such action as soon as possible to the ICASA 2019 Coordinating Committee and SAA Executive Council.

- Where the Committee is split in half on an issue with serious implications, and affecting the solidarity and team spirit of the committee, the action in question may be placed on hold and the two parties may have recourse to present to the Executive Council of the SAA for their decision.
- The Committee will strive to keep such referrals to the SAA Executive Council to a minimum and all parties will work to resolve issues within reasonable time limits.

**ICASA 2019 International Steering Committee (ISC)**

SAA has operated the ISC system in the organization of previous ICASAs and will continue to encourage its usage to ensure openness and inclusiveness in the organizing of ICASA.

**Membership**

- Membership of the ISC will be pegged to a maximum of 30.
- Membership will be reviewed from time to time and change if possible—especially to ensure commitment and relevance.
- International membership will be selected either based on institutional, regional or individual considerations.

**Composition**

1. SAA : President, Secretary General, Treasurer, SAA Coordinator and 2 board members and 2 ex-officio (8 representatives)
2. Chair and co-chairs of the ICASA 2019 three program committees (six representatives)
3. Local Partners (Cote d'Ivoire) including national and/or regional AIDS research organizations/institutions, national and/or regional community AIDS organizations, and national and/or local leadership, including government leadership (six representatives).
4. The Co-Chair of the conference
5. One representative of the Ministry of Health of the host country or the Chair of the National AIDS Control Program – of the host country.
6. One NAP+ representative
7. One SWAA representative
8. One AfriCASO representative
9. One African Youth Network Representative
10. One representative of SAfAIDS
11. Two persons representing neighboring country National AIDS Control Programs nominated by SAA
12. Three persons representing the UN-Team Group. (UNAIDS, WHO and UNICEF, etc.)
13. One representative from the International AIDS Society (IAS)
14. One representative from PEPFAR
15. One representative from the Francophonie Secretariat
16. One representative from ANRS (Agence de recherche sur le SIDA)

It is the responsibility of the ICASA 2019 Chair and Co-chair to invite the ISC members for meetings.

It is expected that the conference budget will cover the costs of the statutory members listed above under 1, 6, 7, 8, 9, and 10 to attend the ISC meetings and ICASA.

- The ISC should meet a maximum of three times before the ICASA 2019 takes place.
- Members should be given at least 2 months’ notice before each meeting.
- ISC meetings will be chaired by ICASA 2019 President and the Local Co-chair.

Responsibilities

- To determine the vision and content of the conference.
- To review progress towards achievement of such objectives.
- To provide input into the conference budget.
- To approve any project proposed by the Local Host that will be linked to the conference objectives, but funded through sources other than the conference budget.
- To determine the theme of the conference.
- To help promote the conference.
- To select and approve plenary and other speakers.
- To approve Local Partner nominations.
- To approve the format and content of the opening and closing ceremonies.
- To approve security plans.
- To determine the international scholarship program criteria.
- Nominate 6 members (chairs and co-chairs of programme committees) to form the scholarship review committee.\(^3\)
- Decide on the skill building and professional development sessions.
- To review the outcome of the conference.
- Review and approve the final distribution of the conference sessions.

Decisions of the International Steering Committee will be by consensus or, should no consensus be reached, by majority vote. Decisions that have financial implications will have to be remitted to the ICASA 2019 Coordinating Committee for a final decision.

**Conference chair and co-chair**

The SAA President is the Chair of ICASA 2019 conference and the ISC. The Local Partner will appoint a Local Co-chair. The Local Co-Chair will be a senior HIV researcher/health professional or government nominee. These two people will jointly chair the ISC. The conference chair and co-chair can also act as the international and local spokespersons for the conference.

**Governance of the conference program**

Governance of the conference program, vision, format and content are through a system of representative committees that involve various interested parties. Pivotal to this governance system are SAA, the institutional partners, the local partner and the various conference chairpersons and representatives of major stakeholders.

Where possible the composition of all committees will reflect the African nature of the conference. In composing the committees attention will be given to ensuring adequate representation according to gender, region and representation of people living with AIDS (GIPA)\(^4\).

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\(^3\) The Scholarship Review Committee is responsible for ensuring the overarching scholarship criteria are being met and review general delegate scholarship applications.

\(^4\) GIPA principle is the principle of greater involvement of people living with and affected by HIV /AIDS, Paris Summit 1994.
ISC members cannot be plenary, special session or non-abstract session speakers or chairs unless compelling reasons are presented and agreed upon by the ISC as a whole. Program Committee members cannot be non-abstract driven session speakers or chairs unless compelling reasons are presented and agreed upon by the ISC as a whole.

Scientific Program Committee (SPC)

Chair and co-chair

- Local Scientific Co-chair (nominated by the Local Partner)
- International Scientific chair (nominated by SAA while respecting bilingual balance)

Members

- Chair and co-chair of track committee
- Community Program chair
- Leadership Program chair

Responsibilities

- To provide input on the scientific content of the conference and to finalize the scientific part of the unified program.
- Unless altered by the ISC, there will be five tracks:
  - A = Basic science (Biology & pathogenesis)
  - B = Science, treatment and clinical care
  - C = Epidemiology and prevention
  - D = Law, Human Rights, Social Science and Political Science
  - E = Health Systems, Economics and Implementation Science
- To develop criteria for abstract selection
- To identify the themes and structure of unified program sessions
- To identify keynote speakers
- To delegate activities to track committees
• To Participate in the Joint Program Committee and the Marathon meeting
• To Identify abstract reviewers, including the late breakers
• Name rapporteurs per track
• Draft the vision of the Scientific Program and the scope of the scientific tracks for the conference program.
• Propose other Scientific Program activities for ISC approval and participate in the implementation of the approved activities in collaboration with the conference secretariat
• To select the scholarship applicants contributing to the Scientific program

Note: Total membership of SPC 14.

Abstract driven program Track Committees

Members

There will be five track committees. Each track committee will comprise one chair; one co-chair and six members.

• The Co-chair nominated by the Local Partner and the chair nominated by SAA (outside the host country, called international chair).
• The six members: three from the host country nominated by the local co-chair and three international members nominated by SAA.

Total number of persons per track committee = 8

Responsibilities

• To develop the track program based on abstracts received
• Participate in the Marathon Meeting
• Nominate Abstract reviewers

Marathon Meeting

The Marathon Meeting is the forum where the scientific abstract driven program will be finalized as well as the conference program. The Marathon Meeting will take place after the Abstracts submission and the review process has been finalized. Other or mini-Marathon activities may be required to finalize all components of the conference program. The ICASA 2019 Scientific Program Committee will develop a timeline for these meetings in consultation with the ISC.
Community Program Committee (CPC)

Chairpersons

- Local Co-Chair (nominated by the local partner)
- International chair (nominated by SAA)

Members

- Representatives of the Local Partner (1)
- Representative of AfriCASO
- Representative of SWAA
- Representative of NAP+
- Representative of Youth Network
- Representative of SAfAIDS
- One representative of the SPC
- One representative of the LPC
- One representative nominated by UNAIDS
- One representative of SAA
- Representative of local NGO (2)

Responsibilities

- To decide on the theme, content and focus of the Community Program.
- To review the program implementation of the community symposia and orientation session, forum and skills building program.
- To approve the community outreach aspects of the conference program.
- To select the NGO exhibitors.
- To identify the themes and structure of unified program sessions.
- To identify keynote speakers.
- To select the scholarship applicants contributing to the community village program.
- Organize community village

Note: Total membership 14
Leadership Program Committee (LPC)

Chairpersons

- Local Co-chair (nominated by the local partner)
- International chair (nominated by SAA)

Members

- Representatives of UNAIDS/UN System (2 members)
- One representative of African Union
- One representative of a National AIDS Control Program
- One representative of Youth Network (Nominated by SAA)
- Women, PLHIV, Parliament/Politics, Faiths, NGOs, Advocates / Activists, Media (3 nominated by SAA in consultation with respective stakeholders)
- Local Partner (1 member)
- One of the CPC chair
- One of the SPC chair
- One representative of Minister of health
- One representative of the area regional integration organizations

Responsibilities

- To decide on the theme, content and focus of the Leadership Program.
- To review the program implementation of the Leadership symposia and skills building program.
- To approve the leadership outreach aspects of the conference program.
- To identify the themes and structure of unified program sessions.
- To identify keynote speakers.
- To select the scholarship applicants (Workshop facilitators)

Note: Total membership for the LPC 14
**Principles for remunerating committee members, invited speakers, chairs and moderators**

Committee members, speakers, chairs and moderators are not paid for their work. Support for travel, accommodation, and per diems are paid to all committee members, except those working for UN agencies, to attend all meetings related to the planning of the conference.

Committee members, speakers, chairs and moderators do not automatically receive conference registration or travel or other support to attend the conference. Members of committees, speakers, etc. are encouraged in the first instance to seek funding elsewhere.

**Members of ISC and PCs (not track committees)**

Committee members will receive registration fee waivers for the conference on request. Committee members are asked to request this support on an individual basis to the conference secretariat.

**Invited speakers, chairs and moderators**

Plenary speakers are automatically offered full support for travel, according to the SAA Travel Policy (lowest economy fare), accommodation and conference registration.

Invited speakers (those that are not abstract/proposal/workshop submitters) are not automatically offered financial support to attend the conference.

When a speaker receives notification that he/she has been nominated or proposed as a speaker, the word “invited” will be used carefully to avoid any assumptions on the speakers’ part that there would be support.

Requests for support are considered on an individual basis. Priority is given to speakers from developing countries, basic scientists, and individuals working or volunteering for grassroots community organizations.

The Program Manager will put together a process to review the requests that come in and award them based on need and merit.

Session chairpersons are not provided with any financial support.

The conference program department will also work closely with the conference scholarship department to ensure an integrated response to requests for funding.

Abstract, workshop and proposal submitters are prioritized in the scholarship award process but otherwise do not receive support.
**Tentative Meeting schedule**

A critical path for Committee meetings and work will be developed by those responsible for each Committee with the coordination and support of the Conference Secretariat staff. The main activities and meetings are in relation to the work of the:

- ICASA 2019 Coordinating Committee (ICC)
- International Steering Committee (ISC)
- Scientific Program Committee (SPC)
- Community Program Committee (CPC)
- Leadership Program Committee (LPC)
TERMS OF REFERENCE OF THE INTERNATIONAL STEERING COMMITTEE (ISC)

Preamble: The SAA adopted the ISC system in the organization of the previous ICASA and will continue to encourage this system in order to guarantee openness and inclusion from all. The International Steering Committee is chaired by the President of the Conference:

Prof. John Idoko, President/President of the Society for AIDS in Africa (SAA)

Dr. Diane Gashumba, Vice-President /Minister of Health of Rwanda,

1. OBJECTIVE

The objective of the International Steering Committee is to provide planning and policy for the success of ICASA 2019 in the quest to mitigate the impact of HIV/AIDS, Tb, Hepatitis and emerging diseases in our continent.

The committee consists of the president, co-president and members

2. INTERNATIONAL STEERING COMMITTEE MEMBER

Being a member of ISC is an honorable and voluntary role. Travel and related costs of international experts are covered by the conference budget based on the availability of funds except for members affiliated to sponsoring institutions who have previously agreed to cover the costs and the agencies of the United Nations or regional. The members of the previous committee found that the participation can be demanding at times and can require extra time outside of scheduled meetings (about 2-5 hours per month). The co-chairs should expect a higher commitment on their part in terms of time. In addition to the scheduled meetings, there will be frequent communication by email and conference call.

Responsibilities

- Determine the vision and content of the conference.
- Review progress towards achieving the objectives.
- Provide input to the conference budget.
- Approve any project proposed by the local host in line with the objectives of the conference, but which will be financed with resources other than the budget of the conference.
- Define the theme of the conference.
- Promote conference
- Select and approve the speakers in plenary sessions and other speakers.
- Approve the appointments of the local organizer
• Approve the format and content of the opening and closing ceremonies.
• Approving safety plans.
• Define the international criteria for scholarships program
• The 6 members (chairmen and vice president of program committees) to form the Review Committee for scholarships
• Choose the session’s capacity building and professional development.
• Review the content of the conference.
• Review and approve the final distribution of the conference sessions

The International Steering Committee decisions will be made by consensus or, if not consensus, by a majority of votes. The decisions with financial implications must be referred to ICASA 2019 Coordination Committee for approval.

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1 The review scholarship committee is responsible for ensuring that the basic criteria of ICASA grants are completed and examines grant applications for general delegates.

Task: Working with the secretariat to review the general delegate scholarship applications whose scores are high to ensure that the selection process does not depend entirely on an automated system.
TERMS OF REFERENCE

SCIENTIFIC

PROGRAMME COMMITTEE
Scientific Programme Committee (SPC) Guide

Overall Responsibilities and Terms of Reference

ICASA 2019 Programme Key Dates and Meetings

June 7th to June 8th, 2018
1st ISC meeting

February 1st and July 3rd 2019
Abstract submission opens
Scholarship applications open

March 28th to March 29th 2019
2nd ISC Meeting

30th July, 2019
Abstract and Scholarship deadline

August 21st to August 23rd 2019
Marathon meeting

Overview of the Scientific Programme Committee

The SPC is led by a chair and co-chair:
The members of the SPC are the co-chairs of the five track committees as follows:

- Track A = Basic Science (Biology & Pathogenesis)
- Track B = Clinical Science, treatment and care
- Track C = Epidemiology and prevention science
- Track D = Law, Human Rights, Social Science and Political Science
- Track E = Health Systems, Economics and Implementation Science

In addition, one co-chair from the Community Programme Committee and one co-chair from the Leadership Programme Committee may sit on the committee when needed.

The overall responsibilities of the SPC include:

- Delegate activities to track committees
- Provide input on the scientific content of the Conference
- Approve format and guidelines for abstract submissions
- Develop criteria for abstract selection
- Identify abstract reviewers
- Identify and propose keynote speakers
- Identify topics, speakers and moderators for non-abstract driven sessions
- Identify topics and facilitators for skills building workshops
Serve as non-abstract driven sessions and skills building workshop focal points

In addition to the chair and co-chair, each of the five Track Committees has a minimum of six members, nominated by SAA and Ministry of Health Rwanda. The five track committees are responsible for developing the respective track programmes built on selected abstracts but may include chairpersons, moderators and discussants. Responsibilities:

- Define track categories
- Nominate reviewers
- Nominate chairs, moderators and discussants for abstract sessions
- Serve as abstract sessions focal point

Expected Outcomes between 1st and 2nd ISC meeting (MARCH 2019)

1. Understand ICASA 2019 conference structure and review documents
   - Conference charter
   - ICASA Committees and Secretariat lists
   - Committee Briefing Document
   - Source of the Conference Programme

2. Draft the Scientific Programme Vision

THEME: TO BE DETERMINED

3. Define the five tracks' abstract categories

   The list of abstract categories from ICASA 2017 will be shared (see point 7 below), for ease of reference.

4. Define topics of the non-abstract-driven sessions

5. Propose topics and speakers for plenary sessions

6. Begin thinking about possible keynote speakers, session and workshop topics

Resources

- ICASA 2017 Program/IAS 2016 Abstract Program
• ICASA governance chart

Expected Outcomes at the 2nd ISC Meeting (MARCH 2019)

1. Review of timeline and key dates
2. Confirmation of the Scientific Programme Committee and Vision
3. Confirmation of the abstract categories per track and the non-abstract driven sessions

4. SPC outreach strategy to medical leaders, research institutions, universities and potential participants
   a. Identify issues and opportunities
   b. Select target audiences-Who, Why, How to reach?
   c. Implementation plan

5. Input into development of (including identification of speakers):
   
   Plenary Sessions: (6): The daily plenary sessions feature some of the world’s most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first session of every morning; there are no other competing sessions at this time. These sessions are the responsibility of the ISC. Programme Committee Chair and Co-chairs will be able to give suggestions before the meeting.

   Opening and Closing Sessions: These sessions will be the first and last official sessions of the conference. Ceremonial in nature, these sessions will set the tone and focus of the meeting and the subsequent road ahead.

   Special Sessions: (S): Feature presentations by some of the world’s key research leaders, high level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

Expected Work between 2nd ISC and Marathon Meeting* (August 2019)

* Three-day meeting when all abstract-driven sessions are finalized and scheduled into the programme.
1. **Defining the criteria of abstract selection** so that abstract reviewers can have a reference document and do their work in a harmonized way

2. **Appoint abstract reviewers**

3. **Review abstracts**

4. **SPC non-abstract driven session development (10)**
   The SPC is responsible for developing 10 non-abstract driven sessions (roughly 2 per track) on wide-ranging themes. Following a formal introduction by a moderator or 2 co-chairpersons, four or five designated speakers will introduce a specific theme or share their own experiences with the issue. A general debate will then be open to debate by participants. The work expected between February and the Marathon Meeting is assigning session development responsibility to committee members who should in turn gather information from constituencies on topics, identify speakers and develop session outlines. All sessions should be completed (with clear topic, title, description, speakers, chairs and back-ups) so speakers can be invited and confirmed prior to the Marathon Meeting.

5. **SPC workshop development (6):**
   The conference offers high-quality, targeted workshops that promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. Workshops provide a platform to learn innovative skills, critical for an effective response to the HIV epidemic, for various stakeholders.

6. **Implementation of the SPC outreach strategy**
   All committee members are responsible for supporting awareness raising efforts about the conference, encouraging partners and constituency members to attend. The SPC in particular is best placed to engage leaders in cutting-edge research across disciplines. The quality of the abstract component of the programme is often directly linked to the amount of outreach and networking that a SPC has done.

**Expected Work between Marathon Meeting and the Conference**

1. **Finalize the scientific programme**: abstract sessions, non-abstract sessions, workshops

2. **Final phases on session development**
   With support of the conference secretariat, coordinate communication between scientific session moderators, chairpersons and speakers and backups. Review talking points and slides where used to ensure session cohesion. Find replacement speakers and chairs, if necessary.
3. Name a Lead Rapporteur for each track
A Lead Rapporteur would oversee the Rapporteur Team for each track to ensure all scientific sessions were attended and key decisions and conclusions were documented.

These session summaries are posted on the conference website and form the basis of the Lead Rapporteur's "Daily Summary" for each full day of the conference. During the Closing Session, the Lead Rapporteurs will present the highlights from their sessions to all delegates. Because of their intimate involvement with the development of the programme, committee members are ideal for such a role, if available.

Additional Information

ICASA Scientific Programme Committee (SPC) Terms of Reference

Committee Chair, co-chair and members

1. PURPOSE

The purpose of the committee is to provide overall planning and guidance for the development of the Scientific Programme at the 20<sup>th</sup> ICASA on the 2<sup>nd</sup> December 2019 to 7<sup>th</sup> December 2019 in Kigali, Rwanda.

The committee is comprised of chair, co-chair and committee members.

2. RESPONSIBILITIES

Being a member of SPC is an honorable and voluntary role. Travel and related costs of international experts are covered by the conference budget based on the availability of funds except for members affiliated to sponsoring institutions who have previously agreed to cover the costs and the agencies of the United Nations or regional. The members of the previous committee found that the participation can be demanding at times and can require extra time outside of scheduled meetings (about 2-5 hours per week). The co-chairs should expect a higher commitment on their part in terms of time. In addition to the scheduled meetings, there will be frequent communication by email and conference call.
Committee Chair and Co-Chair

- Preside over the SPC meetings
- Represent their programme committee on the International Steering Committee (ISC) and report on their progress and initiatives
- Draft the vision for the Scientific Programme at 20th ICASA 2019
- Be spokespersons for the Scientific Programme in collaboration with the Conference Secretariat communications team
- Identify and propose topics and speakers to the ISC for plenary and special sessions
- Liaise with the CPC and LPC chair, co-chairs and participate in chair and co-chair meetings

All Members

- Represent the views of the track committees and constituency stakeholders, in particular research and academia
- Disseminate conference information to networks, helping in outreach and advocate for the conference
- Develop up to 10 SPC NADS and 8 professional development workshops
- Name a Lead Rapporteur per track
- Participate in Monitoring and Evaluation
- Assist with resource identification and recommendations
- Prepare for meetings by reviewing meeting agendas and related documentation
- Delegate activities to track committees
- Approve format and guidelines for abstract submissions
- Develop criteria for abstract selection
- Identify abstract reviewers
- Serve as non-abstract driven sessions and skills building workshop focal points

3. COMPOSITION OF COMMITTEE

SPC (n=12) Governance:
2 x Chair and Co-Chair (one nominated by SAA, one by local partners)
6 x Local Members (nominated by local partners)
5 x International Members (nominated by SM)

Support staff: SPC Officer, starting from 2018 to 2019 (Conference Secretariat-Ghana & Rwanda)

4. PLACE IN THE CONFERENCE STRUCTURE
The following is a description of the relationship between the Scientific Programme Committee and other committees within the ICASA Conference planning structure:

- The SPC will provide on-going guidance, advice and support to ICASA working groups;
- Be SPC Chair and Co-Chair serve as the final level of approval for contentious issues or decisions within the approved principles and framework;
- The International Steering Committee (ISC) serves as the final level of approval for contentious issues or decisions outside the approved principles and framework.

5. **STAFF SUPPORT**

The Conference Secretariat Staff will ensure on-going management, coordination and support for the SPC and for the implementation of the programme.

Together with the Programme Coordinator, the SPC Officer will:

a. Provide administrative support to the committee;
b. Oversee proper endorsement/approval of committee decisions by relevant conference organizing bodies;
c. Implement recommendations and decisions.

6. **MEETINGS**

The SPC will meet by teleconference between March and June and in person immediately prior to and after the Marathon Meeting. Active member involvement is important. Members are expected to participate in all meetings and to notify the Chair and Co-Chair or the SPC Officer at least one week in advance in case of their absence. As a general rule, meeting agendas and related documentation will be distributed via email one week prior to meetings by the Secretariat.

7. **DECISION MAKING**

Quorum for decision-making purposes will be 50% of the committee membership and one chairperson. Decisions will be made by consensus. If consensus is not possible, committee members will agree on, and carry out, a process to deal with the issue.

8. **RECORDING**

Minutes summarizing issues raised and action items will be taken by the Secretariat and distributed by email to committee members following the meeting.

**Reference Documents**

- ICASA 2017 Programme
Programme Nomenclature

The ICASA programme includes programme sessions and programme activities. The four committees (ISC, Scientific, Community and Leadership) jointly build the conference programme with the support of the Working Groups for the Programme Activities. The programme sessions, workshops and programme activities are built according to the decided roles and responsibilities outlined in the Charter.

<table>
<thead>
<tr>
<th>Name</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstracts</td>
<td>Selected through a blind peer-review process for the conference Programme. Abstracts are scored by a panel of reviewers and ultimately selected by members of the Scientific Programme Committee. Abstracts are presented by scientists, activists, policy makers, people living with HIV and others working in the field.</td>
</tr>
<tr>
<td>Abstract Driven Sessions</td>
<td>Sessions which offer the highest caliber of state-of-the-art knowledge and peer-reviewed research. Sessions are either specific to one of the five tracks, or involve abstracts from different tracks, focusing on one theme.</td>
</tr>
<tr>
<td>Closing Session</td>
<td>The last session of the conference programme, speakers close the 20th ICASA conference and look ahead to the next. Rapporteurs synthesize presentations made during the week. The focus is on critical issues addressed, important results presented and key recommendations put forward. Co-organizers of 20th ICASA officially hand over the conference and responsibility to representatives of 20th ICASA.</td>
</tr>
<tr>
<td>Concurrent sessions</td>
<td>Sessions taking place at the same time, i.e., all sessions and activities except Plenary sessions.</td>
</tr>
<tr>
<td>Conference programme</td>
<td>All programme sessions and programme activities.</td>
</tr>
<tr>
<td>CPC</td>
<td>Community Programme Committee.</td>
</tr>
<tr>
<td>LPC</td>
<td>Leadership Programme Committee.</td>
</tr>
<tr>
<td><strong>Marathon Meeting</strong></td>
<td>Three-day meeting when all abstract-driven sessions are finalized and scheduled into the programme.</td>
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<td>---------------------</td>
<td>------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Non-abstract driven sessions (NADS)</strong></td>
<td>Sessions which address a wide range of current viewpoints and issues. The session format and focus vary but all are 90-minutes in length. Comprised of a combination of cultural activities, videos, welcome messages and opening keynote addresses, this Sunday evening session sets the tone for the conference, highlighting the themes and desired outcomes of the week.</td>
</tr>
<tr>
<td><strong>Opening Session</strong></td>
<td>Sessions organized into themes which address new developments in each of the five scientific tracks. Speakers give presentations which are followed by questions from the audience facilitated by session chair(s). These sessions are concurrent and last 90-minutes. Sessions organized into themes which address new developments in each of the five scientific tracks. Speakers give presentations which are followed by questions from the audience facilitated by session chair(s). These sessions are concurrent and last 90-minutes.</td>
</tr>
<tr>
<td><strong>Oral Abstract Sessions</strong></td>
<td>The daily plenary sessions feature some of the world’s most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first 90-minute session of every morning; there are no other competing sessions at this time. Peer-reviewed abstracts covering a wide variety of topics are organized by the five scientific programme tracks to be displayed. A different set of posters are displayed each day; presenters are at their posters at previously announced times to answer questions and provide further information on their study results.</td>
</tr>
<tr>
<td><strong>Poster Exhibition</strong></td>
<td>Workshops promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. These 90 minute sessions are geared to small audiences to encourage participation.</td>
</tr>
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<td><strong>Plenary Sessions</strong></td>
<td>Workshops promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. These 90 minute sessions are geared to small audiences to encourage participation.</td>
</tr>
<tr>
<td><strong>Workshops</strong></td>
<td>All activities for delegates and general public in the African Village; includes the Youth Programme. Activities are</td>
</tr>
</tbody>
</table>
comprised of Networking Zones, NGO and Marketplace Booths, Sessions, the Youth Pavilion and Cultural Activities.

Programme sessions: Abstract-driven sessions, plenary, special and other non-abstract driven sessions.

SPC: Scientific Programme Committee

Special Sessions: Feature presentations by some of the world’s key research leaders, high level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

Symposia Sessions: Feature keynote addresses addressing a single, clearly defined critical issue. These 90-minute sessions report on new findings and initiatives, and announce forthcoming research.
TERMS OF REFERENCE

LEADERSHIP

PROGRAMME COMMITTEE
Leadership Programme Committee (LPC) Guide

Overall Responsibilities and Terms of Reference

ICASA 2019 Programme Key Dates and Meetings

June 7th to June 8th, 2018
1st ISC meeting

February 1st and July 3rd, 2019
Abstract submission opens
Scholarship applications open

March 28th to March 29th, 2019
2nd ISC Meeting

30th July, 2019
Abstract and Scholarship deadline

August 21st to August 23rd, 2019
Marathon meeting

Expected Outcomes between 1st and 2nd ISC meeting (March 2019)

1. Draft the Leadership Programme Vision

THEME: TO BE DETERMINED

2. LPC outreach strategy to leaders, donors, media and participants
   • Identify issues and opportunities
   • Select target audiences-Who, Why, How to reach?
   • Implementation plan

3. Begin thinking about possible keynote speakers, session and workshop topics

4. Understand ICASA 2019 conference structure and review documents
   • Conference Charter
   • ICASA Committees and Secretariat lists
Expected Outcomes at the 2nd ISC Meeting (March 2019)

1. **Review of timeline and key dates**

2. **Confirmation of the Leadership Programme Committee and Vision**

3. **Input into development of:**
   - Plenary Sessions: (5): The daily plenary sessions feature some of the world's most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first session of every morning; there are no other competing sessions at this time. These sessions are the responsibility of the ISC. Programme Committee Co-chairs will be able to give suggestions before the meeting.
   - Opening and Closing Sessions: These sessions will be the first and last official sessions of the conference. Ceremonial in nature, these sessions will set the tone and focus of the meeting and the subsequent road ahead.
   - Special Sessions: (6): Feature presentations by some of the world's key research leaders, high level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

**Expected Work between 2nd ISC and Marathon Meeting* (21st – 23rd August, 2019)**

* Three-day meeting when all abstract-driven sessions are finalized and scheduled into the programme.

1. **Implementation of the LPC outreach strategy**

All committee members are responsible for supporting awareness raising efforts about the conference, encouraging partners and constituency members to attend. The LPC in particular is best placed to engage high-level leaders in governments or international organizations within and outside of the HIV movement.
2. **LPC Session development (10)**

The LPC is responsible for developing 10 non-abstract driven oral sessions on wide-ranging themes. Following a formal introduction by a moderator or 2 co-chairpersons, four or five designated speakers will introduce a specific theme or share their own experiences with the issue. A general debate will then be open to debate by participants. The work expected between March and the Marathon Meeting is assigning session development responsibility to committee members who should in turn gather information from constituencies on topics, identify speakers and develop session outlines. All sessions should be completed (with clear topic, title, description, speakers, chairs and back-ups) by June 15 so speakers can be invited and confirmed prior to the Marathon Meeting.

3. **LPC Workshop development (6)**

The conference offers high-quality, targeted workshops that promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. Leadership Development workshops provide a platform to learn innovative skills, critical for an effective response to the HIV epidemic, for new and current leaders. Participants may also develop and or enhance their skills on assessing and measuring commitments and actions of leaders or consider the ways in which they go about developing leadership capabilities. The LPC is responsible for developing 8 workshops. Some of the workshops may be designed by the committees between March and the Marathon Meeting while others may be "outsourced" to key partner organizations. See lists of LPC workshops examples (pages 2-4).

**Expected Work between Marathon Meeting and the Conference**

1. **Final push on the LPC outreach strategy to key partners and participants**

   Explore final possibilities for engagement and conference support. Promote registration among peers and networks.

2. **Final phases on session development**

   With support of the programme secretariat, coordinate communication between Leadership session moderators, chairpersons and speakers. Review talking points and slides where used to ensure session cohesion. Find replacement speakers and chairs, if necessary.
3. **Support VIP engagement and liaison**

   If there are government or organization principles in attendance those LPC members that have a link or connection with (for example, a UN Goodwill Ambassador) facilitate communications and support arrangements for their participation.

4. **Name a Lead Rapporteur for the Leadership sessions at the conference**

   A Lead Rapporteur would oversee the Leadership Rapporteur Team to ensure all Leadership sessions were attended and key decisions and conclusions were documented. These session summaries are posted on the conference website and form the basis of the Lead Rapporteur's "Daily Summary" for each full day of the conference. During the Closing Session, the Lead Rapporteur would present the highlights from their sessions to all delegates. Because of their intimate involvement with the development of the programme, committee members are ideal for such a role, if available.

**Reference Documents**

**ICASA Leadership Programme Committee (LPC) Terms of Reference**

Committee chair and co-chairs and members

1. **PURPOSE**

   The purpose of the committee is to provide overall planning and guidance for the development of the Leadership Programme at the 20th ICASA on the 2nd - 7th December 2019, Kigali, Rwanda.

   The committee is comprised of chair, co-chair and committee members.

2. **RESPONSIBILITIES**

   Being a member of LPC is an honorable and voluntary role. Travel and related costs of international experts are covered by the conference budget based on the availability of funds except for members affiliated to sponsoring institutions who have previously agreed to cover the costs and the agencies of the United Nations or regional. The members of the previous committee found that the participation can be demanding at times and can require extra time outside of scheduled meetings (about 2-5 hours per week). The co-chairs should expect a higher commitment on their part in terms of
In addition to the scheduled meetings, there will be frequent communication by email and conference call.

**Committee Co-Chairs**

- Preside over the LPC meetings
- Represent their programme committee on the International Steering Committee (ISC) and report on their progress and initiatives
- Draft the vision for the Leadership Programme at 20th ICASA
- Be spokespersons for the Leadership Programme in collaboration with the Conference Secretariat communications team
- Identify and propose topics and speakers to the CCC for plenary and special sessions
- Liaise with the CPC and SPC co-chairs and participate in co-chair meetings

**All Members**

- Represent the views of the various constituencies and leadership stakeholders, in particular governments and donors
- Disseminate conference information to networks, helping in outreach and advocate for the conference
- Develop 10 LPC NADS and 8 professional development workshops
- Name members to serve as point persons for LPC NADS
- Name a Lead Rapporteur
- Participate in Monitoring and Evaluation
- Assist with resource identification and recommendations
- Prepare for meetings by reviewing meeting agendas and related documentation

### 3. COMPOSITION OF COMMITTEE

**LPC (n=9)**

**Governance:**
- 3 x Co-Chairs (one nominated by SM, two by local partners)
- 3 x Local Members (nominated by local co-chairs)
- 3 x International Members (nominated by international partners, including one nominated by UNAIDS)

**Support staff:** LPC Officer, starting in 2016 (Conference Secretariat - Ghana & Rwanda)
4. PLACE IN THE CONFERENCE STRUCTURE

The following is a description of the relationship between the Leadership Programme Committee other committees within the ICASA Conference planning structure:

- The LPC will provide on-going guidance, advice and support to the working groups;
- The LPC Co-Chairs serve as the final level of approval for contentious issues or decisions within the approved principles and framework;
- The International Steering Committee (ISC) serves as the final level of approval for contentious issues or decisions outside the approved principles and framework.

- Draft the vision for the Leadership Programme at 20th ICASA
- Be spokespersons for the Leadership Programme in collaboration with the Conference Secretariat communications team
- Identify and propose topics and speakers to the CCC for plenary and special sessions
- Liaise with the CPC and SPC co-chairs and participate in co-chair meetings

All Members

- Represent the views of the various constituencies and leadership stakeholders, in particular governments and donors
- Disseminate conference information to networks, helping in outreach and advocate for the conference
- Develop 10 LPC NADS and 8 professional development workshops
- Name members to serve as point persons for LPC NADS
- Name a Lead Rapporteur
- Participate in Monitoring and Evaluation
- Assist with resource identification and recommendations
- Prepare for meetings by reviewing meeting agendas and related documentation

4. COMPOSITION OF COMMITTEE

LPC (n=9)

Governance:
3 x Co-Chairs (one nominated by SM, two by local partners)
3 x Local Members (nominated by local co-chairs)
3 x International Members (nominated by international partners, including one nominated by UNAIDS)

Support staff: LPC Officer, starting in 2018 (Conference Secretariat - Ghana & Rwanda)
5. PLACE IN THE CONFERENCE STRUCTURE

The following is a description of the relationship between the Leadership Programme Committee and other committees within the ICASA Conference planning structure:

- The LPC will provide ongoing guidance, advice and support to the working groups;
- The LPC Co-Chairs serve as the final level of approval for contentious issues or decisions within the approved principles and framework;
- The International Steering Committee (ISC) serves as the final level of approval for contentious issues or decisions outside the approved principles and framework.

Name Explanation

Abstracts

Selected through a blind peer-review process for the conference programme. Abstracts are scored by a panel of reviewers and ultimately selected by members of the Scientific Programme Committee. Abstracts are presented by scientists, activists, policy makers, people living with HIV and others working in the field.

Abstract Driven Sessions

Sessions which offer the highest caliber of state-of-the-art knowledge and peer-reviewed research. Sessions are either specific to one of the five tracks, or involve abstracts from different tracks, focusing on one theme.

Closing Session

The last session of the conference programme, speakers close the 18th ICASA conference and look ahead to the next. Rapporteurs synthesize presentations made during the week. The focus is on critical issues addressed, important results presented and key recommendations put forward. Co-organizers of 19th ICASA officially hand over the conference and responsibility to representatives of 20th ICASA.
Concurrent sessions: Sessions taking place at the same time, i.e., all sessions and activities except Plenary sessions.

Conference programme: All programme sessions and programme activities.

CPC: Community Programme Committee.

LPC: Leadership Programme Committee.

Marathon Meeting: Three-day meeting when all abstract-driven sessions are finalized and scheduled into the programme.

Non-abstract driven sessions (NADS): Sessions which address a wide range of current viewpoints and issues. The session format and focus vary but all are 90-minutes in length.

Opening Session: Comprised of a combination of cultural activities, videos, welcome messages and opening keynote addresses, this Sunday evening session sets the tone for the conference, highlighting the themes and desired outcomes of the week.

Oral Abstract Sessions: Sessions organized into themes which address new developments in each of the five scientific tracks. Speakers give presentations which are followed by questions from the audience facilitated by session chair(s). These sessions are concurrent and last 90-minutes.

Plenary Sessions: The daily plenary sessions feature some of the world’s most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first 90-minute session of every morning; there are no other competing sessions at this time.

Poster Exhibition: Peer-reviewed abstracts covering a wide variety of topics are organized by the five scientific programme tracks to be displayed. A different set of posters are displayed each day; presenters are at their posters at previously announced times to answer questions and provide further information on their study results.
Workshops promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. These 90-minute sessions are geared to small audiences to encourage participation.

Programme Activities
All activities for delegates and general public in the African Village; includes the Youth Programme. Activities are comprised of Networking Zones, NGO and Marketplace Booths, Sessions, the Youth Pavilion and Cultural Activities.

Programme sessions
Abstract-driven sessions, plenary, special and other non-abstract driven sessions.

SPC
Scientific Programme Committee

Special Sessions
Feature presentations by some of the world’s key research leaders, high level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

Symposia Sessions
Feature keynote addresses addressing a single, clearly defined critical issue. These 90-minute sessions report on new findings and initiatives, and announce forthcoming research.
Community Programme Committee (CPC) Guide

Overall Responsibilities and Terms of Reference

June 7th to June 8th, 2018
1st ISC meeting

February 1st and July 3rd 2019
Abstract submission opens
Scholarship applications open

March 28th to March 29th 2019
2nd ISC Meeting

30th July, 2019
Abstract and Scholarship deadline

August 21st to August 23rd 2019
Marathon meeting

Overview of the Community Programme Committee

The Community Programme Committee is led by a chair and co-chair:

- To be determined (Chair)
- To be determined (Co-Chair)

In addition to the Chair and co-chair, include at least five international members and five local members as follows:

International members:

- To be Determined

Local Members

- To be Determined

The overall responsibilities of the CPC include:

- Identify and decide on the sub-themes, focus and content of the Community Program vis-a-vis the Conference theme: Reflecting on the theme: As the first steering committee meeting all the program and the vision should relate strongly with the
upcoming theme: TO BE DETERMINED

- To identify the structure of unified program sessions in line with the sub themes.
- Prepare detailed work-plan in honoring the appropriate implementation of intended activities with the given time-frame.
- Establish sub-committees (working groups) to facilitate the implementation of the intended activities.
- Identify and engage resource persons and institutions in the subcommittees/working groups.
- Define and set criteria for the community village activities (including Symposia, Exhibitors, Community Dialogue Space, Community Celebration, etc.).
- Select the NGO exhibitors.
- Review the program implementation of the community Symposia and orientation session, forum and skills building program.
- Identify keynote speakers, session’s chairpersons, rapporteurs and moderators.
- Liaison with the Scientific Program Committee and contribute in setting criteria for abstract selection particularly related to Community Program.
- Ensure that abstract and non-abstract driven sessions are integrated within the Scientific Program.
- Harmonize and integrate Community Program with other programs (Scientific, leadership, etc.) For community focused panels, skill building sessions.
- In collaboration with the Secretariat and major regional community networks (AfriCASO, SWAA, NAP+, and SAFAIDS) identify and mobilize sponsors and co-organizers of the different community program components.
- To approve the community outreach aspects of the Conference program.
- Approve design of PLWH lounge.
- In collaboration with the Secretariat ensure community program has appropriate venue/space.

There are 4 Working Groups (WG) in the Community Program Committee. The four WGs are as follows:

- WG 1: Pre-Conference and special events: street demonstrations, youth forum, and orientation session for community participants;
- WG 2: Community sessions from the scientific program (abstracts and non-abstract based), capacity building and satellite sessions;
- WG 3: PLWH Lounge;
- WG 4: Community village, the most important component of the CP with various activities.

Expected Outcomes between 1st and 2nd ISC meeting (MARCH 2019)
1. Draft the Community Programme Vision

THEME: TO BE DETERMINED

Define the subthemes, focus and content of the Community Program

The list of subthemes from ICASA 2017 will be shared below, for ease of reference. Of course, you are free to change, refine or define new ones

2. Propose topics for plenary sessions and the theme of each day of the conference

3. Begin thinking about possible keynote speakers, session and workshop topics

4. Understand ICASA 2019 conference structure and review documents
   - Conference charter
   - ICASA Committees and Secretariat lists
   - Committee Briefing Document

5. Reference Documents
   - ICASA 2017 Programme
   - ICASA Governance Chart

Expected Outcomes at the 2nd ISC Meeting (March 2019)

1. Review of timeline and key dates

2. Confirmation of the Community Programme Committee and Vision

3. Confirmation of the focus, components and subthemes

4. Input into development of:

   Plenary Sessions: (5): The daily plenary sessions feature some of the world’s most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first session of every morning; there are no other competing sessions at this time. These sessions are the responsibility of the ISC. Programme Committee Chair and Co-chair are requested to give suggestions before the meeting.
Opening and Closing Sessions: These sessions will be the first and last official sessions of the conference. Ceremonial in nature, these sessions will set the tone and focus of the meeting and the subsequent road ahead.

Special Sessions: (6): Feature presentations by some of the world’s key research leaders, high-level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

Expected Work between Marathon Meeting and the Conference

1. Finalize the whole Community programme: Pre conference events, conference events, community village, workshops.

2. Final phases on session development

3. RECORDING
   Minutes summarizing issues raised and action items will be taken by the Secretariat and distributed by email to committee members following the meeting

Reference Documents

ICASA 2017 Programme

ICASA 2019 Governance Chart

Programme Nomenclature

The ICASA programme includes programme sessions and programme activities. The four committees (ISC, Scientific, Community and Leadership) jointly build the conference programme with the support of the Working Groups for the Programme Activities. The programme sessions, workshops and programme activities are built according to the decided roles and responsibilities outlined in the Charter.

<table>
<thead>
<tr>
<th>Name</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstracts</td>
<td>Selected through a blind peer-review process for the conference programme. Abstracts are scored by a panel of reviewers and ultimately selected by members of the Scientific Programme Committee. Abstracts are presented by scientists, activists, policy makers, people living with HIV and others working in the field.</td>
</tr>
<tr>
<td>Session Type</td>
<td>Description</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Abstract Driven Sessions</td>
<td>Sessions which offer the highest caliber of state-of-the-art knowledge and peer reviewed research. Sessions are either specific to one of the five tracks, or involve abstracts from different tracks, focusing on one theme.</td>
</tr>
<tr>
<td>Closing Session</td>
<td>The last session of the conference programme, speakers close the 20th ICASA conference and look ahead to the next. Rapporteurs synthesize presentations made during the week. The focus is on critical issues addressed, important results presented and key recommendations put forward. Co-organizers of 20th ICASA officially hand over the conference and responsibility to representatives of 20th ICASA.</td>
</tr>
<tr>
<td>Concurrent sessions</td>
<td>Sessions taking place at the same time, i.e., all sessions and activities except Plenary sessions.</td>
</tr>
<tr>
<td>Conference programme</td>
<td>All programme sessions and programme activities.</td>
</tr>
<tr>
<td>CPC</td>
<td>Community Programme Committee.</td>
</tr>
<tr>
<td>LPC</td>
<td>Leadership Programme Committee.</td>
</tr>
<tr>
<td>Marathon Meeting</td>
<td>Three-day meeting when all abstract-driven sessions are finalized and scheduled into the programme.</td>
</tr>
<tr>
<td>Non-abstract driven sessions (NADS)</td>
<td>Sessions which address a wide range of current viewpoints and issues. The session format and focus vary but all are 90-minutes in length.</td>
</tr>
<tr>
<td>Opening Session</td>
<td>Comprised of a combination of cultural activities, videos, welcome messages and opening keynote addresses, this Sunday evening session sets the tone for the conference, highlighting the themes and desired outcomes of the week.</td>
</tr>
<tr>
<td>Oral Abstract Sessions</td>
<td>Sessions organized into themes which address new developments in each of the five scientific tracks. Speakers give presentations which are followed by questions from the audience facilitated by session chair(s). These sessions are concurrent and last 90-minutes.</td>
</tr>
</tbody>
</table>
Plenary Sessions

The daily plenary sessions feature some of the world’s most distinguished HIV scientists, policy specialists and community leaders. Plenary sessions bring together all conference delegates at the first 90-minute session of every morning; there are no other competing sessions at this time.

Peer-reviewed abstracts covering a wide variety of topics are organized by the five scientific programme tracks to be displayed. A different set of posters are displayed each day; presenters are at their posters at previously announced times to answer questions and provide further information on their study results.

Workshops

Workshops promote and enhance opportunities for knowledge transfer, skills development and collaborative learning. These 90-minute sessions are geared to small audiences to encourage participation.

Programme Activities

All activities for delegates and general public in the African Village; includes the Youth Programme. Activities are comprised of Networking Zones, NGO and Marketplace Booths, Sessions, the Youth Pavilion and Cultural Activities.

Programme sessions

Abstract-driven sessions, plenary, special and other Non-abstract driven sessions.

SPC Special Sessions

Scientific Programme Committee Feature presentations by some of the world’s key research leaders, high-level international AIDS ambassadors and policy specialists. These lunchtime sessions are highly engaging for delegates.

Symposia Sessions

Feature keynote addresses addressing a single, clearly defined critical issue. These 90 minute sessions report on new findings and initiatives, and announce forthcoming research.
CALL FOR PROPOSITION
OF ICASA 2019
THEMES AND OBJECTIVES
CALL FOR PROPOSITION OF ICASA 2019
THEME AND OBJECTIVES

BACKGROUND OF ICASA

The International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) is a major international AIDS conference which takes place in Africa. It is a biennial conference which alternates between Anglophone and Francophone African countries. ICASA has been organized since 1990 to mitigate the impact of HIV and AIDS with a vision for an African continent free of HIV, Tuberculosis and Malaria and the debilitating effects which these diseases have on communities, where there is no stigma and discrimination against PLHIV and their families, and where social justice and equitable access to treatment prevail. So far ICASA has been hosted in (14) fourteen countries on the continent with more than 100,000 direct participants. The last ICASA 2017 was hosted in Abidjan, Côte d’Ivoire, with over 6030 delegates in attendance and 2327 Abstracts submitted.

ICASA 2017 Côte-d’Ivoire was an excellent opportunity of promoting inter-sectoral achievements in the AIDS response by strengthening partnership among governments, Civil Society, and development partners towards the fast track targets of 90-90-90 and ending AIDS by 2030. The theme of ICASA 2017 was: Africa: Ending AIDS Delivering Differently. ICASA 2017 convened delegates from 91 countries, including more than 300 journalists from around the globe. The Conference was held from 4 to 9 December 2017 in Sofitel Abidjan Hotel Ivoire. Society for AIDS in Africa (SAA), the organizers of ICASA, organized ICASA 2017 in collaboration with the Government of Cote d’Ivoire, jointly with international and local partners.

PURPOSE FOR THEME & OBJECTIVE

The purpose of the concept note is to develop the theme and objectives of the upcoming 20th edition of ICASA which will take place in Kigali, Rwanda from 2-7 December, 2019.

CRITERIA FOR DEVELOPING THE THEME & OBJECTIVES

- The previous ICASA 2017 theme and objectives will serve as a reference in the developing the new theme and objectives for ICASA 2019
- Also the current trends in global health, the SDG’s the 90-90-90 goal and end of AIDS by 2030 should be factored in developing the theme and objectives of ICASA 2019
- The theme and objectives must reflect Scientific, Leadership and Community component of ICASA
- The proposed theme should not be more than 20 words
• The objectives should not be more than 5 points

**NB: See below the previous conference Themes**

**ICASA 1986 THEME: AIDS IN AFRICA**

**ICASA 1997 THEME: SCIENCE IN CHALLENGING AIDS**

**ICASA 1988 THEME: AIDS AND ASSOCIATED CANCERS IN AFRICA**

**ICASA 1989 THEME: EPIDEMIOLOGY OF AIDS IN AFRICA**

**ICASA 1990 THEME: STRUGGLE AGAINST AIDS IN AFRICA**

**ICASA 1992 THEME: CLEAN AND SAFE BLOOD FOR ALL**

**ICASA 1993 THEME: AFRICA UNITY AGAINST AIDS AND STDs**

**ICASA 1995 THEME: CHALLENGES AND HOPE**

**ICASA 1997 THEME: AIDS AND DEVELOPMENT**

**ICASA 1999 THEME: LOOKING INTO THE FUTURE: SETTING PRIORITIES FOR AIDS**

**ICASA 2001 THEME: THE COMMUNITIES COMMIT THEMSELVES**

**ICASA 2003 THEME: ACCESS TO CARE: CHALLENGES**

**ICASA 2005 THEME: HIV/AIDS AND FAMILY**

**ICASA 2008 THEME: AFRICA’S RESPONSE: FACE FACTS**

**ICASA 2011 THEME: OWN, SCALE UP AND SUSTAIN**

**ICASA 2013 THEME: NOW MORE THAN EVER TARGETING ZERO**

**ICASA 2015 THEME: AIDS IN POST 2015: LINKING LEADERSHIP, SCIENCE AND HUMAN RIGHTS**

**ICASA 2017 THEME: AFRICA: ENDING AIDS – DELIVERING DIFFERENTLY**

**The Objectives of ICASA 2017:**

1. Promote innovation, partnerships to increase domestic investments to achieve 90/90/90 targets
2. Integrate approaches for sustainable Responses towards ending AIDS, TB, Hepatitis and associated diseases
3. Translating science into action to maximize programme impact
4. Provide a platform to Maintain and Sustain Investment for CSO and FBO’s
5. Provide a platform to promote rights-based models to overcome structural and policy barriers towards universal access

**TIMELINE FOR THE PROPOSED THEME & OBJECTIVES**
The PROPOSED theme and objectives should be sent to the email below, before 31st May, 2018

Email: programme1@icasa2019rwanda.org

The proposed themes and objectives will be finalized at the upcoming 1st International Steering Committee (ISC) meeting. Date: 7th - 8th June, 2018 Venue: Kigali Convention Centre, Rwanda

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Coordinator
Permanent Secretariat
Society for AIDS in Africa (SAA)
ICASA Organizer
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website: www.icasa2019rwanda.org
REFERENCE DOCUMENTATION

ICASA 2017

THEMES AND OBJECTIVES
THEME

Africa: Ending AIDS-delivering differently

OBJECTIVES:

1. Promote innovation, partnerships to increase domestic investments to achieve 90/90/90 targets.

2. Integrate approaches for sustainable Responses towards ending AIDS, TB, Hepatitis and associated diseases.

3. Translating science into action to maximize programme impact.

4. Provide a platform to Maintain and Sustain Investment for CSO and FBO's.

5. Provide a platform to promote rights-based models to overcome structural and policy barriers towards universal access.
## COMMUNITY PROGRAM COMMITTEE

<table>
<thead>
<tr>
<th>ENGLISH</th>
<th>THEMATIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plenary 1</td>
<td>STIGMA AND DISCRIMINATION: A STRUCTURAL BARRIER TO ACCESS TO SERVICES AND RIGHTS</td>
</tr>
<tr>
<td>Plenary 2</td>
<td>KEY POPULATIONS: KEY FOR ENDING AIDS</td>
</tr>
<tr>
<td>Plenary 3</td>
<td>PROMOTE INNOVATIVE AND SUSTAINABLE INVESTMENT FOR CIVIL SOCIETY ENGAGEMENT</td>
</tr>
<tr>
<td>Plenary 4</td>
<td>YOUNG ADOLESCENTS, WOMEN AND GIRLS: THE HIDDEN FACE OF THE EPIDEMIC</td>
</tr>
<tr>
<td>Plenary 5</td>
<td>INSTITUTIONAL COMMUNITY EXPERTISE FOR BETTER ACCESS TO SERVICES</td>
</tr>
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</table>

## LEADERSHIP PROGRAM COMMITTEE

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<tr>
<th>ENGLISH</th>
<th>THEMATIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plenary 1</td>
<td>SUSTAINABLE FUNDING, DOMESTIC FINANCING, ENDING AIDS- (AFRICAN UNION, UNAIDS, GLOBAL FUND AN AFRICA COUNTRY THAT HAS MADE PROGRESS)</td>
</tr>
<tr>
<td>Plenary 2</td>
<td>KNOWLEDGE IN ACTION FOR FAST TRACKING AFRICAN RESPONSE; (COUNTRY SITUATION, TRANSFORMATIVE CHANGE)</td>
</tr>
<tr>
<td>Plenary 3</td>
<td>YOUTH INVOLVEMENT IN FAST TRACKING AN END OF AIDS; CHALLENGES, YOUTH LEADERSHIP, RECOGNIZING THE ROLES OF YOUTHS</td>
</tr>
<tr>
<td>Plenary 4</td>
<td>THE UNFINISHED BUSINESS OF AIDS; WOMEN IN LEADERSHIP</td>
</tr>
<tr>
<td>Plenary 5</td>
<td>ADDRESSING STRUCTURAL CHANGES FOR SUSTAINABLE INTERGRATION</td>
</tr>
</tbody>
</table>

## SCIENTIFIC PROGRAM COMMITTEE
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<td>ENDING TB: IS IT ACHIEVABLE?</td>
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<td>Plenary 2</td>
<td>HIV CURE &amp; VACCINE; WHERE ARE WE?</td>
</tr>
<tr>
<td>Plenary 3</td>
<td>ART OPTIMIZATION AND THE THREAT OF RESISTANCE</td>
</tr>
<tr>
<td>Plenary 4</td>
<td>UNLOCKING THE TREATMENT CASCADE FOR CHILDREN</td>
</tr>
<tr>
<td>Plenary 5</td>
<td>FROM PMTCT/HIV TO PMTCT/HBV, LESSONS LEARNED</td>
</tr>
</tbody>
</table>

**Day 1**

1. ADDRESSING STRUCTURAL CHANGES FOR SUSTAINABLE INTEGRATION  
2. HIV CURE & VACCINE: WHERE ARE WE?  
3. KEY POPULATIONS: KEY FOR ENDING AIDS

**Day 2**

1. FROM PMTCT/HIV TO PMTCT/HBV: LESSONS LEARNED  
2. KNOWLEDGE IN ACTION FOR FAST TRACKING THE AFRICAN RESPONSE  
3. INSTITUTIONAL COMMUNITY EXPERTISE FOR BETTER ACCESS TO SERVICES

**Day 3**

1. THE UNFINISHED BUSINESS OF AIDS – WOMEN IN LEADERSHIP  
2. UNLOCKING THE TREATMENT CASCADE FOR CHILDREN  
3. STIGMA AND DISCRIMINATION: A STRUCTURAL BARRIER TO ACCESS TO SERVICES AND RIGHTS

**Day 4**
<table>
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<tr>
<th>Day 5</th>
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</thead>
</table>
| 1. ENDING TB: IS IT ACHIEVABLE?  
2. YOUNG ADOLESCENTS, WOMEN AND GIRLS: THE HIDDEN FACE OF THE EPIDEMIC  
3. YOUTH INVOLVEMENT IN FAST TRACKING THE END OF AIDS – CHALLENGES, LEADERSHIP, RECOGNIZING THE ROLES OF YOUTH |
| 1. PROMOTE INNOVATIVE AND SUSTAINABLE INVESTMENT FOR CIVIL SOCIETY ENGAGEMENT  
2. ART OPTIMIZATION AND THE THREAT OF RESISTANCE  
3. SUSTAINABLE FUNDING, DOMESTIC FINANCING, ENDING AIDS |
TRACK A
Basic Science (Biology and pathogenesis)

Description: This track will encompass all aspects of fundamental HIV biology and the host response to HIV. Areas of focus will include HIV infection and replication, transmission, genetics, evolution, structure and function, pathogenesis, adaptive and innate immune responses to HIV, genetic susceptibility to HIV, interaction of micronutrients, co-infection and progress in animal models. Pre-clinical vaccine, microbicide, and drug development will be important themes of this track.

Abstract Categories

HIV evolution, viral diversity and bioinformatics
A1. HIV-1/2: Origins, evolution, diversity and response to ARV
A2. Molecular epidemiology of HIV diversity
A3. Bioinformatics analysis of HIV diversity and drug resistance

Immunology of HIV
A4. Innate immune responses and function in natural history of HIV infection
A5. Humoral immune responses and function in natural history of HIV infection
A6. Cellular immune responses and function in natural history of HIV infection
A7. Immune responses in resistant cohorts: elite controllers and exposed uninfected

Transmission and Pathogenesis (HIV-1/2)
A8. Viral determinants of HIV pathogenesis
A9. Acute and early HIV infection
A10. Animal models of transmission, disease resistance and progression
A11. HIV transmission (mucosal and mother to child transmission; other
transmission)
A 12 Ageing and HIV

**Host genetics and HIV infections**
A13. Host genetics of resistance and susceptibility and restriction factors

**HIV: Co-infections and emerging pathogens**
A14. HIV super-infection
A15. HIV co-infection with TB and other pathogens (Hepatitis B, C, HPV...)
A16. HIV interactions with emerging and other opportunistic pathogens

**HIV: Drug development and resistance**
A17. HIV drug development: Synthetic, traditional and microbicides
A18. Molecular mechanisms of drug action and antiviral drug resistance and drug interaction
A19. Nucleic acid based HIV and SIV therapies
A20. Targeting and HIV persistence during ART (cure strategies)

**Vaccine development**
A21. Clinical trials in HIV vaccine development
A22. Animal models for vaccine development

**Interaction of micronutrients and HIV infection**
A23. Effect of micronutrients in HIV and AIDS pathogenesis, transmission and treatment
A24. Mechanisms of micronutrient and HIV interactions

**Diagnostics tools development (for use in resource limited settings)**
A25. Novel assays of immune responses in HIV and AIDS  
A26. Novel assays and cost effectiveness tools for virological monitoring  
A27. Rapid and cost-effective HIV screening and diagnostic methods  
A28. HIV drug resistance testing  

Characterization of HIV latency and viral reservoirs  
A29 Measurement of HIV/SIV reservoirs  
A30 Host cellular latency  
A31. Targeting and eradication of reservoirs  

Track B  
Clinical Science, Treatment and Care  

Description: This track will analyze clinical features of opportunistic infections, malignancies, severe bacterial diseases, co-morbidities in people living with HIV. Issues in antiretroviral therapy, response to ART, adherence, retention, long term follow-up, management of side effects, ART in specific populations (adolescents, Elderly, pregnant women) will also be addressed. Emerging topics such as aging, frailty and in other age-related comorbidities such as cardiovascular, renal, neurocognitive, bone mineral and metabolic diseases will be discussed. Issues of resistance and management of failure including salvage therapy which is a concern in resources limited settings will be addressed.  

Abstract Categories  

Clinical course of HIV infection and disease  
B1. Natural history of HIV Disease including markers of HIV Disease progression  
B2. Challenges associated with pre-ART patient care  
B3. Morbidity and mortality/life expectancy during ART
B4 Acute and early infection

**Diagnosis and management of co-infections/co-morbidities**

B5. Co-infections (TB, Hepatitis, STIs, Cryptococcus, bacterial diseases, leishmaniosis, Malaria and others)
B6. Prophylaxis against common infections (CPT, IPT, antifungal)
B7 Immunization in HIV infected people
B8 Diagnosis and management of Hepatitis B/C
B9- Tools for diagnosis and management of infections: point of care

**HIV and NCD**

B10. Diabetes, cardiovascular, renal diseases, bone mineral diseases, HIV and neurocognitive disorders)
B11. HIV and malignancies
B12 HIV, Ageing and Fragility
B13 Diagnosis and management of STI
B14 Syphilis, HPV and others

**Antiretroviral therapy**

B15. First line therapy (when to start, what to start with, durability)
B16. ART monitoring strategies
B17. Treatment failure: drug resistance, second line therapy and salvage therapy
B18. Adherence and retention
B19. Antiretroviral therapy in children
B20. HIV management in adolescents
B21. Antiretroviral therapy in pregnant women
B22 Antiretroviral therapy in elder populations
B23. Adverse effects of antiretroviral therapy including immune reconstitution syndrome be sure Track C integrate this (quality of life...)
B24. HIV-2, HIV-1+2 infections
B25 Management of HIV infection in Key Populations
B26. Cost effectiveness of ART
B27. Antiretroviral therapy to prevent HIV-Transmission
B28 ART maintenance simplification

**Palliative care and nutrition**

B29. Pain management and end of life care
B30. Clinical nutritional care in HIV infection
B31. Home and community based care and support
B32 Other Strategies and Therapies (traditional medicine, spiritual care)

**Clinical guidelines, tools and algorithms**

B33. Country adaptation of global HIV diagnosis and treatment guidelines
B34. Diagnosis and monitoring tools
Track C

Epidemiology and Prevention Science

Description: This track will focus on HIV and AIDS prevention research and issues related to the design, implementation and evaluation of prevention programs to reach the SDG. It will include examination of Research, methodological and programmatic advances in the continuum of prevention, particularly best practices in HIV prevention for vulnerable populations in resource-limited settings. Strategies to put HIV prevention research into practice, efforts to promote preparedness for bio-medical prevention technologies, and research on new prevention approaches including microbicides, vaccines, pre- and post-exposure prophylaxis, circumcision and other methods will be presented. This Track will also address co-morbidities (Hepatitis, Tuberculosis, and STI’s, communicable end emerging diseases) and emerging.

Abstract Categories

Basic HIV Epidemiology

C1. Natural history of HIV
C2. HIV prevalence and incidence trends
C3. Trends in morbidity and mortality trends
C4. Risk factors for acquisition of HIV, geographic heterogeneity and contextual
C5. Epidemiology in general population including serodifferent couples
C6. Epidemiology of HIV in youth, adolescents and children
C7. HIV in most at risk populations (sex workers, MSM, prisoners, UD including PWID, migrants)

Epidemiology of HIV co-morbidity and emerging diseases

C8. HIV and other sexually transmitted infections (STI)
C9. HIV and Tuberculosis co-infection
C10. HIV and Malaria co-infection
C11. HIV and Viral hepatitis
C12. HIV and non-communicable diseases
C13. HIV and associated cancers
C14 HIV and other OI
C15 Epidemiology of emerging diseases

Social Epidemiology of HIV
C16. Sexual behavior, vulnerability and Most at Risk Populations (MARPS)
C17. Socio-cultural and economic determinants of HIV
C18. Relapse of risky behaviors with the advent of ART

HIV/AIDS Surveillance and Monitoring and Evaluation
C19. Modeling HIV epidemic in the advent of ARTC
C20. HIV and AIDS surveillance: Routine, sentinel and second generation
C21. Surveillance of opportunistic infections, ART drug resistance
C22. Population-based HIV sero epidemiologic studies, and measuring new HIV infections, including in children
C23. Monitoring and evaluation of HIV/AIDS programs

Methodological Issues and Capacity-Building in Epidemiological and Prevention Research
C24. Novel research designs in HIV and AIDS
C25. Ethical and human rights issues in epidemiological and prevention research
C26. Measuring and modeling the impact of the HIV epidemic
C27. Methods aimed at measuring recent HIV infections and HIV incidence
C28. Surveillance systems and methods including geographical information system
C28 estimation of the size of KP
HIV/AIDS Prevention Programmes

C29. HIV testing services
C30. Elimination of Prevention of Mother to Child Transmission
C31. Prevention programmes in institutional and community settings
C32. Prevention programmes for immigrants, mobile and displaced populations
C33. Integrated prevention for PLHIV
C34. HIV Prevention technologies
C35. New approaches for HIV prevention
C36 Integrating HIV prevention into reproductive health, care, support and treatment programmes
C37 HIV Testing and diagnosis strategies

Diversified prevention tools:

C38 PeP
C 39 PrEP
C 40 TAsP
C 41 Microbicides
C42 Ehealth
Track D

Law, Human Rights, Social Science and Political Science

Description: This track aims to highlight new knowledge and address gaps in the translation of behavioural and social science evidence into practice, and to contribute to the building of theory and understanding in HIV-related social science. The track also aims to promote understanding of the individual and social determinants of HIV-related risk, vulnerability and impact, to inform development of effective and sustainable HIV responses that are based on human dignity and individual entitlements. This track will feature research, analysis and evaluation on psychosocial factors that shape individual attitudes, experiences, and behaviors; social and structural factors that shape vulnerability and risk; social and cultural norms that underlie individual risk and community vulnerability; programmes that promote acceptation of human diversity and fast track access to HIV and STI prevention, treatment, care and support; social and structural factors that shape vulnerability; and methods and outcomes of individual and community engagement, leadership, empowerment, and self-determination.

Abstract Categories

1. Human rights, law and ethics

   D1 The Law, protection and empowerment of PLHIV and vulnerable populations
   D2 Human rights and HIV services for vulnerable populations
   D3 Human rights, ethics and use of antiretroviral drugs for treatment and prevention
   D4 Children’s rights and HIV
   D5 Sexual rights and citizenship
   D6 Human rights, HIV testing, policy and practice
   D7 Human rights, culture and religion and HIV
D8 Social, behavior, culture and harm reduction
D9 Ethics, law and research
D10 Ethics, clinical services, public health policy and programmes
D11 Ethics, human right, access to prevention, diagnosis, treatment and care

2. **Stigma, Discrimination and the Legal Environment**

D12 Experience and impacts of HIV-related stigma
D13 Intersecting stigmas and marginalized identities
D14 Racism, ethnicity-based social exclusion and HIV control
D15 Homophobia and transphobia
D16 HIV related stigma, discrimination and access to justice
D17 Stigma, discrimination, key and vulnerable populations affected by HIV
D18 Stigma, social attitudes, media and public debate
D19 Punitive laws, its enforcement and HIV risk
D20 Legal protection of people living with HIV, key and vulnerable populations

3. **Sex, Sexuality, gender relationship and HIV**

D21 Gender equality and gender equity
D22 Sexualities and sexual cultures
D23 Adolescents, young people, sex, sexuality and relationships
D24 same – sex-attracted, bisexual and queer people
D25 Gender issues and gendered relationships
D26 Feminity, masculinity and transgender issues
D27 Relationships, partnership, concurrency and sexual networks
D28 Sexuality, gender and new prevention technologies
D29 Sex, sexuality and HIV co-morbidity
4. **Policies, Programs and HIV response**

D30 Polity, politics and HIV control–
D31 Harm reduction policies and politics
D32 Access to HIV management
D33 Policy development, implementation and evaluation
D34 Policies for HIV prevention, diagnosis, treatment, care, protection and support
D35 Policies and socio-economic determinants of vulnerability
D36 HIV policies and the workplace
D37 HIV policies and educational institutions
D38 HIV policies and intellectual property
D39 HIV treatment access and TRIPS
D40 Policy analysis and indicators of policy effectiveness
D41 Monitoring and evaluation of policies and their impact
D42 Evidence–informed advocacy for policy formulation and review

5. **Social theories and knowledge production**

D43 HIV prevention theories and approaches
D44 Social and behavioural science collaboration
D45 Methods in social and behaviour surveys

6. **Communication, mass media and popular education**

D46 HIV and AIDS communication strategies
D47 the media and HIV and AIDS
D48 Digital media, social networking and HIV prevention, treatment, care and support
D49 HIV, media, culture and religion
D50 Media and policy making
D51 Inter-organizational communication and knowledge transfer
D52 Intergenerational communication and HIV
7. **Socio-cultural determinants of HIV**

D53 Family structures, kinship and social safety nets for key and vulnerable populations
D54 Harmful traditional practices and HIV
D55 Young people, globalization and HIV
D56 Growth, development, body image and HIV
D57 Transactional sex, global recession and HIV
D58 Traditional and complementary approaches to HIV control

8. **Structural determinants of HIV**

D59 Poverty, social and socio-economic structures and HIV
D60 Addressing a feminized epidemic
D61 Fertility, family planning, reproductive health services and HIV
D62 Reproductive rights, health and HIV
D63 Family-centered approach to HIV care and support
D64 Conceptualizing social and structural factors and their impacts
D65 Poverty, wealth. Income inequalities and HIV
D66 Dynamics of social status and power
D67 Gender, age, ethnicity, disability and HIV
D68 Economic transitions, socio-cultural changes and HIV risk
D69 Social dynamics, intergenerational differences and HIV
D70 Migrants, migration and population dislocation
D71 Violence, conflict and HIV
D72 Humanitarian disasters and HIV
D73 Gender based violence and HIV
D74 Prisons, closed settings and HIV

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**Track E**

**Health Systems, Economics and Implementation Science**
**Description:** This track will aim to provide new insights into the status of the health systems and its capacity and challenges to expanding treatment and prevention in resource-limited settings. At the same time, issues related to health economics, integration of health programs, country ownership of national health and HIV programs, and advancement of a comprehensive and integrated approach to health and rights will be discussed. This Track must show the need for a holistic vision of the fight against the disease by the effective strengthening of health systems. The verticalization of the fight is not a proper and appropriate response in a context where we have recurrent epidemics.

**Abstract Categories**

**HIV and health system strengthening**

E1. Leveraging the AIDS response to strengthen health systems and improve other health outcomes  
E2. Developing Africa’s response to the crisis in human resources for health  
E3. Procurement and supply  
E4. Role of community organizations in linking people to HIV services and strengthening the health system  
E5. Increasing capacity of public health systems to deliver HIV care at scale  
E6. HIV service delivery in conflict and post-conflict settings

**Management for health care delivery**

E7. Gender responsive HIV programming  
E8. Integration of HIV services with other health and development programs  
E9. Interventions to increase uptake and retention in HIV services: decentralization and task shifting  
E10. Interventions to improve retention in the prevention of vertical transmission cascade/continuum, including early infant diagnosis and Option B+ programmes
Shared Responsibility and Global Solidarity towards ending AIDS as prerequisite for SDGs

E11. Governance - peer review and accountability mechanisms
E12. Procurement and supply chain management
E13. Investing in HIV more strategically - use of applications of investment approach at country level
E14. National financing initiatives
E15. International assistance, frameworks and funding mechanisms: Global Fund, PEPFAR etc.....
E16. Ensuring accelerated access to affordable and quality-assured medicines and health-related commodities - Pharmaceutical Manufacturing Plan in Africa (PMPA)

Health economics

E17. Building country-level capacity for quality improvement
E18. Impact evaluation of different models of health service delivery (cost effectiveness)
E19. Effect of health insurance schemes and other support models on access, adherence and outcome

Partnership in HIV

E20. Private-public, faith-based organizations and NGOs partnerships for prevention, treatment, care and support (service delivery, financing)
E21. Intervention to improve adherence to treatment and prevention behavior and technologies
E22. Civil society: A driving force in Getting to Zero - Operationalizing partnership with civil society, people living with HIV and key populations

Monitoring and evaluation
E23. Innovative approaches to track patients, track pre-ART care and other program data (including connectivity and other mhealth solutions)

**Innovation and best practices**

E24. Interventions at last scale (community, district, provincial, regional, country levels) to increase uptake of and retention in HIV services
E25. Partnership involving donors, NGOs and government
E26. Effects of public-private partnerships, including workplace programmes and policies
E27. Innovating HIV response with new technologies

**Key populations and HIV**

E28. Working with community-led organizations, including key populations, faith-based groups, traditional healer organizations, and with community leaders
E29. Sexual and reproductive health and HIV services: delivery models and cost
E30. Inpatient and outpatient services for HIV care and treatment
E31. HIV and other vertical programmes e.g. tuberculosis, sexually transmitted infections, drug treatment, family planning
E32. Community care with health facility services
E33. Integration of HIV and non-communicable diseases (NCD) services
PRELIMINARY PROGRAMME
# PRELIMINARY CONFERENCE PROGRAM

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WORKSHOP=10
NON ABSTRACT DRIVEN SESSION=6

COMMUNITY PROGRAMME COMMITTEE
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SPECIAL SESSIONS=5
WORKSHOP=8

LEADERSHIP PROGRAMME COMMITTEE
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NON ABSTRACT DRIVEN SESSION=
# ICASA 2019 Kigali – Rwanda

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<td>Letter to speakers</td>
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<td>15th August 2019</td>
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<td>Feedback from speakers</td>
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<tr>
<td>Marathon Meeting</td>
<td>21st August 2019</td>
<td>23rd August 2019</td>
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Proposed Key dates

There should be at least 3 meetings before the International Steering Committee (ISC)

We need to conduct at least three meetings to organize a successful ICASA.

**First meeting:** 7\(^{th}\) – 8\(^{th}\) June, 2018 (First ISC Meeting)
 Arrival: 6\(^{th}\)
 Meeting: 7\(^{th}\) – 8\(^{th}\)
 Departure: 9\(^{th}\)

**Second meeting:** 28\(^{th}\) – 29\(^{th}\) March, 2019 (Second ISC Meeting)
 Arrival: 27\(^{th}\)
 Meeting: 28\(^{th}\) – 29\(^{th}\)
 Departure: 30\(^{th}\)

**Call for Abstracts:** 1\(^{st}\) February, 2019 (Call for Abstract)
 Closing: 30\(^{th}\) July, 2019 (Dead line)

**Marathon Meeting:** 21\(^{st}\) – 23\(^{rd}\) August, 2019 (Marathon meeting)
 Arrival: 20\(^{th}\)
 Session: 21\(^{st}\) – 23\(^{rd}\)
 Departure: 24\(^{th}\)

**ICASA 2019 Online Programme:** 16\(^{th}\) September, 2019
CONCEPT NOTE FOR
LOGO
Kigali, March 24 2018— Rwanda Ministry of Health and the Society for AIDs in Africa (SAA) who are the organizers of the International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) are calling for bids to brand and design the ICASA 2019 logo and theme. Rwanda is the host country of ICASA 2019 and the logo of the 20th edition of ICASA will reflect the country’s values, the SDGs, the 90-90-90 goal and the end of AIDS by 2030.

The ICASA organizers hope to get an identity to brand the upcoming 20th edition in order to get the best and appropriate logo for ICASA 2019. The contest for a creative logo for the conference will earn the winner a prize.
The contest is open to all Africa countries however artists mainly People Living with HIV and key populations are most encouraged to participate.

The ICASA International secretariat will shortlist 10 best proposals of the ICASA logo and this will be presented at the ICASA 2019 International Steering Committee meeting which will be held between 7 – 8 June, 2018 in Kigali for the final selection. To participate kindly refer to ICASA 2019 website: www.icasa2019rwanda.org

The International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) is a major and only bilingual international AIDS conference which takes place in Africa. It is a biennial conference which alternates between Anglophone and Francophone African countries. ICASA has been organized since 1990 to mitigate the impact of HIV/AIDS through an African continent free of HIV, Tuberculosis and Malaria and the debilitating effects which these diseases have on our communities, where there is no stigma and discrimination against PLHIV and their families, and where social justice and equity to accessing treatment prevails.

So far ICASA has been hosted in (14) fourteen countries with more than 100,000 direct participants. The last ICASA was hosted in Abidjan, Côte-d'Ivoire in 2017 with 6030 delegates in attendance, 2327 selected abstracts and a total of 1588 scholarships awarded of which 901 were awarded from the ICASA International Secretariat and 687 from the Host Country.

The Society for AIDS in Africa (SAA) through a bidding process invited African countries to host the conference and some of the credentials were; Strong Government support, financial commitment and political will to host the conference, Providing and financially supporting the Conference venue, providing scholarship for at least 300 local participants, security among others and Rwanda met the requirements. The SAA team met with H.E Rwanda President Paul Kagame and Health Minister prior to find out more about Rwanda’s capacity to host ICASA and the outcomes were good.

Meanwhile, Rwanda has made steadfast progress in fighting and combating HIV/AIDs, HIV prevalence has been maintained at 3 % for the past decade. Meanwhile new prevention inventions are inaugurated usually with the most recent being the oral self-testing method, the treat all HIV+ where people living with HIV are immediately enrolled on Antiretroviral Therapy. Other prevention measures include; scaling up of Voluntary Counselling and Testing services and placing mobile condom kiosks in high risk areas.

Of recent, Rwanda has played host to major global conference including; The AORTIC International Conference on Cancer in Africa and the 37th Global Fund Board meeting. At the 2017 ICASA Conference, Rwanda Biomedical Centre showcased the health sectors achievements while Rwanda Convention Bureau (RCB) showcased Rwanda’s capacity to host major conferences.

For more information please contact:

Mr. Luc Armand Bodea, ICASA 2019 Director, Permanent Secretariat of the Society for AIDS in AFRICA,
Tel: +233(0)302913739, Email: lucbodea@saafrica.org / info@saafrica.org www.saafrica.org

Mr. Malick Kayumba, Rwanda Health Communication Center: Tel: +250 788 350 035, Email: malick.kayumba@rbc.gov.rw
BACKGROUND OF ICASA

The International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA) is a major and only bilingual international AIDS conference which takes place in Africa. It is a biennial conference which alternates between Anglophone and Francophone African countries. ICASA has been organized since 1990 to mitigate the impact of HIV/AIDS through an African continent free of HIV, Tuberculosis and Malaria and the debilitating effects which these diseases have on our communities, where there is no stigma and discrimination against PLHIV and their families, and where social justice and equity to accessing treatment prevails. So far ICASA has been hosted in (14) fourteen countries with more than 100,000 direct participants. The last ICASA was hosted in Abidjan, Côte d'Ivoire in 2017 with 6030 delegates in attendance, 2327 selected abstracts and a total of 1588 scholarships awarded of which 901 were awarded from the ICASA International Secretariat and 687 from the Host Country.

ICASA 2019 Rwanda will be an excellent opportunity to promote inter-sectoral achievements in the AIDS response and to strengthen the partnership among governments, Civil Societies, and development partners towards 90-90-90 and AIDS ending in 2030. ICASA 2019 is expected to convene more than 10,000 delegates from nearly 150 countries, including more than 200 journalists around the globe. The conference will be held from 2nd to 7th December 2019 in Kigali Convention Centre, Rwanda. Society for AIDS in Africa (SAA), the custodian of ICASA, with more than 5,000 membership in 56 countries, is organizing ICASA 2019 in collaboration with the Government of Rwanda, jointly with international and local partners.

I. PURPOSE FOR THE DESIGN
After the selection of Rwanda to host ICASA 2019, the organizers of ICASA with an all-inclusive approach are calling for a bid to brand and design the logo of the 20th edition of ICASA which will reflect the country’s values, the SDGs, the 90-90-90 goal and the end of AIDS by 2030.

OBJECTIVE:

The ICASA organizers are desirous to get an identity to brand the upcoming 20th ICASA. In order to get the best and appropriate logo for ICASA 2019 Rwanda, the organizers are launching this contest for a creative logo for the conference. The ICASA organizers, to encourage the designer of the best logo are offering an award of 1000 USD.
The contest is open to all Africa countries. However, artiste mainly PLHIV and key populations are most encouraged to participate in this contest.

The SAA permanent Secretariat/ICASA International secretariat base on the above mentioned, will shortlist 10 best proposals of ICASA logo and this will be presented at the ICASA 2019 International Steering Committee meeting which will be held on 7 - 8 June, 2018 in Kigali for the final selection.

**PROJECT DETAILS:**

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<th>24th March, 2018</th>
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<td>CorelDraw</td>
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<td>Photoshop</td>
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<tr>
<td>Email for Submission:</td>
<td><a href="mailto:logosubmission@icasa2019rwanda.org">logosubmission@icasa2019rwanda.org</a></td>
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FORM (To be filled by the designer)

NAME OF THE PROJECT

NAME OF THE DESIGNER

CONTACT DETAILS (NAME, TELEPHONE, EMAIL ADDRESS, ADDRESS OF CONTACT PERSON, AND/OR MANAGER IF OTHER)

DATE OF SUBMISSION

PLANNED START AND END DATE

NB: after the logo submission, the winner will be announced on the 8th June 2018 at a Press conference of the ICASA 2019 first Steering committee meeting which will be held in Kigali.

II. PURPOSE FOR THEME & OBJECTIVES

The purpose of the concept note is to develop the theme and objectives of the upcoming 20th edition of ICASA which will take place in Kigali, Rwanda, from 2-7 December, 2019.

CRITERIA FOR DEVELOPING THE THEME & OBJECTIVES

• The previous ICASA 2017 theme and objectives will serve as a reference in developing the new theme and objectives for ICASA 2019.
• Also the current trends in global health, the SDG’s, the 90-90-90 goal and end of AIDS by 2030 should be factored in developing the theme and objectives of ICASA 2019.

• The theme and objectives must reflect Scientific, Leadership and Community component of ICASA

• The proposed theme should not be more than 20 words

• The objectives should not be more than 5 points

**NB: See below the previous conference Themes**

ICASA 1986 THEME: AIDS IN AFRICA
ICASA 1997 THEME: SCIENCE IN CHALLENGING AIDS
ICASA 1988 THEME: AIDS AND ASSOCIATED CANCERS IN AFRICA
ICASA 1989 THEME: EPIDEMIOLOGY OF AIDS IN AFRICA
ICASA 1990 THEME: STRUGGLE AGAINST AIDS IN AFRICA
ICASA 1992 THEME: CLEAN AND SAFE BLOOD FOR ALL
ICASA 1993 THEME: AFRICA UNITY AGAINST AIDS AND STDs
ICASA 1995 THEME: CHALLENGES AND HOPE
ICASA 1997 THEME: AIDS AND DEVELOPMENT
ICASA 1999 THEME: LOOKING INTO THE FUTURE: SETTING PRIORITIES FOR AIDS
ICASA 2001 THEME: THE COMMUNITIES COMMIT THEMSELVES
ICASA 2003 THEME: ACESS TO CARE: CHALLENGES
ICASA 2005 THEME: HIV/AIDS AND FAMILY
ICASA 2008 THEME: AFRICA’S RESPONSE: FACE FACTS
ICASA 2011 THEME: OWN, SCALE UP AND SUSTAIN
ICASA 2013 THEME: NOW MORE THAN EVER TARGETING ZERO
ICASA 2017 THEME: ENDING AIDS – DELIVERING DIFFERENTLY

THE OBJECTIVES OF ICASA 2017:

1. Promote innovation, partnerships to increase domestic investments to achieve 90/90/90 targets
2. Integrate approaches for sustainable Responses towards ending AIDS, TB, Hepatitis and associated diseases
3. Translating science into action to maximize programme impact
4. Provide a platform to Maintain and Sustain Investment for CSO and FBO’s.
5. Provide a platform to promote rights-based models to overcome structural and policy barriers towards universal access

TIMELINE FOR THE PROPOSED THEME & OBJECTIVES

The PROPOSED theme and objectives should be sent to the email below, before 31st May, 2018
Email: programme1@icasa2019rwanda.org
The proposed themes and objectives will be finalized at the upcoming 1st International Steering Committee (ISC) meeting.
Date: 7TH-8TH JUNE, 2018
Venue: Kigali Convention Centre

Luc Armand Bodea
ICASA 2019 Director
Coordinator
Permanent Secretariat Society for AIDS in Africa (SAA)
ICASA Organizer
Accra- Ghana

Office Direct: (+233) (0)302913739
Email: lucbodea@saafrica.org
Website: www.icasa2019rwanda.org
20th Edition: ICASA 2019 RWANDA
Date: 3-7 December 2019
### 1. ICC: International Co-ordinating Committee

<table>
<thead>
<tr>
<th>Person</th>
<th>E-mail</th>
<th>Designation</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof. John Idoko</td>
<td><a href="mailto:jonidoko@yahoo.com">jonidoko@yahoo.com</a></td>
<td>ICASA 2019 President</td>
<td>Nigeria</td>
</tr>
<tr>
<td>Dr. Namwinga Chintu</td>
<td><a href="mailto:namwingac@hotmail.com">namwingac@hotmail.com</a></td>
<td>SAA</td>
<td>Zambia</td>
</tr>
<tr>
<td>Mr. Luc Bodea</td>
<td><a href="mailto:lucbodea@yahoo.fr">lucbodea@yahoo.fr</a></td>
<td>SAA</td>
<td>Ghana</td>
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<td>Dr. Nyemazi Jean Pierre</td>
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<tr>
<td>Prof. Jeanine Condo</td>
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<tr>
<td>Dr. Sabin Nsanzimana</td>
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### 2. ISC: International Steering Committee

**President et Vice-President de la Conference**

<table>
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<tr>
<td>Prof. John Idoko</td>
<td><a href="mailto:jonidoko@yahoo.com">jonidoko@yahoo.com</a></td>
<td>SAA President/ ICASA 2019 President</td>
<td>Nigeria</td>
</tr>
<tr>
<td>Hon. Dr. Diane Gashumba</td>
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<td>ICASA 2019 Vice President</td>
<td>Rwanda</td>
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**SAA Representatives**

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<td>Prof. James Hakim</td>
<td><a href="mailto:jhakim2000@yahoo.com">jhakim2000@yahoo.com</a></td>
<td>SAA</td>
<td>Zimbabwe</td>
</tr>
<tr>
<td>Prof. Tandakha Ndiaye Dieye</td>
<td><a href="mailto:tndieye@yahoo.co.uk">tndieye@yahoo.co.uk</a></td>
<td>SAA</td>
<td>Senegal</td>
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<tr>
<td>Hon. Dr. Pagwesese David Parirenyatwa</td>
<td><a href="mailto:pagwepari@gmail.com">pagwepari@gmail.com</a></td>
<td>SAA</td>
<td>Zimbabwe</td>
</tr>
<tr>
<td>Prof. Samuel Elias Kalluvya</td>
<td><a href="mailto:samuelkalluvya@yahoo.com">samuelkalluvya@yahoo.com</a></td>
<td>SAA</td>
<td>Tanzania</td>
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<tr>
<td>Dr. Meskerem Bekele Grunitzky</td>
<td><a href="mailto:meskeremgb@gmail.com">meskeremgb@gmail.com</a></td>
<td>SAA</td>
<td>Togo</td>
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<tr>
<td>Mr. Niyi Ojuolape</td>
<td><a href="mailto:ojuolape@unfpa.org">ojuolape@unfpa.org</a></td>
<td>SAA</td>
<td>Nigeria</td>
</tr>
<tr>
<td>Mrs. Sahra Guleid</td>
<td><a href="mailto:sgulaid12@gmail.com">sgulaid12@gmail.com</a></td>
<td>SAA</td>
<td>Somalia</td>
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<td>Prof. Serge Eholie</td>
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<td>SAA</td>
<td>Cote D’Ivoire</td>
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<tr>
<td>Dr. Meskerem Bekele Grunitzky (Sponsored)</td>
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<td>SAA</td>
<td>Togo</td>
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**Rwandan Representatives**

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<td>RBC</td>
<td>Rwanda</td>
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<tr>
<td>Mrs. Sage Semafara</td>
<td>RRP+</td>
<td>Rwanda</td>
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<tr>
<td>Mrs. Sandrine Umutoni</td>
<td>Imbuto fdt</td>
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<tr>
<td>Denyse Obany</td>
<td>RCB</td>
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<td>Malick Kayumba</td>
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<td>Dr. Gene Mac Donald</td>
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<td>Dr. Betru Woldesemayat</td>
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<tr>
<td>Prof. Rulisa Stephen</td>
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### Chairs and Co-Chairs

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### 3.1. SPC: Scientific Programme Committee

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<tr>
<td><strong>Prof. Tandakha Ndiaye</strong></td>
<td>Chair Scientific Programme</td>
<td>Senegal</td>
</tr>
<tr>
<td><strong>Dr. Etienne Karita</strong></td>
<td>Co-Chair Scientific Programme</td>
<td>Rwanda</td>
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### 3.1.1. Track A: Basic science

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<tr>
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<td><strong>Dr. Annette Uwineza</strong></td>
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### 3.1.2. Track B: Clinical science, treatment and care

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<tr>
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### 3.1.3. Track C: Epidemiology and Prevention

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### 3.1.4. Track D

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### 3.2. Leadership Program Committee

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