



CALL FOR ABSTRACTS

DEADLINE FOR ABSTRACT SUBMISSIONS:
MONDAY, 2 MARCH 2026



ADVANCING THE ELIMINATION OF HIV IN SOUTH AFRICA: PROGRESS, PROGRAMMES, AND PATHWAYS TO EPIDEMIC CONTROL

The *South African Health Review* (SAHR) invites authors to submit abstracts for a special edition dedicated to examining South Africa's efforts to eliminate HIV. This edition will provide a rigorous, evidence-based assessment of the programmes, policies, innovations, and system-level interventions shaping the country's trajectory toward ending AIDS as a public health threat.

Background

South Africa has made significant progress in HIV prevention, treatment, and care driven by expanded ART access, strengthened prevention initiatives, and ongoing community engagement. New biomedical tools, including long-acting PrEP such as the twice-yearly lenacapavir injection, are further transforming the prevention landscape. Yet challenges persist: treatment gaps, systemic disruptions, stigma, inequities affecting key and vulnerable populations, and co-morbidities associated with long-term survival.

With global and national targets converging on HIV elimination, this special edition aims to document progress, interrogate remaining constraints, and propose clear pathways toward epidemic control.

Focus of this Edition

We welcome abstracts that:

- document and critically assess South Africa's HIV programmes and policies;
- examine the effectiveness, scalability, and sustainability of interventions;
- analyse persistent challenges and propose solutions;
- provide insights from researchers, implementers, policymakers, clinicians, and civil society leaders.

Priority Themes

Abstracts may address (but are not limited to) the following areas:

- **Prevention (including biomedical prevention strategies)**

PrEP rollout (including long-acting PrEP), PEP, VMMC, condom programming, behavioural interventions, and emerging biomedical prevention technologies.

- **Testing and Early Diagnosis**

Innovations in community-based testing, HIV self-testing, differentiated testing models, linkage to care, and surveillance systems.

- **Treatment and Care**

ART optimisation, differentiated service delivery, retention and adherence strategies, and interventions supporting population-level viral suppression.

- **Key and Vulnerable Populations**

Programmes for adolescent girls and young women, youth, key populations, pregnant women, high-burden communities, and strategies to address social and structural drivers of vulnerability.

- **Health Systems Strengthening**

Workforce capacity, financing, supply chain resilience, service integration (including management of co-morbidities), digital health innovations, data for decision-making, community-led monitoring, treatment literacy, peer navigation, demand creation, and social mobilisation.

- **Pathways to Elimination**

Analyses of what it will take for South Africa to achieve the 95-95-95 targets, prevent vertical transmission, close the treatment gap, integrate new prevention tools, and reach epidemic control.

Please take note of the following:

- The body of the abstract may not exceed 300 words.
- To submit an abstract, please use our online [template](https://docs.google.com/forms/d/e/1FAIpQLSdKUtdADQWR2_ULu0dV995vnQxIUf4OXdUB6lmg7tq0kPJ9g/viewform?usp=publish-editor).
(https://docs.google.com/forms/d/e/1FAIpQLSdKUtdADQWR2_ULu0dV995vnQxIUf4OXdUB6lmg7tq0kPJ9g/viewform?usp=publish-editor)
- Submission of an abstract to the SAHR does not guarantee acceptance. All abstracts will undergo a systematic selection process.

For more information, visit: www.hst.org.za/sahr or contact sahr@hst.org.za