



2011 African American and Hispanic Leadership Conference on HIV/AIDS

Get Educated. Get Tested.

Get Involved. Get Treated.

CALL FOR ABSTRACTS

The Cabinet for Health and Family Services, Department for Public Health is proud to announce the African American and Hispanic Leadership Conference. The conference will be held October 24-26, 2011, at the Galt House Hotel in Louisville, KY. The theme for the conference is “**Get Educated. Get Tested. Get Involved. Get Treated.**” As the only one of its kind in Kentucky, this conference presents a unique opportunity for the community, community-based organizations, local, state and federal agencies, and others in the field of HIV/AIDS and Hepatitis to come together and focus on improving the services available to persons infected with and affected by HIV disease.

We invite you to share your knowledge and expertise on strategies to build a stronger network and join us in making this year’s conference a success. We look forward to seeing you in October as a participant and/or as a presenter.

ABSTRACT SUBMISSION

Abstract submissions for concurrent sessions on Thursday and Friday, October 24-26, 2011, should exemplify current best practices; present new issues or topics; innovative ways of viewing traditional issues; or research that substantiates, promotes, and advances the work in the field of HIV and Hepatitis. Sessions are 75 minutes in length.

You may submit more than one abstract. (Please submit a separate submission form for each abstract you wish to have considered.) A Curriculum / Vitae for each presenter must accompany all submissions.

All abstracts must be received by the Kentucky Department for Public Health (KDPH) by Wednesday, September 21, 2011. Submissions will be accepted by mail or e-mail. You will be notified, in writing, on or before October 1, 2011, if the abstract(s) you submit is accepted by the conference planning committee.

Mail to: Merinda Brown, Michael Hambrick or Beverly Mitchell
HIV/AIDS Branch
275 East Main Street, HS2E-C
Frankfort, KY 40621

If you have any further questions please call 1-800-420-7431.

Submission Guidelines

PRIMARY PRESENTER

We are soliciting proposals from presenters who can provide specific strategies and practical connections to the conference theme “**Get Educated. Get Tested. Get Involved. Get Treated.**” Please include a Curriculum / Vitae for the primary presenter. A Curriculum / Vitae must accompany each abstract submitted. The primary presenter will serve as the contact for all correspondence regarding session proposal acceptance, scheduling, changes, room notification, and audio-visual requests and will notify any additional presenters of the above. **Presenters must provide their own handouts and cover all travel and lodging expenses. The cost for the Primary Presenter to attend the conference is free. However, if the presentation requires more than one presenter, the cost is \$45 for each additional presenter.**

DESCRIPTION

Please describe the content of your presentation and the types of learning activities in which the participants will be engaged. Please limit your description to three pages. Identify at least three intended objectives for participants. Examples of objectives are listed below:

1. Participants will be able to describe the need and impact of support groups.
2. Participants will be able to explain 3 methods to reduce the risk of HIV transmission.
3. Participants will be able to list 3 potential barriers to the care of HIV + women.

TITLE AND PROGRAM SUMMARY

The title and a 50-75 word description should accurately reflect the content, activities, and anticipated outcomes of your session. We reserve the right to edit titles and descriptions for use in the conference program.

Abstracts should be typed. Please use 8.5 x 11 paper only.

AUDIENCE

Please identify your target audience. (e.g. Physicians, Nurses, Case Managers, PLWA's)

ADDITIONAL PRESENTERS

Please provide a Curriculum / Vitae for additional presenters and complete the attached “Additional Presenters Sheet”.

TRACKS

The following is a list of this Conference Track.

1. **Leadership**
2. **Linkage to Care**
3. **Faith, Culture, & Stigma**
4. **Social Determinants**
5. **Gender & Sexuality**
6. **Quality of Life**
7. **Viral Hepatitis**

TRACKS

This is a list of suggested Topics provided by the Conference Committee:

Transgender	Sexually Transmitted Diseases	MSM
SSI/SSDI	HIV in the Correctional Industry	Women and HIV
Advocacy	Housing	Aging and HIV
Immigration	Substance Abuse	Youth and HIV
Mental Health	Cultural Competency	Social Media
Hepatitis A, B and C		

****Abstract submissions are not limited to the topics suggested above****

OUTLINE OF CONFERENCE

Date	Time	Type of Session	Description
Sunday, October 23, 2011	12:30pm - 1:30pm	Hispanic Community Dialogue Lunch	Enjoy lunch, then a community dialogue for those interested in increasing HIV/AIDS Awareness, Prevention and Service activities in the Hispanic Community. (Free to the public).
	2:30pm - 5:30pm	Latino Community Dialogue	
Monday, October 24, 2011	10:00am - 10:45am	Faith-Based Conference State Opening and Future of Faith-State Partnership	A Call-to-Action for those interested in increasing HIV/AIDS Awareness, Prevention, and Service activities in the Faith-Based Community. (Free to the public).
	10:45am - 12:30pm	Community Dialogue	
	12:30pm - 1:30pm	Plenary Lunch	
	1:30pm - 4:30pm	Faith-Institute	
Tuesday, October 25, 2011	8:30am - 4:30pm	Day 1	The Day will consist of a continental breakfast, the Opening Ceremony & Welcome, Session Workshops and lunch.
Wednesday, October 26, 2011	8:00am - 3:30pm	Day 2	The Day will consist of a Plenary Breakfast, Session Workshops, lunch and the Closing.

ABSTRACT SUBMISSION FORM

African American and Hispanic Leadership Conference on HIV/AIDS

Deadline for receipt of application: **September 21, 2011**

Please mail the required forms by deadline to: Merinda

Brown, Michael Hambrick or Beverly Mitchell

HIV/AIDS Branch
275 E Main St Mail
Stop HS2E-C
Frankfort, KY 40621

E-mail to:

merinda.brown@ky.gov
michael.hambrick@ky.gov
beverly.michell@ky.gov

or Fax to:

1-502-564-9865

Complete and submit the following information. The person listed below will be considered the primary presenter. For more than one presenter, complete the "Additional Presenters Form" with appropriate information. Notification of abstract acceptance will be sent to the primary presenter only. If submitting more than one abstract, please complete an "Abstract Submission Form" for each.

(Please Type)

Name: _____ Credentials: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Email: _____

Please check one of the following:

1. Topic(s) (please indicate one):

1. _____

2. _____

2. What day and time slot would you like to present, if available: _____

Morning (9am to 12pm) _____

Afternoon (1pm to 4pm) _____

3. Have you presented this topic before?

____ Yes ____ No

If yes, name and year of meeting(s) _____

4. What level will you be presenting (select only one)?

____ Introduction

____ Intermediate

____ Advanced

5. Are you willing to repeat your session if requested?

____ Yes ____ No

6. Audio Visual equipment needed:

____ Overhead Projector/Proxima

____ Laptop

____ Screen

____ Flip Chart/Easel/Markers

____ Other: _____

****Presenters are responsible for transparencies and handouts.**

7. Abstract: (please attach)

ADDITIONAL PRESENTERS SHEET

Name: _____ Credentials: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Email: _____

Name: _____ Credentials: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Email: _____

Name: _____ Credentials: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Email: _____

Name: _____ Credentials: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Fax: _____

Email: _____