



# STI&HIV 2025 World Congress

## *Sexual Health for All*

July 26-30, 2025  
Montreal, Canada



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## Conference Summary

### *Sexual Health for All*

#### International Advisory Committee

| Name                            | Congress Participation                             |
|---------------------------------|----------------------------------------------------|
| Jo-Anne Dillon, Canada          | Congress Co-President                              |
| Marc Steben, Canada             | Congress Co-President                              |
| Adele Schwartz-Benzaken, Brazil | Senior Advisor                                     |
| Bradley Stoner, USA             | Senior Advisor                                     |
| Francis J. Ndowa, Zimbabwe      | Senior Advisor                                     |
| Khalil Ghanem, USA              | Senior Advisor                                     |
| Margaret Kisikaw Piyêsî, Canada | Senior Advisor                                     |
| Remco Peters, Switzerland       | Scientific Program Committee Co-Chair              |
| Yonatan Grad, USA               | Scientific Program Committee Co-Chair              |
| Ina Park, USA                   | Communication & Promotion Committee Chair          |
| Yukabi C. Manabe, USA           | Sponsorship Committee Chair                        |
| Nitika Pai, Canada              | Scholarship Committee Chair                        |
| Odile Harrison, UK              | Trainee & Early Career Researchers Committee Chair |
| George-Sorin Tiplica, Romania   | Awards Committee Chair                             |
| Patricia Garcia, Peru           | Community Outreach Committee Chair                 |
| Cara Spence, Canada             | Community Outreach Committee Chair                 |

## Basic & Laboratory Sciences Program Committee

| Name                        | Congress Participation |
|-----------------------------|------------------------|
| Caroline Cameron, Canada    | Track Chair            |
| Christopher Tang, UK        | Track Member           |
| David Koelle, USA           | Track Member           |
| Pingyu Zhou, China          | Track Member           |
| Sanjay Ram, USA             | Track Member           |
| Sinaye Ngcapu, South Africa | Track Member           |

## Behavioral & Social Sciences Program Committee

| Name                         | Congress Participation |
|------------------------------|------------------------|
| Jacky Jennings, USA          | Track Chair            |
| Kate Grabowski, USA & Uganda | Track Member           |
| Kelvin Mponda, Malawi        | Track Member           |
| Marissa Becker, Canada       | Track Member           |
| Souradet Shaw, Canada        | Track Member           |

## Clinical Sciences Program Committee

| Name                              | Congress Participation |
|-----------------------------------|------------------------|
| Michael Marks, UK                 | Track Chair            |
| Annie-Claude Labbé, Canada        | Track Member           |
| Lindley Barbee, USA               | Track Member           |
| Marti Vall Mayans, Spain          | Track Member           |
| Mithc Matoga, Malawi              | Track Member           |
| Rossaphorn Kittiyowamam, Thailand | Track Member           |

## Epidemiology Program Committee

| Name                             | Congress Participation |
|----------------------------------|------------------------|
| Rebecca Guy, Australia           | Track Chair            |
| Dvora Joseph Dovey, South Africa | Track Member           |
| Ghina Mumtaz, Lebanon            | Track Member           |
| Janneke Heijne, Netherlands      | Track Member           |
| Joseph Cox, Canada               | Track Member           |
| Kyle Bernstein, USA              | Track Member           |
| Mat Beale, UK                    | Track Member           |
| Weiming Tang, USA & China        | Track Member           |

## Policy & Community Engagement Program Committee

| Name                          | Congress Participation |
|-------------------------------|------------------------|
| Joseph Tucker, USA            | Track Chair            |
| Alison Footman, USA           | Track Member           |
| Fola Akinsolu, Nigeria        | Track Member           |
| Lianne Gonsalves, Switzerland | Track Member           |
| Mark Gilbert, Canada          | Track Member           |
| Rena Janamnuysook, Thailand   | Track Member           |

## Implementation Sciences Program Committee

| Name                              | Congress Participation |
|-----------------------------------|------------------------|
| Angelica Espinosa Miranda, Brazil | Track Chair            |
| Chido Dzova Chikwari, Zimbabwe    | Track Member           |
| Gary Whitlock, UK                 | Track Member           |
| Jason Ong, Australia              | Track Member           |
| Matthew Hogben, USA               | Track Member           |
| Nitika Pant Pai, Canada           | Track Member           |
| Pamela Gaspar, Brazil             | Track Member           |

## Communication & Promotion Committee

| Name                          | Congress Participation |
|-------------------------------|------------------------|
| Ina Park, USA                 | Committee Chair        |
| Anastasia Unitt, UK           | Committee Member       |
| Fred Wyand, USA               | Committee Member       |
| Lauren Maggard, USA           | Committee Member       |
| Mandikudza Tembo, Zimbabwe    | Committee Member       |
| Meena Ramchadani, USA         | Committee Member       |
| Rayner Kay Jin Tan, Singapore | Committee Member       |
| Vinicius Borges, Brazil       | Committee Member       |

## Sponsorship Committee

| Name                       | Congress Participation |
|----------------------------|------------------------|
| Yukari C. Manabe, USA      | Committee Chair        |
| Angelika Stary, Austria    | Committee Member       |
| Janet Wilson, UK           | Committee Member       |
| Jean-Pierre Routy, Canada  | Committee Member       |
| Jeff Klausner, USA         | Committee Member       |
| Max Chernesky, Canada      | Committee Member       |
| Patrick Sullivan, USA      | Committee Member       |
| Tanya Applegate, Australia | Committee Member       |

## Scholarship Committee

| Name                       | Congress Participation |
|----------------------------|------------------------|
| Nitika Pant Pai, Canada    | Committee Chair        |
| Adele Benzaken, Brazil     | Committee Member       |
| Francis Ndowa, Zimbabwe    | Committee Member       |
| Jonathan Mermin, USA       | Committee Member       |
| Jørgen Jensen, Denmark     | Committee Member       |
| Laura Sycuro, Canada       | Committee Member       |
| Marissa Becker, Canada     | Committee Member       |
| Patricia Garcia, Peru      | Committee Member       |
| Pingyu Zhou, China         | Committee Member       |
| Seema Sood, India          | Committee Member       |
| Sevgi O Aral, USA          | Committee Member       |
| Suma Nair, India           | Committee Member       |
| Tanya Applegate, Australia | Committee Member       |

## Trainee & Early Career Researcher Committee

| Name                        | Congress Participation |
|-----------------------------|------------------------|
| Odile Harrison, UK          | Committee Chair        |
| Aamirah Mussa, Botswana     | Committee Member       |
| Alex de Voux, South Africa  | Committee Member       |
| Elizabeth McClymont, Canada | Committee Member       |
| Karen Lithgow, Canada       | Committee Member       |
| Kevin Martin, Zimbabwe      | Committee Member       |
| Smritee Dabee, Canada       | Committee Member       |
| Tatum Mortimer, USA         | Committee Member       |

## Community Outreach Committee

| Name                             | Congress Participation |
|----------------------------------|------------------------|
| Patricia Garcia, Peru            | Committee Co-Chair     |
| Cara Spence, Canada              | Committee Co-Chair     |
| Albert McLeod, Canada            | Committee Member       |
| Carmen Logie, Canada             | Committee Member       |
| Claudette Cardinal, Canada       | Committee Member       |
| Margaret Kisikaw Piyesis, Canada | Committee Member       |
| Melissa Morris, Canada           | Committee Member       |
| Muluba Habanyama, Canada         | Committee Member       |
| Sugendhi del Canto, Canada       | Committee Member       |
| Abhina Aher, India               | Committee Member       |
| Ahmed Said, Kenya                | Committee Member       |
| Beverly Lawton, New Zealand      | Committee Member       |
| Carol Zavaleta, Peru             | Committee Member       |
| Dorothy Akoth Ogutu, Kenya       | Committee Member       |
| Eric Chow, Australia             | Committee Member       |
| Leandro Mena, USA                | Committee Member       |



## Congress Information

|               |                             |
|---------------|-----------------------------|
| Name of Event | STI&HIV 2025 World Congress |
| Type of Event | International Congress      |
| Event Date    | July 26-30, 2025            |
| Event Venue   | Palais de Congres           |
| Event City    | Montreal, Canada            |
| Currency      | USD                         |

## Congress Secretariat Organizing Team

|                                |                            |
|--------------------------------|----------------------------|
| Account Director               | Grit Schoenherr            |
| Project Manager                | Gertrud Jeewanjee          |
| Operations Manager             | Brian Boucher              |
| Sponsorship Manager            | Tess Brown                 |
| Fulfillment Manager            | Kana Nomoto                |
| Program Manager                | Barbara Vargas             |
| Registration & Housing Manager | Etienne Garcia-Guilluy     |
| Marketing Manager              | Asma Aouadi                |
| Graphic Design                 | Mary Byrne, Eugenia Evoyan |

# SEAN EVE

**The duo behind London studio THERE IS, led the creation of the Congress visual identity and were key advisors on strategy.**

Eve Steben & Sean Freeman's multidisciplinary practice is celebrated for its unique approach to visual storytelling. Driven by a deep passion for image-making, thoughtful creative direction, and a keen sense of balance between form & function, the British-Canadian duo is known to produce contemporary yet timeless artwork.

From advertising campaigns to pharma, music, editorial, and publishing projects, their award-winning portfolio has earned wide recognition in visual arts features and campaigns globally.



[www.sean-eve.com](http://www.sean-eve.com)  
[@there.is.studio](https://www.instagram.com/there.is.studio)

# STI&HIV 2025 World Congress

in numbers

**1,515**

participants



**72**

countries  
represented



## ROLE OF PARTICIPANTS

**596**

10+ years  
experience



**330**

5-10 years  
experience



**240**

<5 years  
experience



**367**

Student  
Postdoc



## PARTICIPANTS BY REGION

**49%**

North  
America

**12%**

Europe



**10%**  
Asia

**4%**

South  
America

**25%**

Africa

## SCIENTIFIC PROGRAM BY THE NUMBERS

**1,183**

Abstracts  
submitted



**1,124**

Abstracts  
accepted



**557**

Posters  
presented



**32.5**

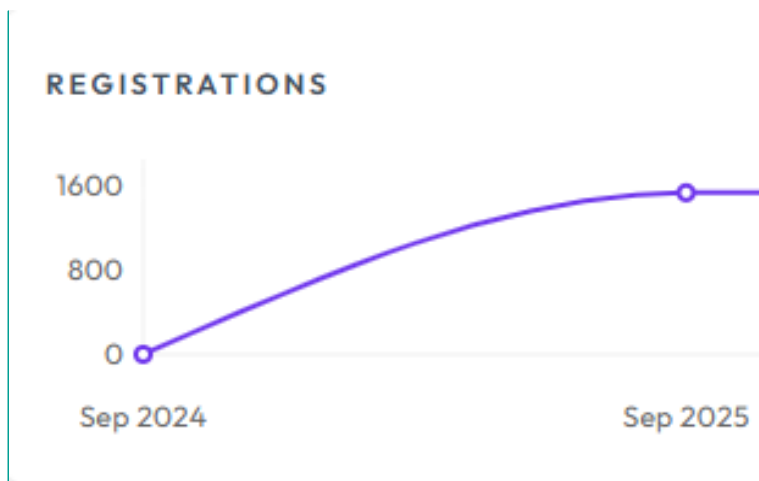
CME Credits





## Registration Summary

| Registration by Type |    |                                  |              |
|----------------------|----|----------------------------------|--------------|
| Guest Registration   | 30 | Allied Health, Registrar, etc... | 132          |
| Committee Chairs     | 19 | Student's                        | 138          |
| Congress President   | 2  | IUSTI Members                    | 244          |
| Invited Speaker      | 34 | Low Resource Country             | 346          |
| Media                | 18 | Non Member                       | 377          |
| Scholarship          | 74 | Exhibitors & Sponsors            | 77           |
|                      |    | Staff                            | 24           |
| <b>TOTAL</b>         |    |                                  | <b>1,515</b> |



## Onsite Participation Summary

|                    |       |
|--------------------|-------|
| Full Conference    | 1,384 |
| Exhibitor          | 77    |
| Guest              | 31    |
| Staff & Volunteers | 23    |

|               |              |
|---------------|--------------|
| <b>TOTAL*</b> | <b>1,515</b> |
|---------------|--------------|

## Registration Breakdown

|                             |     |
|-----------------------------|-----|
| Total Early Registrations   | 870 |
| Total Regular Registrations | 209 |
| Total Late Registrations    | 158 |
| Total Other Registrations   | 278 |

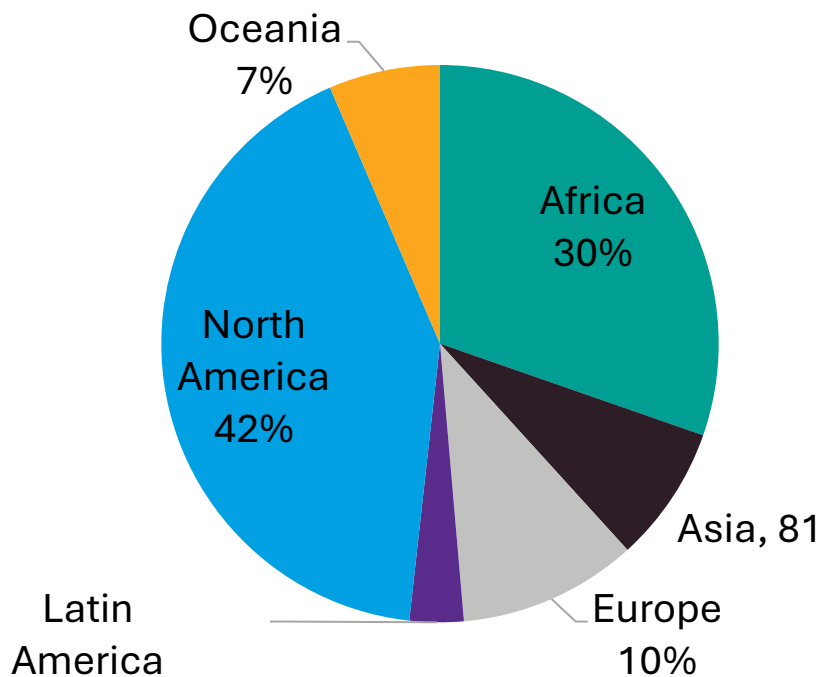
|              |              |
|--------------|--------------|
| <b>TOTAL</b> | <b>1,515</b> |
|--------------|--------------|

|                     |     |
|---------------------|-----|
| Total Cancellations | 230 |
|---------------------|-----|

# STI&HIV 2025 - Final Report

| Registration by Country |           |              |           | Total Countries | 69        |
|-------------------------|-----------|--------------|-----------|-----------------|-----------|
| COUNTRY                 | DELEGATES | COUNTRY      | DELEGATES | COUNTRY         | DELEGATES |
| United States           | 411       | Canada       | 401       | UK              | 66        |
| Australia               | 60        | Togo         | 59        | Nigeria         | 41        |
| Congo                   | 37        | Kenya        | 34        | Brazil          | 29        |
| Netherlands             | 27        | Uganda       | 22        | China           | 19        |
| Switzerland             | 18        | South Africa | 16        | Ghana           | 15        |
| France                  | 14        | Haiti        | 14        | Philippines     | 12        |
| Cameroon                | 11        | Benin        | 10        | Burundi         | 10        |
| Korea. Rep.             | 9         | Belgium      | 8         | Japan           | 8         |
| Singapore               | 8         | Italy        | 8         | Zimbabwe        | 8         |
| Denmark                 | 7         | Mozambique   | 7         | Senegal         | 7         |
| Morocco                 | 6         | New Zealand  | 6         | Germany         | 5         |
| Tanzania                | 5         | Ethiopia     | 4         | Malawi          | 4         |
| Qatar                   | 4         | Sweden       | 4         | Thailand        | 4         |
| Vietnam                 | 4         | Zambia       | 4         | Bangladesh      | 3         |
| Ivory Coast             | 3         | Madagascar   | 3         | Mongolia        | 3         |
| Poland                  | 3         | Portugal     | 3         | Nepal           | 2         |
| Virgin Islands          | 2         | Spain        | 2         | Austria         | 1         |
| Bolivia                 | 1         | Botswana     | 1         | Burkina Faso    | 1         |
| Cuba                    | 1         | Eswatini     | 1         | Georgia         | 1         |
| Hong Kong               | 1         | Indonesia    | 1         | Ireland         | 1         |
| Kazakhstan              | 1         | Lebanon      | 1         | Malta           | 1         |
| Namibia                 | 1         | Peru         | 1         | Romania         | 1         |
| Saudi Arabia            | 1         | Slovenia     | 1         | Taiwan          | 1         |

## Delegates by Region





## Housing Key Dates

Hampton Inn - cut-off date and reservations deadline: June 11, 2025

Le Westin – cut-off and cancellation deadline: June 26, 2025

## Reservation Method

Each hotel/residence provided a direct booking link which was included in the registration portal.

### Congress Hotels

| # | HOTEL NAME                      | RATING | RATE/NIGHT (CAD)<br>tax excluded |
|---|---------------------------------|--------|----------------------------------|
| 1 | Hampton Inn Montreal Downtown   | 3*     | \$289                            |
| 2 | Le Westin Montreal              | 4*     | \$299                            |
| 3 | Concordia University Residences | N/A    | \$82                             |

## Final Pick Up

### **Le Westin:**

We contracted 1,080 room nights. All of those nights were picked up and we were able to add additional rooms for a total of 1,267 booked room nights.

### **Hampton Inn:**

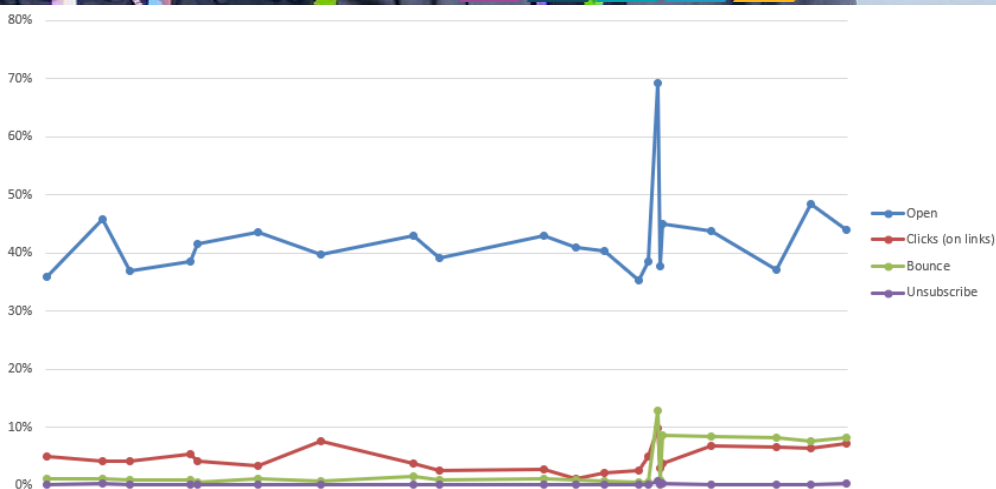
We contracted 310 room nights All of those nights were picked up and we were able to add additional rooms for a total of 330 booked room nights.

### **Concordia Residences:**

There was no contracted block at this property, but we booked approximately 80 rooms at this property.

## Marketing Activities

### Marketing Summary



### Eblast performance

We've sent 22 ebasts over a 12-month period.

Overall Performance Averages

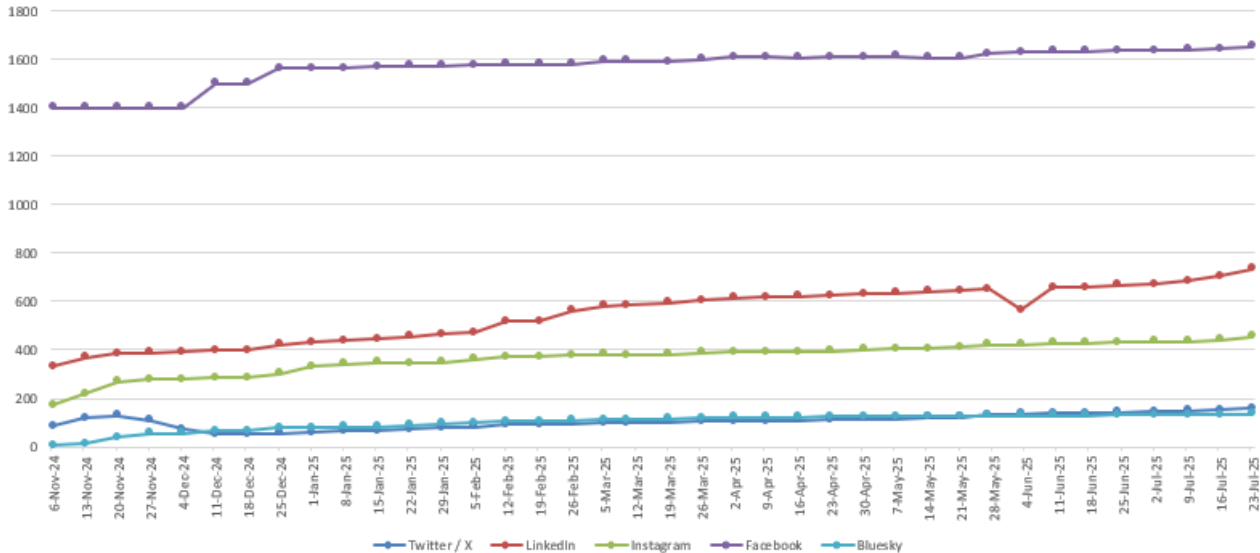
- **Open Rate: 42.3%**
  - Very strong compared to industry benchmarks (20–30%).
- **Click Rate: 4.7%**
  - Healthy engagement → CTAs are relevant.
- **Bounce Rate: 3.3%**
  - This is a normal and acceptable level.
  - The high average bounce rate reflects the uncleaned initial database. Since Dec 2025, it has averaged just 1%.
- **Unsubscribe Rate: 0.2%**
  - Very low → excellent audience retention and relevance.

### Key Updated Takeaways

1. **Bounce rates are healthy**
2. **Program- and deadline-driven emails** (abstracts, registration) deliver the best engagement → prioritize these in the comms calendar.

## Social Media-Organic – performance

We've been posting an average of 3 posts per week and managing the platforms' community



## Growth Summary

### Bluesky

- **Start:** 5 followers (Nov 6, 2024)
- **End:** 137 followers (July 31, 2025)
- **Growth Rate:** +2,640%

### Instagram

- **Start:** 171 followers
- **End:** 454 followers
- **Growth Rate:** +165.5%

### LinkedIn

- **Start:** 332 followers
- **End:** 735 followers
- **Growth Rate:** +121.4%

### Twitter / X

- **Start:** 86 followers
- **End:** 159 followers
- **Growth Rate:** +84.9%

### Facebook

- **Start:** 1,400 followers
- **End:** 1,654 followers
- **Growth Rate:** +18.1%

- Bluesky, though starting from almost zero, has shown the most dramatic relative growth, signaling strong potential for emerging platforms.
- Instagram and LinkedIn are the strongest established performers with high triple-digit growth.
- Twitter/X is growing moderately, while Facebook remains stable but with low percentage growth.

## Social Media-Paid– performance

**We ran 3 successful campaigns targeting the USA, Canada, and other regions (12% Europe, 10% Africa, 7% Asia, 6% Oceania, 5% Latin America).**

### Abstract Submission Campaign

*November 25 – December 6, 2024*

- Channels: Meta, LinkedIn, X, Google Search and Display
- Target Abstracts: 1,100
- Abstracts Submitted: 1,072
- **Performance:** Achieved 97% of the target

### Early Bird Registration Campaign

*March 23 – April 4, 2025*

- Channels: Meta, LinkedIn, X, Google Search and Display
- Target Early Registrations: 986
- Early Registrations Achieved: 916
- **Performance:** Achieved 93% of the target

### Regular Registration Campaign

*May 19 – May 30, 2025*

- Channels: Meta, LinkedIn, X, Google Search and Display
- Target Registrations: 1,210
- Registrations by June 3: 1,306
- **Performance:** Exceeded target by 8%



## Program & Abstracts

### Live and Poster Abstract Submission Process

| Submission Process                                                   | EventsAir         |
|----------------------------------------------------------------------|-------------------|
| Total Abstracts Submitted                                            | 1,211             |
| Total Abstracts Accepted for Orals                                   | 141               |
| Total Late-Breaking Accepted for Orals                               | 7                 |
| Total Abstracts Accepted for Traditional Posters                     | 924               |
| Total Abstracts Accepted for Traditional Late-Breaking Posters       | 90                |
| Total Abstracts Accepted for Oral Poster Presentations (Poster Tour) | 49                |
| Total Abstracts Rejected                                             | 60                |
| Total Abstracts Withdrawn                                            | 408               |
| Total Orals Presented                                                | 116               |
| Total Traditional Posters Presented                                  | 560               |
| Total Oral Posters Presented (Poster Tour)                           | 48                |
| Call for Presentations Launch Date                                   | September 9, 2024 |
| Abstract Submissions Closing Date                                    | January 13, 2025  |



## PROGRAM OVERVIEW

### Abstract Submission Timeline

- Abstract Submission Opening: October 1, 2024
- Abstract Submission Deadline: January 6, 2025 (23:59 EST)
- Scholarship Application Opening: October 1, 2024
- Scholarship Application Deadline: January 6, 2025 (23:59 EST)
- Abstract Notifications: January 31, 2025
- Abstract Scholarship Notifications: February 12, 2025
- Late Breaking Abstract Submission Deadline: March 14, 2025 (23:59 EDT)
- Late Breaking Abstract Notifications: April 1, 2025
- Presenting Author Confirmation and Registration Deadline: April 4, 2025 (23:59 EDT)

### Abstract Review Timeline

- Official Abstract Submission Deadline: January 6, 2025
- Extended Abstract Submission Deadline: January 13, 2025
- Online Review Opens: January 8, 2025
- Abstract Reviews Due: January 26, 2025
- Late Breaking Abstract Deadline: March 14, 2025
- Late Breaking Abstract Reviews Open: March 17, 2025
- Late Breaking Abstract Reviews Due: March 31, 2025

## PROGRAM OVERVIEW

### All Abstracts **MUST** include:

#### **TITLE**

- Comprehensive title summarizing the work presented
- Maximum 125 characters

#### **TOPIC/SUBMISSION CATEGORIES**

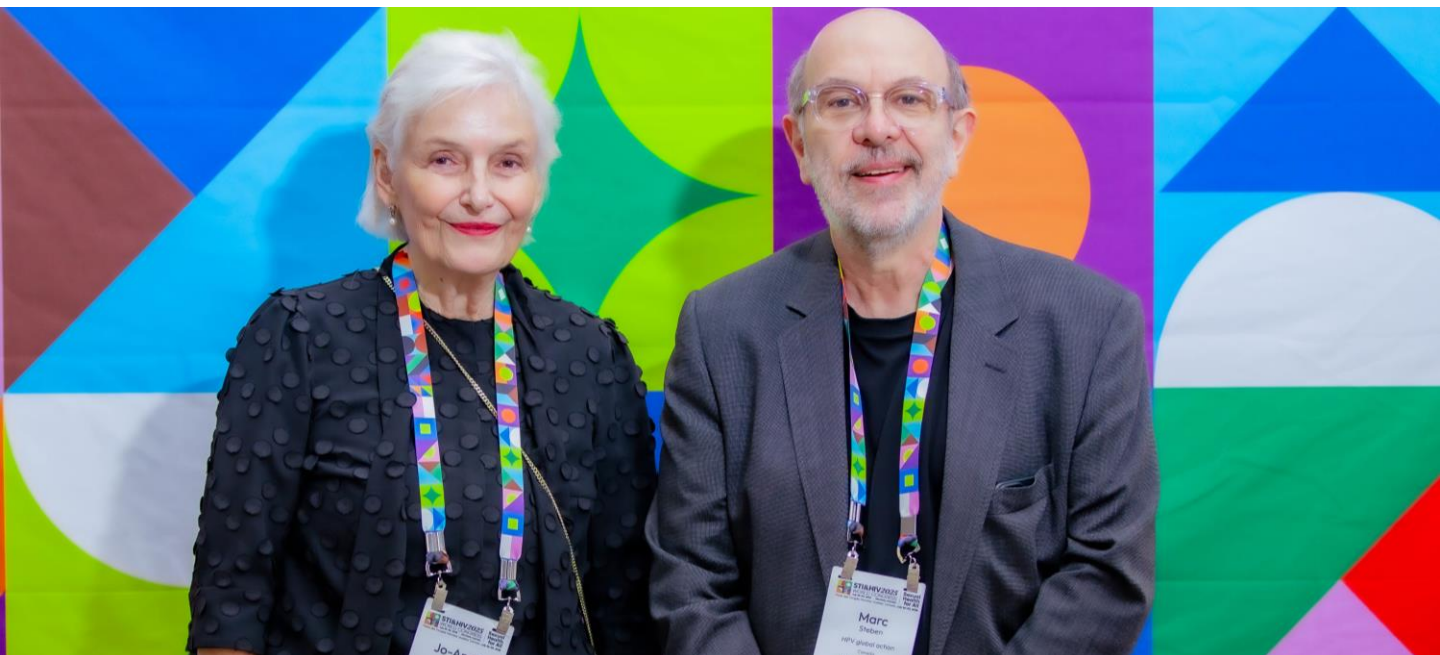
- Basic and Laboratory Sciences
- Behavioral and Social Sciences
- Clinical Sciences
- Epidemiology
- Policy & Community Engagement
- Program & Implementation Sciences

#### **AUTHORS**

- Full name and affiliation(s) are mandatory for each author.
- Indicate the name of the presenting author for the abstract.

#### **BODY OF ABSTRACT**

- Maximum 300 words (authors, title and legend for display item not included)





## PROGRAM OVERVIEW

### Abstract Formats:

#### 1. Scientific Research Format

- Background: study objectives, hypothesis tested, or description of problem.
- Methods: methods used, or approach taken.
- Results: present in summarized form, must include data and/or substantial information about results.
- Conclusion: description of main outcomes of the study. Include knowledge or insight that Congress attendees will gain from the presentation, and/or an explanation of how Congress attendees can apply the skills and/or knowledge within their communities.

#### 2. Program and Implementation Evaluation Format

- Background: description of problem and context.
- Description: methods used, intervention implemented, or approach taken.
- Findings: present quantitative and/or qualitative data in summarized and structured form.
- Conclusion: describe implications of findings and lessons learned.

### Abstract Submission by Continent:

| Continent     | Number of Countries | Number of Abstracts |
|---------------|---------------------|---------------------|
| Africa        | 29                  | 320                 |
| Asia          | 17                  | 157                 |
| Australia     | 2                   | 73                  |
| Europe        | 13                  | 95                  |
| North America | 4                   | 438                 |
| Latin America | 3                   | 102                 |



## PROGRAM OVERVIEW

### Abstract Submission by Country:

| Country           | Number | Country     | Number | Country        | Number |
|-------------------|--------|-------------|--------|----------------|--------|
| Argentina         | 2      | Guinea      | 4      | Nigeria        | 82     |
| Australia         | 68     | Haïti       | 1      | Pakistan       | 1      |
| Bangladesh        | 3      | Hong Kong   | 2      | Philippines    | 17     |
| Belgium           | 4      | India       | 38     | Qatar          | 5      |
| Botswana          | 2      | Indonesia   | 9      | Rwanda         | 4      |
| Brasil            | 99     | Iran        | 1      | Sénégal        | 1      |
| Burundi           | 1      | Ireland     | 1      | Singapore      | 7      |
| Cameroon          | 14     | Japan       | 2      | South Africa   | 26     |
| Canada            | 139    | Kazakhstan  | 2      | Spain          | 1      |
| China             | 41     | Kenya       | 41     | Sweden         | 3      |
| Colombia          | 1      | Lebanon     | 1      | Switzerland    | 5      |
| Congo-brazzaville | 2      | Lesotho     | 2      | Tanzania       | 11     |
| Congo, Dem. Rep.  | 1      | Madagascar  | 5      | Thailand       | 3      |
| Côte d'Ivoire     | 1      | Malawi      | 10     | Togo           | 1      |
| Cuba              | 3      | Mali        | 1      | Turkey         | 1      |
| Denmark           | 4      | Mongolia    | 2      | Uganda         | 40     |
| Eswatini          | 4      | Morocco     | 8      | Ukraine        | 1      |
| Ethiopia          | 6      | Mozambique  | 16     | United Kingdom | 40     |
| France            | 8      | Namibia     | 1      | United States  | 295    |
| Gambia            | 2      | Nepal       | 19     | Vietnam        | 6      |
| Georgia           | 1      | Netherlands | 23     | Zambia         | 8      |
| Germany           | 3      | New Zealand | 5      | Zimbabwe       | 5      |
| Ghana             | 18     | Niger       | 1      |                |        |

## PROGRAM OVERVIEW

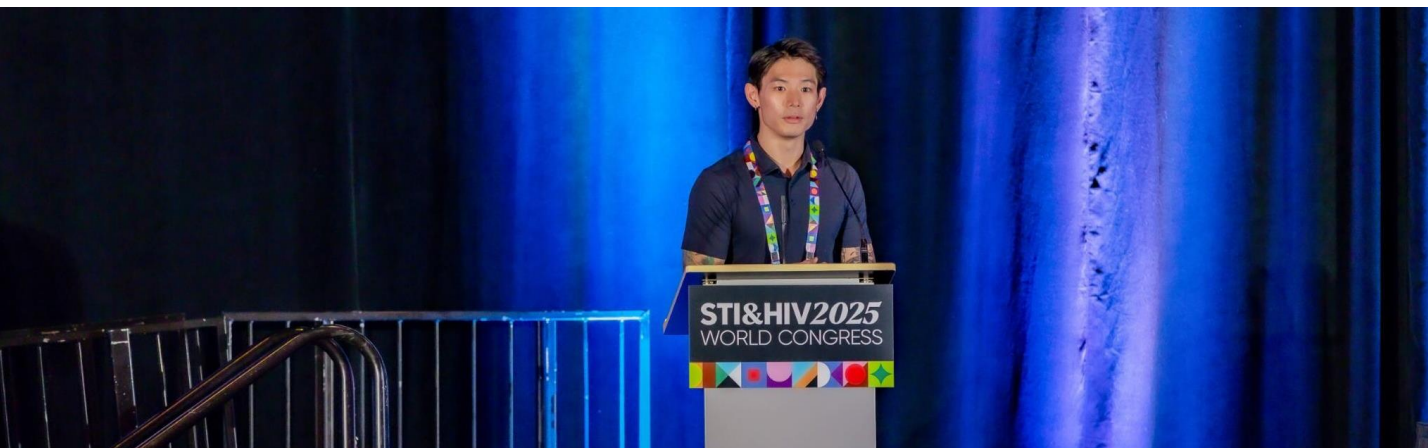
### Abstract Review Process

Reviewers were selected by the Educational Committee and then invited by the Program Manager. Reviewers were given a link to our Online Abstract Review Portal. This was a blind review, with each Abstract receiving at least 3 reviews.

### Explanation of Score

1. Do you have a personal potential conflict that prevents you from reviewing this abstract? Y/N
2. How do you rate the originality of scientific information presented in the abstract? 1-5 (1 is the lowest and 5 is highest score.)
3. How do you evaluate the scientific design of the study? 1-5 (1 is the lowest and 5 is highest score.)
4. Do you have any concerns regarding research ethics, good clinical practice standards or conflict of interest? Y/N
5. If you answered question #4 with 'yes', please let us know what your concerns are
6. On the basis of content which type of presentation do you recommend for this abstract? Y/N
7. If you have selected question #5 with "Reject", please explain briefly why the abstract should be rejected
8. Do you have any concerns about the work not being novel? (i.e. Already being presented) Y/N
9. Late-breaking Abstracts
10. Were scored as Accept or Reject





## PROGRAM OVERVIEW

### Abstract Type Allocation

Based on the Review Results (Scores), and the type that the Abstract was submitted as, Presenters were sent Notifications of Acceptance, Rejection, and Presentation Type.

### Abstract Scheduling

Abstracts were reviewed by the Education Committee – all accepted abstracts who had confirmed and registered.

Oral Abstracts and Late-Breaking Oral Abstracts were placed into Categories and themes and scheduled accordingly.

Posters were split into:

1. Posters and Late-breaking Posters
2. Oral Posters (Poster Tours)

ICS was responsible for Abstract and Speaker Management, including correspondence with all Invited Speakers and Abstract (Oral and Poster) Presenters.

## PROGRAM OVERVIEW

### Program –at-a-Glance

<https://stihiv2025.org/program/>

### Total Number of Sessions

| Session Format                        | Number of Sessions |
|---------------------------------------|--------------------|
| Poster Tour Sessions                  | 2                  |
| Oral Abstract Sessions                | 20                 |
| Submitted Workshop/ Symposia Sessions | 34                 |
| Invited Symposia Sessions             | 16                 |
| Plenary Sessions                      | 7                  |
| Keynote Presentations                 | 2                  |
| Industry Supported Sessions           | 5                  |



## PROGRAM OVERVIEW

### Presentation Guidelines

#### KEYNOTE PRESENTATION

Keynote presenters will be given the opportunity of a 60-minute presentation (questions and answer period at the end of the session, time permitting) and are asked to prepare a PowerPoint Presentation with a maximum of 60 slides (not including title, author, and disclosure slides).

#### PLENARY PRESENTATION

Plenary presenters will be given the opportunity of a 25-minute presentation (10 Q+A at the end of the session) and are asked to prepare a PowerPoint presentation with a maximum of 20 slides (not including title, author, and disclosure slides).

#### INVITED SYMPOSIA PRESENTATION

Symposia presenters were given the opportunity of a 20-minute presentation (Q+ A at the end of the session) and were asked to prepare a PowerPoint presentation with a maximum of 20 slides (not including title, author, and disclosure slides).

#### ORAL PRESENTATION

Oral presenters were given the opportunity of a 12-minute presentation (+3min questions and answer period) and were asked to prepare a PowerPoint presentation with a maximum of 10 slides (not including title, author, and disclosure slides).

#### ORAL POSTER PRESENTATION (Poster Tours)

Oral Poster presenters were given the opportunity of a 3-minute presentation (+2min questions and answer period). They were asked to prepare a poster and present next to it.

#### POSTER PRESENTERS

- Presenters must print your poster and bring it with them to the Congress.
- Poster dimensions must not exceed 4'x4'(48"X48").

Posters were displayed from **July 28 - July 30, 2025**.

#### POSTER SET UP AND TEAR DOWN

Set-up: July 27th, 8:00am - 4:00pm

Tear-down: July 30th, 2:45pm - 4:15pm

Posters **Not** collected were recycled at the end of the Congress.

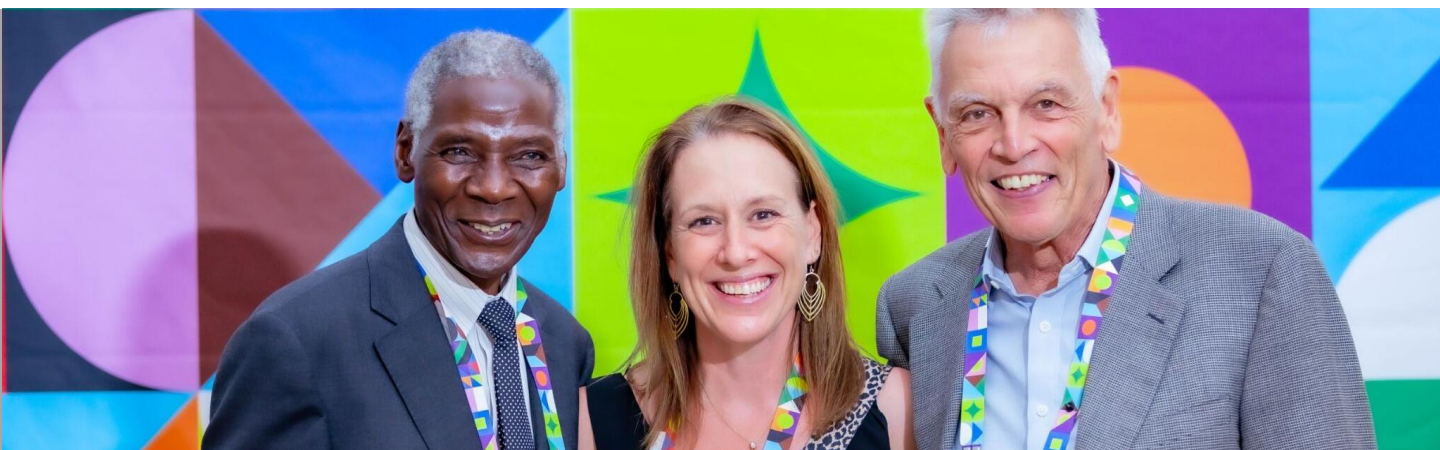


## PROGRAM OVERVIEW

### Invited Speakers by Country and Continent:

| Country + Continent | Number    | Country + Continent  | Number     |
|---------------------|-----------|----------------------|------------|
| <b>Africa</b>       | <b>39</b> | <b>Europe</b>        | <b>74</b>  |
| Ghana               | 1         | Belgium              | 2          |
| Kenya               | 9         | Denmark              | 1          |
| Madagascar          | 1         | France               | 3          |
| Malawi              | 3         | Ireland              | 1          |
| Malta               | 1         | Netherlands          | 11         |
| Nigeria             | 10        | Sweden               | 3          |
| South Africa        | 8         | Switzerland          | 17         |
| Zimbabwe            | 6         | United Kingdom       | 36         |
| <b>Asia</b>         | <b>10</b> | <b>North America</b> | <b>205</b> |
| China               | 2         | Canada               | 85         |
| Japan               | 1         | United States        | 120        |
| Lebanon             | 1         | <b>South America</b> | <b>13</b>  |
| Philippines         | 1         | Brazil               | 10         |
| Singapore           | 2         | Peru                 | 3          |
| Taiwan              | 1         |                      |            |
| Vietnam             | 2         |                      |            |
| <b>Australia</b>    | <b>28</b> |                      |            |
| Australia           | 26        |                      |            |
| New Zealand         | 2         |                      |            |

**Total Number of Invited Speakers: 349**



## PROGRAM OVERVIEW

### Submitted Workshop Symposia

| Total Sessions Submitted | 63 |
|--------------------------|----|
| Total Sessions Presented | 34 |
| Total Sessions Accepted  | 35 |
| Total Sessions Rejected  | 27 |
| Total Sessions Withdrawn | 1  |

### Submitted Workshop Symposia Submission Process

Workshops/Symposia on the pre-congress day (July 27) were either 90 or 240 minutes long, and took place at the following times:

8:00-9:30, 10:00-11:30, 13:00-14:30, 15:00-16:30 (90 minutes)

8:00-12:00, 13:00-16:00 (240 minutes)

Workshops/Symposia on the Congress days (July 28-30) were either 60 or 90 minutes long, and took place at the following times:

7:00-8:00 (60 minutes)

10:00-11:30, 14:45-16:15 (90 minutes)

All topics relevant to STI & HIV were welcomed.

Workshop/Symposia proposals that incorporate a variety of instructional approaches (e.g., lecture, interactive discussion, design-a-thons, etc.) and materials (e.g., slides, handouts, sample data) were strongly encouraged. workshops and symposia that provide practical guidance for conducting and managing team science in a variety of contexts and settings, and workshops with a focus on developing team science educational and training resources were welcomed.

## PROGRAM OVERVIEW

### Proposal Content and Format

**Proposals should include a one-page summary of the workshop/symposium, including:**

- Description of the workshop/symposium
- Statement regarding how the workshop can benefit STI&HIV 2025 World Congress attendees
- Outline of proposed materials to be distributed
- Three main objectives describing the specific skills that participants will gain from attending the workshop/symposium

**Submissions should also include the following information:**

- Title of the workshop/symposium
- Name and email of the contact person who will be responsible for Congress correspondence
- Name of proposed workshop/symposium speaker(s) with institutional affiliation and email address
- The intended audience for the workshop/symposium
- Maximum number of attendees per session (if applicable)
- Any special A/V equipment or room set up requirements (if applicable)
- Length of workshop/symposium (60, 90 or 240 minutes)





## PROGRAM OVERVIEW

### Session Chairs

Session Chairs and Moderators were selected by the Educational Committee and assigned to Sessions. There was a goal of 2 per session, one with senior experience and one with junior experience.

As a Session Chair, they were required to introduce the presenters before each presentation. Once all the presentations have ended, there were requested to moderate the session's Q+A.

**Total number of Session Chair Roles: 96**

### CME Accreditation

This event was an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada and approved by the University of Ottawa's Office of Continuing Professional Development. You may claim a maximum of 32.5 hours (credits are automatically calculated).

The Program Manager organized and created documents needed for the application.

Each session needed to have a unique survey to be completed by September 30, 2025. Certificates were sent out upon completion of the survey.

**# of delegates completed the CME Survey: 84**

## PROGRAM OVERVIEW

### Abstract Awards

#### Top scoring Oral Presenter: Odile B. Harrison, United Kingdom

This score was determined by a combined score of their final review score, and their presentation score, given by the session chairs of their session.

#### Top Scoring Posters:

| Track                                     | Name              | Country        |
|-------------------------------------------|-------------------|----------------|
| Basic and Laboratory Sciences Poster Tour | Aisha Nazli       | Canada         |
| Behavioral and Social Sciences            | Emma Harding-Esch | United Kingdom |
| Clinical Sciences                         | Thibaut Vanbaelen | Netherlands    |
| Epidemiology                              | Maartje Visser    | Belgium        |
| Policy & Community Engagement             | Yoshiko Sakuma    | United Kingdom |
| Program & Implementation Sciences         | Ana Philippus     | Brazil         |
| Early Career Posters                      | Wen Zhi Ng        | Singapore      |

This score was determined by a combined score of their final review score, per track, and their presentation score, given votes of the attendees who attended their presentation.

Each winner received a certificate and complimentary registration to the next congress.





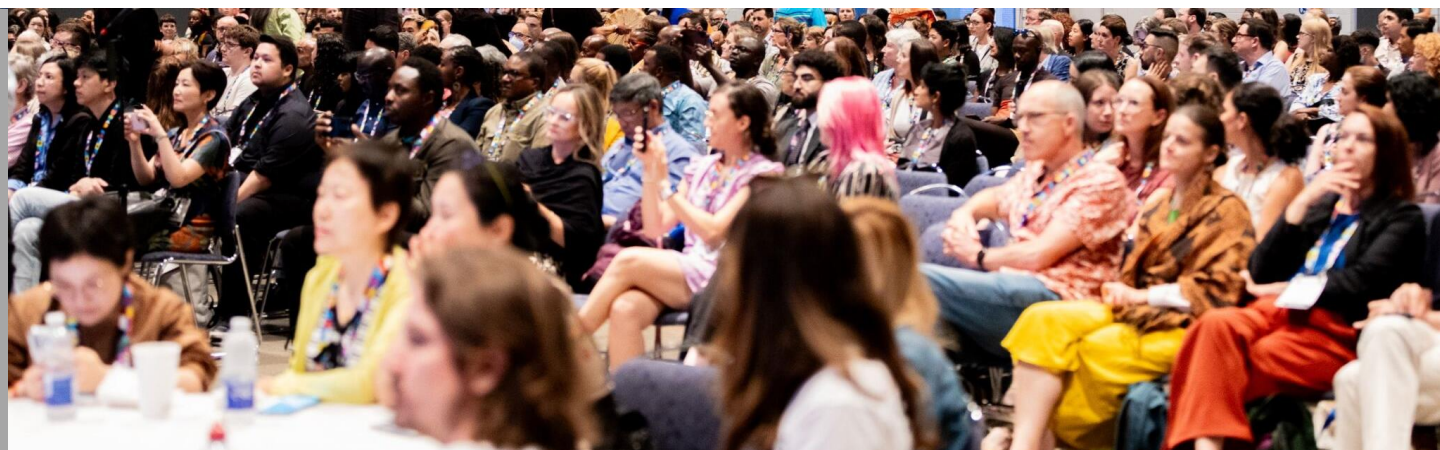
## Session Attendance July 27, 2025

|                                                                                                                                                                                 |       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| AOS01 - Methods, Tools, and Strategies for Operationalizing a Program Science Approach to Optimize Impact and Equity in Programming for HIV and Sexually Transmitted Infections | 60    |
| AOS02 - The Role of Healthcare in Responding to Sexual Violence in Low, Middle and High income settings                                                                         | 48    |
| AOS03 - STI Prevention, Testing and Treatment: A Comparative Study Across France, the US and the UK Looking at Attitudes and Approaches                                         | 56    |
| AOS04 - Sexual Health for all : The Mission of the UNESCO Chair of Sexual Health & Human Rights                                                                                 | 35    |
| SP01 - ASTDA/IUSTI-Canada Early Career Development Symposium                                                                                                                    | 56    |
| AOS05 - The Atlas of Queer Anatomy (AQuA) Workshop                                                                                                                              | 80    |
| AOS06 - The Time Has Come for Multipurpose Prevention Technologies (MPTs): Transforming STI/HIV Prevention                                                                      | 100   |
| AOS07 - International ECR Workshop: STI & HIV Research Capacity Building in Low- and Middle-Income Countries                                                                    | 25    |
| AOS08 - Understanding and Addressing Bacterial Sexually Transmitted Infections Among People Who Use Drugs and People Who Are Incarcerated                                       | 130   |
| AOS09 - Achieving Health Equity in STI Care – Considerations of the Impact of Self-Care                                                                                         | 50    |
| AOS10 - Co-creation and STIs: A Participatory Workshop                                                                                                                          | 50    |
| AOS11 - Looking Down the Road: Development and Distribution of a Syphilis Vaccine                                                                                               | 135   |
| AOS12 - Culturally Relevant and Effective Research Responses to Emerging and Reemerging Infections: Advancing the Government of Canada's STBBI Action Plan Priorities           | 75    |
| Welcome Ceremony                                                                                                                                                                | 1,000 |
| KN01 - Opening Keynote Lecture                                                                                                                                                  | 1,000 |



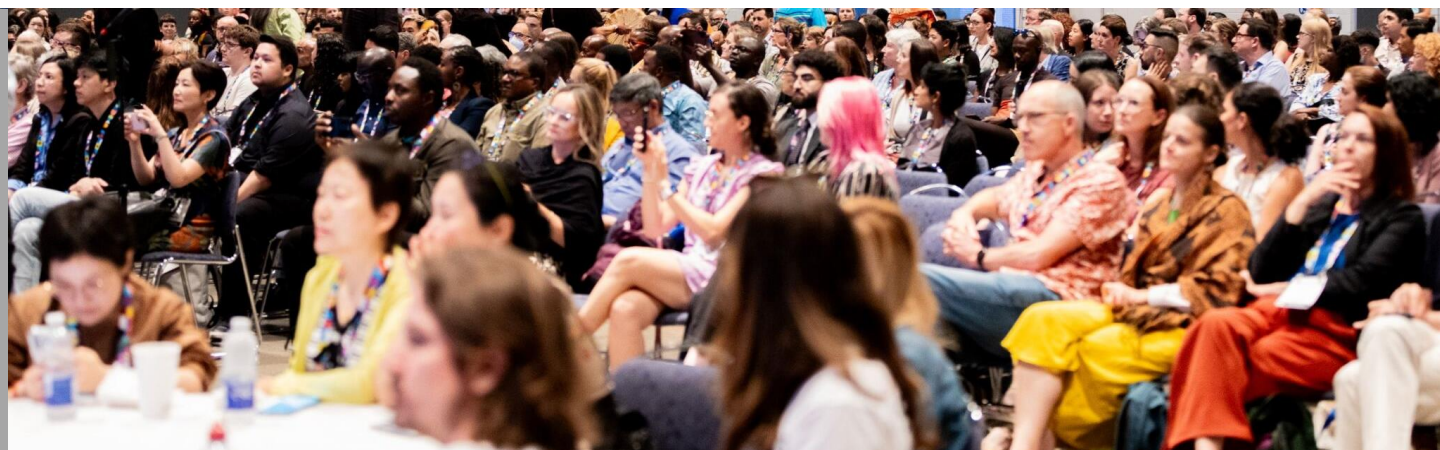
## Session Attendance July 28, 2025

| AOS15 - Unlocking the Potential of Viability Testing for Sexually Transmitted Infections                                                             | 56  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| AOS16 - Everything in the World Is About Sex, Except Sex: Power, Identity and Exclusion – Psychologically Informed Work on Marginalised Communities. | 35  |
| ISS01 - The Critical Role of Accurate Vaginitis and STI Diagnosis: Addressing Women's Health Through Molecular Diagnostics                           | 35  |
| ISS02- Navigating STI Diagnostics: When to Choose Point-of-Care and When to Choose Centralised Lab Testing                                           | 50  |
| PL01 - Historical and Contemporary STI Accounts                                                                                                      | 350 |
| OA01 - Breaking Barriers: Advances in HIV Prevention                                                                                                 | 46  |
| OA02 - Innovations in Sexual Health Delivery Through Pharmacies, Telemedicine, and Digital Tools                                                     | 63  |
| OA03 - Surveillance and Global Epidemiology Trends                                                                                                   | 60  |
| SP02 - WHO Research Priorities for STIs: Advancing the Global Agenda for Syphilis Research                                                           | 75  |
| SY01 - STI Screening: Why, Who and How?                                                                                                              | 105 |
| SY02 - Human Rights and Sexual Reproductive Health                                                                                                   | 58  |
| SY03 - HPV: Advances in Control and Towards Global Elimination                                                                                       | 50  |
| PL02 - The Future of STIs in the Changing Global Health and Funding Landscape.                                                                       | 400 |
| PL03 - Co-creation in the STI Response                                                                                                               | 400 |
| LBA01 - Late-breaker Abstract Session                                                                                                                | 50  |



## Session Attendance July 28, 2025

| OA05 - Teen Talk: Addressing Adolescent Sexual Health Challenge                                                                                       | 85 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| SP03 - Visions for the Future: Community-Led Solutions                                                                                                | 19 |
| SY04 - STIs in Indigenous and Migrant Populations                                                                                                     | 45 |
| SY05 - Molecular Epidemiology: Implications for Disease Control                                                                                       | 82 |
| SY06 - Advances In Syphilis Pathogenesis, Diagnostics and Treatment                                                                                   | 85 |
| PT01 - Basic and Laboratory Sciences Poster Tour                                                                                                      | 43 |
| PT02 - Behavioral and Social Sciences                                                                                                                 | 30 |
| PT03 - Clinical Sciences                                                                                                                              | 32 |
| PT04 - Epidemiology                                                                                                                                   | 45 |
| AOS27: Back to the Future: Diagnostics 4.0 for STIs/HIV for Equity                                                                                    | 80 |
| AOS17 - Informing STBBI Elimination Through Biobehavioural Surveys and Enhanced Surveillance Among Gay, Bisexual, and Other Men who have Sex with Men | 90 |
| SP04 - Early Career Networking Workshop                                                                                                               | 32 |



## Session Attendance July 29, 2025

| AOS19 - Ending Syphilis in the Americas: A Call to Action                                                                       | 22  |
|---------------------------------------------------------------------------------------------------------------------------------|-----|
| AOS20- Swallowing the Evidence About the Throat for Oropharyngeal Gonorrhoea                                                    | 85  |
| ISS06- Pioneering New Standards in Vaginitis Care                                                                               | 34  |
| ISS07 - How Can the Needle Move on HPV Infection & Cancer Mitigation? A Dialogue on HPV Prevention Methods in Adult Populations | 16  |
| PL04 - Looking Forward in Sexual Health                                                                                         | 300 |
| OA06 - The Microbiome & STIs: Understanding the Connection                                                                      | 200 |
| OA07 - Cracking the Code: Mathematical Models in STI & HIV Research                                                             | 60  |
| OA08 - On the Move: Sexual Health Services for Migrants & Refugees                                                              | 70  |
| SP05 - Towards STI POC Testing to Optimize Syndromic Management in LMICs                                                        | 90  |
| SY07 - Mpox and Other (Re)emerging STIs                                                                                         | 75  |
| SY08 - Country Initiatives in Elimination of HIV, Syphilis and Hepatitis B                                                      | 55  |
| SY09 - Service Models for Person-Centred Care                                                                                   | 40  |
| ASTADA AWARDS LUNCHEON                                                                                                          | 400 |



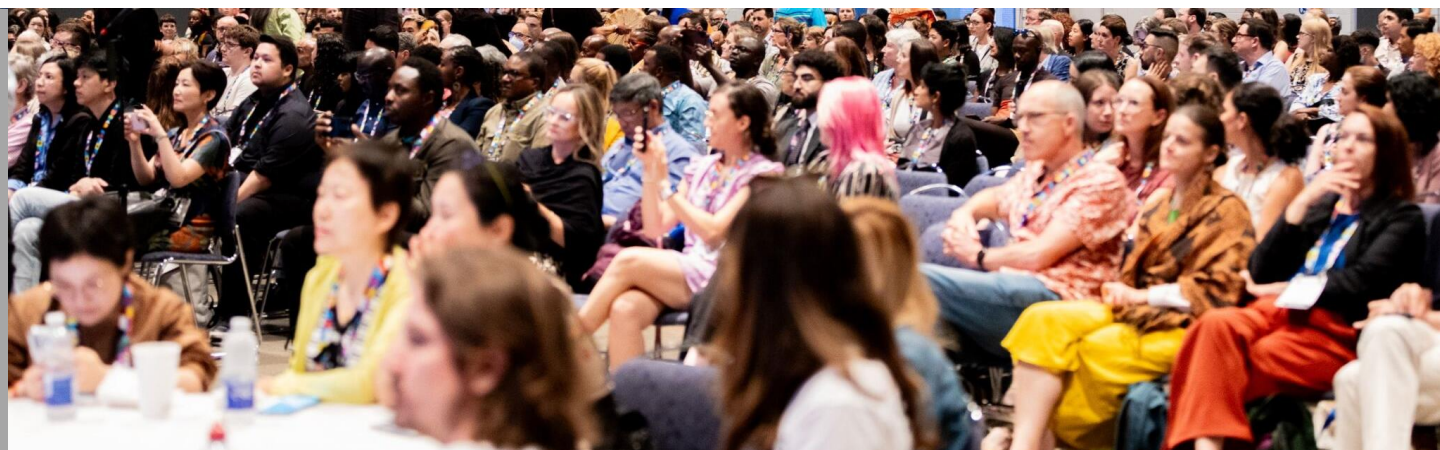
## Session Attendance July 29, 2025

| OA09 - Syphilis Immune Responses and Host-Pathogen Interactions                | 48  |
|--------------------------------------------------------------------------------|-----|
| OA10 - Navigating Stigma, Surveillance, and Community-Led Responses            | 51  |
| OA11 - Doxy-PEP in Action: Implementing STI Prevention Strategies              | 250 |
| OA12 - Syndemics Uncovered: How STIs Intersect with Other Health Crises        | 55  |
| SY10 - The Next Frontier in STI Diagnostics: Innovations and Real-World Impact | 138 |
| SY11 - Groundbreaking STI Clinical Trials                                      | 59  |
| PT05 - Policy & Community Engagement                                           | 30  |
| PT06 - Program & Implementation Sciences                                       | 41  |
| PT07 - Early Career Posters                                                    | 20  |



## Session Attendance July 30, 2025

|                                                                                                                                       |     |
|---------------------------------------------------------------------------------------------------------------------------------------|-----|
| AOS21 - Ending the Neglect: The Importance of Female Genital Schistosomiasis for quality Sexual and Reproductive Healthcare           | 23  |
| ISS08- Exploring Diagnostic Stewardship in Sexual Healthcare: Challenges and Implications for Patients, Clinicians and Public Health  | 49  |
| SP08 - Scaling Up STI Responses: New WHO Guidelines and Gonorrhoea AMR Surveillance in Focus                                          | 7   |
| PL06 - STI Vaccines: Status and Prospects                                                                                             | 350 |
| Awards Ceremony                                                                                                                       | 300 |
| OA13 - STI Care 2.0: The Future of Clinical Management                                                                                | 75  |
| OA14 - Winning the Battle: Treatment & Drug Resistance in STIs                                                                        | 110 |
| OA15 - Partner Power: Strategies for Contact Tracing & Care                                                                           | 53  |
| OA16 - Structural Barriers: Confronting Disparities in Sexual Health                                                                  | 65  |
| SY13 - Doxycycline PEP: Balancing Efficacy, Safety and Resistance in STI Prevention                                                   | 123 |
| SY14 - From Bench to Body: Innovative Models for Understanding and Combatting STIs                                                    | 55  |
| SP07 - Data Visualization for Beginners Using R                                                                                       | 40  |
| AOS22 - The Time is Now: Innovations in Sexual and Reproductive Health                                                                | 45  |
| AOS23 - Integrating Digital Sexual Health Services for STI and HIV Testing Within Different Health Systems: How Do They Fit (or Not)? | 50  |

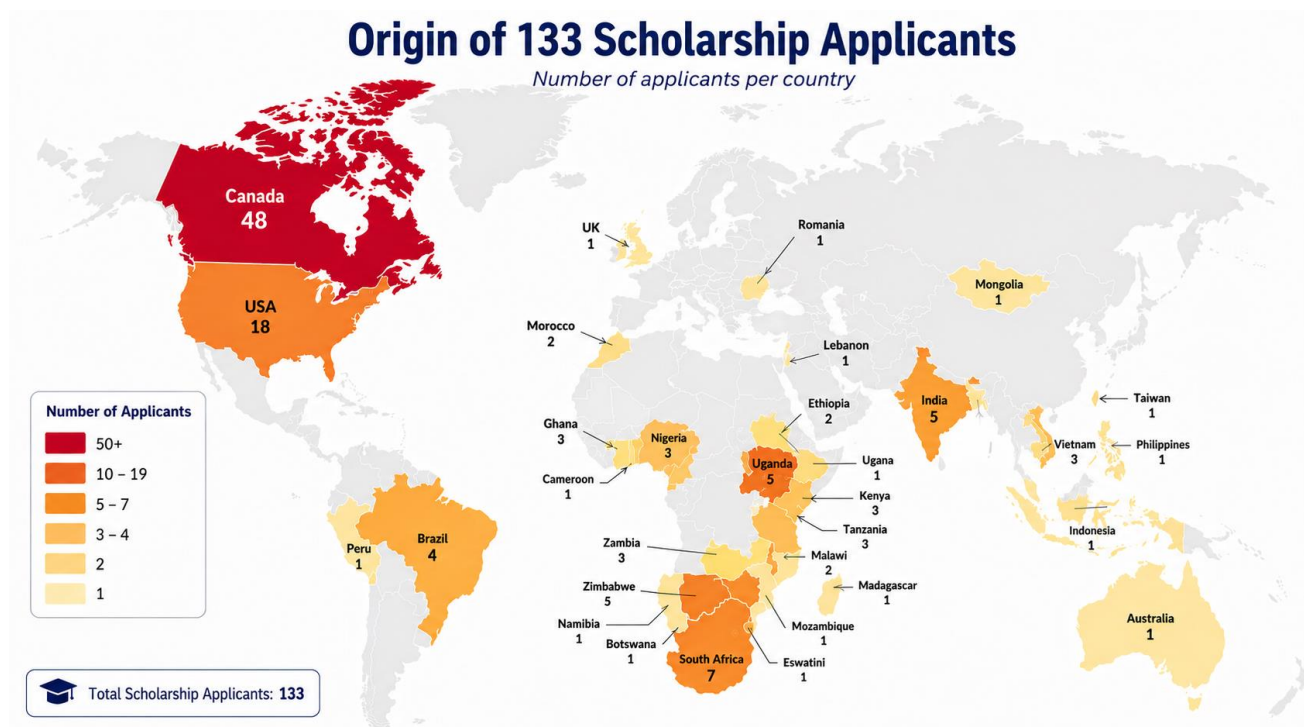


## Session Attendance July 30, 2025

| AOS24 - Towards Sensible Chlamydia Management: A Paradigm Shift From Infection to Infectious Disease Control | 90  |
|--------------------------------------------------------------------------------------------------------------|-----|
| AOS25 - No Shame in This Game: Using Filmmaking and Storytelling To Combat STI Stigma                        | 65  |
| AOS26 - Evidence-Based Strategies for Implementation of STI Diagnostic Testing in Pregnancy                  | 45  |
| PL07 - AI and Sexual Health                                                                                  | 300 |
| OA17 - The Vaccine Revolution: Innovations in STI Prevention                                                 | 34  |
| OA18 - AI & STI Care: Tech Transforming Sexual Health                                                        | 45  |
| OA19 - Syphilis Screening: From Policy to Real-World Practice                                                | 43  |
| SY15 - Microbiome, BV and STIs                                                                               | 85  |
| SY16 - Tackling Drug-Resistant Gonorrhoea                                                                    | 85  |
| SY17 - Effects of Social Determinants and STI Programmes                                                     | 44  |
| SP09 - The First WHO Report About Sexual Health at 50                                                        | 14  |
| KN02 - Closing Keynote Lecture                                                                               | 700 |
| Closing Ceremony                                                                                             | 600 |

## SCHOLARSHIPS

Through the generous support of several organizations and partners, the Congress was proud to provide a total of 133 scholarships, helping to reduce financial barriers to participation. While some scholarships covered complimentary Congress registration, others also included additional support for travel and accommodation. Thanks to this remarkable generosity, 64 delegates from low-income countries were able to attend the Congress, ensuring their voices, perspectives, and expertise were represented and enriching the global exchange of knowledge throughout the meeting.



## SCHOLARSHIPS



### 25 Delegates

were funded by a scholarship from the American Sexually Transmitted Diseases Association (ASTDA).



### 10 Delegates

were funded by a scholarship from the Canadian Institutes of Health Research Canada.



### 7 Delegates

were funded by a scholarship from Fonds de recherche Quebec.



### 15 Delegates

were funded by a scholarship from ISSTD Foundation.

## Gates Foundation

### 58 Delegates

were funded by a scholarship from the Gates Foundation.



### 18 Delegates

were funded by a scholarship from PPHF and the Provincial Health Services Authority.



## Sponsorship & Exhibition

### Sponsorship Summary (USD)

|                      | Goal               | Achieved                 | % of Goal   |
|----------------------|--------------------|--------------------------|-------------|
| Sponsorship Revenue  | 200,000 USD        | 272,500 USD              | 136%        |
| Exhibit Revenue      | 18,000 USD         | 55,300 USD               | 307%        |
| Funding Revenue      | 70,000 USD         | 293,478 USD              | 419%        |
| <b>Total Revenue</b> | <b>288,000 USD</b> | <b>610,278 USD</b>       | <b>217%</b> |
| Booths               | 34                 | 19 booths + 15 tabletops |             |

# STI&HIV 2025 - Final Report

## Sponsorship amount per supporter (In alphabetical order)

| Company                                                                 | Sponsorship (USD) | Exhibit (USD)                              | Sub-Total (USD) |
|-------------------------------------------------------------------------|-------------------|--------------------------------------------|-----------------|
| ASTDA                                                                   |                   | 1,500                                      | 1,500           |
| BD                                                                      |                   | 6,000                                      | 6,000           |
| British Association For Sexual Health And HIV (BASHH)                   |                   | 1,900                                      | 1,900           |
| CAAN                                                                    |                   | 1,900                                      | 1,900           |
| CARB-X                                                                  | 12,000            |                                            | 12,000          |
| Cepheid                                                                 |                   | 6,000                                      | 6,000           |
| Chembio Diagnostics                                                     |                   | 6,000                                      | 6,000           |
| Copan                                                                   | 6,500             | 4,500                                      | 11,000          |
| Diagnostics Direct (cancelled, but paid)                                |                   | 4,500                                      | 4,500           |
| Gilead Sciences Canada Inc.                                             | 13,000            | Supported ACCM, Meth et Realites, and REZO | 13,000          |
| Global Antibiotic R&D Partnership (GARDP)                               |                   | 1,500                                      | 1,500           |
| Herpes Cure Advocacy                                                    |                   | 1,500                                      | 1,500           |
| Hologic                                                                 | 55,000            |                                            | 55,000          |
| Johns Hopkins Center for Innovative Diagnostics for Infectious Diseases |                   | 1,500                                      | 1,500           |
| MagIC Lifescience                                                       |                   | 4,500                                      | 4,500           |
| Merck                                                                   | 55,000            |                                            | 55,000          |
| Now Diagnostics Inc                                                     |                   | 4,500                                      | 4,500           |
| Roche Molecular Systems, Inc                                            | 51,500            | 8,000                                      | 59,500          |
| Sanofi                                                                  | 8,500             |                                            | 8,500           |

## STI&HIV 2025 - Final Report

### Sponsorship amount per supporter (In alphabetical order)

| Company      | Sponsorship (USD) | Exhibit (USD) | Sub-Total (USD) |
|--------------|-------------------|---------------|-----------------|
| Seegene Inc. | 55,000            |               | 55,000          |
| VIDO         | 500               | 1,500         | 2,000           |
| ViiV         | 15,500            |               | 15,500          |
| <b>TOTAL</b> | <b>272,500</b>    | <b>55,300</b> | <b>327,800</b>  |

## Supporting Amount per Funder (In alphabetical order)

| Company                                                                  | Funding     |
|--------------------------------------------------------------------------|-------------|
| AIDS Network*                                                            | 5,000 CAD   |
| American Sexually Transmitted Diseases Association (ASTDA)               | 30,000 USD  |
| Canadian Institutes of Health Research (CIHR)                            | 20,000 USD  |
| FRSQ                                                                     | 7,500 USD   |
| Gates Foundation                                                         | 100,000 USD |
| International Society for Sexually Transmitted Diseases Research (ISSTD) | 20,000 Euro |
| Pacific Public Health Foundation (PPHF)                                  | 20,051 CAD  |
| Public Health Agency of Canada (PHAC)                                    | 150,000 CAD |
| Tourism Montréal                                                         | 72,000 USD  |
| Tourism Laval                                                            | 7,000 CAD   |
| Tourism Quebec                                                           | 5,000 CAD   |

*\*At the time this report was prepared, the money was not yet received*

## Sponsorship Summary

The Congress was supported by four GOLD-level, one BRONZE-level, and three QUARTZ-level sponsors. They supported offering additional content through hosting Industry-Supported Symposia, digital marketing, and enhancing networking opportunities during the Congress.

## Sponsors

### GOLD

**HOLOGIC®**



### BRONZE



### QUARTZ



## Level Sponsorship Overview

In addition to acknowledgement on the Congress website, email marketing, mobile app and onsite materials, sponsors reaching a certain level received the following benefits.

### Alexandrite (Minimum 150,000 USD)

#### Benefits:

- 8 complimentary Congress registration badges
- 6 complimentary tickets to the Congress Gala Dinner
- Verbal Acknowledgement by a Co-President during Opening Session

No Sponsor

### Diamond (Minimum 100,000 USD)

#### Benefits:

- 6 complimentary Congress registration badges
- 4 complimentary tickets to the Congress Gala Dinner
- Verbal Acknowledgement by a Co-President during Opening Session

No Sponsor

### Platinum (Minimum 75,000 USD)

#### Benefits:

- 5 complimentary Congress registration badges
- 2 complimentary tickets to the Congress Gala Dinner

No Sponsor

### Gold (Minimum 55,000 USD)

#### Benefits:

- 4 complimentary Congress registration badges

### Silver (Minimum 35,000 USD)

#### Benefits:

- 3 complimentary Congress registration badges

No sponsor

### Bronze (Minimum 15,000 USD)

#### Benefits:

- 2 complimentary Congress registration badges

No sponsor

### Quartz (Minimum 10,000 USD)

#### Benefits:

- 1 complimentary Congress registration badge

## Sponsorship Properties

| Property                                          | Companies                     |
|---------------------------------------------------|-------------------------------|
| Industry-Supported Symposia *Breakfast            | Hologic                       |
|                                                   | Roche                         |
|                                                   | Seegene Inc.                  |
| Corporate Product Theater                         | Copan                         |
| NGO Stage Presentation                            | VIDO                          |
| Banner Ad - Pre-congress e-blasts                 | Hologic                       |
|                                                   | Sanofi                        |
|                                                   | Seegene Inc.                  |
| Banner Ad - Final Registration Confirmation Email | Hologic                       |
| Banner Ad – Daily Congress e-News *All days       | Merck                         |
| Banner Ad – Congress Website                      | Hologic                       |
| Dedicated Sponsor Email Spotlight                 | Hologic                       |
|                                                   | Sanofi                        |
|                                                   | Seegene Inc.                  |
| Social Media Post                                 | Hologic                       |
|                                                   | Merck                         |
|                                                   | Seegene Inc.                  |
|                                                   | ViiV                          |
| Congress Mobile App *Exclusive                    | Roche Molecular Systems, Inc. |
| Mobile App Push Notification                      | Hologic                       |
|                                                   | Merck                         |
|                                                   | Roche Molecular Systems, Inc. |
|                                                   | Sanofi                        |
|                                                   | Seegene Inc.                  |

# STI&HIV 2025 - Final Report

## Sponsorship Properties

| Property                                        | Companies       |
|-------------------------------------------------|-----------------|
| Coffee Break                                    | Hologic         |
|                                                 | ViiV            |
| Poster Reception with Wine and Hors d'oeuvres   | Hologic         |
| Food & Beverage for Industry-Supported Symposia | Merck           |
| Volunteer & Staff T-shirts                      | Merck           |
| Wall Ad                                         | Merck           |
| Focus Group                                     | CARB-X          |
| Early Career Networking Event                   | Gilead Sciences |

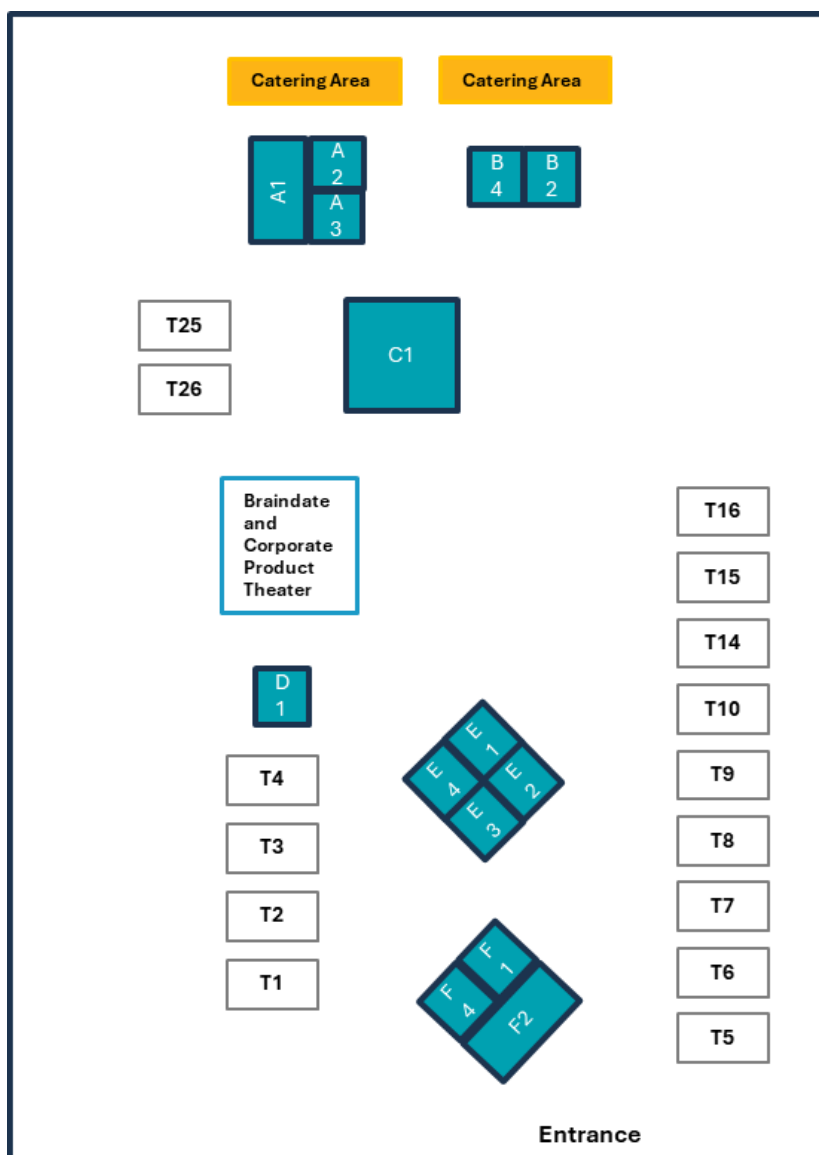
## Exhibitor Summary

Booth Spaces (3m x 3m) 19 booths (14 exhibitors)

Tabletop Spaces 15

|                                 |                    |             |
|---------------------------------|--------------------|-------------|
| Exhibit Hall Hours of Operation | Sunday, July 27    | 19:15-20:30 |
|                                 | Monday, July 28    | 09:00-18:00 |
|                                 | Tuesday, July 29   | 09:00-18:00 |
|                                 | Wednesday, July 30 | 09:00-15:00 |

Countries Represented 7 (Canada, India, Italy, Switzerland, Republic of Korea, United Kingdom, United States)



## Exhibitor List

|    | Exhibitor Name                                                          | Booth Type           | Booth Number |
|----|-------------------------------------------------------------------------|----------------------|--------------|
| 1  | ACCM                                                                    | Tabletop 3.5m x 1.8m | T14          |
| 2  | ASTDA                                                                   | Tabletop 3.5m x 1.8m | T1           |
| 3  | Bantu Media Hub                                                         | Booth 3m x 3m        | E2           |
| 4  | BD                                                                      | Booth 3m x 3m        | E4           |
| 5  | BASHH                                                                   | Tabletop 3.5m x 1.8m | T9           |
| 6  | CAAN                                                                    | Tabletop 3.5m x 1.8m | T2           |
| 7  | Cepheid                                                                 | Booth 3m x 3m        | B2           |
| 8  | Chembio Diagnostics                                                     | Booth 3m x 3m        | E3           |
| 9  | Copan                                                                   | Booth 3m x 3m        | A3           |
| 10 | CTN+                                                                    | Booth 3m x 3m        | F1           |
| 11 | CUSM                                                                    | Tabletop 3.5m x 1.8m | T26          |
| 12 | Global Antibiotic R&D Partnership (GARDP)                               | Tabletop 3.5m x 1.8m | T7           |
| 13 | Herpes Cure Advocacy                                                    | Tabletop 3.5m x 1.8m | T6           |
| 14 | Hologic                                                                 | Double Booth 6m x 3m | A1           |
| 15 | HPV Global Action                                                       | Booth 3m x 3m        | A2           |
| 16 | IUSTI Canada                                                            | Tabletop 3.5m x 1.8m | T3           |
| 17 | IUSTI World                                                             | Booth 3m x 3m        | D1           |
| 18 | Johns Hopkins Center for Innovative Diagnostics for Infectious Diseases | Tabletop 3.5m x 1.8m | T5           |
| 19 | MagIC Lifescience                                                       | Booth 3m x 3m        | B4           |
| 20 | Meth et Realites                                                        | Tabletop 3.5m x 1.8m | T16          |

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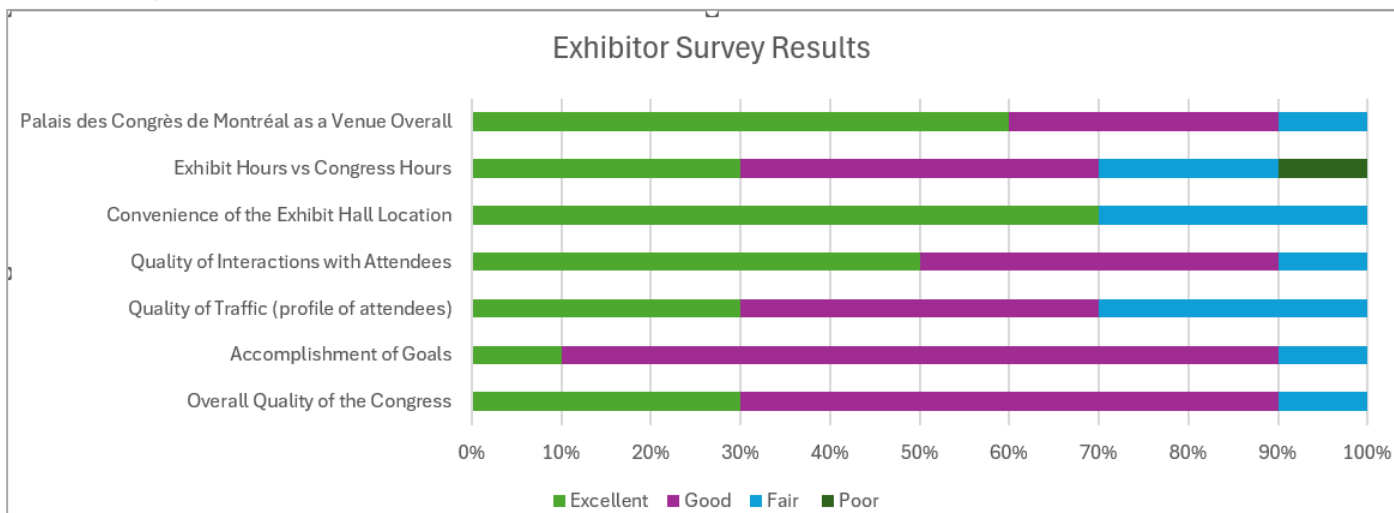
## Exhibitor List

|    | Exhibitor Name               | Booth Type           | Booth Number |
|----|------------------------------|----------------------|--------------|
| 21 | NMG                          | Tabletop 3.5m x 1.8m | T8           |
| 22 | Now Diagnostics Inc          | Booth 3m x 3m        | F4           |
| 23 | Projet SEX-ED                | Tabletop 3.5m x 1.8m | T25          |
| 24 | REZO                         | Tabletop 3.5m x 1.8m | T15          |
| 25 | Roche Molecular Systems, Inc | Double Booth 6m x 3m | F2           |
| 26 | Seegene Inc.                 | Quad Booth 20m x 20m | C1           |
| 27 | STI&HIV 2027                 | Tabletop 3.5m x 1.8m | T4           |
| 28 | VIDO                         | Tabletop 3.5m x 1.8m | T10          |
| 29 | ViiV                         | Booth 3m x 3m        | E1           |

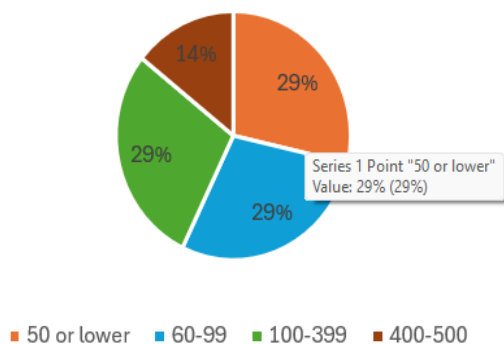
# STI&HIV 2025 - Final Report

## Sponsor and Exhibitor Evaluation Summary

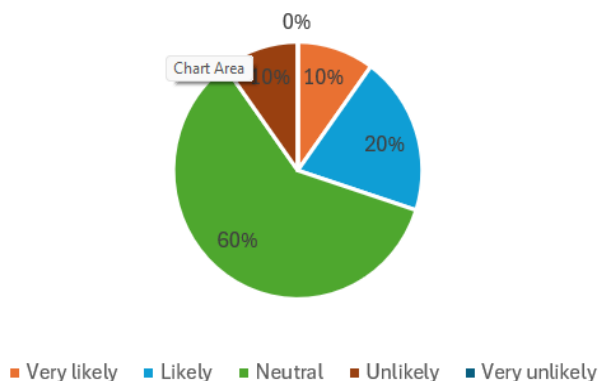
10 respondents



### Number of Booth Visitors



### Likelihood of support for STI&HIV 2027



### Specific Feedback

- The exhibit hours were good, but the exhibit breaks are too short, especially the lunch break, considering that people have to go out to get something to eat.
- We need more coffee.
- We may consider a 3 x 3 booth for STI&HIV 2027. Next time, we hope more of our communication team can support and sponsor a symposium with WHO.
- I would love to attend STI&HIV 2027, but as a one-person project with no funding, I cannot ever guarantee to be able to make it.

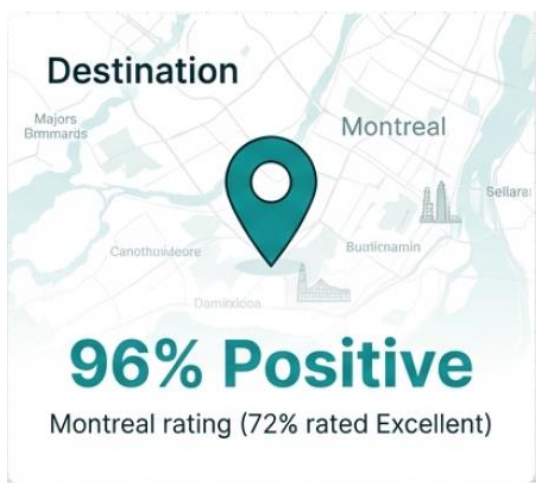


## Attendee Feedback

### Conference Evaluation Summary (N = 340)

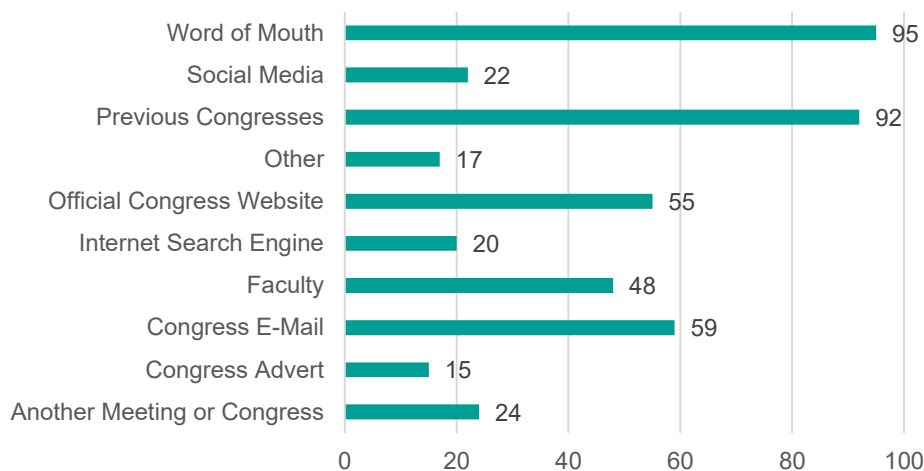
# 97%

would recommend this Congress to a peer

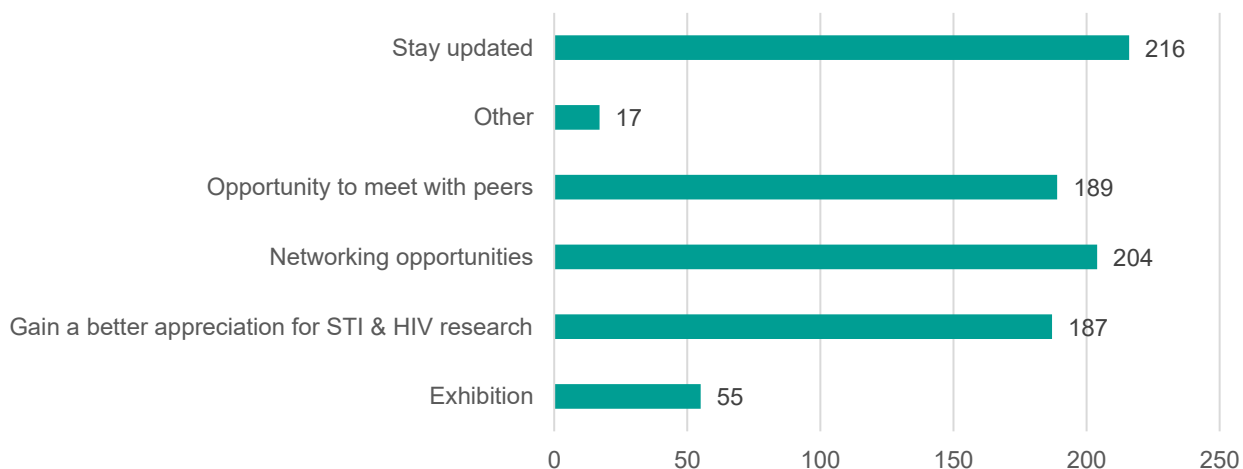


## Conference Evaluation Summary

### How did you hear about the Congress?

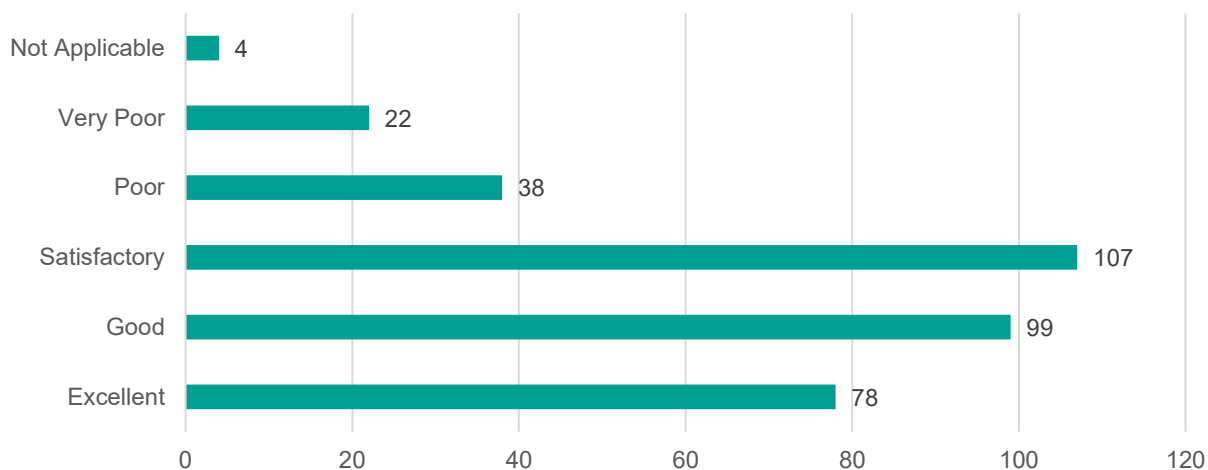


### What were your primary reasons for attending the Congress?

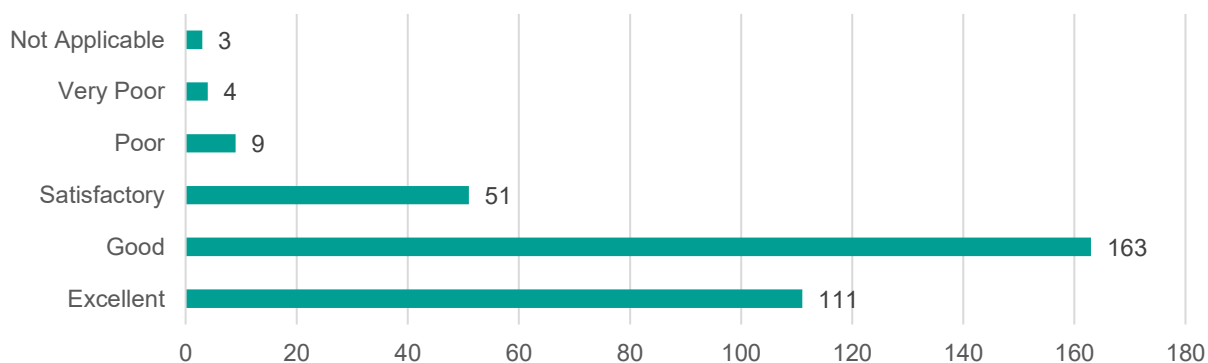


## Conference Evaluation Summary

### How would you rate the Mobile App?

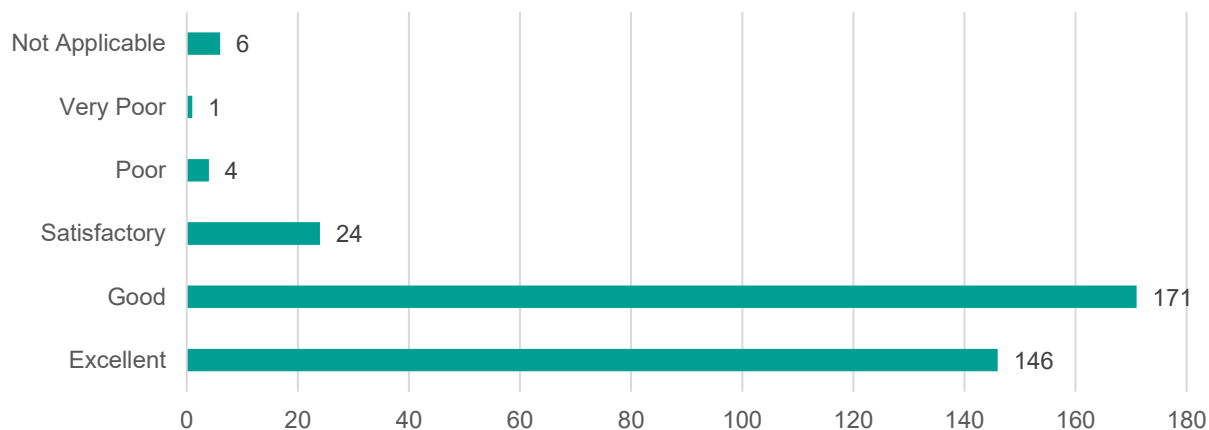


### How would you rate the Onsite Materials?

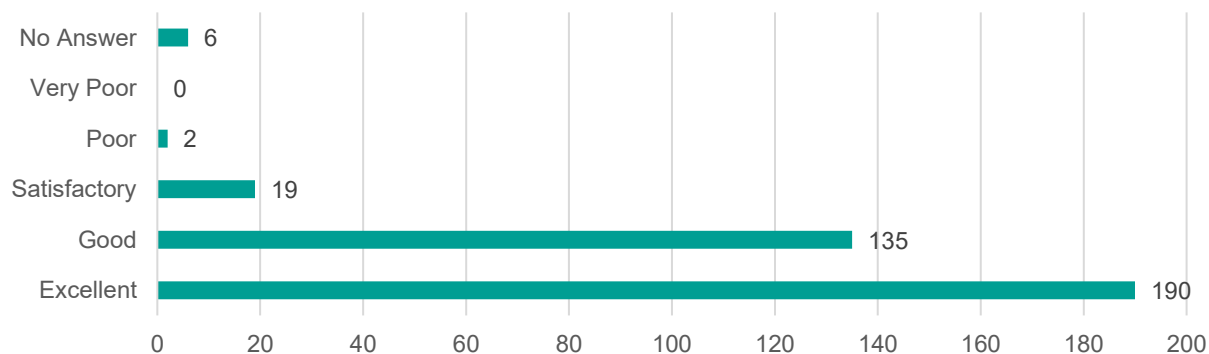


## Conference Evaluation Summary

### How would you rate the Congress Website?

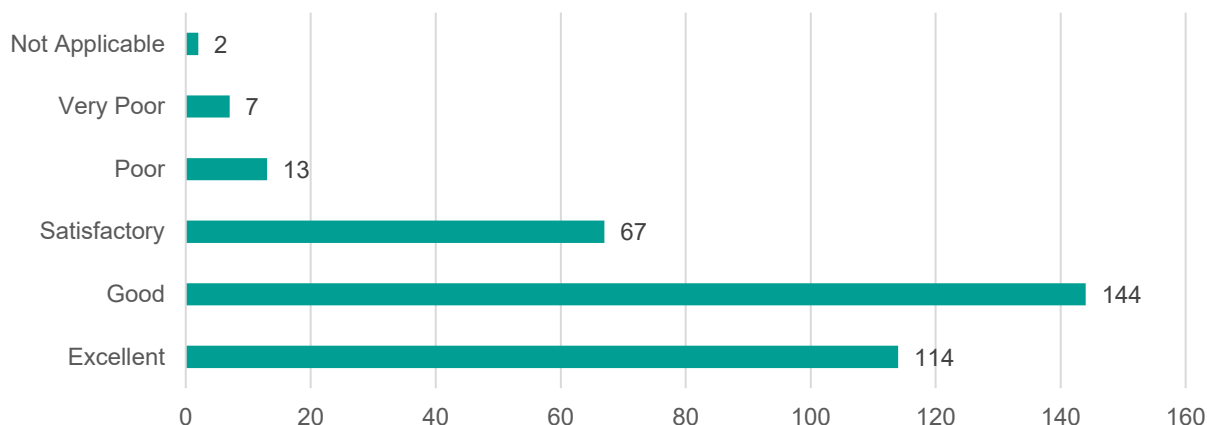


### How would you rate the overall quality of the Congress?

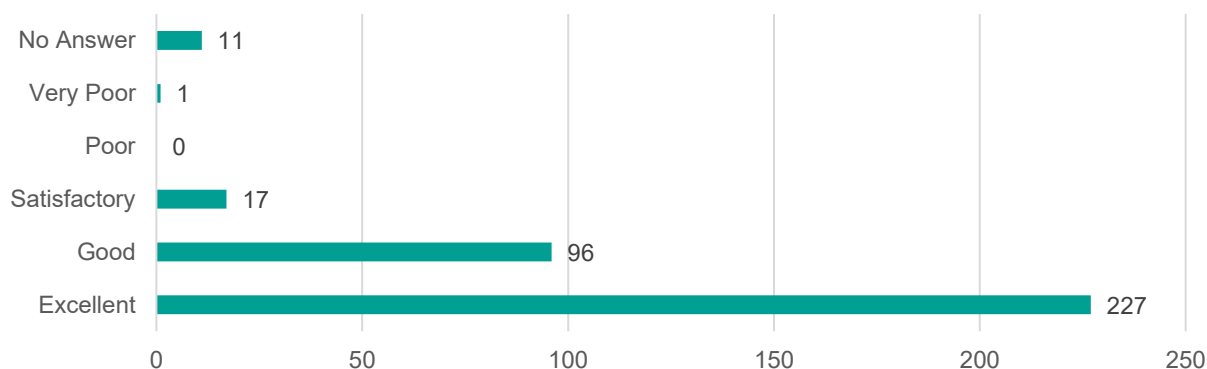


## Conference Evaluation Summary

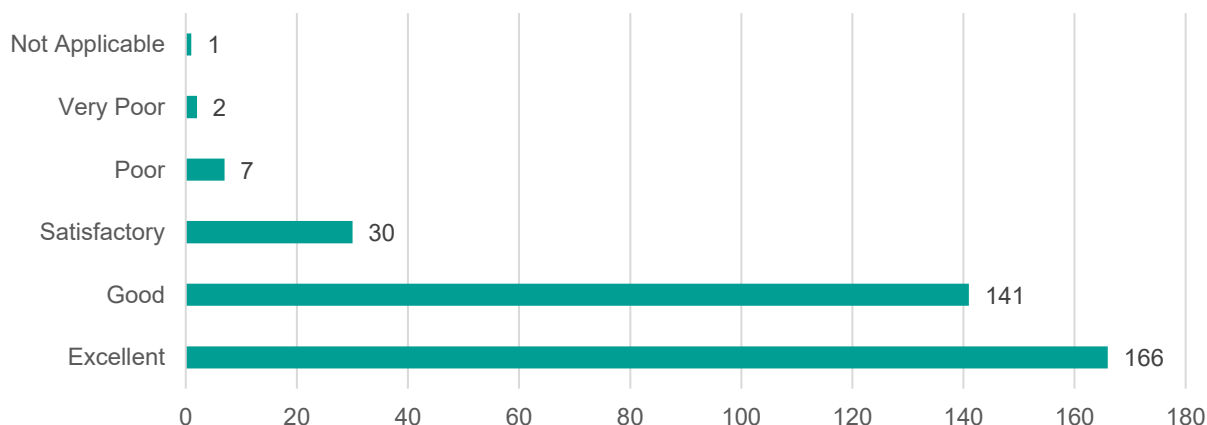
### How would you rate the Exhibit & Poster Hall?



### How would you rate the Congress Staff?

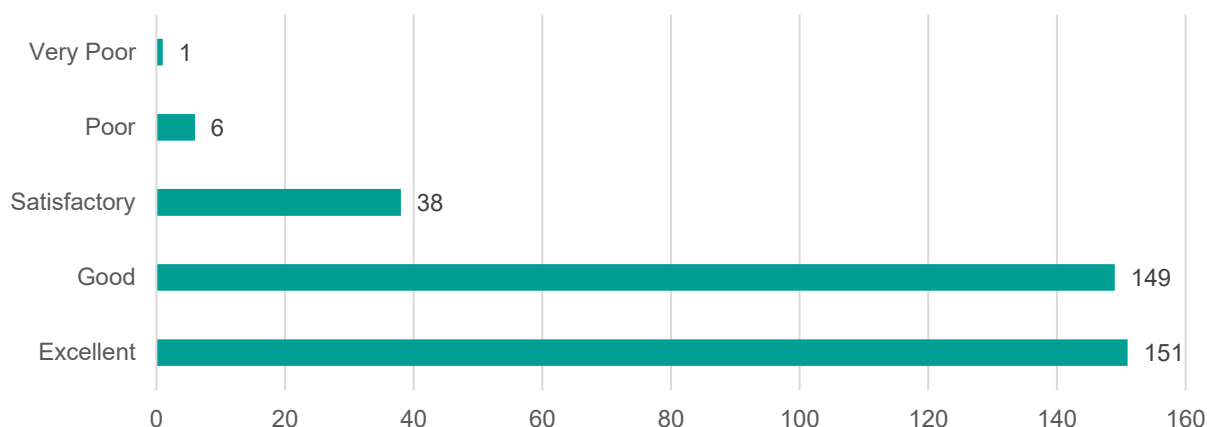


### How would you rate the Pre-Congress Communication?

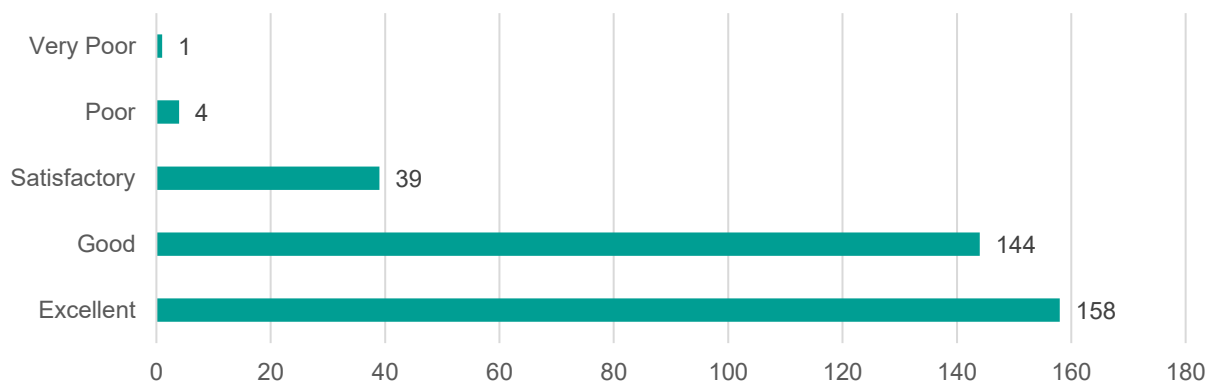


## Conference Evaluation Summary

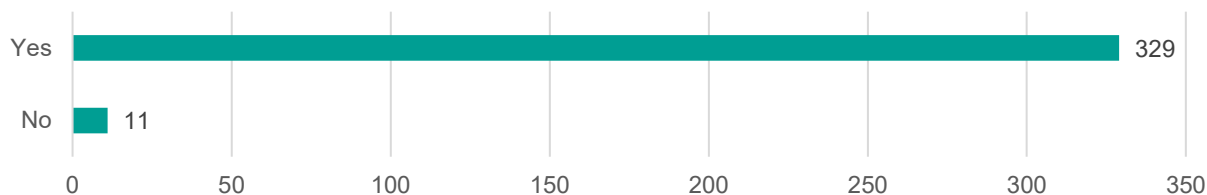
How would you rate the Onsite Congress Communication?



How would you rate the quality of the networking at this Congress?

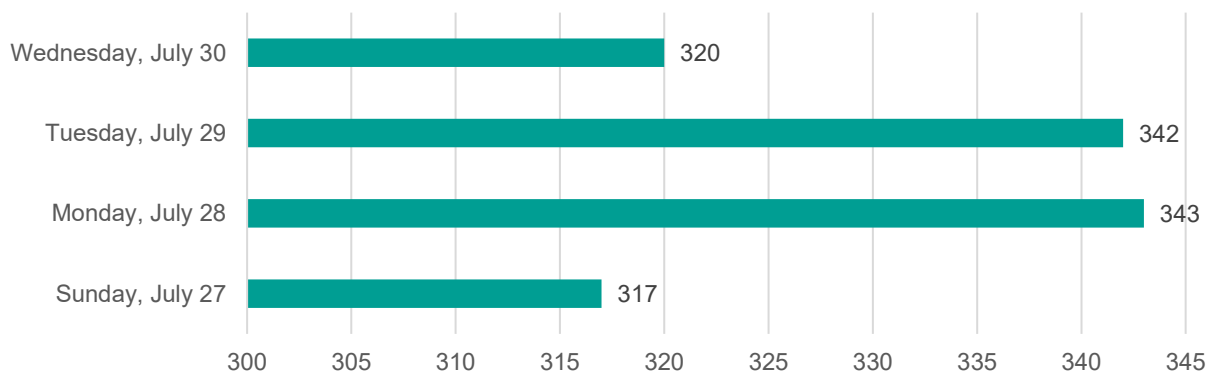


Would you recommend this Congress to a peer/colleague?

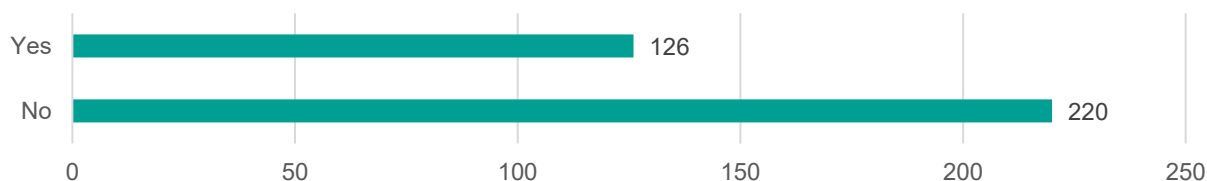


## Conference Evaluation Summary

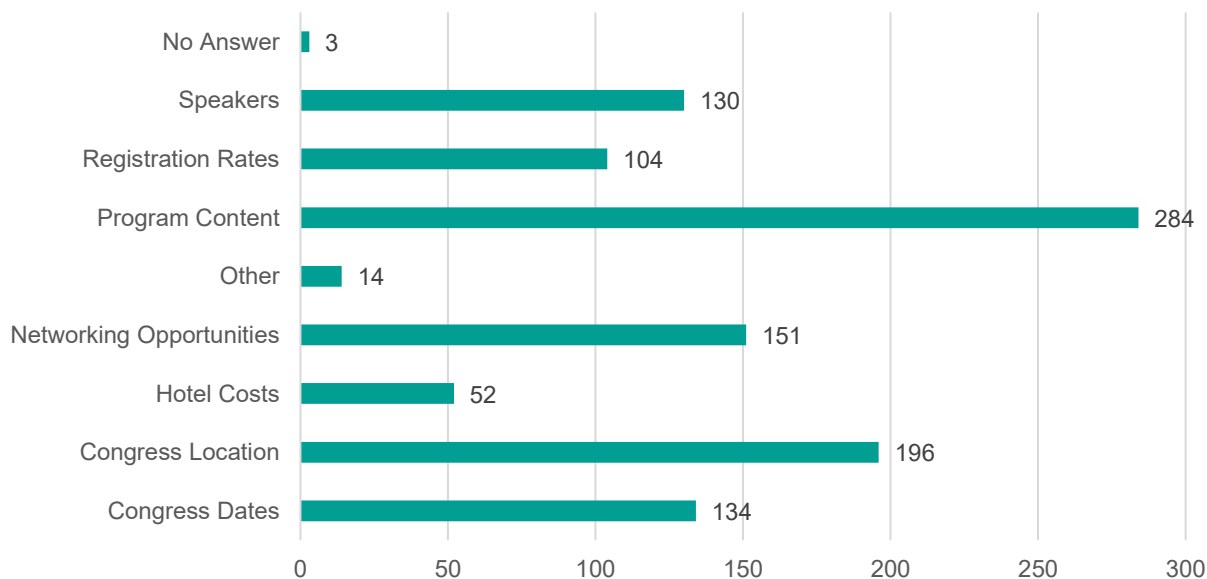
Please indicate which days you attended the Congress



Please indicate if you are an IUSTI member

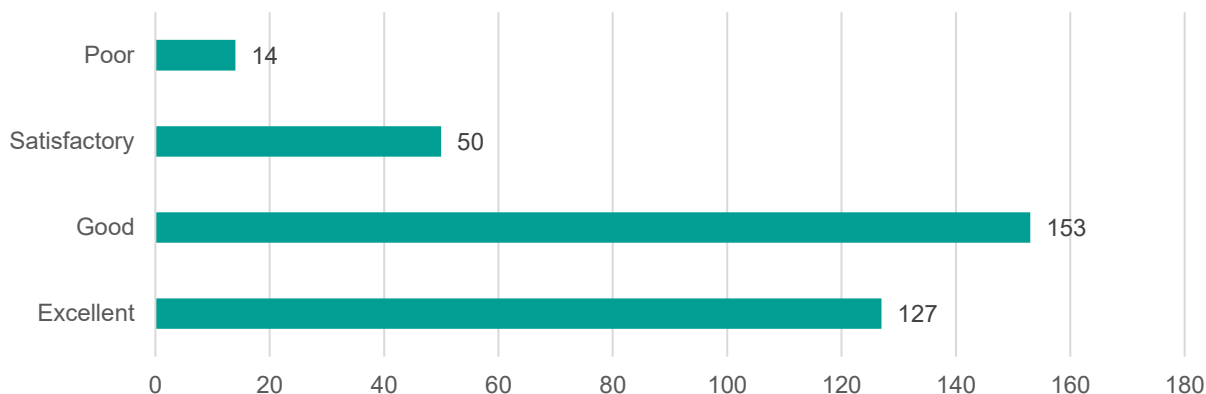


Which of the following most impacts your decision to attend this Congress?

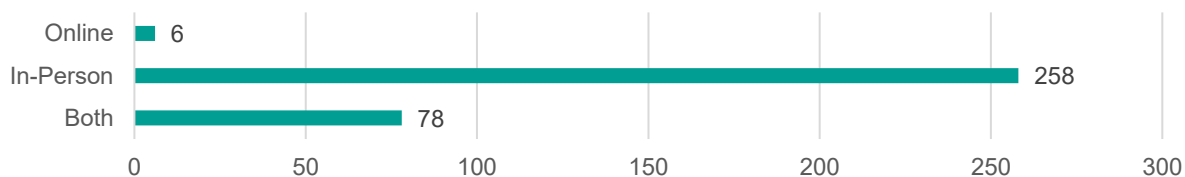


## Conference Evaluation Summary

How would you rate the choice of room settings for effective learning?

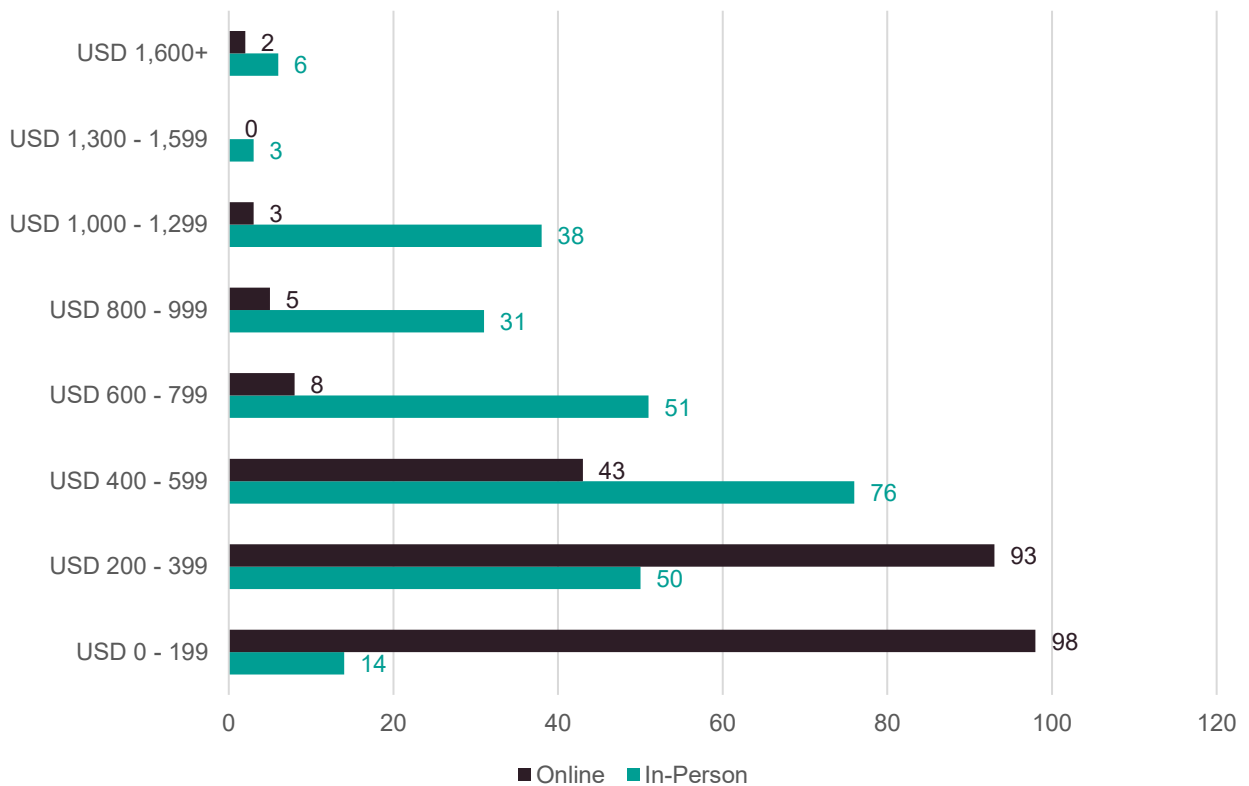


Do you prefer Online or In-Person Congresses?



## Conference Evaluation Summary

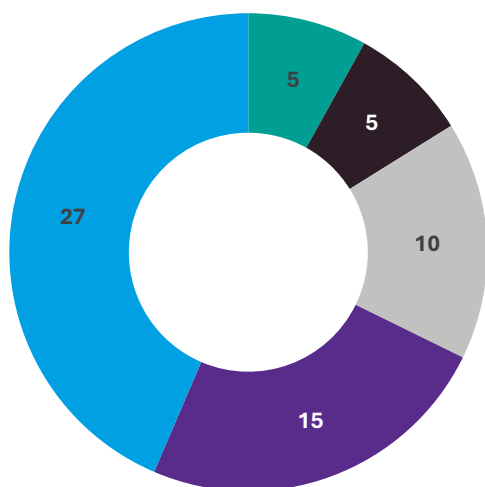
(If In-Person / Online, considering the quality of the content, what price range, in USD, would you be comfortable paying?)



## Conference Evaluation Summary

### Global Preferences for Future Congress Location

■ Africa
 ■ South America
 ■ Asia-Pacific  
■ North America
 ■ Europe



#### Most mentioned countries/ cities:

##### Europe:

France / Paris | United Kingdom / London | Italy | Denmark / Copenhagen

##### North America:

Canada / Montreal, Toronto, Vancouver, Quebec | USA / Washington DC

##### Asia-Pacific:

Australia | Japan | India | Thailand / Bangkok | China / Shanghai

##### Africa:

Cape Town | Kenya | South Africa

##### South America:

Brazil

## The Accessibility Mandate

### Visa Ease Over Geographic Glamour



Attendees prioritized locations with fewer visa restrictions, specifically for Low and Middle-Income Countries (LMIC) researchers.



### Driven by Location

While program content is the primary draw (26%), location is the second biggest factor.

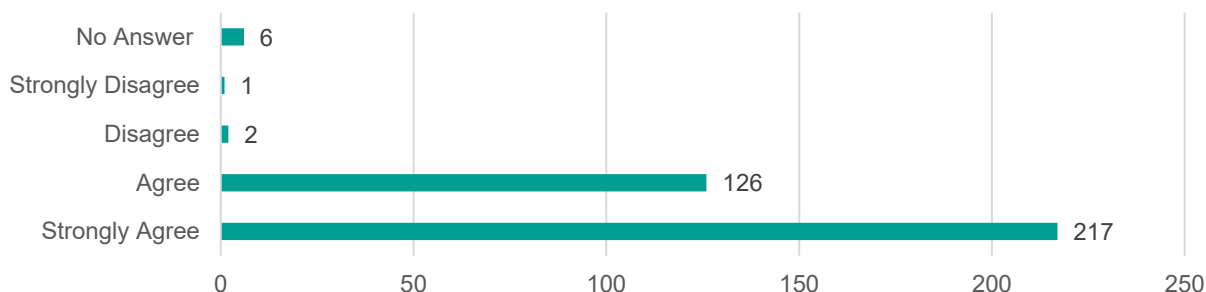


### Focus on Hub Accessibility

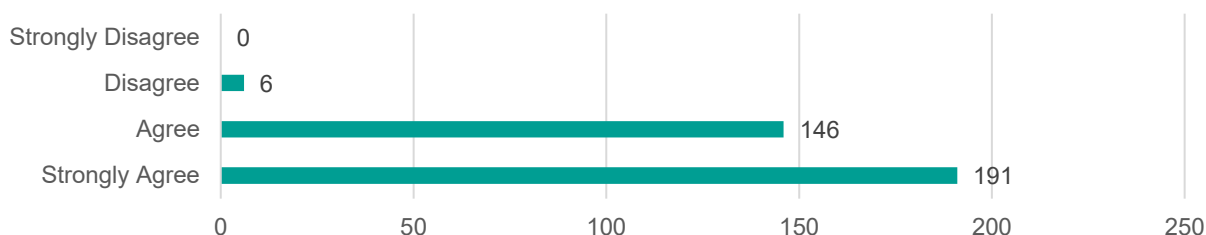
Delegates favor airport hubs and cities with comprehensive public transportation to reduce costs.

## Conference Evaluation Summary

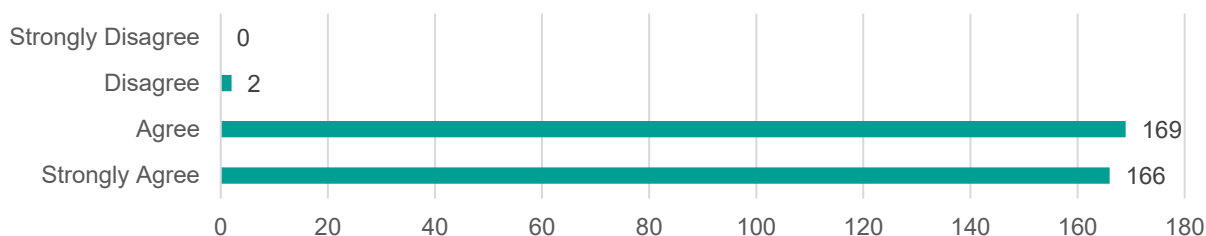
Would you say that the program enhanced your knowledge?



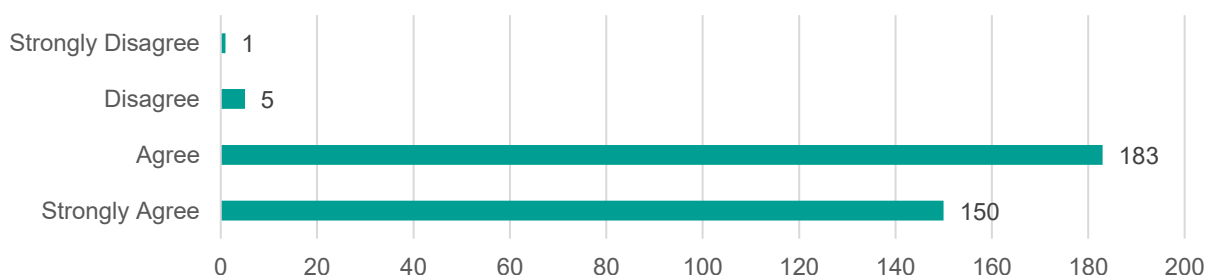
Would you say that the learning objectives were met?



Would you say that the learning objectives were realistic?



Would you say that the teaching and learning methods were effective?



## Conference Evaluation Summary

### What delegates valued most about the sessions?



|                                 |                                                                       |
|---------------------------------|-----------------------------------------------------------------------|
| High-quality scientific content | • Informative, evidence-based, and up to date                         |
| Diverse and relevant topics     | • Broad coverage with strong global perspectives                      |
| Expert Speakers                 | • Knowledgeable presenters with varied viewpoints                     |
| Interactive Formats             | • Engaging discussions, Q&A, and panel sessions                       |
| Strong Organization             | • Well-paced sessions that generally ran on time                      |
| Balance of Research & Practice  | • Good mix of clinical, public health, and innovation-focused content |
| Networking Opportunities        | • Ability to connect with experts and peers                           |
| Innovation Themes               | • Interest in AI, emerging research, and new interventions            |

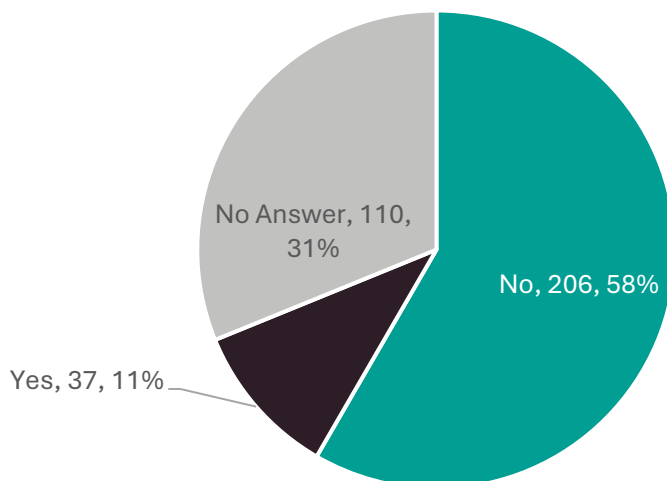
### What improvements delegates suggest for future sessions?



|                                         |                                                                                                |
|-----------------------------------------|------------------------------------------------------------------------------------------------|
| Reduce Scheduling Conflicts             | Fewer Parallel sessions and better topic distribution to minimize overlap                      |
| Optimize Room Capacity                  | Align room sizes with expected attendance to prevent overcrowding                              |
| Enhance Poster Structure                | Dedicated viewing times, clearer communication, and improved organization                      |
| Increase Interactivity                  | More workshops, case discussions, live polling, and audience participation                     |
| Adjust Timing                           | Later start times, improved pacing, and additional breaks                                      |
| Improve App & Program Access            | More reliable mobile app, clearer session descriptions, and access to slides/recordings        |
| Strengthen Clinical & Practical Content | More case-based and real-world application sessions                                            |
| Support Early Career & Diverse Voices   | Greater inclusion of trainees, community perspectives, LMIC speakers, and emerging researchers |
| Provide Catering & Comfort              | Coffee, meals, adequate seating, and better overall attendee comfort                           |
| Refine Speaker & Session Quality        | Stronger moderation, clearer presentation standards, and balanced speaker representation       |

## Conference Evaluation Summary

Did you perceive any degree of bias in any of the program?



### Geographic Bias

Recurring comments on “Too much North American focus” and a need for “More LMIC/Pacific/Global South voices.”

*“The program is very oriented towards high income country context.”*



### Speaker repetition

Feedback indicated the “Same speakers presented multiple times” and requested “More junior researchers.”

*“I would like to see more delegate representation.... Esp from sub-Saharan African subjects.”*



### Topic Balance

Recurring feedback highlighted the need for broader scientific coverage, including basic science, HIV cure research, qualitative research, and prevention-focused content.

*“HIV sessions were focused on prevention and accessing care but very lacking in HIV cure research, discussion on HIV latent reservoir, immunology.”*



### Perspective Diversity

Delegates expressed interest in greater representation across communities, regions, career stages, and lived experiences to strengthen inclusivity and global relevance.

*“Not enough global majority representation on the panels.”*

## Conference Evaluation Summary

### Intended Practice Changes and Learning Outcomes

#### Advances in STI Prevention & Treatment

- DoxyPEP, PrEP, vaccines
- Gonorrhea resistance & AMR
- Updated treatment protocols

#### Screening & Diagnostic Strategies

- Targeted / reduced asymptomatic screening
- POCT and multiplex testing
- New lab technologies

#### AI, Digital Health & Innovation

- AI applications in healthcare
- Digital interventions
- Emerging technologies

#### Community Engagement & Equity

- Stigma reduction
- Community-led models
- Indigenous collaboration

#### Research Translation

- Applying findings to future studies
- Program science
- Collaborative research

## Conference Evaluation Summary

### Top Knowledge Gap

#### Clinical & Practical

Case Studies

Complex STI Management

Guidelines Made Easy

Partner Treatment

#### HIV Science & Prevention

Cure Research

Reservoirs

Resistance Surveillance

PrEP Uptake

### Equity, Communities & Global Representation

LMIC-focuses content

Indigenous Perspectives

LGBTQ+ Health

Stigma Reduction

### Implementation

Translation to Practice

Cost-effectiveness

Program Evaluation

Health Systems Approaches

### Emerging Tech

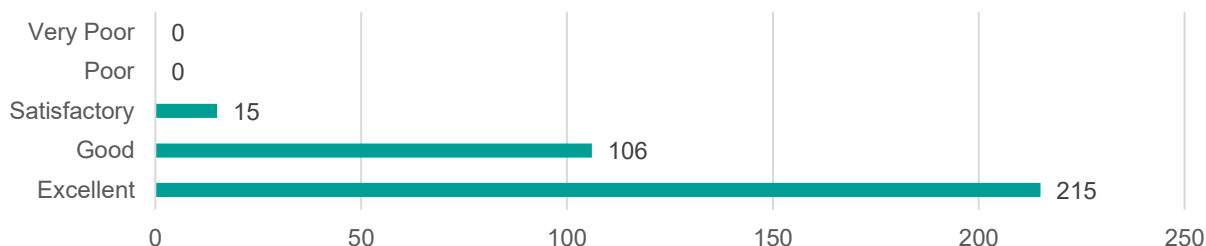
AI in Healthcare

Digital Health

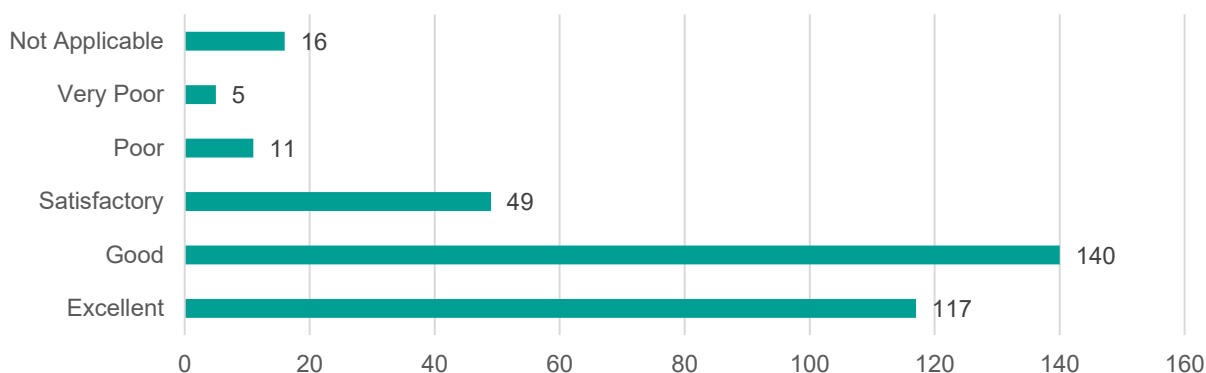
Molecular Biology

## Conference Evaluation Summary

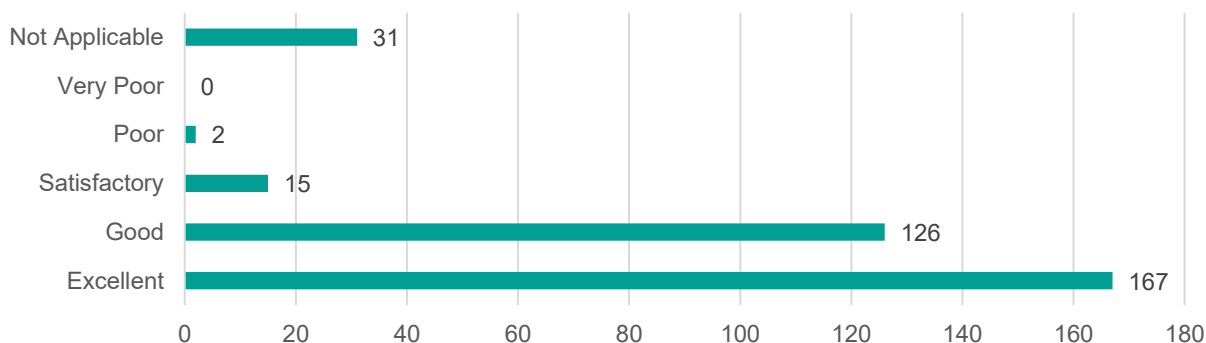
How would you rate the overall quality of the scientific program at the Congress?



How would you rate the overall quality of the Poster Sessions?

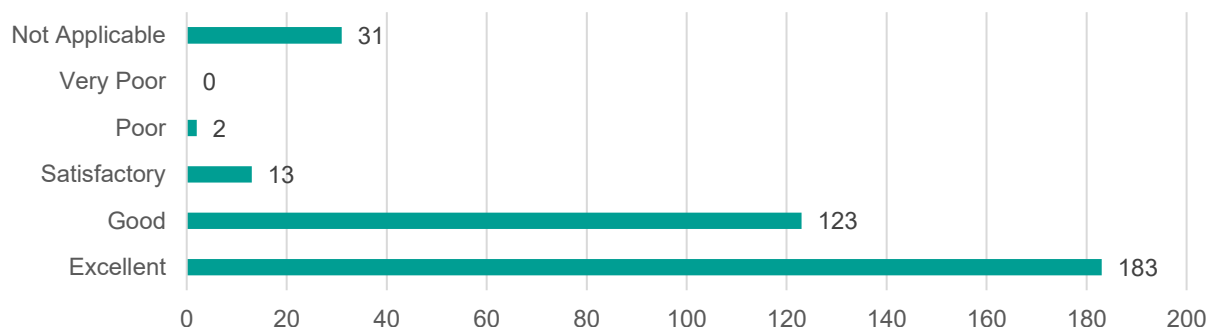


How would you rate the overall quality of the Oral Abstract Sessions?

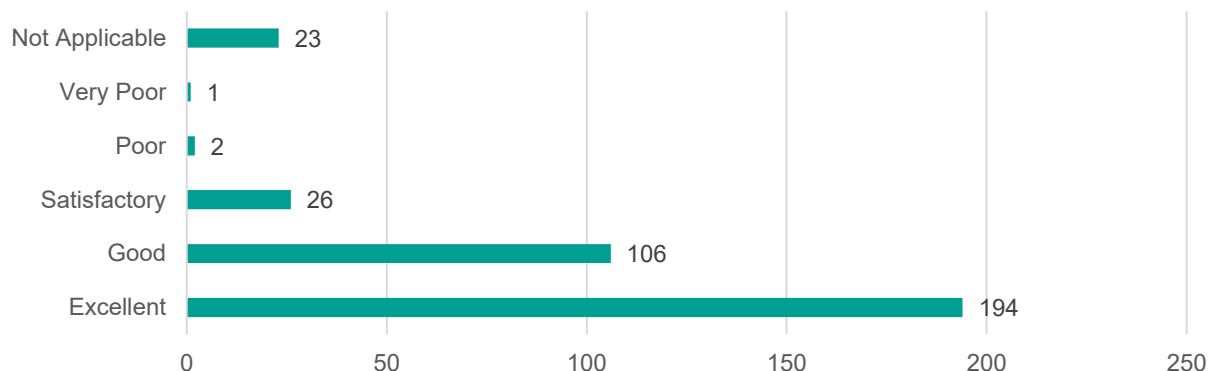


## Conference Evaluation Summary

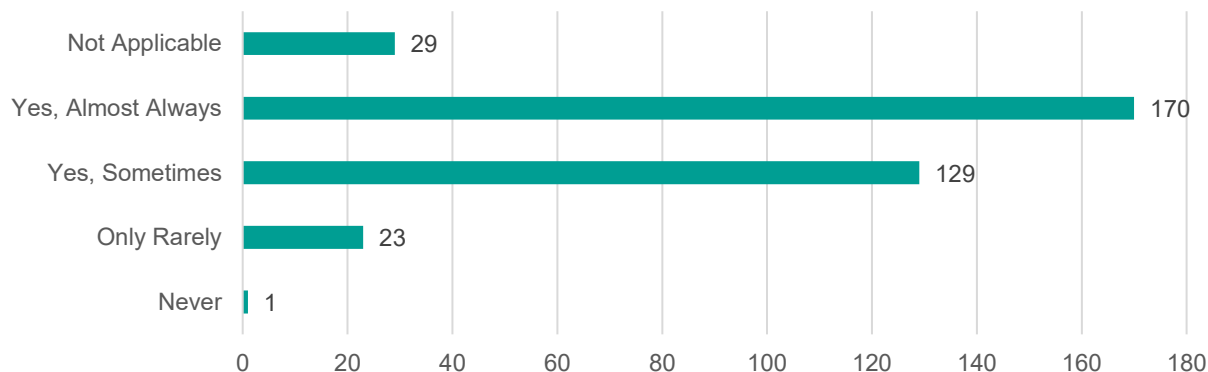
How would you rate the overall quality of the Symposia Sessions?



How would you rate the overall quality of the Plenary Speakers?



Was there adequate time available for discussions, questions & answers and learner engagement?



## Conference Evaluation Summary

### Comments about speaker(s)

#### Highly Rated

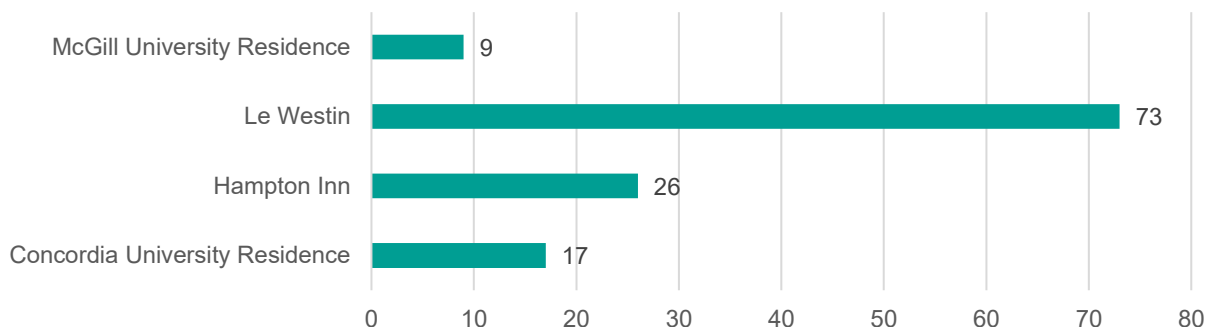
- Inspiring keynote speakers
- High-quality presentations
- Recognized global experts
- Engaging delivery
- Strong plenaries

#### Refinement Opportunities

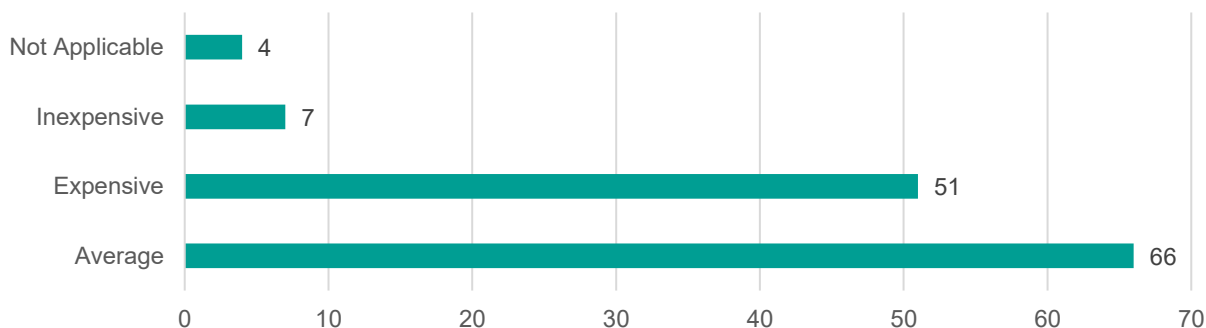
- Some plenaries lacked energy
- AI session perceived as weaker
- Repetition of speakers
- Slides not always readable
- Desire for younger / more diverse voices
- Some talks viewed as too political

## Conference Evaluation Summary

Did you book accommodation through the official housing bureau? If yes, please select the name of your hotel below



If the answer to the question above was yes, how did you find the rate at your hotel?



## Reasons delegates booked outside official hotels

### Cost & Values



- ☐ Price Sensitivity / affordability
- ☐ Better value elsewhere

### Availability



- ☐ Sold out / book late
- ☐ No rooms at congress rate

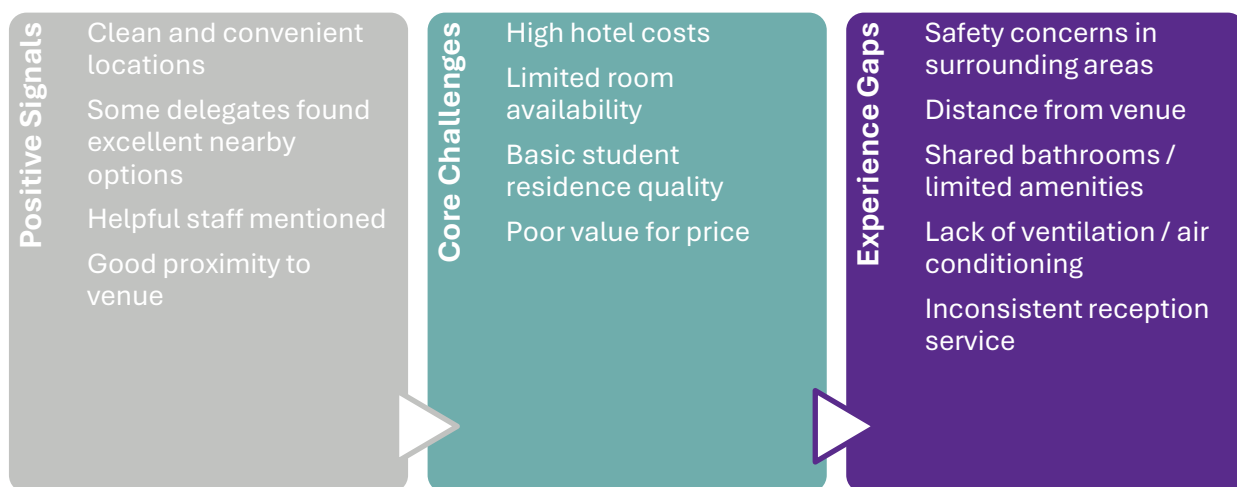
### Preference / Personal Needs



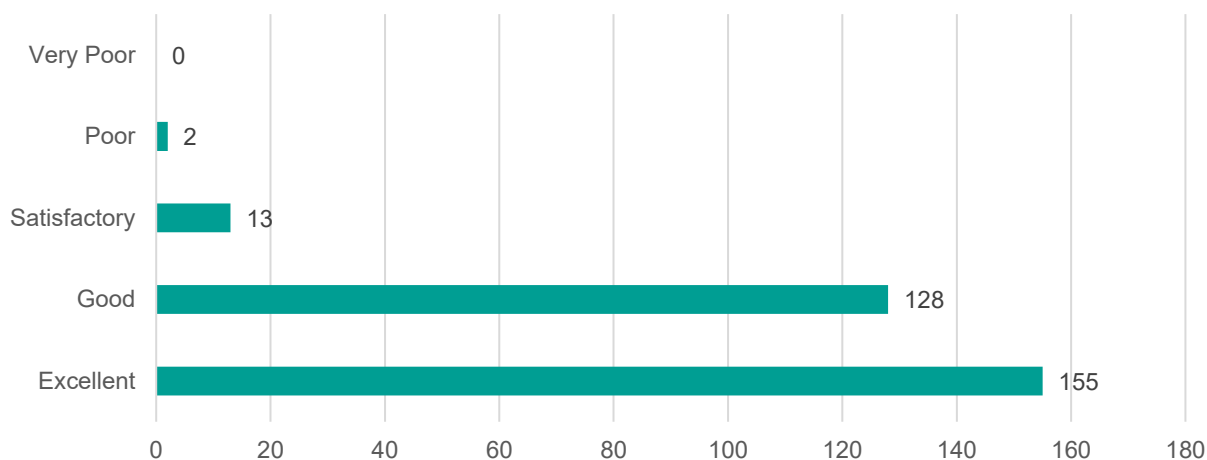
- ☐ Family Travel
- ☐ Preference for Airbnb / apartments
- ☐ Employer or institutional booking policies
- ☐ Loyalty points / brand preference

## Conference Evaluation Summary

### House Experience – Delegate Commentary

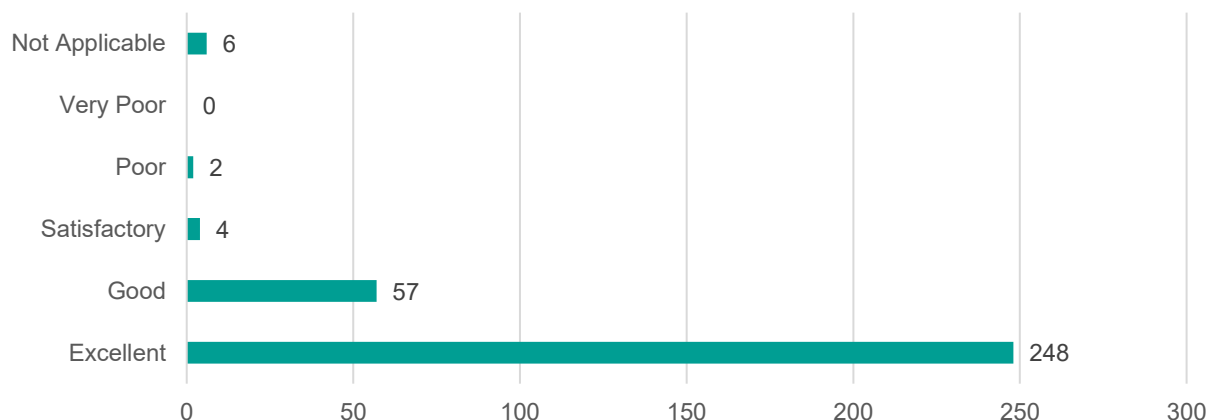


### How would you rate the Online Registration Process (Pre-Congress)?

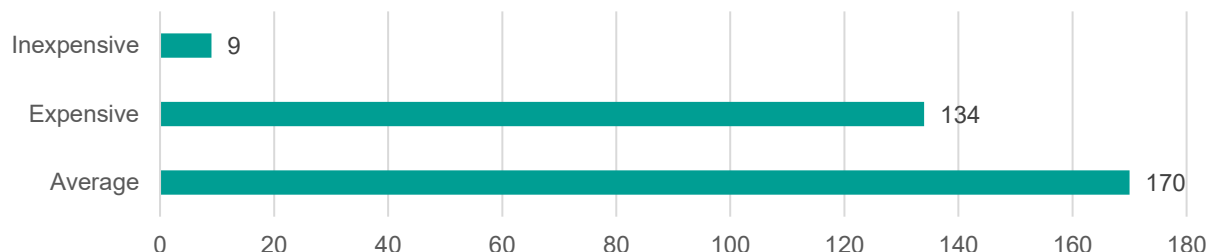


## Conference Evaluation Summary

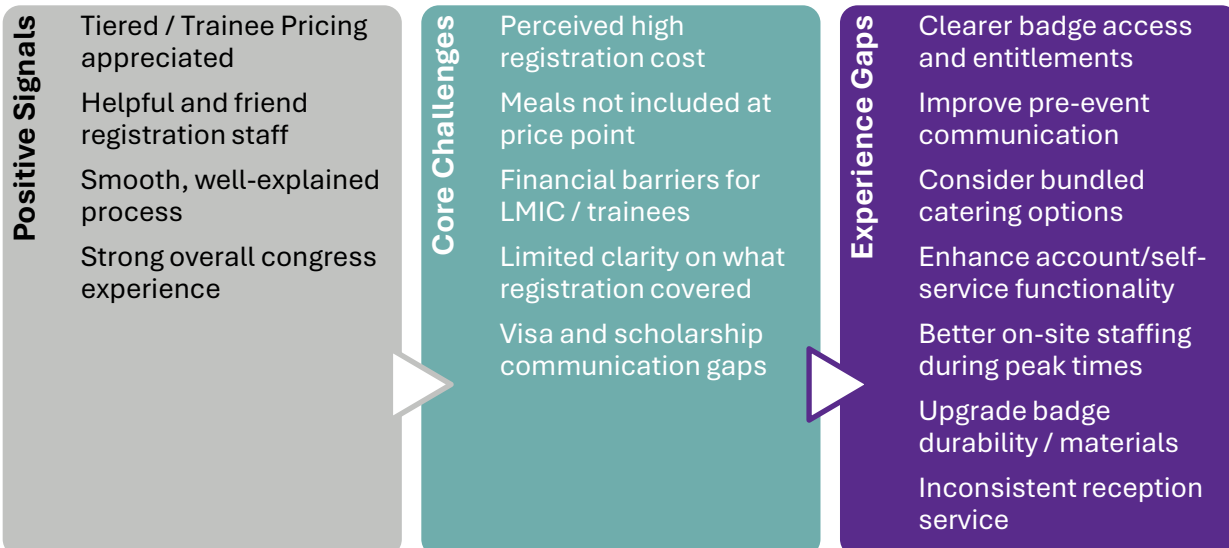
How would you rate Onsite Registration/Badge Pick-up?



How would you rate the registration rates?

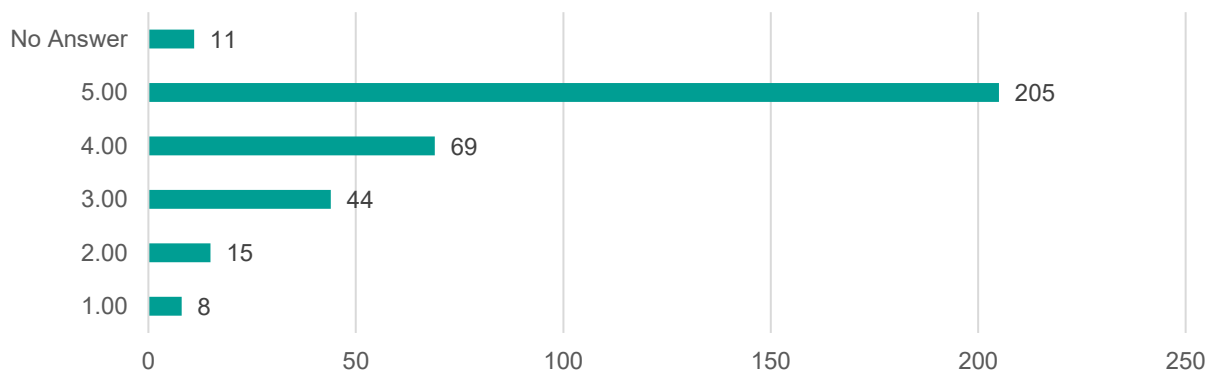


## Delegate Registration Experience – Additional Comments

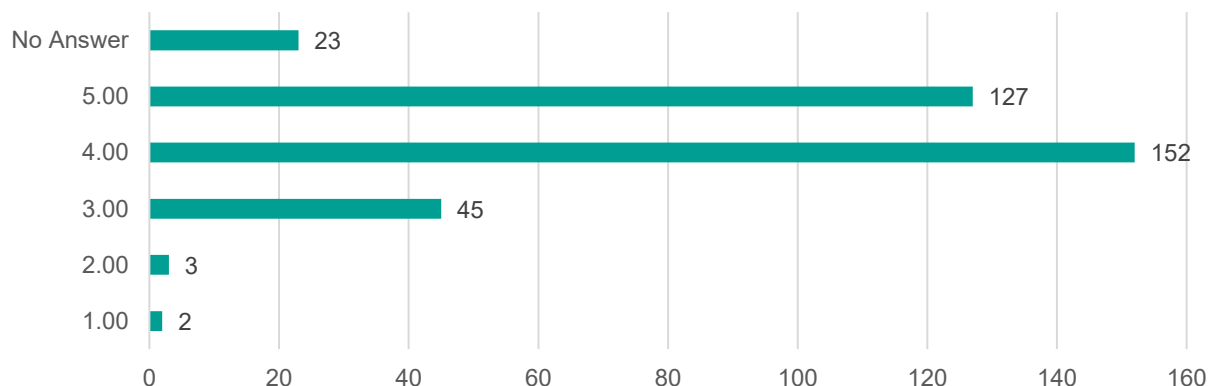


## Conference Evaluation Summary

How Important is it for you to have post-congress access to the recordings of the Congress? – 5 – very important



Were your educational needs filled?



### Most common unfulfilled needs

**More Practical / Clinical Content**

Greater focus on real-world application, clinical updates and case-based learning

**Too Many Concurrent Sessions**

Overlapping sessions limited attendance at preferred presentations

**Poster Experience Needs Improvement**

Opportunities to enhance layout, visibility, and dedicated viewing time

**Networking Was Lower Than Expected**

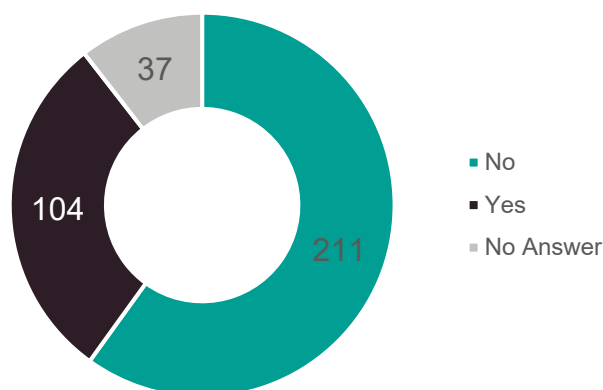
Demand for more structured and facilitated networking opportunities

**Desire For More Interactivity**

Preference for discussion-based, Q&A-driven, and hands-on session formats

## Conference Evaluation Summary

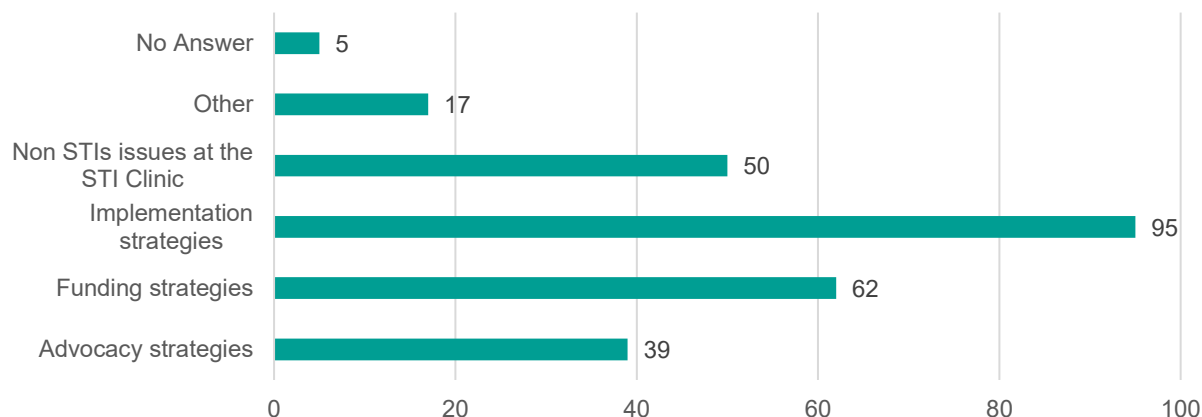
Would you pay for an extra pre-congress course?



## Key Suggested Topics for Future Congresses

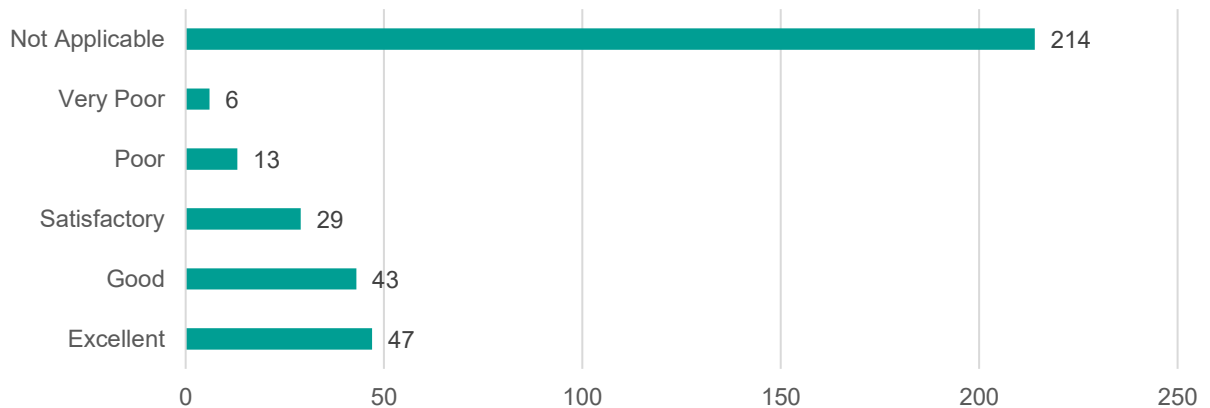
- **Advances in HIV & STI** — Cure strategies, vaccines, therapeutics, and emerging infections.
- **Clinical & Implementation Focus** — Practical applications, diagnostics, and translating research into practice.
- **Digital Health & AI** — Technology-enabled care, data analytics, and innovation.
- **Mental Health & Behavioral Science** — Stigma, substance use, and psychosocial integration.
- **Equity & Priority Populations** — Indigenous health, marginalized groups, and community engagement.
- **Prevention & Public Health** — Vaccination, contact tracing, and community-based approaches.
- **Basic & Translational Science** — Foundational research linked to clinical impact.
- **Interactive Learning** — Workshops, case discussions, and skills-based sessions.

Which pre-congress topic would be of interest to you?

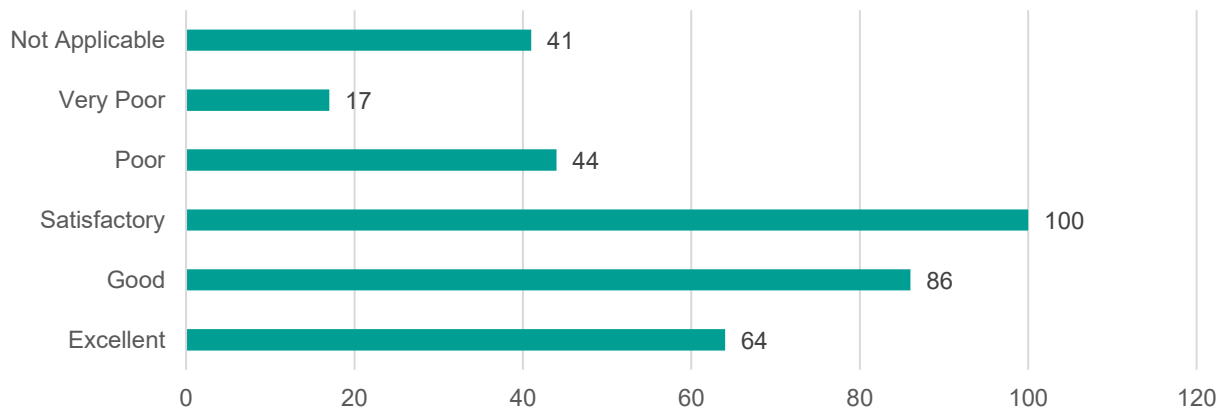


## Conference Evaluation Summary

### Please rate the Congress Dinner on July 28



### Please rate the overall food and beverage at the Congress



## Conference Evaluation Summary

### Delegate Feedback Highlights



#### **Strengths**

- High overall satisfaction; many described the congress as excellent, informative, and impactful.
- Strong scientific program with engaging plenaries and diverse topics.
- Valuable learning and networking opportunities.
- Well-organized event with professional execution.
- Meaningful opening elements and inclusive atmosphere were appreciated.

#### **Opportunities for Enhancement**

- **Catering & Value** — Greater expectation for lunch, refreshments, and overall value aligned with registration cost.
- **Poster Experience** — Clearer scheduling, improved layout, and dedicated viewing times to enhance engagement.
- **Programme Logistics** — Room capacity, early start times, and limited breaks affected comfort.
- **Mobile App & Communication** — Technical reliability and clearer pre-event information would improve navigation.
- **Networking & Space Design** — More structured networking and better use of venue space.
- **Venue Comfort** — Temperature, seating availability, charging stations, and Wi-Fi.
- **Congress Dinner** — Opportunity to elevate quality and attendee experience.



## Special Events

### Indigenous Involvement and Collaboration – Opening Ceremony

We were honoured to begin our conference with an official welcome and land acknowledgment delivered by Indigenous representatives. Their presence was an important reminder that we gathered on traditional Indigenous territory, and it set a meaningful and respectful tone for our time together in Montreal.



### Indigenous Involvement and Collaboration – Healing Room

A dedicated Healing Room was arranged to provide a quiet and supportive space for reflection and consultation. The room was equipped with morning refreshments, cocktail tables, and small round tables, with three private areas created using pipe and drape. At the request of the Indigenous Leader, access and use of the room were fully managed under their direction, including control of opening and closing times, to ensure the space was used in a way that respected its purpose. The room was well received and provided attendees with a meaningful space for conversation, quiet time, and personal reflection throughout the conference.





## Special Events

**REZO**

**"Zone Rose"**  
**Special Site Visit July 30<sup>th</sup>**  
**Meet-up: 11am Booth T15**

A walk-in space for intervention, open judgment-free discussion, and HIV/STI testing, all free of charge, located in Montreal's LGBTQ+ Village.

**STI&HIV2025**  
WORLD CONGRESS



**"Zone Rose"**  
**Special Site Visit July 30<sup>th</sup>**  
**Meet-up: 11am Booth T15**

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**REZO**

**STI&HIV2025**  
WORLD CONGRESS