RCMI
COORDINATING CENTER

RESEARCH CENTERS IN MINORITY INSTITUTIONS CONSORTIUM

2023 NATIONAL CONFERENCE

April 12-14, 2023 | Bethesda Marriott | #RCMIconf

ABSTRACT SUBMISSION & PRESENTATION GUIDELINES

All submissions are due by 11:59 PM on Friday, March 31, 2023.

We are soliciting abstracts for poster presentation. Abstracts from all fields of health disparities research are encouraged. Authors must upload abstracts by 11:59 PM on Friday, March 31, 2023. Poster sessions will be set in the final program. Abstract authors will be notified of poster number and session assignment prior to the conference.

Primary abstract categories and sub-categories should be selected from the categories indicated on the next page and reflect the RCMI U54 focus areas. Abstracts will be accepted via **electronic submission only**. Abstracts that do not conform to official guidelines will NOT be accepted. Abstracts will not be considered unless submitted via **the online form**.

REGISTRATION: All presenting authors are required to register for the 2023 RCMI Consortium National Conference.

DEADLINE: **All abstracts must be submitted via the online form no later than 11:59 PM on Friday, March 31, 2023. No corrections will be allowed beyond this deadline.**

TARGET AREAS: **All abstracts should represent basic science, clinical, community and population studies, education, health policy, or special technologies and methodologies.**

ACKNOWLEDGMENT: All abstracts will receive notification of **receipt** from the 2023 RCMI Scientific Abstract Committee within three working days of submission.

SUBMISSION REQUIREMENTS: Please submit abstracts via **the online form**.

Abstracts are categorized in broad thematic areas related to collaborations on minority health, health disparities, and health equity. Please note that the Scientific Abstract Committee may reassign categories as necessary, thus lengthening the review process. Therefore, it is important that you review the following categories before submitting your abstract to ensure optimal results.

01 Basic and Applied Minority Health and Health Disparities Research

01 Cancer Health Disparities
02 Cardiovascular and Cerebrovascular Diseases
03 Diabetes / Obesity / Metabolic Syndromes
04 Gene-Environment Interactions
05 HIV and AIDS
06 Infectious and Immunological Diseases (non-HIV)
07 Microbiome
08 Nanotechnologies
09 Neuroscience and Mental Health
10 Oral Health
11 Pulmonary Diseases

02 Behavioral and Social Determinants of Health

01 Behavioral and Mental Health
02 Occupational Health
03 Pain Management
04 Social Determinants of Health
05 Suicide
06 Violence and Crime

03 Capacity Building

01 Education and Training
02 Institutional Readiness
03 Investigator Development
04 Mentoring and Professional Development
05 Programmatic Efforts

04 Clinical and Translational Minority Health and Health Disparities Research

01 Clinical and Translational Science Research
02 Complementary and Alternative Medicine
03 Environmental Science
04 Pharmaceutical Sciences / Pharmacokinetics / Drug Discovery and Delivery
05 Public Health Preparedness for Natural Disasters

05 Community-Based Participatory Research

01 Community-Based Participatory Research Addressing Minority Health and Health Disparities

06 Data Science / Big Data

01 Artificial Intelligence / Machine Learning
02 Biomedical Informatics
03 Computational Biology
04 Electronic Health Records
05 Genomics
06 Precision Medicine
07 Proteomics

07 Health and Healthcare Policy Research

01 Health Economics
02 Health Policy

08 Health Related Technology Application

01 Health-Related Technology Application in Minority and Health Disparities
02 SBIR / STTR Grants and Health Disparities Research

09 Research in Special Population Sub-Groups

01 Aging Research
02 Child and Adolescent Health
03 Global Health
04 Homeless Populations
05 Immigrant / Migrant Populations
06 Incarcerated Populations
07 Indigenous Populations
08 Lesbian / Gay / Bisexual / Transgender / Questioning / Intersex (LGBTQI)
09 Men's Health
10 People with Disabilities
11 Rural Health
12 Women's Health

DOs & DON'Ts

✓ **Limit your abstract word count** to 300 (not including title, authors, affiliations, or mention of grant support).

✓ **Single space** all typing.

✓ **Define all abbreviations** the first time they appear in the abstract.

✓ **Proofread the abstract carefully** before submitting. No corrections will be allowed, and accepted abstracts will be printed in conference materials as submitted and approved by the Scientific and Review Committees.

x **Do not** use tables, charts or formulas.

x **Do not** include references or credits.

x **Do not** add space between paragraphs.

x **Do not** submit abstracts of published papers.

x **Do not** submit your abstract more than once; all subsequent submissions of the same abstract are marked automatically as duplicates and removed from the review process.

All abstracts MUST be organized using the following format:

TITLE *(uppercase)* must be a maximum of 60 characters, spaces and punctuation included.

AUTHORS *(mixed cases)* who have significantly contributed to the work should be listed. The recommended limit is 10 authors.

- The presenting author must be listed first (uppercase letters).
- For each author, include the first and second initials with the last name. Separate authors with a semicolon.
- Example: PB TCHOUNWOU; CG Yedjou; ET Brown; CS Rogers; RW McMurray

AFFILIATIONS *(capitalized)*

- List institution(s) where work was performed. Include author initials following affiliation.
- Example: Jackson State University (PBT, CGY, ETB, CSR); University of Mississippi Medical Center (RWM)

PURPOSE *(header in uppercase)*

- Explain the importance of the research or activity to include hypothesis, objectives, goals, and purpose.

METHODS *(header in uppercase)*

- Briefly explain the procedure and strategy used to gather the information presented.

RESULTS / EXPECTED RESULTS *(header in uppercase)*

- What did you find when you performed the analysis of the information presented? Remember, tables and charts are NOT allowed.

DISCUSSION / CONCLUSION *(header in uppercase)*

- How does the result address the purpose/hypothesis?
- How do the reported findings contribute to the knowledge in the respective field?

GRANT SUPPORT *(list only in the grant support field)*

- Authors are encouraged to acknowledge grant support for work where applicable.

> **Note:** A policy/special technologies & methodologies abstract should contain a brief description of the problem/issue to be considered, the key factors underlying the issue, and the recommendations for moving forward.

The following items must be completed for successful submissions & presentations:

- ✉ REGISTER to attend the 2023 RCMI Consortium National Conference.

- ✉ PREPARE YOUR ABSTRACT according to these guidelines (remember not to exceed 300 words).

- ✉ SUBMIT YOUR ABSTRACT via **the online form** by 11:59 PM on Friday, March 31, 2023.

- ✉ ACKNOWLEDGMENT OF RECEIPT will come from the 2023 RCMI Scientific Abstract Committee within 3 working days of receipt. If you have not received anemail receipt (remember to check your junk mail folder), please e-mail: abstract@rcmi-cc.org.

- ✉ ABSTRACTS will be selected for poster presentation and will be notified by April 5, 2023. Scheduled presentation times will be determined by the Organizing Committee.

- ✉ CONFIRM YOUR PARTICIPATION as an abstract presenter by responding to the confirmation e-mail within 2 working days of receipt.

PROOFREAD EVERYTHING, including visuals and numbers.

USE KEY PHRASES about your topic. Seasoned presenters use key phrases and include only essential information. Choose only the top three or four points about your topic and make them consistently throughout the delivery.

MAKE YOUR SLIDES EASY TO FOLLOW. Put the title at the top of the slide where your audience expects to find it. Keep important information near the top. Limit the number of words on the screen. Try not to use more than three bullets per slide. Don't overload your slides with too much text or data. The surrounding white space will make it easier to read.

LIMIT PUNCTUATION and avoid all capital letters. Punctuation can needlessly clutter the slide and the use of all caps makes statements more difficult to read and is like **SHOUTING** at your audience.

AVOID FANCY FONTS. Choose a font that is simple and easy to read. Avoid script type fonts as they are hard to read on screen. Use, at most, two different fonts – perhaps one for headings and another for content. Keep all fonts large enough (at least 24 pt and preferably 30 pt) so that people at the back of the room will be able to easily read what is on the screen.

USE CONTRASTING COLORS for text and background. Avoid the use of patterned and/or textured backgrounds as they distract from the presentation and reduce the readability of text. Placing dark text on a light background is best; tone down the potential glare of a white background by using beige or another light color. Note: colors appear lighter when projected and pale colors often appear as white. A dark background with white font reduces glare. When using a dark background, be sure to make text a light color for easy reading.

USE PHOTOS, CHARTS AND GRAPHS. Combining photos, charts, and graphs will add variety and keep your audience interested in the presentation. Avoid having text only slides.

Please keep the following dates in mind when planning to attend and present an abstract during the 2023 RCMI Consortium National Conference:

03/31/2023 **Abstract Submissions Due**

Authors will be notified of receipt via the email(s) listed on the online submission form within 3 working days.

04/05/2023 **Abstract Selection Notification**

Selection for presentation and format notifications will be communicated to authors.

04/07/2023 **Notification Responses Due**

Authors notified of selection must complete the response form on this date.

04/12/2023 **Conference Begins**

Pre-Conference workshops begin Wednesday, April 12, 2023.