

# Vuka! Let's unite towards a TB-free world!

9th SA

# TB

Conference  
8 - 11 June 2026



## ORAL PRESENTER GUIDELINES: TIME ALLOCATION AND SLIDE PLANNING [9<sup>th</sup> SA TB Conference: Scientific & Programmatic Sessions]

To ensure a high-quality, impactful programme, presenters are requested to align their presentations with the allocated timeframes below. Given the technical nature of TB research and programme implementation, clarity of data, relevance to the TB care cascade, and actionable insights are essential.

### Please note:

1. All presentations must be emailed to [programme@tbconference.co.za](mailto:programme@tbconference.co.za) by **22<sup>nd</sup> May 2026**.
2. **No presentations will be accepted on-site via USB.**
3. **Disclaimer form** must be signed electronically
4. All **Q&A will take place at the end of the session**, after all presentations.

### 1. PRESENTATION TIMEFRAMES AND RECOMMENDED SLIDE COUNT

#### A. 5-MINUTE SHORT COMMUNICATION (RAPID / DATA HIGHLIGHTS)

- **Recommended slides: 6–8 slides**
- **Pacing:** ~1 slide per minute

#### Suggested Structure:

1. Title
2. Background
3. Objective(s)
4. Methods (focus on design, population, and key variables)
5. Key Results (1–2 slides; prioritise high-impact findings)
6. Conclusion & Programmatic Implication

#### Expectations:

- Focus on one key message or finding
- Use simple, high-yield visuals (e.g., cascade charts, treatment outcomes, incidence trends)
- Avoid methodological detail unless critical to interpretation

#### B. 10-MINUTE PRESENTATIONS (STANDARD ORAL PRESENTATIONS)

- **Recommended slides: 10–12 slides**
- **Pacing:** ~1 slide per minute

#### Suggested Structure:

1. Title
2. Background
3. Problem Statement / Rationale
4. Objective(s)
5. Methods (clear and concise; include setting and sample)
6. Results (2–3 slides; structured and logical)
7. Interpretation (what do the findings mean?)

ORGANISED BY:



[www.tbconference.co.za](http://www.tbconference.co.za)

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Tel: 087 821 1109 or 012 110 4080 | Email: [programme@tbconference.co.za](mailto:programme@tbconference.co.za)

8. Programmatic / Policy Implications
9. Conclusion & Key Take-Home Messages

#### Expectations:

- Clearly link findings to the TB care cascade (screening, diagnosis, treatment, prevention)
- Highlight operational or implementation relevance
- Where applicable, connect to national or global TB priorities (e.g., case finding, DR-TB, TB/HIV integration)

## 2. DATA PRESENTATION STANDARDS (CRITICAL FOR TB SESSIONS)

- Prioritise data-driven slides over text-heavy content
- Use:
  - Graphs (trend lines, bar charts)
  - Tables (simplified; highlight key values)
  - Cascade diagrams (e.g., diagnosis-to-treatment gaps)
- Clearly label:
  - Sample size (n=)
  - Location and setting
  - Timeframe of data collection
- Avoid overcrowding slides: **one key message per slide**

## 3. EMPHASISING PROGRAMMATIC AND POLICY RELEVANCE

Presenters are strongly encouraged to address:

- **“So what?”** – Why do these findings matter for TB control?
- **Scalability** – Can this intervention or finding be expanded?
- **Applicability** – Is it relevant to similar high-burden settings?
- **Policy alignment** – Does it inform guidelines, strategy, or funding priorities?

Where relevant, link findings to:

- National TB Programme priorities
- Donor or funding landscape considerations
- Health systems strengthening (e.g., workforce, supply chain, data systems)

## 4. TIME MANAGEMENT

- Session chairs will **strictly enforce time limits**.
- Presentations exceeding time may be stopped by next presentation to maintain fairness.
- No interruptions for questions—**Q&A will follow after all presentations**.

## 5. PRACTICAL TIPS FOR HIGH-IMPACT TB PRESENTATIONS

- Start with a **clear burden or gap statement**
- Use **real-world data** to anchor your narrative
- Avoid jargon where possible—ensure accessibility across multidisciplinary audiences
- End with **2–3 strong, actionable take-home messages**
- Rehearse to ensure timing and clarity

## 6. FINAL REMINDER

This conference brings together researchers, policymakers, and implementers. The most effective presentations are those that **translate evidence into action** clearly demonstrating how findings can strengthen TB prevention, diagnosis, treatment, and care.

