NUTRITION CONGRESS
7- 9 OCTOBER 2026
WANDERERS CLUB, JOHANNESBURG
QHAMUKA: A CALL TO SERVE, LEAD & INNOVATE IN NUTRITION

CALL FOR ABSTRACTS 2026

CALL FOR ABSTRACTS

CONGRESS THEME: Qhamuka: A call to serve, lead, and innovate in nutrition

The 2026 Nutrition Congress scientific committee invites delegates to make a contribution to the 2026 Congress by submitting abstracts for Oral, Poster, Pecha Kucha or Symposia presentations. We encourage delegates to submit Research abstracts (scientific studies) as well as Information abstracts (programmatic, policy or case-based contributions).

PRESENTING CATEGORIES

1. Food and nutrition in a changing society

This sub-theme explores how shifting social, economic, cultural, and environmental contexts shape food and nutrition. It highlights the need for equity and resilience in addressing both persistent and emerging challenges.
Topics for this category include:

- Food and nutrition security
- Food justice and equity
- Advocacy
- Food sovereignty and indigenous food systems
- Social protection
- Food access and affordability in low-resource settings
- Food environments
- Nutrition and social change and enhancing food literacy for community empowerment

2. Sustainable Nutrition

This sub-theme examines how nutrition professionals can serve, lead, and adapt in advancing health while protecting the planet. It focuses on sustainable diets, food systems, and education that balance environmental, cultural, and socioeconomic realities.
Topics for this category include:

- Including principles of sustainable diets
- Sustainable menu planning
- Measuring sustainable diets (tools, frameworks, tracking and metrics)
- Nutrition education for sustainable eating,
- Cultural and socioeconomic considerations
- Policy and advocacy in sustainable nutrition
- Innovation in sustainable food products
- Local and global perspectives.

3. Nutrition Research for Impact and Innovation

This sub-theme highlights innovative research methods and tools that generate evidence to improve nutrition practice, policy, and community outcomes. Submissions showcasing rigor, cultural relevance, and translational impact are encouraged.
Topics for this category includes nutrition research methodologies such as:

- Innovations in dietary assessment
- Clinical and community trials
- Epidemiological and cross sectional studies
- Intervention studies
- Systematic reviews and meta analyses
- Qualitative research

4. Food and Nutrition Technologies

This sub-theme focuses on technological and product innovations that improve nutrition, health, and food system outcomes. It includes advances in food products, processing, digital tools, AI, personalised nutrition, and sustainable food solutions.
Topics for this category include:

- Indigenous food innovation and preservation
- Product reformulation for health and sustainability
- Advances in food technology and Nutrient delivery
- AI and digital tools
- Smart systems for dietary tracking and menu analysis

5. Nutrition in Disease Prevention and Management

This sub-theme explores the role of nutrition in preventing, managing, and treating diseases, emphasizing both clinical excellence and public health impact. It covers non-communicable diseases, severe malnutrition, lifestyle and nutrient-specific interventions, and population-level nutrition programs.

Topics for this category include:

- Nutrition Epidemiology
- Severe acute malnutrition and critical care nutrition
- Weight management and lifestyle interventions
- Nutrient-specific intervention
- Public health nutrition and policy and dietary patterns and preventive nutrition

6. Leadership and ethical practice in nutrition

This theme focuses on ethical practice, leadership, and professional excellence in nutrition. It emphasises integrity, equity, lifelong learning, interdisciplinary collaboration, and the role of nutrition professionals in guiding policy, practice, and education.

Topics for this category include:

- This category includes topics around
- Ethics and evidence-based practices
- Professional boundaries and scope
- Data privacy and confidentiality
- Equity and access in nutrition services
- Sustainability and ethics in food recommendations
- Interdisciplinary collaboration and team leadership
- Advocacy and policy leadership
- Continuous learning and professional development
- Ethical research practices

INSTRUCTIONS TO AUTHORS:

The Scientific Committee will peer-review all abstracts. In making a decision, the committee will consider the quality of the communication in terms of its relevance to the congress theme and presenting categories, research quality, the focus and substance of its results, how these are presented, and its originality.

The congress acknowledges and recognises that some programmatic presentations, though original and informative, may not be based on a standard scientific methodology format. Authors of such presentations are encouraged to submit abstracts for the presenting categories, but should nonetheless ensure that their abstracts meet the high scientific standards of submission expected for this congress. Abstracts will include Research and Information abstracts (oral and poster)

Please read the following checklist and make sure that your abstract complies as it is likely to be rejected for any of the following reasons:

1. No objectives / methodology / conclusion.
2. Lack of data / statistics / results not clearly presented.
3. Non-original work (previously presented / published).
4. Content unclear and confusing.
5. Failure to follow the instructions to authors.

DEADLINE DATES:

17 March 2026	Deadline for abstract submissions
11 May 2026	Feedback in terms of whether your submission has been accepted for inclusion in the 2026 Congress programme
22 May 2026	Accepted abstract submitters are to register online by this date, confirming their participation and commitment as presenters
12 June 2026	Accepted abstract submitters registration payment due by this date

ASSIGNMENT OF ABSTRACTS TO PRESENTATIONS:

- Abstracts will be assigned to sessions (after the peer-reviewing process) according to the best arrangement of the programme as decided by the Scientific Committee, taking into account (where possible) the stated preference of the presenting author.
- Authors will be notified of the assignment of their abstract following the peer review process.
- Abstracts that have been accepted for presentation will be published without editing on the congress website

NOTE: Accepted submitted abstracts will be open to view to all delegates throughout the Congress on the website: www.nutritioncongress.co.za

GUIDELINES ON SUBMITTING AN ABSTRACT:

1. Delegates wishing to present are invited to submit a short abstract for consideration and inclusion in the scientific programme.
2. Results must be clearly presented in the abstract.
3. Abstracts must be submitted online via www.nutritioncongress.co.za by 17 March 2026.
4. No late submissions will be accepted.
5. The Scientific Committee reserves the right to select papers and posters for presentation.
6. Abstracts received will be acknowledged on submission via automatic email.
7. Notification of acceptance or rejection will be via email by 11 May 2026.
8. Meeting rooms will be equipped with data projectors, and only MS PowerPoint will be accepted.
9. Please note that no more than three submissions will be allowed per presenter due to possible programme limitations..
10. Please read the submission requirements carefully, as abstracts submitted cannot be changed later.
11. All presenting authors are requested to fully register for the congress by 22 May 2026.
    If registration and payment has not been received by this deadline, the presentation will not be listed in the programme.
12. The congress will be in-person only.
13. Oral presentations should consist of a maximum of eight slides for a 15-minute session, excluding the cover and disclosure slides
14. Any conflict of interest must be declared. Please state financial (e.g., research support, consulting, employment) or non-financial (e.g., professional, ideological, or personal) interests that may be relevant. If there is no conflict, please enter the word "None".
    The intent is to openly identify any potential conflict of interest so that the congress delegates may form their own judgement about the presentation with the full disclosure of the facts
    This process of declaring conflicts of interest is not intended to reduce or inhibit collaboration, partnerships, networks or involvement in the congress, but rather to encourage transparency and integrity in decision-making
    Conflicts of interest pertains to a financial relationship for research support, consulting, employment, or non-financial interest i.e. personal relationships consulting with pharmaceutical, trade companies, manufacturers or corporations whose products or services could be related to the congress. Non-financial interests could include religion, ideology, personal relationships and political associations or interests
    Where there is no conflict of interest please enter the word: None

POSTER PRESENTATION & EXHIBITION:

- Authors may be required to do a short (2-5 min) presentation during the congress. This information will be shared within the abstract result notification.
- Details regarding the poster panel size etc. will be shared within the abstract result notification.

PECHA KUCHA PRESENTATION:

(a short presentation using images to represent your message)

- Authors to prepare a 7 minute, 14-slide presentation using pictures, not words, to share your message, synchronising your message per slide i.e. 30 seconds per slide.

INFORMATION REQUIRED:

Instructions to Submit an Abstract:
- Abstract Sign In: Please sign into the Abstract Portal with your account email address and password. If you have not yet submitted a presentation, please create a new account. The presenting author needs to create the account as results will be sent to the account holder
- Contact Information: Complete the information required on the Contact Information tab

Instructions to Author:
- Title & Presentation Type: Insert the full title of the proposed presentation. The title should not exceed 20 words
- Preferred format of presentation: Oral, Poster or Pecha Kucha.
- Theme: Choose the presenting category you wish to submit under.

Authors, Affiliations & Presenting Authors Biography:
- Provide details of AUTHOR/S AFFILIATION/S
- Provide details of ABSTRACT AUTHOR/S
- Please indicate in the check box (√) which author/s will present
- Presenting Author Biography - 200 words maximum

NOTE: Additional presenting Author biographies can be uploaded as a PDF document under the 'ABSTRACT UPLOAD' tab

Abstract Upload:
- Abstracts must be typed in English, and a special character keyboard is available.
- The body of the text must not exceed 300 words.

THE ABSTRACT MUST ADHERE TO THE FOLLOWING FORMAT:
- Introduction: should be brief and informative and state the aim of the study.
- Methods: include a description of subjects and research methodology.
- Results: outline the findings of the study supported by statistics as appropriate. Do not use figures, graphs or tables in the abstract. The data provided must be sufficient to permit peer review of the abstract.

- Conclusion: provide a summary and relevance of the main findings.
- Conflict of Interest Declaration: Include or state: None
- Keywords: (Maximum of 5) Include or state: None

AV Requirements:
- The meeting rooms are equipped with data projectors and only MS PowerPoint will be accepted.
- MAC plug-points will be provided at the lecterns for those wishing to present using their own MACS.
- Review: This will allow you to review your completed submission.
- Submit: Before you submit your abstract you must agree to the 'Terms & Conditions'.

EXAMPLES OF ABSTRACTS:

- **Original Research Template**

Impact of a structured patient educational intervention on Glycaemic control in adult type 2 diabetes patients in Qatar
Introduction: Glycosylated haemoglobin (HbA1c) is a known clinical marker of long term glycaemic control with implications for complications associated with type 2 diabetes mellitus (T2DM).
Objectives: To test the impact of a patient-centred diabetes educational toolkit on clinical measures of glycaemic control.
Methods: A culturally targeted randomised controlled educational intervention was carried out among 430 eligible adults with T2DM in Doha, Qatar. Subjects were randomly assigned to either a 6 week structured educational class (intervention, n=215) or a self-study toolkit over 6 weeks (control, n=215) and followed for 12 months. Fasting blood glucose (FBG), HbA1c and albumin-creatinine ratio (ACR) were monitored at baseline, 6 and 12 months. Between group means of quantitative clinical indices were compared using Student's t-test and multivariate analyses.
Results: In the intervention group, 109 subjects (M=40, F=69) completed the study (compliance rate, 51%) and 181 controls (M=50, F=131; compliance rate, 84%). Baseline HbA1c % was not significantly different between groups (p=0.794). Decreasing trends in HbA1c% were observed in all groups with significant differences at 6 months (p=0.032) and 12 months (p=0.006) in the intervention group compared to the controls. Similar trends in FBG were observed in all groups at 6 months (p=0.117) and 12 months (p=0.015) in the intervention and controls. ACR values at baseline were moderately high but not significantly different (p=0.870) between the groups. The intervention group showed a significant drop in ACR at 6 months (p<0.001) and 12 months (p<0.001).
Conclusions: Both groups had access to the educational kit but the intervention group showed better glycaemic control over the follow-up period. This educational intervention influenced clinical outcomes of Qatari T2DM patients. Conflict of Interest: None. Key words: type 2 diabetes, patient-centred education, toolkit, HbA1c, glycaemic control

- **Review Type Abstract Template**

Bibliographic analysis of scientific research on selected topics in public health nutrition in West Africa: review of articles published from 1998 to 2008
Introduction: Few countries in West Africa have the capacity for carrying out advanced training in nutrition and public health. To provide additional background information on the current regional applied nutrition research capacity and productivity, we have analyzed the collection of peer-reviewed articles on key topics in public health nutrition that were published during the period 1998-2008.
Materials and methods: Using PubMed bibliographic search engine, we identified peer-reviewed studies on major public health nutrition issues in the West African region. The following terms were searched: "breast feeding", "infant nutrition physiology" (comprising complementary feeding and weaning), "protein energy malnutrition", "nutrition and infection", "vitamin A", "iodine", "zinc", and "overweight".
Results: The search identified a total of 412 unique articles (37 ± 6 articles per year) that were published during the 11-year period. Most research focused on infant and young child feeding practices, selected micronutrient deficiencies, and the emerging problem of overweight and obesity. The primary author of nearly half (46 %) the publications was located in an institution outside of West Africa. Most articles were published in English (90 %), and nearly half of all articles (41 %) were cross-sectional observational studies.
Conclusions: Few peer-reviewed research studies are published on key public health topics in the West African region. Considering the magnitude of nutrition problems in this region, new approaches are needed to encourage and support research capacity and output in West Africa. Action to establish centers of advanced nutrition training and applied research is long overdue. Conflict of Interest: None
Keywords: Nutrition, Public Health, Applied Research, Advanced Training, West Africa

- **Programmatic Case Study Type Abstract**

Potential use for lot quality assurance sampling (LQAS) assessments in nutrition surveillance in Somali
Introduction: Small sample cluster surveys like use of LQAS design of 33 clusters by 6 children (33X6) with use of the Decision Rule to determine relationships between global acute malnutrition rates and predetermined thresholds have been proposed for emergency assessments when Probability Proportionate to Size (PPS) cluster surveys are expensive, risky and difficult but rapid humanitarian response is required.
Objectives: To compare the nutrition situation outcome and relative costs from PPS and LQAS assessments and to determine the potential application of LQAS in nutrition surveillance for Somalia.
Method: A comparative study in a series of three independent and simultaneous PPS and LQAS (33X6) cross sectional surveys in same population samples was conducted in 2007-2008 in Hargeisa IDP settlements, Bakool Pastoral and Shabelle Riverine areas. The mean differences for the malnutrition rates and costs were analyzed using independent t-test and Analysis of variance. Results: Similar prevalence of acute and chronic malnutrition rates and similar estimates for phase classification of severity of nutrition situation were obtained. The mean costs were US$ 5,026 (±829) and US$ 13,179 (±750) for conducting a LQAS and PPS assessment taking an average of 73 (±6) and 245 (±32) person-days respectively. Overall there was a 54% (p=0.016) reduction in children assessed, 54.0% (p=0.001) person-days, and 44.8% (p=0.0002) amount of money spent for LQAS compared to PPS method.
Conclusion: The LQAS design on average assessed significantly fewer children, required less person-days and cost 49% less, providing significant cost-saving in classifying the nutrition situation and thus has a good potential for use in nutrition surveillance in Somalia. Conflict of interest: none.
Key Words: LQAS, PPS, emergency, nutrition, surveillance

We look forward to receiving your abstracts and showcasing innovative contributions at the 2026 Nutrition Congress.
For any queries, please email Kristy Muller: kristy@confpartner.co.za