



CALL FOR ABSTRACTS

Lisbon Addictions 2024 is a multidisciplinary conference that provides both a forum for networking and an opportunity to showcase cutting-edge research. The conference is intended to inform policy development and practice through a better understanding of contemporary issues in addiction science and addictive behaviours.

ONLINE SUBMISSION AND GUIDELINES

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DEADLINE FOR SUBMISSION

31 January 2024

ONLINE SUBMISSION QUERIES

lisbonaddictions@onsiteevents.com

NOTIFICATION OF ACCEPTANCE

End of May 2024

Applicants will be informed by e-mail if their proposal has been accepted for inclusion in the conference programme. After this date, applicants will have two weeks to register for the conference with the early-bird fee. Abstracts will only be included in the conference programme after the registration process is complete.

TYPES OF ABSTRACT SUBMISSION

Oral presentations — 15-minute presentation, 5-minute Q&A
Short communications — 8-minute presentation, 2-minute Q&A
e-Poster presentations
Workshops — 90-minute session

[CLICK HERE FOR ABSTRACT SUBMISSION GUIDELINES](#)

VIDEO CONTEST

WAVE is an EU-funded project and a co-producer of Lisbon Addictions 2024. It organises a video contest for audio-visual pieces relating to any of the main areas/thematic tracks of the conference. A selection of videos competing for the prizes will be shown at the conference in the WAVE Cinema.

FIND OUT MORE ABOUT THE WAVE VIDEO CONTEST AT [LxAdd24](#)

The conference will take place in Lisbon from 23–25 October 2024 under the overarching theme ‘Empowering the workforce of the future’. Potential contributors are invited to submit abstracts in the following main thematic tracks:

1. Empowering the workforce (Co-produced with the WAVE project¹)

This track focuses on capacity-building and workforce development.

- > Skills for the addiction workforce: addressing training and professional development needs.
- > Nurturing the addiction workforce: workplace well-being, self-care strategies, reducing burnout and creating healthy and sustainable work environments.
- > Widening the focus: recognising and supporting the role played by the extended workforce: peer-workers; volunteers; patient advocacy, community champions; and working with other healthcare, criminal justice and social support services.

Delivering addiction services in the digital area: exploring the potential of innovation and the use of new technologies and what this means for research, training and service provision.

¹ For more information about the [LxAddictions24 conference co-producers](#)

2. Prevention of risky and harmful behaviours (Co-produced with EUSPR)

This track focuses on preventive interventions that target risky and potentially harmful behaviours – with a particular focus on:

- > Understanding what works, why and for whom: new developments in theoretical and empirical research.
- > Spotlight on causal factors and aetiology; understanding the common factors and pathways that contribute to vulnerability, risk exposure and resilience.
- > Spotlight on the prevention of digital addictions, its underlying mechanisms and sub-group differences.
- > Underlying shared and unique mechanisms for substance use and digital behaviours.

3. Alcohol: risks, clinical considerations, treatments and outcomes (Co-produced with EUFAS)

This track focuses on various aspects related to alcohol use, alcohol use disorder (AUD) and related topics, with a particular focus on:

- > Causality of Alcohol Use Disorders (AUD): (neuro)biology, genetics, microbiota and alcohol-related liver disease.
- > Innovation in treating AUD: digital interventions, and opportunities to support recovery through the use of artificial intelligence and other new technologies.
- > Co-morbidity: risks, outcome predictors and clinical considerations.
- > AUD typologies and trans-diagnostic thinking: including the opportunities provided by network analysis and machine learning.
- > AUD across the life course. Developmental perspectives for responding to needs at different stages of life: foetal alcohol syndrome, prevention in adolescent, ageing populations.

4. Addiction and mental health (Co-produced with SSA)

This track explores the intersection of addiction, mental health and co-occurring disorders:

- > Addiction, mental health, and co-occurring mental illness in different populations.
- > Treatment strategies for co-occurring addiction and mental health disorders and the effectiveness of combined integrated treatment models.
- > Strategies for the prevention of mental health problems among people experiencing addiction.
- > Digital approaches to the treatment and prevention of co-occurring mental health and addiction problems.
- > Addiction and trauma.
- > Addiction and neurodiversity.
- > Impact of co-occurring mental health problems on drug-related harms.

5. Hepatitis C, other infectious diseases, and drug-related harms (Co-produced with INHSU)

This track focuses on reducing drug-related harms. It examines global progress towards hepatitis C elimination and innovative models of care for improving the health and well-being of people who use drugs.

- > Reducing drug-related harms: hepatitis C, other infectious diseases, soft tissue infections, overdose.
- > Global progress towards hepatitis C elimination.
- > Effectiveness and coverage of interventions to reduce drug-related harms.
- > Innovative models of care for improving the health and well-being of people who use drugs.
- > Community perspectives on effective models for reducing drug-related harms.

6. Behavioural addictions (Co-produced with ISSBA)

This track explores various aspects of behavioural addictions beyond substance use disorders. It covers the treatment of behavioural addictions generally and considers public health harms associated with them.

- > Understanding behavioural addictions beyond substance use disorder and co-occurring disorders.
- > Neuroscience and biology of behavioural addictions.
- > Treatment and other interventions for behavioural addictions and transdiagnostic features related to behavioural addictions.
- > Behavioural addictions in diverse groups: including minorities, sex, and gender-related considerations; digital technology use by children and adolescents.
- > Policies and regulations in the study of behavioural addictions.
- > Controversies in behavioural addictions.
- > New developments in video gaming and disordered gaming.
- > Focus on specific and new areas: buying-shopping disorder and problematic social media use. Sexual behaviour disorder, problematic pornography use, interactive gambling, sports/esports gambling.

7. Drug policy: latest developments and new challenges (Co-produced with ISSDP)

This track focuses on assessing the latest developments and challenges in drug policies across the globe, and their implications for policy and practice.

- > Latest developments in drug markets including the rise of opioid use, amphetamine-type stimulants, concurrent use of multiple substances, and regional developments in Africa, Europe, the Middle East, Asia and the Americas.
- > New frontiers for drug policy including psychedelics, early-warning systems, decriminalisation of personal possession of all drugs, cannabis legalisation and regulation, and novel treatment approaches.
- > Current challenges in global, regional and national drug policy, particularly reducing unmet demand for drug treatment, reducing stigma and discrimination for people who use drugs, decolonising drug policy and avenues to build government preparedness.
- > Advances in criminal legal strategies intended to reduce harms related to drug trafficking, drug markets, and substance use (e.g. diversion or deflection programmes, new technologies).
- > Optimal data systems: for monitoring drug market trends, strengthening early warning and preparedness, and evaluating policy impacts.

8. Open track (Co-produced with the EMCDDA)

This open track welcomes submissions on topics related to addictive behaviours that may not fall within the specific focus of the co-produced tracks listed above.

Submissions that explore intersections between addiction and factors, such as gender, race, ethnicity, socio-economic status, sexual orientation, and mental health are encouraged, as are those that examine the impact of addiction on under-served and under-represented populations and propose strategies to address health disparities. We particularly welcome submissions on these topics and from studies where impacted communities and people with lived experience have been active co-producers in the research process.

ORGANISERS



European Monitoring Centre
for Drugs and Drug Addiction

