

Attachment 13 – Summary of Changes

National HIV Behavioral Surveillance (NHBS), Round 8 (2026-2028)

Summary of Changes to Data Collection Instruments

- 1) Eligibility Screener, Attachments 3a & 4a (**1 item modified**):
 - Modified wording of responses to 1 question (ES12), assessing the drug injected most often to improve clarity and reduce respondent burden.

- 2) Consent,
 - Deleted 1 question (CN5) assessing reason for declining participation, due to low variability.

- 3) Behavioral Assessment, Attachments 3b-d (English) & 4b-d (Spanish) (**7 items added, 140 items deleted, 25 items modified**):
 - Emerging priorities in HIV prevention - The HIV prevention landscape has changed significantly in recent years with increased emphasis on biomedical prevention strategies, such as HIV Pre-Exposure Prophylaxis (PrEP). The following changes were necessary to ensure NHBS continues to collect the most relevant HIV-associated behavioral data:
 - Measuring awareness and use of biomedical prevention strategies
 - Deleted 2 questions assessing time since first PrEP use (PA7b.1, PA7b.2).
 - Replaced 1 question (PA6f) assessing the specific PrEP drug used with 3 questions (PA6f, PA6g.1, PA6g.2). The previous version of PA6f was very difficult for participants to answer. The new 3-question set begins with a filter question (PA6f) assessing the type of PrEP used, i.e., pill or long-acting injectable, with follow-up questions (PA6g.1 and PA6g.2) specific to the type used.
 - Deleted 1 question (PA6d) assessing use of PrEP 'on-demand.' This strategy is not recommended by CDC.
 - Added 2 questions assessing awareness and past 12 month use of doxycycline post-exposure prophylaxis (Doxy PEP) for bacterial sexually transmitted infections (HC9a, HC9b).
 - Measuring substance use risk
 - Added 2 questions assessing non-injection use of fentanyl (NI2I.1, NI2I.2).
 - Reducing burden on the public and improving efficiency of the system – Every item in each Behavioral Assessment was reviewed for quality and content value. Items measuring repetitive or low priority content were removed from the assessment.
 - Deleted 64 questions collecting duplicative or overly detailed information:
 - 14 questions seeking to clarify network size (NS1CONF, NS2CONFa, NS2CONFb, NS2CONFc, NS2a.2, NS2b.2, NS2c.2, NS3CONF, NS4CONFa, NS4CONFb, NS4CONFc, NS4a.2, NS4b.2, NS4c.2). The level of detail is not necessary.

- 1 question assessing time since the last health care provider visit (DM8e.2). This level of detail is unnecessary, as another item (DM8d) assesses whether the last visit was within the past 12 months.
 - 31 questions assessing type of sex partner (i.e., main, casual) or assessing behaviors with main sex partners (SX4, SX5a, SX5b, SX6a.o, SX6a.m, SX6b.o, SX6b.m, SX6c.o, SX6c.m, SX6d.o, SX6d.m, SX11a, SX12, SX13a, SX13b, SX14a.o, SX14a.m, SX14b.o, SX14b.m, SX20, SX21a, SX21b, SX22a.o, SX22a.m, SX22b.o, SX22b.m, SX22c.o, SX22c.m., SX22d.o, SX22d.m, SX32).
 - 4 questions assessing role-specific (i.e., insertive, receptive) anal sex and for each, whether a condom was used at last sex. These questions previously were asked if the respondent was male and reported his most recent sex partner was male (SX35a, SX35b, SX35c, SX35d). These respondents now will be asked the same questions about anal sex at last sex that are asked of respondents whose most recent sex partner was of the opposite-sex (SX34c and SX34d).
 - 5 questions that sought to assess sexual risk at last sex by accounting for partner antiretroviral treatment (ART) and viral load at last sex (SX36c, SX36d, SX36e); partner PrEP use at last sex (PA8a) and respondent PrEP use at last sex (PA8b). These questions are very difficult for respondents to answer.
 - 5 questions assessing the most recent sex partner's age (SX37a, SX37b), race/ethnicity (SX38), and history of crack cocaine use and incarceration (SX40b, SX40c).
 - 4 questions (ID9, ID10, ID11, ID12) assessing the number of people with whom the respondent engaged in specific injection equipment sharing behaviors. These questions are very difficult for respondents to answer and the level of detail does not justify the additional burden, as 4 parallel questions (ID13-16) assess the relative frequency of these same behaviors.
- o Deleted 51 questions assessing outcomes no longer necessary to report using NHBS data:
- 1 question (DM3b1) assessing language spoken at home
 - 1 question (DM4) assessing marital status
 - 3 questions (DM8b, DM8b.1, DM8c) assessing usual source of care. These questions are difficult for respondents to answer.
 - 4 questions asked of MSM cycle participants that assess disclosure of sexual orientation to anyone, to friends, to family members, or to women they had sex with (SO1, SO2a, SO2b, SO2c).
 - 3 questions assessing age at first sex (SX1, SX10, SX18).
 - 1 question assessing time since last sex with a man (SX11a), asked of male respondents who had ever had sex with a man but reported no male partners in the past 12 months.
 - 1 question assessing sex with women, previously asked of female respondents (SX50).

- 2 questions (ID7, ID7spec) assessing injection equipment disposal.
 - 3 questions (ND0, ND2g, ND2l) assessing the use of marijuana, ecstasy, and amyl nitrite.
 - 1 question (TX2) assessing unmet need for drug treatment.
 - 1 question assessing stimulant overdose (TX6).
 - 1 question (HT4a) assessing location of recent HIV test.
 - 2 questions (HT6, HT6a) assessing reason for not testing for HIV in the past 12 months.
 - 8 questions (HT7d, HT8a, HT8b, HT8b.1, HT8c, HT8c.1, HT10a, HT10b) assessing outcomes specific to people living with HIV. The vast majority of NHBS respondents are HIV-negative.
 - 3 questions (HC2b, HC2c, HC4a) assessing the location for Hepatitis C virus (HCV) testing and when participant was diagnosed with HCV.
 - 5 questions (HC5a, HC5b, HC7, HC9a, HC9b) assessing diagnosis of genital herpes and genital warts, rectal STD testing, and HPV vaccination.
 - 4 questions assessing receipt of free condoms (PA1a, PA1b) and participation in behavioral HIV prevention activities (PA4a, PA4b).
 - 2 questions (MP1, MP2) assessing Mpox diagnosis and vaccination.
 - 5 questions (END6a, END6b, END6c, END7, END8), previously asked of the interviewer to assess the quality of remote interviews during the COVID pandemic. These questions are no longer used, as all NHBS interviews are conducted in person, face-to-face.
- Measurement improvements – Modifications were made to items with potential to yield higher quality or more directly relevant data based on lessons learned from previous NHBS data collections and analyses.
 - Modified 19 questions (e.g., changes to question order, wording, response options, universe)
 - Modified wording to 9 questions that previously assessed behaviors with 'casual' sex partners (SX7a.m, SX7c.m, SX7e.m, SX15a.m, SX15c.m, SX15d.m, SX23a.m, SX23c.m, SX23e.m). These items now assess behaviors without regard to partner type.
 - Modified response options to 3 questions assessing drug injected most often (ES12, ID4a, ID4b.2) to simplify the response task.
 - Modified wording of 3 questions assessing frequency of injecting heroin, powder cocaine, and crack cocaine (ID3b, ID3c, ID3d) to simplify the response task.
 - Modified wording of 1 question assessing non-fatal opioid overdose (TX5) to include reference to fentanyl.
 - Narrowed the universe for 2 questions assessing awareness of PrEP (PA6a) and lifetime use of PrEP (PA7a) to exclude participants who reported being HIV-positive.

- Modified wording of 1 question (PA7a) assessing lifetime use of PrEP to account for the narrowed universe.
- Clarity, repetitive language, and interview flow - Based on a review of all items in the Behavioral Assessments, 1 item was added, 6 items were modified, and 21 items were deleted to improve clarity and interview flow. These changes do not affect the scope or content of the questions; they also do not affect the time burden of NHBS to participants. However, they are intended to improve the overall participant experience and the quality of data by improving clarity and flow of the interview process.
 - Added 1 introductory statement (INTRO_HC9a), for the new questions (listed above) assessing Doxy PEP.
 - Modified wording of 1 question (SO1) about sexual orientation disclosure to a health care provider. This question was previously the last of a set of questions with a separate question stem. All other questions in this set were deleted; thus, phrasing from the question stem was added to the wording of this question.
 - Modified 5 introductory statements (INTRO_ND, INTRO_ND2b, INTRO_TX5, INTRO_HC5a, INTRO_PA1a).
 - Deleted 21 introductory statements:
 - 1 introductory statement (INTRO_AL1) for deleted questions assessing alcohol use.
 - 2 introductory statements (INTRO_PA7a, INTRO_PA8a) for deleted questions assessing PrEP use.
 - 18 introductory statements in the sexual behavior section that were specific to partner type, i.e., main or casual (INTRO_SX4, INTRO_SX5, INTRO_SX6a.o, INTRO_SX6a.m, INTRO_SX7a.o, INTRO_SX7a.m, INTRO_SX12, INTRO_SX13a, INTRO_SX14a.o, INTRO_SX14a.m, INTRO_SX15a.o, INTRO_SX15a.m, INTRO_SX20, INTRO_SX21a, INTRO_SX22a.o, INTRO_SX22a.m, INTRO_SX23a.o, INTRO_SX23a.m). These statements are no longer needed, as no remaining questions refer to partner type and the reduction in complexity greatly simplifies the response task.