Justification for Change

National HIV Behavioral Surveillance (NHBS) System Round 6 (2020-2023) Summary of Changes to Methods

The Centers for Disease Control and Prevention requests a non-substantive change to the National HIV Behavioral Surveillance System (NHBS) (0920-0770, expiration date January 31, 2023). Interview data collection instruments, project activities, and annual burden will remain the same as in the previously approved information collection request. Methods will be revised.

The COVID-19 pandemic has impeded standard, in-person recruitment and interviewing during the implementation of the 2020 data collection and likely in future years as well. NHBS survey methods consist of recruitment, the interview, and HIV testing. Each component is important and has different challenges for implementation during COVID-19 pandemic. To address these challenges, we revised NHBS methods to include remote variants of our in-person methods. The underlying methods remain unchanged. For example, NHBS is still an interviewer administered one-on-one interview, however the interview may now occur via videoconference (with phone backup) or phone in addition to in-person. Similarly, NHBS will continue to utilize respondent-driven (RDS) and venue-based (VBS) recruitment methods, however these now include online venues and processes. A crosswalk of the approved and proposed request is below:

Topic (Location)	Approved Request	Proposed Request
Recruitment methods (SSA and SSB)	In-person recruitment: NHBS staff physically approach persons to initiate recruitment for NHBS.	Added remote recruitment via electronic communication platforms (e.g., text messages, phone calls, social networking or dating apps, webpages).
Interview methods (SSA and SSB)	In-person interviews.	Added remote interviews by videoconference or phone.
RDS methods (SSA and SSB)	RDS methods were limited to IDU and HET.	RDS methods may apply to all 3 populations: MSM, IDU, and HET: Due to health risks and safety related to COVID-19 spread, many venues (e.g. bars and restaurants) are either closed or have substantial restrictions on number of people who can gather there. This may impact the implementation of VBS during the pandemic, thus the RDS method, which do not rely on venues, may need to be implemented in addition or in place of the VBS in some sites.
Protection of the Privacy and Confidentiality of Information Provided by Respondents (SSA)	NHBS is anonymous. Local NHBS staff do not ask for or receive contact information on participants.	NHBS <u>data</u> are anonymous. For participants' convenience or benefit, participants may have the option to provide contact information to project staff on a voluntary basis. Examples of participants providing contact information for convenience include, but are not limited to: providing a phone number for phone text reminders of interview appointments; providing payment information (e.g. Venmo, PayPal, etc. name) so incentives can be provided electronically; providing an email address to facilitate videoconference interviews; or

		providing an address to receive self-collection or
		self-testing kits via mail. Examples of participants
		providing contact information for participant benefit
		include but are not limited to: providing telephone
		contact information so that project staff can call
		participants when their HIV (or additional testing
		offered) test results are ready; providing contact
		information to help participants with linkage to HIV
		care or other services (e.g., PrEP, housing, legal,
		substance use disorder treatment) they may need.
		Provision of contact information will be optional. In
		all cases, participants also will be provided
		information and instructions for how to participate
		fully without providing contact information (e.g.,
		participants can participate in-person or call the
		project (rather than be called by the project) for
		interview, linkage to services, or test results. In all
		cases, participant contact information will not be
		linked or linkable to the participant's behavioral
		assessment responses. Contact information will be
		stored and secured locally and never shared with
		CDC. Because of this change, the model consent
		form has been updated to remove the word
		"anonymous" (attachment 10).
Funding (SSA)	Five-year funding announcement	Due to prioritization of emergency public health
	PS16-1601 was published May 12,	response at local health departments and CDC
	2015. From 2016 to 2020, 23 sites	during the COVID-19 pandemic, the new NHBS
	participate in NHBS.	funding announcement was delayed one year and
		the current five-year funding announcement PS16-
		1601 for NHBS was extended by one year. Consequently, the MSM cycle in 2020 will be
		repeated in 2021.
Attachment 8:	MSM cycle in 2020; IDU cycle in	As a result of COVID-19 pandemic, revised NHBS
NHBS Cycle	2021; HET cycle in 2022.	Cycle Overview document to MSM cycle in 2020 and
Overview (SSA)	,	2021; IDU cycle in 2022; HET cycle in 2023.
Attachment 10:	Approved Model Consent Form	As a result of COVID-19 pandemic, revised Model
Model Consent		Consent Form to align with the revisions made to
Form (SSA)		RDS methods and revisions made in Protection of
		the Privacy and Confidentiality of Information
		Provided by Respondents section of SSA.
Attachment 11:	A copy of the original CDC IRB	A copy of the amended CDC IRB Determination
CDC IRB	Determination (June 25, 2014)	(August 7, 2020) to incorporate changes including
Determination		allowing sites to collect personal contact
(SSA)		information for participant convenience and to
		modify survey procedures in response to the COVID-
		19 pandemic, local restrictions, and the safety of
		survey staff and participants.