**Summary of Changes to Questionnaire**

Medical Monitoring Project

 OMB # 0920-0740

**Attachment 5d**

Beginning in early 2018, CDC began an evaluation of the MMP questionnaire. The evaluation focused on examination of the relevance, coherence, and scientific contribution of interview questions. The result is a modified interview questionnaire (see Attachment 5c for the previously approved version of the questionnaire and Attachment 5a for the new version of the questionnaire. A redlined version was not feasible because of extensive reformatting of the questionnaire, which was necessary to reduce programming errors and automate the collection of meta-data).

Sections of the questionnaire were modified to improve the efficiency of administration and the quality of the data collected. For example, questions about non-injection drug use, reproductive health, risk reduction and other topics were improved to ease participant comprehension. All new sections of the questionnaire were tested for comprehension through mock interviews. CDC staff conducted test interviews of the revised questionnaire using scenarios involving hypothetical respondents with different characteristics and determined the average time to complete the interview was 40 minutes, which is less time than the administration time for the previously approved questionnaire. In addition, cognitive testing was performed to improve questions on health insurance and coverage and sexual behaviors. The changes to the questionnaire are described in the following table.

Table 1. Proposed Modifications

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| --- | --- | --- | --- | --- |
| Location in Documents | Modifications (with brief justification) | Question #(s) | Burden (Increase, Decrease, No change) | Total Number of Questions |
| **Attachment 2018: p. 4****Attachment 2021: p. 4** | Modified an introduction in the “Introduction (IN)” topic. We reduced word count, repetitive language and included more plain language to improve comprehension. | **2021:**Intro\_21\_SURVEYIN**2018:** Modified INTRO\_5\_SURVEYIN, Intro\_5\_INTROTEL, | No change | 1 |
| **Attachment 2018: p. 6, 10-11** | Removed two questions in the “Residence (YS)” topic. Information about where the respondent resided two years prior to being interviewed is no longer needed. | **2018:** Removed Intro\_RESCURN8, RES2YN8 (YS.3.0) – CITY2N8 (YS.3.1) | Decrease | 2 |
| **Attachment 2018: p. 17** | We removed the “Marriage Status (DM)” topic, which included two questions. After reviewing stakeholder feedback, we decided to remove these questions to reduce the questionnaire length. Stakeholders determined that these questions did not collect critical information. | **2018:** Removed CRNLV\_N5 (DM.1.0) – MARRI\_N5 (DM.2.0) | Decrease | 2 |
| **Attachment 2018: p. 20****Attachment 2021: p. 17** | We modified an introduction statement in the “Disability (A)” topic. Throughout the questionnaire, we removed language that was repetitive to reduce questionnaire length. | **2021:** Intro\_21\_DISDEFN3**2018:** Intro\_6\_DISDEFN3 | No change | 1 |
| **Attachment 2018: p. 23-24, 25-26****Attachment 2021: p. 20-22** | We modified 5 questions in the “Healthcare coverage (FH)” topic, along with an introduction. We simplified wording based on results from cognitive interviews we conducted among our target population. We also made wording consistent. For example, we use the terms “health insurance and coverage” throughout, whereas previous questions used those terms in addition to, “insurance” and “coverage” and “health insurance and health coverage”. | **2021:**Modified Intro\_INSEMPN5\_21, INSEMPN5\_21 (FH.1.1.), INSMKTN5\_21 (FH.1.2), KINDZN5\_21 (FH.1.11), INS12\_9\_21 (FH.2.0), INSMTHN5\_21 (FH.2.1.)**2018:** Modified INSEMPN5 (FH.1.1.a) -INSMKTN5 (FH.1.1.b.), KINDZN5 (FH.1.12) - INSMTHN5 (FH.2.1.) | No change | 5 |
| **Attachment 2021: p. 20-21** | We added two questions to the “Healthcare coverage (FH)” topic. We created one question to measure whether respondents received military-based insurance and added one question to measure whether respondents purchased health insurance directly from a health insurance company. We made these changes after reviewing results of cognitive testing and consulting other surveys.  | **2021:** Added INSCOMPN21 (FH.1.3), KINDEN21 (FH.1.7) | Increase | 2 |
| **Attachment 2018: p. 23-25** | We removed 5 questions in the “Healthcare coverage (FH)” topic based on results from cognitive interviews we conducted among our target population. We removed a question that used the term “private health insurance” because this term was not widely understood. We also removed two questions about whether respondents obtained free medications because they were double-barreled and confusing to respondents. Finally, questions about military-based healthcare coverage were combined into one question. | **2018:** Removed KINDA\_5 (FH.1.1.), KINDE\_5 (FH.1.5), KINDF\_5 (FH.1.6.), KINDH\_N5 (FH.1.8.), KINDI\_N5 (FH.1.9) | Decreased | 5 |
| **Attachment 2018: p. 26-27** | Removed 5 questions in the “Healthcare coverage (FH)” topic. After reviewing stakeholder feedback, we decided to remove these questions to reduce the questionnaire length.  | **2018:** Removed TYPE\_N5 (FH.3.0) – USUAL\_8 (FH.3.4) | Decrease | 5 |
| **Attachment 2018: p. 28****Attachment 2021: p. 24** | We modified the introduction to the “General medical care (J)” module. We simplified the introduction to reduce questionnaire length. | **2021**: Intro\_21\_GENHLTHN8**2018**: Intro\_ GENHLTHN8 | No change | 1 |
| **Attachment 2018: p. 29** | We removed one question in the “Influenza (JF)” topic. After reviewing stakeholder feedback, we determined that the location where respondents received their most recent flu shot was not critical information for HIV surveillance purposes. | **2018:** LOCVA\_8 (JF.1.1.) | Decrease | 1 |
| **Attachment 2018: p. 29-30** | We removed the “Prescription medicines (JP)” topic, which included 7 questions. After reviewing stakeholder feedback, we decided to remove this topic to reduce the length of the questionnaire, thereby reducing respondent burden. | **2018:** Removed P12\_N5 (JP.1.0.) – PRMD6\_N5 (JP.2.5.) | Decrease | 7 |
| **Attachment 2021: p. 26** | We added an introduction to the “Diagnosis Date (KD)” topic after stakeholders informed us that a transition statement was needed.  | **2021:** Added Intro\_N21\_IPERINN3 | Increase | 1 |
| **Attachment 2018: p. 32****Attachment 2021: p.27** | We made slight modifications to the introduction in the “Ever care (KE)” topic. Based on findings from a supplemental qualitative project and stakeholder feedback, we removed language that said, “your HIV”. | **2021:**Intro\_21\_EVERCR\_8**2018:** Modified Intro\_EVERCR\_8 | No change | 1 |
| **Attachment 2018: p. 34****Attachment 2021: p.29** | We modified one question in "Care utilization (KU)" to match the wording of subsequent questions. This will improve comprehension and reduce respondent burden. | **2021:**NYMLTF\_21 (KU.4.0)**2018:**Modified NYMLTF\_8 (KU.4.0) | No change | 1 |
| **Attachment 2018: p. 37****Attachment 2021: p.34** | Added 2 questions in the "Barriers and Facilitators to care (KP)" topic. A supplemental qualitative project we conducted in 2018 indicated that people had other barriers to accessing HIV medical care that they could not fit into our existing questions. The addition of these questions allows us to have a more complete picture of barriers to accessing HIV care. We also simplified the wording of the introduction. | **2021:** Modified Intro\_21\_BARRI1N8, Added BARRI6N21 (KP.6.0),BARRI6N21OS (KP.6.1)**2018:** Modified Intro\_BARRI1N8 | Increase | 2 |
| **Attachment 2018: p. 39****Attachment 2021: p. 35** | We made slight modifications to the introduction in the “Ever ART (TE)” topic. Based on findings from a supplemental qualitative project and stakeholder feedback, we removed language that said, “your HIV”. | **2021:** Intro\_21\_EART\_N5**2018:** Modified Intro\_8\_EART\_N5 | No change | 1 |
| **Attachment 2018: p. 40** | We removed one question from the “Ever ART (TE)” topic after determining that it did not collect meaningful data and that there was no public health action related to this question. | **2018**: Removed NART6\_N5 (TE.1.6.) | Decrease | 1 |
| **Attachment 2018: p.42** | We removed one question from the “Current ART (TC)” topic after determining that it did not collect meaningful data and that there was no public health action related to this question. | **2018:** Removed CART6\_N5 (TC.2.6.) | Decrease | 1 |
| **Attachment 2018: p.43** | We removed one question in the “Adherence (TA)” topic. To streamline the questions and reduce questionnaire length, we removed this question, which served as a filter question for the series of questions about reasons for missing a dose. Instead, we will use question TA.1.0. (which asks about the number of days someone missed a dose) as a filter question. | **2018**: Removed MISEVRN8 (TA.4.0.) | Decrease | 1 |
| **Attachment 2018: p.45** | We removed the introduction in the “HIV treatment as prevention (TB)” topic. This introduction was unnecessary and explained concepts that did not match the question that followed. | **2018:** Removed Intro\_TASP1N8 | Decrease | 1 |
| **Attachment 2018: p. 46****Attachment 2021: p. 42** | We modified the introduction in the “Total sex partners (ST)” questions. We simplified the introduction, used more plain language, and reduced the word count, thereby reducing respondent burden and increasing comprehension. We added one introduction, which will be specific to transgender persons, after receiving stakeholder feedback. | **2021:** Intro1\_N21\_SX\_TFPN4, Intro2\_N21\_SX\_TFPN4**2018:** Intro\_SX\_TFPN4 | Increase | 1 |
| **Attachment 2018: p. 47** | We removed one question in the “Total sex partners (ST)” questions. We will no longer ask women if they had sex with other women, since we do not use this data for the high-risk sex indicator. | **2018:** Removed SX\_TWPN4 (ST.4.0) | Decrease | 1 |
| **Attachment 2018: p. 48** | We removed the “Exchange sex (SE)” topic, which contained one question. After reviewing stakeholder feedback, we decided to remove this question to reduce questionnaire length. | **2018**: Removed SX\_EXCN4 (SE.1.0.) | Decrease | 1 |
| **Attachment 2018: p. 49****Attachment 2021: p. 44** | We modified introductions in the “Names of partners (SN)” topic and removed one introduction. The new introductions are shorter in length and use more plain language, thereby improving comprehension. | **2021**: Intro1\_21\_SX\_NM1N4\_21Intro2\_21\_SX\_NM1N4\_21Intro3\_21\_SX\_NM1N4\_21**2018**: Removed Intro1\_5\_SX\_NM1N4, Intro2\_5\_SX\_NM1N4, Intro3\_5\_SX\_NM1N4, Intro\_6\_4SX\_NM1N4 | Decrease | 1 |
| **Attachment 2021: p. 47, 51, 56, 60, 64** | We added 5 introductions in the “Partner demographics #1, #2, #3, #4, #5 (SP)” topic. After conducting cognitive interviews with members of our target population, we determined that we needed a transition statement before questions about each sex partner.  | **2021:** Intro\_N21\_SXPGN1N4,Intro\_N21\_SXPGN2N4,Intro\_N21\_SXPGN3N4,Intro\_N21\_ SXPGN4N4,Intro\_N21\_SXPGN5N4 | Increase | 5 |
| **Attachment 2018: p.49–51****Attachment 2021: p. 44-45** | We modified questions in the "Names of partners (SN)" topic after reviewing results from cognitive interviews conducted in the target population. We simplified the wording to improve comprehension. | **2021:** SX\_NM1N4\_21 (SN.1.0) –SX\_NM5N4\_21 (SN.1.4)**2018:** Modified SX\_NM1N4 (SN.1.0) –SX\_NM5N4 (SN.1.4) | No change | 5 |
| **Attachment 2018: P. 53, 54, 65, 66, 77, 78, 89, 90, 101, & 102** | We removed 10 questions from the “Partner demographics #1, #2, #3, #4, #5 (SP)” topics. After reviewing stakeholder feedback, we determined that questions about a partner’s age and commitment level were not critical for HIV surveillance purposes and were not used in our measure of high-risk sex. | **2018:** Removed Intro\_SXPEN1N4, Intro\_8\_SXPAG1N4,SXPAG1N4 (SP.2.0),SXPAG2N4 (SP.2.0), SXPAG3N4 (SP.2.0), SXPAG4N4 (SP.2.0), SXPAG5N4 (SP.2.0), SXPCM1N4 (SP.5.0),SXPCM2N4 (SP.5.0),SXPCM3N4 (SP.5.0),SXPCM4N4 (SP.5.0),SXPCM5N4 (SP.5.0) | Decrease | 10 |
| **Attachment 2018:****p. 46, 68, 80, 92, 104****Attachment 2021: p. 49, 53, 57, 62, 66** | We modified questions in the "Vaginal Sex (SL)" topic after reviewing results from cognitive interviews performed with our target population. The new wording will improve comprehension. | **2021:** Intro\_SXVC1BN4\_21, SXVC1BN4\_21 (SV.1.1), SXVC2BN4\_21 (SV.1.1), SXVC3BN4\_21 (SV.1.1),SXVC4BN4\_21 (SV.1.1),SXVC5BN4\_21 (SV.1.1)**2018:** Modified SXVC1BN4 (SV.1.5.b.); SXVC2BN4 (SV.1.5.b.); SXVC3BN4 (SV.1.5.b.); SXVC4BN4 (SV.1.5.b.); SXVC5BN4 (SV.1.5.b.) | No change | 5 |
| **Attachment 2018: p. 54 – 55, 67, 79, 91 & 103** | We removed 25 questions in the “Vaginal sex (SL)” topic after reviewing results from cognitive interviews performed with our target population. We will no longer ask questions about the frequency of vaginal sex, which was not essential to measuring high-risk sex. The removal of these questions reduces questionnaire length. | **2018:** Removed SV10\_1N4 (SV.1.1.) – SXVC1AN4 (SV.1.5.a); SV10\_2N4 (SV.1.1.) – SXVC2AN4 (SV.1.5.a.); SV10\_3N4 (SV.1.1.) – SXVC3AN4 (SV.1.5.a.); SV10\_4N4 (SV.1.1.) – SXVC4AN4 (SV.1.5.a.); SV10\_5N4 (SV.1.1.) – SXVC5AN4 (SV.1.5.a.) and Intro\_SXVC1AN4 | Decrease | 25 |
| **Attachment 2018: p. 58, 70, 82, 94, 106****Attachment 2021: p. 49, 54, 58, 62, 67** | We modified questions in the "Anal Sex (SL)" topic after reviewing results from cognitive interviews performed with our target population. The new wording will improve comprehension. | **2021:** Intro\_ SXAC1BN4\_21,SXAC1BN4\_21 (SL.1.1.),SXAC2BN4\_21 (SL.1.1.),SXAC3BN4\_21 (SL.1.1.),SXAC4BN4\_21 (SL.1.1.), SXAC5BN4\_21 (SL.1.1.)**2018**: Modified Intro\_SXAC1BN4, SXAC1BN4 (SL.1.5.b.), SXAC2BN4 (SL.1.5.b.), SXAC3BN4 (SL.1.5.b.), SXAC4BN4 (SL.1.5.b.), SXAC5BN4 (SL.1.5.b.) | No change | 5 |
| **Attachment 2018: pg. 56-57; 58-60; 68-69; 70-72; 80-81; 82-84; 92-93; 94-96; 104-105; 106-108** | We removed 65 questions in the “Anal sex (AL)” topic after reviewing results from cognitive interviews performed with our target population. We will no longer ask questions about the frequency of anal sex, which was not essential to measuring high-risk sex. The removal of these questions reduces questionnaire length. | **2018:** RemovedSA10\_1N4 (SL.1.1.) – SXAC1AN4 (SL.1.5.a.); ABTM1AN4 (SL.1.6.a.) – ATPC1BN4 (SL.1.9.b); SA10\_2N4 (SL.1.1.) – SXAC2AN4 (SL.1.5.a.); ABTM2AN4 (SL.1.6.a.) – ATPC2BN4 (SL.1.9.b); SA10\_3N4 (SL.1.1.) – SXAC3AN4 (SL.1.5.a.); ABTM3AN4 (SL.1.6.a.) – ATPC3BN4 (SL.1.9.b); SA10\_4N4 (SL.1.1.) – SXAC4 AN4 (SL.1.5.a.); ABTM4AN4 (SL.1.6.a.) – ATPC4BN4 (SL.1.9.b); SA10\_5N4 (SL.1.1.) – SXAC5AN4 (SL.1.5.a.); ABTM5AN4 (SL.1.6.a.) – ATPC5BN4 (SL.1.9.b); Intro\_SXAC1AN4, Intro\_ATPC1BN4, Intro\_ABTC1AN4, Intro\_ABTC1BN4, Intro\_ATPC1AN4 | Decrease | 65 |
| **Attachment 2018: p. 62, 74, 87, 98, 110****Attachment 2021: p. 50, 55, 59, 63, 68** | We modified questions in the "Transgender and unknown gender sex (SG) " topic after reviewing results from cognitive interviews performed with our target population. The new wording will improve comprehension. | **2021:**Intro\_ TGC1BN4\_21, TGC1BN4\_21 (SG.1.1.),TGC2BN4\_21 (SG.1.1.),TGC3BN4\_21 (SG.1.1.),TGC4BN4\_21 (SG.1.1.),TGC5BN4\_21 (SG.1.1.)**2018: Intro\_TGC1BN4,** Modified TGC1BN4 (SG.1.5.b),TGC2BN4 (SG.1.5.b),TGC3BN4 (SG.1.5.b),TGC4BN4 (SG.1.5.b),TGC5BN4 (SG.1.5.b) | No change | 5 |
| **Attachment 2018: pg. 61-62; 73-74; 85-86; 97-98; 109-110** | We removed 25 questions in the “Transgender and unknown gender sex (SG)” topic after reviewing results from cognitive interviews performed with our target population. We will no longer ask questions about the frequency of vaginal or anal sex, which was not essential to measuring high-risk sex. The removal of these questions reduces questionnaire length. | **2018:** Removed Intro\_TGC1AN4,TG10\_1N4 (SG.1.1.) – TGC1AN4 (SG.1.5.a.); TG10\_2N4 (SG.1.1.) – TGC2AN4 (SG.1.5.a.); TG10\_3N4 (SG.1.1.) – TGC3AN4 (SG.1.5.a.); TG10\_4N4 (SG.1.1.) – TGC4AN4 (SG.1.5.a.); TG10\_5N4 (SG.1.1.) – TGC5AN4 (SG.1.5.a.) | Decrease | 25 |
| **Attachment 2018: p. 63, 75, 87, 99, and 111** | We removed 10 questions in the “Status #1, #2, #3, #4, #5 (SS)” topics. These questions were not critical for measuring high-risk sex. | **2018:** RemovedSTATS1N4 (SS.1.0) – AWRST1N4 (SS.1.1.);STATS2N4 (SS.1.0) – AWRST2N4 (SS.1.1.); STATS3N4 (SS.1.0) – AWRST3N4 (SS.1.1.); STATS4N4 (SS.1.0) – AWRST4N4 (SS.1.1.); STATS5N4 (SS.1.0) – AWRST5N4 (SS.1.1.); | Decrease | 10 |
| **Attachment 2018: p. 64, 76, 88, 100 and 112****Attachment 2021: p.51, 55, 59, 64, 69** | We modified questions in the "Pre-exposure prophylaxis (SR)" topic by reducing the question length significantly. This will improve respondent comprehension and reduce burden. | **2021:** Intro\_21\_ PREP1N4\_21Intro\_ PREP2N4\_21,Intro\_PREP3N4\_21,Intro\_PREP4N4\_21,Intro\_PREP5N4\_21,PREP1N4\_21 (SR.1.0),PREP2N4\_21 (SR.1.0),PREP3N4\_21 (SR.1.0),PREP4N4\_21 (SR.1.0),PREP5N4\_21 (SR.1.0)**2018:** Modified PREP1N4 (SR.1.0), PREP2N4 (SR.1.0), PREP3N4 (SR.1.0), PREP4N4 (SR.1.0), PREP5N4 (SR.1.0) | Decrease | 5 |
| **Attachment 2018: p. 112-113** **Attachment 2021: p. 69-70** | We modified one question in the "Aggregate information (SA)" topic to reduce jargon and use more plain language. This will improve respondent comprehension. | **2021:** Intro\_21\_SXAGC1N4, Intro\_N21\_SXAGC2N4, SXAGC3N4\_21 (SA.1.3)**2018:** Modified Intro\_SXAGC1N4, SXAGC3N4 (SA.1.3) | No change | 1 |
| **Attachment 2018: p. 114** | We removed the “MSM sex ever (ME)” topic, which contained a single question. This question is no longer needed. | **2018:** Removed MSMEVRN5 (ME.1.0) | Decrease | 1 |
| **Attachment 2018: p. 115-116** | We removed the “Disclosure of same-sex attraction (RC)” topic, which contained 6 questions. After receiving stakeholder feedback, we removed these questions because they were not a priority for stakeholders. | **2018:** Removed Intro\_OUTMAN5, OUTMAN5 (RC.1.1.) – OUTMFN5 (RC.1.6.) | Decrease | 6 |
| **Attachment 2018: p.** **113-114** | We removed the “Serosorting (SO)” topic, which contained 4 questions. These questions were lengthy and burdensome to respondents. | **2018:** Removed Intro\_SEROSRT1, SEROSRT1 (SO.1.0)– SEROSRT4 (SO.4.0) | Decrease | 4 |
| **Attachment 2018: p.** **120****Attachment 2021: p.71** | We modified the introduction in the “Physical violence (PV)” topic. We reduced the word count and used more plain language to increase comprehension. | **2021**: Intro\_21\_IPVPH1N5**2018**: Modified Intro\_IPVPH1N5 | No change | 1 |
| **Attachment 2018: p.** **120****Attachment 2021: p.71** | We modified one question in the “Sexual Violence (BS)” topic. We simplified and reduced the wording to improve comprehension. | **2021:** Intro\_IPVSX1N5\_21, IPVSX1N5\_21 (PS.1.0)**2018**: Modified Intro\_IPVSX1N5, IPVSX1N5 (PS.1.0) | No change | 1 |
| **Attachment 2021: p. 78-79** | We added 4 questions to the "Cigarette and tobacco use (US)" topic that will measure vaping. We also added an introduction to these questions that defines “vaping”. This should improve respondent comprehension. | **2021:** Intro\_CIGELCN5\_21, CIGELCN5\_21 (US.5.0) –Vape\_otherN21 (US.5.3.) | Increase | 4 |
| **Attachment 2018: p. 128** | We removed 2 questions that measured e-cigarette use in the “Cigarette and tobacco use (US)” topic. Instead, we will ask questions that include the term “vaping”. | **2018:** CIGELCN5 (US.5.0), CIGELFN5 (US.5.1.) | Decrease | 2 |
| **Attachment 2018: p. 129-131****Attachment 2021: p. 79-81** | We added one question to the "Non-injection drug use (UN)" topic to ensure the list of drugs we ask about is exhaustive. We also removed one question in the “Non-injection drug use (UN)” topic. Thus, the addition of one question and removal of another indicates no change. We modified language in two questions to improve comprehension and reduce respondent burden. | **2021:** Modified Intro\_21\_MARIJU\_9, PAINKN5\_21 (UN.8.0), TRANQN5\_21 (UN.9.0), Added OTHERDRUGN21 (UN.10.0)**2018:** Removed Intro\_ANID12\_9, ANID12\_9 (UN.1.0), Intro\_PAINKN5Modified Intro\_MARIJU\_9, PAINKN5 (UN.10.0), TRANQN5 (UN.11.0) | No change | 1 |
| **Attachment 2018: p. 133****Attachment 2021: p. 83** | We removed one question and modified the wording of one question in the "Injection Drug Use (UI)" topic. We modified one question to include other examples of commonly used painkillers, such as Percocet and Vicodin. We also removed a question on injecting amphetamines after consulting with subject matter experts who noted that methamphetamine (which we ask about) is the most commonly used amphetamine.  | **2021:**PKINJN5\_21 (UI.7.0)**2018:**PKINJN5 (UI.7.0) | Decrease | 1 |
| **Attachment 2018: p. 140****Attachment 2021: p. 89** | We modified an introduction in the “Discrimination (RD)” topic to reduce repetitive words. | **2021:** Intro\_21\_DISHIV\_8**2018**: Intro\_DISHIV\_8 | No change | 1 |
| **Attachment 2018: p. 136, 138****Attachment 2021: p. 85** | We removed 3 questions and one introduction from the “Stigma (RS)” topic. After consulting with the National HIV/AIDS Strategy workgroup, we removed 3 questions that lacked a reference period. In addition, we modified one introduction statement to reduce word count and use more plain language. | **2021:** Intro\_21\_STGA12N8**2018**: Modified Intro\_8\_STIGMAN5, Removed STIGMAN5 (RS.1.0) – STIGMCN5 (RS.3.0), Intro\_STGA12N8 | Decrease | 4 |
| **Attachment 2018: p. 143-145** | We removed the “Contraception (GC)” topic, which included 14 questions. The topic was lengthy and burdensome to participants. | **2018:** Removed Intro\_8\_BIRCOAN3, BIRCOAN3 (GC.1.1.) – BIRCOPN3 (GC.1.16.) | Decrease | 14 |
| **Attachment 2018: p. 145****Attachment 2021: p.92-93** | We added 6 questions to a new "Family Planning (GF)" topic and modified one question. Our previous contraception questions were burdensome, lengthy and limited to women with male sex partners. The new Family Planning topic will provide information on how persons with HIV interact with the healthcare system to get information on family planning. | **2021:** Added INTENTDADN21INTENTN8\_21 (FP.1.0)- VERTRANN21 (FP.7.0)**2018:** Modified INTENTN8 (GR.1.0) | Increase | 6 |
| **Attachment 2021: p. 94-96** | We added 8 questions to the “Reproductive history (GR)” topic. We simplified this topic by asking women about their pregnancies in aggregate, instead of asking about their individual pregnancies. This will reduce respondent burden. | **2021:** Intro\_N21\_PREG\_9, OUTCM1N3\_21 (GR.2.0) - KIDHIVN21 (GR.9.0) | Increase | 8 |
| **Attachment 2018: p. 145-153** | We removed 25 questions in the “Reproductive history (GR)” topic. This topic was lengthy, burdensome, and sensitive for respondents. We will no longer ask individual questions about the five most recent pregnancy outcomes since testing positive for HIV. | **2018**: Removed INTNT1N3 (GR.2.0) – DUDT5N3 (GR.6.4) | Decrease | 25 |
| **Attachment 2021: p.109** | We added one question to the "Services and Assistance programs (ND)” topic, which will measure an unmet need for condoms. | **2021:** NEDCOND\_N21 (ND.14.1) | Increase | 1 |
| **Attachment 2018: p. 117-118****Attachment 2021: p. 111** | We modified one introduction and removed one introduction from the “Prevention Activities (PA)” module. We did so to reduce unnecessary and excessive introductions and reduce questionnaire length. | **2021:** Intro\_21\_INFTX1N8**2018:** Modified Intro\_INFTX1N8and Removed Intro\_5\_COND12\_9 | Decrease | 1 |
| **Attachment 2018: p. 118****Attachment 2021: p. 112** | We modified two questions in the "Risk reduction (PR)" topic after reviewing results from cognitive interviews performed with our target population. We significantly reduced the question length, thereby reducing respondent burden. | **2021:**TALK\_A\_21 (PR.1.0), TALK\_B\_21 (PR.2.0)**2018**: Removed Intro\_TALK\_5Aand modified TALK\_5A (PA.2.0), TALK\_5B (PA.2.1.) | Decrease | 2 |
| **Attachment 2018: p. 118** | We removed one question in the “Prevention Messages (PM)” topic. This question measured whether respondents had seen or heard of the “HIV treatment works” campaign. This campaign is no longer in use. | **2018:** Removed HTWCMPN8 (PM.3.0) | Decrease | 1 |
| **Attachment 2018: p. 119** | We removed one question in the “Risk Reduction (PR)” topic that was lengthy and burdensome for respondents to answer. | **2018:** Removed GROU1\_12 (PA.3.0) | Decrease | 1 |
| **Attachment 2018: p. 165-167** | We removed two questions in the “Other disability (NS)” topic. We no longer need detailed information about the month and date when they received either forms of assistance. In addition, this question asked about information that was difficult for respondents to recall.  | **2018:** DSSSIN8 (NS.1.0), DSSDIN8 (NS.2.1.) | Decrease | 2 |