August 31, 2015

Leroy A. Richardson
Information Collection Review Office
Centers for Disease Control and Prevention
1600 Clifton Road, NE., MS-D74
Atlanta, GA  30329

Re: Public Comment and Recommendations on Proposed Data Collection: “Prevent Hepatitis Transmission Among Persons Who Inject Drugs;” Department of Health and Human Services, Centers for Disease Control and Prevention; Docket No. CDC-2015-0047

Submitted electronically via Federal eRulemaking Portal

To Whom It May Concern:

The National Viral Hepatitis Roundtable (NVHR), a broad coalition working to fight, and ultimately end, the hepatitis B and hepatitis C epidemics, and the National LGBTQ Task Force, an advocacy organization working to advance full freedom, justice, and equality for LGBTQ people, appreciate the opportunity to provide comment on the Centers for Disease Control and Prevention’s (CDC) Proposed Data Collection – “Prevent Hepatitis Transmission Among Persons Who Inject Drugs.” The emerging hepatitis C epidemic among primarily rural youth under 30 years of age is cause for alarm, and we are pleased CDC has initiated these studies.

In order to obtain the most robust and relevant data set possible, best informing future programmatic and policy interventions, we propose the following recommendations for the initial and follow up surveys:

- **“Section: Demographics/Basic Info”** – We recommend the inclusion of a sexual orientation question. With LGBTQ youth at increased risk for substance use disorder, it is critical to attempt to capture the proportion of LGBTQ youth at risk for hepatitis C. The question currently in use on the CDC’s Youth Risk Behavior Survey may be appropriate here.\(^1\)
- **“Section: First Injection” and “Section: Injection Practices”** – We recommend the addition of “street hormones” as an option, in order to gauge if and how transgender youth in particular may be at increased risk for hepatitis C due to not just illicit drug use, but also hormone use for medical transition.

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• **“Section: Sex Partners”** – We recommend the inclusion of a question regarding the gender of sex partner(s) in this section, as a demographic question capturing sexual orientation is insufficient to understand the circumstances of youth who may be engaged in sex work/trade. The sexual behavior question currently in use on the Youth Risk Behavior Survey may be appropriate here.

• **Addition of Section on Hepatitis B Testing and Vaccination** – CDC viral hepatitis surveillance data from 2013 indicates the first rise in hepatitis B acute infection since 1990. While attributing this rise to injecting behavior is premature, anecdotal evidence also shows increases in hepatitis B transmission among the population this study seeks to engage. Given the lack of resources for a robust, coordinated viral hepatitis surveillance system generally, we strongly encourage using this opportunity to collect hepatitis B data as was done with HIV, physical health, and mental health.

Again, NVHR and the National LGBTQ Task Force thank you for the opportunity to provide comment on this Proposed Data Collection; the aims are timely and a more thorough understanding of this emerging epidemic is vital. We look forward to learning more from future results. If you have any questions about these recommendations, please contact Christine Rodriguez by phone at (202) 408-4848 or by email at crodriguez@nvhr.org, or Meghan Maury by phone at (202) 639-6322 or by email at mmaury@thetaskforce.org

Sincerely,

National LGBTQ Task Force
National Viral Hepatitis Roundtable

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2 The Youth Risk Behavior Survey asks: “During your life, with whom have you had sexual contact? A. I have never had sexual contact; B. Females; C. Males; D. Females and males.”