The Process of HIV and STD Surveillance at DSHS

HIV and STD surveillance is an ongoing process of data collection and reporting.

DSHS freezes the HIV/STD data once a year in July. DSHS uses these numbers to create year-end datasets for the previous calendar years. For example, DSHS created the year-end dataset for 2024 in July 2025.

HIV and STD numbers from previous calendar years may fluctuate slightly for a few reasons:

1. **Ongoing quality assurance processes.** This involves working with local health departments across Texas to improve data collection, quality, and completeness.
2. **Ongoing deduplication activities with other states or funded jurisdictions.** Every six months, CDC provides Texas with a list of possible duplicates with other states or funded jurisdictions for duplicate pair resolution. Texas works with the other states and jurisdictions to determine if the case is a true duplicate or not. DSHS will update true duplicates with information from other states if applicable. This allows DSHS to learn if patients in our surveillance registry have moved out of state and are no longer Texas residents. For example, if someone diagnosed with HIV in Texas moved to Louisiana we would no longer include them as a Texas case.
3. **Routine matches to vital statistics collected at the DSHS Center for Health Statistics (CHS).** This involves matching the HIV/STD surveillance registry data to the birth and death records collected through CHS. This process allows DSHS to look for possible cases of perinatal HIV or congenital syphilis. Furthermore, it allows DSHS to determine if patients in the DSHS surveillance registry have died.
4. **Routine matches to the National Death Index (NDI) and the Social Security Death Index (SSDI).** Matching DSHS HIV surveillance records to these two indexes allows DSHS to determine if patients in the surveillance registry have died.
5. **Routine matches to a Texas Department of Criminal Justice (TDCJ) database.** This match would not alter the number of people with HIV statewide. It might change the location of where the person lives and therefore prevalence by jurisdictions within Texas.
6. **Intrastate deduplication.** Sometimes DSHS finds duplicate data. For example, a person reported under both a maiden name and a married name. When DSHS discovers they are the same person, DSHS corrects the duplicate.

7. **Enhanced surveillance activities.** Surveillance sites across Texas now more thoroughly investigate congenital syphilis cases. This allows DSHS to update surveillance data with important information, such as if a woman diagnosed with syphilis had a child.
8. **Discontinuance of STD*MIS.** Discontinuing the use of STD*MIS (Sexually Transmitted Disease Management Information System) and starting use of THISIS (The HIV and STD Integrated System) allowed DSHS to better address duplicate cases in the data system and will likely continue to assist us in resolving duplicate cases.

These processes and activities are a normal part of the surveillance process. Surveillance is always a moving target. As a result, previously published "official" numbers may sometimes fluctuate.

Resources

- Introduction to Public Health Surveillance (CDC)
- Public Health Surveillance Systems (CDC)
- CDC STD Surveillance Report
- CDC HIV Surveillance Report