

Current MD Research – Understand characteristics of non-responders/refusals to enable improve ART targeting

Preliminary findings

I have analysed the EFS, FRS, EHC, OMN and GSL (LFS pending) for:

- 1). The reasons people give for not participating in surveys, and
- 2). A geo-demographic model of society for behavioural propensities during the survey process.

I find that the reasons people give for not taking part in surveys are largely subjective. For the majority of refusal reasons, the relative variation between likelihood of refusal reason between surveys broadly follows the overall refusal rate. No reason for refusal had a likelihood that was independent of survey, though 4 reasons displayed slightly less relative variation across the 5 surveys than the overall refusal rates. For 5/16 reasons, certain surveys are more likely to cite that reason for refusal. Two of these reasons are likely to be due to operational differences in the surveys ('too old/infirm' more widely used in the EFS and OMN surveys; 'Language difficulties' largely specific to the EHC survey). The remaining 3 reasons may be due to specific objections to the FRS survey ('Disliked survey matter', 'Confidentiality concerns' (EFS also, though weaker) and 'Broken appointments'). This suggests that lack of participation is not absolute for most people and given an unwillingness to take part, excuses will be given in a relatively constant proportion across surveys.

The geographic model of the UK society I have analysed for behavioural responses is the ACORN classification system. The ACORN coding system classifies the entire UK population into 5 categories, 17 groups and 56 types, thereby creating a 'geo-demographic' model of the population. It was developed by CACI using information on 400 variables from households by postcode, of which approximately 30% of the variables were derived from 2001 census data. At the 5 category level, I find that the ACORN model is a reasonable model of the response propensity of the UK population. This model can be improved by looking at the 17 groups that make up the 5 categories, but this model would potentially be of less utility. An intermediate might be to split the population into 4 broad groups and possibly developing a behavioural propensity model (including likely reasons given for refusal) for each distinct sub-population. One could potentially develop this by devising a best strategy for contact and refusal avoidance for each group.