South Africa

Melanie Plazy, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France
Adama Diallo, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France
François Dabis, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France
Joanna Orne-Gliemann, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France
Thabile Hlabisa, Africa Health Research Institute, KwaZulu-Natal, South Africa
Nolnhlanhla Okesola, Africa Health Research Institute, KwaZulu-Natal, South Africa
Kobus Herbst, Africa Health Research Institute, KwaZulu-Natal, South Africa
Collins Iwuji, Africa Health Research Institute, KwaZulu-Natal, South Africa; Department of Global Health and Infection, Brighton and Sussex Medical School, University of Sussex, Brighton, UK
Sylvie Boyer, Aix Marseille Univ, INSERM, IRD, SESSTIM, Sciences Economiques & Sociales de la Santé & Traitement de l'Information Médicale, Marseille, France
France Lert, INSERM, Centre for Research in Epidemiology and Population Health (CESP-U 1018), Villejuif, France
Nuala McGrath, Africa Health Research Institute, KwaZulu-Natal, South Africa; School of Primary Care and Population Sciences and - Department of Social Statistics and Demography, University of Southampton, Southampton, UK; School of Nursing and Public Health, College of Health Sciences, University of KwaZulu-Natal, South Africa
Deenan Pillay, Department of Global Health and Infection, Brighton and Sussex Medical School, University of Sussex, Brighton, UK; Division of Infection and Immunity, University College London, London, UK
Joseph Larmarange, Centre Population et Développement, Université de Paris, Institut de Recherche pour le Développement, Inserm, Paris, France

Implementation and effectiveness of the linkage to HIV care intervention carried out within the ANRS 12249 TasP trial (2012-2016) in the Hlabisa sub-district, rural KwaZulu-Natal, South Africa

Study Documentation

January 12, 2023

Metadata Production

Metadata Producer(s)	Africa Health Research Institute (AHRI)
Identification	DDI.AHRI.TasP.linkage.paper.dataset

Table of Contents

Implementation and effectiveness of the linkage to HIV care intervention carried out within the ANRS 12249 TasP trial (2012-2016) in the Hlabisa sub-district, rural KwaZulu-Natal, South Africa

Overview

Identification	AHRI.TasP.linkage.paper.dataset
Version	V1.0.0

Abstract

The analysis conducted aimed at describing the implementation and effectiveness of the linkage-to-care intervention in rural KwaZulu-Natal, South Africa. In the ANRS 12249 TasP trial on Universal Testing and Treatment (UTT) implemented between 2012-2016, resident individuals =16 years were offered home-based HIV testing every six months. Those ascertained to be HIV-positive were referred to trial clinics. Starting May 2013, a linkage-to-care intervention was implemented in both trial arms, consisting of tracking through phone calls and/or home visits to “re-refer” people who had not linked to care to trial clinics within three months of the first home-based referral. We first described fidelity of the linkage-to-care intervention implementation: (1) adherence, describing whether the intervention has been implemented as designed, was measured looking at “contact attempt” (or tracking), i.e. when a fieldworker tried to contact an HIV-positive individual eligible for the intervention, either by phoning or visiting the person at home; and (2) exposure, describing how the target population received the intervention, was measured by looking at “re-referral”, i.e. when the individual answered his/her phone or opened his/her door when visited at home (assuming that a re-referral in care occurred at each successful contact). We then studied the effectiveness of the linkage-to-care intervention, defined as having linked to care, meaning having attended a TasP trial clinic (the variable used was “date of the first visit in a trial clinic”) or a DoH clinic (the variables used were “date of first CD4 count or viral load measurement” or “date of first visit in a DoH clinic”) following HIV identification through HBHCT.

Kind of Data	The primary data source for this analysis was the TasP trial database, which provided information on trial registrations and exits; uptake and results of home-based rapid HIV testing; clinic visits of PLHIV seen in trial clinics; and sociodemographic and behavioural characteristics collected at home every 6-monthly survey round through questionnaires. This main trial database was merged with the linkage-to-care intervention database of all forms filled at each tracking attempt, indicating the type of contact attempt (phone call or home visit) and whether the person answered his/her phone or opened his/her door. In addition, two data sources were used to capture information from PLHIV seen in local DoH clinics: (a) viral loads and CD4 counts from National Health Laboratory Service NHLS; and (b) managed by thedistrict DoH and AHRI. Both NHLS and ACCDB database contain data from Hlabisa primary care clinics since 2004.
Unit of Analysis	We included all individuals (i) ascertained HIV-positive by trial fieldworkers and referred at least once to a trial clinic between March 2012 and December 2015 (from January 2016, HIV-positive individuals started being referred to the Department of Health (DoH) clinics in preparation for the trial closure), (ii) who were not in care at the time of referral, neither in the trial clinics nor in the local HIV treatment program (i.e. no CD4 count, viral load measurement and clinic visit recorded in the DoH clinics within the 13 months before referral), (iii) who were still resident and alive in trial area =3 months (no migration, no death, no end of data follow-up within three months of re-referral), and (iv) who had not linked to a trial or DoH clinic within three months of their first home-based referral to care. We excluded individuals with inconsistent dates (i.e. date of a first clinic visit or death before the date of first referral).

Scope & Coverage

Keywords	Linkage to HIV care, Phone calls, Home visits, Implementation, South Africa, rural
Topics	HIV; Delivery of health care; Cell phone use; House calls; Implementation Sciences; South Africa; Rural populations

Time Period(s)	2012-2016
Countries	South Africa

Geographic Coverage
Hlabisa sub-district, KwaZulu-Natal, Rural South Africa

Universe
The Hlabisa sub-district is a largely rural area, with scattered homesteads, an estimated HIV prevalence of 30.5%, and a decentralised HIV treatment program. In our study, 74% were female, 30% had an education primary or lower, and 74% were not employed nor students.

Producers & Sponsors

Primary Investigator(s)	Melanie Plazy, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France Adama Diallo, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France François Dabis, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France Joanna Orne-Gliemann, University of Bordeaux, National Institute for Health and Medical Research (INSERM) UMR 1219, Research Institute for Sustainable Development (IRD) EMR 271, Bordeaux Population Health Research Centre, Bordeaux, France Thabile Hlabisa, Africa Health Research Institute, KwaZulu-Natal, South Africa Nolnhlanhla Okesola, Africa Health Research Institute, KwaZulu-Natal, South Africa Kobus Herbst, Africa Health Research Institute, KwaZulu-Natal, South Africa Collins Iwuji, Africa Health Research Institute, KwaZulu-Natal, South Africa; Department of Global Health and Infection, Brighton and Sussex Medical School, University of Sussex, Brighton, UK Sylvie Boyer, Aix Marseille Univ, INSERM, IRD, SESSTIM, Sciences Economiques & Sociales de la Santé & Traitement de l'Information Médicale, Marseille, France France Lert, INSERM, Centre for Research in Epidemiology and Population Health (CESP-U 1018), Villejuif, France Nuala McGrath, Africa Health Research Institute, KwaZulu-Natal, South Africa; School of Primary Care and Population Sciences and - Department of Social Statistics and Demography, University of Southampton, Southampton, UK; School of Nursing and Public Health, College of Health Sciences, University of KwaZulu-Natal, South Africa Deenan Pillay, Department of Global Health and Infection, Brighton and Sussex Medical School, University of Sussex, Brighton, UK; Division of Infection and Immunity, University College London, London, UK Joseph Larmarange, Centre Population et Développement, Université de Paris, Institut de Recherche pour le Développement, Inserm, Paris, France
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	Tulio de Oliveira , Nelson R Mandela School of Medicine, College of Health Sciences, University of KwaZulu-Natal, KwaZulu-Natal, Durban Eric Balestre, Francois Dabis, Sophie Karcher, Joanna Orne-Gliemann, Melanie Plazy, Melanie Prague, Rodolphe Thiebaut, Thierry Tiendrebeogo , ISPED, Centre INSERM U1219 Bordeaux Population Health, Universite de Bordeaux, Bordeaux Sylvie Boyer, Hermann Donfouet, Andrea Gosset, Laura March, Camelia Protopopescu, Bruno Spire , INSERM, UMR912 SESSTIM, Universite Aix Marseille, Marseille Joseph Larmarange, Maxime Inghels, Hassimiou Diallo , Centre Population et Développement UMR 196, Universite Paris Descartes, Institut de Recherche pour le Développement, Paris Vincent Calvez, Anne Derache, Anne-Genevieve Marcelin , AP-HP, Virology, Hopital Pitie-Salpetriere, INSERM-Sorbonne Universites, UPMC Univ Paris 06, UMR-S 1136, Paris Rosemary Dray-Spira, France Lert, Kamal El Farouki , INSERM U1018, CESP, Epidemiology of Occupational and Social Determinants of Health, Villejuif Marie-Laure Chaix , EA 3620, Universite Paris-Descartes, Laboratoire de Virologie, Hopital Necker-Enfants Malades, AP-HP, Paris Brigitte Bazin, Claire Rekacewicz , sponsor representatives; ANRS, Paris Collins Iwuji, John Imrie , Department of Infection and Population Health, University College London, London Deenan Pillay , Division of Infection and Immunity, University College London, London Nuala McGrath , Department of Epidemiology and Public Health, University College London, London Richard Lessells , Department of Clinical Research, London School of Hygiene & Tropical Medicine, London Collins Iwuji , Department of Global Health and Infection, Brighton and Sussex Medical School, University of Sussex, Brighton Nuala McGrath , Academic Unit of Primary Care and Population Sciences, and Department of Social Statistics and Demography, University of Southampton, Southampton Colin Newell , Academic Unit of Human Development and Health, University of Southampton, Southampton Marie-Louise Newell , Academic Unit of Human Development and Health, and Global Health Research Institute, University of Southampton, Southampton Alexandra Calmy , Service des Maladies Infectieuses, HIV Unit, Hopitaux Universitaires de Geneve, Geneva Kenneth Freedberg , Massachusetts General Hospital, Harvard Medical School, Harvard University, Boston, MA Till Barnighausen , Department of Global Health and Population, Harvard School of Public Health, Harvard University, Boston, MA Jan Hontelez , Department of Public Health, Erasmus MC, Erasmus University Medical Center Rotterdam, Rotterdam Till Barnighausen, Jan Hontelez , Institute of Public Health, Faculty of Medicine, Heidelberg University, Heidelberg

Sampling

Sampling Procedure
No size calculations. No sampling.

Data Collection

Data Collection Dates	start 2012-01-01 end 2016-12-04

Accessibility

Access Conditions

The representative of the Receiving Organization agrees to comply with the following conditions:

1. Access to the restricted data will be limited to the Lead Researcher and other members of the research team listed in this request.
2. Copies of the restricted data or any data created on the basis of the original data will not be copied or made available to anyone other than those mentioned in this Data Access Agreement, unless formally authorized by the Data Archive.
3. The data will only be processed for the stated statistical and research purpose. They will be used for solely for reporting of aggregated information, and not for investigation of specific individuals or organizations. Data will not in any way be used for any administrative, proprietary or law enforcement purposes.
4. The Lead Researcher must state if it is their intention to match the restricted microdata with any other micro-dataset. If any matching is to take place, details must be provided of the datasets to be matched and of the reasons for the matching. Any datasets created as a result of matching will be considered to be restricted and must comply with the terms of this Data Access Agreement.
5. The Lead Researcher undertakes that no attempt will be made to identify any individual person, family, business, enterprise or organization. If such a unique disclosure is made inadvertently, no use will be made of the identity of any person or establishment discovered and full details will be reported to the Data Archive. The identification will not be revealed to any other person not included in the Data Access Agreement.
6. The Lead Researcher will implement security measures to prevent unauthorized access to licensed microdata acquired from the Data Archive. The microdata must be destroyed upon the completion of this research, unless the Data Archive obtains satisfactory guarantee that the data can be secured and provides written authorization to the Receiving Organization to retain them. Destruction of the microdata will be confirmed in writing by the Lead Researcher to the Data Archive.
7. Any books, articles, conference papers, theses, dissertations, reports, or other publications that employ data obtained from the Data Archive will cite the source of data in accordance with the citation requirement provided with the dataset.
8. An electronic copy of all reports and publications based on the requested data will be sent to the Data Archive.
9. The original collector of the data, the Data Archive, and the relevant funding agencies bear no responsibility for use of the data or for interpretations or inferences based upon such uses.
10. This agreement will come into force on the date that approval is given for access to the restricted dataset and remain in force until the completion date of the project or an earlier date if the project is completed ahead of time.
11. If there are any changes to the project specification, security arrangements, personnel or organization detailed in this application form, it is the responsibility of the Lead Researcher to seek the agreement of the Data Archive to these changes. Where there is a change to the employer organization of the Lead Researcher this will involve a new application being made and termination of the original project.
12. Breaches of the agreement will be taken seriously and the Data Archive will take action against those responsible for the lapse if willful or accidental. Failure to comply with the directions of the Data Archive will be deemed to be a major breach of the agreement and may involve recourse to legal proceedings. The Data Archive will maintain and share with partner data archives a register of those individuals and organizations which are responsible for breaching the terms of the Data Access Agreement and will impose sanctions on release of future data to these parties.

Citation Requirements

Plazy, M., Diallo, A., Dabis, F., Orne-Gliemann, J., Hlabisa, T., Okesola, N., Herbst, K., Iwuji, C., Boyer, S., Lert, F., McGrath, N., Pillay, D., & Larmarange, J. (2023). Implementation and effectiveness of the linkage to HIV care intervention carried out within the ANRS 12249 TasP trial (2012-2016) in the Hlabisa sub-district, rural KwaZulu-Natal, South Africa (Version 1) [Data set]. Kobus Herbst.
DOI:https://doi.org/10.23664/AHRI.TASP.LINKAGE.PAPER.DATASET

Files Description

Dataset contains 2 file(s)

BDD_Collins	
# Cases	2837
# Variable(s)	25

FinalKMCurves_Collins	
# Cases	2837
# Variable(s)	5

Variables List

Dataset contains 30 variable(s)

File BDD_Collins

#	Name	Label	Type	Format	Valid	Invalid	Question
1	Individu ..	IndividualId	continuous	numeric-9.0	2837	0	-
2	Sex	Sex	discrete	numeric-9.0	2837	0	-
3	DateFirs ..	DateFirstReferredToClinic	continuous	numeric-9.0	2837	0	-
4	CareAtRe ..	CareAtReferral	discrete	numeric-9.0	2837	0	-
5	NewlyDia ..	NewlyDiagnosedAtReferral	discrete	numeric-9.0	2837	0	-
6	Baseline ..	BaselineClinicVisitDate	continuous	numeric-9.0	451	2386	-
7	DateARTe ..	DateARTemisFTAR	continuous	numeric-9.0	438	2399	-
8	DateACCD ..	DateACCDBFVAR	continuous	numeric-9.0	190	2647	-
9	DaysARTe ..	DaysARTemisLTBR	continuous	numeric-9.0	563	2274	-
10	DaysACCD ..	DaysACCDBLVBR	continuous	numeric-9.0	55	2782	-
11	DaysObse ..	DaysObservationAR	continuous	numeric-9.0	2837	0	-
12	Calendar ..	CalendarRoundAt1stReferral	discrete	character-1	2837	0	-
13	AgeImputed	AgeImputed	continuous	numeric-9.0	2837	0	-
14	FirstDat ..	-	discrete	character-11	413	-	-
15	FirstDat ..	-	discrete	character-11	155	-	-
16	FirstDat ..	-	discrete	character-11	71	-	-
17	ExitDate	-	discrete	character-11	1020	-	-
18	ExitType	-	discrete	numeric-9.0	1020	1817	-
19	KnowsPos ..	Knows any PLWHIV - A family member	discrete	numeric-16.0	2837	0	-
20	distTasP ..	-	discrete	numeric-9.0	2837	0	-
21	ArmAtRef ..	-	discrete	numeric-9.0	2837	0	-
22	Activity ..	-	discrete	numeric-9.0	2837	0	-
23	EducLeve ..	-	discrete	numeric-9.0	2837	0	-
24	AssetsCa ..	-	discrete	numeric-9.0	2837	0	-
25	ClusterA ..	-	continuous	numeric-9.0	2837	0	-

File FinalKMCurves_Collins

#	Name	Label	Type	Format	Valid	Invalid	Question
1	Individu ..	IndividualId	continuous	numeric-9.0	2837	0	-
2	contact_ ..	contact_attempt	discrete	numeric-9.0	2837	0	-
3	time_con ..	time_contact_attempt	continuous	numeric-9.0	2837	0	-
4	contact_ ..	contact_success	discrete	numeric-9.0	2837	0	-
5	time_con ..	time_contact_success	continuous	numeric-9.0	2837	0	-

Variables Description

Dataset contains 30 variable(s)

File : BDD_Collins

# IndividualId: IndividualId	
Information	[Type= continuous] [Format=numeric] [Range= 3-28627] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=14351.615 /-] [StdDev=8267.832 /-]
# Sex: Sex	
Information	[Type= discrete] [Format=numeric] [Range= 0-1] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# DateFirstReferredToClinic: DateFirstReferredToClinic	
Information	[Type= continuous] [Format=numeric] [Range= 19064-20424] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=19953.62 /-] [StdDev=301.128 /-]
# CareAtReferral: CareAtReferral	
Information	[Type= discrete] [Format=numeric] [Range= 2-3] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# NewlyDiagnosedAtReferral: NewlyDiagnosedAtReferral	
Information	[Type= discrete] [Format=numeric] [Range= 0-1] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# BaselineClinicVisitDate: BaselineClinicVisitDate	
Information	[Type= continuous] [Format=numeric] [Range= 19256-20590] [Missing=*]
Statistics [NW/ W]	[Valid=451 /-] [Invalid=2386 /-] [Mean=20041.534 /-] [StdDev=303.897 /-]
# DateARTemisFTAR: DateARTemisFTAR	
Information	[Type= continuous] [Format=numeric] [Range= 19178-20655] [Missing=*]
Statistics [NW/ W]	[Valid=438 /-] [Invalid=2399 /-] [Mean=20162.039 /-] [StdDev=284.535 /-]
# DateACCDBFVAR: DateACCDBFVAR	
Information	[Type= continuous] [Format=numeric] [Range= 19194-20964] [Missing=*]
Statistics [NW/ W]	[Valid=190 /-] [Invalid=2647 /-] [Mean=20175.805 /-] [StdDev=282.596 /-]
# DaysARTemisLTBR: DaysARTemisLTBR	
Information	[Type= continuous] [Format=numeric] [Range= 401-3044] [Missing=*]
Statistics [NW/ W]	[Valid=563 /-] [Invalid=2274 /-] [Mean=1110.456 /-] [StdDev=593.133 /-]
# DaysACCDBLVBR: DaysACCDBLVBR	
Information	[Type= continuous] [Format=numeric] [Range= 143-2790] [Missing=*]
Statistics [NW/ W]	[Valid=55 /-] [Invalid=2782 /-] [Mean=627.945 /-] [StdDev=523.716 /-]
# DaysObservationAR: DaysObservationAR	
Information	[Type= continuous] [Format=numeric] [Range= 92-1603] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=554.822 /-] [StdDev=305.257 /-]
# CalendarRoundAt1stReferral: CalendarRoundAt1stReferral	
Information	[Type= discrete] [Format=character] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# AgeImputed: AgeImputed	
Information	[Type= continuous] [Format=numeric] [Range= 16.0328767123288-111.386301369863] [Missing=*]

File : BDD_Collins

AgeImputed: AgeImputed

Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=33.996 /-] [StdDev=11.832 /-]

FirstDateTel

Information	[Type= discrete] [Format=character] [Missing=*]
Statistics [NW/ W]	[Valid=413 /-]

FirstDateHome

Information	[Type= discrete] [Format=character] [Missing=*]
Statistics [NW/ W]	[Valid=155 /-]

FirstDateBoth

Information	[Type= discrete] [Format=character] [Missing=*]
Statistics [NW/ W]	[Valid=71 /-]

ExitDate

Information	[Type= discrete] [Format=character] [Missing=*]
Statistics [NW/ W]	[Valid=1020 /-]

ExitType

Information	[Type= discrete] [Format=numeric] [Range= 1-3] [Missing=*]
Statistics [NW/ W]	[Valid=1020 /-] [Invalid=1817 /-]

Value	Label	Cases	Percentage
1	Death	31	3.0%
2	Migration	978	95.9%
3	NMC	11	1.1%
Sysmiss		1817	

Warning: these figures indicate the number of cases found in the data file. They cannot be interpreted as summary statistics of the population of interest.

KnowsPosFamilyAtReferral: Knows any PLWHIV - A family member

Information	[Type= discrete] [Format=numeric] [Range= 1-99] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]

Value	Label	Cases	Percentage
1	Yes	848	29.9%
2	No	1850	65.2%
5	Deprecated (not in IQ2)	0	
7	Not applicable	0	
99		139	4.9%

Warning: these figures indicate the number of cases found in the data file. They cannot be interpreted as summary statistics of the population of interest.

distTasP_DoHclini_recod

Information	[Type= discrete] [Format=numeric] [Range= 1-3] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]

Value	Label	Cases	Percentage
1	<1km	895	31.5%
2	1-2km	1189	41.9%
3	>2km	753	26.5%

Warning: these figures indicate the number of cases found in the data file. They cannot be interpreted as summary statistics of the population of interest.

File : BDD_Collins

# **ArmAtReferral**	
Information	[Type= discrete] [Format=numeric] [Range= 0-1] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **ActivityAtReferral**	
Information	[Type= discrete] [Format=numeric] [Range= 1-4] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **EducLevelAtReferral**	
Information	[Type= discrete] [Format=numeric] [Range= 1-3] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **AssetsCatAtReferral**	
Information	[Type= discrete] [Format=numeric] [Range= 1-3] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **ClusterAtReferral**	
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Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=11.599 /-] [StdDev=5.008 /-]

File : FinalKMCurves_Collins

# **IndividualId: IndividualId**	
Information	[Type= continuous] [Format=numeric] [Range= 3-28627] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=14351.615 /-] [StdDev=8267.832 /-]
# **contact_attempt: contact_attempt**	
Information	[Type= discrete] [Format=numeric] [Range= 0-1] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **time_contact_attempt: time_contact_attempt**	
Information	[Type= continuous] [Format=numeric] [Range= 1-1480] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=363.271 /-] [StdDev=248.555 /-]
# **contact_success: contact_success**	
Information	[Type= discrete] [Format=numeric] [Range= 0-1] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-]
# **time_contact_success: time_contact_success**	
Information	[Type= continuous] [Format=numeric] [Range= 1-1480] [Missing=*]
Statistics [NW/ W]	[Valid=2837 /-] [Invalid=0 /-] [Mean=403.649 /-] [StdDev=264.863 /-]