Introduction to types of research projects

1.1 Stages of a research project & briefing a research agency

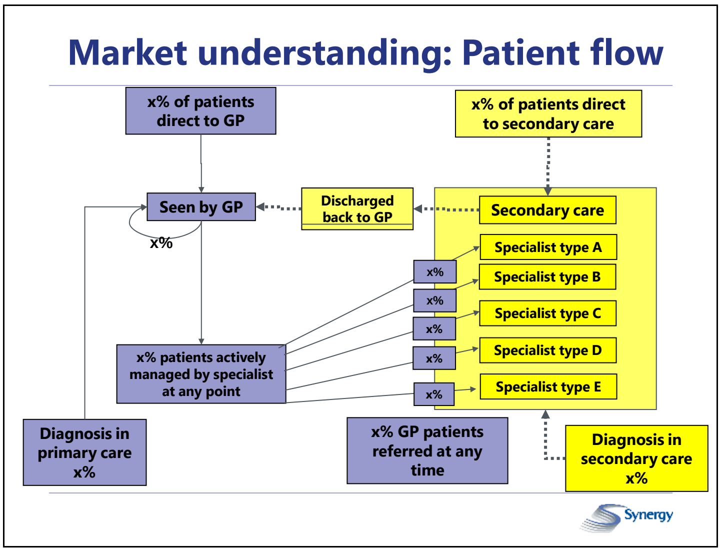
Key things for clients to think about when writing a brief / request for proposal:

- Provide background market and brand issues so that research can build on these
- Confirm Business / Research objectives
  - What is the marketing problem?
  - What actions does the research need to inform?
  - What do we already know? What do we not know?
  - What hypotheses do we want to test?
  - What questions do we want to ask?
- Timings – when can research start? How quickly is feedback required?
- Budget – although some clients prefer not to disclose budget, it can be useful to provide some indication of this (e.g. as a range) to ensure that the agencies propose the optimal approach within the available budget

Stages of a typical research project

Time scale	Client action	Agency action
Week -2	Invite agencies to provide proposals Ideally provide a written brief	Seek clarification on any areas of uncertainty
Week -1		Provide proposal
Week 0	Commission project - if possible arrange kick off meeting Provide draft materials if relevant Confirm AE reporting requirements if different from BHBIA guidelines	Design recruitment screener
Week 1	Approval of screener	Draft interview guide / questionnaire
Week 2	Approval of interview guide/ questionnaire	Recruitment
Week 3-4	Observe fieldwork if desired	Fieldwork (1-2 weeks depending on scale of project)
Week 5		Transcribing/ data processing
Week 6-7		Analysis and interpretation Presentation writing (1-2 weeks depending on scale of project)
Week 8		Presentation delivery

1.2 Market understanding research



Objectives

In order to understand and exploit the motivations that drive prescribing behaviour it is first important to identify precisely how doctors approach a therapy area and the way patients are managed.

Dependent on experience in the market, these issues may be familiar and not require stand-alone research, or may be possible to cover within other ongoing research. However, when entering a new market there may be the need to explore in more detail:

- The way in which patients present to the doctor and the overall diagnostic and management process
- The relative importance of hospital vs. community prescribing and the interrelationship between different customer groups
- The existence and importance of different doctor and patient types which may provide opportunities for market segmentation.

Methodology

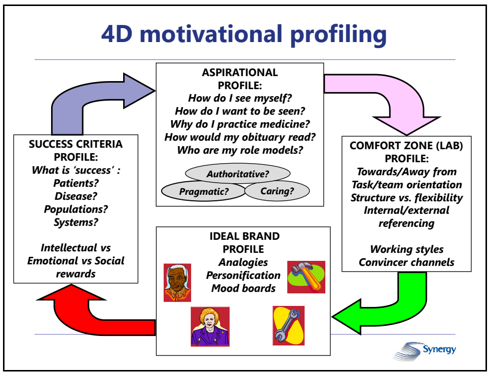
Availability of secondary data sources: Some information about a market may be available without the need for investment in primary research, for example DIN-LINK and other services can provide invaluable information about a market prior to conducting ad hoc research.

Individual responses are often important when exploring the management of a therapy area and so depth interviews are frequently used when seeking to understand or review management. Groups are sometimes useful to compare attitudes and behaviours and seek to achieve consensus but do not allow as much opportunity to probe variations in prescribing behaviour as depth interviews.

Reference to patient records can be extremely useful to avoid generalisations about patient management from doctors that may otherwise be misleading.

The scale of market-understanding research depends on the pre-existing familiarity with the market - typically 20-30 depth interviews may be conducted per market, depending on the number of customer groups with the possibility of quantitative research, if required, to more accurately determine the numbers of patients managed by each customer type.

1.3 Motivational / customer needs research



Objectives

- Identify motivating clinical data, language and imagery
- Understand what underpins commitment to existing brands
- Identify different customer sub-groups based on their motivational profile
- Determine the key building blocks of future communication strategy

Evaluating clinical needs: Conjoint analysis

Evaluating clinical needs requires careful research design since it is very easy for respondents to state that in all markets they are looking for products that are 100% effective, have no side effects and are extremely inexpensive.

A number of approaches exist to overcome this, including **conjoint analysis,** which can be used to accurately identify the relative importance of clinical needs and model future prescribing behaviour. **SIMALTO** is a conjoint analysis approach that has particular benefits in identifying key unmet needs.

Identifying emotional drivers: Approaches from NLP/motivational psychology

A number of approaches, drawn from motivational psychology, NLP (Neuro-Linguistic Programming) and other disciplines, can be used to identify different customer segments based on their emotional needs and develop motivating communication approaches, for example:

- **Exploring definitions of success at both an emotional and intellectual level**
- **Identifying personal aspirations:** how do customers want to feel when making a prescribing decision? How do they want to be seen by their patients and peers?

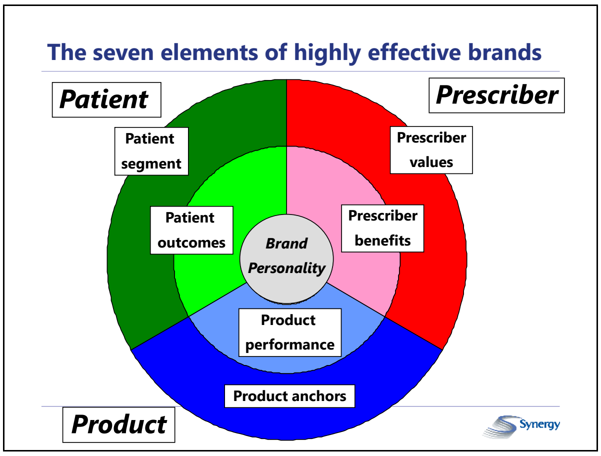
- **Motivational (LAB) profiling:** e.g. are customers motivated to move **towards** success or **away from** failure? What language is associated with fulfilling these goals?
- **Assessment of motivations at different logical levels:** e.g. how do customers' beliefs, values, and sense of personal identity affect motivation?

Further details of these approaches are provided in the glossary section of this handbook.

Identifying key non-rational motivations is typically conducted in a **group situation** using a variety of projective or enabling techniques to help respondents discuss beliefs, aspirations, motivations and perceptions that influence prescribing behaviour.

The scale of needs research varies depends on the pre-existing familiarity with the market. For a familiar market, a single stage of 3 group discussions per market may be sufficient dependent on the number of customer types. If a market is unfamiliar, then separate research for clinical and emotional needs may be necessary to do both areas justice - possibly 4-6 groups per market.

1.4 Brand evaluation and development research



Objectives

Once the needs of customers have been identified, the task is then to develop a marketing strategy that capitalises on these needs. In some cases, the communications agency may move straight from customer needs research to developing communication materials. However, there may be a need to define or evaluate the most effective marketing strategy prior to developing a communication platform. Thus, brand development research may be conducted to explore:

- the current positioning of brands in customers' minds, both in terms of associations with specific prescribing situations and in terms of the hooks that encourage customers to regard certain brands more favourably;
- the way in which our brand can be positioned in order to maximise commercial opportunity.

Group discussions - exploratory brand evaluation

Research will often use a variety of projective and enabling techniques in group discussions to explore the relationship between the customer and the brands and potentially what an ideal brand should be like.

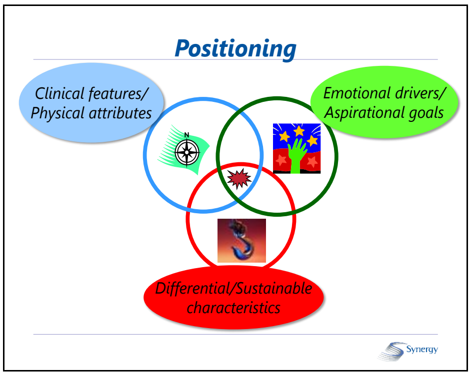
The choice of techniques used in brand development and positioning research should take into account the various levels at which branding operates. Different models of effective branding use different terminology but it is clear from a review of these models that there are certain elements that most commentators agree are important for effective branding:

- **Situational positioning -** the usage occasions associated with the brand
- **Tangible associations -** e.g. Coke bottle shape, BMW grille
- **Brand imagery** – the feelings associated with the brand
- **Brand personality** – the relationship with the brand
- **Expressive benefits -** what using the brand says about me

In addition, the **Brand Essence** (the core 'truth' which drives the brand) can be distilled from the core rational (hard-wired), emotional (motivational) and differential (unique) brand associations, which operate at a number of levels as described above.

Various projective techniques may be appropriate such as brand mapping, mood boards, personification and approaches taken from NLP, but the choice of these will need to be customised to the market and the brands being explored.

1.5 Positioning research

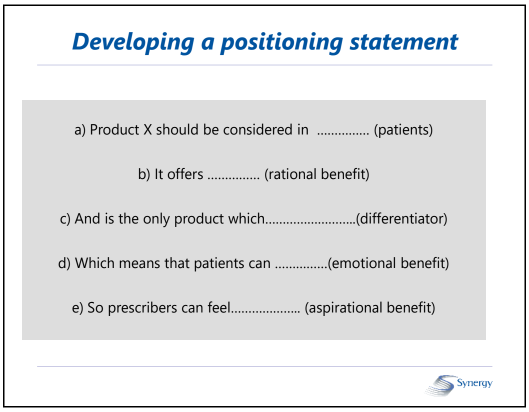


There are a number of different ways of looking at positioning - some prefer to talk about 'brand essence' or 'core values'. The classic text on positioning is 'Positioning: The Battle for your Mind' by Ries and Trout.

Objectives

Positioning is often defined as the 'hook' in the customer's mind that creates a clear sense of why and how a brand should be used. Research can explore the various associations with the brand in order to determine the most effective positioning and thus identify the focus of the communications strategy.

Positioning options may be introduced in a variety of different formats and assessed on various criteria. However, ultimately the goal of research will be to develop a positioning which creates a unique and motivating platform for the brand.



Methodology

Following on from group discussions, as described in the previous section, depth interviews are useful to identify the most effective positioning approach in the absence of peer influence. Respondents are typically exposed to a number of positioning approaches and their reactions to each assessed, based upon the approach which best encapsulates the key unique motivating benefit of the brand. Research would also explore opportunities for refining the most effective positioning approach to ensure it is both differentiating and motivating.

20-30 depth interviews per market are typically conducted, dependent on the number of customer sub-groups.

1.6 Advertising research

Objectives

Advertising research can take place at a number of stages of the communication development process including:

1 Strategy definition- what should we say?
2 Tactical development- how should we say it? Which themes or styles should we adopt?
3 Execution testing- which specific approach is most effective?

Research needs to be designed at each stage to ensure advertising is developed and assessed against strategic communication objectives. However there are six key response criteria which are usually important to consider when developing and evaluating advertising, which can be described using the mnemonic 'IMPACT':

Execution response		Message delivery		Customer assimilation	
I	M	P	A	C	T
individual	*memorable*	*persuasive*	*affective*	*consistent*	*trustworthy*

Methodologies

Group discussions - creative strategy development
Group discussions are often used in the developmental stage of advertising research to provide a creative environment in which the emphasis is placed upon identifying and refining the most effective campaign strategy. Issues to be explored at this stage may be reactions to images and language in an early stage of development. Trios can also be a useful approach as they allow for some creativity, yet the interviewer can follow up individual responses if necessary. Usually 2-3 groups or 4-6 trios per market will be conducted.

Depth interviews - concept development/testing
Subsequently (or alternatively), depth interviews may be used to explore individual perceptions and attitudes relating to advertising concepts developed by the advertising agency. Depths can identify impact and communication without the danger that a group environment contaminates attitudes. Usually, 15-30 depth interviews per market will allow the most effective advertising approach to be identified (dependent on the number of customer groups).

Quantification - folder execution testing
In order to evaluate impact accurately, a quantitative approach may also be appropriate using a folder test. This involves providing respondents with a mocked up journal in which the test ad is included along with a range of other ads currently in the medical press. Respondents are asked to flick through the journal and asked to describe the products they recall being advertised and the impression provided (if any) of the test advertisement.

Ad tracking
Quantitative research can be used to track the effectiveness of advertising over time. Issues that are likely to be important to monitor include the level of recall, correct brand association and message wear-out. In the primary care sector, a number of syndicated approaches exist but an ad hoc approach is likely to be required in hospital markets. Typically, samples of 100 clinicians per market will be conducted on a regular basis using either face to face or telephone approaches.

1.7 Detail / sales contact development research

Objectives

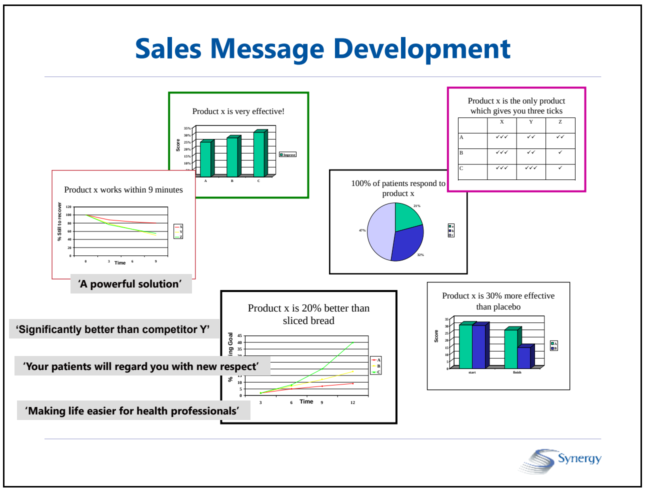
Research to develop the most effective sales aid can be conducted at 2 stages:

1 Detail development research in group discussions to identify the key elements to be communicated in a creative environment

2 Detail testing research in depth interviews to assess effective communication in a realistic setting

Methodologies

1. Workshop Group discussions – optimising content



Workshop groups can be a valuable way of exploring what arguments need to be included within the detail in a creative environment. This involves splitting a group of 6-8 respondents into 2-4 'workshops', providing each workshop with a range of graphs, tables and supporting language, and setting them the task of creating a sales aid. This process ensures clinicians buy in to the process and discuss the most convincing ways of presenting information - avoiding the risk that customers switch into 'critical mode'. After the sales aids are completed, each team presents their detail to the other teams, who are invited to ask questions. The ensuing discussion is extremely valuable in terms of understanding the way in which customers feel information should be communicated.

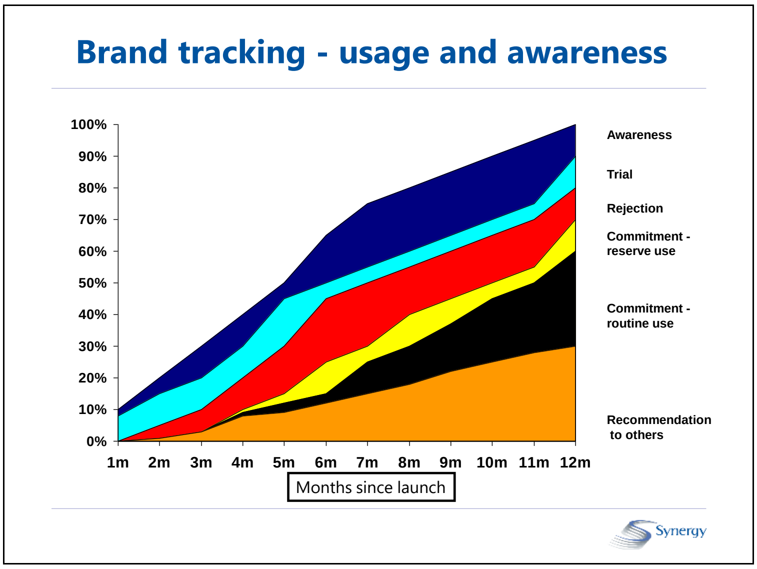
2-3 group discussions per market would normally be conducted, with 2-4 workshops per group.

2. Hall test depths - optimising delivery

Depth interviews in a central location or 'hall test' are often used to test the finalised sales materials before providing these for representatives. This exercise identifies any potential communication problems and how these can be overcome, either by amending materials or providing representatives with advance warning of problems they may encounter with customers. Research should also include interviews with representatives, both to ensure that materials are as supportive as possible from the representative's perspective and because the field-force need to buy into the detail messages and flow if they are to be successful.

15-30 depth interviews per market would normally be conducted in hotel central locations to allow for observation of research by the marketing team and minimise the time reps spend off the road.

1.8 Brand tracking / Usage and Awareness (U&A) research



Objectives

U&A research is typically conducted to answer the following questions:

- What proportion of clinicians is aware of our brand?
- What proportion prescribes our brand?
- What factors are driving prescribing?
- In which patient types are we used?

U&A research may be incorporated within brand tracking research that will also explore:

- How do customers feel about the brand?
- What imagery is associated with the brand?
- How different is it felt to be vs. its competitors?

Methodology - quantitative brand tracking / U&A

Tracking research in primary care is often conducted via syndicated services which allow such research to be conducted as cost effectively as possible. In secondary care, tracking is often conducted using an omnibus approach or using a sample of 50-100 telephone interviews per market.

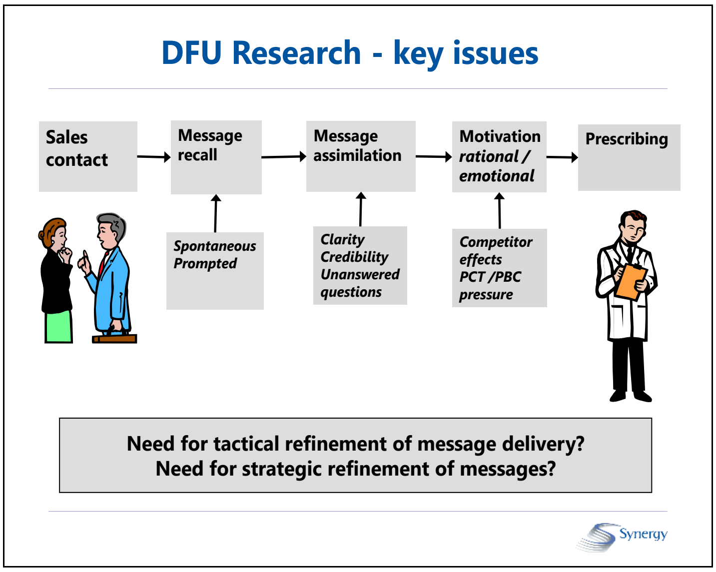
Usage and Awareness for a newly launched brand is often tracked on a monthly basis for the first 6-12 months and thereafter on a six monthly basis. Brand image is likely to be tracked on a 6 monthly or annual basis.

Methodology - qualitative brand tracking / U&A

It can also be useful to conduct a market review on a qualitative basis to regularly evaluate attitudes and feelings about a target brand or therapy area. A qualitative approach allows greater opportunities for probing on clinical issues, environmental factors, perceptions of brand imagery and the promotional environment that may influence attitudes and usage.

Either group discussions or depth interviews may be appropriate dependent on the specific requirements from the research but typically depth interviews provide a better opportunity to draw comparisons over time.

1.9 Detail / sales call follow up (DFU) research



Objectives

Detail follow up (DFU) research is typically conducted to answer the following questions:

- To what extent is our brand front of mind following a rep visit?
- What messages has the representative successfully communicated?
- To what extent do customers accept key messages?
- What effect has the representative had on prescribing?
- Which messages are most influential?

Methodology – qualitative or quantitative telephone interviews

DFU research is typically conducted via telephone interviews, either as qualitative depth interviews using an interview guide and audio recording interviews to capture verbatim responses fully) or quantitative structured interviews using a CATI (computer assistant telephone interview) or paper based questionnaire with the interviewer writing down responses via mostly pre-coded questions.

Qualitative interviews are typically conducted among a sample of 20-30 customers, while a quantitative survey is typically conducted among a sample of 30-100 customers, depending on the size of the field force and the number of customers seen by the sales team.

Respondents are recruited from a list of customers seen by the representative provided to the agency from call record sheets. Interviews are usually conducted within 10 days of the reported sales contact to allow comparisons of recall with benchmarks, although longer time periods can be used. Customer call records should include details of the surname, initial, telephone number and address of the customer. Names should be provided on a regular basis- ideally on a daily basis or at least twice a week. Usually, 15 times as many names as interviews to be conducted should be provided.

DFU research can also include interviews among representatives to explore their awareness of key messages, any problems experienced when communicating messages to customers, their attitudes to support materials and areas where they need extra training. By using an outside agency to carry out research, representatives may feel more comfortable with discussing any problems in communication than would be the case if feedback is collected in-house.

A DFU is usually carried out once or twice a year to allow changes in sales call effectiveness to be tracked.

1.10 Brand image / mapping research

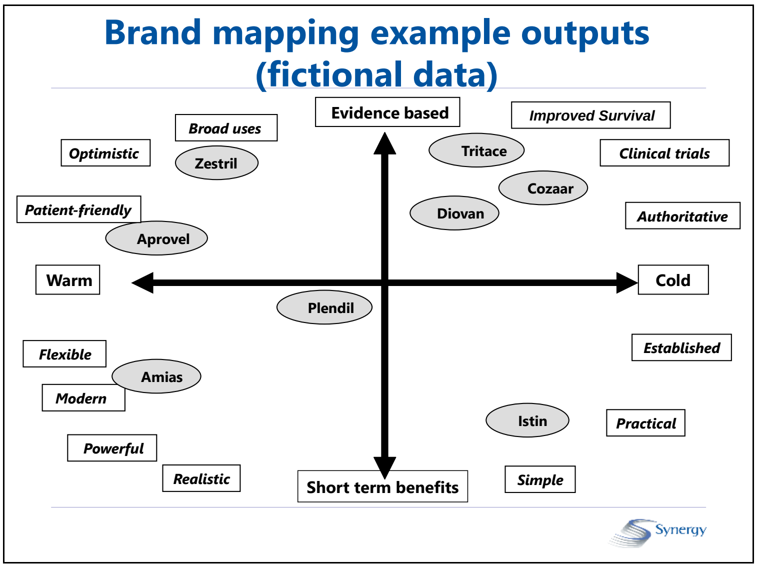
Objectives

Brand image/mapping research is carried out to understand the associations that differentiate between brands in order to understand the key perceptions of each brand. Typically, brand image mapping focuses on the emotional factors associated with each brand (e.g. authoritative, modern, trustworthy, patient-friendly etc) but clinical/rational factors can also be included (e.g. good evidence, effective, convenient, well tolerated etc). Outputs of research allow us to understand the ways in which brands are perceived to be different- which may have more to do with the effective marketing of a brand than its clinical profile. By understanding the environment in which brands compete one gains a fuller understanding of attitudes to key brands.

Methodology

Qualitative brand mapping can be carried out by printing names of brands on show cards and asking respondents to place these on a surface as a ‘map’ to illustrate differences between brands on either rational or emotional criteria. The respondent is then asked to describe the factors used to differentiate brands. This process is repeated a number of times for each respondent in order to generate all key dimensions. Qualitative analysis is then conducted to identify how brands tend to be placed relative to each other and outputs can be summarised using a map as illustrated below.

Quantitative brand mapping is a more formal process that exposes respondents to a series of words or statements (usually generated from qualitative research as above and expressed as a series of agree/disagree 7-point scales) and asks respondents to state the extent to which each word or statement is associated with each brands. By conducting statistical analysis on responses, a market map can be developed as illustrated below:

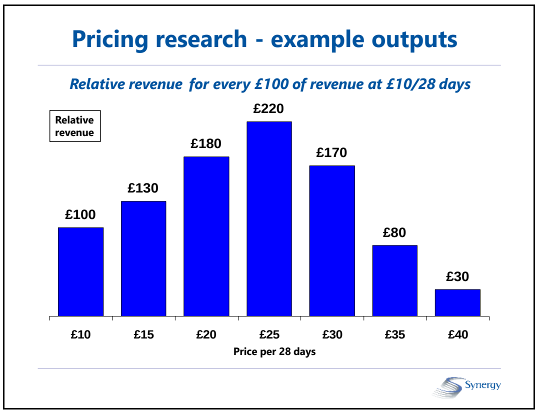


1.11 Healthcare Pricing Research

Objectives

Research can aid pricing decisions about a new or existing product by providing the following outputs:

- Understanding the relationship between price and penetration, positioning and volume opportunity
- Exploring the importance of price vs. clinical attributes on guidelines and prescribing
- Developing and assessing the impact of pharmacoeconomic arguments, novel risk sharing initiatives and other approaches to overcome financial barriers
- Identifying the price that maximises revenue and/or profitability.



Methodologies

Initial qualitative research may help understand the pricing environment and identify issues that influence price elasticity. However, a quantitative approach is always required to provide robust inputs into pricing decisions. A variety of techniques allow price elasticity to be evaluated as follows:

- Monadic Pricing Research
- Gabor Granger
- Conjoint Analysis
- Brand Price Trade Off
- Van Westendorp Price Sensitivity Meter/ Perceived Value Pricing

Further details about each of these approaches are provided in the pricing research section of this document.

Pricing research techniques should be applied and interpreted with caution in the pharmaceutical sector to avoid the risk of major bias in making pricing decisions, since there are numerous issues affecting pricing research design associated with:

- Customers claiming to be more price sensitive than they are in order to appear 'responsible'
- Varying levels of awareness of actual prices
- Potentially ambiguous price definitions (per pack, per day, per month, per outcome?)
- The effect of more than one decision maker on price elasticity
- Varying price elasticity throughout the product lifecycle
- International pricing research issues (e.g. reimbursement status /patient requirement to pay)

Pricing research should always be carried out quantitatively where possible, to provide robust outputs. Around 8-10 weeks should usually be allowed for a pricing research project.

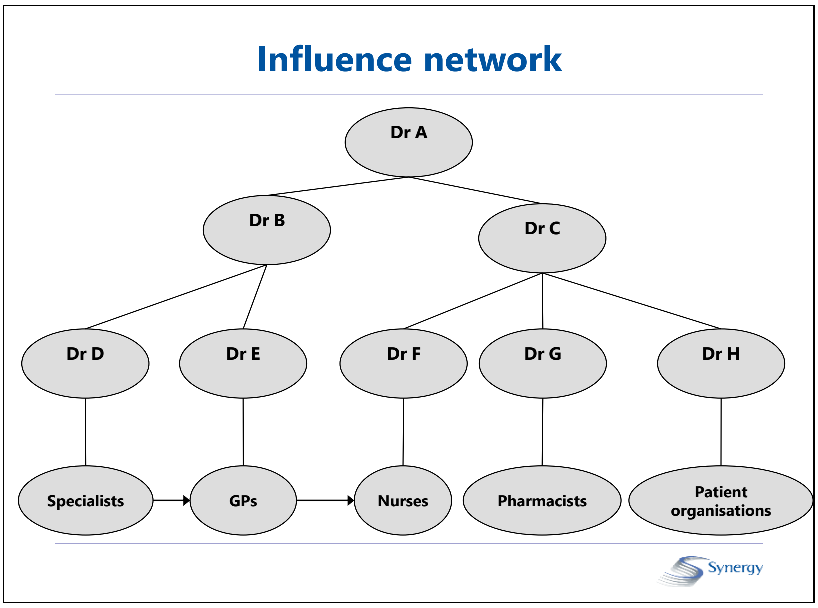
1.12 Key opinion leader/ Influence network research

Objectives

Research can be used to identify which key opinion leaders (KOLs) are most influential in a particular therapy area (at a local, regional, national and international level) and who will therefore have a major influence on the use of new and existing treatment approaches by other clinicians.

In addition, research among KOLs themselves can help understand how a therapy area is developing and the key issues that will shape future management. This can be used to either develop a communications strategy to capitalise on future directions and can be used to help direct product developments and clinical trials.

Outputs can be provided in the form of an influence hierarchy of named KOLs, for example as follows:



Methodologies

Research to identify which customers are true KOLs would usually be carried out quantitatively in order to allow KOLs to be identified at a local, regional, national and international level. Typically 50-200 interviews per market are conduced depending on the speciality being researched.

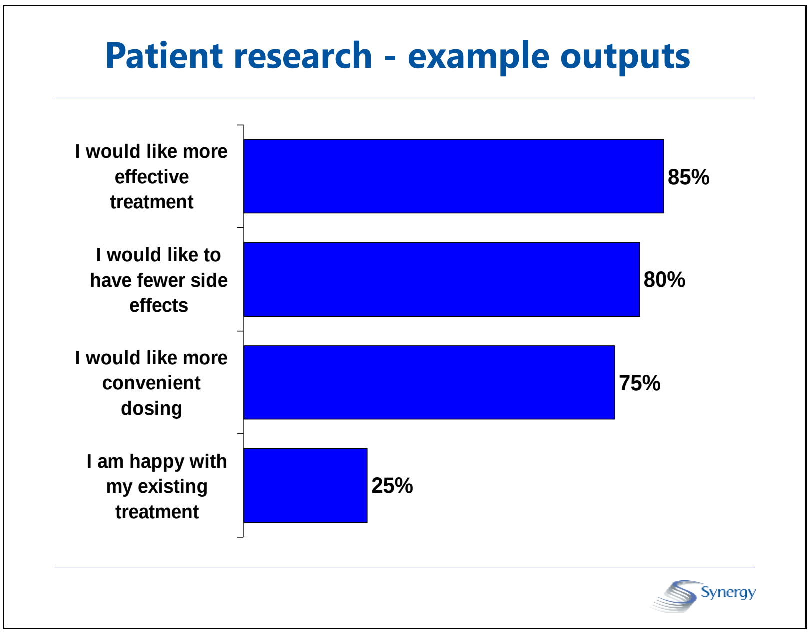
Advisory boards / expert panels are often convened by a drug company to ensure an ongoing dialogue with such KOLs, but there can be benefits for these being moderated by a third party organisation (such as a market research agency) to ensure focus on key issues is maintained.

1.13 Patient research

Objectives

Research can be conducted among patients taking ethical or OTC brands to determine:

- How do patients view the treatments they are taking?
- What drives compliance?
- What benefits do patients regard as most important?
- What do they worry about?
- What side effects do patients suffer in silence?
- What would they like to tell doctors?
- What educational support would they welcome?
- What would make them ask for a treatment change?
- How can we best go POM-P?

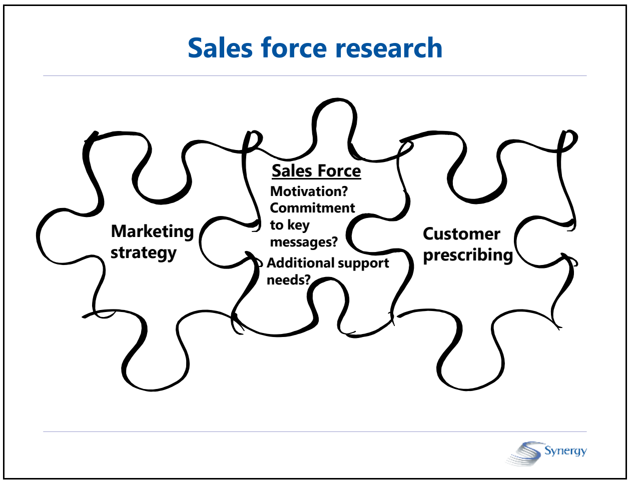


Methodologies and recruitment

Patients can be recruited for research in numerous ways:

- Direct recruitment face to face, by telephone or via a consumer panel or omnibus - only suitable for relatively common conditions
- Via doctor or pharmacist: the health professional is provided with letters which they give to patients, inviting the patient to participate in research (potentially with a short questionnaire also) and then the patient contacts the research organisation direct
- Patient panels - there are a number of organisations that hold details of patients who are willing to participate in research either face to face, telephone or online
- Advertising in lay press, patient-related magazines or medical websites
- Via patient organisations – however it should be noted that this can introduce bias if members of patient organisations differ from other patients not involved in such organisations – for example they are probably be more well-informed than patients who are not members of such organisations.

1.14 Sales force research



Objectives

Although head office is provided with much ongoing feedback from the field force, more formal research allows them to speak openly about issues that concern them in a way that preserves their anonymity. Research can be conducted among members of the sales team to determine:

- What are their views on current promotion materials?
- How clearly do they understand the intended promotional strategy?
- How motivated are they and how can motivation be increased?
- What additional support would they welcome?
- In addition, such research can be benchmarked across different companies

Methodologies

Email/online research

Benefits:

- Fast, good response rates assuming a simple survey

Disadvantages:

- Representatives may be cautious about their responses being passed on to personnel within head office and thus providing guarded responses
- Needs to be a short /simple questionnaire.

Postal research

Benefits:

- Cost effective, generally fairly high perceptions around confidentiality

Disadvantages:

- Needs to be a short /simple questionnaire; online/email survey likely to provide more detailed open-ended responses for key questions than postal.

Telephone research

Benefits:

- Highest perceptions around confidentiality as respondent can be reassured
- More opportunity to probe issues in detail

Disadvantages:

- More expensive and time-consuming to administer.

1.15 New Product Development research

The new product development research process may include the following elements:

- Market understanding research/concept testing
- Identify key customers- including impact of PCT/PBC clusters
- Key opinion leader research
- Brand name research
- Customer needs research
- Positioning research/message development
- Advertising strategy development research
- Ad concept/execution testing
- Concept development/positioning research
- Sales flow development research
- Sales aid execution testing
- Pricing research