MEDIA MEANS BUSINESS

Creating meaningful media in pharma
THE SEVEN DEADLY SINS OF INEFFECTIVE MEDIA

1. “The great thing about me is…”
   It’s all about us, our products, our facts, our features, what we want to say

2. “I know what I like, and I like what I know”
   Using the same owned channels time and time again (particularly sales reps)

3. “Thank goodness we have got the AdverInstaLinkedBooker post approved”
   Putting the same content everywhere, regardless of platform, context journey or timing

4. “Don’t bore me with your other problems”
   Paying little attention to the audience – not considering their needs and interests

5. “I really don’t want to spend any more money”
   Working to cost containment rather than looking at return on media investment

6. “John does the reports, I don’t really have time to read them”
   Not measuring media results and the impact of investment

7. “Let’s just get the creative done and worry where it lives later”
   The media plan is an afterthought, missing the creative opportunity

MEDIA MEANS BUSINESS

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Creating meaningful media in pharma
‘Media’ is an exceptionally broad term, applied differently from industry to industry. For us, very simply, it is each touchpoint and opportunity through which we deliver our marketing campaign; from telephone calls to tweets, from real-time programmatic to the ever-important sales representative.

There are some general principles that remain consistent when generating a media plan. Brand growth starts with reach; being remembered by ‘light’ prescribers is especially critical. Frequency of contact and quality of channel is an important balance to strike – social posts can be frequent low-attention reminders, but an annual congress means full immersion in a learning context. All of this needs to start from a single customer view driven by data and proper measurement.

While this white paper focuses solely on the construction and execution of a well-balanced media plan, it should go without saying that without a clear brand purpose, strategy and central creative idea, efforts are likely to culminate in forgettable pollution.

Across the Havas Health & You network, we are united in helping our clients find meaning in what they do, to ultimately move hearts and minds. We call it Human Purpose. And it is in the intersection of razor-sharp brand strategy, stand-out creative and sophisticated media that we can build brands that truly mean something.

Getting media to work for you means getting it all to work together.
"A field force from yesterday is, today, completely useless; the old relationship-based selling models are dead. Instead, reps must focus everything on helping the customer to be better at their job. The environment has also changed, with HCPs consuming information beyond the rep on digital channels. So our customer relationships must be built elsewhere." 

Florent Edouard,
Senior Vice President,
Global Head of Commercial Excellence,
Grünenthal

Pharma’s connection with healthcare professionals (HCPs) has traditionally been built on the power of the field force, with the interpersonal relationships formed between sales reps and HCPs at its core.

However, in recent years, the effectiveness of the rep as a communication channel has reduced, owing to:
- Increasing rate of brand launches, diluting companies’ marketing investments
- Mergers and consolidations of companies, disrupting existing relationships with HCPs
- Reduction in the number of HCPs who will see reps
- Division of HCP specialisation into hyper-specialisation, complicating the landscape

Together, these factors have ultimately led to a reduction in the quality of interactions and relationships. In the background there has been a significant increase in the amount of communications and content produced. To remain relevant and meaningful to HCPs, pharma needs more from its communications than ever before, and yet the spend on their media mix far from reflects this reality.

So why is this? Misconceptions about the cost, effectiveness and channel safety are key barriers, along with a less tangible (but no less real) sense that ‘this isn’t a place where pharma really plays’. So how can we dispel these misconceptions and provide an effective media strategy that builds a meaningful connection with HCPs, beyond just the sales rep?

1. Research interviews with Florent Edouard, Senior Vice President, Global Head of Commercial Excellence, Grünenthal.
Where to start? Media can be so many things in so many places. Even for the initiated, it can be a daunting space in which to operate.

“Media allows you to reach more people in need of your product. But it also allows you to show people what your brand stands for and what it cares about. That’s hugely important for pharma.”

Greg James, Global Chief Strategy Officer, Havas Media Group

Today, media is more important to brands than ever before as it plays such a huge role in people’s everyday lives. It’s gone from something that was consumed passively in very specific places and on very specific formats, to something that is intrinsic to society and how people live. And because it’s ever-present in people’s lives, the stakes are so high.

At Havas, we believe in Meaningful Brands®. Brands that go beyond the product and explore how they can tangibly improve people’s lives and the role they play in society. This philosophy is underpinned by our Meaningful Brands® study. In the 2019 edition of the study, over 350,000 citizens were surveyed across 31 markets, examining over 1,800 brands including healthcare. Last year, an overwhelming 82% of people surveyed from generations X to Z expected more than just a product from brands, compared to 63% of baby boomers.

NO REGION OF THE WORLD RANKS HEALTHCARE IN ITS TOP THREE MOST MEANINGFUL INDUSTRIES

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DEFINING MEANINGFUL

Understanding what matters

Source: MX Intelligence, Havas Media Group, 2019.
EFFECTIVE MEDIA CHOICES MAKE ANY MEDIA CHOICE SEEM BIGGER

With so many channels and formats available, it’s easy to assume that implementing a good media strategy means digging deep in your pockets, but that’s simply not the case. “To do media well, you need the process to do media well, not big budgets,” says James. “You’ve got to make it mean something to people. Media is the cultural collateral we all share – we talk about the music we’re into, that new TV show we can’t get enough of, the podcast that really chimed with something we’ve been thinking.” To create meaningful media experiences in healthcare is to inspire this same feeling in our audiences. Media, then, is most effective when it is trusted (from a source that the audience finds authentic and reliable), engaging (holds attention) and influential (impacting on feelings and beliefs, driving people to change behaviour and take action).

Meaningful media experiences are made out of the following building blocks:

**CONNECTION**
The right target audience, at the right scale

**CONTEXT**
The best environment that makes sense to the audience at the time they see it

**CONTENT**
The format and message that drive the most impact

**EFFECTIVENESS**
Get connection, context and content right, and you’ll have a campaign that delivers on its media objectives and, in turn, contributes to achieving brand objectives

**CASE STUDY**
BUILDING MORE MEANINGFUL CONNECTIONS WITH MEDIA

Shadow, Janssen & Havas Lynx Group

Working with Janssen, our aim was to raise awareness of the challenges of major depressive disorder (MDD) and offer guidance to HCPs on how to identify the signs. More than just awareness, we wanted the Shadow campaign to convey a sense of hope amongst HCPs – and a belief that they could make a difference.

Trusted endemic print, email, newsletters, and digital banners delivered significant reach and frequency, directing HCPs to a content hub housing a range of information in the form of KOL-led Q&As. The campaign delivered 10,173 site visits (versus a target of 5,000) and a dwell time of 2.5 minutes (versus a target of 1 minute), with 1 in 4 users completing a goal on the site. Most importantly of all, it also inspired a significant shift in the way HCPs viewed MDD, as evidenced by our sentiment testing (see below).

<table>
<thead>
<tr>
<th>HCP UNDERSTANDING OF UNMET NEEDS</th>
<th>PRE-EXPOSURE</th>
<th>POST-EXPOSURE</th>
<th>PRE-POST EXPOSURE SHIFT</th>
</tr>
</thead>
<tbody>
<tr>
<td>The management of MDD is in urgent need of reform</td>
<td>25%</td>
<td>44%</td>
<td>+76%</td>
</tr>
<tr>
<td>A high proportion of patients fail to reach remission</td>
<td>28%</td>
<td>52%</td>
<td>+86%</td>
</tr>
</tbody>
</table>

Base n=229 psychiatrists

WHAT IS MEANINGFUL MEDIA?

HCP UNDERSTANDING OF UNMET NEEDS

PRE-EXPOSURE

POST-EXPOSURE

PRE-POST EXPOSURE SHIFT

24% of users completed a goal

10,170+ site visits

2.5 min dwell time
“A healthcare professional goes from being a target audience we’re trying to reach one minute, to a media channel for patients the next. The meaningful role they play in Media and Experience, cannot be understated.”

Shane Ankeney, President, Havas Media Group, North America

“A meaningful connection? I had a free lunch and discussion on a treatment that wasn’t always reflective of what I was seeing day-to-day.” That’s Dr Tapas Mukherjee, former NHS Respiratory Registrar and now a Medical Director at Havas Lynx Group, reflecting on his experiences interacting with pharma reps. “What I actually needed was support on things like delivering pulmonary rehab in chronic obstructive pulmonary disease (COPD), or improving quality of life (QOL) in severe asthma – that would be more meaningful to my day-to-day practice.” Dr Mukherjee says he felt “a mismatch in priorities” in his interactions with pharma, which made it difficult to form a meaningful connection. It’s a sentiment many HCPs would echo. Research shows that:

While 54% of millennial HCPs think that pharma has a valuable role to play, only 43% think the relationship is currently good.7

Michaela Gardner, Senior Global Commercial Communications Manager at medical devices company Smith+Nephew, says that the building blocks for better relationships lie in taking a closer look at the needs Dr Mukherjee describes. “Think customers first,” says Gardner. “What are their needs, what are their issues? How do they like to consume information? Think about what resonates with them, not what we want to tell them. And then think about which offering we can build to make their lives easier.”8

For example, assuming that previous generations are ‘old’ and want to live in the way that our grandparents lived. Or assuming that doctors will only listen to cold, hard stats and not be influenced by their emotions. The antidote is who, what, why.

To do this, pharma must break away from the traditional, fixed mindsets that pander to stereotypes about HCPs and patients.

WHAT PHARMA DOES NOW

WHO
- Age
- Gender
- Speciality
- Geography

WHAT ELSE NEEDS CONSIDERING
- Demographic/psychographics
- Values/opinions/attitudes
- Life stages
- Social/lifestyle segment

WHAT
- Lifestyle
- Pharmaceutical brand consumption

WHY
- Reasons to believe
- Barriers to prescription
- Motivations to prescribe

LEARN MORE ABOUT MILLENNIAL HEALTHCARE PROFESSIONALS IN THE HAVAS LYNX GROUP ‘GENERATION NOW’ WHITE PAPER HERE.
THE WHO

FINDING THE MOST VALUABLE TARGETS

Sizing your target audience is crucial, and it should consider the total addressable market (TAM), not just the serviceable market via reps. Personal selling is labour-intensive and costly. Therefore, this activity should focus on the most lucrative accounts. However, HCPs who fall outside of these target groups often cumulatively see the majority of patients. These groups can, in many instances, be reached with other media, rather than simply being left to chance.

Segmentation is the critical next step. It can take into account numerous data points from transactions, locations, mindsets, caseloads, etc., but segments should always be recognisable, targetable and actionable.

Marketers can then target segments with strategically tailored messages and activities, using different data sets to generate better marketing campaigns that will yield better results.

SIZING YOUR MARKET FROM TAM TO SOM

TOTAL ADDRESSABLE MARKET (TAM)
The largest possible market

SERVICEABLE AVAILABLE MARKET (SAM)
The proportion of the market that fits your brand

SERVICEABLE OBTAINABLE MARKET (SOM)
The proportion of the market you can reach

CASE STUDY

HOW CAN YOU TARGET THE ‘PERSON’ IN A PROFESSIONAL SETTING?

ESC Congress Geofencing for The Attack campaign, AstraZeneca & Havas Lynx Group

For HCPs, attending a congress isn’t just about consuming scientific information. They could also be visiting a new city or country for the first time, quite probably using their phones to look up restaurant recommendations or weather reports while also checking on what’s happening at home via their usual news sites and social media.

With this in mind, AstraZeneca used real-time proximity technology to help raise awareness of an unbranded HCP campaign at a conference. The technology allowed us to push display ads to those accessing a number of whitelisted sites (from news sources to gallery guides) within a 500 metre radius of the event and nearby hotels.

The results? Delivering an average click through rate (CTR) of 1.09% and close to 14,000 clicks with a cost per click (CPC) of £0.71. The campaign reached 58% of the ESC SOM and demonstrated a highly cost-effective approach.

HCPs – THE TOP THREE CONSUMER BRANDS THEY USE9

Fast food brands they normally buy from

Supermarkets visited monthly

Retailers shopped at in the last three months


<table>
<thead>
<tr>
<th>Country</th>
<th>HPCs they shop at in the last three months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Italy</td>
<td>McDonald’s, KFC, Telepizza, Barilla, Mondo</td>
</tr>
<tr>
<td>Spain</td>
<td>McDonald’s, KFC, Telepizza, Barilla, Mondo</td>
</tr>
<tr>
<td>UK</td>
<td>McDonald’s, KFC, Telepizza, Barilla, Mondo</td>
</tr>
</tbody>
</table>
TWO HALVES OF THE SAME CIRCLE
THE PROFESSIONAL AND THE PERSON

Modern digital footprints allow us to gather data that can paint vivid and detailed portraits of any population subset, including HCPs. To identify new and novel opportunities to connect with HCPs, it’s important to see who they are professionally and personally.

“Your job is so much more varied than ‘this patient type equals this treatment,’” says Dr Mukherjee. He paints a detailed picture of the kind of complications an HCP faces every day: “Prescribing decisions are such a small part of your day. We have to look beyond the drug and see the full picture of a patient’s life. They might be an elderly person struggling to get travel insurance for their holiday or a young person in trouble with their employer for taking so many sick days. A lot of it goes beyond medicine and is more aligned to social care.”

In order to understand HCPs properly, a holistic view of their clinical practice is needed.

Understanding the person who walks into the clinic every day means we bring the human back into the picture.

Consumer data sets like Kantar and GlobalWebIndex can yield interesting insights. Did you know, British HCPs are much more likely to look at consumer review sites rather than specialist/independent ones? While Spanish HCPs are more cost conscious and significantly over index on using coupon sites. This might seem surface-level, but the data can paint a picture of greater social and cultural trends.

Italian HCPs are more insular in how they spend their spare time:

- 66% enjoy reading
- 77% go to the cinema

But Spanish HCPs are the opposite in how they spend their spare time:

- 81% eat out
- 77% play sport with friends

Such nuances could affect anything from placement to creative. Consider that HCPs in the UK frequently choose Costa (see page 15) over other fast food options. Could a partnership with Costa, focusing on outlets located near or within hospitals, offer an opportunity to make a connection?

These consumer brands set the benchmarks and expectations of our HCPs’ personal meaningful experiences. By exploring our audience’s affinity to them, we open up new opportunities to partner with companies or people that haven’t been considered before.
THE WHAT

TOUCHPOINTS AND PREFERENCES

As we noted earlier, traditionally pharma has relied primarily on ‘owned’ touchpoints – brand websites, emails and an over-reliance on reps – to engage customers. Yet there are a wealth of valuable opportunities in shared, earned and paid media.

Each has its own benefits, as Florent Edouard, Senior Vice President of Grünenthal, describes:

“Each media channel meets a different customer objective. When the customer needs precise information, paid touchpoints are the most efficient, as they serve exactly what they need, when they need it. To create awareness and understanding, the earned touchpoints are the most efficient, as they include a third-party trust factor. Shared touchpoints are for those customers who want to drive their own profile as an expert and drive awareness peer to peer.”

64% OF EU5 HCPs AGREE:

“I prefer to learn about new treatments or indications first through my own research.”

HCPs use a range of owned, shared, earned, and paid (OSEP) touchpoints that change across their path to prescription. Each of these can be married to specific needs – for research, education, patient support, and more. In order to remain meaningful and achieve reach, pharma must move towards a more holistic OSEP strategy. To deliver the right message at the right time, brands can strengthen owned assets, develop partnerships that solidify their brand’s perception, explore ways to amplify earned media, and pinpoint optimal investments with paid opportunities.

CONNECT

DETERMINING THE CUSTOMER JOURNEY WITH THE CONNECT® STUDY

The first step in understanding the use of OSEP touchpoints is to know when and where to activate them as well as the role these touchpoints play in the customer decision journey (CDJ). We, at Havas, do this through our proprietary study, CONNECT®.

CONNECT® is our data-driven and consumer-centric proprietary methodology to discover, evaluate and select the most suitable set of touchpoints to include when developing a communication strategy to effectively deliver against brand objectives.

These touchpoints can be prioritised based on how trusted, engaging and influential they are to the target audience and the opportunities they represent for the brand. By identifying the touchpoints HCPs are using to discover, learn, consider, use, and share experiences on a product, the CONNECT® study makes it possible to create a channel plan that matches the audience’s behaviour at any given stage of a journey – and, ultimately, influence the decisions they make.
COMBINING THE WHO AND THE WHAT
EXAMPLE UK HCP PROFILES

DERMATOLOGIST

TARGET PROFILE, SEGMENT A
Size 40% of TAM
Age group 50–64 years
Location Urban, office-based
Gender 64% male / 36% female
Patient pool Average 101–150 patients per week

PSYCHOLOGICAL DRIVERS
My satisfaction comes from seeing patients get the results they are looking for.
I use my time efficiently, minimising paperwork and process.
I expect people to pay for a premium service.
Customer service wins my loyalty.

PERSONAL VALUES
Happiness
Work–life balance is key
Pragmatism
If it ain’t broke, don’t fix it.
Reliability
I trust what works.
Comprehensive
In-depth versus surface.

MOTIVATIONS AND LIFESTYLE
– Money matters
– Health and wellbeing
– Recognition of success

PULMONOLOGIST

TARGET PROFILE, SEGMENT B
Size 5% of TAM
Age group >35 years
Location Urban, hospital-based
Gender 79% male / 21% female
Patient pool Average 55–85 patients per week

PSYCHOLOGICAL DRIVERS
I want to make a difference in the world.
I try to help in every aspect of the patient’s life.
I appreciate opportunities for collaboration in the international scene.

PERSONAL VALUES
Altruism
I love to be part of something bigger than just me.
Contribute
You get out of life what you put into it.
Technology
Will probably save us; it’s certainly not a negative force in our lives.

MOTIVATIONS AND LIFESTYLE
– Networking
– Global citizenship
– Health and wellbeing
– Work and learning

App usage
Productivity and social connection are the drivers of their app usage – all-in-one platforms get top marks.
Top categories
Arts and entertainment, travel, eating out, sports.

TV and streaming
Magazines, journals and newspapers
Brands they love

App usage
Passive consumer keeping in touch with current affairs, finance and games.
Top categories
News, finance, sports.

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THE WHY

MINDS AND WHERE TO MEET THEM

“One of the things that’s unique about the healthcare category is the level of care and pride people take in their profession. In medicine, so many people will tell you their reward is in helping a patient achieve a better outcome. Once you understand that, you start to understand them as a person.”

Greg James, Global Chief Strategy Officer, Havas Media Group

Now, more than ever, HCPs are feeling the pressure, with 66% stating that they are burnt out and have trouble sleeping. Many also feel that their power and autonomy in patient decisions are being reduced. These insights can shed light on why certain touchpoints influence HCPs the way they do and how that shapes their clinical practice. Speaking to HCPs and observing their behaviours can provide further insights, as can working with publishers to understand their communities.

Endemic networks like Medscape have become a mainstay for HCPs seeking health and medical information. Search data from these platforms offer some telling insights. For example, multiple sclerosis (MS) isn’t ranked amongst the top five conditions European neurologists treat each week yet it is the condition that they search for most on Medscape. As something they are faced with less frequently, it’s natural that they would need more support and information when they encounter it.
BRINGING CONNECT® & ARCADIA® TOGETHER

Our target HCPs’ customers intersect with patients on their journey through their disease. It is important to understand the behavioural states and patterns of both, and how they change over time.

A recent Arcadia® study into the emotion journey of irritable bowel syndrome (IBS) patients across markets shows the differences between cultures and treatment stages. This process is applicable for both HCPs and patients to understand customer mindsets and touchpoints.

**CONDITION AWARENESS**
I need to figure out what causes my symptoms and if they add up to a real condition that I should take seriously.

**TREATMENT AWARENESS**
I need some help to understand what options I have and where to find reliable information on constipation.

**TREATMENT CONSIDERATION**
I’m looking at treatment options, but I want to make sure I’m making the right choice. I need help validating my decision.

**PURCHASE**
I’ve made up my mind about trying a new treatment, and I’m ready to purchase it.

**LOYALTY**
I’ve found a tried-and-true treatment that I use whenever symptoms flare up.

**ADVOCACY**
I share advice or treatment ideas with fellow sufferers.

Source: Havas CONNECT® + Arcadia® Studies, October 2019. N=647

![IBS Patient Experience Map](image-url)

- **Germany**
- **South Korea**
- **United States**

**CHANNEL MIX**

- **POSITIVE SENTIMENT**
  - South Koreans tend to take a more proactive stance when they become aware of their condition, resulting in a more positive experience.

- **NEGATIVE SENTIMENT**
  - South Koreans become more frustrated when their efforts don’t yield immediate results.

- **Perceptions**
  - Germans and Americans feel more positive about trying out a new treatment.

- **Friends**
  - Advocacy is generally limited to family and close friends; most respondents are unwilling to share with strangers online.

- **Strangers**
  - I might talk to people I trust, but I wouldn’t tell the kind of thing I want to share with strangers online.

- **Others**
  - I might talk to people I trust; most respondents are unwilling to share with others online.

**Sentiment Analysis**

- **HCP**
  - Germans feel less positive about trying out a new treatment than Americans.

- **Health sites**
  - Germans feel more positive about trying out a new treatment than Americans.

- **TV**
  - Germans feel less positive about trying out a new treatment than Americans.

- **Search**
  - Germans feel more positive about trying out a new treatment than Americans.

**Stages & Feelings**

- **HCP**
  - German patients tend to be more positive when starting treatment and taking control of their situation.

- **Family**
  - German patients tend to be more positive when starting treatment and taking control of their situation.

- **Search**
  - German patients tend to be more positive when starting treatment and taking control of their situation.
“Different contexts send out totally different messages, even if the same people read it.”

Dave Trott, Creative Director, copywriter and author

At Havas, our research has shown us that some media brands, channels and contexts are intrinsically more impactful than others. Each decision we make in building the HCP Meaningful Experience (Mx) has to take context into account, pinpointing the media moments that we can influence. Therefore, determining where to play (touchpoints and partners) and how to be relevant (addressing pain points and mindsets) will ultimately achieve marketing objectives. A simple framework can help:

<table>
<thead>
<tr>
<th>PAIN POINT</th>
<th>This is a specific problem that prospective customers are looking to solve</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOB TO BE DONE</td>
<td>What we need to do to solve the problem with media</td>
</tr>
<tr>
<td>MEDIA APPROACH</td>
<td>How we will use media to solve these issues across the journey while aligning to our objectives</td>
</tr>
<tr>
<td>MEDIA OPPORTUNITIES</td>
<td>The media opportunities we should use, considering OSEP across the journey</td>
</tr>
</tbody>
</table>
| KEY PERFORMANCE INDICATORS | Determining the 1–2 measures of success we are looking to achieve, which will be covered in the chapter on 'effectiveness'

Source: Havas Media Group.
FROM PAIN POINTS TO APPROACH – WHAT DOES MEDIA NEED TO DO?

We’ve seen from the Meaningful Brands® study that brands should look to address functional, personal or societal needs of HCPs.3

Working from pain point to jobs to be done helps to overcome identified issues, enabling marketers to determine relevant media objectives and approach.

"Knowing more and more about customers is taking firms in the wrong direction. What they really need to home in on is the progress that the customer is trying to make in a given circumstance – what the customer hopes to accomplish."11

Clayton Christensen, academic and business consultant


PAIN POINT
"When I have to focus on my career, I never have the time beyond the clinic. I want to get my opinion noticed, so I can build my profile as a thinker of how care delivery can be shaped."

JOBS TO BE DONE
Elevate our medical education for the young professional seeking to further their career, making it visible at the times of day where they need it most, so we can be a valuable source of information.

POTENTIAL APPROACH
Align with communities and contexts where medical education is being discussed and shared. Target the ‘learning mindset’ during AM/PM.

PAIN POINT
"I have to justify my complex treatment decision to the multi-disciplinary team (MDT) with an airtight argument to get the best outcome for my patient."

JOBS TO BE DONE
Simplify how MDT information can be compiled with interactive/easily digestible content for HCPs to learn more on treatment options and patient care.

POTENTIAL APPROACH
Use neuro-linguistic programming (NLP) to identify relevant case studies and clinical trials that provide a balanced view of the HCP’s desired treatment course. Use automation to pull out key data to produce an editable presentation for the MDT.

PAIN POINT
"My patients are non-native speakers and don’t have access to treatment resources that make sense for them at home."

JOBS TO BE DONE
Make patient resources quick and easy to access, showing the full range of resources on offer in local languages.

POTENTIAL APPROACH
Demonstrate commitment to outcomes by identifying language needs and signpost ‘owned’ content on contextually relevant treatment pages.
THE MEDIA OPPORTUNITIES: GOING BEYOND THE NORM

Media can take many forms – from journal adverts, to experiential, to emailers from endemic partners. However, it’s a bloodied battleground in HCPs’ inboxes and on the pages of the journals they read, their needs will not be met through emails or banners alone. We use a series of specialists, tools and decision frameworks that find the optimal context for each stage in the journey and a unique relevant response to each pain point. Here we share a few considerations.

“Context really boils down to: where should my campaign appear and why? It’s important that pharma recognises their societal role. It’s important that they show up in the right kind of media and in the right way because people will notice that.”

Greg James, Global Chief Strategy Officer, Havas Media Group

WHERE YOU ARE SEEN SHAPES WHAT PEOPLE THINK OF YOU

Studies show that getting the context of your communication right greatly increases the effectiveness of your communications.

For instance, patient-awareness communications for overactive bladder (OAB) on the back of public lavatory doors is clearly getting the paid placement and context right.

So how can pharma start appearing in places that make a good impression and avoid appearing alongside content that would drive negative media coverage?

IDENTIFYING PREFERRED PARTNERS

“People don’t come to publisher sites to see ads – they come to our site to be informed and entertained. We have a strong relationship with our readers that breeds trust and loyalty.”

Nick Hewat, Commercial Director, Guardian News & Media

Meaningful Digital Matrix

Choosing the right partners to communicate your messages to is imperative to achieving a positive Mx, the Meaningful Digital Matrix has been designed to do just that.

Consider how a platform engages its audiences and the depth they go to. The engagement someone is likely to have when scrolling through tweets is different when listening to a podcast. Ads in print media, for example, can be skipped more easily than ads on audio platforms and television. As levels of engagement change across the CDJ, media should match them.

There are nine factors we consider to ensure the placements work. Once determined, we always recommend that brands test the placements to see if they resonate with audiences.

YOU DON’T HAVE TO DO IT ALONE

Marrying campaigns to placements or people that the audience view as a trusted source is vital. For HCPs, this is often their peers. A recent CONNECT® study on HCPs prescribing laxatives showed that across the CDJ, 16 out of 25 of the most meaningful touchpoints were earned.

Losing complete control of message delivery makes pharma signatories nervous. However, when you work with a trusted and popular individual, who decides to share your message, its reach and impact can go far beyond what could be achieved through traditional channels. Use C-C-C to identify those individuals most relevant to you.

2 Research interview with Greg James, Global Chief Strategy Officer, Havas Media Group.


17 Russia Laxative HCP CONNECT® study; 2017.

CASE STUDY
HOW CAN YOU CROWDSOURCE THE WORLD TO CREATE LIFE-CHANGING SOLUTIONS?

The World vs. MS, Sanofi Genzyme & Havas Lynx Group

As a global patient activation campaign from Sanofi Genzyme, The World vs. MS set out to help people around the world with MS take on the challenges the disease presents every day.

The core of the campaign was an online platform that invited MS patients to discuss the problems they face and, in turn, the tech community was invited to pitch solutions to these challenges. Social media channels allowed people with MS all over the world to share, discuss and vote on their ideas. The initiative brought the global community together in a way that hadn’t been seen before.

An active network of over 40,000 people from over 41 countries engaged, resulting in a 58% share of voice (SOV) within the community. Over 25 million impressions were generated alongside 1,761,835 engagements. Over 3,600 pieces of content were created, and Sanofi Genzyme’s social following increased by 2,000%.

BEING IN THE RIGHT PLACES

There are several ways in which we can target our communications to the right context:

Contextual placements

We choose the media that lends equity to our message. The media placement implies credibility and is appropriate to the category; selection is manual and based on broad audience demographics supplied by the media owner. It can be planned well in advance, but it is restricted to the audience of that outlet and we have to hope that our intended audience will visit and notice our communications.

Programmatic advertising

Through rich audience insight, data can identify audiences by characteristics of past behaviour and find others who ‘look like’ their profiles. Once HCPs land on one of our chosen media outlets, automatic bidding determines whose ad is served. Creative can be tailored to the individual, considering the time of day, their location, and what is known about their current affinity to our brand. Programmatic can be highly specific, and although it’s not possible to control the adjacent page content, as this poses a (mostly mitigable) risk to brand association, you can control the site or page type the advert is on.
MAKING IT RELEVANT - IT’S NOT JUST WHERE, IT’S WHEN

As discussed in Connection, time of day makes a difference to mindsets and motivations. A Brazilian research paper by Sanofi looking at the behaviours of HCPs found that the most positive digital experiences happen early in the morning or during lunchtime, hypothesising that this was most likely because HCPs are not so focused on their daily work in those periods (see diagram below). Interestingly, the paper also revealed that touchpoint use varied depending on who the HCPs were with at the time. While they were with patients or family, digital touchpoints were dominant, but when in the company of other HCPs, they tended to mostly use offline tools. So when leveraging social media, for instance, consider different creative executions to tap into both professional and non-professional lives.

POSITIVITY OF MEDIA EXPERIENCES BY TIME OF DAY18

<table>
<thead>
<tr>
<th>Time of Day</th>
<th>Digital</th>
<th>Non-digital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early morning (12-6am)</td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Regular morning (7-11am)</td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Lunchtime (12-1pm)</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Afternoon (2-6pm)</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Evening (7-11pm)</td>
<td>Low</td>
<td>High</td>
</tr>
</tbody>
</table>

IT’S ALSO ABOUT WHAT’S GOING ON IN THE WORLD

Brands often look to share content on relevant disease awareness days, but competition for attention is high. Looking for broader social moments, and what they mean to your audience, can be a highly powerful tool. In England, the 2018 ‘We are the NHS’ campaign helped the NHS to recruit a new generation of nurses and encourage ex-nurses to reconsider the NHS by restoring national pride in this well-loved public institution. After England beat Colombia in the 2018 FIFA World Cup on penalties, the campaign decided to take advantage of a moment of peak national pride. Using this time to launch with a TV ad, they were able to leverage the emotional context at a time when the nation was watching. The wider campaign expanded to involve PR, social media and partnerships with existing nurses and members of the NHS. By leveraging the right context and the relevant channels, the NHS reached and influenced the minds of the same audience that the pharma industry aspires to influence.19

CASE STUDY

HOW CAN YOU USE CONTEXT TO TURN PEOPLE INTO LIFESAVERS?

Speed Donating, Teva Pharmaceuticals & Havas Lynx Group

In 2017, it was reported that in Europe, 16 people were dying every day while they waited for an organ transplant. We worked with Teva Pharmaceuticals to tackle this issue by expanding the SOM reach and creativity.

First, a hard-hitting film called ‘Speed Donating’ was created, showing that for some, finding their perfect match was a matter of life and death. This was complemented with strategic media choices that tapped into the frustration felt when waiting. The film appeared in cinemas, during football matches and also on WeTransfer while people waited patiently for files to download. By combining a striking creative with smart media placement, the campaign engaged 148,000 HCPs and helped to improve (and in some cases save) 87,804 lives.

WATCH THE SPEED DONATING FILM HERE

CONTEXT KEY TAKEAWAYS

1. Recognise that where your brand is seen affects what people think of it
2. Leverage the touchpoints that are the most trusted, engaging and influential to your audience
3. Use technology to help regulate placements
4. Understand where your audience are, what they are doing and how they are feeling when they use these touchpoints. Shape your content and the timing of its delivery with this in mind
5. Brands need to test, rather than assume, which context their message will be best received in
The average person sees up to 3,000 advertising messages every day. We live in a world of content overload. So how do you stand out? In developing content, brands need to go beyond selling the product and explore how they can tangibly improve people’s lives, collectively and individually. That might sound like an ambitious goal, but the Havas Meaningful Brands® 2019 study revealed a 72% correlation between content effectiveness and a brand’s impact on personal wellbeing. Deliver on that high ambition and offer meaningful change, setting your brand on the path to engaging, building trust with, and influencing its audience.

THE SIX ROLES OF CONTENT
There are six roles that content can fulfil:

- Inform keeps the audience updated on the latest news/trends
- Help offers solutions or ideas that make life easier
- Entertain content that drives social sharing
- Reward content in the form of incentives, savings, gifts, or rewards
- Inspire stimulates thought and new ideas, drives self-improvement
- Educate improves skills and knowledge

Meaningful Brands® study; the most expected content from healthcare brands

“What content actually triggers people to connect with a brand? It’s not enough that it’s based around the same field of work – lawyers don’t just read legal content and connect over that. They connect over TV series, music, articles…”
Claire Knapp, Managing Director, Havas Lynx Group

1. Content should seek to meet audience needs beyond just the functional (products)
2. Address expected content conventions, using the six roles of content as a guide
3. Choose a message and a format that will drive impact, based on where the user is on their journey with you
4. Do not do personalisation at the sacrifice of reach. Look at the objectives and the entire journey to see where personalisation is relevant.

"Taking a cookie-cutter, one-size-fits-all approach to digital communications won’t do. Busy physicians have no time for resources that aren’t directly relevant to their practice, and non-personalised website design risks losing their precious attention.”

Heather Figlar, Director, Multichannel Insights, Decision Resources Group

CASE STUDY

HOW CAN YOU BRING GAMESHOW ENTERTAINMENT TO A DRY CONFERENCE SETTING?

CME Gameshow, Global Pharma Co. & Havas Lynx Group

It is difficult to have prolonged booth engagement at a congress. So, at the largest respiratory conference in the world, we built a CME gameshow to entertain and educate delegates, with its very own CGI host.

We tested the knowledge of respiratory experts in a fully immersive game cube. With more than 90 randomised respiratory questions, delegates could represent their country in single or two-player mode, responding on tablets in time-pressured conditions. It was revealed that only 10% completely knew their stuff. As well as the game cube, a 95 inch digital screen and an 8ft statue of the host captured delegates’ attention. The stand welcomed more than 2,000 visitors from 64 countries, with over 300 delegates pitching their wits against the host. What’s more, the exhibition was voted as one of the top stands at the 2019 congress.

614% CTR increase to portfolio site with supporting eCME
19.4 hours of HCP product and portfolio engagement

1. Content should seek to meet audience needs beyond just the functional (products)
2. Address expected content conventions, using the six roles of content as a guide
3. Choose a message and a format that will drive impact, based on where the user is on their journey with you
4. Do not do personalisation at the sacrifice of reach. Look at the objectives and the entire journey to see where personalisation is relevant.
**BRINGING THE THREE Cs TOGETHER**

**PAIN POINTS**
- Pain point 1: e.g. How do I diagnose a mutation I don’t understand?
- Pain point 2: e.g. I haven’t had much experience with this platform/company, is it trustworthy?
- Pain point 3: e.g. I need training to fit into my hectic working day
- Pain point 4: e.g. I need to validate my thinking with someone experienced
- Pain point 5: e.g. It’s only valuable if I share relevant, updated information quickly

**MESSAGES**
- Thought leadership 1,2,3
- Partnerships 1,2,3
- KOLs 1,2
- Reviews 1,2,3
- Education 3,4
- Events 1,2
- Cases 2,3
- KOLs 3,4
- Resources 2,3
- Events 3,4
- Thought leadership 4,5

**MEDIA OBJECTIVES**
- Media objective 1 e.g. - Extensive reach
- - Platform image/appeal
- Media objective 2 e.g. - Advocacy
- - Platform endorsement
- Media objective 3 e.g. - Personalisation
- - Platform shortlisting
- Media objective 4 e.g. - Subscriptions
- - Conversations/interactions
- Media objective 5 e.g. - Passive amplification
- - Frequency — improving repeat usage

**TOUCHPOINTS**

<table>
<thead>
<tr>
<th>TOUCHPOINTS</th>
<th>OWNED</th>
<th>SHARED</th>
<th>EARNED</th>
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<tr>
<td></td>
<td>Unbranded site &amp; SEO</td>
<td>Journal X Podcast</td>
<td>User generated content</td>
<td>Journal X Podcast Ad</td>
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<td>Editorial/PR</td>
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<td>YouTube</td>
<td>HCP network sponsored</td>
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<td>HCP network advertorial</td>
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<td>Pharma Co. emailer</td>
<td>HCP access</td>
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<td>HCP network video post</td>
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<td>Webinar</td>
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**MEDIA MEANS**

In Context we identified the media jobs to be done that form our objectives and the placements.

In Connection we uncovered who our audience are, their pain points and CDJ that determine the marketing objectives.

In Content we identified the relevant content to be used across our touchpoints and considered its role in shifting behaviours.

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**MEANINGFUL BRAND IDEA & MEDIA EXPERIENCE**

<table>
<thead>
<tr>
<th>AWARENESS</th>
<th>DISCOVERY</th>
<th>CONSIDERATION</th>
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**OWNED**
- Unbranded site & SEO
- Unbranded site & SEA
- YouTube
- Pharma Co. emailer
- Webinar

**SHARED**
- Journal X Podcast
- Co-branded education
- HCP network sponsored
- HCP access

**EARNED**
- User generated content
- Editorial/PR

**PAID**
- Journal X Podcast Ad
- HCP network advertorial
- HCP network video post
- YouTube
- Instagram
- Programmatic display (Centres of Excellence)
- In-app display

**MEDIA MEANS BUSINESS**

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THE MISSING LAYER OF MEASUREMENT

BUSINESS METRICS
What is the quantifiable impact on the organisation goals?
e.g. increase in share of market

STRATEGIC METRICS
What impact are these tactics having on audience perceptions/knowledge/behaviour?
e.g. change in intent to prescribe post consumption of media

TACTICAL METRICS
How well is a specific tactic/are multiple tactics performing?
e.g. the number of site visitors

The pharma industry is founded on the ability to demonstrate outcomes. However, the same rigour for evidence and understanding isn’t consistently applied to its marketing activities. Understandably, marketing teams focus on their product sales and market share, and track anything that can be readily measured – such as number of sales calls or congress booth interactions. All too often the outcomes that result from a specific marketing strategy aren’t assessed, and we miss out on the connection between tactical and business performance.

Florent Edouard, Senior Vice President, Global Head of Commercial Excellence, Grünenthal

“We are still trying to describe the world with a few key numbers when we need a multi-dimensional space to capture the reality.”

Research interview with Florent Edouard, Senior Vice President, Global Head of Commercial Excellence, Grünenthal.
“In pharma, we should move to using data as an enabler rather than a security blanket.”

Claudia Adreani, Head of Customer Excellence, Boehringer Ingelheim

Perceived difficulty and cost, lack of experience or a focus on short-term results all contribute to lack of measurement. A new drug might require education around the treatment class, training on administration, and interventions to address bottlenecks in the patient care pathway. None of these activities will lead directly to a prescription, but they benefit the patient and can lead to a change in attitude, knowledge or behaviour. As long as we define up front the change we want to see, then we can and should measure this, demonstrate causation, and calculate the effect of a strategy on business results.

CASE STUDY
HOW DO YOU EVALUATE STRATEGY?

It’s In Your Muscles, Sanofi Genzyme & Havas Lynx Group

Spotting the symptoms of a disease can be difficult; spotting those of a rare muscle disease, like Pompe, that affects just 5,000 people in Europe is harder still.

Sanofi Genzyme set us the challenge of helping find the 3,500 people in Europe living undiagnosed with Pompe. Our strategy was to reach people at key ‘tipping point’ moments when symptoms interfere with their everyday lives and guide them towards diagnosis through the ‘It’s In Your Muscles’ campaign website. The campaign has launched in nine countries, and 45,433 have completed the symptom questionnaire. Of these, 20.2% showed intent to act by downloading their results in a tailored discussion guide, our proxy measure for ‘conversion’. And we’ve not stopped there. By assessing site behaviour and population level response patterns, we’re better understanding the needs of this audience so that we can reach them more effectively and support their journey to diagnosis. Our aim is to identify a correlation with changes to diagnostic testing data with campaign activity and HCP awareness in order to accelerate diagnosis of this rare disease.

EVALUATING STRATEGIES BY MEASURING CHANGE

By thinking of our strategy as a series of experiments, we can better evaluate what is working, how it is working and what to do next.

1. Define the change we want to observe and form the hypothesis we wish to test. ‘By doing…, we predict that…’
2. Choose a small number of metrics (5–8) that will best demonstrate this change. This should include some that are short-term (leading) indicators and others that measure longer-term change.
3. Set out the methodology:
   - The actions we will take
   - The data we want to capture
   - The tools/services we will use to do this
   - The techniques we will use to create a control group and reduce variables, pre and post

SETTING A LEARNING AGENDA

“You can measure so much, in so many ways, you can get lost in a measurement maze. Find the thing that will most immediately impact your work – the one measurement you can be clear on, the one measurement you can be proud of. Pursue that.”

Andrew Gardner, Chief Strategy Officer, Havas Lynx Group

Evaluating strategy is far from once and done. Even after you’ve done everything from setting a clear objective through to delivering a compelling campaign experience, there’s still an opportunity to learn. To take advantage of this, set a learning agenda for every campaign. This involves defining the business question that needs to be answered through the course of an activity – “the one thing you can be proud of”, as Andrew puts it. Some will answer questions about media’s contribution to effectiveness, but others can provide rapid campaign, messaging and targeting feedback as well as informing future decision-making. And beyond looking at performance, understanding the components that made a campaign successful can provide an insight into your customer’s mindset.
BRINGING SCIENCE TO ART

A great campaign depends on great creative. Yet despite it being so integral, there’s always been an element of mystery about how creative performs.

“Creative is the leading driver of campaign success, but it’s the one advertisers struggle with the most in terms of optimisation,” says Emily Orlansky, Client Partner Manager, East Coast at VidMob. “Our AI-powered creative analytics platform can determine how visual elements, frame by frame, impact the way audiences respond to ads. Seemingly minor details like colour, facial expressions and logo placement can heavily influence outcomes. We can pinpoint which visual details matter most and what to do when they underperform. It’s data that can be cut in real-time and it’s how you create measurably better ads.”

VidMob is a leading creative analytics platform that uses entirely new forms of data to measure creative effectiveness in social video content, with tools allowing them to rapidly optimise ads while a campaign is live. VidMob created digital video ads for a leading OTC pain relief brand, developing several variations of socially optimised ads to test across Facebook, Twitter and Instagram, amongst other social platforms.

VidMob was able to implement the insights they gained from the live content rapidly, optimising some ads in as little as two days. These nurtured a significant lift in return on investment (ROI), with the optimised creative delivering 3x greater ROI than the original. This led to a decrease in cost per mention (CPM) on Facebook and Instagram, with the total combined campaign savings estimated at $62.5K.

EFFECTIVENESS

KEY TAKEAWAYS

1. Join the dots between business, strategic and tactical metrics

2. Measuring everything teaches you nothing. Set a learning agenda. Start with one meaningful metric that the whole team can understand and be proud of

3. Measurement is never a once and done. Generate meaningful data as part of an ongoing process to paint a richer picture of your audience segments and guide marketing decisions
“In most categories, you have a brand that can conceivably last for decades. In the pharma space, there is a finite window. That leads to a tremendous effort initially to capture or to generate awareness and get it top of peoples’ minds. Media’s pivotal to that.”

Shane Ankeney, President, Havas Media Group, North America

Even the biggest consumer brands – the ones we all look up to – are learning and evolving continuously on the job. They didn’t get to where they are in one giant leap. You have to take it step by step, learning as you go.”

Sarah Price, Director of Media, Havas Lynx Group

For more information about any of the topics in this white paper or to discuss what meaningful media could do for your brand or company, please contact europe@havaslynx.com / +44 (0) 161 228 7756

Media offers a solution to many of pharma’s key challenges. It can help us better understand the people we want to reach, find them at the right moment, in the places they already spend their time, and deliver content that chimes with their mindsets and needs. However, to do media well, we need to create meaning. Only by doing this will we create brand impact.
GLOSSARY

CDJ  
Customer decision journey

COPD  
Chronic obstructive pulmonary disease

CPC  
Cost per click

CPM  
Cost per mention

CRM  
Customer relationship management

CTR  
Click through rate

Endemic advertising  
Ad placement native or natural to its market

HCP  
Healthcare professional

IBS  
Irritable bowel syndrome

KOL  
Key opinion leader

KPI  
Key performance indicator

MDD  
Major depressive disorder

MDT  
Multi-disciplinary team

MS  
Multiple sclerosis

Mx  
Media experience

NLP  
Neuro-linguistic programming

OAB  
Overactive bladder

OSEP  
Owned, shared, earned, paid

OTC  
Over-the-counter

QOL  
Quality of life

ROI  
Return on investment

Rx  
A medical prescription

SAM  
Serviceable addressable market

SEA  
Search engine advertising

SEO  
Search engine optimisation

SOM  
Serviceable obtainable market

SOV  
Share of voice

TAM  
Total addressable market

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