X Marks the Spot:
The Tip of the Iceberg

THE PMRG INSTITUTE Where Great Minds Meet 2017

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New Brunswick, NJ

Building an Improved Respondent Experience for Better Insights

Methodological Approach

Phase 1: Participant Research

We conducted two phases of research to explore participant's opinions of qualitative market research

Phase 1: Qualitative bulletin board in English with physicians (n=15) and patients (n=13) in France, the UK and the US

Phase 2: Quantitative survey in the native language with physicians (n=152) and patients (n=130) in China (physicians only), Brazil, France, the UK and the US

Phase 2: Industry Research

We conducted a bulletin board (in conjunction with 20/20 Research) presenting the findings from the first phase of research (shown here) to solicit the opinions of the market research industry professionals on the importance of those findings. As well as to understand what the industry thinks should be done to improve the participant experience

We had 27 industry representatives respond to the board representing fieldwork agencies, full-service research firms and research buyers

ARE YOU OPEN TO CHANGE?

Participant feedback is based on their own experiences, so this is happening. If no one was doing it, respondents wouldn't be experiencing it

M3 GLOBAL RESEARCH

COMPASS Market Research

Attic: Honoraria

Two key issues are raised as driving payment delays:

1. Longer manufacturer payment terms (e.g., up to 120+ days) have had a trickle down effect in the industry with market research firms being slower to pay the recruiting agencies and then the recruiting agencies being slower to pay honoraria. As one field agency said: *"we are not banks!"*
2. Internal accounting practices mean that everything is paid at one time in a month; resulting in a potential further delay in payment

Practice that can risk undervaluing respondent time:

1. Recruitment companies provided suggested honoraria and market research companies opting to pay lower than the recommendation or the lower end of a recommended range
2. Incentive caps instituted by pharmaceutical companies also run the risk of undervaluing respondent time

Solutions for consideration:

- Better communication about honoraria payment
  - Being upfront with individuals about when payment can expect when they agree to participate
  - Moderators need to be proactive in understanding when payment will be made to ensure they understand the process and can also communicate information, as needed to the participants
    - Active monitoring/notification of when the participants are paid by the moderator
- Re-evaluation of invoicing policies at every layer to ensure that the money to pay the honoraria is made available at the initiation of fieldwork
- Market research firms are using alternative methods (e.g., incentive payment companies) to self-pay respondents when they are able as they have seen even when they pay the honoraria upfront there is a delay in payment

Respondent perspective

Honoraria is the biggest driver to participate in market research followed by the learning new things. However, there appears that there are gaps in payment expectations and what actually occurs:

"The ratio of time spent/honoraria remains crucial." - Physician, France

"If [honorarium] is too low, then that will make me think if I even want to start study, and sometimes I will pass because I think the researchers don't value my opinion enough to even pay a fair market amount." - Physician, US

"To be very frank and honest, I think most people who sign up to market research companies do so to earn a little extra cash on the side. I think it would be rare to find someone who did it purely out of interest." – Patient, UK

When asked how many weeks it takes to receive their honoraria (if not paid onsite) and how long they think it should take, participants say:

"Very few as early as a few days…but some sent as early as a couple of weeks, but most usually are over 4 weeks. I understand the study closes first…but when it gets to be 6 or 8 weeks then that is really too long." - Physician, US

"Some companies are fantastic – it gets loaded to their site immediately with several payment options. Others take over 3 months. One particular company never pays without chasing them. I think payment within one month is acceptable. Anything else is not!" - Physician, UK

"If it is online or via phone it can sometimes be 2 months which I frankly think is quite ridiculous. It should be within the same week." - Patient

29% of physicians and **31%** of patients agree that **"There are likely qualitative market research studies that I never received the honorarium for because I lost track of the fact that it was owed to me"**

22% of physicians and **29%** of patients agree that **"There are qualitative market research studies that I never received my honorarium for because I did not feel like spending the time following-up to receive payment"**

2nd Floor: Fieldwork

Respondent perspective

Continuing on the theme of respecting their time. They also want their time respected during the interview process. They want the research to take the time that is promised. Complaints include:

- The need to test technology or being called early due to the use of technology
- The need to drive to a central location
- The fact that the interview itself is longer than they were told when

…all of which result in a longer time commitment than just the interview time quote to them.

"The most negative point about participating in qualitative research is to have longer studies than what has been announced in the invitation. Non respect of study length can have significant impact in my daily schedule and make me annoyed." – Physician, France

"[I don't like it when] my time is not respected and the group or interview runs over. Having to excuse yourself is embarrassing and it should always start and end on time." - Consumer, UK

"What I don't like is that some one calls 10-15 minutes to test the system and to connect me as I have already tested the system and I know how to connect." – Physician, US

We asked respondents to rate a series of statements, two of which spoke to professionalism, on a scale from one to seven where 1 is strongly disagree and 7 is strongly agree:

25% of physicians agreed that **"I often participate in research that exceeds the amount of time that I was told I would be spending on the research"**
No significant difference between countries

43% of patients agreed that **"I often participate in research that exceeds the amount of time that I was told I would be spending on the research"**
No significant differences across counters

50%* of physicians agree that **"When the research exceeds the amount of time I was told, I find this frustrating"**
Significantly higher in the Brazil (70%) versus France (40%) and China (33%)

41% of patients agreed that **"When the research exceeds the amount of time I was told, I find this frustrating"**
No significant differences across counters

Addressing these issues/concerns fall primarily on the shoulders of the moderator. They are relied on to ensure that the participant is comfortable with the interview and the interviewing process

Respect for time is best served by ensuring that…

- An accurate assumption is made at the outset on how much time will be needed to meet the objectives
- Moderators take responsibility for ensuring that interviews ends on time
  - Experienced moderators know when a discussion guide is too long; guideline lengths need to be managed during the development process to ensure the interview can be done in the promised time
  - A couple of Research Buyers acknowledge that they also need to do a better job of managing team expectations on what can be addressed in a single study; limiting the number of central questions; they have to help the moderator ensure the discussion guide is manageable
- If the moderator needs to run over on time…
  - Always ask to go over time and pay additional honoraria to compensate them for that time
- Ensure that the invitation clearly outlines any additional time needed to test technology and compensate the respondent for that time
- Pay additional for travel time (not just a token increase in incentive)

It is a balance of what to share and when through the course of the interview about the goals and objectives

- Often times there is a need to maximize unaided and organic responses, so the moderator does not want to introduce bias…BUT
- More detailed background/context could actually allow for a more in-depth and detailed discussion; the participants are *"not playing a guessing game"*

Respondent perspective

Once they get to the interview itself, participants want to understand what we are looking to understand with our research. Why are they there? What decisions will be made as a result? They want to know this so they can be as useful as they possible can….

"Sometimes there is only so much you can say about a particular question, but often then interviewer wants more…it becomes very repetitive and we seem to be going round in circles. No agenda had been set out and, if it had, maybe I would have been able to elaborate." - Physician, UK

"It can be very vague at times and I may not be clear on what the client wants." - Physician, UK

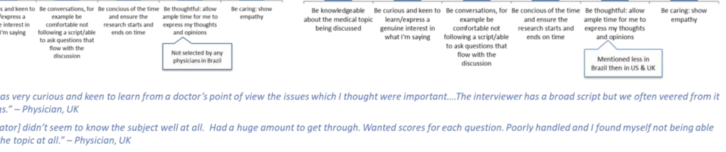
Moderators should…

- Explain the purpose of the questions as needed
- Acknowledge what the respondent has already said; asking them to expand on it or "tell me more"
- Employ more methods that get at ideas from a different angle rather than probing (be repetitive without appearing repetitive)
- Ensure they are properly prepared to discuss the topic

Respondent perspective

The moderator can create or erode comfort. Key ways moderators erode comfort:

- Not knowing the lingo
- Not managing group discussions
- Lacking a conversational quality
- Seeming disappointed in respondent answers
- Asking leading questions



"The interviewer was very curious and keen to learn from a doctor's point of view the issues which I thought were important….The interviewer has a broad script but we often veered from it and clarifying things." – Physician, UK

"[The worst moderator] didn't seem to know the subject well at all. Had a huge amount to get through. Wanted scores for each question. Poorly handled and I found myself not being able to concentrate on the topic at all." – Physician, UK

"If it is a group project, sometimes being in a room with participants that go far off topic. I like to stay on point." – Physician, US

"The interviewer has to understand the topic enough to know what questions to ask and appropriate follow up questions to answers give. Otherwise interviewees will get frustrated and lose interest." – Physician, US

"A good moderator leads the conversation but does not patronise, prompt or steer too much. Sometimes moderators love the sound of their own voice too much or do not let everyone express their opinion in a fair and equal way." – Pt., France

"I didn't like the skills of the interviewer who was a bit 'stiff' and would just repeat back everything we said to her prefaced by 'so I understand you to say'. I didn't feel she was really listening or engaged on a human level. It was a formulaic approach and not a real human interaction." – Patient, UK

Respondent perspective

One of the key themes that we heard was that respondents want to know what is going on. They want to understand what the research is about and how they be impactful. This starts at the very beginning with the invitation to participate. Respondents want to understand what the research will be about:

"Nature of the study I typically see. But sometimes it is too vague. And I find this to be a tactic used more and more because there are some topics that are very much less interesting to the physician." - Physician, US

"Occasionally the information regarding the research topic is vague a bit more detail would allow us to decide if we are able to provide a good informed opinion." - Physician, UK

"I would like to see more information about the objective of the study. How might the research make a positive impact?" - Patient, USA

When asked to select the top pieces of information to include in a research invitation from an aided list that also included items such as type of research, date/time of research and honoraria:

25% of physicians rank **"the research topic"** as the most important information to include in the research invitation (Note: 27% of physicians rank "honoraria" as the most important information; these were the top two pieces of information)
No significant differences across counters

***22%** of patients rank **"the research topic"** as the most important information to include in the research invitation (Note: this received a higher percentage than any other piece of information)*
No significant differences across counters

When physicians are asked why they will respond to an invitation:

***18%** of physicians rank **"the topic is one seen routinely in practice"** and **19%** rank **"the topic is one I feel I am an expert"** as the most important in determining to respond to a research invitation*

Sharing about the topic is a balancing act, but one that can be solved

- Fieldwork agencies are not surprised by these results. They have found:
  - Being able to provide detail, even a little detail, helps garner participants' attention and they do see a difference in the success of the recruitment efforts when they can provide more detailed information
  - They are asked about the client and topic – understandably the client needs to be kept confidential but we could do a better job with the topic
  - It is not unusual to only see the name of the condition as the topic
  - They do have participants call and asked to be removed from panels after participating in a research study that did not meet their expectations in terms of the topic
- Many agree that we could do a better job of providing more information about how and why market research is being conducted (e.g., the objectives of the research, what decisions will be made based on the research)
  - While we may not want to pre-bias respondents and/or provide the ability for people to cheat the screeners, individuals want to feel they can discuss a topic in a knowledgeable way
  - And, often the screening questions give the respondent some insight – why not just be more forthcoming and transparent
- Creativity is key and it can be done
  - To allow participants to understand what the research will be about without giving away more information than we want
  - To make even the less interesting research, interesting
    - For advertising research, a researcher even suggested *"acknowledge the elephant in the room"* and make it sound as interesting and/or as fun as possible. Also, it would allow participants who truly do not like this type of research to self-select out and save everyone painful and, potentially unproductive, interviews

Recommendations to improve the screening process

- Store the standard "demographic" information in the panel and rather than ask those questions every time, just confirm that nothing has changed
  - Fieldwork agencies need to communicate if any of this information is stored in their databases/panels and does not need to be asked (e.g., years in practice)
  - Clients (full-service research firms and research buyers) will need to have confidence that the data are accurate
- Streamline screeners; removing "redundant" questions
  - I.e., Instead of asking the type of cancers seen, then ask how many patients they see with each of the selected cancers – just ask how many patients they see with each cancer type. If they say 0, then they do not see that cancer
- Do not use screeners as a means of data collection; do not ask questions that do not qualify the individual to participate
  - Any other questions should be included in the fieldwork/interview
- Consider the order to screen individual out sooner than later

Respondent perspective

Another theme is that they expect that the research industry will respect their time. This starts during the screening process. Here they have multiple complaints:

- Spending the time to be screened only to find out that the quotas are filled
- Long screening processes that take valuable time
- Answering the screener questions multiple times
- Answering the same questions (e.g., years in practice or age) each and every time they participate in research

"One has to go through a series of questions to determine eligibility and then you figure out the qualification, and for a busy person like me it is a waste of time. Bunch of time the quota is full. Some of the companies ask the same personal questions again and again. Why can't they store that information on their database?" - Physician, US

"It would be helpful for some of the screener answers to be saved, so you weren't always having to re-fill the same response to a screener." - Physician, UK

"I dislike long, drawn out recruiting processes that end in not being selected. Yes, I am offering my time, but my time is limited as everyone's is and I would like it to be respected. The recruitment process should be straightforward and quick." – Patient, US

"I am frustrated when I answer a series of questions either verbally or in writing, and then, if being considered for a project, I receive a phone call to be asked the same questions again. It feels as if one is not trusted to have been honest the first time; the information has been given already and it feels like a waste of my time." - Patient, UK

"Sometimes it is frustrating as you have to spend 10-15 minutes answering the questions, and by the way, if it happens more than a few times, with a particular company I then start deleting their emails and don't even bother to open them." - Physician, US

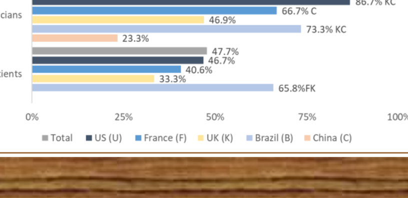
"Most [screeners] are fine, but many ask for 10-12 questions before screening out, which is unfortunate. 6-8 screening questions is reasonable, but no more. Clearly important to get right people for the research." – Physician, UK

When asked how many screener questions would be acceptable to determine eligibility, they indicate:

	Physicians (n=152)
Minimum	2
Mean	7
Maximum	20

	Patients (n=130)
Minimum	1
Mean	9
Maximum	20

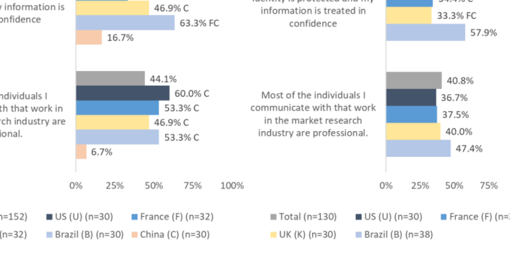
When asked on a 7-point scale where 1 is strongly disagree and 7 is strongly agree:



1st Floor: Recruitment

Respondent perspective

We asked respondents to rate a series of statements, two of which spoke to professionalism, on a scale from one to seven where 1 is strongly disagree and 7 is strongly agree:



"Given the issues with privacy/data breaches, I don't think it's ever possible to feel totally secure. There is a risk implicit in sharing personal information, which is why it is even more important to feel respected both in terms of the way one is treated and paid." – Patient, UK

"We assume our anonymity is protected but can't be certain. I don't know how well the industry is regulated and assume a code of conduct is followed." – Physician, UK

"Sometimes you end up in focus group with colleagues from the same hospital…awkward (as some colleagues don't like others to know they do market research – indirectly anonymity is breached)." – Physician, France

"I sometimes grimace at the unprofessional aspects of recruitment, from misspellings of my condition on a form to researchers on the phone directly telling to lie about things, while their dogs bark and children scream in the background as they have called me in the evening from home!" – Patient, UK

"Sometimes very specific questions are asked and then you realize that either the study is full or you are not the right fit, in the meantime individual data has been collected. One wonders how the data is used by the researcher" – Physician, US

"The worst experience for me is when the moderator is hesitating, doesn't seem to know anything about the topic or doesn't have any professionalism." – Physician, France

Concerning…

- Industry concurs that these top 2 box scores are low and are of concern; they should be *at a minimum* at 80%
  - We are seeing these levels of agreement despite data protection laws and market research codes of conduct to which market researchers abides
  - Assurance of confidentiality is often reinforced at multiple points in time during the course of a project (e.g., during recruitment and again during fieldwork)
  - Professionalism is a little more difficult to assess as it is a subjective view and every industry is going to see a degree of unprofessionalism in their ranks
- A few recruitment/fieldwork agencies note that this mirrors what they have seen and heard and are not surprised that the level of confidence is low

There is more to learn

- These data raise several questions to be answered before solutions can be determined:
  - More details around what contributes to this:
    - How does other data leaks impact their confidence in our ability to keep our promised confidentiality?/Will increasing regulations about data protection (e.g., GDPR) assist in addressing these concerns?
    - Is potentially negative impressions of big data/IoT impacting perceptions of "traditional" market research?
    - How does the number of "hands" in the chain impact their confidence in their confidentiality – recruiters, moderators, colleagues/clients listening/watching
  - How can we approach them differently to improve their confidence in the industry?
    - In some countries, where physician top box scores are higher, what could we learn from the physicians to make patients more confident?
  - To a degree are both of these such subjective measures that we may be able to impact them?

Preliminary ideas…

- Provision of additional explanation of codes of conduct and/or data protection laws
- Moderator training to ensure professionalism and that confidence is built in the process and QA procedures to ensure this is occurring
- PR campaigns – General explanation about market research codes of conduct/data protection laws (e.g., *"The German Market Research Associations have radio ads supported by the radio stations that explain data protection. This way they strengthen the trust in market research and increase our integrity."* – Fieldwork Services)

However, to be cynical – can we undue whatever damage has been done given oversampling of markets and respondents, particularly physicians

*"These scores are definitely low. They must be at least 75% or more….based on what I have experienced respondent comfort is **the most critical** factor that direct impacts on the quality of data. Based on the data shown it is evident that more than 50% of HCPs and Patients are not comfortable participating in research."* - Research Buyer

"Obviously there is work to be done. Not only does it have implications in terms of our image, etc., but it is getting harder and harder to get good respondents to participate in research…without good respondents we can't get good insights. Without good insights we can't have strong strategic recommendations. Basically we are killing our industry over time." - Full-Service Research Provider

Foundation: Market Research Professionalism