

The Effect of COVID-19 on Healthcare Market Research Participation: Feasibility

M3 GLOBAL RESEARCH



INTRODUCTION

In the face of an unprecedented global healthcare crisis, which is having a significant impact on our frontline healthcare workers, we wanted to health check our panellists' current willingness to participate in healthcare market research. It's important to us that as research continues, we respond sensitively and appropriately to significantly increased pressure on the workforce, and most importantly do no harm.

The results reveal a clear call to action for the industry. For the 99.7% of respondents (n=5,665) that are willing to continue to take part, market research is a welcome distraction from the immense pressure they're under at work. Research studies offer them an opportunity to learn and broaden their clinical knowledge, and now, more than ever, they recognise the significant impact of research in developing new therapies that will have huge benefits in a post-coronavirus world.

For many, it's also valuable additional income that they might struggle without, especially in the current climate. In questions asking about the maximum length of interview (LOI) they would be prepared to take part in, and frequency of contact, a common response was 'whatever you need'. Covid-19 certainly isn't affecting enthusiasm, nor willingness to participate, and those continuing research should take comfort in the support they're providing the HCP community during extraordinary times.



5,665 healthcare professionals working across a broad range of specialties in Europe and the USA were surveyed between 18-20 March 2020. No incentive was offered.

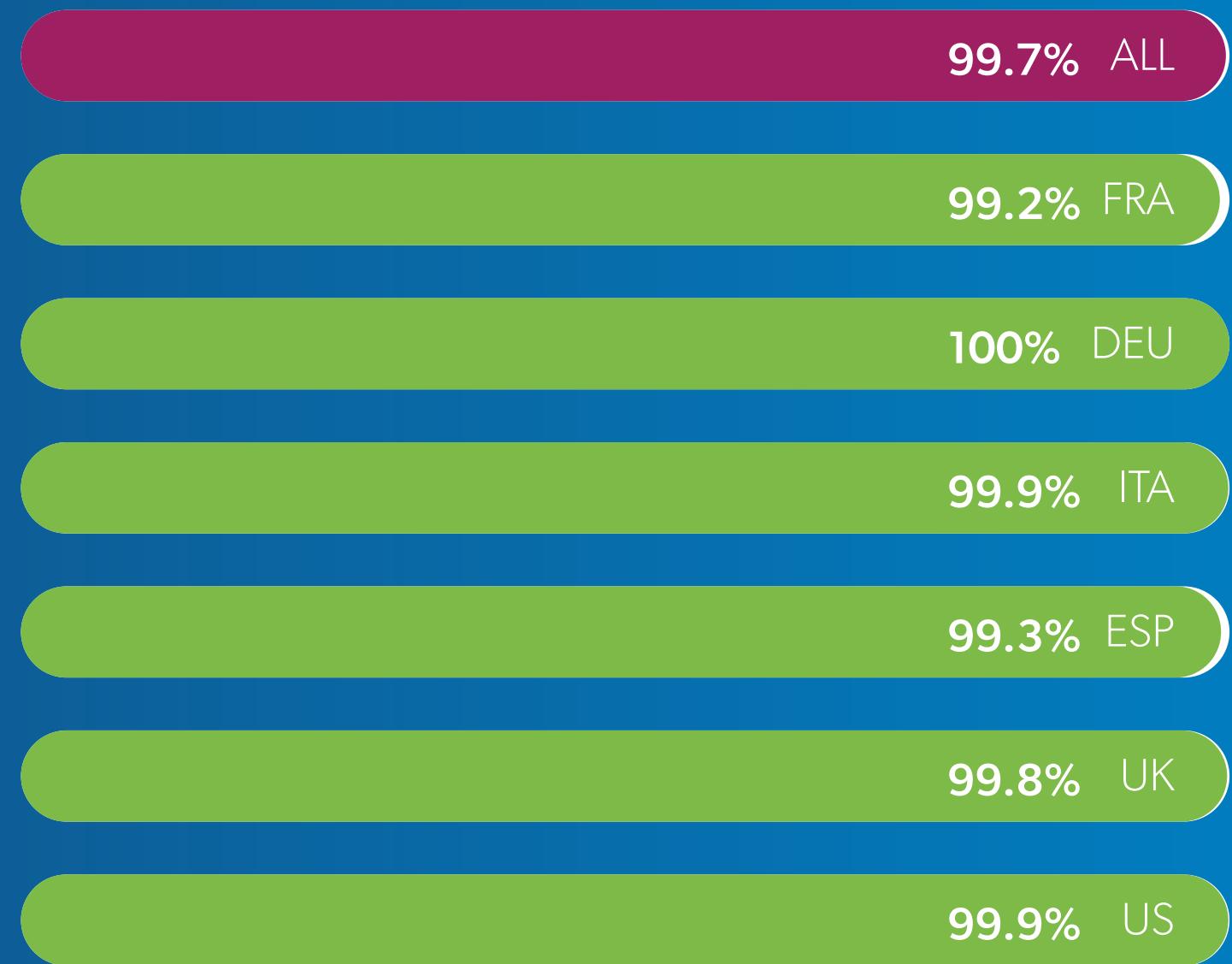
OVERVIEW

With 99.74% of panellists still happy to do market research, we don't currently have any concerns about continuing to invite them to research studies. Given the small sample of HCPs not currently willing to participate in market research there are no trends in terms of specialty participation. This includes a cohort of over 500 respondents from anaesthesiology, critical care, pulmonology and infectious disease specialties, which we would expect to be more severely impacted at this time. Of this group, only one (0.2%) was currently unwilling to do market research.

	FRA	515
	DEU	307
	ITA	1,013

	ESP	592
	UK	558
	US	2,679

PERCENTAGE OF HCPS CURRENTLY WILLING TO PARTICIPATE IN HEALTHCARE MARKET RESEARCH:

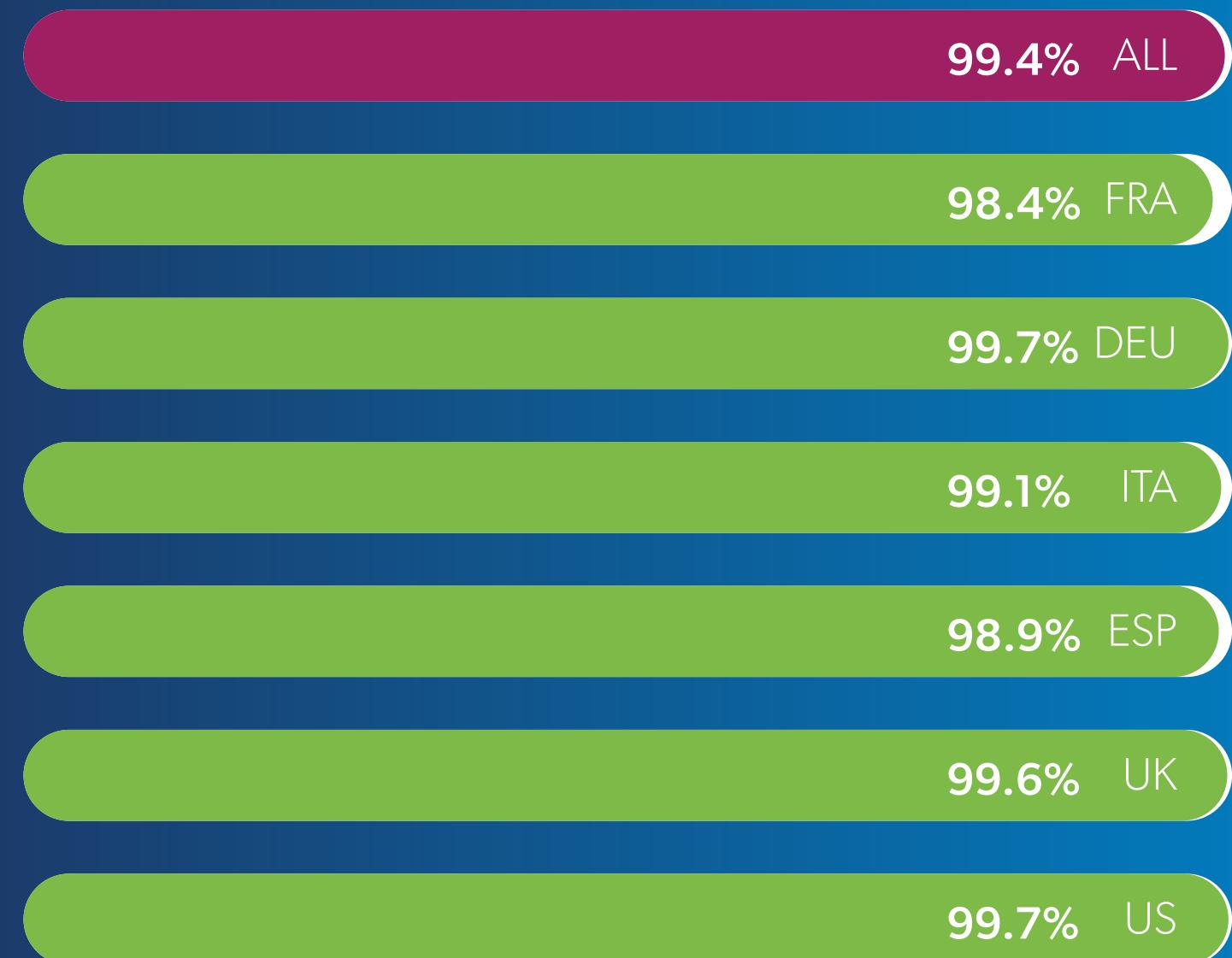


METHODOLOGIES: ONLINE SURVEYS

99.4% of HCPs are still eager to participate in online market research, with 'real life' response rates echoing this picture. This is consistent across all markets including the worst affected countries, reflecting the reality of the impact of a pandemic on healthcare systems; many doctors in less affected specialties are sitting in empty facilities with cancelled clinics and more available time, welcoming an opportunity to earn some extra income. However, even when we just consider respondents working in anaesthesiology, critical care, infectious diseases, and pulmonology, 99.5% are happy to participate in online surveys at this time.

There are also, particularly in the UK, where testing is less available for HCPs, scores of asymptomatic doctors self-isolating who again have more time for other activities and are looking for opportunities to expand their clinical knowledge during 'downtime'.

PERCENTAGE OF HCPS CURRENTLY WILLING TO PARTICIPATE IN ONLINE SURVEYS:

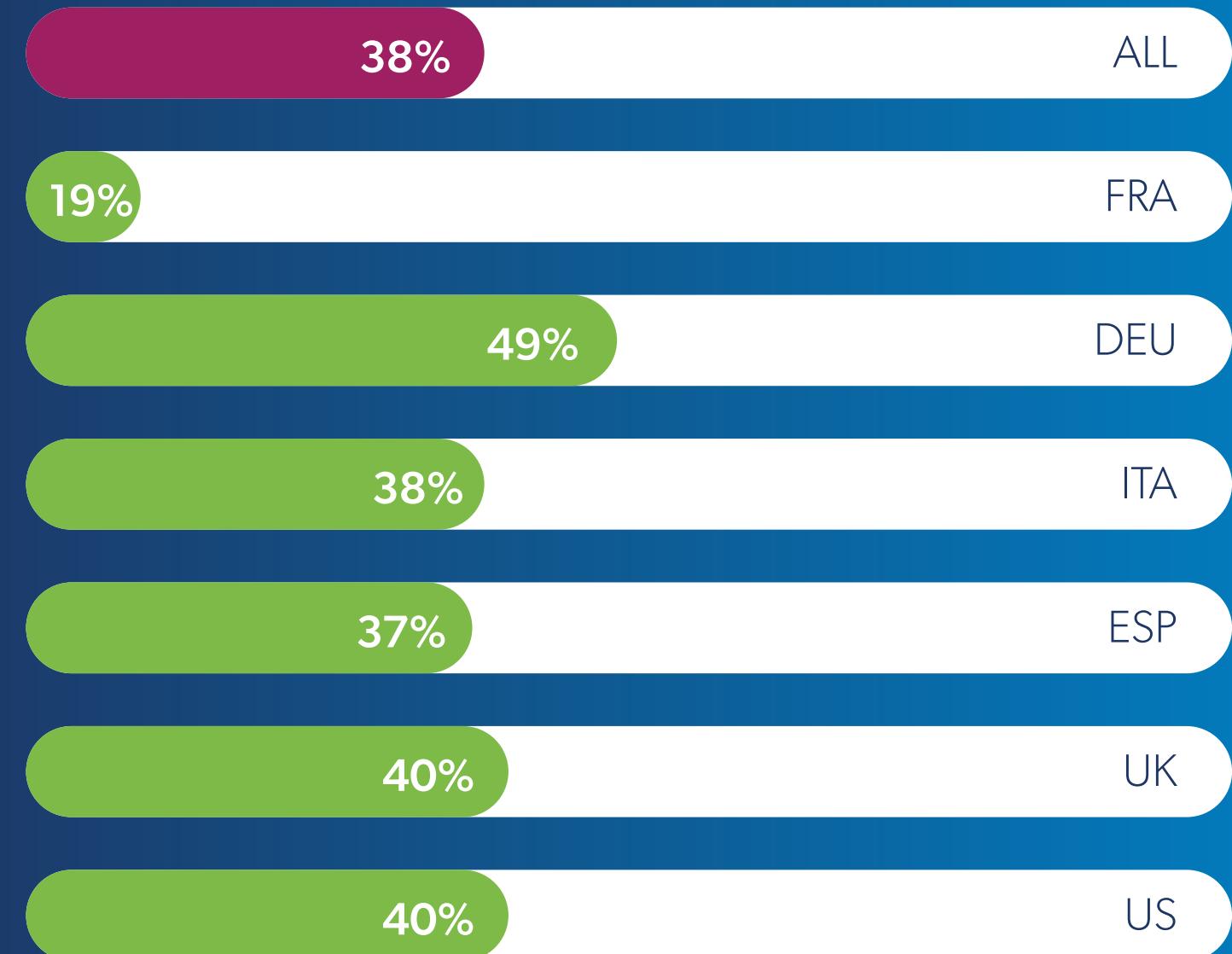


METHODOLOGIES: FACE TO FACE RESEARCH

Unsurprisingly, given varying degrees of lockdown and social distancing across respondents' countries, compounded with additional clinical pressures, face to face research is the methodology most affected. However, it's encouraging that even in these unprecedented times over one-third of respondents would still take part in in-person research.

We recognise however, given current guidance on social distancing, that willingness to participate in face to face methodologies does not make them feasible. Urgent qualitative projects could be delayed in favour of a quicker solution. M3 Agile offers 20-min moderated interviews (normally within 48h after launch in EU5 and US), or standard remote qualitative methodologies could be leveraged. Both take advantage of continuing high engagement with online MR, especially when combined with scheduling flexibility.

PERCENTAGE OF HCPS CURRENTLY WILLING TO PARTICIPATE IN FACE TO FACE RESEARCH:

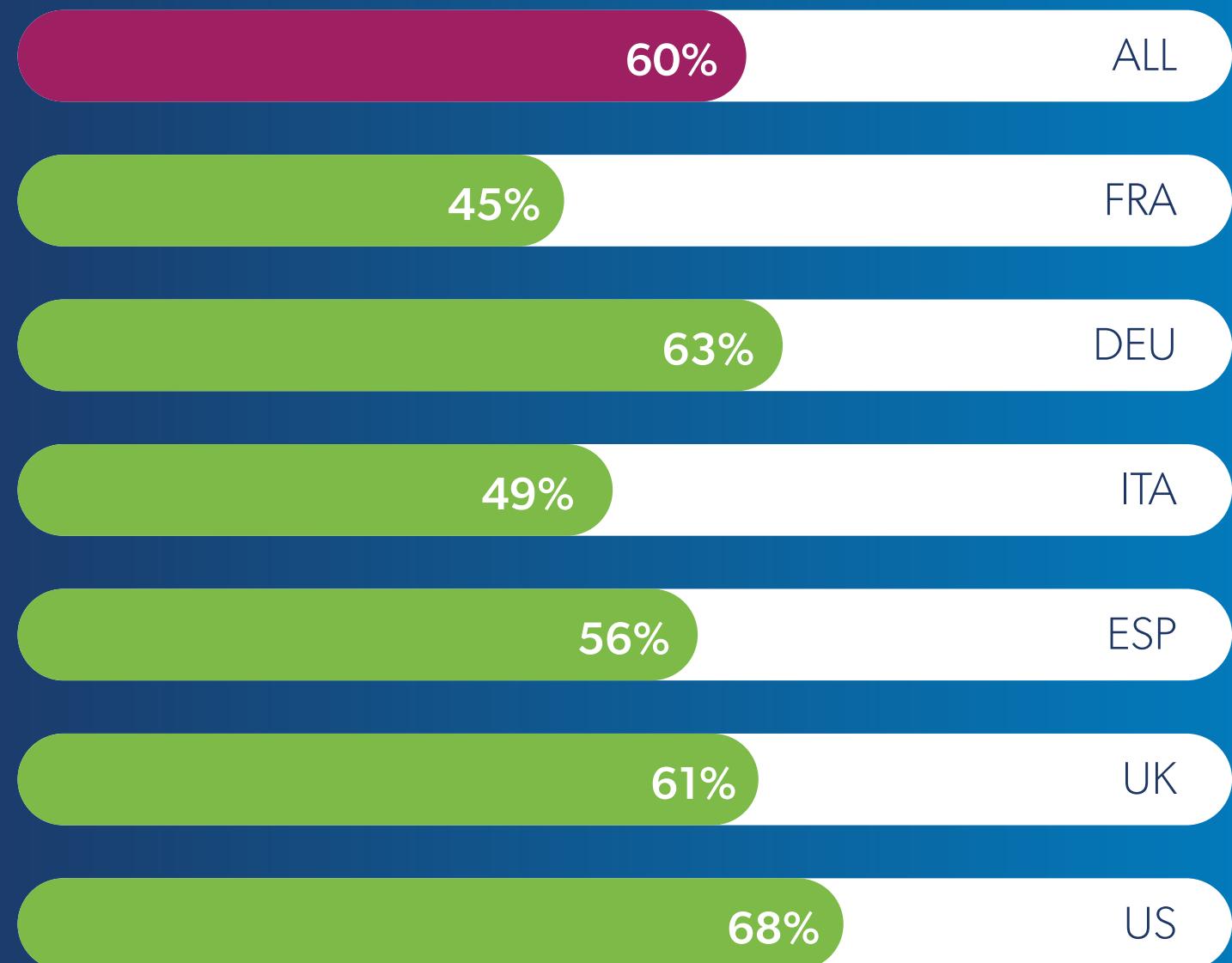


METHODOLOGIES: TELEPHONE INTERVIEWS

Across all markets, 60% of HCPs are still willing to participate in telephone interviews. There is some variation in the picture at local level, with French and Italian doctors least willing to take part (at 45% and 49% respectively). American (68%) and German (63%) doctors are most positive, both above the average.

Although willingness to participate in telephone interviews often reflects personal preference, it is also dependent on HCPs being able to reliably schedule time in advance. During a healthcare crisis like Covid-19 their ability to plan ahead is severely impaired given the constantly changing clinical landscape, so a degree of flexibility will be required.

PERCENTAGE OF HCPS CURRENTLY
WILLING TO PARTICIPATE IN TELEPHONE INTERVIEWS:



METHODOLOGIES: TELEPHONE INTERVIEWS

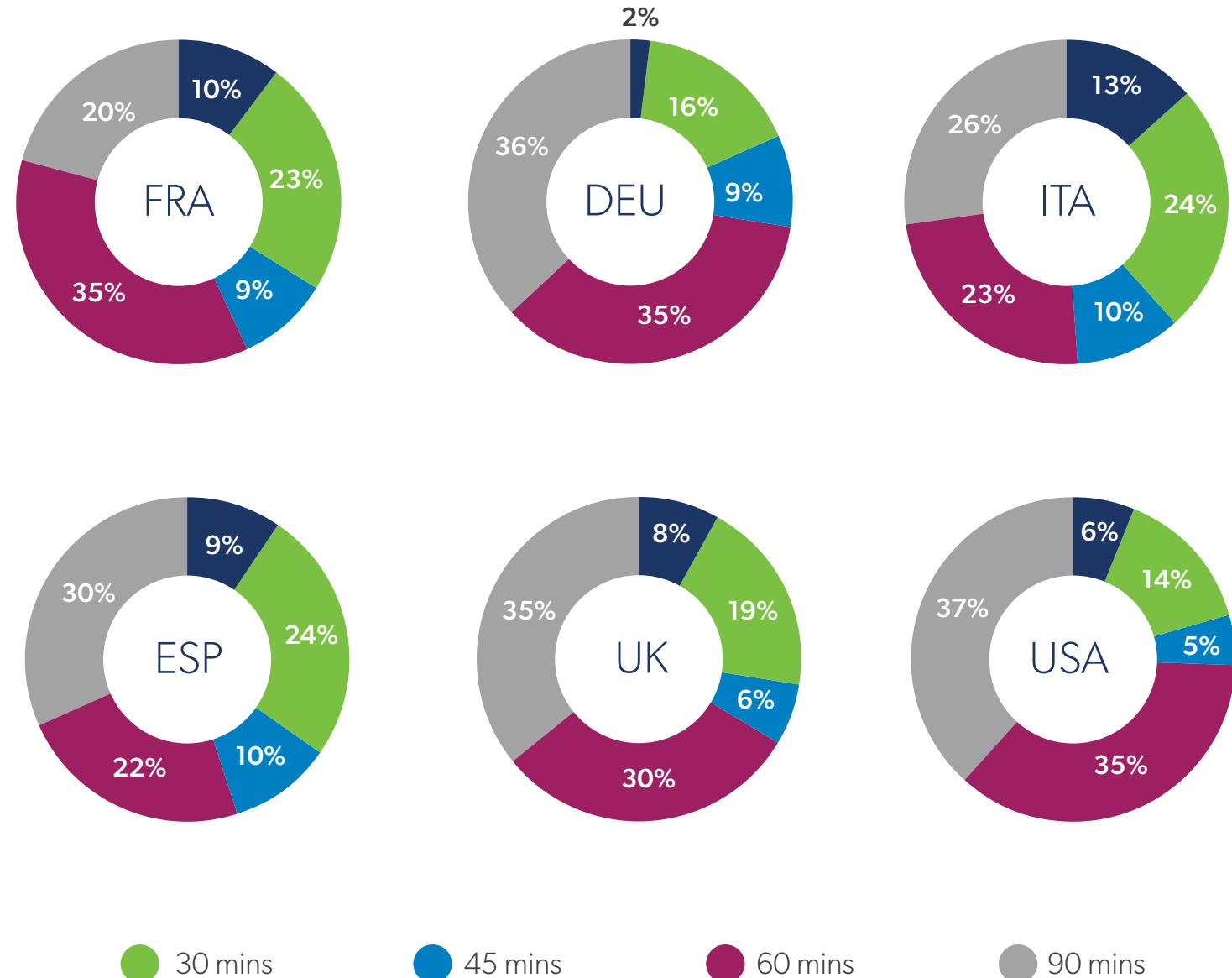
Given the continuing appetite for telephone interviews it was important to consider length of interview (LOI) preferences to better understand what is appropriate and acceptable in the current climate.

In most markets there is no clear preference for a specific LOI. However, in all markets except Italy (49%), over half of respondents would be happy to participate in telephone interviews for 60 minutes or longer (71% in Germany, 72% in the USA).

Our recommendation is to keep all phone research streamlined and focused, taking practical measures to be time efficient, irrespective of willingness to participate.

N.B. Where percentages do not add up to 100% this is due to free text responses with the majority saying 'whatever is needed'

WHAT IS THE MAXIMUM LENGTH OF TELEPHONE INTERVIEW YOU WOULD BE WILLING TO PARTICIPATE IN?

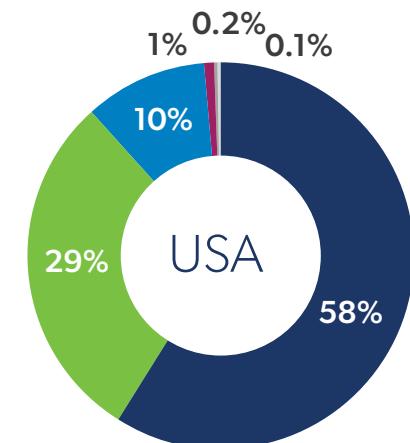
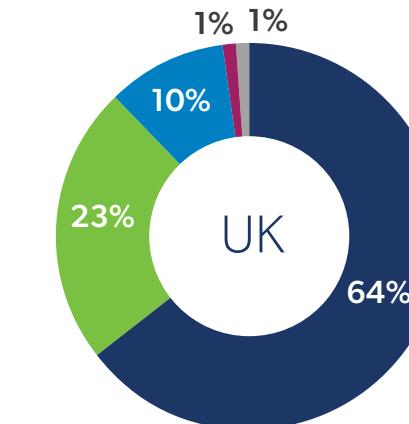
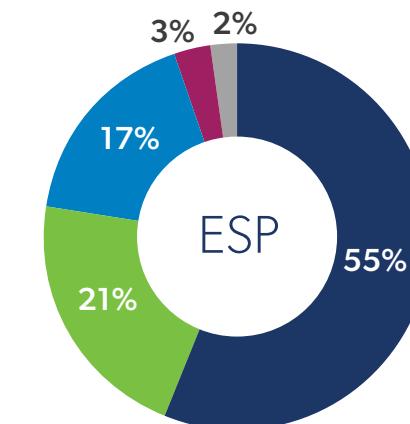
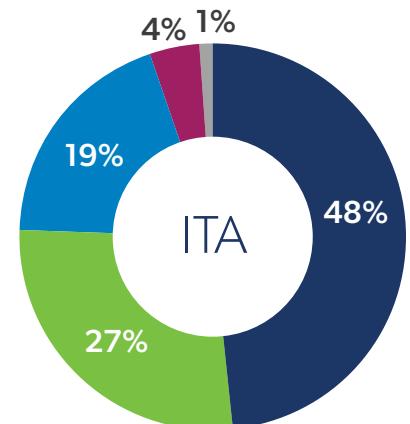
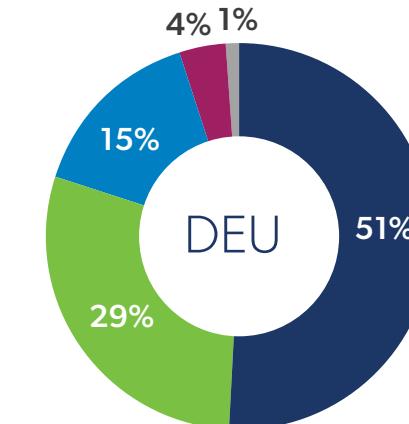
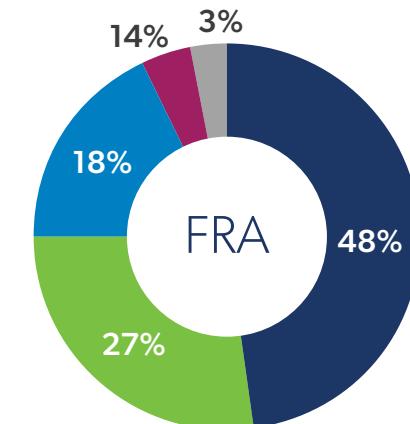


FREQUENCY OF CONTACT

Despite their competing time pressures, HCPs across all markets are still happy to receive frequent email communication. 82% want to receive emails either 'as needed / no change' (55%), or 'once a day' (27%). The overriding message was one of 'let us manage our inboxes'.

Our recently launched 'daily digest' survey invitations consolidate all relevant studies into one daily email, so we are satisfied that no further action is needed here. We will, of course, continue to monitor email open rates and engagement to ensure no adjustment to frequency needs to be made.

HOW FREQUENTLY WOULD YOU BE HAPPY TO RECEIVE EMAIL SURVEY INVITATIONS FROM US DURING THE NEXT 12 WEEKS?



- No change
- Once per day
- Once a week
- Once a fortnight
- Once a month
- < Once per month

CONCLUSIONS

During this time of extreme uncertainty, enabling HCPs to continue to participate in market research gives them much needed normality, an escape from clinical pressures, and for some, improved financial security. Our commitment to our panel members is one of reassurance that we will continue to field research and ask for their opinions, and we call on the industry to help us deliver on this promise. Research and medical advancements need not stop; a post-coronavirus world will still be reliant on all of the therapies that were being considered just a few short weeks ago.

We will of course continue to monitor response rates and participation data, with early identification of emerging trends. We will respond sensitively and appropriately to any new insights, changing course if needed, and guarantee that we will always prioritise the wellbeing of our healthcare workforce and most importantly, their patients.





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