

Two Qualitative experts, **Caroline Volpe**, *President of Compass Market Research*, and **Patrice Barnes**, *Director*, *Qualitative Operations*, *of* Naxion, join forces with SHC for a Q&A on the challenges and misconceptions they've faced within their combined 50+ years of healthcare market research.



Caroline VolpePresident, Compass Market Research

What are the biggest challenges in successfully fielding a Qual study? Can they be avoided?

CV: It seems that the number of projects that require more specific and difficult recruits are increasing, and, I don't believe this issue is avoidable. It is the nature of the industry now as treatments become more targeted. However, what I think we do need is to continue to think outside of the box for unique ways to recruit these individuals and to increase these individuals interest in participating in market research. I think the challenge is that the approach to recruitment and incentives needs to continue to evolve and adapt.

PB: For me the biggest challenges are project timelines, respondent cooperation and availability, small respondent pools based on screener eligibility, and the need for "cold calling" respondents. Also, the need to find willing vendors rather than only the databased recruitments. These challenges can be avoided by implementing the following practices. To help with respondent issues continue working



Director, Qualitative Operations, NAXION

in the community to let them know the value of market research. For the vendors to "cold call" continue to ask as part of the vetting process and look for "old school" recruiting. For the timeline issue continue to emphasize to the clients the efforts needed for the recruitment process to manage expectations.

What advice would you give clients looking to ensure their Qualitative studies get fielded cleanly and on time?

CV: I think having a clear picture of who we need to talk to and what are the key screening criteria that we need to find them is critical to a clean recruit. I think for an on-time recruit to happen, it requires constant communication between the client and the rest of the research team. It is also important to have a realistic expectation on how long the recruit will take. It might be a balance. If a short timeline is critical, then we might need to compromise on the sample composition and size. If the sample composition and size are the critical points, then it is necessary to understand that the recruit may just take time. I also think setting realistic expectations for the client is our job. But clients need to also understand that we may not foresee every issue that may arise.

PB: The more information provided at the time of estimating, the better prepared recruiting agencies will be when the project comes. Limit the number of changes needed, as much as possible, once the project hits the field in order to ensure a faster and smoother delivery. It is important to utilize the recruiting agencies as partners rather than vendors to better understand feasibility, and to provide information on methodology based on experience.



What are the common misconceptions that people in this industry have about Qual work?

CV: In my experience, I don't believe it is a misconception that leads teams to opt for quantitative versus qualitative when only one method can be done due to time and/or budget constraints. If they have the time and budget for quantitative, I think teams will tend to choose that method as opposed to qualitative because quantitative is projectable to the population as a whole whereas qualitative is only directional.

PB: I think a common misconception is that respondents are just sitting around waiting to participate; that the world is "black and white". Many times there are multiple titles with the responsibilities that clients require for the research. Another misconception is that respondents' time is worth less than clients are willing to pay for. Additionally, it's easy and inexpensive to conduct Qual research on a continence timeline is another misconception. And finally, recruiters take the easiest route, every time.





What is the one key mistake you see clients make when designing Qualitative studies?

CV: I think the biggest thing that jeopardizes the quality of a qualitative market research study is trying to cover too many key objectives/questions in one single study.

PB: For me, a key mistake involves not allocating time or money for desk research.

What do you think about the pros and cons of in person vs telephone (TDI) Qual work?

CV: A key benefit of telephone IDIs is the ability to reach a nationwide audience, particularly for the more difficult recruits. I also think it is easier for healthcare professionals to participate in phone research, as it takes less of their time versus having to travel to a central location. However, in-person interviews has the advantage of offering the face-to-face interaction.

PB: For in-person qual work, non-verbal cues can also be picked up along with the verbal responses, such as facial expressions and hand gestures. With device research, respondents can physically touch and hold the product in addition to being provided written concepts. A major advantage for telephone interviews is that start up can be faster and smoother. And, there are no room availability issues. Respondents have more time to be available for research, because there are more appointment time options.

What is the value of leveraging both Qual and Quant insights - mixed method research?

CV: It allows for a potentially more time-efficient approach to understanding both the magnitude of questions, while understanding the why's behind the numbers.

PB: Using mixed method research allows for Qual to inform Quant in identifying the proper Quant respondents/ responsibilities/ locations and to find the correct respondents. It also assists in question wording and focus project direction.

Do you recommend pre-testing Quant questionnaires before fielding? Why or Why not?

CV: Yes, it is necessary to ensure that the questions are clear and are interpreted the way we intend them. We need to be absolutely sure we are collecting the data that we think we are collecting. If a question is unclear to the respondents, the data we collect will be useless, but we may never know that.

PB: Pre-testing helps to catch errors in programming, and saves time on the back-end by retracing/correcting errors. It also provides clarification in question wording.

MEET THE EXPERTS:

Caroline Volpe



Caroline is a seasoned US-based market research consultant with expertise in designing and executing primary qualitative and quantitative market research globally to meet clients' strategic and tactical business needs.

While she has focused on working with clients in the pharmaceutical, biotech and medical device industries conducting research for pipeline and in-line products, she also has done research on behalf of over-the-counter healthcare products, vitamins and non-profit organizations.

Caroline has moderated thousands of individual interviews, triads and focus groups. While these interviews have primarily been in the US, she also has moderated interviews and focus groups in Canada and the UK. She is adept at interviewing a broad range of respondent types within the healthcare industry, including industry executives, sales representatives, key opinion leaders, clinical investigators, physicians, allied health professionals (e.g., nurses, nutritionists, dieticians), pharmacists, payers and patient/consumers/caregivers.

Patrice Barnes



Patrice has been with Naxion since 1986. She is responsible for supervision of all qualitative assignments performed by the department staff as well as directing other Naxion's staff with regard to qualitative aspects of ongoing projects. Her responsibilities include estimating and tracking costs of studies, overseeing the operation and performance of the department, communicating with clients and project management with regard to study progress, as well as "troubleshooting" when problems occur, in an effort to maintain the highest standards of professionalism in qualitative services. She is a specialist in designing screening forms to ensure the recruitment of appropriate respondents.

Patrice joined the Qualitative Operations staff in 1988 as the Assistant Manager, where she coordinated projects with project management, facilities and clients, as well as personally recruiting many medical professionals and business executives. Prior to joining the Qualitative Operations staff, Patrice was a Quantitative Operations Field Administrator, where she was responsible for the securing and training of in-house and outside field staff. Her responsibilities also included large and small-scale projects across a wide range of data collection methodologies, including CATI, mail surveys, mall surveys and in-person interviewing.

She received a BA in Psychology with a minor in Marketing from Purdue University.