



# Insights and Sound Bites

March/April 2008

*"The important thing is to not stop questioning."* – Albert Einstein

## Enabling Doctors to Be Creative

Because clinicians are trained to be analytical and 'fact based' in their thinking, they may be less likely to "open up" and expose their creative side. They've been trained to put their emotions on hold, be logical and think rationally.

However, strong brand relationships require an underlying, albeit potentially subconscious and emotional association between the physician and the "idea" that the brand communicates. Marketing research must uncover how physicians' needs and emotional values connect to features or functions of the brand to enable a relationship with the brand.

The challenge is that clinicians don't often think about how they "feel" about a brand. They want to believe (and want us to as well) that their decisions to use a specific product are 'fact based' and they will be careful to maintain that image in their answers, especially in focus groups where they are concerned about how they may be perceived by their peers. In essence, they don't want to be seen as having relationships with brands.

So how do we go below the surface, "dive deep" to discover the "why" they are unable or unwilling to articulate? We have found the following keys: Establish rapport with the physician, create a comfortable, relaxing environment, and be well-versed in the topic. This can go a long way toward revealing motivations. However, when the question "why?" leads to a rationalized response, there are many techniques to glean rich insights that may otherwise not surface.

These numerous techniques include analogies, collages, thought balloons, role play and storytelling. Here are just a few ideas to get the creative juices flowing.

## "How May I Assist You?!"

We are thrilled to have **Nicole Eckert** join our team as our office manager, project coordinator, and self-proclaimed Jack-of-all-trades! Nicole has previously put her boundless energy and advertising degree to

task starting, running and successfully selling two businesses.

Among her many talents, Nicole has designed a line of shoes, makes pottery and is an avid green thumb. We welcome Nicole, her husband Greg and her two boys to Cincinnati!



- **Living Room Set-up** – make a more "personal" setting
- **Archetypes** – have physicians select an archetype to represent the patient, the condition, the doctor and the medication – describe/tell a story
- **Debates** – give physicians an opportunity to divulge pros and cons without being "judged"
- **Picture association** – physicians choose abstract images to reflect how they feel about treating a condition, using a medication, etc.
- **What's happening** - use an illustration (e.g. physician handing a patient an Rx) – ask them to describe what is happening, what led up to this point, how each is feeling
- **Role play** – have physicians role play patient/physician; physician/sales rep; physician/physician interactions
- **Road map** – use a road map to illustrate the highway from the patient to the successful treatment – with all the possible exit ramps and alternative routes
- **Art Gallery** – have physicians envision walking through an art gallery and describe the piece of art titled "insert condition" – describe in detail

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