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MARKETING RESEARCH
Review

Survey of patients confirms hospital's excellent reputation

Health care research issue

1991 SourceBook Supplement

January, 1991

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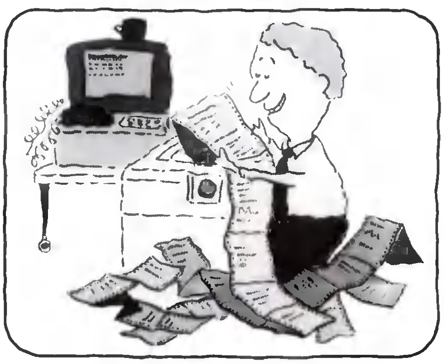

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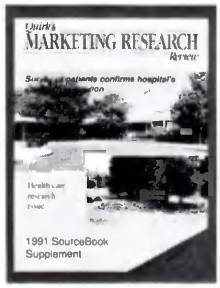
Cover
A patient satisfaction survey told Bellevue Hospital that its excellent reputation was well-deserved. Photos courtesy of Bellevue Hospital.



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In excellent condition

Patients tell a New York hospital that its service

by Joseph Rydholm/managing editor

Most health care providers probably wouldn't feel comfortable referring to their patients as "customers," but in many ways that's what they've become. Changes in the health care industry have forced providers to compete for business in a market whose consumers are making increasingly well-informed choices from the array of "products" available to them.

One outgrowth of this competition likely will be an increase in the number of hospitals and other health care organizations conducting research with their patients to gauge satisfaction levels and identify areas needing improvement.

An example is Bellevue Hospital, a privately-owned 40-bed facility in Schenectady, New York. The hospital, which sees about 2100 babies delivered each year, provides a variety of health care services for women, including obstetrics, gynecology, and outpatient clinical services. It draws its patients from 17 counties in and around the Tri-City area of Albany, Schenectady and Troy.

matches its strong reputation

Bellevue is nearing the end of a year-long ongoing patient satisfaction survey conducted by Fact Finders, Inc., an Albany, New York-based research company. Each quarter, 500 discharged patients are contacted by telephone two weeks after the end of their stay to take a three-minute survey on their impressions of the hospital's service.

Ellen Kerness, Bellevue's manager of marketing and public relations, says that the survey was commissioned despite the hospital's already strong reputation. "We'd always heard that the perception of Bellevue was that it was a wonderful place to go and that the care was excellent, from food services to nursing. But we wanted to see if what we were hearing through the grapevine was actually what was perceived by patients."

In each quarter of the survey the hospital has earned rave reviews from its patients in all service areas. For example, the nursing staff was rated extremely highly across the board.

Kerness says that the survey is an excellent tool that she would recommend to other hospitals, even a facility with a less solid reputation which might be hesitant to conduct a similar survey for fear of what it might tell them.

"It would be wonderful if they would do it, I think it would help them a lot. But whether they would be willing to do it is another question, because of the expenditure, and also because they might find out too much that's wrong. You might think you're doing OK and find out that you really aren't. We were very fortunate in that we found out that we were as good as we hoped we were."

For the Bellevue patient satisfaction study, an array of categorical (excellent/good/fair/poor, very satisfactory/somewhat satisfactory/not satisfactory at all) and interval scale measurements are used to quantify patients' impressions of and level of satisfaction with services such as nursing staff, physicians, visiting hours, housekeeping, quality of food, comfort of the room, and hospital rules and procedures.

For example, some questions on the amount of time spent waiting at the hospital include:

Was the waiting area very comfortable, somewhat comfortable, or not comfortable at all?

Would you say you waited in the waiting room for a short, moderate, or long period of time?

Were you given an explanation for the wait?

The section of the questionnaire on nursing services (developed in conjunction with the hospital's director of nurses) was customized for measurement of satisfaction with nursing services by service type and area (e.g., nursery, operating suite, labor and delivery, floor).

Some open-ended questions are included, asking patients, for example, if there was anything particularly negative or positive about their stay. And in the section on physicians, respondents who expressed dissatisfaction were asked to offer changes they might make to increase satisfaction.

The survey covered many service areas, but the interview length was kept short to avoid inconveniencing the respondents, says Sue Swartz, research associate, Fact Finders. "Our goal was to have an interview length not to exceed three to five minutes. The reason for that is, we were calling patients just after their discharge and we did not want to burden them. We wanted to get a quick yet comprehensive measurement of patients' opinions of the services received and the levels of overall satisfaction with the hospital experience."

The survey has enjoyed a very low refusal rate—of the nearly 2000 respon-

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BELLEVUE HOSPITAL

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Don't take away my samples

Study gathers physicians' reactions to pharmaceutical sales forces

by Barbara McAulay

Editor's note: Barbara McAulay is director, client service, Healthcare Division of Total Research Corporation, Princeton, New Jersey.

Recent consolidation of pharmaceutical firms via mergers and acquisitions has greatly increased the size of some sales forces. The merger of Bristol-Myers and Squibb created the largest U.S. sales force—3500 strong. American Home Products' acquisition of A.H. Robins helped boost it pharmaceutical sales force to more than 3000. Other large companies have reacted by massive hiring programs to stay competitive and to promote new products. Merck added 700 representatives in 1989 and now ranks third with a sales force of 2700. Ciba-Geigy has more than doubled its sales force since 1987. In total, the top 20 pharmaceutical firms (in sales force size) have almost 33,000 sales representatives in the field, an increase of 18% since 1987. (Information on sales force sizes from *Medical Advertising News*, September 15, 1990.)

With the increase in sales forces and the proliferation of co-marketing agreements, we at Total Research Corporation decided to talk to primary care physicians to see what their reaction is to these changes. If they are seeing more representatives, do they now spend less time per visit with each sales person? How widespread is co-promotion and how do primary care physicians feel about being detailed on the same product by sales representatives from more than one company?

Earlier this year, Total conducted a telephone survey among a national random sample of 360 primary care physicians to address key questions regarding pharmaceutical sales forces. In this article we review a few of the findings from this study:

• Are physicians seeing more pharmaceutical sales representatives this year? How much time do they spend with sales reps?

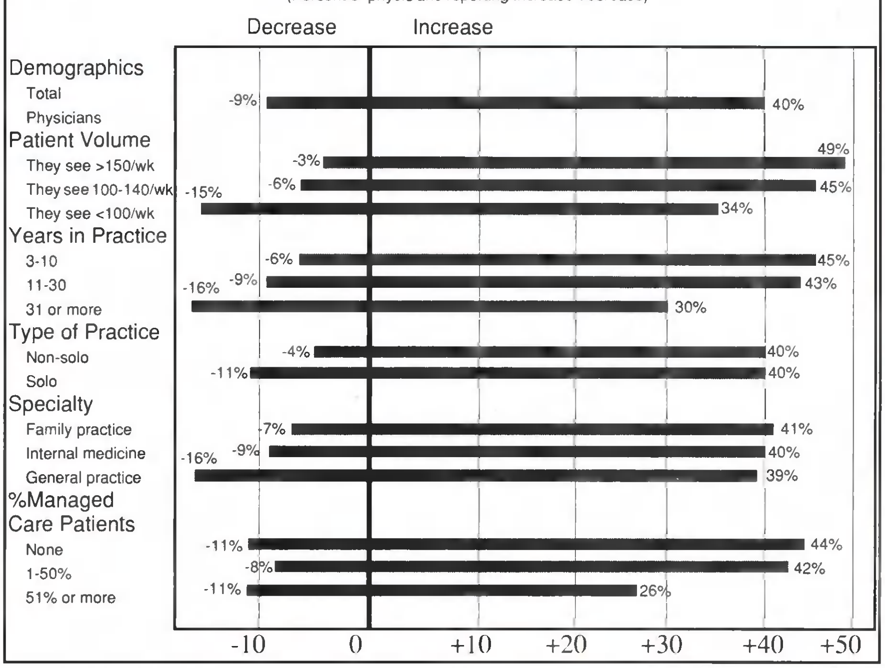
• How do physicians react to co-promotion?

• Which companies are calling on the same physicians?

• What services provided by pharmaceutical sales representatives do physi-

Fig. 1

Perceived Change in Sales Call Volume
(Percent of physicians reporting increase/decrease)



cians value most?

Four of ten physicians report an increase since last year in the number of calls from pharmaceutical sales representatives

The impact of larger sales forces is certainly being seen in the primary care physician's office. Forty percent of physicians perceive an increase in the past year in the number of pharmaceutical sales reps trying to see them, whereas less than 10% of physicians perceive a decrease.

Net increases are seen in all demographic segments (see Figure 1), and are particularly noticeable among physicians who see 100 or more patients per week, and among younger physicians in practice 3 to 10 years.

Smallest net increases are seen among older physicians in practice 31 or more years, general practitioners (highly correlated with older physicians), and those with more than half their practice comprised of managed care patients.

Obviously, pharmaceutical firms have been able to successfully target their sales calls to more productive physicians with long-term potential.

Competition for the physician's attention is intense

Asked which companies had called most often in the past three months, physicians cited more than thirty firms (those most frequently mentioned are shown in Figure 2). Not surprisingly, there is a strong correlation between actual sales force size and perceived frequency of calling. Of the top ten companies in sales force size, seven were among the top ten mentioned as most frequently calling. Widest coverage was attributed to Merck, Lilly, Bristol-Myers Squibb, SmithKline Beecham, Upjohn, Pfizer, Marion Merrell Dow, Johnson & Johnson, Glaxo, Parke-Davis and American Home Products.

The typical primary care physician sees 5.82 pharmaceutical representatives a week (up from 5.15 a year ago) and spends an average of 8 minutes per call with each representative—less than one hour per week. Considering the number of companies calling and the fact that each company usually details two or more products per visit, this is a lot of information for physicians to absorb in less than an hour a week.

Fig. 2

Companies Calling Most Often

	% Physicians Citing Firm	Actual Sales Force Rank
Merck	25%	3
Eli Lilly	17	7
Bristol-Myers Squibb	15	1
SmithKline Beecham	14	4
Upjohn	13	12
Pfizer	12	11
Marion Merrell Dow	11	10
Johnson & Johnson	11	6
Glaxo	10	5
Parke-Davis	10	13
American Home Products	10	2
Ciba-Geigy	9	8
Roche	8	15
ICI	8	14
Schering	6	16
Searle	6	23
Lederle	6	21
Abbott	5	9
Sandoz	5	17

Co-promotion: necessary medicine?

In order to reach more physicians and to call on productive physicians more frequently, the pharmaceutical industry has increasingly used the powerful strategy of co-promotion. One of the earliest and most successful examples of co-promotion is the joint effort by Glaxo and Roche Laboratories to promote Glaxo's anti-ulcer product, Zantac.

We asked physicians about their experience with co-promotion and found that seven of ten primary care physicians had been detailed in the past year on the same brand product by sales representatives from two different companies. The reaction of more than half of these physicians (53%) was "somewhat" to "very" unfavorable; 31% were "mixed" and 15% were "somewhat" to "very" favorable. The principal complaint is that co-promotion wastes their time with redundant information. On the other hand, some physicians appreciate the increased exposure, enjoy interacting with sales representatives and welcome the opportunity to get product samples. (See Fig. 3)

Fig. 3

Reaction to Co-Promotion of the Same Product By Two Companies

	Total	Reaction to Co-Promotion Is		
	Physicians	Favorable	Mixed	Unfavorable
	(243)	(36)	(76)	(131)
Neg. comments				
Waste of time	39%	6%	22%	58%
Redundant	32	11	32	38
Oversold	15	3	16	18
Prefer one sales person (not two)	8	3	7	10
Rather hear about new products	6	-	12	5
Confusing	5	-	12	3
Increases drug cost	2	3	3	2
Positive comments				
Reinforces info/ reminder	9%	53%	1%	1%
Product samples	7	22	8	2
Different viewpoint	4	14	5	-
Don't mind/it's OK	11%	14%	25%	6%

Multiple mentions

Locking horns in the doctor's office

Sales management is keenly interested in the day-to-day competitive picture in the physician's office. To provide competitive intelligence from our study, we performed a cluster analysis to determine which companies tend to call on the same

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How to think about your tables

by Tony Babinec

Tony Babinec is a market manager at SPSS Inc., a Chicago-based company that writes and markets software for market research and analysis.

For most of us, the analyses we do produce results in tabular form. It is useful to be able to look at these tables in a number of ways. In this article, we present several useful ways of doing so.

Fig. 1

Crosstabulation: PENALTY by GUN — death penalty by gun registration

GUN→ PENALTY	Count Col Pct	favor 1	oppose 2	Row Total
favor	1	784 76.9	311 82.5	1095 78.4
oppose	2	236 23.1	66 17.5	302 21.6
	Column Total	1020 73.0	377 27.0	1397 100.0

Example 1

Our first example looks at the contingency table relating attitude towards the death penalty to attitude towards gun registration. The table is shown in Figure 1.

The table is based upon the 1982 General Social Survey, and can be found in Agresti's "Categorical Data Analysis" (published by John Wiley and Sons, 1990). In our analysis, we wish to treat attitude towards the death penalty as the dependent variable, and attitude towards gun registration as the explanatory variable. The categories "favor the death penalty" and "oppose the death penalty" define the rows of the table. For this reason, we present not only the cell counts but also the column percents, which sum to 100 in each column. That is, we percentage down and compare across.

Such a comparison reveals a small negative association between the two variables. That is, in the first row, the upper right-hand cell has a larger percentage than the upper left-hand cell, while in the second row, the lower left-hand cell has a larger percentage than the lower right-hand cell. Focusing on the second row of the table, the PERCENTAGE DIFFERENCE is

$$17.5 - 23.1$$

which equals -5.6%. This leads to a straightforward description of the effect of the explanatory variable (attitude toward gun registration) on the dependent variable (attitude toward the death penalty): those who favor gun registration are an additional 5.6% more likely to oppose the death penalty than those who oppose gun registration. Note that in a two-by-two table, if we express the percentage difference as a proportion (-0.056), we have a special case of the measure of association known as SOMERS' Dyx. If the row and column variables are not associated, the column percents in all columns would be identical, giving rise to a percentage difference of 0.

Another way of expressing the association in Figure 1 is by means of ODDS. Looking at column 1 of the table, if the respondent favors gun registration, the odds of favoring to opposing the death penalty are 784 to 236 or 3.322 to 1, while if the respondent opposes gun registration, the odds of favoring to opposing the death penalty are 311 to 66 or 4.712 to 1. Meanwhile, the odds on the margin of the table are 1095 to 302 or 3.626 to 1. If the row and column variables were not associated, the odds in each column would equal the odds on the margin. As it is, there is evidence of association between attitude toward gun registration and attitude toward capital punishment, for the odds appear to vary across columns.

Comparing the odds gives rise to an ODDS RATIO. That is comparing 784/236 to 311/66 gives rise to a ratio of 0.705. Those who favor gun registration are 0.7 times as likely as those who oppose gun registration to favor the death penalty.

ate by small amounts around the marginal value of 36.3%. In the third row, the percentages fluctuate by small amounts around the marginal value of 21.8%. In the fourth row, except for a slight reversal in the first two columns, the percentages increase from 16.3% to 32.7%, for a difference of 16.4% in magnitude. It appears that whatever "action" there is in the table resides in the first and last rows, and the difference between either of these rows and the two middle rows. On the other hand, there is little difference across rows two and three. The general trend in the percentages in the table is for larger ones in the upper left and the lower right, suggesting a positive association between mental health status and socioeconomic status.

Now, consider that the four-by-six table we've been examin-

Fig. 2			Parental SES			Total	
	a	b	c	d	e	f	
mental health							
well	64	57	57	72	36	21	307
column	24.4%	23.3%	19.9%	18.8%	13.6%	9.7%	18.5%
mild	94	94	105	141	97	71	602
column	35.9%	38.4%	36.6%	36.7%	36.6%	32.7%	36.3%
moderate	58	54	65	77	54	54	362
column	22.1%	22.0%	22.6%	20.1%	20.4%	24.9%	21.8%
impaired	46	40	60	94	78	71	389
column	17.6%	16.3%	20.9%	24.5%	29.4%	32.7%	23.4%

In table larger than two-by-two, it is useful to look not only at odds ratios but also at LOG-ODDS RATIOS. The reason for working in logarithmic units is this: In the odds-ratio metric, an odds ratio of 1 indicates absence of an effect in the row and column categories being compared. An odds of 1 to 3 (0.333) and an odds of 3 to 1 (3) are effects of equal magnitude but opposite direction. However, 0.333 is not as far from 1 as 3 is from 1. On the other hand, expressing everything in logarithmic units produces a nicer metric. The logarithm of 1 is 0, the (natural) logarithm of 3 is 1.099, while the logarithm of 0.333 is -1.099. That is, in the logarithmic metric, odds of 1 to 3 and 3 to 1 appear equally far from the zero point. The use of these ratios is illustrated in the next example.

Example 2

Our second example looks at the four-by-six table relating the mental health status to the socioeconomic status of 1660 respondents.

The table is originally attributed to a 1962 study by Srole, and is often found in the categorical data analysis literature. In our analysis, we will treat mental health status as the dependent variable and socioeconomic status as the explanatory variable. As in the previous table, we present column percentages; again, percentage down and compare across.

The table shows an interesting pattern. In the first row, the percentages decline from 24.4% to 9.7%, for a difference of 14.7% in magnitude. In the second row, the percentages fluctuing consists of a bunch of adjacent two-by-two subtables. For example, "well" and "mild" by "a" and "b" is the following table:

64	57
94	94

While "well" and "mild" by "b" and "c" is

57	57
94	105

And so on. There are a total of 15 of these subtables. The association in the four-by-six table can be summarized in the following 15 odds ratios and their averages:

					avgs.
1.123	1.117	1.063	1.376	1.255	1.187
0.931	1.078	0.882	1.019	1.366	1.055
0.934	1.246	1.323	1.183	0.910	1.119

The 15 odds ratios fluctuate somewhat, but note that in rows one and three they are on average somewhat above 1, while in row two (the comparison of rows two and three of the original four-by-six table) the odds ratios are on average nearer to one.

Examining the log-odds ratios reveals the same pattern, this time centered around 0:

					avgs.
0.116	0.111	0.061	0.319	0.227	0.167
-0.071	0.075	-0.125	0.019	0.312	0.042
-0.068	0.220	0.280	0.168	-0.094	0.101

While we do not detail how to do it here, one can use available software such as SPSS LOGLINEAR or Clifford Clogg's ANOAS program to fit models to the original four-by-six table which take into account the pattern of the odds ratios. For example, one could fit a simple model which assumes that the association in all of the two-by-two subtables is uniform; or that the association between rows one and two across adjacent columns is of a certain degree, while being different from the association between rows two and three across different columns, which is different yet again from the association between row three and row four across columns.

Conclusion

Using two example tables, we have shown how the use of percentages, the percentage difference, odds, odds ratios, and the log-odds ratios can lead to understanding and illumination of the pattern of association in two-way tables. In truth, one should be able to move with ease among these different interpretations for the same table. Doing so will lead to better understanding and presentations to clients. ❑

Data Use Contributions...

...are welcome! If you are interested in writing a Data Use column, please contact Joseph Rydholm, managing editor, Quirk's Marketing Research Review, P.O. Box 23536, Minneapolis, MN 55423. Phone 612-861-8051.

Strategic marketing and marketing research

by G.E. Cressman

Editor's note: G.E. Cressman is program manager, Corporate Plans, E.I. duPont de Nemours.

Global excellence. Competitive advantage. Proactive leadership. We've all heard the popular challenges, and we'd all like to achieve them. But how?

The need for strategic management has never been greater. And the need to gain a view of both the market and competitive arenas has never been more crucial to strategic management.

This article will develop the connection between strategic management and market research. The purpose of this development is to encourage better understanding of both managerial and researcher responsibilities for improved strategic management.

Strategic management

Strategic management is the process of making present-day decisions to achieve optimal future competitive position. This implies:

• making decisions in an arena of uncertainty,

• assuming risk, because decisions have been made under uncertainty, and their outcome is unknown,

• investing resources against opportunities in the expectation of future payoffs.

Making ehoices

The process of developing strategic management is at its heart the process of making choices. Some issues can be chosen within the scope of the business, while many more are excluded. The management team can make choices in five arenas:

• Markets—which markets, or collection of ultimate consumers, the business chooses to address. These ultimate consumers have identifiable wants and needs, and spend money to satisfy these needs and wants.

• Industries—which industries, or value adding chains, the business wishes to participate in. Each industry creates a specific solution to ultimate consumer needs and wants. In making these choices, the business management team is addressing the question: "Where shall we compete?" This is an issue of attractiveness of opportunity.

• Customers—which specific customers the business chooses to target.

• Offerings—what offerings the business chooses to take to the target custom-

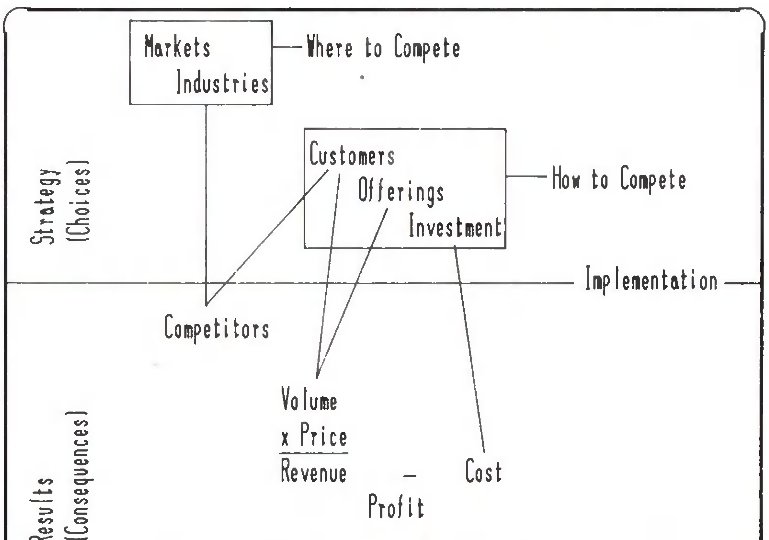


Figure 1 - The Strategy - Results Model

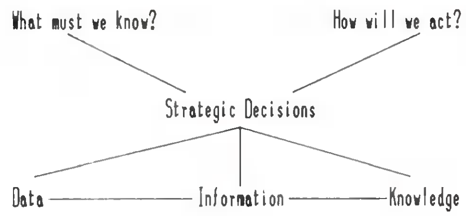


Figure 2 - Decisions and Information

ers.

• Investment—how will the business deploy resources to create offerings for target customers.

In making these choices, the business team is addressing the question: "How shall we position the business to compete for the attractive opportunities?"

As the business team implements its choices, a series of consequences occur. These consequences are:

• Competitors occur as a result of the market, industry, and customer choice.

• Revenue is the result of the customer and offering choices.

• Cost is the result of the investment choice.

With revenue and cost set, profit results. Figure 1 models the strategy result interaction.

Strategic management involves a proactive search for the best mix of these five components. The major stumbling block, though, is that we can never know with certainty whether we've reached the best mix. The market and industry choice is inherently risky because we are never certain we understand market and industry attractiveness. The target customers and offering choices are risky because our offering is frequently our "best guess" of what will satisfy customer needs. Because our offering is a best guess, our investment—or resource deployment—may not be the best "value creating" plan.

Operating the business

With the choices model in mind, the management team should ask: "What must we know to run our business?" And then, knowing what we must know, "What will we do?" Asking these two questions should result in the management team making a series of strategic decisions. To make these decisions, a blend of data, information and knowledge is required, as shown in Figure 2.

continued on p. 34

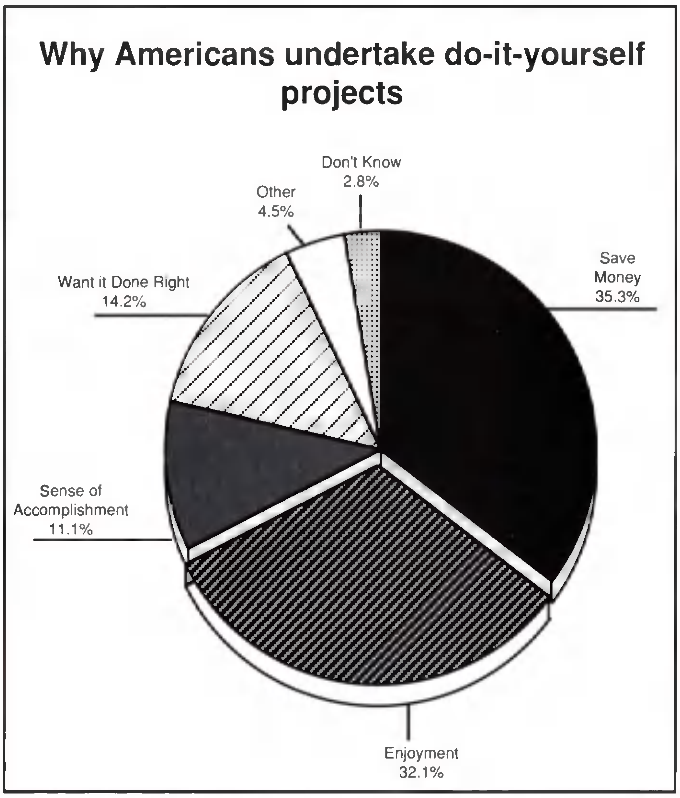
They'd rather do it themselves

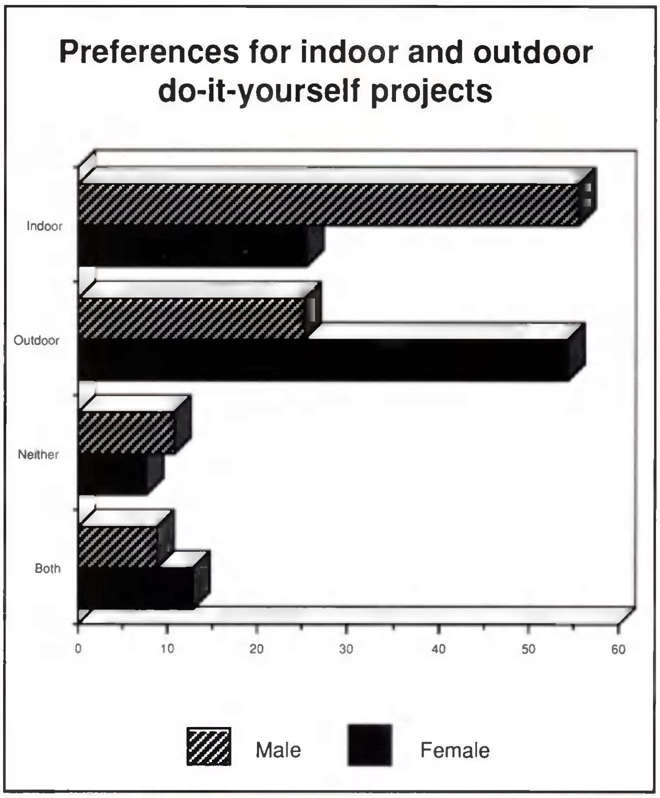
A study by Maritz Marketing Research, Inc. shows that 91% of Americans take on do-it-yourself (DIY) projects every year. Women are as likely to tackle a project as men. According to the survey, 21% of people spend more than $900 a year on do-it-yourself projects. Fourteen percent lay out $301-900, with 33% spending up to $300.

"Based on their expenditures, there seem to be two distinct groups of do-it-yourselfers," says Beth Nieman, research manager at Maritz. "On one hand, is Mr./Ms. Tinker, who takes on a few smaller jobs requiring little or no knowledge. On the other, is Mr./Ms. Fix It, who may handle multiple projects during the year and is undaunted by skill level required." The survey shows that the latter category is dominated by men, but 13% of women are included as well.

There are many reasons why Americans love DIY projects. Not surprisingly, saving money tops the list, with 35% of the vote. However, pure enjoyment can't be underrated—it was mentioned by 32% of do-it-yourselfers. In fact, women rate enjoyment higher than saving money as a motivating factor.

A third important motivator is wanting the job done right. Seventeen percent of men and 11% of women either don't trust





repairmen, or believe they can do the job better themselves. Last on the list is a sense of accomplishment, mentioned by 10% of men and 13% of women.

For the 9% of people who don't try DIY projects, the main reason is a lack of time (31%). Seventeen percent feel they are too old to undertake projects, and 14% don't own their own property. Other reasons include health (12%) and a lack of skill or knowledge (6%).

The location and type of project you prefer probably has a lot to do with your sex, according to results of the survey. For example, 54% of men prefer outdoor projects, such as landscaping or house painting. Conversely, 55% of women prefer indoor projects, particularly those involving the kitchen.

When it comes to specific projects, men and women still can't seem to agree. Fifty-five percent of women undertaking outdoor projects are most likely to choose gardening, compared to 30% of men. Forty percent of men prefer landscaping. Kitchen are favorite indoor projects for 45% of women, but the clear preference of men is the family room (28%).

Despite the fact that DIY projects are popular, the survey shows a slow rate of growth for the industry. Thirty-two percent of people are doing more projects now than a year ago, but they're mostly offset by the 26% doing fewer projects. Thirty-nine percent of people are doing the same number of projects as they did a year ago.

Hospital stay for bypasses down 17% in the 80s

A new set of data confirms that cardiac bypass surgery, one of the most common major operations performed, has seen a strong downward trend in length of hospital stay (LOS) over the last 10 years, reflecting the general pattern of U.S. hospital care.

The 1989 LOS by Diagnosis and Operation, just released by the Commission on Professional and Hospital Activities (CPHA) shows that the national average stay for cardiac bypass surgeries has declined by 17% from 15.3 days in 1980 to 12.7 days in 1989. According to a CPHA spokesperson, the decline in cardiac bypass LOS is greatest in the North Central region of the country; data from hospitals there show a 22% decline throughout the decade.

This year's analysis shows the overall U.S. length of stay—for all diagnoses and operations—to be down a tenth of a percentage point from the 1988 figure; from 5.7 days to 5.6. The national average was 6.7 days in 1980.

The reasons for the decline in cardiac bypass LOS are the same, in general, as the factors driving the overall decline, says the spokesperson: improvements in medical technique and technology, coupled with the impact of prospective payment for Medicare and its focus on efficient utilization of resources.

The CPHA LOS data are available from Ann Arbor-based Healthcare Knowledge Resources, the organization responsible for producing and delivering products and services based on CPHA data.

NAMES OF NOTE

Christin H. Templeton has been appointed project coordinator with *FacFind Inc.*, a Charlotte, NC-based marketing research corporation. In addition, **Kristi L. Haynes** has been appointed marketing assistant.

Templeton Haynes

Carolyn H. Garfein has been promoted to vice president, regional manager, for the Automotive Research Group of *Maritz Marketing Research Inc.* She will be responsible for operations at the firm's Gardena, CA office. In addition, **William H. Lewellen**, president of Maritz, has been named a senior corporate vice president, and **Michael D. Phillips** has been named a corporate vice president.

Waring & LaRosa, New York, has named **Grace Peng** market research project director.

Keith Satter has been named vice president, Consumer Division for the Northeast region of *Claritas Corp.*

David Chapman has been named survey sampling director for *National Analysts*, Philadelphia.

Griggs-Anderson Research, Portland, OR, has named **Louise Martin** training program manager.

Custom Research Inc. announces two changes at its East Coast office in Ridgewood, NJ: **Subhra Gbosh** has joined the office as research manager, and **Sherry Burford** has become account manager.

Jill E. Katz has been named market research analyst for *Malarkey-Taylor Ascts.*, Washington, DC.

Miami-based *Market Scope Inc.* has named **Jackeline P. Fernandez** research vice president.

Winona MRB Inc., Minneapolis, has promoted **Diane Frederick** to vice president.

READER SERVICE CARD 1/91

FREE INFORMATION ON PRODUCTS AND SERVICES IN THIS ISSUE.

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MARKETING RESEARCH
Review

P.O. Box 23536
Minneapolis, Minnesota 55423

Arnold Sheer, formerly president of Sheer Communications Inc. (SCI), has formed **Sheer Marketing,** a full service marketing company. He is no longer associated with SCI. For more information contact: Sheer Marketing, Div. of Geometric Telemarketing Inc., 315 Walt Whitman Rd., Ste. 212, Huntington Station, NY 11746. Telephone 516-673-0686.

◆

Product and Consumer Evalnations (PACE), and its subsidiaries PVC and PCM have relocated. Their new address is 31700 Middlebelt, Farmington Hills, MI 48334.

◆

The Answer Group, Inc. has moved to 4665 Cornell Rd, Ste. 150, Cincinnati, OH 45241. Telephone 513-489-9000. Fax 513-489-9130.

◆

TheWrightGroup, a human resource organization specializing in placement of marketing research and direct marketing professionals, has moved to new quarters at: 14936 Oaks North Dr., Dallas, TX 75240. Telephone and FAX numbers remain the same.

Michelson & Wender, Inc. has moved to 3805 West Lane Dr., Smyrna, GA 30080.

Results Thru Research, Inc. has moved to: 910 Sylvan Ave., Englewood Cliffs, NJ 07632. Telephone 201-816-0700. FAX 201-816-0795.

Study profiles homecare market for infusiou pumps

The "Audit of Homecare Markets for Infusion Pumps—1990," a comprehensive study of the rapidly growing and competitive U.S. homecare market for infusion pumps, will be released this month by Medical Products Marketing Services (MPMS), Glenview, Illinois.

The national annual audit is a randomly-selected sample of independent home infusion companies, national and regional homecare chains, and durable medical equipment dealers, including pharmacies and medical supply companies.

The audit addresses several market issues and provides insight into the demand, application, and mode of acquisition of the broad range of IV pumps and controllers available for homecare use. Information available in the study shows, by manufacturer and model: the number of devices estimated to be in use in late 1990 and manufacturer/model share of devices in use; medical applications of each model; mode of acquisition (purchase, lease, rental); location of use of pumps distributed by DME's and homecare agencies.

Results of the Audit are available in two formats, a full-service report and a basic service report. For additional information, contact MPMS, 3622 West Lake Ave., Ste. 415, Glenview, IL 60025. Telephone 708-998-1300.

Free report summarizes effects of lifestyle changes

A new report from Mediamark Research introduces a new marketing concept. "Lifestage Marketing" identifies the impact of demographic and lifestyle changes of the American population on consumer priorities and expenditures.

The report, published in booklet form, shows how consumer needs and priorities change as adults travel through the crossroads of their lives. Key factors of widespread change are identified as we approach the 21st century—later marriages, divorce, smaller families, single parent households. These are just a few of the diverse life styles that marketers should be aware of. As stated in "Lifestage Marketing:"

"In the 1990's there is a rich variety of

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Applications and Benefits of Research in Developing Marketing Strategy	Washington, DC San Francisco	March 12,13 May 22,23
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Effective Techniques for Analyzing and Interpreting Marketing Research Data	San Francisco Washington, DC	Jan. 29 - 31 April 2 - 4
Questionnaire Design and Effective Data Collection Techniques	Washington, DC San Diego	March 20, 21 June 11,12

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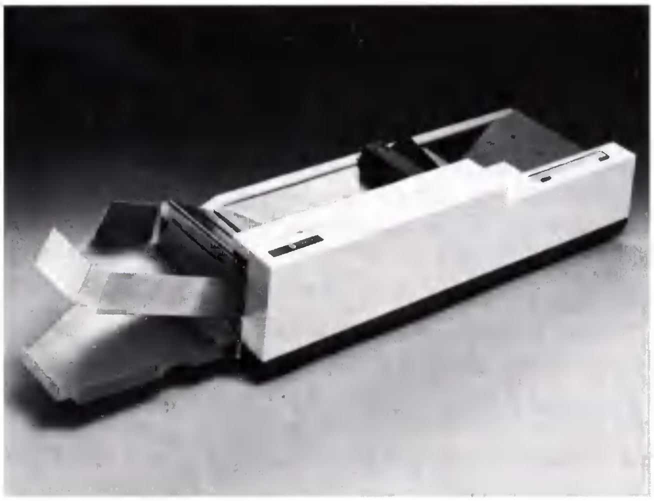
lifestyles and lifestages. For manufacturers and marketers of products and services, a knowledge of lifestages can aid in identifying the changing needs of various segments of the population, and in fulfilling those needs inventively and profitably."

The report is available at no cost by calling Evelyn Carter at 212-599-0444.

New scanner designed for low volume input

National Computer Systems (NCS) has added the OpScan 7 scanner to its family of scanning systems. The OpScan is a desktop mark reading (OMR) scanner designed for low volume, decentralized data input. Documents, such as surveys, can be automatically fed through the scanner at a rate of up to 3,000 sheets per hour. The scanner's select stacker feature separates scanned documents without requiring operator attention or interrupting data entry. The 100 sheet select stacker hold documents that are incomplete or need operator attention.



A self-contained transport printer produces messages on documents as they are scanned with no reduction of the throughput rate. Messages may be based on pre-determined data or data read from that form, such as social security numbers, edit or batch codes, or test results. Optional features include a bar code reader and an ink read head to scan both pen and pencil marks.

The OpScan 7 scanner is compatible with computers that support a standard RS232 interface. With ScanTools utility software from NCS, the OpScan 7 can be used with commonly used microcomputer survey and statistical software packages such as dBase, Lotus 1-2-3, and SPSS.

For more information, contact NCS, 4401 West 76th St., P.O. Box 9365, Minneapolis, MN 55440. Phone 612-830-7600.

New market analysis tool from Claritas

A new desktop market analysis, mapping, and data integration tool created for full-service ad agencies and advertisers has been developed by Claritas Corporation.

Built into Compass, the PC-driven database marketing system introduced in 1987, Compass/Agency is designed to aid the development of profitable marketing, media, and new business strategies. The system also enables marketers to identify high-potential neighborhoods where new opportunities exist, as well as profile the lifestyles and demographics of households in those territories.

Using a variety of reports, profiles, and full-color maps, Compass/Agency answers the four basic strategic questions that marketers ask:

Who are the targets?

What are they like?

Where can I find them? and

How can I reach them?

Compass/Agency will also provide a direct link to Arbitron's PC products as a result of Claritas relationship with Arbitron. Clients will be able to analyze Arbitron's TV and radio audience measurement data by PRIZM, Claritas' lifestyle segmentation system.

Compass contains demographic data for up to 1,000 census variables and over 1,000 profiles of product usage. Add-on databases include information about over 8 million business establishments and sales potential data for more than 100 retail categories. In addition, Compass/Agency links to numerous other marketing databases such as ADVO, Birch, MRI, Metromail, Nielsen, Polk, Scarborough, Simmons, and TRW.

A demo diskette and more information are available. Call 703-683-8300.

Bellevue

continued from p. 7

dents so far, fewer than 10 have refused to participate. Swartz says that other healthcare-related telephone market research studies done by Fact Finders have also had relatively low refusal rates. "People are amenable to participate in research surveys with topics that are of interest to them, and health care clearly is of interest to most people, either for financial or personal reasons."

The telephone survey, says Ellen Kerness, "gives patients the opportunity, in an anonymous way, to say what they want to say. The wording of the questions and the shortness of the questionnaire makes it very easy for them to handle."

Patient's privacy

A primary concern during the study has been to preserve each patient's privacy. Patients are not asked about their health condition or the reason they were hospitalized. "Though the questions don't concern the patient's actual health problem, they do concern the services consumed, from which you could infer details about their health history. So we have been exceedingly careful about protecting the anonymity of the patient," Swartz says.

Respondents are chosen randomly from data tapes supplied by the hospital containing the phone numbers—but not the names—of discharged patients.

"The hospital does not know the identities of the individual patients who we have interviewed. We are sent the data in coded form, without the identities of the patients or the physicians. That is something we insisted on," Swartz says.

Interviewers tell each respondent that they are calling on behalf of Bellevue Hospital, that the research concerns patients' opinions about their hospital experiences, that the patient's phone number has been randomly selected, and that no names or identifying information is included.

"In the introduction we give them an adequate amount of information without adding too much length to the interview, so that they know who we are, what our purpose is, why they are being called, and what we will be asking of them."

The quarterly survey reports given to the hospital contain no physician, nurse, or other staff names, with the exception of the verbatim responses. The head of each department at Bellevue receives a copy of the results for use in monitoring department operation and to recognize the positive contributions of individual employees.

"At the request of the hospital, when a staff member is mentioned in a positive light, that person is named (in the report). The hospital can then go back to that person. So for management purposes, when there are positive remarks, we pass them along in the report," Swartz says.

Written evaluations

Kerness says that Bellevue will also use the information from the patient satisfaction study to make changes to the written questionnaire it distributes to patients during their stay at the hospital. "The telephone study has helped us get patients' opinions of some of the services

that are not addressed at this point on the written evaluation. (The written evaluation) could be more effective than it is, but we don't want to drop it at this point, so we're trying to refine it a little. We want to get continual feedback to see how we're doing in 1991."

Prior to the telephone survey, the hospital relied on the written evaluations for feedback, but Swartz says that information gathered this way has limited management utility as it can be difficult to compile, analyze, and format.

"Most hospitals, in my experience, are not able to organize and act on the feedback that they get from self-administered questionnaires, so that they often end up with a grand tally of anecdotes and nothing actionable. But our reports give them, in tabular form, the proportions of satisfied/very satisfied, etc. and the verbatims, so that with the quantitative framework, they're able to put those anecdotes into perspective."

Responses from written evaluations also present another problem: they aren't projectable because of the factors that affect who does—and who doesn't—fill them out.

"Self-administered questionnaires appear to provide a feedback mechanism. However, if you understand the motivators that determine which patients fill them out, you realize that you are getting information, but it is not representative, objective information.

"When people have positive experiences as customers, they feel affiliated with the provider and are therefore more inclined to do something that would be helpful to the provider," Swartz says.

By contrast, someone who has had an unsatisfactory experience may decide not to complete a questionnaire because he or she feels it would be helping the hospital.

Hospitals reluctant

Swartz says that many hospitals are reluctant to spend the money on outside research, choosing to rely on in-house questionnaires to monitor patients' opinions. "Telephone interviewing can be an expensive methodology, and hospitals aren't interested in taking on any additional expense."

Still, she says, this type of study is becoming a very active part of the research field. "We view it as a category of customer satisfaction research, because patients clearly are customers of hospitals. In the past, health care consumption was primarily generated by doctors. They made the decisions and directed where the health services would be consumed. But consumers are now asking the doctors more questions and taking more of the responsibility for their own health. They are making their own decisions regarding where to go and how they shop for health care services." ❑

Physicians' reactions

continued from p. 9

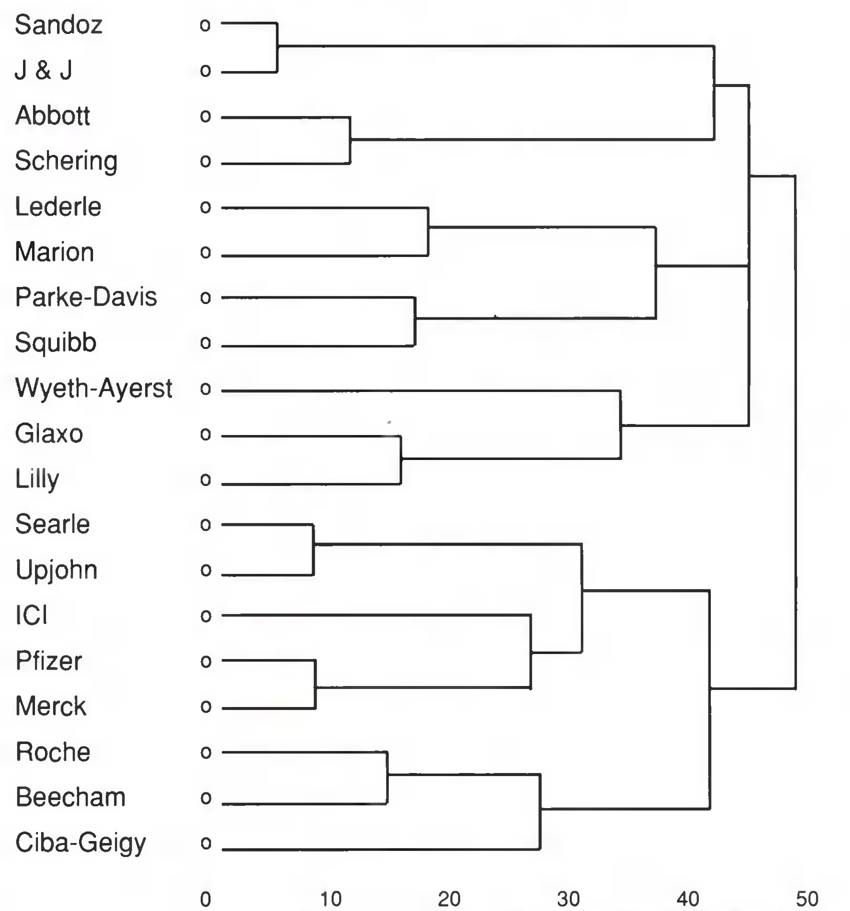
physicians. Figure 4 shows various levels of physician constituencies shared by pharmaceutical companies.

The "earlier" (further to the left) two companies are connected, the more they tend to be calling on the same physicians. The connections progress in a step-wise fashion until all companies are eventually linked. Of key interest are the companies that link early on. For example, Sandoz and the J & J companies are most likely of all the companies analyzed to be calling on the same physicians. At the time of this study, Sandoz was detailing Tavist-D and J & J's Janssen was detailing Hismanal; they are likely to be going head-to-head on these antihistamines with the same physicians. Searle and Upjohn also tend to call on the same physicians, as do Pfizer and Merck.

By combining knowledge of what products are currently being detailed with the knowledge of shared constituencies, sales management has a valuable picture of the competitive situation at the point in time when the data were gathered.

Fig. 4

Physicians Constituencies Shared by Pharmaceutical Firms



Please don't take away my samples

Six key services provided by sales representatives were evaluated by physicians in a pair-wise trade off fashion. This method of evaluation forces discrimination and yields much more telling and reliable results than rating the services one at a time.

Physicians were asked, "Suppose a sales representative's functions were limited to one area. Which of the following would you prefer the sales to provide? Product information? Or product samples?" Other choices included: "arranging seminars/professional meetings," "product information," "providing educational materials for patients," "gifts for use in the office," and "clinical trial recruitment." All possible pairs of the services were evaluated.

It is not surprising that samples are highly valued. What is surprising is the strength of preference. Samples are more than twice as important to physicians as the second-ranking service "arranging seminars/professional meetings." Providing product information ranks third, tied with patient educational materials; another surprise.

In a climate of cost-containment, pressure to devote more dollars to R&D to develop new entries, and scrutiny of pharmaceutical sales promotion by Kennedy's Senate Labor & Human Resources Committee, some pundits are predicting that sales force sizes will decrease in the 90s. The issue may not be so much the size of the sales forces but how best to utilize this very costly method of promotion. In this study, physicians' priorities were clear: Whatever you do, don't take away my samples! ❑

A guide to international market research

by Ian MacFarlane

Editor's note: Ian MacFarlane is president of MacFarlane & Company and chairman of Fry Consultants Inc. These marketing and management consulting firms are headquartered in Atlanta.

When we are asked by a client to help answer international marketing research questions, we try very hard not to reinvent the wheel. One of the first things we do is check established sources of information on countries, products, markets, competitors, and whatever else is needed by the client.

This typically involves a series of at least seven steps to get to the point where we are ready to start the primary international marketing research project. The seven steps are:

1. Checking reference information on countries, products, markets, and competitors.
2. Conducting secondary research online and in the library.
3. Review and selection of multi-client studies that answer some of the questions at relatively low cost.
4. Selection of a foreign firm or firms to assist in the study or in some cases, perform most of the work.
5. Solicit proposals for foreign field work and analysis, particularly where foreign languages are involved.
6. Finalize the client proposal, including business reference information, secondary research, multi-client studies, subcontracted field work and analysis, and all other cost elements.
7. Begin the primary research study, working closely with the clients and arranging for frequent interim meetings to ensure that there are no surprises in the report at the end of the project.

Each of the seven steps is now described in more detail.

I. Reference Information on Countries, Prodncts, Markets, and Competitors

A. Multi-client studies

One of the first things we do is check to see if any multi-client studies have been done on the subject of interest. It may be possible to purchase a multi-client study at much more reasonable cost than conducting a proprietary marketing research project. The three places we look are:

1. MARKETSEARCH, The International Directory of Published Market Research; this directory provides over 18,000 multi-client study references throughout the world; it is published annually and is subdivided by subject based on British SIC classifications.
2. FINDEX, The Directory of Market Research Reports, Studies and Surveys; this directory includes company and industry research from Wall Street as well as a wide variety of other multi-client studies published by research firms and other organizations throughout the world; however, the coverage is stronger domestically than internationally.
3. Marketing Surveys Index (MSI) includes virtually all international multi-client studies; this directory tends to be more current because it is updated ten times per year by supplements sent by airmail from London; the subject index is alphabetical and complete.

B. General reference

We also check general reference information regarding countries, products, markets, and competitors. Typical sources include:

1. The European and Far East Regional Directories published by The Market Research Society in London.
2. Croner's A-Z of Business Information Sources; this directory includes categories for company, product, and market information divided for consumer and industrial/commercial markets.
3. Consumer Japan; this publication covers major consumer markets in Japan with specific information on markets, products, and key commercial organizations.
4. Consumer Europe; this resource covers over 500 products bought by consumers in 17 West European countries; it provides market data and trends for six years through 1988 plus forecasts through 1992 and has a directory of major companies.
5. Croner's Europe; this publication provides current updates on all EEC proceedings of possible interest to international marketers.
6. Country directories like Ireland 1990 and publications of industrial development organizations like the Scottish Development Agency. Similar publications are available from JETRO for Japan and other major foreign industrial development agencies.

C. Sources of Marketing Information

In this category, we check appropriate directories such as the European Directory of Consumer Goods Manufacturers, the European Directory of Retailers and Wholesalers, the European Consumer Electronic Directory, the European Electrical Appliances Directory, the European Drinks Marketing Directory, and a wide variety of other similar publications that cover foods, household chemicals, cosmetics, toiletries, and other product categories; we also check such references as the European Directory of Trade and Business Journals, the European Directory of Trade and Business Associations, and other similar references.

D. Marketing Statistics

The main sources for international marketing statistics are:

1. International Marketing Data and Statistics 1990.
2. European Marketing Data and Statistics 1990.
3. The International Directory of Marketing Information Sources.
4. The European Directory of Non-Official Statistical Sources.
5. The European Directory of Marketing Information Sources; this resource lists over 2,500 sources of market and business information throughout Europe.
6. The Worldwide Government Directory; this directory provides information on 175 governments and 100 international government agencies throughout the world, many of which represent sources of marketing and business information.
7. Other international sources such as the United Nations, the Food and Agriculture Organization (FAO), UNIDO, the World Bank, and other sources where the right kind of digging can pay off with useful information. The same is true of U.S. government agencies and departments, which generally can be accessed through regional U.S. Department of Commerce libraries, International Trade Administration offices for import/export statistics, and other similar organizations.

E. Business Risk

In checking international business risk, we rely on BERI, Business Environment Risk Intelligence:

1. BERI's Risk Service provides country risk forecasts for 50 countries throughout the would and is updated three times per year.
2. BERI's Forelend provides international lenders with risk information on 50 countries with three updates per year.
3. BERI's Force Reports are detailed annual reports on 20 countries, including a Special Report on Eastern Europe and another on Europe 1992.
4. BERI also offers special services for international risk research, foreign exchange guidance, Quick Response advice, and specialized international risk consultancy.

F. Information on Competitors

For information on domestic competitors, we check such sources as local newspapers, The Corporate Directory, the Dun & Bradstreet Million Dollar Directory, Standard & Poor's Register, the international Dun & Bradstreet Million Dollar Directory, Value Line Selection and Opinion, The National Directory, and reports filed with the SEC. For international references, we use the Kompass Directories, The International Corporate 1000, The City Directory (the London financial community), The Canadian Trade Index, Europe's 15,000 Largest Companies, The London Business Pages, and other resources, including:

1. Business-Line Management, Marketing and Administration; this reference lists over 200 on-line services worldwide for product and market research and customer analysis.

2. Business-Line Finance; this resource includes over 300 financial databases throughout the world.

3. Business-Line Company Information; this reference lists over 300 databases for company financial information, key personnel, products and services, subsidiaries, and other database categories.

Obviously, a lot of digging has to be done to find out what kinds of information are available. However, this effort only completes the first step in checking business reference information. It is equally important to go further and check all secondary information that may help answer client questions regarding products, markets, opportunities, competitors, and the wisdom of alternative business strategies. The next major step rechecks some of the previously mentioned resources and adds some new ones.

II. Secondary Research

In conducting secondary research of all pertinent published information, it may be possible to use in-house on-line research capabilities at the research firm or the client organization. If this is not possible because of existing commitments, capabilities, or other project responsibilities, it may be wise to select an outside provider or broker of secondary business research information. One good place to check on outside firms to do secondary research is Burwell's Directory of Fee-Based Information Services. This excellent directory describes literally hundreds of information brokers throughout the world and is subdivided by country, state, company, subject, and service. Most of these information brokers are in the United States, but a wide range of possibilities exists in other countries throughout the world.

In doing secondary research, we:

A. Conduct on-line research through Dialog and other on-line services. The trick here is knowing which of the hundreds of databases to check for appropriate questions, key words, and subjects. Most of our work is done through Dialog, but other resources include Bibliographical Retrieval Information Services (RIS), and others.

B. Use Business-line Management, which lists over 200 on-line services worldwide, Business-Line Finance, listing over 300 financial databases throughout the world, and Business-Line Company Information, Which provides direction to over 300 databases of company financial information, key personnel, products, services, subsidiaries, fee, and other database categories.

C. Use The City Directory for London-based financial information sources.

D. Work with ARK, which covers 14 major industries in Europe to provide information on over 2,000 public European companies throughout Western Europe. E. After appropriate articles and published references have been identified, we spend time in the library reviewing abstracts and getting copies of permanent articles and other references.

The secondary research step alone can cost anywhere from a few hundred dollars for a simple study to $10,000 or more for a complicated project and an interpretive report.

III. Selection of Multi-Client Studies

At this point, we know what is available in print, including multi-client studies. However, it is not wise to purchase every possible multi-client study, so some additional research is necessary.

Basically, this involves contacting the publishers of the multi-client studies, requesting copies of the Table of Contents and the offering prospectus for each study of interest, discussing options of purchasing the whole multi-client study or just the most pertinent part or parts, and so forth. We also discuss the possibility of purchasing proprietary add-ons to the multi-client study to answer specific client questions that are not adequately answered by the basic multi-client study. We also discuss discounts to ensure that we purchase the multi-client study below list whenever possible. In most cases, we can purchase the multi-client study at a discount because we are resellers of this type of information, and in many cases, we can provide the multi-client study to our clients at less than list price.

After we have contacted the publishers and received as much information as possible, we consult with our client and purchase the multi-client studies that seen to be most appropriate.

IV. Selection of a Foreign Firm

At this point, we know what is available in the literature and from secondary research of all available published information, including multi-client studies and foreign and domestic publications. The next step is to provide some proprietary research, and in many cases in foreign markets, we need a local firm that can do field work, gather data, and provide some analysis and interpretation. The selection and use of the foreign firm is extremely important to the success of the overall project. Here we consider the following alternatives:

A. Language considerations may dictate that a foreign firm must be used to assist in the project. We first examine our inventory of correspondent firms, companies and individuals we have worked with before, and qualifications in terms of industry and specific type of study experience.

B. We check directories of foreign firms, primarily the International Directory of Market Research Organization. This directory provides information on over 1,700 marketing research firms throughout the world in 70 different countries. This directory is the best one of its type for international coverage.

C. We review Bradford's Directory of Marketing Research Agencies and Management Consultants.

D. We also check the GreenBook,

which is published by the New York Chapter of the American Marketing Association, and the annual Quirk's Marketing Research Review Researcher SourceBook. These directories are useful for information on domestic marketing research firms.

E. If we are working on an industrial/business marketing research project in Europe, we check the membership directories of the Industrial Marketing Research Association (IMRA) and the Federation of European Marketing Research Association (FEMRA).

F. If we are working on a project in UK, we check the yearbook of The Market Research Society (MRS).

G. If we are working on an industrial/business project in Canada, we check the membership directory of the Industrial Marketing and Research Association of Canada (IMRAC).

H. In other countries, we check appropriate association directories, and for Europe as well as other international coverage, we check the directory of ESOMAR, the European Society for Opinion and Marketing Research.

After doing some screening, we present our client with alternative firms in the foreign markets involved, and then we typically ask for proposals from several appropriate firms.

V. Proposals for Foreign Field

Work At this point, we can really describe what we already know and what types of assistance we need in the foreign market study. We prepare a problem statement or brief describing exactly what we want, and we solicit proposals from three or four carefully selected foreign firms that have the capability to conduct the study for our client. We use confidentiality agreements whenever appropriate. Once we receive the proposals for foreign field work and assistance, we recommend a selection procedure and select a subcontractor to complete the foreign work to our client's specifications.

VI. Finalize the Client Proposal

At this point, we have all the information we need to finalize our client proposal and begin the remaining steps of the project.

VII. The Primary Research Study

We typically submit an interim report that covers all of the progress to date in terms of published information, resources, findings, conclusions, and recommendations. The proprietary research in the foreign market is completed and becomes part of the final report for the project. The end result may involve recommendations regarding the competitive situation, an entry strategy, joint venture possibilities, distribution alternatives, acquisitions, and other types of strategic partnerships. These aspects of the study are designed to help the client make the right decision regarding the foreign market opportunity, which by definition also means helping the client to avoid costly mistakes.

It has been our general observation that American companies are not very experienced in assessing foreign market opportunities, and they often go charging off in the wrong directions at the wrong times. In order to avoid these mistakes, a lot of careful checking is necessary, and then you also have to be lucky not to have overlooked something significant. In short, international marketing research done properly is not easy, but it will be increasingly more important in the future than it has been in the past. ❑

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Figure 3 highlights the elements of this strategic managing process. The elements are interactive and must be thought of as a system rather than as distinct elements.

The market research effort is critical to driving the strategic managing process. Figure 4 shows the process steps and the broad input components for the research effort.

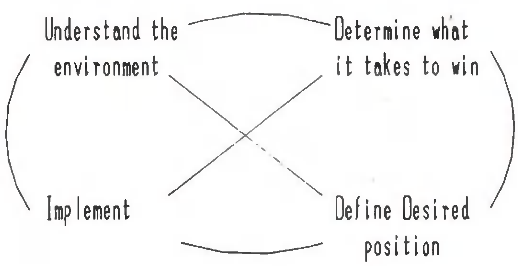


Figure 3 - The Strategic Managing Process

Understanding the environment—defining the arena

The objective of this element of the strategic managing process is to address the question: "Where are the most attractive places to invest our resources?"

This is the raw data for answering the "where to compete" question. For the management team, this is the most crucial period in reaching beyond its current understanding of marketplace "reality." Market research carries the crucial task of challenging conventional wisdom, and compelling the search for revised wisdom.

Some of the typical tasks for the research effort in this mode are:

- defining the determinants and patterns of demand
- identifying available substitutes which are acceptable to ultimate consumers
- developing a picture of potential industries and their structure
- evaluating value alignment within industries

• enumerating each industry's effectiveness and efficiency in meeting ultimate consumer needs

• testing various customer groups' sensitivity to various elements of the marketing mix

• defining what competitor strategic groups exist and how they behave.

Determining what it takes to win—testing causality

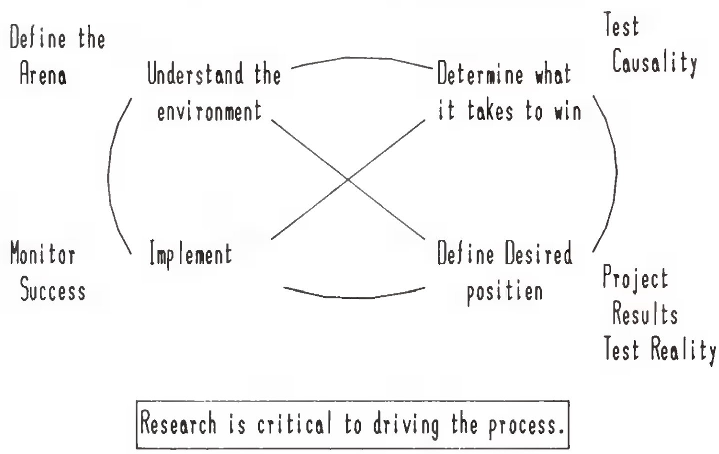
The objective of this element is to address the question: "For our chosen markets and industries, what is required to participate?"

This step is aimed at identifying industry critical success factors (CSFs). Here the context of CSFs is the industry wide issues that are so crucial that if the industry ignores them, it fails. For an individual firm to carve out a position in the industry, it must be seen as being a significant contributor to the industry's CSFs.

At this stage, market research is typically used to test causality of the CSFs. An industry perspective is crucial at this stage, and research's broader view can be used to proactively encourage that industry view.

Figure 4

The Strategy Managing Process - Research Linkages



Defining the desired position—projecting and testing

The objective of this element is to address the question: "Given our chosen markets and industries, what is our best position?" Essentially, this step answers the question of how to compete.

In this stage, research can be used to test and project results of various positioning strategies. Test marketing is a typical example of activities appropriate

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to this stage. As test marketing costs increase, modeling of business performance becomes an attractive alternative. Research can contribute to the modeling process by providing input on customer and competitor behavior, industry actions, environmental factors, etc.

Research can also provide assistance in this step by projecting the payoff for various activities. This requires defining the resource investment-return model and levels of uncertainty around the return.

For all of these activities, the role of the market research effort is to provide a strong sense of marketplace reality. While this role should not be confrontational, it should be consultative.

Implementing—monitoring

The objectives of this element address the following:

• Are we accomplishing what we set out to do?

• Where we are not, is the problem the strategy or the implementation?

• How will we reposition ourselves?

In this element, market research plays a critical part in performance evaluation. Typical roles research plays are:

• Measuring customer satisfaction with the offerings of the business—a key indication of the business' future success.

• Monitoring competitor activity—typically a key indication of the quality of the business' earnings.

• Measuring value shifts in the market and industry—an indication of timing for repositioning the business.

Conclusion

Market research is not an optional luxury for business management. Instead, the active involvement of market research throughout the strategic managing process is crucial to business success. For business managers, this means:

• Early and continuing involvement of research professionals in developing an understanding of what decisions must be made and the knowledge required to make those decisions.

• A will to act on the research results, especially when the results challenge accumulated wisdom in the business team.

For research professionals, this implies:

• A continuing pressure to sell, sell, sell the value (not just the results) of market research.

• Presentation of research-based knowledge that is actionable by business managers. ❑

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power. The better you know your customers, the more successful you will be at tailoring your products and promotions to them. In the 1990s, if you don't know who your customers are, your competitors probably will."

Getting to know your customers involves answering four basic questions: Who are they? What do they want? Where can they be reached? and What do they buy? These questions have their respective information components—demographics, psychographics, media preferences, purchase behavior—which are described in the first half of the book. Each component's chapter discusses how to use the particular type of information, explains what forms it is available in, and shows who to get it from (government, private commercial sources). For example, the chapter on purchase behavior looks at the government's Consumer Expenditure Survey and at the various syndicated services that track buying behavior.

The remaining half of the book takes what the authors call a problem solving approach to applying consumer information, in the belief that "creative, information-based decisions are the root of each business success." Throughout this section, real and theoretical examples of products and information needs are presented as illustrations. For example, the chapter on product and service analysis briefly looks at how Toyota used a variety of information sources to develop a portrait of buyers of its Lexus line of cars and to determine where it should locate its dealers. Other chapters cover advertising and promotion analysis, market analysis, and strategic planning.

Capturing Customers is full of savvy advice and the kind of "actionable information" researchers are always striving to unearth, presented in clear terms with helpful examples to make the concepts understandable. For newcomers, it's a one-stop reference for basic data on a variety of information sources, guiding the reader from the inner workings of the Census through the maze of acronyms—VALS, TIGER, ADI, MSA—he or she is bound to encounter in day-to-day work. More "experienced" readers will find the book useful, thanks to its well-planned strategic suggestions and thought-provoking analysis.

But perhaps most important, this book will help you to ask informed questions, which will lead (one hopes) to informed answers and sound, research-aided business decisions. ❑

(*Capturing Customers*, $39.95, is available from American Demographics Books. Phone 800-828-1133.)

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Listing Additions

Please note the following corrections to the 1991 Directory of Focus Group Facilities:

Bernett Research, Inc.
230 Western Ave., Ste. 201
Boston, MA 02134
Ph. 617-254-1314
Fax 617-254-1857
Contact: Stacey Black
1,3,4,5,6,7B

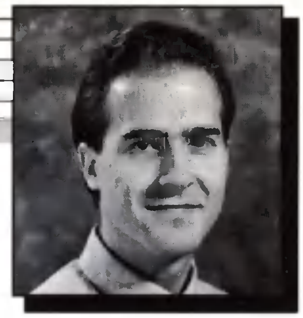
Bernett Research, Inc.
Assembly Square
133 Middlesex Avenue
Somerville, MA 02145
Ph. 617-623-2330
Contact: Ann Alpert
1,3,4,6,7A

Consumer Opinion Services
10829 NE 68th St., Bldg. B
Kirkland, WA 98033
Ph. 206-241-6050
Fax 206-241-5213
Contact: Jerry Carter
1,3,4,6,7B

Please add the following facility to the 1991 Directory of Focus Group Facilities:

Central Focus
136 Central Ave.
Clark, NJ 07066
Ph. 201-381-2600
Fax 201-381-8520
Contact: Marilyn Mahr
1,3,6,7B

TRADE TALK



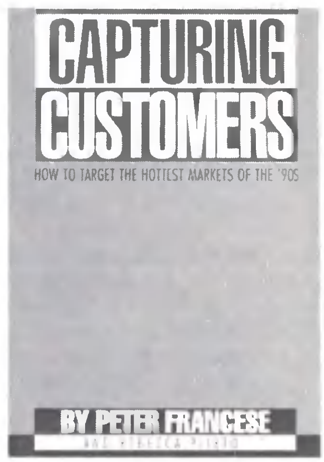
by Joseph Rydholm
managing editor

Information, please

People come to the marketing research industry from many different educational and professional backgrounds. Depending on that background, whether it's undergraduate or Ph.D., sales, marketing, or advertising, each person will have a different amount of knowledge about the research process. To function as a team, everyone has to be able to communicate on the same level and understand what their co-workers are talking about, right? But where does someone new to the field go for a quick overview of how information and information gathering fit into marketing?

Peter Francese's new book, *Capturing Customers*, is a good place to start. Francese, founder of *American Demographics* magazine, has written, with the help of *American Demographics* contributing editor Rebecca Piirto, a succinct 200 page primer on the strategic use of consumer information sources.

The book is set in the context of the changing U.S. marketplace, beginning with a recap of some of the social and economic shifts of recent decades and their effects on the way products and services are marketed today and how they will affect marketing in the future. Francese makes clear up front the importance that consumer information will have in the 90s—and beyond:



"If knowledge is power, then knowing about your customers is marketplace

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Boston . . . . Sept. 24-26
New York . . . . . . Nov. 5-7
San Francisco . . Nov. 12-14
Cincinnati . . . . . Dec. 10-12
New York . . . . . . Jan. 7-9
Toronto . . . . Feb. 11-13
Chicago . . . . March 18-20
Seattle . . . . April 1-3
Cincinnati . . . . . April 15-17

104. Questionnaire Construction Workshop
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Cincinnati . . . . . Sept. 11-12
Boston . . . . Dec. 4-5
New York . . . . . . Jan. 14-15
Chicago . . . . March 5-6
Cincinnati . . . . . April 23-24

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Los Angeles . . . . Aug. 2-3
Cincinnati . . . . . Sept. 13-14
Boston . . . . Dec. 6-7
New York . . . . . . Jan. 16-17
Chicago . . . . March 7-8
Cincinnati . . . . . April 25-26

201. Focus Groups: An Introduction
Boston . . . . Sept. 27-28
New York . . . . . . Jan. 10-11

203. Focus Group Moderator Training
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Cincinnati . . . . . Sept. 18-21
Cincinnati . . . . . Oct. 23-26
Cincinnati . . . . . Nov. 27-30
Cincinnati . . . . . Feb. 5-8
Cincinnati . . . . . April 2-5

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New York . . . . . . Jan. 24-25
Chicago . . . . March 21-22

401. Managing Marketing Research
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New York . . . . . . Jan. 31-Feb. 1

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Cincinnati . . . . . April 18-19

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