



BY DAVID KWESKIN

Social Media – Debating its Merits

Without discounting completely the influence of social media, it's a good idea for DTC marketers to reflect on the fact that for many who are among drug marketing's primary audience, social media is not by any means an end-all media choice.

The often-repeated refrain heard today in articles/talks addressing the changing media world is that social media is *the* new hot link to communicating with consumers (for example, see *DTC Perspectives'* September 2009 issue, "From Monologue to Dialogue," by John Tapper).

No doubt that is a truism for many categories, including to some level for health care. However, it is this writer's point of view that it is quite over-stated for pharmaceutical drugs. The October issue of *DTC INSIGHTS* (published by *DTC Perspectives*) reports data from an *Advertising Age* (Oct. 5, 2009 issue) *Social Radar Sentiment Index*, which demonstrated that "prescription drug brands generally came in very low both in

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conversation volume and percentage positive" among social media campaigns. Yes, it is true that more and more grandmothers/grandfathers are users of the Internet, perhaps even avid users, but in this person's observations it is largely employed as an e-mail device for everyday communication and used far less for social media connecting.

The category target of course remains heavily tilted towards seniors who are more apt to remain traditional in their use of media. From the same October issue of *DTC INSIGHTS*, Nielsen Company's "Three Screen Report" states that in Q2 2009, TV viewing is at an all-time high, despite the growth of new media options. That doesn't sound like the start of TV's demise.

Moreover, those in the upper-age categories are more likely to be traditional in believing in the "authority" of the voice of advertising. For example, they are less skeptical. Fur-

ther, the power of the physician's voice to these individuals (and certainly others not in the senior category) is particularly authoritarian versus the voice of a family/friend and by extension social media, unlike say, for electronics/telecom, where third-party opinions are far more likely to persuade.

This is not to dismiss social media as a source of influence, but it is to register a strong cautionary note that for many who are among drug marketer's primary audience, social media is not by any means an end-all or perhaps not even a good choice. Clearly, too, the nature of the disease under question has much to do with the influence level.... people talking about drugs for asymptomatic considerations, for example, blood thinning or lowering cholesterol levels, are less likely to be sought-out compared to more symptomatic conditions, for example migraine headaches.

The case built here is that the lion's share of drugs are marketed to the older set, who are not avid users of social media (perhaps occasional at best), who tend to be less jaded to advertising, and more likely to heed the voice of the healthcare professional than those of a younger profile. Certainly, drugs targeted to a younger set can and will be influenced by social media, but even there, some individuals are undoubtedly unimpressed by opinions presented as "facts" emerging from social media. In short, when contemplating the influence of social media, there is no blanket answer cutting across the Rx world.

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