



Social is Mainstream

Embracing the Third Dimension of Marketing

As media shifts from a mostly analog to a mostly digital world, marketers are beginning to rethink the opportunities of “portable and beyond-the-browser” that are widely available. Social Influence Marketing now presents a new dimension of marketing.

BY LISA FLAIZ

Q *Will 2009 be the year that Social Influence Marketing™ (SIM) truly goes mainstream? Will pharma be able to keep up?*

Certainly your communications plan looks much different now than it did only a few short years ago. The growth in available channels and touch points has profoundly affected how we market to our consumers. You probably had print, perhaps television, perhaps some point-of-care messaging, and search engine marketing – maybe even some content integration or banner advertising on your communications plan in 2006. What have you added? Mobile? Digital out-of-home? Video-on-demand? Maybe even some social media campaigns? We have shifted from a mostly analog world to a mostly digital world, and the portable and beyond-the-browser opportunities available to us have caused marketers to rethink their distribution strategies. SIM presents a new dimension of marketing. The wheels of innovation are turning, and the differences in your communications plans prove it.

Q *What is meant by “a new dimension” of marketing?*

Traditionally, we look at marketing through two lenses – brand/awareness building marketing and direct response marketing. But SIM does not neatly fit into either one of these categories. Brand marketing involves messages that come from the brand and are (generally speaking) mass-targeted – while direct response marketing is typically thought of as micro-marketing or one-to-one marketing. SIM leverages the power of peer influencing – whether those peers are known or anonymous influencers. The messaging in this case does not come from the brand. And, it is one-to-many.

Leveraging the natural human tendency to take peer influence more credibly than commercial influences is an opportunity pharma is starting to embrace. As an industry, pharma has made fantastic strides in the last two years experimenting with SIM – we can truly say we have more than “dipped our collective toe” in the SIM waters – but it still is approached with kid gloves, and mitigated for risk in every detail (appropriately so, given the lack of industry guidance or consistency in practices).

In today's organization, SIM is everyone's stepchild. It is part of public relations, part of brand marketing, part of direct response marketing, part of consumer insights, just to name a few areas. That will change in 2009 for many businesses as marketing organizations discover the benefits in approaching it holistically. Budgets will be put behind SIM and it will be treated as the third dimension of marketing with its own team, objectives, and initiatives. However, this may just be a sign of things to come for pharma, which of course is usually a bit behind the mainstream marketing shifts. It will force us to rethink how we are organized, including agencies. Niche social media consulting firms will find it harder to compete as SIM goes mainstream.

Q *Why are Web 2.0 values so at odds with pharma industry values?*

We have heard time and time again, in pharma's discussions around Web 2.0, about the fear of adverse-events reporting compliance concerns with the FDA. We also have heard about the fear of liability related to off-label discussions around Web 2.0 discussions. Please don't get me wrong – I don't mean to over-simplify, discount or imply a lack of appreciation around these issues – there are legitimate points to this. However, I actually believe the struggle goes deeper, and beyond just being risk-averse.

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I think the values of Web 2.0 go against our heritage as an industry. Keep in mind how new, relatively speaking, DTC communications is to the pharma industry. Prior to the loosening of the DTC regulations in 1997, in order to communicate with a consumer, we employed direct-to-patient communications, and always through a learned intermediary. With Web 2.0, anyone can put themselves on a soapbox and position themselves as an expert, and are often given more credence by the people they influence than an actual expert may be given. Instead of information coming from authoritative sources, information is judged based on social networking.

Pharma values the control of data. However, the values of Web 2.0 are based on information being contributed by all, and distributed to all. Also, we value privacy in the pharma industry, for obvious reasons. While privacy and security are regulated in pharma, and intellectual property is closely guarded, Web 2.0 is about open source and using licenses with as few restrictions as possible. Finally, and this is not an exhaustive list, pharma values measurable ROI. SIM and other emerging digital-based tactics are simply just not there yet in terms of measurement. The

models are not sophisticated enough yet to help with strict ROI metrics.

We need to think out-of-the-box when measuring success of SIM programs, and clearly define what a return on objective would look like. By focusing on meaning rather than measurement, "social influence research" will become more important. To think in terms of social as channel that should be measured like TV, print, radio, or digital is missing the point. Instead, the greatest value in social for marketers will be in the real-time insights it provides.

Q *What does Health 2.0 mean to you?*

The Internet is transforming healthcare. Consumers are taking control of their healthcare decisions and using a significant amount of peer-developed social media content to do it. Healthcare consumers are demanding more online content, and becoming more sophisticated managers of their own health, utilizing electronic health records, communicating with their healthcare providers via email, tracking disease progression in browser-based tools and digitally recording health measurements, and organizing care-giving activities online.

To provide value, pharma may want to take a page out of some of the popular community sites out there, such as patientslikeme.com. These are not only active and inspiring support communities, but also provide tools that can be used to track disease progression, medications, and other utilities to facilitate health management tasks. Pharma has long-employed the "patient testimonial" tactic. By building on this and connecting patients – thereby providing a community – as well as providing useful and relevant functionality, pharma can engage patients and provide



In a Web 2.0 world, information often is judged based on social networking commentary.

mutual benefit to the patients and to the brand. It can be, and has been done.

One excellent example is from Genentech BioOncology, which has created HER Story Community, a branded patient ambassador program from Herceptin that connects women who are fighting HER2+ breast cancer together. Patient engagement also depends on a visual experience that provides value as an interactive medium.

Q *So what are the key take-aways?*

Social Influence Marketing and Health 2.0 are changing the way opinions and decisions are being made about treatment options and the value a brand provides. Many pharmaceutical brands **are** running social campaigns – you are not alone nor will you be the first. Social conversations around your treatment have always existed; wouldn't you rather know what is being said?

SIM campaigns should be considered as part of a greater communications plan – an integrated part of the marketing mix – but your exact tactical mix will be dictated by your overall goals – not the other way around. And the success of your SIM programs will be measured based on returns on those objectives. Look to patient engagement metrics wherever possible. And, of course, though we have some values in conflict, we do not have established regulatory hurdles, just undefined ones! Which leaves us open to interpretation, inconsistent application, and the usual risk-averse decision making.

The FDA does not oppose all social media; the agency just wants it to be within the spirit of the existing promotional guidelines. Social marketing must be considered the same as any other promotional channel. Which means content must be reviewed by your medical, legal and regulatory compliance managers, and filed with the FDA upon first use. Pharma companies often end up steering away from SIM programs simply because of resource constraints to handle the review, approval and posting of consumer-submitted material.

Q *How should you get started?*

Get started by simply listening in to conversations. Gain an understanding of what motivates conversations around your brand, what is being said, where it is being said, and who the key online consumer influencers or opinion leaders are. Then, devise a plan with a train member of your corporate communications team or PR partners to include those key COLs on your media distribution lists – treat them like any other journalists, because Web 2.0 has made journalists out of all of us.

Distribute the same balanced, credible and accurate information to them that you do to all other media outlets, and like any other editor, they will do with it what they will. But at

least they have the information that provides your point of view and you have influenced the conversation. Monitoring the conversations happening online around your brands, conditions and category will help you draw insights and guide your social media entry points.

Joining the conversation may include influencing it or even building your own community. Consider incorporating experiences, content, and tools and applications to assist your patients in connecting with you and each other. Help them solve their problems and get answers they need with social media.

Q *What should you expect?*

According to Forrester Research, 75 percent of the online population is now engaged in online social behaviors, and with social strategies getting more integrated and accountable, marketers are going to depend on their customers, more than ever, to do the marketing for them. Marketers this year will learn how to deploy Social Influence Marketing campaigns more successfully compared to 2008, which had its fair share of experimental failures.

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As new tools gain adoption like Facebook Connect, which has the power to make an individual viewing experience social, and we begin to deepen our understanding of consumer interactions in social environments, we should see the lines blurring between marketing efforts on a Web site and across the Web. We can also expect new social advertising formats and new social research approaches to emerge that leverage the complex relationships that occur within a social graph. As social behaviors go mainstream, Social Influence Marketing™ is going to be glue that binds every digital strategy together. **DTC**

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