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BUILDING HEALTHCARE BRANDS IN THE POST COVID- 19 ERA

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01 Executive Summary

The COVID-19 pandemic has shown its impact on various industries and sectors in India and across the globe. The healthcare sector of India has noticed an unprecedented strain owing to the COVID-19 pandemic. The country's healthcare system has been pushed to the utmost extent, which has also led to rapid transformation to digital adoption. Through this pandemic healthcare sector has seen major advances through digital tools, tracking softwares and means to communicate effectively and authentically to customers.

The pharmaceutical and biopharmaceutical organizations have accelerated their digital strategy and started implementing technology and resources to meet the upcoming needs. The healthcare brands are also evolving in this journey and are becoming more scientific data driven, empathic and consumer need oriented. The consumer orientation towards adopting online doctor consulting and e- pharmacies has also witnessed a sudden leap with increase in consumer health quotient. This steady momentum is the key to revolutionizing healthcare ecosystem of India.

In this whitepaper, we aim to explore the influence of COVID-19 on virtual customer decision and to obtain insights in healthcare brand building. You will learn about,

- An overview on the healthcare ecosystem in India, its diversity and reach, their fundamental role in shaping the healthcare of India
- We have covered the major aspects like hospitals, Indian pharmaceutical industry, telemedicine, E-pharmacies, innovation and various healthcare policies. Their growth rate, expansion and examples have been included for better understanding
- The whitepaper also covers the impact of COVID- 19 impact on these aspects of healthcare and its implications.
- The fundamentals of brand building including branding elements, steps in brand building, healthcare branding, consumer focussed journey and insights on better positioning of healthcare brands
- Overview on the consumer journey insights through quantitative research and the opportunity it holds for brand building
- The Post COVID- 19 brand building insights through qualitative and quantitative research through pharmaceutical professionals

- There's no alternative but to adapt to digitalization in healthcare, so the keys in steady and strong implementation

We have conducted two quantitative surveys namely, consumer insights and marketers' insights. Through these surveys we have tried to overlay the theoretical understanding with practical real-world insights from consumers and marketers. We have also interviewed a senior professional from product management division, as a part of qualitative research to obtain his practical experience insights on brand building.

Through this whitepaper, we have tried to put forward the building blocks which brands can incorporate to grow through the Post COVID-19 era. These blocks can escalate the brands from blocks to rocket-sized growth. The ideas put forward have been collated through a lot of secondary research, primary research and through the vast knowledge available on the internet.

The COVID-19 pandemic has adversely affected the nation. However, it has pushed the healthcare systems to innovate rapidly and adapt instantaneously. It is leading the pharma and healthcare organizations to gallop and bring in initiatives for greater good of the consumers and customers. The right technology at the right time with right resources and right implementation will create a remarkable innovation in history of healthcare sector.

02 Healthcare Ecosystem

The Indian healthcare is multi-dimensional and complex owing to the architecture of the health systems and their administration. The health system is broadly categorized into multi-layered hospital administrations' depending on the body that functions them. The public funded organizations are a part of central or state government. The other set includes the organizations run by private investors who have focused their offerings according to the geography they are located in (rural/ urban India) and the demography and prevalent disease to which they address. The government organizations run through secondary and tertiary care facilities. While the private organization have a majority of secondary, tertiary and quaternary care facilities. The private healthcare facilities are mostly located in the tier 1 and 2 cities of India based on the affordability to the patients.¹

Healthcare Centers

The present health care system in India is a three-tier structure to provide health care services to its people. The first tier, also known as primary tier, has been developed to provide health care services to the vast majority of rural population. The primary tier comprises three types of health care institutions: Sub Centre (SC), Primary Health Centre (PHC) and Community Health Centre (CHC). India has a rich, centuries-old heritage of health sciences. The allopathic system of medicine rapidly gained popularity under the British rule and made an impact on the entire approach to health care in the nation.^{2,3}

The Indian government is constantly striving to deliver the best quality and cost-effective therapies to the public. The government has made tremendous efforts to decrease the drug prices thus increasing the affordability to its citizens from all strata. They are trying to enhance the supply of medicines to the lower income groups and rural location by capping medicine prices and promoting sale of generic medicines. Like for instance cancer treatments are now 86% cheaper and the prices of diabetes medicines have been lowered by 42%. The Indian government has also introduced several reforms for the betterment of its people. The union budget of 2017, made way for the unique health identifier Aadhar card for receipt of basic health services, it was a prime step in digitalization approach as well as for identifying beneficiaries of the social healthcare insurance. In the union budget of 2018, the government went a step further by introduction of Ayushman Bharat which would provide insurance

coverage to 10 crore families in India, it was conducted under the supervision and guidance of NITI Aayog which made allocations of INR 3,073 crore for creation of a digital economy. The digitalization has also witnessed growth in sectors of artificial intelligence, internet of things, blockchain and 3D printing, with the successful implementation of these the healthcare productivity can be enhanced multiple folds and minimize human interventions through electronic medical records and hospital information systems.

Despite these overwhelming approaches the healthcare ecosystem faces major challenges in terms of shortage of qualified doctors and nurses, low infrastructural allocations and accreditations. Apparently less 2% of the hospitals in India are accredited. There is an irregular distribution of healthcare facilities in India, with majority having non accessible facilities especially in rural India where patients have struggle for miles to avail basic healthcare. The times are changing and reforms are being constituted. Especially the COVID-19 scenario has amplified these challenges and brought focus of the management to address these shortcomings.

Innovations in healthcare sector

There is a need for uberization of the healthcare industry, adoption of emerging treatments and addition of doctors and nurses. Adapting to newer technologies such as blockchain, can be implemented for better data management. These technology applications in fields of pharmaceuticals, biopharmaceuticals and medical devices will transform the healthcare ecosystem. The implementation of technology can help in collecting, storing and sharing of critical patient data. The collaboration with analytics can help physicians drive better analysis. The AI enabled disease detection softwares are redefining the therapy areas such as sepsis shock by indicating vital triggers. The use of smart wearables has helped in building remote patient monitoring making the patient self-reliant and giving beyond the hospital care to them.⁴



Telemedicine

The approach of remote diagnosis and treatment of patients by means of telecommunications technology, thus making provision of substantial healthcare to low income regions. Telemedicine approach assists the family physician by giving them easy access to the expertise of speciality doctors and helping them in close monitoring of patients. The first breakthrough in telemedicine sector was noted in the 20th century when an ECG was transmitted over telephone lines. Since then the field has come a long way with great contributions by NASA and ISRO. The National Telemedicine Taskforce was established by the Health Ministry of India back in 2005. The ICMR- Arogyasree, NeHA and VRCs are few of the key projects delivered under this mission. The ISRO (Indian Space Research Organization) played a pivotal role in application of telemedicine in India with a Telemedicine Pilot Project in 2001, linking Chennai's Apollo Hospital with the Apollo Rural Hospital at Aragonda village in the Chittoor district of Andhra Pradesh. These initiatives taken by ISRO, Department of Information Technology (DIT), Ministry of External Affairs, Ministry of Health and Family Welfare and the state governments played a vital role in the development of telemedicine services in India.

Real time/ Synchronous

- Sender and receiver both are online at the same point of time and 'live' transfer of information occurs

Store-and-forward/ Asynchronous

- Sender stores the information databases and sends it to the receiver at a convenient point of time, and the receiver can review the data according to his convenience

Remote Monitoring/ Self-monitoring/ Self-testing

- Utilizes a range of technological devices to monitor health and clinical signs of a patient remotely

Based upon interaction between the individuals

- Health professional to health professional (giving easier access to specialty care, referral and consultation services)
- Health professional to patient (providing healthcare to the unreachable population by giving them direct access to a medical professional)

Fig. The broad classification of telemedicine

The Ministry of Health in the Government of India has initiated projects like Integrated Disease Surveillance Project (IDSP), National Cancer Network (ONCONET), National Rural Telemedicine Network, National Medical College Network and the Digital Medical Library Network.⁵ The Government of Uttar Pradesh executes use of telemedicine during the Maha Kumbhamela.

A few noteworthy examples of the successfully established telemedicine services in India include mammography services at Sri Ganga Ram Hospital, Delhi; oncology at Regional cancer centre, Trivandrum; surgical services at Sanjay Gandhi Postgraduate Institute of Medical Sciences, School of Telemedicine and Biomedical Informatics.

Some of the current major Indian private sector players in telemedicine include Narayana Hrudayalaya, Apollo Telemedicine Enterprises, Asia Heart Foundation, Escorts Heart Institute, Amrita Institute of Medical Sciences and Aravind Eye Care.



In the past few years, ISRO's telemedicine network has come a long way. It has expanded to connect 45 remote and rural hospitals and 15 super specialty hospitals. The remote nodes include the islands of Andaman and Nicobar and Lakshadweep, the hilly regions of Jammu and Kashmir, Medical College hospitals in Orissa and some of the rural/district hospitals in other states. The Village Resource Centre (VRC) concept has been developed by ISRO to provide a variety of services such as tele-education, telemedicine, online-decision support, interactive farmers' advisory services, tele-fishery, e-governance services, weather services and water management.

Telemedicine services in the country come under the combined jurisdiction of Ministry of Health and Family Welfare and the Department of Information Technology. Telemedicine division of MoHFW, GOI has set up a National Telemedicine Portal for implementing a green field project on e-health establishing a National Medical College Network (NMCN) for interlinking the Medical Colleges across the country with the purpose of e-Education and a National Rural Telemedicine Network for e-Healthcare delivery.⁶

Indian Pharmaceutical Industry

The Indian pharmaceuticals market is the third largest in terms of volume and 13th largest in terms of value, globally. This market grew from US \$28.5 Billion in 2014 to US \$29.6 Billion in 2017. It is expected to grow at a CAGR of 11.3% and reach US \$55 Billion by 2020. This growth will be primarily driven by the high burden of disease, good economic growth leading to higher disposable incomes, improvements in healthcare infrastructure, and improved healthcare financing, to name a few. India is expected to be among the top three pharmaceutical markets by incremental growth and the sixth largest market globally in absolute size by the end of 2020.

The retail pharma market in India is currently at a promising stage with its three broad segments of generic drugs, over-the-counter (OTC) drugs, and patented products. Generic drugs form the largest segment, with around 70% market share in terms of revenue. OTC medicines and patented drugs constitute 21% and 9% shares, respectively, of the total market. The domestic pharma retail market, valued at around US \$ 20 billion (INR 14,000 crores) in 2020, is primarily driven by the anti-infective market with a 15.2% share, the cardiac drugs market at 12.5%, the gastrointestinal drugs market at 11.8%, the vitamins / minerals / nutrients market at 8.8%, and the anti-diabetic market at 8.1%.

The retail pharma market is a highly fragmented segment and competitive in nature with approximately 8 lakh registered pharma retail outlets in the nation. They face strong competition in terms of profit margins as the supply chain moves from the distributors to retailers. Another key challenge for the industry is the price capping by the government on majority of formulations leading to lower profit margins. There have been allegations regarding drug abuse, sale of counterfeit medicines and improper documentation on sale of prescription only products. Application of computerization in pharmacies for recording transactions and handling inefficiencies could transform the retail market scenario.

The e- Pharmacies

These are online platforms through which consumers can purchase medicine without having to visit a brick and mortar pharmacy. According to Frost & Sullivan, the e-Pharmacy market in India is estimated to be around US \$512 million (~INR 3,500 Crores) in 2018 and is estimated to grow at a CAGR of 63% to reach US \$3,657 million (~INR 25,000 Crores) by 2022. The convenience to the consumers and added discounts has led to increasing utilization of e prescriptions and growth of the industry. Also, the sector has shown rapid growth due to Internet Penetration in India. The total Internet subscribers are set to increase at a CAGR of 15-16% from 2015 to 2020. Followed by 4G deployments by telecom providers, broadband connectivity

under the 'Digital India Program' and the number of Internet users is expected to increase substantially.

Inventory-based Model of e-Pharmacy means an activity where the inventory of goods and services is owned by the eCommerce company and the products are sold to the customers directly. Similarly, in e-Pharmacies, the e-Pharmacy owns the inventory of medicines / drugs that are stored in warehouses / fulfilment centers across geographic locations. Once orders are received by the ePharmacy on its website / app, they are checked by the registered pharmacist. Orders which require a prescription are checked for a valid e-prescription / scanned prescription uploaded by the consumer on the website. Medicines / drugs are not dispensed without a valid prescription. Registered pharmacists wrap the medicines in a tamperproof pack and deliver them to customers through a courier service.

Healthcare Initiatives

The Ministry of Health & Family Welfare has undertaken various initiatives using Information & Communication Technologies (ICT) for improving the efficiency and effectiveness of the public healthcare system.

Health insurance penetration: Many people are now covered under health insurance. It stood at 437 Million in 2016-17, registering a CAGR of 20.5% between 2012-13 and 2016-17. The major drivers for this growth are lives covered under government and group schemes in the last few years. this has improved the awareness and uptake of insurance products has increased.

Ayushman Bharat Health Insurance Scheme/ Ayushman Bharat Yojana/ National Health Protection Scheme is a mission which aims to provide a service to create a healthy, capable, and content new India. The scheme is targeted at poor, deprived rural families. 8.03 crore rural families and a further 2.33 crore in urban areas are entitled to be covered under this scheme. It will cover around 50 crore people and will have a defined benefit cover of INR 5 lakh per family.⁷

03 The Pandemic Moment

COVID-19 and Its Impact of healthcare of India

The coronavirus pandemic has sent shockwaves to the health system, societies, and economies around the world. The impact of the pandemic has clearly shown its implications on the various industrial sectors, economy and the nation. The healthcare sector is at the epicentre of this unprecedented global challenge. The healthcare costs have risen. However, the government has made deployment to the healthcare expenditure. The private hospitals have extended their support to the government with equipments, isolation facility and workforce. The adverse effects of the pandemic on the healthcare sector included reduced footfall at physicians' clinics (OPD), decreased medical tourism and international surges. The cash flow of hospitals has been impacted as the 80% of the costs are fixed. The medical device industry has also been hit with in terms of supply and demand. The situation in China has disrupted the exports of critical raw materials and the export of medical devices. There has been a significant drop in both in-patient and out-patient footfall for private hospital chains—be it a single speciality, multi-speciality, tertiary-care hospitals or even diagnostics businesses, during this lockdown.

The covid-19 has impacted clinician's practice, with a survey done for all segments of doctors in India have revealed that social media apps like WhatsApp, IMO, Google duo, snapchat and Facebook messenger to get in contact with physicians. The live interfaces like Zoom Video communications, Microsoft teams, Skype and video conferences have been utilized. A maximum of online platforms like Lybrate, Cure Fit, Portea, Practo and Docs App have been widely accessed by the patients.⁸

According to a ZS Associates survey, the patients are scared to seeing the doctors in clinic because of catching the virus. There has been a 10- 20% drop in quarter 2 demand of cardio and rheumatoid drugs. The healthcare providers are overwhelmed and under- resourced thus there are changing their treatment approach. While the telehealth, counselling and alternative sites are able to help only the ones who have access to it.¹⁰

“About 63% consumers have displayed positive response with telehealth, 68% with counselling and 52% with home health. About 84% patients have stated to their doctors (MD) fear of contracting and spreading COVID-19. While 74% have raised concerns to receive in- person care and 69% COVID-19’s interaction with pre-existing conditions.”⁸

The public policy measures have been instituted for containing the spread of corona virus. However, the cases have been on a rise. The healthcare sector has experienced several blows in terms of staff quarantine, supply chain failures and reduction in customer demands.

The pre COVID-19 phase had recorded the top 10 causes of deaths to be ischemic heart disease, chronic obstructive pulmonary disease, stroke diarrheal diseases, lower respiratory disease, tuberculosis neonatal disorders, asthma, diabetes and chronic kidney disease.

The high burden states especially in west India, contribute to 50% of the Indian pharmaceutical market sales. The distribution of health infrastructure distribution will play a critical role in managing progression.⁹

Tackling healthcare implications of COVID-19

The challenges are been tackled by hospital administration by reducing or deferring cost. With a view to reserve cash in hand. In the context of consumables, supplier consolidation for better rates and renegotiation of credit periods for pharmacy and consumables are some measures instituted by hospitals to conserve their cash flow. The doctor engagement model is being transformed to fully variable model based on the revenue generated. The increments and variable pay of other staff have been calibrated while evaluating shared services, in an attempt to further reduce overall employee costs.

The other fixed costs including the renegotiation of rent rates, vendor consolidation (for outsourced services such as housekeeping and security services), and deferral or staggered payment of annual maintenance costs have been administered. Most discretionary spends such as advertisement and sales promotions have largely ceased.¹¹

The Pandemic’s impact on pharma

Pharmaceutical drugs made in India are known for quality standards and are exported to developed economies. However, the Indian pharmaceutical industry is facing fierce competition from China as it has more significant cost advantages. The disruptions in the supply of low-cost API from China have decreased the efficiency of the operations of the

pharmaceutical industry. The supply-side disruption will cut 10-15% of their revenue. However, the sector will revive soon as the government extends full support. Also, resumption in China's drug production will alleviate the supply chain as India imports 85% of pharmaceuticals ingredients from China. While the global interdependency has grown significantly, India continues to manage exports through lockdown. Several Korean producers of biosimilars are operating at full capacity. The biosimilars market is likely to be not impacted. India had initiated export restrictions in March; however, they were eased off in April. The Indian pharmaceutical industry operated even during lockdown but at a reduced capacity.¹²

Around 65%+ stockists have reduced their working hours with an average reduction of about 4 hrs in a 9-hr day and 50% are operating at 50% workforce. A 70% of the pharmaceutical companies have increased their credit periods.

There has been a decrease in sales for pharma companies. However, 40% have reported an increase. Only 10% have indicated no change. Stockists have reported an increase in demand of delivery sales as against counter sales of those delivering with 75% reported delays. The Chronic refills, cough/cold medications have witnessed an increase; the respiratory and potential COVID treatments indicate growth. While the haematinics and progestogens in gynae segment show significant decline. The wellness treatments like multivitamins, food supplements as well as emollients (derma) have been hit. The anti-biotics market has shown decline on M-o-M comparison with injectable anti-biotics showing greater impact. The anti-fungal also show a decline. While macrolides, however, show an increase (used for COVID). Among the chronic care segment, plain ARBs and dual hypotensive show the maximum increase.^{9,10}



04 Brand Building Aspects

Branding fundamentals

According to Interbrand, a brand is the sum of all expressions by which an entity (person, organization, company, business unit, city, nation, etc.) Intends to be recognized.¹³

Branding, by definition, is a marketing practice in which a company creates a name, symbol or design that is easily identifiable as belonging to the company. Branding is an essential element that differentiates a product and commodity, it leaves memorable impressions on the minds of the consumers. It's a means by which the organization can communicate their values, company image and perceptions in the market. Brand building can be done through the image, logo, reputation, customer services, merchandising, promotions and advertisements. Essentially, all these elements orient themselves towards building credibility, popularity, morale, repute and acquire more customers.

“Branding adds spirit and a soul to what would otherwise be a robotic, automated, generic price-value proposition. If branding is ultimately about the creation of human meaning, it follows logically that it is the humans who must ultimately provide it.” -

David Aaker, The Father of branding¹⁴

Branding elements

Just like every atom in the chemistry periodic table, is an element with specific characteristics so is applicable for branding elements which are discussed ahead. Brand identity is an element that through people recognize the brand or organization through its logo or visual stimulations like the Vicks Inhaler or ENO powder for acidity immediately reminds us of the product image. The brand image is the idea that consumers develop in their minds, it also communicates their expectations from the brand. The way Patanjali products have the brand image of being organic and chemical free. Another element is brand positioning it is the way the product is placed in the market and who its target customers are, just like the brand Pampers is associated with baby development and is specifically targeted to new mothers. Every brand has a personality just like human beings, through which it represents emotional or personal qualities associated to it. For example, we can associate youthfulness with Pepsi or ruggedness with Wrangler. The tangible or intangible value of a brand is determined through

brand equity. The brand equity is the way people perceive the brand considering its strategic benefits such as premium and quality product. Brand experience is the emotions and feelings a customer goes through while purchasing the product.

For example, while ordering medicines online what are their experiences while browsing the website, placing the order, mode of payment, the delivery time and accuracy and lastly the after sales service. These all add up to the customer experience, which builds the customer journey. Brand differentiation is the means the brand choose to make themselves stand out from the competition. Brands implement this through differentiating on basis of cost, product offerings and also the packaging of the product. An extremely essential element of brand building is brand communication, a brand may have many benefits to offer. However, the one clear concise message that the brand delivers to its customers through advertisements, brochures, punchline is builds a strong communication for the brand. Here we can quote the communication by Telma, a brand of Glenmark's Zoltan division. It had a clear positioning communication which stated 24 hours and added 4 hours myocardial risk coverage also through its Tell your Ma campaign, it built a strong brand communication.¹³ The brands have to bridge the gap between brand promise and what it delivers, brand gap is an element that should be minimum and realistic. Brand extensions are widening the scope for the brand through variations in products and rolling out newer category of products under the brand. Pharmaceutical companies can associate it to launching products for different indications and combinations of therapeutic agents.¹⁵

“59% of consumers prefer to buy new products from brands familiar to them”-Nielson survey

“Your brand is what other people say about you when you’re not in the room.”- Jeff Bezos, founder of Amazon

Steps in brand building

Brand building is a dynamic and on- going process, and long-term relationship with consumers. A successful brand is built through consistency in communication and experience through print collaterals, websites, advertising, customer environment, and customer service.

The brand building process can be broadly classified into 3 phases namely, brand strategy, brand identity and brand marketing. Brand strategy is the foundational long- term blueprint

map of how the brand would commit to its promises, deliver its purpose, differentiate, build trust worthiness and again popularity amongst its consumers.

Brand identity is means through which the brand plans to build a long- lasting image in it the minds of its consumers. It involves building the brand image, advertising, visuals, messaging and experience. It should remain uniform across all channels to create an impact and top-of mind awareness. Brand marketing is the mode through which the brand highlights itself in the public through building awareness, strategic communication and connecting values and voice to the right audience.

The recent trends in the healthcare industry have displayed that brand marketing especially through digital marketing activities and mapping the digital consumer journey is the pivoting point for brands. It involves building the virtual user experience, conducting social media and email marketing as well as paid advertising.

1. Establish the brand purpose by identifying why does the brand exist, how it is different in the market, what problems does it solve and how it makes a difference to people's lives. Brand mission will justify your brand purpose and align the other aspects of strategy with it which will in turn drive value creation and trust. These are also the 3 parts of the Golden circle as explained by a leadership expert, Simon Sinek.

“People don’t buy what you do; they buy why you do it. The goal is not to do business with everybody that needs what you have. The goal is to do business with people who believe what you believe.” - Simon Sinek, Leadership expert

2. Competitor analysis, is to determine what the competitors' brands are doing and their shortcomings. The goal should be focused upon creating differentiation between our brand and that of the competitors. It can be implemented through developing a research spreadsheet for evaluating competitor brands on parameters such as messages and visuals, quality of their offerings, reviews and marketing efforts.

3. Focus on target audience and design and deliver a message to meet their exact needs. The catch is to be specific. This can be implemented through painting buyer personas on basis of demographic and psychological characteristics

4. Product focus is essential in brand building. The key is to know the benefits and qualities that the brand offers which makes its authentic and more customer oriented.

Also, designing the brand personality which provides real- life experiences, story- telling for messaging and is relatable to the consumers has better impact in the consumer's mind. Also, communicating the brand story on a human level, makes it connect better with the customers.¹⁶

Branding in healthcare and pharma sector

The marketing aspects have been implemented in the healthcare industry in the 1950s era, where it began with public relations communication and managing the publicity information. Further the approach integrated with governmental relations, regulatory influence, consumer research and health plans. By the 1980s, the healthcare industry witnessed a switch towards advertising, market research for direct marketing, personal sales and sales technology application. The growth identified by the 1990s when, introduction of direct to consumers relationship marketing and relationship management gained focus. These have continued their presence even in the 20th century with more limelight on consumer market segments. The current COVID- 19 in 2020 has accelerated the implementation of digital technologies and Post COVID-19 era would display rapid adoption and implementation of digital trends in healthcare market.¹⁷

The healthcare industry and especially the pharmaceutical sector is deeply connected to the values of trust and faith which exists between the care giver and the care receiver. The physician's decision to prescribe a brand is dependent on several product attributes such as the company, scientific data, quality and efficacy of the product. However, a brand differentiation is created when the brand message highlights the key benefits and strong product features. It is also considered that linking the brand name of the medicine with the company name adds strategic focus internally and externally. The corporate brands come with recognition and value.

Moreover, companies with great research and development capacities also benefit with scientific information availability thus adding support to the brand image. The trend has also shown a transition after entry of 'me-too' brands and has created greater need for setting differentiation. The sales approach has also been focussed on engaging opinion leaders,

ethical selling, scientific approach for engagement of physicians. The ways of communicating to the physicians have also evolved over time with the sales teams becoming more efficient and effective, advertisements in medical journals and conferences, premium packaging, engagement through medical conferences, symposiums and continuing medical education. Through these aspects the pharmaceutical healthcare brands have grown and built strong relationship with the customers.¹⁸

Positioning and building healthcare brands

The healthcare sector is one of the most diverse and dynamic field. The field is quality driven, price sensitive, increased regulatory constraints, has seen several mergers and acquisitions. The brands have to position themselves with a strong foothold to gain advantage. A strong positioning will provide direction and momentum to the brand's growth. With the trending changes in the healthcare sector, brands can achieve an impactful positioning by identifying the best fit from market needs, competitor weakness and brand strength. Some of the key components to be considered for building the healthcare brand positioning are elaborated further. Primarily is to identify the buyer's attitudes to the brands in the market, understanding stakeholder relations, drivers of purchase decisions. Secondly, characterizing the market segment building the positioning which encompasses needs of all stakeholders (suppliers, patients and doctors). Satisfying the key stakeholder's unmet needs would also drive our business and bring uniqueness to our product. Developing a brand architecture which can impart clarity and define the brand in the market place. Lastly, the more uniquely customer and consumer engagement activities a brand conducts in will drive its growth and position itself in the minds of the consumers.¹⁹

Consumer focus

Marketing has always grouped consumers into certain categories based on their stage in the customer funnel. However, times have changed the consumer is no longer restricted to a particular medium for satisfying his needs and wants. The consumer is now more technology savvy and has adopted a responsibility to conduct research before spending on any product. This makes the customer journey an informed process, where marketers should thrive to understand the consumer journey and direct their communications to all the touch points and moments of maximum influence. Thus, creating a greater chance of reaching consumers in the right place at the right time and with the right communication.

The consumer decision making process is no longer a funnel approach, rather a circular journey which begins with initial consideration of brands, followed by active evaluation of alternatives, and ultimately the consumer selects a brand at the moment of purchase. The journey does not stop here, it continues with post purchase approach and also developing a loyalty loop for loyal customers. The McKinsey article also suggests that unlike the traditional push marketing approach through advertisements, direct marketing and sponsorships. It has now transformed to 'information' pull marketing by the consumers. Their research has stated that two-thirds of the touch points during the active-evaluation phase involve consumer-driven marketing activities, such as Internet reviews and word-of-mouth recommendations from friends and family, as well as in-store interactions and recollections of past experiences. A third of the touch points involve company-driven marketing.²⁰

The customer journey has now reinvented itself; the brands and organizations are now reorienting themselves to overlay on the newer customer journey. Some of the approaches that healthcare brands and organizations can adopt to align themselves with the new and digitalized customer journey are elaborated ahead. Primarily, the healthcare organizations should focus on automation of technical tasks, this would provide better transparency of operations, enhance efficacy and focus manpower on essential and key activities. Secondly, the HBR article also mentions adopting proactive personalization to be a step ahead of the competition. The adoption of proactive personalization by medical representatives and brand managers can do wonders in catering to the needs of the physicians. As well as gain special attention from the key customers. Thirdly, contextual interaction is believed to be the new difference creator in differentiation between brands. The delivery of relevant content in the right context with accurately tapping of data analytics can improve the quality of interaction as well as change the scenario of pharmaceutical representatives and the physician interaction. Lastly reinventing the customer journey based on innovative approaches. Designing the journey based on experimentation, use of digital analytical tool and algorithms to run successful campaigns. The innovation can also be focussed on adopting a more human approach to address the consumer and aid his journey seamlessly.²¹

Consumer research survey

As a part of a quantitative research, we have surveyed 153 individuals with the objective to map certain decision-making points in the digital consumer journey which is most active

during the pandemic time. Through the survey we have been able to build insights as discussed below.

About 62.7% of the respondents belonged to the age group of 18- 24 years, while 30% of them were of the age group 25- 40 years and also included 7.1% of individuals between 40-60 years of age. The female respondents were 59.5% and 40.5% were males. The demographic background of the respondents also includes 57.5% as students, 19.0% serve the healthcare industry, 17.6% were from other service industry, about 3.9% were business professionals and 2.0% represented homemakers. Out of the total respondent's majority (90.2%) were from urban setting, while 9.8% belonged to rural residential areas.

Consumer analysis is a very parameter before setting foot in the market. Through our market research we have tried to get insights on what consumers really perceive. Also, conducting market research provides a backbone to marketers to better position their brands through statistical evidence rather than following the gut feeling. We believed that COVID- 19 has significantly attracted the public's attention to healthcare issues. It has shed a limelight on the hygiene factors, immunity needs of the body and managing disease conditions with proactiveness. This is backed by the data where 50.9% individuals agreed that they have very well updated their knowledge of family health issues and medical conditions comparing to the health quotient they possessed previously before COVID- 19. Thus, we state that the health quotient of the public is now better than before and shall be more receptive to healthcare information if addressed through pharma and healthcare organizations. This an opportunity to build a great brand image and reputation for the organization.

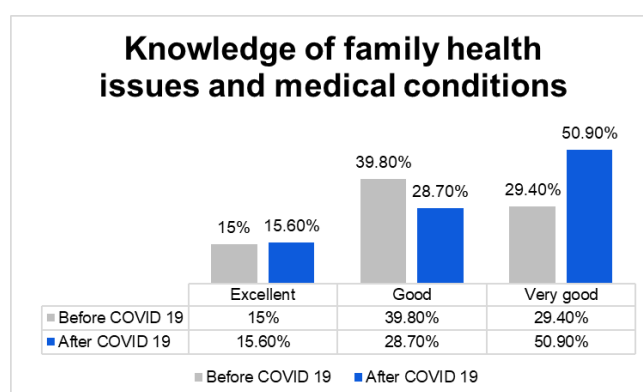
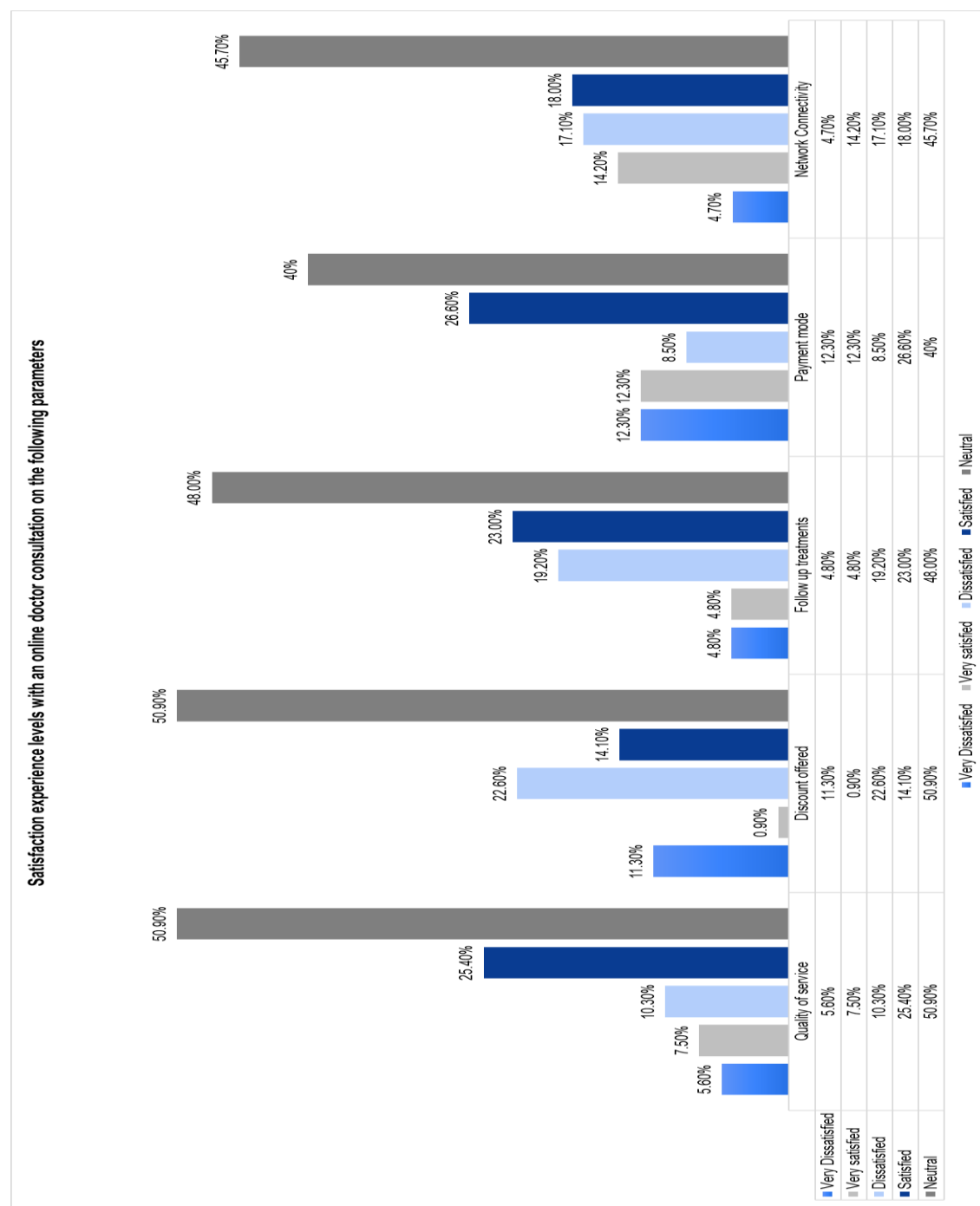


Fig. The rise in health quotient of the public in comparison to pre and post COVID- 19

We have also mapped the consumer experience on online doctor consultation over key parameters like quality of service, discount offered, follow up treatments, payment mode and network connectivity. Out of the total respondents surveyed 69.3% had availed online doctor consultation, the remainder 30.7% did not consult online. The respondents who have consulted online have majorly presented neutral responses, also the customer satisfaction lies mostly between 23 ± 2% range indicating a lot of scope for improvement. The online doctor consultation has gained momentum only after the hitting of COVID-19.



The data collected also suggested 33.3% have rated that Post COVID-19, they would consider doctor consultation 'often or sometimes' in the future, representing no strong commitment. There is probably a huge gap in implementation of online doctor consultation mode which presents an opportunity to explore for healthcare brands.

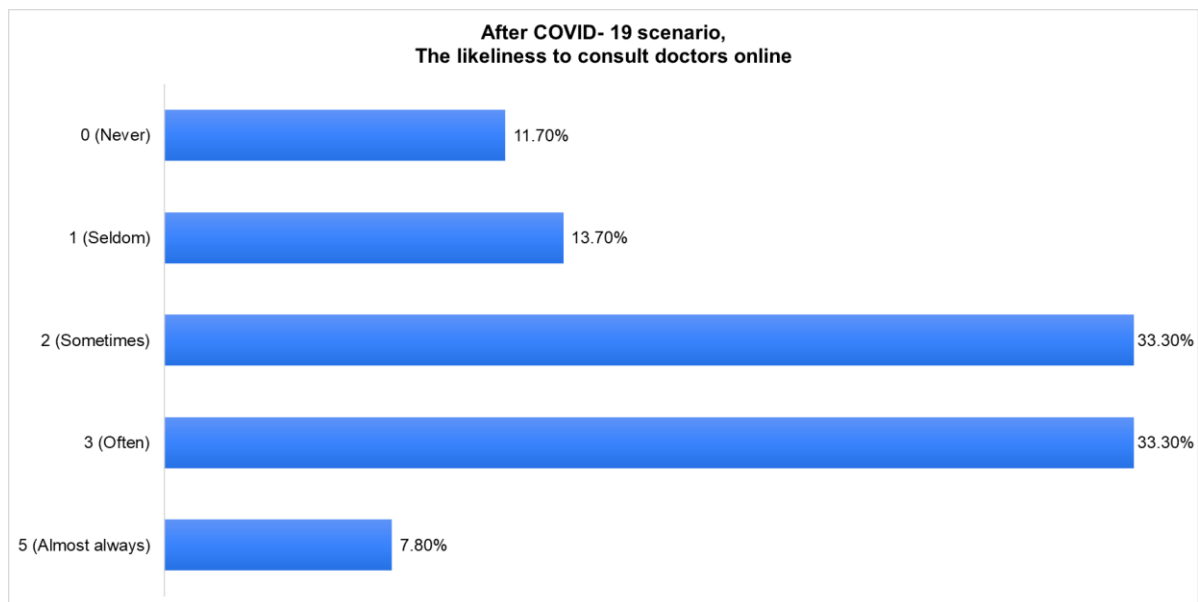


Fig. The likeliness to consult doctors online in post COVID-19 era

The analysis of online pharmacies has performed extremely outstanding in delivering medicines and value to their customers. Around 75.8% of the respondents have ordered medicines online. While 24.1% have not ordered. On considering the Post COVID-19 scenario, there is very high likeliness towards 'often' ordering of medicines.

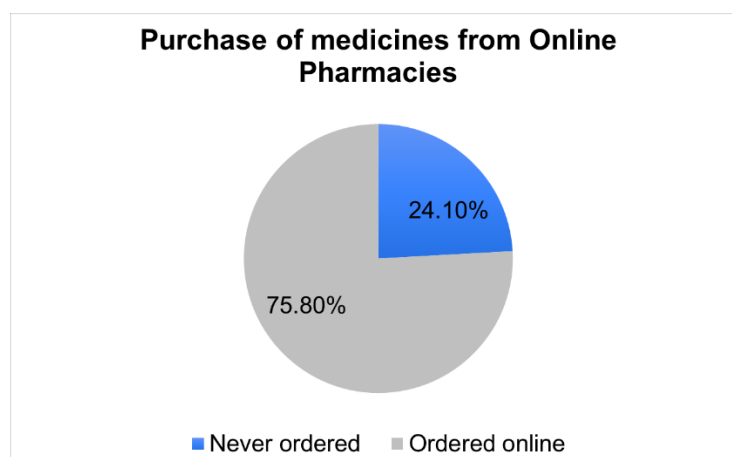


Fig. The purchase of medicines from Epharmacies pre and during COVID- 19

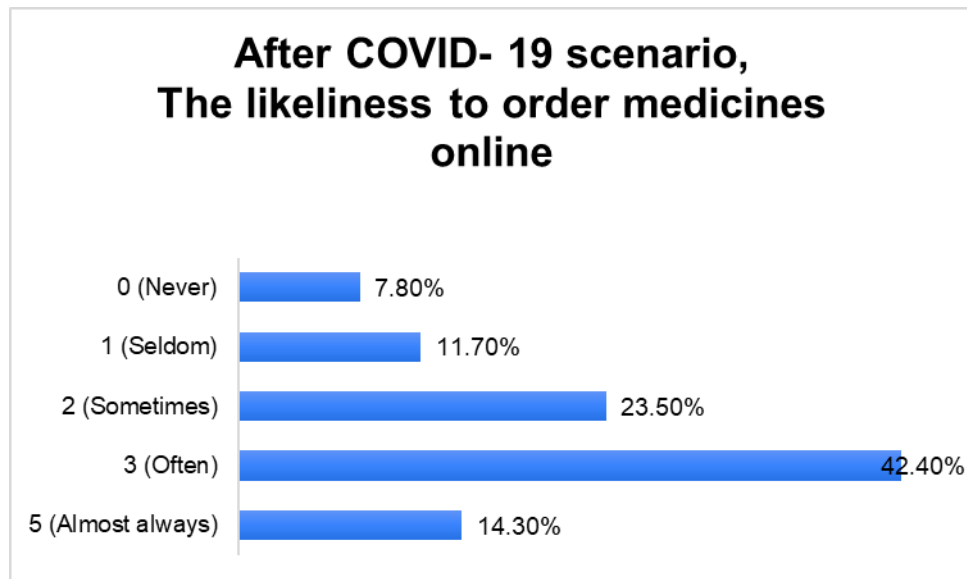


Fig. The likeliness of consumers to order medicines online

The e-pharmacies were evaluated on quality of service, discount offered, delivery of medicines and payment mode. The respondents have displayed higher satisfaction values and neutral opinions as well on majority of these parameters. The 'very dissatisfied' levels of about 6% were noted for these parameters as well. The $22 \pm 3\%$ was the level of satisfaction.

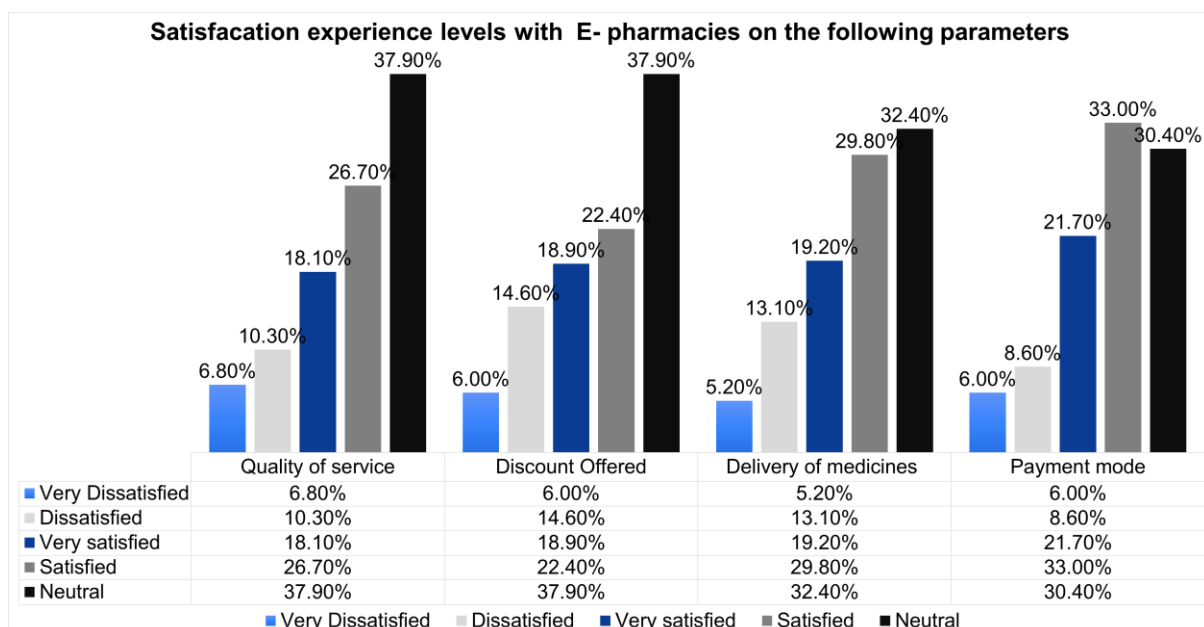


Fig. The satisfaction experience levels with E-pharmacies

The moment of purchase of healthcare brands is influenced by several parameters. We have tried to estimate the factors that gains utmost priority. Undoubtedly, the quality has gained the top most priority, followed by recommendation by doctor and actual experience with the product. We have identified an opportunity through this where the consumer healthcare brands can influence the customer by providing experience with the product through trial samples.



Fig. The factors influencing the online purchase of healthcare brands

The digitalization rapidly growing in the healthcare, the public considers the digitalization of the healthcare facilities should be dependent on the quality of service to be very important with almost 77% responses. While, the cost of treatment is important by 51%. The factors such as availability to public, trust, doctor's approval have also scored above 70% of importance and can be deemed to be the decision-making factors to be considered while digitalizing healthcare facilities.

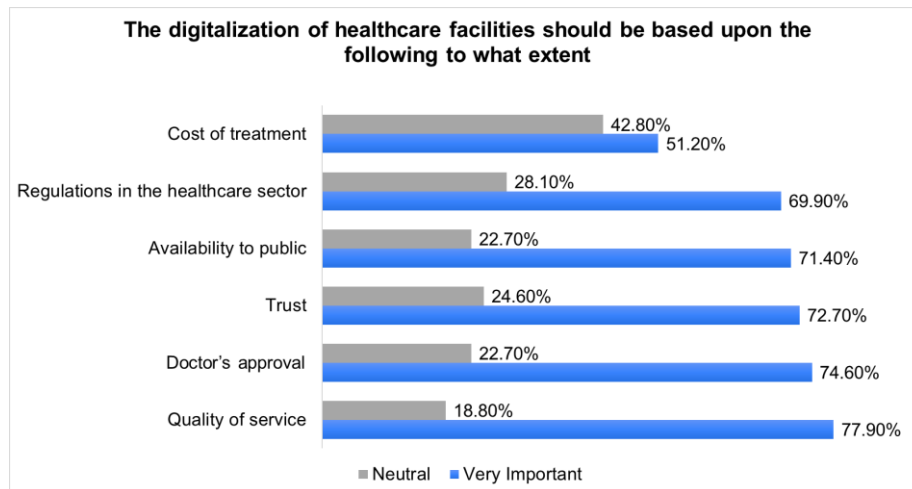


Fig. The factors influencing the digitalization of healthcare facilities

As we have understood that the consumers are actively searching for information, the pharmaceutical companies, brands and healthcare providers have to be very proactive in supporting their patients. We have tried to understand the aspects where consumers are actively searching for information.

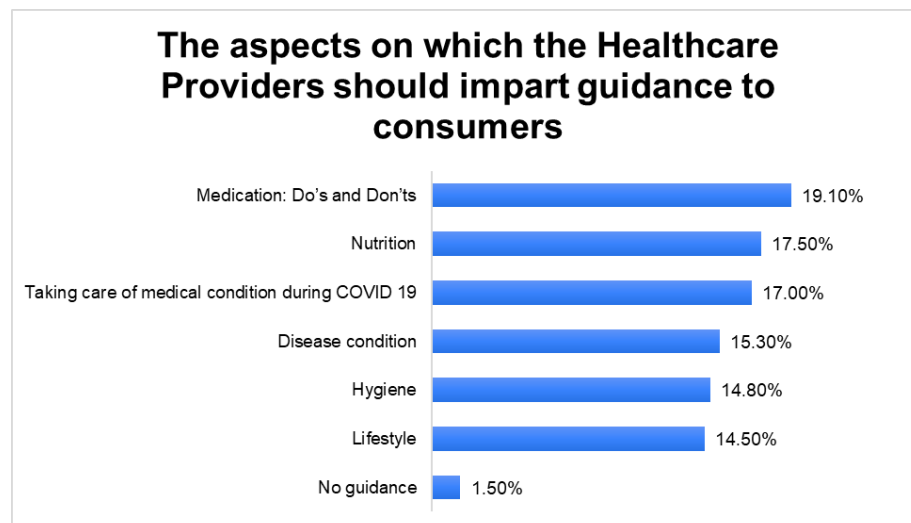


Fig. The aspects on which consumers are actively searching information

The consumers are widely using social media and digital sites. We have tried to map the most frequently used application and websites. Here we have noted that WhatsApp is the most frequently used application (21.1%), followed by Google (20.5%). Marketers can use these insights to build brands by understanding the consumers much better.

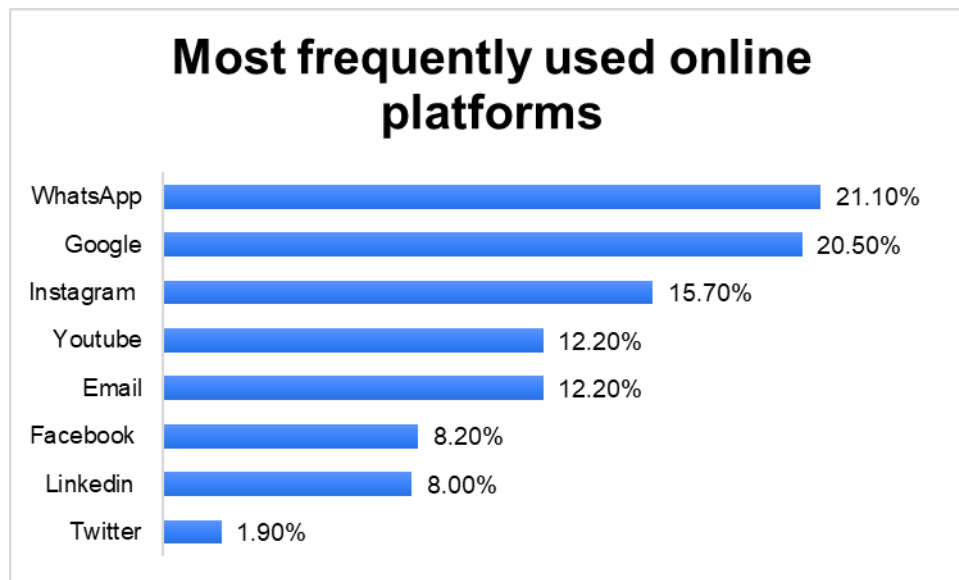


Fig. The frequently used online platform by consumers

05 Stepping into Action

Brand building in the Post Covid era

The COVID-19 pandemic has brought upon several challenges for the consumers and healthcare marketers. The pharmaceutical organizations can play a key role by improving the access to healthcare delivery, developing treatment guidelines for COVID-19 interactions and make provision for critical patient support services. They can deliver this through building new roles for the field forces, repurposing patient engagement channels for education and training and deploy digitalization. These activities would help in motivating employees to serve a broader purpose, create industry coalition and formulate necessary regulatory guidelines.¹⁰

“The survey by ZS stated that the pharma companies should not completely stop all contact rather selectively convert to virtual visits, especially for nurse and patient educator support programs.”¹⁰

The Community MD's prefer to stop all rep contact, while academic and private MDs prefer virtual rep visits.¹⁰

The COVID-19 pandemic has created disruptions in the normal healthcare flow by impacting cross border transportation, supply chains dependent on human contact and inter-state transfer. E-pharmacies have accelerated in growth. Their impact has been noticed on economic and financial stability of the public. There is huge demand for vaccine, self-medication and preventive care. The pharma sector has initiated digital rep interactions through video conferencing. A majority of hospitals are catering to only COVID-19 affected patients.

The post COVID outlook will involve supply source re-distribution, digital supply chains. Also, the spending on wellness and preventive healthcare products such as immunity boosters will notice a rapid increase.⁹

Let's consider some of the marketing and brand building aspects for the post COVID- 19 world.

1. Modulating the brand voice

Considering the pandemic situation, brands have their target markets (consumers/ customers) either under lockdown or are serving the healthcare system at frontlines. They are feeling stressed and vulnerable. The way the brand communicates to them is what would make or break the conversation. The brand communications need to be sincere, positive, empathetic and consistent. The brand message has to be uniform across all channels. Moreover, the key for brand growth lies in maintaining the flow of communication. The pandemic time should be utilized to symbiotic relations by use of media, website and digital channels. Healthcare workers, physicians and patients would interact and engage through the brand actions in maintaining a positive contribution to society during the pandemic; measures that are taken to continuously protect your staff and how to obtain essential disease/product information.

2. Innovative solutions

The hurdles are being faced by everyone in the society at varying amplitude. This phase in the healthcare sector is calling for innovations which assist the consumers and physicians. Brands having a first mover advantage with the right solutions and great implementation will stand out and thus gain limelight by assisting its stakeholders.

3. Time to level up the digital transformation game by the pharma and healthcare organizations

**“We’ve seen two years’ worth of digital transformation in two months”- Satya Nadella,
CEO of Microsoft (in May 2020)**

Prior to Covid-19, digital transformation was already beginning to make significant inroads in the healthcare industry. Covid-19 has fast tracked this development.

The brands can build themselves by upgrading to the need of the hour. The utilization of e-detailing and e- learning to educate the physicians about your brand and assist their continuous medical education and practice. The trick is to utilize the pandemic time and personalize the digital communication by means of human touch. It is essential to use the technology as comfortable with the physicians and avoid spamming them, as it would only build on to discontent and mental burden. Similarly, it is also very essential for brands to note that the sales force is well- equipped trained to address the ‘new- normal’. Brands can also

help the patients through chat bots that can provide guidance on management of disease condition as an aid to physicians.

4. Explore, evolve and excel.

The COVID-19 situation has created a havoc. However, it's for the brands and brand managers to experiment and explore for smart alternatives to aptly position their brands. For example, Burnol cream, an anti-septic ointment was had tactically advertised itself on television, during the Ram Mandir, Ayodhya Bhoomi Poojan moment. The marketing mix is taking a makeover and brands have to be adaptable to grow.²³

In an interview with Financial Express, New Delhi (27 July 2020), Anurita Chopra, area marketing lead- oral health, GSK Consumer Healthcare, spoke about how brands can remain pertinent in the time of Covid-19.

She stated that while everyone is looking beyond the pandemic, the brand communications need to be built care.

“The brands should maintain trust and relevance by creating awareness and being empathetic. It is important to strike the right tone while advertising and marketing and avoid sounding opportunistic.” -Anurita Chopra, GSK Consumer Healthcare

She insisted that just like the GSK consumer healthcare division believes in authentic, genuine and truthful mantra. If a brand is genuine and chooses to be honest with its consumers, everything will fall into place. The marketing has to be authentic and relevant and maintain the connect with consumers because that's how the brands would understand their needs and deliver. The quick adaptation, fast dissemination, repeat and real time feedback is vital to understand the business drivers. Brand building can happen on with three keys steps primarily to stay close to the consumers, design content according to their needs and reducing turnaround time in communicating to the consumer and making most of the situation. The latest Sensodyne campaign #ForTheLoveOf, which was purely designed by social listening of food experimentation and visual imagery is trending is an example of designing content to the consumer needs. Similarly, in the post Covid era, brands should utilise their consumer listening skills and use insights to develop empathetic messaging that will help it gain preference in the long term. The simplest way to gain your consumers' trust is by being relevant to them- both in terms of product offering as well as messaging. The brand should maintain a rhyme with its values, and all the communication should be in line. For the post COVID world, agility is the

key. We need to be agile enough to change course, if needed. Marketers will need to adapt to this changed 'dual' behaviour of traditional and digital marketing mix quickly.²⁴

Brand marketers can identify themselves as guidance providers when the initial patient journey begins, it can be done through preventive guidance and educating the patients. As the consumers move to the diagnosis stage, they can be further guided on the treatments, solving their queries, helping them get the right information and building connection with the right physician. The treatment stage can be addressed through helping the doctors connect virtually with patients. The consumers are eager to move out in the post COVID scenario, thus the in-clinic footfall would increase. However, safety and precautions would be the prime concerns. The pharmaceutical organizations can devise methods to tackle this area and build a good brand image with their stakeholders. Further the dispensing of medicines should be conducted in a seamlessly where the consumer is not burdened, the payment modes are now virtual and the privacy should be leading concern. Also, the availability of medicines especially newer launched brands is the key for brand growth. The disease management phase can be done through encouraging follow ups, addressing nutrition and immunity needs. The healthcare brands have to act as facilitators for their patients and doctors.²⁵

The Purpose-built telemedicine apps are not necessarily the main channel in many markets, where Skype or Zoom is preferred. Some apps have additional features such as drug delivery and long-term disease management, a few notable examples are MyDoc, Doctor Anywhere, Halodoc.²⁵

The customer experience improves when collaborations are done in benefit of the consumers. Recently, Roche diabetes care India had announced their partnership with PharmEasy to bring absolute customer delight to diabetes patients by reducing the waiting time of replacement of devices from 10-12 days to delivery within 3-5 days. The partnership was done with an ultimate focus on customer satisfaction. These are the fundamentals of how brands build themselves over time.

Looking at the consumer healthcare and FMCG segment, in an article by The Economic Times(online), New Delhi have identified that are brand s building for India or Bharat, highlighting the importance to understand the needs and situation of the rural public of India, which provide a higher lot of revenue. The Chief Executive of Dabur told Brand Equity that "We see India as an amalgamation of different clusters with each cluster having distinct

consumer beliefs, patterns and preferences." But Covid-19 has flattened some of the differences between rural and urban.

Mr. Malhotra, the CEO at Dabur says,

"The importance of preventive healthcare and personal hygiene is growing in the consumer's mind. And this is true for both urban and rural India. Also, hygiene products, for personal and household use, are gaining importance. We are seeing rural consumers also adopt branded cleaning products."

The maker of Chyawanprash is directly reaching out to consumers in smaller towns under its 'Immunity at your Doorstep' programme with 'immunity vans' doing rounds of small towns.²⁶

Marketers Insights

A survey was conducted with responses from 52 pharma professionals. With 75% of them belonging to the age group of 25- 40 years. About 15.3% belonged to 18- 24 years; 7.6% were amongst the age group of 40- 60 years and 1.9% were above 60 years of age. The respondents had 25% female population and 75% male population. The respondents belonged to the pharmaceutical and healthcare industry with 7.7% being marketing managers, 21.2% were brand managers, 19.2% were product management team professionals, 23.1% of sales management team professionals. 11.5% were from business development and 17.3% belonged to other pharma and healthcare related profession like academics and healthcare research). These individuals had 38.4% of them having 4- 8 years of experience and a similar percentage for experience of 3 years and above in the occupation sector. About 11.5% had 9- 12 years' work experience. While 7.6% respondents had experience of above 20 years and 3.8% respondents had 13-20 years of the experience.

As we come across the fact that brand building is based on trust. We tried the preference of marketers to the activities through which brands could build trust. Our results have denoted 'Supporting physicians with scientific updates' and 'Awareness campaigns (seminars, discussions, camps)' with maximum preference by 29.7% and 27.6% by the marketers respectively.

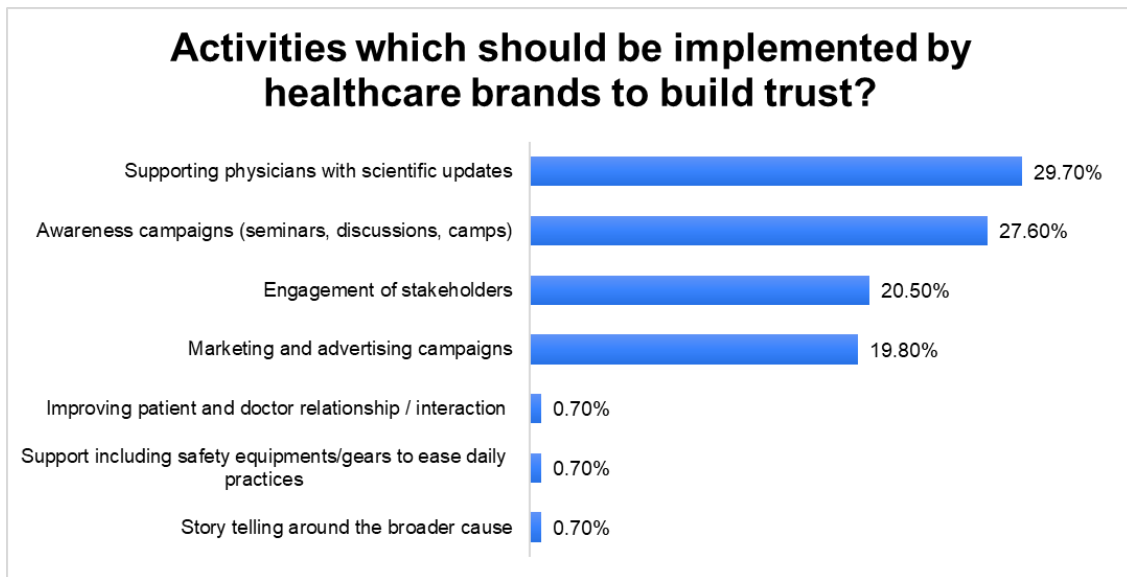


Fig. The preferences for brand building activities as suggested by the marketers

In our process to map the business drivers for healthcare brands, the marketers have revealed that ‘positive experiences on customer journey’ and ‘product attributes’ are the leading brand drivers. Thus, we can state that the brands need to focus on the product and building positive experiences on the customer journey.

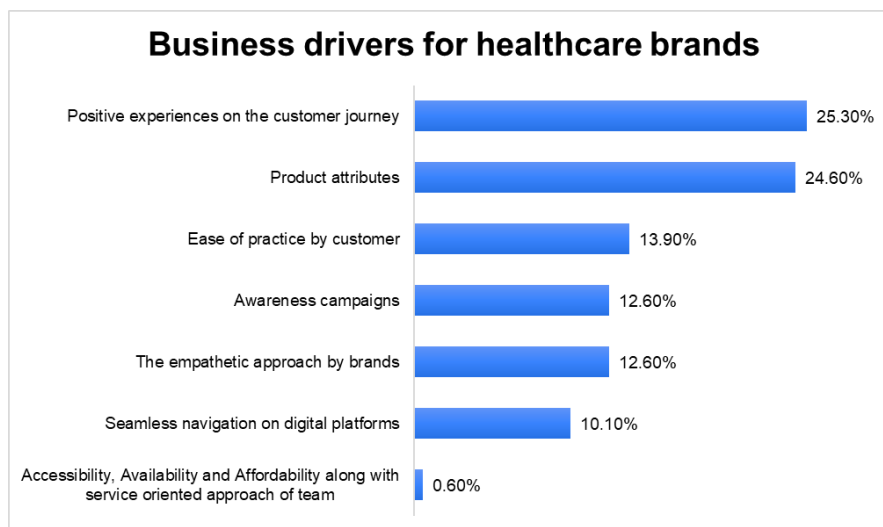
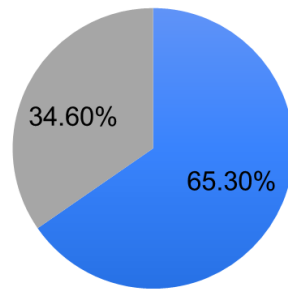


Fig. The attributes that lead to business drivers for healthcare brands

The Post COVID scenario is going to reveal strong modifications in the brand building. Our insights represent that 65.3% marketers agree that major modifications would be seen. While 34.6% agree to that minor modifications would be noted in brand building for the post COVID-19 era.

**Considering the Post COVID 19 scenario,
the extent to which brand-building process
would undergo modifications**



■ Major modifications ■ Minor alterations

While when asked about the need to reimagine the customer journey for the Post COVID-19 scenario, a majority of the respondents have agreed (42.1%), while 36.8% strongly agree to this statement. The pharma business would soon notice major changes in the customer experience journey.

**Agreement with the statement that,
'There is a need to reimagine the customer
experience journey', considering the Post
COVID 19 scenarios:**

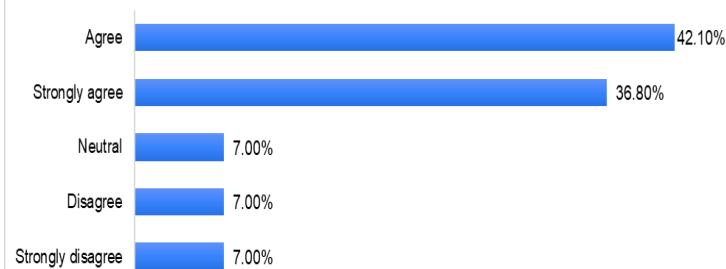


Fig. The agreement towards reimagining the customer journey

The pharmaceutical and healthcare industry is rapidly moving towards digitalization. We have tried to gauge the response as to how digitalization is perceived by the pharma marketers. Around 31.1% have agreed that digitalization approach is dynamic and rapidly changing and 26.6% believe it's absolutely necessary. Around 18.5% have also agreed that it's an

experimentation-based process and would involve a lot of trials and errors especially while brand building.

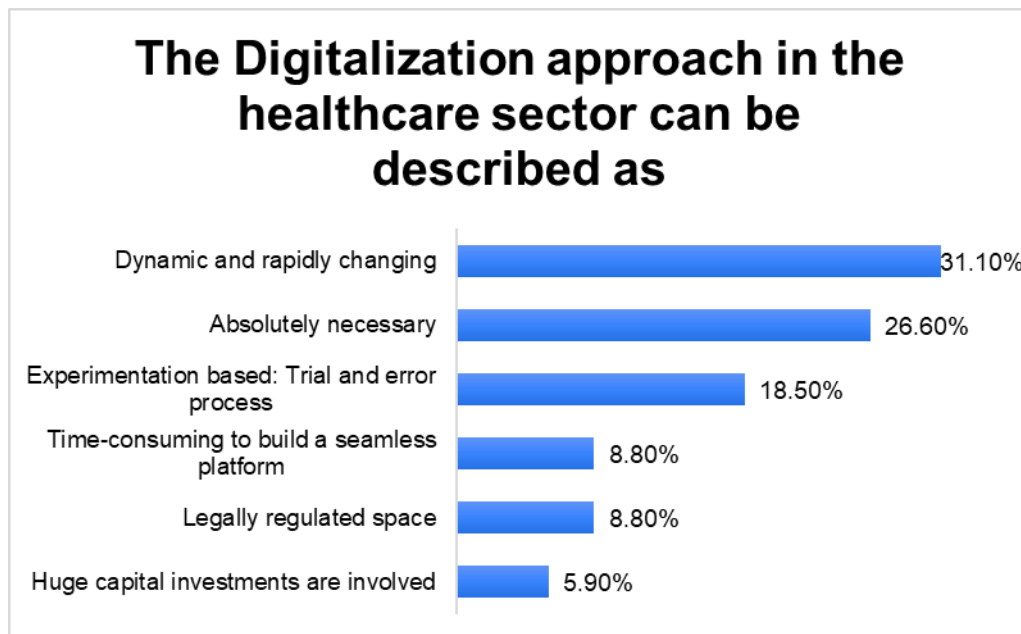


Fig. The perception of marketers towards digitalization in healthcare

The digital switch by brands would largely be led by understanding consumer needs (30%), quality of content provided (28.1%) and customer relationship building (25.4%)

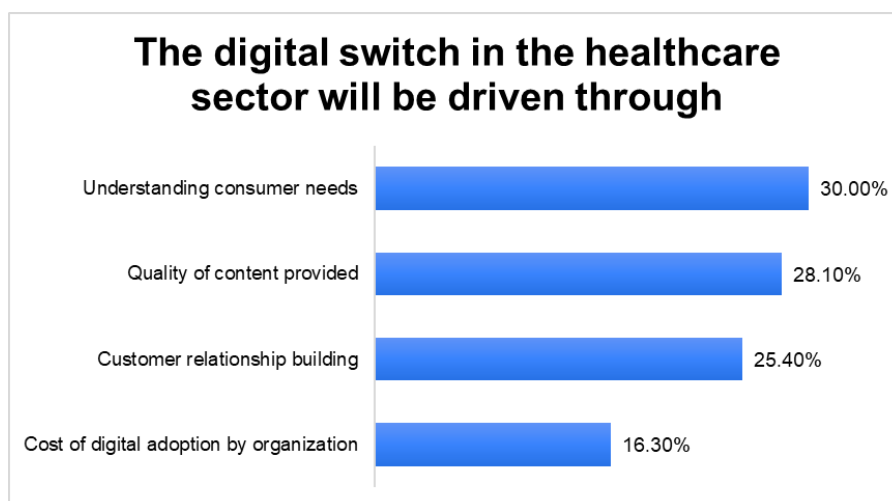


Fig. The digitalization drivers in healthcare industry

The brands have to be focussed while targeting their customers, the respondents have rated digitalization approach (19.4%) to require utmost focus, followed by adapting to the healthcare challenges (18.8%) and more customer engagement (16.9%). Which indicates that brands should built themselves on these aspects to avoid being out of the market competition.

Considering the Post COVID 19 scenario, The utmost focus by brands should be on following aspects



Fig. The orientation required by brands in the Post COVID-19 era

Considering the Post COVID era, we have tried to understand the ratio of physical and digital interaction that brands would be focusing on for their sales force. We clearly have 60:40 ratio as the most preferred option, followed by the 50:50 physical and digital interactions.

Considering the Post COVID 19 scenario, The proportion of Physical: Digital interaction between the Physician and Representative

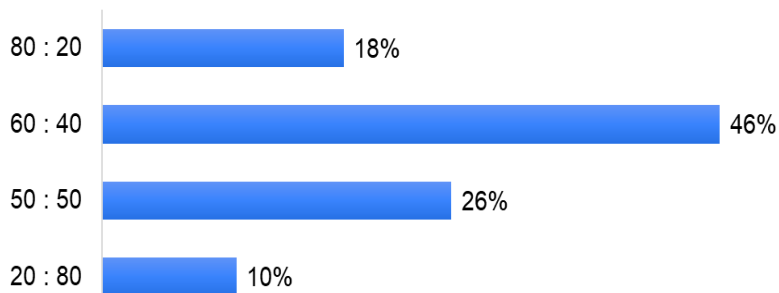


Fig. The Proportion of physical: digital interaction between physician and representative for Post COVID- 19 environment

In conversation with Mr. Mohit Hegde, Brand manager for cardiology segment at Zoltan division of Glenmark Pharmaceuticals. He has put forth light upon practical brand building aspects especially for the prescription products.

He states, prescription brands can build trust with their customers through value creation to the physicians, by enhancing their practice and assisting in improved patient interaction. As the COVID scenario has shown sales of brands of mostly top five segments and that too from existing patient pool. Brands can communicate with doctors to build trust. However direct push marketing through WhatsApp or emails would pester the customers. It is essential to add value through the science focused, right quality content, creative and out of the box thinking and promotions. Having a robust supply chain simultaneously important to avoid substitution of the brand.

On being questioned about the Do's and Don'ts that the brands should remember while focusing on post COVID era is that brands should not engage in drastic changes, as doctors are occupied and they perceive the brand in certain fixed lines. The drastic changes would bring ambiguous perceptions from the physician's end. Also, the according to statistics and reports, the Indian doctors and patients are keen on face to face consultations.

“The post COVID scenario is about experimentation and having the right balance of physical and digital interaction. As it should not so happen that the brands engage themselves in going digital, while the physicians and patients adopt to the traditional methods after the pandemic normalizes. The post COVID scenario is also going to call for newer needs and adapting with the stakeholder's interest.”

Marketers have also noticed that brands are doing excellent with virtual doctor to doctor connect, it is creating a quality discussion platform, it is time friendly and pharma companies can control expenditures as well.

“He has very well elaborated on the way brands can build themselves through Epharmacies, where they can target the consumers with quality offerings in terms of discounts through the e-pharmacy. Moreover, they can also do a lot on the awareness front, providing free dietary consultations and value-added services such as blood tests to their special consumers. They can also redirect the consumers to the brand website and provide more information on medication or disease do's and don'ts.”

The brand building process would undergo modifications however, he suggests that they would be tweaked around the major fundamentals. Also, definitely the presence of digital records is going to grow and thus here brands can try and invest in data analytics.

A key message from his practical experience is that the environment is highly unpredictable, and we have to make wise, ideal and effective allocations in the right direction. Brands should engage in necessary changes; however, a complete turnaround should be avoided.

“The post COVID, physician and patient behavior should be rightly accessed to be in-line with the customers and researched planning in the right direction is the key to successful brand building in the post COVID era.”

Mr. Mohit's real- world driven insights have added tremendous value to this whitepaper. His contribution is the key we would like highlight that digitalization is necessary, but with interests and eye on the consumer and customer behavior.

06 Conclusion

The healthcare situation has suffered severe blows owing to the COVID-19 situation. The economy and the job scenario have been adversely affected. The pandemic has revealed the true state of healthcare situation in India, which certainly needs a lot of infrastructural development. The healthcare worker, physicians, pharmaceutical professional and the frontline employees severing the nation even during these uncertain times have been worthy of much more appreciation and recognition given to them. They have indeed acted as saviors to the mankind by putting their lives in danger and pain.

The COVID-19 pandemic would be an unforgettable event in the history of mankind. We have many bad reasons to correlate the COVID-19 scenario. However, focusing on the good events that took place during this pandemic is the agility that was deployed in the healthcare sector with digitalization and revamping of facilities.

Few of the key aspects, we would like to conclude in the whitepaper are,

- The brand building process is a step by step challenge and has now become even more dynamic. It was more oriented towards real-time data collection, analysis and feedback.
- The brand's have to maintain their process of communicating with the patients, physicians and all other key stakeholders. The communication has to involve relevancy, empathetic approach and build trust through the right modes of communication
- In the Post COVID era, we would still notice uncertainty and fear in the consumer's mind. Hence, it is utmost for pharmaceutical and biopharmaceutical organizations to reimagine the consumer journey, align with the stakeholders' interest, ease the physician's practice, and assist the patients in making better healthcare decisions which would add on to the brand building process

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08 Annexures

Research methodology for primary research on consumer insights:

- Collecting the primary data through questionnaires (Google form- based survey)
- Respondents above 18 years of age having access to internet
- Sample size: 153 individuals
- Sampling method: Random sampling
- Area being covered with justification:
- We were looking forward to gain insights on how the consumers think while making healthcare decisions. The experience of the online services which were maximum used during the lockdown period. Thus, trying to map touchpoints on the virtual consumer journey with online doctor consultation and Epharmacies

Research methodology for primary research on marketer insights:

- Collecting the primary data through questionnaires (Google form- based survey)
- Respondents belonging to the pharmaceutical and biopharmaceutical industry, with main focus on marketing and brand managers, product management team and sales teams. We have also had a conversation with brand manager, Mr. Mohit Hegde from Glenmark to obtain one to one practical insights.
- Sample size: 52 individuals
- Sampling method: Random sampling
- Area being covered with justification:
- We have tried to focus on gaining opinions of marketers, by conducting survey around the fundamentals of brand building. A majority of focus was given to brand building elements and their orientation in the post COVID scenario.

Thank you for your time in reading the whitepaper. We hope that we were able to add value through our brief insights and research.

We are extremely grateful to everyone who has played a key role in guiding and motivating us for making the best for this whitepaper through their contribution.

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