

Report

**Study of
Consumer Audit of
Brand Awareness, Trial
and Usage (BATU) of
SMC Product**

A Research Proposal

**Prepared for:
Social Marketing Company**

**Prepared by:
MRC-MODE Limited**

May 17 1995

STUDY OF
CONSUMER AUDIT OF BRAND AWARENESS, TRIAL
AND USAGE (BATU) OF SMC PRODUCTS

- A RESEARCH PROPOSAL

FOR
SOCIAL MARKETING COMPANY



MRC-MODE Limited
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1. STUDY BACKGROUND

The Social Marketing Company (SMC) which is engaged in marketing non-clinical contraceptive products and oral rehydration salts (ORS) is planning a consumer audit study in 1995 on brand awareness, trial and usage of its various products. It will be a follow-up study of what was done earlier in 1988 and 1992.

The purpose of the repeat study is to ascertain the trend in awareness/trial/usage of different contraceptive brands and oral rehydration salts.

Also, since the SMC products are heavily advertised through mass media, the follow-up study is intended for assessing consumers' levels of awareness/recall of SMC advertisements and their correlations with brand trial and usage.

2. RESEARCH OBJECTIVES

As the brief indicates, the objectives of the follow-up study are:

1. To determine for all SMC and competitive brands of contraceptives and oral rehydration salts :

Present awareness level
Level of trial
Level of regular usage

2. To determine for all SMC and competitive brand advertising :

Awareness level
Recall of message

3. To examine relationship between :

Brand awareness and trial/ regular usage
Advertising awareness and brand awareness/
trial/ regular usage

Also

4. To identify the trend in brand awareness/ trial/ regular usage of SMC/ competitive brands, by comparing the past data with the follow-up study findings.

Additionally, this study is also required to look into the behavioral issues related to different brands of condom/ pills, unearth the consumer attitudes, motivations in the choice of specific brands and identify the major inhibitions in consumer mind vis-a-vis other brands.

3. INFORMATION NEEDS

The information areas to be covered in the present study are as listed below.

- i) Awareness about condoms/ pills/ ORS
- ii) Awareness of various brands of condoms/ pills/ ORS
- iii) Awareness sources
- iv) Trial levels for different brands and continuing (regular) usage
- v) Frequency of use and buying pattern/ habit
- vi) Source of supply
- vii) Level of knowledge regarding the correct use of brands
- viii) Awareness of advertising on brands of condoms/ pills/ ORS
- ix) Message recall and sources
- x) Method/ brand switching pattern
- xi) Period of use of current/ previous methods/ brands
- xii) If not using SMC brands: reasons
- xiii) Availability of media durable
- xiv) Media habits

With regard to contraceptives, the information areas will also cover :

- * Users' perceptions of different brands (condoms/pills)
- * Thoughts & feelings and attitudes

4. RESEARCH METHODOLOGY

The follow up study will be based on a sample survey among target respondents from all over Bangladesh.

Since the purpose of the study is primarily to ascertain the awareness/ trial/ usage levels of different brands of contraceptives and oral rehydration salts, the research route by necessity will be quantitative.

The quantitative approach is applicable for information generation on both contraceptives and oral rehydration salts. However, with regard to contraceptives the study has a broader scope, extending to the behavioral issues related to different contraceptive brands. The data need for this is purely qualitative, the arena encompassing brand perceptions, attitudes, motivations for specific choices and inhibitions vis-a-vis other brands. A qualitative approach will be needed to collect data on the above areas.

Therefore, for the study on contraceptives the research capsule will be both quantitative and qualitative

Our specific recommendations will be :

1. To undertake a pilot study in the neighbourhood of Dhaka for first hand assessment of contraceptive users' (both men & women in urban & rural areas) thoughts and feelings vis-a-vis different brands of condoms as well as pills and reasons for specific brand choices.
2. To use the preliminary information thus gathered in two ways :
 - a) Developing guides for In-Depth interviews to be carried out in the survey centres (Qualitative Research)
 - b) Generating attitude battery to be covered in the quantitative survey questionnaire for assessing consumer associations of different brands (condoms/pills) with the respective attitude statements.

While the qualitative research will help understand consumer mind in depth vis-a-vis their feelings and attitudes to different contraceptive brands, responses derived in the quantitative survey regarding users' associations of different brands with the various attitude statements will help identify for each brand:

- i) The image strength
- ii) The salient image features
- iii) The distinctive (unique) features if there are any

Also,

- iv) The motivational features in favour of the specific brand

Thus, quantification of the qualitative data will also be attempted, in addition to the qualitative feed-back from in-depth interviews, to understand the salient feelings and attitudes to different brands of condoms and pills.

Image Strength

The image strength of a brand has two components :

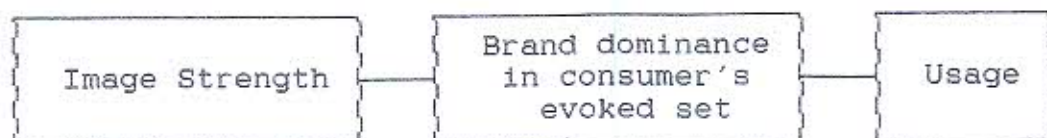
Image Width
Image Intensity

Percentage of consumers associating a brand with at least one positive attribute of the brand is the Image Width of the brand; while, the Image Intensity is the average number of positive attributes which are associated with a brand.

$\text{Image Strength} = \text{Image Width} \times \text{Image Intensity}$

The higher the image strength of a brand, the more favourable is the overall image of the brand.

Also, the higher the image strength of a brand the higher is likely to be the brand's dominance in consumer's evoked set (brands in consumer's mind space), which leads to brand trial and eventually to continuing usage.



Such relationships will be examined separately for each contraceptive brand, to help identify the exact situations vis-a-vis the SMC brands.

Action strategy for a particular brand can be decided accordingly.

So, the research techniques which we plan to employ for the study on ORS and contraceptives are :

ORS	:	Quantitative
Contraceptives	:	Quantitative
		+
		Qualitative (including quantification of qualitative data)

5. SURVEY METHODOLOGY

5.1 Coverage

As indicated earlier, the survey coverage is all Bangladesh - urban and rural, for both contraceptives and oral rehydration salts.

5.2 Target Audience

The target audience for the study on contraceptives will comprise married men and women in the reproductive age bracket.

For ORS, theoretically all households - in particular households having children under 5 years of age, should be the relevant target group considering high incidence of diarrhoea among children in the above age group.

The 1988 study, however, considered a common population universe for both contraceptives and ORS - namely married men and women under 45 years of age. Undoubtedly, this segment will cover the large majority of the prospects for ORS also. Hence, and also for reasons of compatibility of results vis-a-vis the past findings, we would suggest to retain the 1988 approach - that is, defining the target audience as married men and women in the reproductive age group.

There are other advantages of having the target audience common for both contraceptives and ORS. Information on both can be gathered from the same respondent; so the interviewing cost will come down considerably vis-a-vis the expenses which are to be incurred if information on contraceptives is collected from one set of respondents and that on ORS from a second set.

5.3 Sample Design

The study will be based on a sample survey of target respondents representative of entire Bangladesh - urban and rural.

The first requirement, therefore, is the selection of survey centres - urban and rural, which would ensure adequate geographic dispersion.

With this objective in view, we propose selection of survey centres from all the previous four divisions of Bangladesh - namely, Dhaka, Chittagong, Khulna and Rajshahi. That is, the divisions will serve as the first stage of stratification for sampling.

Each of the four divisions will then be further stratified into urban and rural.

The sampling would really start from within each division separately for urban and rural.

5.3.1 Urban Sampling

Within each division, the divisional town will be treated separately from other district towns, because of high concentration of urban population in the divisional town.

For urban areas, we propose a total number of 20 urban spots.

	<u>% of urban population</u>
Divisional towns	52.0
Other urban areas	48.0

	100.0

The urban population ratio of divisional towns to other urban areas is approximately 50:50. So for ensuring representativeness we would suggest 10 urban spots from the divisional towns and 10 spots from other urban areas.

The allocation of urban spots over the divisional towns is suggested as under :

<u>Divisional town</u>	<u>% of population</u>	<u>No. of spots</u>
Dhaka	59.4	6
Chittagong	25.5	2
Khulna	9.8	1
Rajshahi	5.3	1
	-----	-----
	100.0	10

The allocation is approximately in proportion to population sizes of the respective divisional towns.

The urban spots to be selected within each divisional town will be 'mahallas'. These will be selected at random making use of the PPS Random Sampling method - that is, the selection probability of a sample mahalla will be in proportion to the population size of the mahalla.

With regard to other 10 urban spots, the primary sampling units (PSU) will be 'districts'. Each spot will be selected from a separate district town.

The allocation of sample districts over the four divisions is indicated below.

<u>Division</u>	<u>%of urban population, excluding divisional towns</u>	<u>No of district</u>
Dhaka	32.3	3
Chittagong	19.3	2
Khulna	20.6	2
Rajshahi	27.8	3
	-----	---
	100.0	10

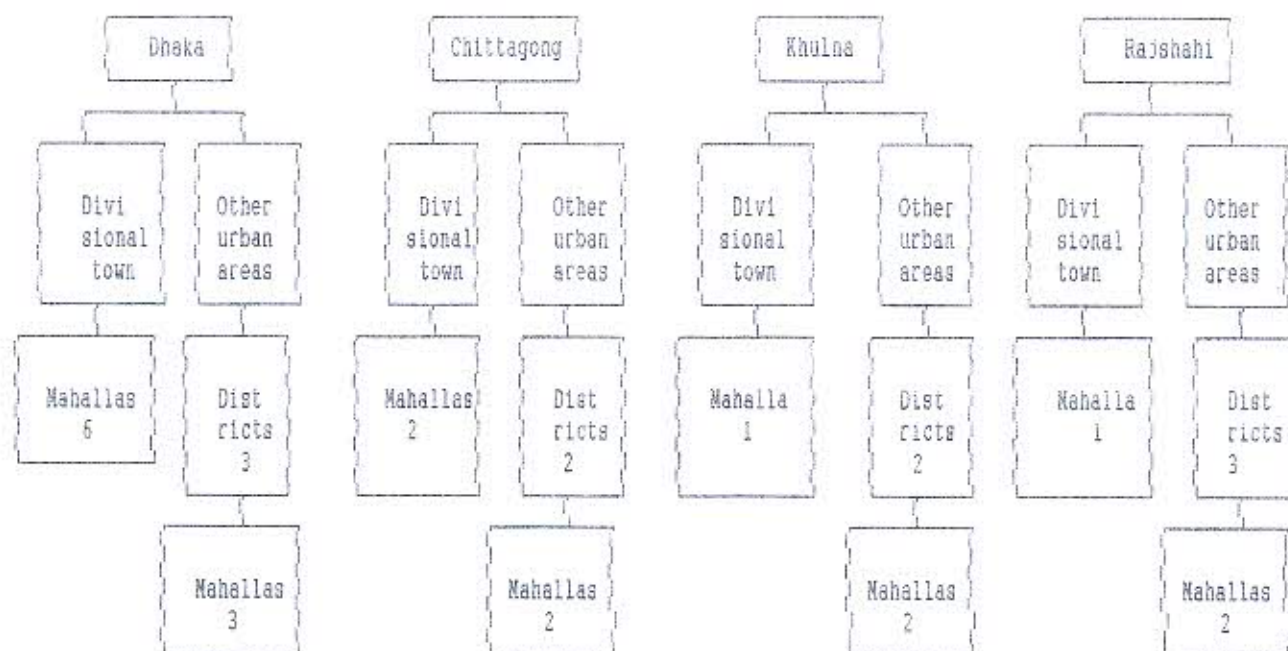
The allocation of number of districts over the four divisions is again broadly in proportion to the urban population sizes (excluding the urban population of the divisional towns).

The secondary sampling units (SSUs) within a district will be the mahallas. Only 1 mahalla will be selected from within a district town.

The selection of the mahalla within district will be based on PPS Random Sampling method.

Diagrammatically, the sampling design proposed for urban areas is as under :

(Divisions)



5.3.2 Rural Sampling

The primary sampling units (PSUs) within each division will be 'thanas'.

The sample thanas within a division will be randomly selected, the selection probabilities of the sample thanas being proportional to the rural population sizes of the respective thanas.

The secondary sampling units (SSUs) within each sample thana will be 'village'. The sample villages within the thanas will also be selected by PPS Random Sampling method.

No. of Thanas/Villages

We suggest a total number of 20 sample thanas, to be allocated over the divisions as indicated below.

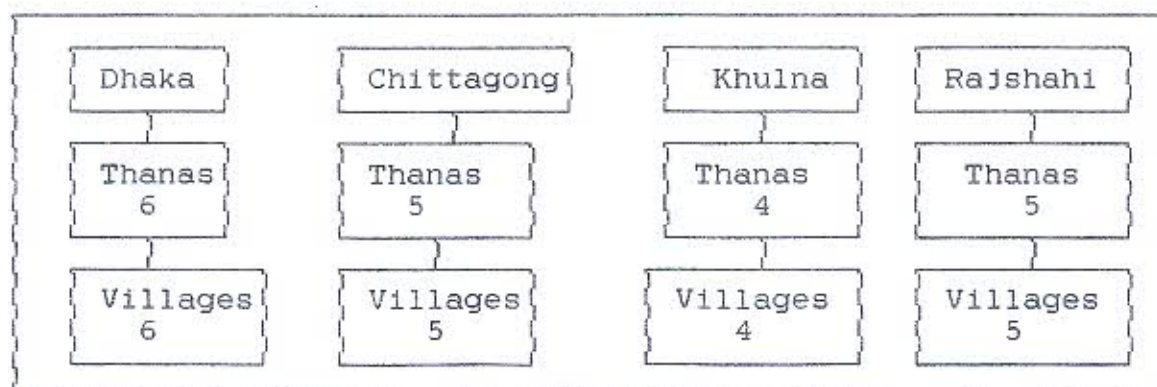
<u>Division</u>	<u>% of rural population</u>	<u>No. of sample thanas</u>
Dhaka	28.7	6
Chittagong	26.7	5
Khulna	19.4	4
Rajshahi	25.2	5
	-----	--
	100.0	20

The allocation of thanas is based on the rural population sizes of the divisions.

We propose selecting only 1 sample village within each selected thana. The selection will be again based on PPS Sampling method.

Schematically, the proposed rural sampling is as under :

(Division)



The allocation of mahallas and thanas/villages over the four divisions is not exactly in proportion to universe size of urban/rural population. This means that at the stage of analysis proper weightages will have to be assigned to the respective divisions while projecting the findings at the national level.

5.4 Sample Size for Target Respondents

A total sample of 1200 target respondents is proposed, with break down as under :

	<u>Urban</u>	<u>Rural</u>	<u>Total</u>
Men	300	300	600
Women	300	300	600
	---	---	---
	600	600	1200

Data analysis will be required separately for men and women. Hence, a minimum sample of 300 respondents is recommended for each sex group.

With a lower sample size, statistical accuracy of results will be in question, taking into account the sampling errors which are associated with any sample estimate.

Since the sample respondents are not being drawn strictly at random using a sampling frame for the entire universe (Bangladesh urban/rural), some design factor is required to be allowed in deciding on sample size. keeping the design factor element in mind, a minimum sample of 300 will be required in order to achieve 95% confidence level for any % estimate within $\pm 5\%$ error. Hence, the above suggestion on sample size.

We proposed a fixed sample quota for mahalla/village. The quota is as under :

	<u>Men</u>	<u>Women</u>	<u>Total</u>
Each mahalla	15	15	30
Each village	15	15	30

5.5 Selection of Target Respondents

Within each selected mahalla/ village the procedure for selecting the target respondents will be as under.

The mahalla/ village will be divided into 3 sub-areas, and the sample quota by men and women will be allocated equally over the three sub-areas. So, in each sub-area the sample quota will be 5 male respondents and 5 female respondents.

In each sub-area, a land mark will be located and a route-map of visiting households in the sub-area, starting from the land mark, will be prepared. Two starting households will be selected randomly from the first 5 households on the pre-decided route. A male interviewer will proceed from one starting household and a female interviewer from the other. From their respective starting households they will contact every fifth households on the pre-decided route to identify eligible married couples (wife under 45 years of age) living together in the same household. If an eligible couple is found the male interviewer will interview the husband and the female interviewer the housewife. In case of more than one couple in a household, one couple will be selected at random for interviewing the husband/housewife.

In this manner, both the investigators will continue their interviews till their respective quota for the sub-area are completed.

We are not suggesting total listing of all eligible couple in the mahalla/ village at the first stage and then random selection of the sample quota for interview. That will make the survey very expensive. However, with the proposed procedure randomness is by and large ensured, since the investigators will be contacting households systematically with a pre-decided interval. They will not be interviewing any one they choose.

5.6 In-depth Interviews

The in-depth interviews are for qualitative probing on consumers' attitudes towards different brands of contraceptives.

We recommend a total of 6 in-depth interviews in each spot (mahalla/village), 3 among men and 3 among women so, altogether 120 depth interviews will be undertaken in urban areas and 120 in rural areas.

(In-depth interviews)

	<u>Urban</u>	<u>Rural</u>
Men	60	60
Women	60	60
	---	---
	120	120

The depth-interviews in a spot will be undertaken after the main interviews are completed.

The respondents for in-depth interviews will be selected randomly from those interviewed for the main survey.

5.7 Pilot Study

This will be necessary for developing guides to be used for in-depth interviews. The Pilot Study will be undertaken in the neighborhood of Dhaka, covering both urban and rural areas.

The scale of the Pilot Study will be as under :

(No. of interviews)

	<u>Urban</u>	<u>Rural</u>	<u>Total</u>
Men	5	5	10
Women	5	5	10
	---	---	---
	10	10	20

The probing areas in the Pilot Study, will cover only the attitudinal aspects vis-a-vis the brands of condom/pills which the respondents are aware of. For the Pilot Study, the questionnaire to be used will be totally open-ended.

6. DATA COLLECTION/MANAGEMENT

6.1 Instruments

The data collection instruments will comprise :

- Questionnaire to be used for interviews with target respondents (main survey)
- Guides for in-depth interviews

The survey questionnaire will be designed to cover the study objectives and the information needs, making use of structured /semi-structured questions. The questionnaire will have two parts- one for family planning method and the other for oral rehydration therapy.

The questionnaire will be pre-tested among men and women belonging to the target group. The pre-testing will be done in the neighborhood of Dhaka, covering urban and rural areas. The pre-testing will be carried out by male and female investigators with considerable field experience.

For the qualitative research part, the depth interview guides will be developed on the basis of a Pilot Study to be conducted in urban and rural areas in the vicinity of Dhaka city.

6.2 Field Operation

The field personnel for this project would be selected from our existing panel of senior interviewers/ supervisors/ controllers.

A detailed training/ briefing session for the field interviewers/ supervisors/ controllers will be organised before starting the field work. The final selection of the interviewers will be made based on their mock interviews and field test performance.

The normal control measures, like accompanied calls and back checks, will be taken to ensure the quality of field work.

As per our usual system, 20% of the interviews done by each interviewer will be back checked.



7. DATA PROCESSING/ANALYSIS

7.1 Data Processing

All data will be computer analysed.

Filled in questionnaires received from the field will be thoroughly scrutinised and properly coded by our own analysis personnel, before passing over for data entry.

After data entry is done, all data will be thoroughly checked by way of listing and comparing all data with those in the filled-in questionnaires, to eliminate any error.

The tabulation plan will be prepared in consultation with SMC, and the software will be developed by our own programmers to meet the specific needs.

7.2 Weightages for Analysis

All data will be weighted at the tabulation stage.

The weightages will be assigned at the divisional level to match the sample with the universe size of target population in the respective divisions.

This will be done separately for urban and rural.

7.3 Special Analysis

Special computer software will be developed to analyse the data on contraceptive brand/method switching.

We would also propose special analysis for quantifying the impact of advertising exposure on awareness generation/ trial/ usage.

7.3.1 Switching

Apart from standard cross analysis of previous methods/brands by methods/brands currently used, the actual period of usage of respondent's current and previous methods/brands can be effectively used to build up a model for identifying the trend in usage levels of different methods and also of different brands within a method (condom/pills). This kind of cross sectional analysis will provide a better insight into consumer's changing preferences for methods/brands than studying the trend by comparing the data for different study periods. Assessment of trend by the latter method needs to take into account the sampling errors as well in order to draw any meaningful conclusions.

7.3.2 Advertising impact

Taking a hypothetical example, the normal procedure for assessing the impact of advertising on say awareness about a particular brand, is to prepare a two-way table of the kind shown below:

	<u>Exposed to advertising</u>	<u>Not exposed</u>	<u>Total</u>
Aware	80	90	170
Not aware	120	210	330
	---	---	----
	200	300	500

- and carry out a 'chi-square' test to find out whether awareness is significantly associated with advertising exposure or not.

In case such an association is found to be positive, the actual contribution of advertising towards generating awareness can also be quantified. The contribution can be estimated as under.

Total number who aware = 170

We want to estimate what percentage of it is because of advertising.

For that, let's consider the % awareness among the 'exposed' and 'not exposed' groups.

	<u>Exposed to advertising</u>	<u>Not exposed</u>
Aware	80	90
Not aware	120	210

Among those who are exposed to advertising - a total of 200, 40% are aware. But even without being exposed to advertising 30% are aware. So, of the 200 who are exposed to advertising, 10% only can be said to be aware because of advertising.

Therefore, the ad stimulated awareness = $200 \times 10\%$
= 20

In the previous table we note that a total of 170 are aware.

Therefore, the ad contribution towards total awareness =
 $(20/170) \times 100$
= 11.8%

Ad contribution towards awareness can be derived brand by brand, to examine which type or types of advertising contribute more towards generating awareness. Communication implication of such findings is undoubtedly very significant.

8. TIME SCHEDULE

The total project will take about 17 weeks to complete.

Activity-wise the break down is as under:

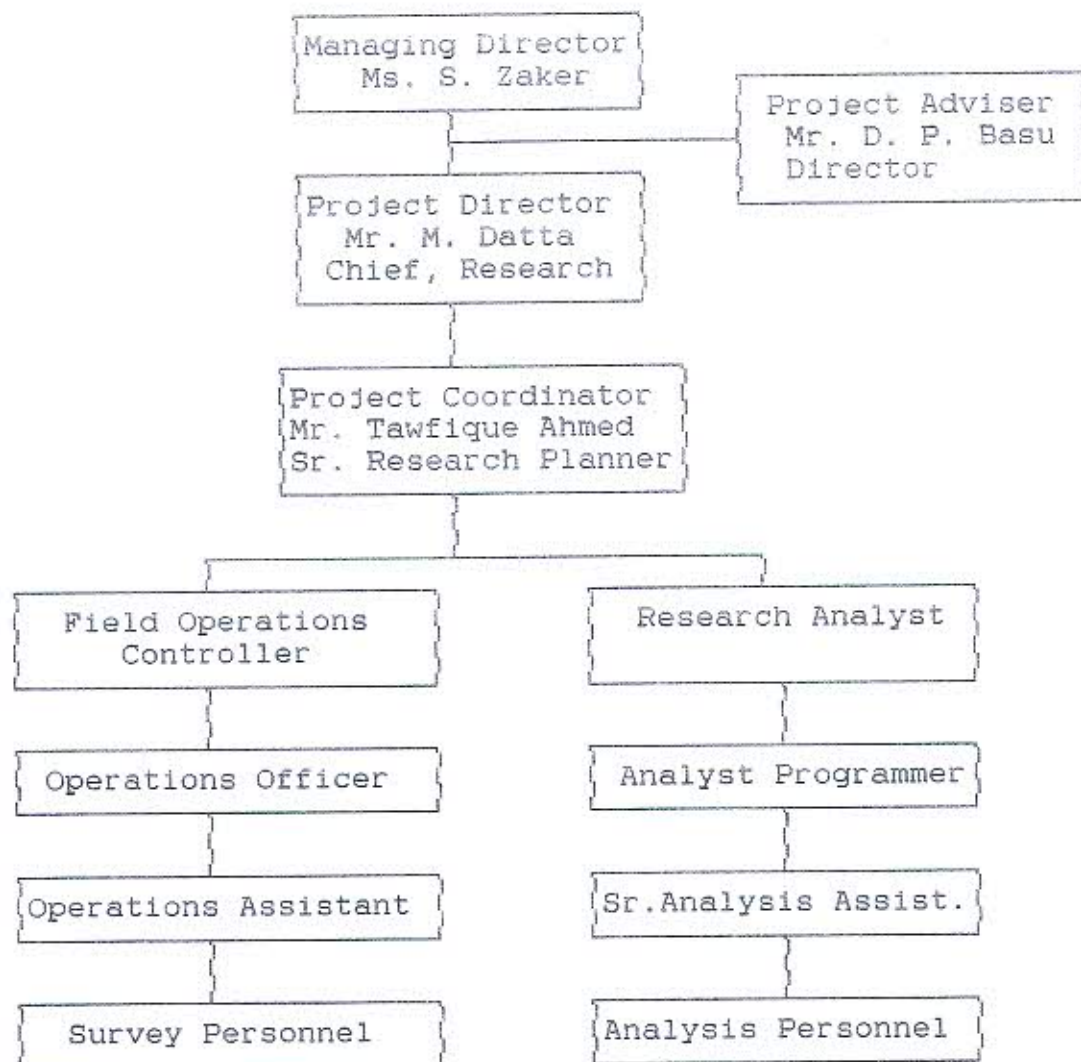
	<u>No. of weeks</u>
Questionnaire development/ Pre-testing/ Qtnr. Finalisation	4
Field staff briefing/ Training Mock calls/ Field tests	2
Field Interviews	5
Planning output tables/ Data processing/ Analysis	4
Draft Report	2

Total:	17 Weeks

9. PROJECT MANAGEMENT

The key personnel for the study will be taken from among the regular professional staff of MRC-MODE Limited, headed by the Managing Director.

9.1 Organogram



Mr. D.P. Basu of MODE Research (Pvt.) Ltd., India, will be associated with the project as adviser. His resume is enclosed.

MRC-MODE Ltd is a joint collaboration research company. Mr. D. P. Basu who is one of the directors of MRC-MODE Limited is an expert on research in Family Planning. As his resume would underscore, Mr. Basu has headed the Demographic Health Study (a USAID funded project) known by the name - National Family Health Survey conducted in 1992 for the West Bengal Sector in India.

Apart from being a director, his working status - that of having a work permit sanctioned by the GOB, makes him eligible to give his time as advisor whenever required.

9.2 Job Descriptions of the Project team :

Managing Director: She will act as the administrative head of the research team. And she will maintain liaison with internal and external key personnel, as and when necessary, for coordination of all activities.

Project Director: He will work as the research head of the team. He will oversee all works relating to research design, questionnaire design, analysis and interpretation of the research findings and finally preparing the final report.

Project Coordinator: He will be responsible for all kinds of preparatory functions of the research; look after the data requirements, scheduling activities, developing questionnaire, preparing tabulation plan, analyzing data, and preparing the report under direct guidance of Project Director.

Operations Department: All the implementation and field related works (recruitment, field survey organization, coordination, quality control checks etc.) will be looked after by the operations department.

Analysis Department: All kinds of data processing work (coding, data entry, tabulation, computer works etc.) will be undertaken by analysis department. In addition, selection of tabulation personnel or computer operator will be under analysis department. And computer programmer will design programmes according to the analysis plan.

Project Advisor: In his advisory capacity he would be personally involved with the project in the Planning Stage when the questionnaires and depth-interview guides are finalised, in the Analysis Planning Stage and finally at the time of Report writing. Apart from this, the Project Advisor would be available for any kind of interaction that might be felt necessary by the sponsors of the research project.

10. RÉSUMÉ OF PROJECT TEAM

Sara Zaker
Managing Director

M.A. Honours

Over 10 years experience in Research Management

Specialises in Qualitative Research

Active experiences in research on Social Marketing

And in Research amongst Women and Their World

Debi Prokash Basu
Project Advisor

MBA from IIM Calcutta

Over 20 years experience - In management consultancy, evaluation study, market research, communication research and rural studies

Involvement with large scale family planning and child health projects - In India and neighbouring countries

Consultant on communications to Govt. of Tamil Nadu for Integrated Nutrition Project

Headed the DHS project for the West Bengal Government known by the name National Family Health Survey (1992)

Member - European Society for Opinion and Marketing Research (ESOMAR), and Indian Association for the Study of Population (IASP)

Author of several published papers including one read at the 41st ESOMAR INTERNATIONAL CONGRESS at Lisbon

Manoranjan Datta
Chief, Research

B.Sc Honours and M.Sc in Statistics from Calcutta University

Over two decades of experience in Market Research

Statistician, Indian Statistical Institute, Calcutta (1961-67). Was involved in designing and statistical analysis of various socio-economic survey projects (National Sample Surveys) commissioned by the Government of India.

Project Director, Marplan Pty Ltd, Sydney (1968-70). Primarily associated with consumer and industrial market research. Also specialised in advertising research (use of Eye camera for testing advertisement effectiveness - press/ TV).

General Manager, Consultancy & Research, Calcutta (1971-82). Associated with many all-India market surveys for prediction of demand for various consumables, apart from day to day commercial research (Brand attitude studies, market segmentation etc.)

Media & Research Director - ASP, Delhi (1983-88). Primarily involved in Advertising Strategy Planning, and advertising research. An inter-media comparison study (consumer response related) conducted for Nestle (making use of Multi Media Response functions) was a pioneering work done while with this agency.

Director, Strategy Planning, MEGACORP International (P) Ltd, Delhi (1989-90).

Vice-President (Media Services), AJAX Advertising Ltd, Delhi (1991-92).

While with Megacorp/Ajax, developed many Quantitative Media Models (Evaluation/ Selection Models) for effective use by advertising agencies. A series of articles on these models appeared in Brand Equity (Economic Times).

Handling research in Bangladesh for over 2 years.

has had extensive training with MRC-MODE in -----

Worked with BEXIMCO Group before joining MRC-MODE

