



## PART 1 CROSS-SCREEN ADVERTISING

A recent survey by Nielsen found that up to 70% of Americans now own a mobile device and that most of those mobile devices are smartphones. Healthcare marketers should take note because behavioral trends like these suggest new ways for us to interact with people and share timely and relevant information with them.

The Nielsen study illustrates a tipping point in the US as well as underscoring an enormous opportunity for the healthcare industry to reach customers in targeted and meaningful ways. The technology is advanced and ubiquitous, and it allows us to engage in places and at points we could never have imagined only a few years ago.

Consumer goods and automobile companies use mobile platforms today to interact with customers, offer purchase incentives or invite them to try out new products. BMW, Audi and Lexus all use the mobile platform to engage with potential buyers and arrange a test drive.

Retail outlets use near-field communication (NFC) and iBeacons to notify customers on their mobile devices about sales and special promotions when they are in the vicinity of the store. Companies like Unilever and Procter & Gamble are constantly tinkering with mobile ad formats to reach their customers.

But the pharmaceutical industry lags behind. Few pharma marketers focus on the mobile environment beyond a couple of apps or the e-detail for sales representatives, despite the fact that mobile devices are the primary means of communication for most people.

A recent study by inVentiv Health's Digital + Innovation group found that of the 20 brand.com websites surveyed, only four were even accessible on a mobile device. This must change, as more and more customers are turning to these sites for information, but they're no longer sitting at their computers when they do so.

So while 85% of traffic is mobile, our industry is delivering the experience of looking up desktop information on a less-than 1080-pixel display. The marketing message is being lost. It is important to think through our campaigns in a coordinated and holistic way in place of the specific device- or product-oriented tactics that we have been using.

To get the most benefit from the new multi-screen environment, marketers need to carefully consider their audiences and how they interact with all their devices. I call it "creating content for distracted use," because in this multi-screen environment, the common experience is one of distraction.

People use smartphones while they watch TV, or check email and access the internet on a tablet while they wait for an appointment or for a train. It is critical to ensure consistency of brand and message along these distraction points.

The other two factors to consider are relevance and timeliness. Studies are available to help marketers understand the rate and frequency of individuals' interactions with their mobile devices at different times of the day. They follow a familiar cycle of content consumption.

People primarily watch television and read newspapers from 7 a.m. to 10 a.m. and then again from 6 p.m. to 8 p.m. Desktop PC use is high throughout the work day and then again between 7 p.m.

# DRIVE FOR THE DISTRACTED

Mobile is fast becoming the dominant way for people to digest digital information, but the medium presents hurdles for pharma. **Ritesh Patel** and **Ben Currie** offer marketers tips for benefiting from a multi-screen world

and 11 p.m. Smartphone use spikes from 6 a.m. to 7 a.m., 9 a.m. to 10 a.m., and 6 p.m. to 8 p.m. It spikes even more with peak use from 8 p.m. to 11 p.m.

Tablet use follows a fairly similar cycle, with peak use from 8 p.m. to 11 p.m. Content consumption by healthcare providers, patients and caregivers follows a similar pattern.

Knowing when people are using specific devices allows us to more accurately render our brand or content in a way that is most relevant to the audience. For example, we could air a TV commercial during prime time to raise awareness about a drug and provide information on a responsive website that can be viewed on a cell phone, or run a banner ad with a similar video and a call-to-action with a coupon for tablets. In this way, the person viewing the TV ad can continue to consume information on a nearby mobile device and engage with a brand a second time for reinforcement.

Healthcare professionals can visit a brand.com site on a desktop computer at home before heading to their practice, continue looking at content on their smartphone or tablet during the day, and resume use of the desktop when they return home in the evening. The content and brand experience should be familiar and consistent across platforms.

It should be seamless from one screen to another. We typically see bounce rates (people leaving a site after opening the home page) of about 90% on websites that are not responsive or enabled for mobile devices.

The primary aim of creating multi-screen campaigns is having the ability to create truly engaging content for various mobile devices. With the advent of advertising units in the HTML5 format, brands can create relevant and compliant content, using video and imagery that is immersive, educational and engaging.

Employing sophisticated tactics to attract mobile users, we have seen click-through rates of up to 20% for some ad units on mobile devices. Compare that with the measly 0.003% on the web alone.

Developing cross-screen advertising is not as simple as just adding a few mobile placements to your ad buy. Multiple operating systems, device sizes and new protocols are emerging, and marketers may need help navigating the path to multi-screen success. Fortunately, a number of technology vendors have developed the capability to create branded pharma ad units for the mobile platform.

Here is an example of an ad that was created for Cimzia, UCB's brand, specifically for the iPhone and iPad platforms. The ad is contextually delivered in the health and wellness section of Time.com.

When a patient or health care professional clicks on the advertising unit, it expands just like a rich media unit on the web, including a video and also a scrolling ISI (important safety information).

The experience is the same on the iPhone and the iPad. The

## What to build: app vs. responsive site

The rapid evolution of the web offers us opportunities and challenges. In the past, we worried only about what appeared on the landing page of a website, but with mobile sites, we have to decide whether to build an app or a responsive site.

In most cases, a responsive site allows the majority of customers to access information about a brand.

Apps are better as single-purpose tools. There is a different app for posting to Facebook, Foursquare or Twitter, for example. Brand sites are usually multifaceted, offering a wealth of information in different ways.

The decision is simple. Build an app when you want to do one thing and do it extremely well (blood glucose meter, information about a clinical trial). But when you are aiming for a comprehensive web presence (brand.com), it is much more effective to use responsive design principles.

extended real estate on the iPad screen allows for the ISI to be displayed on the side of the banner advertising unit, within the advertisement. But, the engagement on the iPad is the same as it is on the iPhone.

Multi-screen marketing can make a huge impact on the pharmaceutical industry if it is done right. Every mobile platform has its own set of rules, but all can be part of an effective marketing initiative. When you define the goals of a campaign, you also should determine how every available digital platform plays a role and fits into the bigger strategic picture.

In summary, as you look at marketing in the multi-screen environment, think about consistency of brand, content and message, design for distracted use, and above all think holistically about a coordinated campaign. The days of siloed media are over. Ubiquitous mobile media is the path to engagement for your brand.



## PART 2 CONTENT COMPLIANCE

**T**here are several reasons why mobile optimization can be a tricky proposition for pharma. One of the most common concerns for review teams is the treatment of important safety information (ISI). The industry has had almost two decades to develop acceptable treatment of the ISI on landscape-oriented computer screens that are 800 pixels wide and larger.

But the industry has had less time to develop creative solutions that work with the portrait orientation and smaller screen sizes of tablets, phones and phablets. The smaller screen sizes provide scarce real estate, making it more difficult to display anything more than a logo and ISI on a page.

Once that the decision has been made to create unique sites for unique device types, more control can be gained by creating more separation between the design and layout treatments of the mobile and desktop versions of the site. However, the benefit of greater control is gained at the cost of an expansion of scope from several teams.

One often overlooked component of this increase in scope is the required ongoing efforts from both the agency and medical-legal-regulatory (MLR) teams to coordinate updates to the separate sites to ensure that the content of the two remains consistent through their lifecycle.

Quality assurance for any website includes extensive cross-browser testing in which every page and every interaction of the site is reviewed in each of the major web browsers. But when adding

mobile into the equation, the planning, requirements-gathering and testing all increase in complexity.

UX designers must take into consideration the wide variety of browsers and screen sizes, as well as the native features of the mainstream devices and operating systems, and find solutions that not only display content as consistently as possible throughout many different viewing experiences, but also collaborate with MLR teams on the potential variations and then design a satisfactory review process.

In the past few years, the web-development disciplines have reacted to the explosion of mobile devices by crafting a methodology called responsive web design (RWD), in which the layout of web content is dynamically adjusted in order to deliver a device-optimized viewing experience.

Unfortunately, RWD inherently introduces content variations that can make MLR teams uneasy, resulting in the need to review every possible version of a given communication. This can burden reviewers with sometimes up to five variations of a single website that all need to be reviewed.

We came up with a process called the “content integrity approach,” in which RWD is the foundation and we layer on top of that web-design guru Trent Walton’s concept of “content choreography.” We add our own framework over the two to specifically address the needs and demands of healthcare communications.

The premise is to lock down the content in such a way that its message and hierarchical placement remains the same regardless of the viewing device. So in an RWD layout, when three columns of content are reduced to a two-column layout on a smaller screen, the intended hierarchy of the content is not altered.

This goal is accomplished by documenting the hierarchy decisions that essentially “choreograph” the content’s behavior across various devices. For example, if the hierarchy document dictates that the call-to-action must always be visible without scrolling, then we design and program our communication to ensure that this is true on all devices.

The images nearby provide concrete examples of content integrity principles at work in our designs. As demonstrated here, the approach attributes significant importance to legal concerns. We define strict rules for relationships between content elements in order to maintain the content’s integrity—including its compliance with MLR requirements—no matter what device is being used to access the information.

By pushing compliance to the forefront and following a strict content hierarchy, clients’ MLR teams can remain confident that the content they reviewed and approved is not undermined by a user’s choice of internet browser or mobile device.

As we have seen, optimizing digital communications for mobile devices means that content will display differently on different devices. Pharma companies must invest heavily in reviewing and approving their digital communications, but they are unlikely to mitigate risks with the existing layout-centric review model.

Due to the ever-increasing variety of mobile devices on the market, as well as the unpredictability of user behavior, it is extremely taxing and expensive to review every iteration of mobile-optimized digital communications. Therefore, instead of focusing on the layout, the focus must shift to the hierarchy of content elements and the rules governing their placement, with MLR considerations at the forefront of decision-making.

**Content integrity at work: desktop version (left) with top menu and ISI locked to bottom; opposite: tablet portrait view with collapsed top “hamburger” menu and (inset) phone portrait view with reduced responded column and collapsed top menu**



To sum up, the content integrity approach entails three basic steps:

**1 Define the hierarchy.** Craft, review and approve a content hierarchy document that defines the relative importance of content elements, as well as the rules governing their placement and/or accessibility.

**2 Review one detailed prototype and supplement it with wireframes for more layout possibilities.** Proceed through architecture, design and copy development to produce one detailed content deliverable that can be reviewed page by page for legal compliance. Supplement it with samples of additional layout possibilities showing how the content will respond while still adhering to the content hierarchy.

**3 Review the developed piece in its true form, before it is deployed.** Identify common-use cases, and check those iterations for compliance by engaging in those use cases. Review the developed communication in the way users would experience it: on screen, not paper.

Following this methodology allows an agency to be efficient with clients' time and money while still achieving legal compliance. The

content integrity approach means that there is only one story that must be written, reviewed, approved, published and maintained. Though this story will adapt to different devices, we can remain confident that its message, intent and tone is never compromised, and the relative prominence of information is never violated.

Despite these benefits, it is true that the content integrity approach involves a greater project scope than if no mobile optimization efforts were pursued at all. However, choosing not to optimize for mobile can pose significant compliance risks (such as a lack of visibility for ISI on small devices), and therefore the scope increase is worthwhile.

We also recognize that our approach involves the deliverable of a content hierarchy document—not something that other methodologies need to address. While this new deliverable involves more investment early on, it ultimately saves time and money by eliminating the need to review a full set of screenshots for a multitude of layouts.

Also, as mentioned above, it is impossible in the layout-centric review model to ensure that the layouts selected for review are the only layouts. As a result, there is more risk incurred by designing, developing, and reviewing layouts than there is with an approach that defines rules for content hierarchy and then develops the communication to meet those rules.

The content integrity approach to digital communication reduces confusion for users by making the content order logical and legible independent of the device used for viewing. Content integrity helps achieve mobile optimization for digital communications while remaining on time and on budget with a streamlined MLR review process. As a content-centric methodology (rather than a layout-centric methodology), content integrity is also a scalable solution for the future, which will inevitably include new mobile devices with varying screen states and sizes.

This year, we expect that most of our brands will launch mobile versions of their online assets. Our initial success with content integrity increases our confidence that this new approach fits within the constraints of our regulated industry while simultaneously providing a cost-effective solution to keep our users, clients, and MLR teams happy. ■

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