



Digital Health Coalition

During the December 2017 Digital Health Coalition's Social Media Landscape Webinar, DHC Co-Founder Mark Bard interviewed Takeda's Sr. Manager, Customer Engagement & Marketing Innovation, Tracy Yedlin. We have extracted that conversation and provided it here.



Mark: *Tracy, thank you for taking the time to share with us today. I've always enjoyed hearing your insights on how you see things changing. We all know this is a different space in terms of how we deal with compliance and regulatory -- and all those fun things. At the same time, we see all these cool things happening on the social media platforms. Arguably some of these platforms now make it possible -- in terms of the controls and the guardrails that we can put in place within platforms like Facebook.*

We talk a lot about consumer. We've talked a lot about Facebook and the things that are happening and all these great changes and the growth in the various sites and pages. We are convinced that digital overall works. We still have these question marks about social. I just wanted to put it out there, this balance of physicians on mainstream platforms, whether it's on Facebook or some of the other larger platforms, as well as these data communities. I wanted to open with that and put it back to you and say what's your take as we head into 2018 with what's happening with physicians' social and how do you characterize the opportunity there today?



Tracy: Great question. Thank you, Mark. I think this is a great question when we think about the role between mainstream and then those gated communities.

I just saw a stat earlier today where Media Vitals stated 38% of HCPs say they use social media for professional purposes at least once a week, with 14% saying they use it every day. I saw similar stats from an eMarketer where I think it was 24% of HCPs

surveyed are using social media at least once a day to post or seek medical information. We are at that tipping point.

We even see it among those healthcare companies that are marketing towards HCPs. Again, citing eMarketer, 52% of US healthcare marketers state that they're using social media to market to HCPs. I think we can only expect that this is going to increase over time.

Back to the question between mainstream and gated, I think what we've seen in the last year is that these gated communities are evolving, and evolving quickly, and they're offering a broader variety of engagement opportunities. I think as we see those become more robust, that I'm going to anticipate greater engagement over the mainstream platforms. With that being said, I think there will always be a place for the mainstream platforms, as HCPs are people too. More importantly, it's where their aging patient population is getting the majority of their medical information. Either way, they're going to have to somehow be involved within those mainstream platforms.

Mark: *Thank you. Before we jump into the other one -- and not to catch you off guard here, but one of the questions that came and is a fundamental question for those individual companies that are not in the top ten. You've been at this -- and have had success -- and are involved with some great properties within Takeda; so the person that's looking and saying we're not really doing anything, do you have an initial brief response to that person saying my company just doesn't believe in social? As a pharma company in 2017, what's your short answer to that? Is there a stepping in, here's the one thing you can do?*

Tracy: I think first and foremost, you begin with listening. I think you let that guide the subsequent conversations. If you engage in social media listening, you could at least understand and engage what are the conversations happening.

Are they branded? Are they unbranded? What is the sentiment of those conversations? Is there an unmet need? Is it specific to a particular target audience, whether that be HCP or consumer?

The first step is really kind of understanding that landscape and what your brand or therapeutic area, the role that it's playing, and then really determine is this something that fits within our strategic comparative? At the end of the day, we can't do social for social's sake. It's got to be tied back to what is the business goal, what's the business imperative, and how can social help address that?

If you can make the case that there is significant conversation, significant chatter that based on the sentiment that it's consistent with what your brand is trying to achieve, I think it makes that argument easier to make. I think historically at least from what I found, a lot of marketers or people within the organization may not be as familiar with social. In addition to listening, I think there's an element of education, whether you start small with lunch and learns or one-on-ones, but really helping people become more comfortable with the platforms themselves. That coupled with information you can gather from listening should begin to set the stage.

Mark: *That was wonderful. In addition to listening the use of internal education is very important. I'll build on that a little bit. We talked about physicians ... and this one could apply to physicians or consumers.*

AstraZeneca came out, and this is in reference to ASCO 2017, which is a big industry event in the oncology space. This is referencing Twitter activity, but I think we can take it as a social insight overall. They said we're going to focus more on elevating key voices, research, and patient groups and less on fun fact quizzes ... so those don't disrupt the organic and authentic conversation. Is that part of what we're learning in social in general? Are there implications for this?

I think it was kind of interesting where companies came out and said we're just going to jump in full steam. Now we had one in 2017 saying we need to reassess how we're part of this conversation and how we can elevate others that are within the conversation. Any comments on that, what that means for the industry overall?

Tracy: I love this example, to be sure, because this is really being able to identify what are the healthcare professionals interested in and then being able to really engage them on the level that's going to be most relevant for them. This is certainly a learning process. I think we as marketers have made assumptions that healthcare providers are going to engage in social media just like consumers and patients would. How it works in the broader and more mainstream social media platforms can be effective for HCPs. I think we've seen this is clearly not the case.

We forget that cardinal rule of marketing, know thy target. I think sometimes we're so keen on telling our own story that we've forgotten about who we're telling it to. This idea of less talking and more listening feels very spot on to me. I think in that respect, pharma has a lot to learn, sort of getting back to the social media and listening and the monitoring and really being able to gauge those conversations and then identify what are the most relevant ways that you as a brand or you as a company can participate in those conversations.

Mark: *You have experience across a number of different strategies and activities. The balance seems to be the struggle -- in some cases -- that you see between short-term focus which is often ... we need to launch, we need the engagement, we need the numbers to show internally that this idea .. and the long term goal of we're in it for the long haul. This is an ongoing effort. We've got to maintain authentic conversation.*

Everyone always loves that cocktail party analogy. It's the difference of running in and making a bunch of noise so everyone knows you are there and then running back out -- as opposed to running in but maintaining that ongoing conversation. That's a balance. We've got great examples of companies that have done that. What's your take on how do you balance that need for "you have got to show something quick" if it is episodic

and how you balance the longer term strategy?

Tracy: I equate this analogy to a swimming pool. You can develop a swimming pool, but if you don't put water in it or don't put fresh water in it routinely, nobody's going to want to go swimming. The content is really critical to this conversation. Historically, I think we've aimed our digital efforts more at the top of the funnel activities like generating awareness or increasing consideration.

We've seen an evolution, at least within the consumer and the patient social media marketing where we now see brands that are deploying social media tactics across the patient journey. Everything from awareness to adherence and in some cases even advocacy. I think quick wins with these top of the funnel tactics as well as this constant stream of new ways to engage has opened the door to have these broader, more long-term strategy thinking conversations.

I think at the end of the day, the battle is going to win with data and analytics, so the ability to really measure in a meaningful way is the only path forward for achieving any kind of sustainable multi-channel social media approach. I don't know that we're quite there yet. I think we've seen a lot of improvement, but measurements and data and analytics are still going to be paramount to being able to have social media be part of a sustainable conversation.

Mark: *One last question. I'll break it into two parts. There was a study earlier this year, and I think we all love to look at all the studies that are out there and try to internalize and say what it means for us. There was a study by Unmetric, and it highlighted a few macro trends in this industry. I'll pull out two that were kind of interesting.*

One was that they found over the past several years outside of Facebook that many of these properties -- or many of these efforts in social -- have little to no growth. I guess I'll spin that and flip it around and say is this really more an indication that companies are saying it's Facebook first. That's where I'm putting my time, energy, and money ... or does that start to speak to the possible issues related to other challenges inherent in some of these other platforms, whether it's at Twitter or LinkedIn, that pharma has not been able to say we can do that same type of growth strategy. Do you have a take on why Facebook is capturing a lot of this growth over the last couple of years?

Tracy: I think Facebook has done an excellent job in evolving its product offerings to meet the needs of pharma. I think we see that whether it's in their types of ad units, from led gen to carousel to canvas to video units that help us with ISI. I think they've done a good job of crafting their offerings to help pharma. They offer scale and efficiency and targeting on par with any of the other media platforms.

I think probably for many companies, I would assume that Facebook has just become another part of their media plans or part of their media buys because it is at that level of scale. I think that being said, we are hampered within Facebook by lack of an ability to

measure. To my knowledge, at this point Facebook does not currently allow for Crossix tagging. That may become a barrier to certain marketers getting back to the data and the measurement and the ROI.

I also think there's been a shift in thinking around Facebook where historically the critical measure was share size. How many people are following me? How many people are liking my page? Where now I think there seems to be less emphasis on growing these communities and more emphasis on working within those communities to ensure that we're getting that high value engagement. It's not just the number of followers, but what they do as a result of engaging with your experience.

Mark: *One last one before we'll close out with some 2018 trends. One other trend that was surfaced was massive increase in video. Is this a short-term burst in that video has become so accessible as an option or are we going to continue to see that rapid growth that we've seen over the past couple years in video in 2018?*

Tracy: I think it's a great question. Video, no doubt, will continue to be a key component for engagement. I think it's quickly becoming the norm versus the exception. I think the challenge that will always be for pharma is how do we tell these complex stories in this medium, especially as we see attention spans and videos getting shorter and shorter.

What I think is kind of interesting about that is that maybe it's not a story that gets told in one video or one particular engagement, but across several. Being able to identify what are those bite-sized pieces that when strung together in a very sequential way become meaningful, I think this will continue to be a challenge for pharma moving forward. I think there's glimmers of hope to be sure. I would say in addition to video, I think we also have to start thinking about what are going to be more of these augmented reality-type experiences -- we'll start to see more of those over the next few years.

The Digital Health Coalition thanks Tracy for her time and for allowing us to share this conversation with you here. If you don't already receive this content directly from the DHC, make sure to sign up now.