

# **Handling Personal Information & Observing/Distributing Recorded Video**

**June 2019**

**Japan Medical Marketing Research Group**

## Introduction

### Marketing Research (Market Research) \*emphasis on personal information

“Marketing research” is one approach on how to effectively provide/promote a supply of quality goods and services in order to maximize meeting consumer demand.

- ➔ It **functions to connect** the consumer/client/public with **the marketer** by using information.
- ➔ If the method used is “research,” then the act **must be considered as research** and recognize advancements (e.g. social development, public health) **as elements of sociology**, even when handling matters not directly related to marketing.
- ➔ It is founded on the **public’s trust** and the respondent’s **willingness to cooperate**.

Research...

- strictly maintains the complete anonymity of research respondents.
- cannot be considered marketing research if the name, address, or affiliate of someone involved is used for anything other than the objective of research.

## At Japan Medical Marketing Research Group...

### We incorporate the following with all the research agencies we are affiliated with:

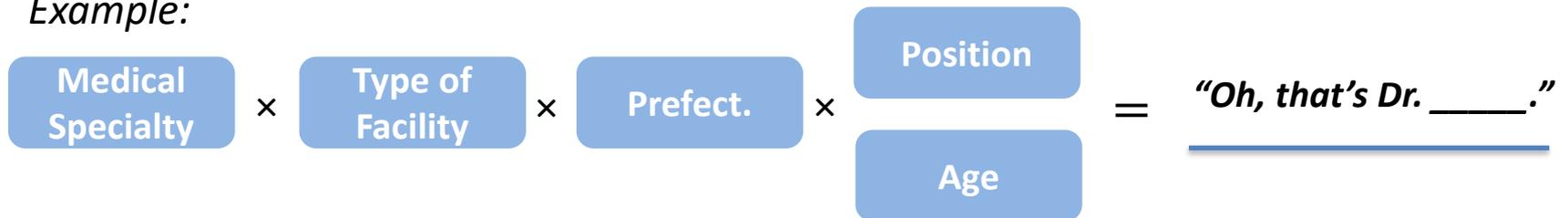
- ➔ We strive to be in strict accordance with personal information protection laws when implementing marketing research that handles personal information.
- ➔ We abide by **“The Current Framework of Compliance When Implementing Marketing Research”** presented in 2017.  
*(Japan Medical Marketing Research Group Homepage. <http://www.medi-ken.org/index.html>)*
- ➔ We normally have research agencies conduct **“Compliance/Information Security Training”** once a year, but we are also looking to conduct periodical training on **“The Current Framework of Compliance When Implementing Marketing Research.”**

# Do not submit personal information/data that could reveal personal information

➔ Deliverables are not allowed to include **Names, Facility Names, DCF Doctor Codes, or DCF Facility Codes.**

In certain situations, attributes such as **Type of Facility, Job Title, Age/Age Group,** and **Location** are not allowed to be submitted either.

*Example:*



➔ If multiple flags could be combined to reveal or infer a respondent's identity, those flags are not allowed to be submitted.

*Example:*



## Questions cannot be asked/data cannot be submitted without the respondent's consent

It is said information on public figures can be made public, but a doctor is not considered to be a public figure, therefore their information should not be made public.

Doctor's names are published on research papers and websites because they personally gave consent and/or wanted it there.

➔ Questions that ask for the doctor's name or facility name are not allowed to be created/submitted as deliverables.

*Example (KOL survey):*

"Doctor, who do you think the KOLs are in this region?"

*"Don't mention my name with out my consent, alright?"*



➔ In general, video/audio that capture respondent features (e.g. face) are considered personal information.

In other words, interview videos are a treasure trove of personal information.

# Participating in and observing interviews

Have the respondent (e.g. doctor) sign both the **participation consent form** and **adverse event report form**.

- ➔ In addition to having the respondent agree not to divulge interview content to third parties, you must also gain consent to **not leak personal information**, receive their **permission to record audio/video, watch videos after the interview**, etc.

Also have all interview participants (clients) sign a **participation consent form**.

- ➔ Observers still need to sign a consent form even if they view the interview remotely (e.g. Focus Vision, ODI System, Web Ex).



Japan Medical Marketing Research Group currently operates under different rules for each research agency, but is looking into making the consent format universal among its affiliate businesses.

# Remote viewing (live video) of interviews/post-interview observation

We follow a different set of rules for each research agency for remote viewing (e.g. Focus Vision, ODI System, Web Ex), so please ask if you would like to know more.

➡ The video/audio is unaltered with remote viewing.

## We will begin offering post-interview observation \*

➡ **If the interview is observed later at a facility designated by the research agency...**

- It can be observed with the unaltered video/audio.

### **If using the Focus Vision archive for observation...**

- The observer can access it if they have signed the consent form:

*When viewing the archive, please select **“Observer.”** (Please do not select “Researcher”)  
**If any issues arise** with the video alteration service used to view the interview (this is the reason why post-viewing was not available in the past), **the pharmaceutical company (not the marketing agency) will be the one held responsible.***

### **If using the ODI system for observation...**

- The interview will be available for observation on a cloud server **after video/audio has been altered.**

# Things to note about observing interviews

**What to do when the respondent (e.g. doctor) and participant (client) accidentally see each other at the venue:**

The general practice has always been that they were **not allowed to participate**, but the following **changes** have been made.

**When the respondent and/or client know one another...**

- ➔ ...and the respondent learns who the client requesting the research is:
- Make the decision to either carry on with the interview or cancel it. The interview will not be considered as research once the identity of the respondent is known because securing anonymity is a basic principle of research.
- Please use your best judgment about whether the client who has seen the respondent should remain quiet and participate or leave the room.\*

The research will be conducted...

- ➔ if the **respondent and/or client do not know one another.**

*"I'm participating because it's anonymous."*



\* For EU: leave the room, For JPN/DE/CAN: handle case-by-case

# Things to note about observing interviews

If the client knows the respondent (e.g. doctor) prior to the interview, the individual should **remain quiet and participate** without mentioning that information.\*

**Do not look up** the names or facilities of respondents (e.g. doctor) on the internet during the interview.

**If a participant looks them up**, or if they make it known to other participants (e.g. “*That’s Dr. \_\_\_\_ from \_\_\_\_ Hospital*”), that participant **will be asked to promptly leave the room**. (They will be **unable to participate for the remainder of that interview, but can rejoin for any interviews that follow**)

➔ Research is founded upon strictly maintaining complete anonymity. Leaking information that could reveal someone’s identity compromises confidentiality.

## For reference:

➔ Sometimes there are requests like, “*Recruit Dr. \_\_\_\_ from \_\_\_\_ Hospital,*” but this is also **generally not allowed**.

“I’m participating because it’s anonymous.”



\* For EU: leave the room, For JPN/DE/CAN: handle case-by-case

# The reuse of research interviews

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Example of reuse: Using interview content for a study meeting or internal training.

➔ This is possible if the respondent gives permission for it to be reused.

To gain their permission...

- Clarify the **company name** and **department** that will use it, and then you will need to receive permission for the following:
  - **Purpose of use**
  - **Method of use**
  - **Situation used in (e.g. large/small-scale)**
  - **Name or Name of Facility/If client saw respondent or not**
  - **To use the video...etc.**

Example of reuse: Using interview content to create a hypothetical series of Q&As:

➔ **Alter the interview to create new content and do not use the interview content as is.**