ST.MARY'S UNIVERSITY
SCHOOL OF GRADUATE STUDIES

ANALYSIS OF PROMOTION PRACTICE IN RELATION TO SALES PERFORMANCE OF PRIVATE PHARMACEUTICAL IMPORTERS IN ADDIS ABABA

BY
ERMIAS ERGETE

JANUARY 2018
ADDIS ABABA, ETHIOPIA

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A THESIS SUBMITTED TO ST.MARY'S UNIVERSITY, SCHOOL OF GRADUATE STUDIES IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF BUSINESS ADMINISTRATION (GENERAL MANAGEMENT)

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Statement of Declaration

I Ermias Ergete, hereby declare that the research work entitled **"Analysis of Promotion Practice in relation to Sales Performance of Private Pharmaceutical Importers"** in Addis Ababa as a requirement for the completion of Masters Degree in Business Administration is my own original work. All sources of materials used for the study have been duly acknowledged. I have produced it independently except for the guidance and suggestion of my research Advisor Tesfaye Wolde (PhD). This study has not been submitted for the completion of any degree in this or any other University.

_____   _____

Ermias Ergete   Date

Letter of certification

This is to certify that Ermias Ergete has carried out this project work on the topic **analysis of promotion practice in relation to sales performance of private pharmaceutical importers** in Addis Ababa under my supervision. This work is original and suitable for the submission in partial fulfillment of the award of Master degree in Business Administration.

_____   _____

Tesfaye Wolde (PhD)   Date

Research Advisor

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Ermias Ergete

Acronyms and Abbreviations

CME: Continuous Medical Education

FDA: Food and Drug Administration

FMHACA: Food, Medicine & Health Care Administration & Control Authority

N: Number of Respondents

OTC: Over-The-Counter

R&D: Research & Development

SPSS: Statistical Package for Social Science

WHO: World Health Organization

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Abstract

This study was set out to investigate the effectiveness of promotional tools on sales in the private pharmaceutical importers companies in Addis Ababa. The objectives of this study were to investigate the promotional practice used by private pharmaceutical importers companies in Addis Ababa and to determine the extent to which the promotional tools affect sales in the private pharmaceutical importers companies. The study employed quantitative and qualitative research design methods. The study population consisted of all 60 private pharmaceutical importers based in Addis, from which systematic sampling of random sampling technique was applied. Data were analyzed using descriptive statistics. The statistical package for social scientists (SPSS) for tabulation and statistical analysis were utilized. The tests involved frequency distribution, descriptive statistics, Pearson Correlation Coefficient, ANOVA and Regression. The result of the descriptive statistics indicated that commercial detailing, sampling, and continuous medical education (CME) are the three most important promotion tools in the pharmaceutical industry. They were drivers in the promotion and adoption of new products in the market. The correlation result showed that all the promotional tools factors except influential key opinion leaders (KOL) have a negative relationship with sales of pharmaceuticals products. As per the result of regression analysis promotional tools with commercial detailing, sampling, and continuous medical education (CME) are positively related with sales of pharmaceuticals products; this three promotional tools factors have a significant impact on sales of pharmaceuticals products. Based on the findings result, it is advisable that the success of promotional tools adopted should be measured to determine their level of effectiveness. These three promotional tools are very influential on prescribing practices of doctors and in some cases, they serve as key source of drug information, in addition to providing information, drug reps are also in a position where they can employ subtle influence to encourage medical practitioners to change their prescribing practices. The researcher recommends customer satisfaction and increase in sales as ways of determining the success of the strategies adopted.

Key Words: - *promotional tools, commercial detailing, drug sampling, continuous medical education (CME), influential key opinion leaders (KOL) and sales*

CHAPTER ONE: INTRODUCTION

1.1 Background of the study

Promotion is the communications means used by sellers to persuade or remind potential buyers that a product or service exists (Husted S et al, 1989). Promotion concept is a key issue in marketing as it is used by a company to convince potential customers to buy from it instead of from a competitor. By doing this, the company also explains the major features and benefits of the products, it tells where those products are sold, and it advertises sales on those products, answers customer queries and creates a favorable image for itself (Farese L et al, 1991).

Product and Service organizations such as private pharmaceutical import companies in Ethiopia need to put in place competitive marketing strategies to improve their competitiveness and thus retain customers. Once demand is created, a pharmaceutical company needs to manage this demand as well as its capacity to deliver (Kotler, 2003). Pharmaceutical promotion is the business of advertising or otherwise promoting the sale of pharmaceuticals. It is one of the key aspects of drug marketing, in which both the medicines and the ideas about medicines are exchanged among manufacturers, prescribers and consumers (patients). It encompasses diverse strategies for advertising, sale promotion, and is not limited to the printed and media broadcasted advertisements, sponsored meetings, and public communication (Taneja, 2008).

The Pharmaceutical marketing differs from other types of marketing because the consumers of the product, the patients, are not the target customer, whereas the physicians prescribing the medicines and the pharmacists dispense over-the-counter (OTC) medications without physician prescription which is the target customer of the pharmaceutical companies. It is the doctor who makes the decision on behalf of the patient. Physicians are privileged with the right of recognizing the need of their patients and recommend medications for the well-being of their patients. Hence, the relation between the physician/pharmacists and pharmaceutical companies may create a conflict between the ethical professional interest of a doctor/pharmacists and his financial self-interest (Roshnid, 2013)

The increase in incentives to attract the doctor's prescription and pharmacist's large volume purchasing behavior reflects as a rise in the price of both prescription and OTC medicines. The pharmaceuticals resort to many ways in marketing their product. Giving away gifts, free lunches, sponsoring education and holidays have all been criticized as inducements which compel a

doctor to prescribe without scientific basis (Gonul FF et. al 2001). A study from Canada showed that the association with pharmaceuticals leads to less than appropriate prescribing behavior by the doctor (Lexchin J 1997). Many physicians, however, do not feel that their prescriptions are influenced by gifts and other incentives provided by pharmaceuticals (Liu SS 1995).

Promotion in one form or another is employed by every business irrespective of the commodity it produces. However, the pharmaceutical industries which are regulated by drug rules and medical ethics to communicate sophisticated information on drug usage to a critical and highly qualified audience. As a matter of fact, pharmaceutical promotion is a vital source of technical information and makes an important contribution towards educating the profession also towards the right usage of the drugs (Lexchin J, 1997).

World Health Organization (WHO) defines drug promotion as "all information and persuasive activities by manufacturers, the effect of which is to induce the prescription, supply, purchase, and/or use of medicinal drugs" (WHO, 2005). The food and Drug Administration (FDA) regulates the promotion of prescription drugs, under the authority of the Federal Food, drug and Cosmetic Act (FFDCA). The act sets general standards for prescription drug advertising directed to consumers and physicians. Regulations implementing the act require that advertisements present accurate information and fairly represent both the benefits and the risks of the advertised drug (GAO, 2002).

As said before, the unique aspect of pharmaceutical promotion is the communication of completely prescribing information on the drugs to highly qualified medical man. In view of the advances in drug therapy witnessed during the post-independence period, it is only natural that the members of the medical profession wish to stay abreast of the new discoveries and developments taking place in the medical world from time to time. For such a target audience, communication about the vital information on drugs is more than mere promotion is a service (Taneja, 2008).The job of communicating information and promoting the pharmaceutical products to the professionals is done through Medical Representatives who plays an important role in that. It is he who details a product thoroughly to a practicing doctor and discusses the composition, mode of action of each ingredient, indications, dosage, side effects, precautions, contraindications, pack and price of the product. Doctor raises several queries concerning the use of the product in the types of patients he sees in his day-to-day practice, and thus collects

complete information on the product and its relative advantages over similar other products in the market.

For instant in Ethiopia, the pharmaceuticals industry is regulated by Food, Medicine and Health Care Administration and control Authority (FMHACA) of Ethiopia, a regulating body in the industry has made all pharmaceutical companies to come out with tailored promotion in order to go around the FMHACA guidelines for the regulation of promotion and advertisement of drugs controls authority (FMHACA, 2008). The annual pharmaceutical market in Ethiopia is estimated to be worth $400 to $500 million (PFSA, 2015). In 2014, local pharmaceutical companies supply products to the value of $44.2 million and have limited product portfolios and are thought to be able to supply only 90 of the more than 380 products on the national essential medicines list. Around 35 – 40% of their total output is supplied to the private sector at a price premium of 10%. The annual private pharmaceutical market in Ethiopia is estimated to be worth $100 million (FEDRE, 2015).

From the website of FMHAC, it was reported that, there are 114 importers and wholesalers of which 61 (1 government owned and 60 private owned) are human medicine importers, 39 veterinary medicine importer and 1 veterinary wholesaler. The local industry comprises 22 pharmaceutical and medical suppliers and manufacturers, with 9 involved directly in the manufacture of pharmaceutical products (FDRE, 2015). Out of the sixty private human drug importers that are importing pharmaceuticals from different countries, 29 of them are involved in pharmaceuticals promotion being agent of one or more multinational companies as first or second and third agent. Most pharmaceutical companies have sales forces through importers that are familiar with local languages and customs and are pharmacy graduates with some years of experience. It is only few years since pharmaceuticals marketing introduced in to Ethiopian pharmaceutical industry. During this time the relations between the physicians and pharmaceutical companies have got considerable attention.

1.2 Statement of the problem

Pharmaceutical marketing is unique as the decision making of buying the medicine lies in the hand of intermediate customer (doctor & pharmacists) rather than final patient. Thus, pharmaceutical companies try to influence the customer (doctor & pharmacists) rather than final patient. Doctors and pharmacists are the most important players in pharmaceutical marketing system (Taneja, 2008). Doctors write the prescriptions that determine which drugs (brands) will

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be used by the consumer (patient) and the pharmacists have a mandate to dispense over-the-counter (OTC) medications without physician prescription which is readily available on the drugstore shelves. Thus, influencing the doctor/pharmacists is a key to the pharmaceutical sales. Pharmaceutical companies try to influence prescription pattern of doctors in favor of their brands by offering various kinds of promotional inputs like samples, gifts and sponsorships etc (Taneja, 2008).

The FDA estimates that the pharmaceutical industry spends $ 3 billion on drug promotion, or about $ 5000 per physician per year, half of which is spent on detailing. This means the expenditure on promotion is more than double compared to the investment on research and development (R&D) (Roughead, 1998). Even though the effect of promotion is directly reflected on sales of a particular pharmaceutical, there are no studies done on the method and techniques of pharmaceutical drug promotion in correlation with effectiveness on sales across industries has not been studied in Ethiopia.

Unethical and inappropriate drug promotion has been a continuing concern of both NGOs and the WHO. At the 1997 Roundtable on WHO Ethical Criteria for Medicinal drug Promotion there was firm agreement that inappropriate promotion of medicinal drugs remains a problem both in developing and developed countries (WHO, 2005). However, the challenge for pharmaceutical firms is to build brands that resonate with consumers and maintain the primary focus on the doctor. Such a task is not straightforward given the sensitivity of the issues involved, the restrictions and regulations governing drugs promotion and the requirements for ethical marketing behavior.

 Now days, promotion mix is the common method used by multinational companies for pharmaceuticals marketing. In creating awareness on those products, various promotional tools are adopted; mainly continuous medical education (CME), commercial detailing, drug sampling, internet, direct-to-consumer advertising, sponsorship, and give-a-ways among other methods are the form of promotion used by companies today. However, the effectiveness of each promotional tool is not fully understood by the pharmaceutical marketer, (Grooves et al, 2003). It is against this background that this study, thus, aims to carry out to investigate and diagnose how the promotional activities undertaken by the private pharmaceutical importers influence the sales performance.

Our national drug regulatory body, FMHACA, has formulated guideline for the regulation of promotion and advertisement of drugs and it has been effective since September 2008. Any person involved in drug promotion should follow this guideline (FMHACA, 2008). The Ethiopian private pharmaceutical import companies also operate in highly regulated market environment. The degree of regulation to a significant extent depends on the type of the product. Drug advertising and marketing are among the strictly regulated of markets. The public policy question is whether we ban aspects of drugs marketing, how we control the content and position of advertising and how we persuade private pharmaceutical importers to adopt a responsible and ethical approach to promotion.

Ethiopian pharmaceutical importers face a number of challenges, this is where private pharmaceutical importers compete among themselves for market share and the influx of generic drugs into the market leads to significant loss in sales. Because generics drug manufacturer do not have to recoup high research and development costs. Prices of their products are usually much lower than those of brand products importing pharmaceutical companies. As the result, generics drug importers captures significant market share, dramatically decreasing revenues of the research-oriented private pharmaceutical importers. Pharmaceutical importers are not left out as far as spending in promotions is concerned, yet no study has been carried out to investigate the effect of promotion tools on the private pharmaceutical importers sales performance and thus a knowledge gap exists that this study seeks to fill.

1.3 Basic research questions

Due to the fact that there is no guideline by the government for marketing pharmaceutical products to customers, it requires company's huge money to run their business effectively in Ethiopia. Hence, the following research questions are designed to find answers for the below problem;

- Is there a clear policy and guidelines for promotional tools of private pharmaceutical importers by ministry of health or FMHACA in Addis Ababa?
- Which factors influence the choice of promotion tools by private pharmaceutical importers in Addis?
- Does the ethical issues and/or guidelines affect the promotional tools and the sales volume of the imports of pharmaceutical products in Addis Ababa?

1.4 Objective of the study

The study has both general and specific objectives as described below.

1.4.1 General Objectives

The main objective of the study are to explore the extent to which private pharmaceutical marketers utilizes promotion tools in creating awareness on pharmaceutical products among medical professionals and the public to enhance demand and sales volume.

1.4.2 Specific Objectives

The study mainly addressed the following specific objectives:

- ➢ To explore the extent to which private pharmaceutical importers in Addis Ababa use different promotion tools to create awareness on their products.
- ➢ To identify the factors that influences the choice of promotion tools by private pharmaceutical importers in Addis Ababa.
- ➢ To identify the ethical dilemmas encountered in the use of the promotion tools by private pharmaceutical importers in Addis Ababa.

1.5 Definition of terms

Advertising: Putting the pharmaceuticals company's profile, brand, image, etc. on journals, booklet, articles, banners, and media (electronic & print) to enhance the visibility, availability and sales of the company.

Continuing Medical Education (CME): A conference or meeting held at an appropriate location, where the gathering is primarily dedicated, in both time and effort, to promoting objective, scientific and educational activities and discourse for bringing the attention of attendees together to gain knowledge on the topic(s) being presented.

Detailing: Marketing that involves individual pharmaceutical or device sales representatives (detailers) meeting with doctors to promote specific medications or products

Dispensary: an office in a school, hospital or other organization that dispenses medications and medical supplies. In a traditional dispensary set-up a pharmacist dispenses medication as per prescription or order form.

Drug sample: It is defined as a package containing a limiting quantity of a pharmaceutical product sufficient to evaluate clinical response distributed to authorize healthcare practitioners free of charge for patient treatment.

Food and Drug Administration (FDA): Government agency of the United States Department of Health and Human Services and is responsible for regulating and supervising the safety of foods, tobacco products, dietary supplements, Medication drugs, vaccines, Biopharmaceutical, blood transfusion, medical devices, Electromagnetic radiation emitting devices, veterinary products, and cosmetics.

Generic drug: These are drugs that are no longer protected by patents, and are marketed by companies that have usually not developed the drugs themselves.

Give-a-ways: These are presents given to medical practitioners bearing the name of the product being marketed by the company at any particular moment.

Over-the-counter (OTC) medicines: products, usually for common ailments, that do not require a prescription and can be purchased in retail pharmacies and other retail outlets by the consumer.

Pharmaceutical Representative: A representative of manufacturing company, importer, distributor, wholesaler, etc., licensed by the Pharmacy and Poisons Board to conduct promotional activities through provision of information about drugs on behalf of the firm to health care professionals.

Pharmacists: health professionals who practice the science of pharmacy. In their traditional role, pharmacists typically take a request for medicines from a prescribing health care provider in the form of a medical prescription, evaluate the appropriateness of the prescription, dispense the medication to the patient and counsel them on the proper use and adverse effects of that medication.

Physician: also known as medical practitioner, doctor of medicine, medical doctor, or simply doctor- practices the profession of medicine, which is concerned with maintaining or restoring human health through the study, diagnosis, and treatment of disease or injury.

Prescription medicines: they are products that have to be prescribed by a qualified medical doctor. They may be patented or non-patented products, and are often referred to as ethical pharmaceuticals.

Promotion: All informational and persuasive activities by manufacturers and distributors, the effects of which are to induce the prescription, supply, purchase, and / or use medicinal drugs.

Prescription: health-care program implemented by a physician or other medical practitioner in the form of instructions that govern the plan of care for an individual patient.

World Health Organization (WHO): a specialized agency of the United Nations (UN) that acts as a coordinating authority on international public health.

1.6 Significance of the study

The results of this study will help the private pharmaceutical importers by familiarizing themselves with the kind of market competition and available promotional tools in the Ethiopia pharmaceutical market and the challenges they expect to encounter. The pharmaceutical importers will also be able to develop a mix of communication tools to serve various actors in the market such as government agencies, doctors, pharmacists, patients, regulation bodies and so on. Academic researchers will be able to evaluate the promotional tools investigated, the methodology used by other researchers for further research. In addition, they can look at trends of promotion in the private pharmaceutical importers in Ethiopia.

The findings were a valuable source of information for those who teach medical and allied courses about the influence of different promotion tools on variety of drugs usage by patients. Consumer organizations can use the database to help them lobby for effective control over pharmaceutical promotion and to help educate consumers and patients about the influence that promotion has over the choices that health professionals make. They can also use the material to become better acquainted with emerging drug issues. Public and private sector drug providers will understand how promotion affects drug use and drug costs.

1.7 Limitations of the study

Among the limitations encountered by the researcher during the study includes:-

1. Luck of sufficient fund to accommodate all population pharmaceutical importers.
2. Time limitation as a working adult and absence of precious research information with related topic.
3. Unique study - no adequate, relevant and specific studies on the pharmaceutical industry in Ethiopia.

To minimize the above limitation the following measures were instituted:-

1. Wide consultation in the area of research as pertaining to methodology applied in the study.
2. Internet searches for relevant past studies on pharmaceutical marketing especially from the developed world, United States and western countries.

3. Appointments were booked by the researcher in advance before questionnaire was delivered to targeted marketing managers to ensure immediate response and minimize expenses.

1.8 Delimitation/Scope of the study

The study is limited to private pharmaceuticals importers (human medicine importers and distributors) which is registered by Food, Medicine and Health Care Administration and Control Authority (FMHACA) which coordinates the marketing function in Ethiopia most of them are located in Addis Ababa City. The study focuses only the available 52 private pharmaceutical importers due to the fact that the extent of pharmaceutical marketer's utilization of promotion tools in creating awareness on pharmaceutical products among medical professionals and the public to enhance demand and thus sales of drugs is not fully understood by the pharmaceutical marketers (FEDRE, 2015).

1.9 Organization of the Paper

The research report has five chapters. The first chapter consists of background, definition of terms, statement of the problem, research questions, objectives; significance; scope and limitation of the study. The second chapter is devoted to review of related literatures. The third chapter is concerned with research design, population and sampling techniques, and sources of data, instrument and procedures of data collection, pilot testing, methods of data analysis and ethical considerations. The fourth chapter focuses on demographic variables of the respondents, data analysis and interpretation. The final fifth chapter consists of summary of the major findings, conclusions and recommendations.

CHAPTER TWO: REVIEW OF RELATED LITERATURE

This chapter deals with the literature relevant of the study. It includes theoretical, conceptual, and empirical evidences related to the previous studies.

2.1 Theoretical literature

2.1.1 Overview of the Promotion

As a result of change in the marketing environment, serious challenges have been posed to companies including both profit and non-profit organizations thus affecting the company's survival and profitability (Mbau, 2002). Customers have increased in their level of awareness, sophistication and now have a choice as far as buying and consumption of goods and services are concerned, they are increasingly expecting higher quality, service and some customization. They perceive fewer real product differences and show less brand loyalty. Companies are facing intense competition from domestic and foreign brands which is resulting in higher promotion costs and shrinking profit margins (Kotler, 1999). On the same note, Pharmaceutical industry is not exceptional either.

Promotion is the communication link between sellers and buyers organizations and uses many different means of sending messages about goods, services and ideas. The message may be communicated directly by sales people or indirectly through advertisement and sales promotion. In developing various elements of promotion marketers blend together the various elements of promotion that will communicate most effectively with target markets. Promotion strategies serve different purposes and vary in size and scope. A good place to begin the discussion of promotion is by defining the term. Promotion is the function of informing, persuading and influencing the consumer's purchase decision (Naikuni J.O, 2001).

Some researcher proof long run relationship among sales and promotion which is positive. On the other hand, many support studies either no long runs effect or the effect is in short run. There is no existing report about any study which is reporting about the negative relationship of the future demand and the promotion. However, as we come to know that the empirical work has been faced so many challenges. The work which has done earlier had a limited access to the brand of aggregate category level which the researchers had searched for the relationship of the current promotion and its effects on sales. This effect is lagged because of different subsets of consumers, so this relationship cannot be detected by the data because of the endogeneity factor (Lambin, 1976, Schmalensee, 1978). On the other in 2009 Florence et al examined the

relationship between sales promotions with brand equity and sales. They examined that in short run sales promotion affect the sales but this effect is not in long run. They further argued that the strong sales promotion activity increase brand personality which leads toward sales growth and this effect is only for the short time. (Anderson and Simester, 2004) tried to find the frequency of the retail catalogue correspondence, through direct-mail advertisement. 20 000 Customers receive a catalogue by mail. Based on these customers, they found evidence that in short- run there is an increase in sales and in the long run with a decrease in advertisement there is a decrease in sales.

(S.A. Aduloju et al., 2009) examined the impact of promotion on sales. They conducted their research on insurance product in Nigeria, for this purpose they used a sample size of 100 and found that the advertisement improves the image of the product which increases the sales volume. (Stremersch and Rotterdam, 2009) argued about the role of a regulatory regime which help to understand the sales growth of the product. They found a positive effect of regulatory regime on sales.

2.2 Conceptual Review

Promotion is only one element of the marketing mix, but it often considered prominent in the overall marketing mix design. Its high visibility and pervasiveness made it as an important social and encomia topic in Ethiopian society.

Promotion may be defined as "the co-ordination of all seller initiated efforts to set up channels of information and persuasion to facilitate the scale of a good or service." Promotion is most often intended to be a supporting component in a marketing mix. Promotion decision must be integrated and co-ordinated with the rest of the marketing mix, particularly product/brand decisions, so that it may effectively support an entire marketing mix strategy. The promotion mix consists of four basic elements. They are: - Advertising, Personal Selling, Sales Promotion, and Publicity (IJM, 2016).

2.2.1 The Promotion Concept

This covers all those communication tools that can deliver a message to a target audience. These tools include advertising, sales promotions, personal selling and publicity (Kotler, 1997). The aim of a promotional strategy is to bring existing and prospective customers from a state of relative unawareness of an organization's services to a state of actively adopting them. Promotion also helps create widespread awareness about services on offer and to enhance the

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image of the institution. This has a major impact on the customer and may sway his/her attitudes. Like the marketing mix, the promotional mix involves the proper blending of numerous variables to satisfy the needs of the firm's target market and achieve organizational objectives. While the marketing mix is comprised of product, pricing, promotion, and distribution elements, the promotional mix is a subset of the overall marketing mix. With the promotional mix, the marketing manager attempts to achieve the optimal blending of various promotional mix are personal selling and non-personal selling, including advertising, sales promotion, and public relations (Kurtz, 1992).

Marketing communication (commonly referred to as promotion mix), as defined by Keegan (1995), refers to all forms of communication that organizations use to establish meaning and influence buying behaviour among existing and potential customers. A marketing communication should be designed to tell customers about the benefits and values that a product or service offers, therefore marketers jobs are cut out in ensuring that they communicate effectively to their target market to gain leverage as well as use it to gain competitive advantage.

Kotler (2000), points out that, it is no longer enough to first develop a good product, price it attractively, and make it accessible. He states that firms must also communicate with the present and potential stakeholders, and the general public. Every firm is cast into the role of communicator and promoter. To promote its products, and gain market share, individual firms must carry out research and plans based on sound and basic concepts of marketing research and product development (Grosse and Hempell, 1980). For purposes of this study, the researcher has adopted the promotional mix as defined by Kotler (2000). He sees promotional mix as consisting of five major modes of communication, via: advertising, sales promotion, public relations and publicity, personal selling and direct marketing (Naikuni, 2001).

The techniques involved in the use of the promotion mix elements are used in communication with intended to influence the buying process by achieving cognitive, effective or behavioural outcomes in target markets. The marketers need to answer the question of how the question of how the communication's program can be integrated with the other elements of the marketing mix in order to achieve the greatest degree of synergy. Marketing is concerned with satisfying the needs of customers (Wilson and Gilligan, 1998).

2.2.2 The Sales Concept

The selling (sales) concept holds that, consumers if left alone will ordinarily not buy enough of firm's products. The firm must therefore undertake aggressive selling and promotion effort to maximize sales. Product promotion consists of advertising, personal selling and sales promotion (Boren, 1981). The most valued brands have one thing in common over their lesser rivals; more customers contributing more margins. Whatever assets a company may have, big or small, it is its customers and their willingness to contribute margin that creates value to the company. it's loyal customer- those willing to return to a company's products on a regular basis that create sustaining value against which revenue can be forecast, investment raised payrolls met, stick valued, and worth measured. It's building and nurturing a base of loyal customers that the most valued companies separates themselves from the pack (Kotler, 2000).

Sales force "detailing" costs, for many companies are the greatest operating expense, with the cost of sales and marketing frequently in the order of 30% of total revenues. The term detailing is one used in the pharmaceutical industry to describe calls on doctors to explain the features and benefits of a product. A second obvious axis for a strategic group mapping of the pharmaceutical industry is therefore the number of details or sales calls, where sales-force size acts as an effective mobility barrier in three main ways. First, the investment required limits field force size for many companies. Second, fielding a large sales force acts to differentiate a product from the competition and provides a barrier that competitors must overcome. Third, mopping up available doctor appointments effectively excludes the competition from the opportunity to compete. In effect, all pharmaceutical companies compete for available time with the doctor, which is a finite resource.

2.3 Empirical Review

Many Authors did research on the effects of Promotion of drugs involves use of tools such as detailing, give-aways, sampling, continuing medical education, community activities, direct to consumer advertising, web sites, symposiums and scientific meetings, medical journals among others.

Qualitative study carried out by Spurling G.K. suggests that many prescribers perceive pharmaceutical promotion to be a useful and convenient source of information (Spurling, 2010). Doctors who report relying on promotion tend to be older, and more likely to be general practitioners (WHO, 2005). As per the research done by Spurling G.K many physicians are

willing to give significant amounts of time to engaging in promotional activities (Spurling, 2010). By contrast, several profession organizations have called for more control of promotional activities because of evidence that promotion may be misleading (Spurling, 2010).

According to industry estimates, pharmaceutical companies spent $19.1 billion on all promotion activities, in 2001; and 21 billion USD, in 2002 (GAO, 2002). Most promotional spending is targeted to physicians. Promotion to physicians accounted for more than 80% of all promotional spending (equivalent to 12 percent of drug sales) by pharmaceutical companies in United States in 2001 (GAO, 2002).

2.4 Types of Promotional Tools Activity

Pharmaceutical companies use different communication mixes. One research quotes thirty- four marketing methods are being used (Roshnid, 2013). Promotion of drugs involves use of tools such as detailing, give-aways, sampling, continuing medical education, community activities, direct to consumer advertising, web sites, symposiums and scientific meetings, medical journals among others. They are discussed here some of them are common in our country under in detail.

2.4.1 Personal selling/Detailing

A major tool of marketing communication in the prescription drug market is detailing, in which drug manufacturers send sales representatives to visit physicians. It is the detailing by the representative of the company and the way the sales personnel handle objections and use visual aids (Roshnid, 2013). This type of personal selling activities allows sales representatives to directly discuss compliance information, side-effects, and clinical studies of the drugs. This involved developing a good rapport with the doctor.

Personal selling, as it includes regular visits of medical representative/ manager, rapport of doctors with medical representative, detailing story by medical representative and inputs presented by medical representative during their visits like doctors samples, product literature/ updates and coupons for free samples. Hence it can be concluded that personal selling influences the doctors most while prescribing products of a particular company (Taneja, 2008). Personal selling forms the backbone of the entire marketing activities. Medical representative meets doctors to influence prescription pattern of doctors in favour of their brand (Theodorou, 2009).

The unique characteristics of the pharmaceutical industry have created the need for a large sales force, costing pharmaceutical companies over $6.8 billion in 2006 (Carter, 2009). Although personal selling (or detailing) is expensive, it does account for the highest return on investment

of any marketing activities available to the pharmaceutical company (Carter, 2009). Given the critical role played by physicians in the commercial success of a prescription medicine, all major pharmaceutical companies concentrate their personal selling efforts on physicians (Carter, 2009). Typical personal selling sessions with physicians last less than three minutes (Carter, 2009).

The pharmaceutical industry spends more funds on drug detailing than on any other marketing instrument. Similar to the effect of advertising, the impact of detailing expenditures spills over beyond the current period (Liu, 2007). Pharmaceutical detailing cost 3,300 million Euros and accounted for 75% of the overall cost of promotion, making promotion 17.3% of revenue (Spurling, 2010). In a study done by Oshikoya and la el, over 40% of the respondents occasionally rely on information from pharmaceutical companies or drug promotion forum/product launches (Oshikoya, 2011).

Research done in Nigeria shows that over 50% of the respondents reported that MRs were a good, accurate and reliable drug information source. This finding may however differ in practice. It may however explain why many of the respondents found information from MRs very useful and ready to use when prescribing (Oshikoya, 2011). A 2008 physician survey found that just 11% physicians say that pharmaceutical company representatives greatly influence them (PHARMA, 2008). Sales representatives are frequently the only source of information about medicines in developing countries where there may be as many as one representative for every five doctors (WHO, 2005).

Pharmaceutical industry sales representatives influenced physicians significantly. A study by Theodorou L and his friends show that 43% of doctors believe that their prescription is influenced by regular visits of MR; while quality of detailing plays a key role in affecting prescription decision of doctors (Theodorou, 2009). When the physician listens to the detailing by a sales person and later accepts the gifts or samples given by the sales person an immediate industry-physician relationship is established. This puts the doctor under some obligation to prescribe the brands that are promoted. The time spent with sales personnel is associated with some benefits to the doctor like getting information and free samples but it takes away the physicians' valuable time (Roshnid, 2013).

2.4.2 Promotional Materials & Gifts

The influence of promotional materials such as gifts is higher on inexperienced physicians rather than senior consultants. Inexperienced physicians are interested on pharmaceutical gifts whereas

senior consultant physicians would like to get more of scientific information from medical representatives; however, the study revealed that compared to common gifts scientific information have a strong influence on all physicians (Siddiqi, et al., 2011).

Gifts such as stationeries, coffee mugs, stethoscope, towels, gowns, note book calendars, umbrellas, sun shade for cars, and others which are related to the physicians day to day activity in regard to patient care are usually emblazoned with product and /or company names and are called product reminder but their potential to influence prescription behaviour extends beyond the advertisement they bear. Some physicians see these industry gifts as professional entitlements and if these physicians did not get any gift from a given pharmaceutical company, they are less likely to prescribe the company's product because they think that the company did not give them attention (Katz, Caplan, & Merz, 2010).

A study shows that even if most of the gifts that physicians receiving are in line with professional and pharmaceutical guidelines, still there are some personal gifts which are not. For example, gifts such as tickets to sporting events and entertainment and travel expenses to physicians' partners are against the accepted norms (McNeill, Kerridge, Henry, Stokes, Hill, Newby, Macdonald, Day, Maguire and Henderson, 2006).

2.4.3 Sampling

The promotional activities of the company are represented by the samples that a representative of the company offers the physician in a typical sales call. This form of promotion is of particular importance in the pharmaceutical industry: the physician's acceptance of the sample represents a certain degree of commitment to use the product (Carter, 2009). Furthermore, the sample often is used by the physician to provide the patient an initial supply (Hawkins, 2012). Samples left by the sales personnel may be the only reminder to the product long after the detailing (Roshnid, 2013).

The 2008 physician survey found 69% of physicians believe free drug samples are either always useful (52%) or often useful (17%). 95% of physicians surveyed agreed that samples allow patients to start immediate treatment and 84% said that sample provide them with useful first-hand experience (PHARMA, 2008). In each year from 1997 to 2001, providing samples to physicians and sending sales representatives to meet with physicians (sampling and detailing, respectively) accounted for more than 80% of expenditures on promotional activities. J.Whittle,

in his paper claimed that samples come with an expectation of access to physician and staff time by sales representatives for the companies that supply the drugs (Chew et al, 2000).

Even use of drugs samples as described above is unlikely to cause harm, some negative aspects of such use must be considered. This includes influencing the prescribing habits of doctors towards more expensive medications or against adherence to evidence based guidelines (Chew et al, 2000). Chew and colleagues found out that residents and internists were more likely to use drug samples than family Physicians or attending.

Shaghnessy and Bucci found that the majority of the residents in their survey felt that drug samples and other pharmaceutical advertisements influenced their prescribing, about 70% of residents of residents thought that samples were more important to their prescribing decisions and helped them learn more about new medications. They felt that the educational benefit from use of the drug samples and drug representatives outweighed adverse effects on their prescribing. Potentially, drug samples can be diverted for resale or inappropriate use found that only 54% of 5546 samples that were dispersed in a family practice residency office were dispensed directly to patients. Westfall and colleagues studied the personal use of drug samples by physicians and office staff. Of 230 samples taken for personal use, 152 were used by the person who took them and 78 were family use (Westfall & McCabe, 1997). Beyond the ethical concerns, there is also the problem with people acting as their own physicians.

Not only can drug samples be used inappropriately by physicians, but can also be misused by the drug representatives themselves. Hodges and colleagues (1995) reported that 48% of the pharmaceutical representatives surveyed had given drug samples to non-physicians. There is also other aspect of drugs samples use.

Though drug sampling is one of the most common marketing techniques practiced in the pharmaceutical industry, the tendency to hand out free drug samples decline as the age of the drug increase (Schramm, et al., 2007).

2.4.4 Continuing Medical Education (CME) Sponsoring

In the past, physicians will be relaying on drug firms particularly on medical representatives for information about use of drugs particularly for newer drugs but recently the trend is changing and physicians are also started relying on drug firms to finance their scientific meetings such CME, congress and patient case presentation (New York University, 2008). Most of the time, conducting a full scale CME program regularly is expensive and in such cases, organizers seek

for assistance from pharmaceutical companies either to get partial or full sponsorship. The support from pharmaceutical companies can occur in several ways, including educational grants for programs on specific topics, speaker fees and meal (Singh, Bush, Dalsing & Shortell, 2011).

In CME sessions, event organizers can choose a topic that is in line with the sponsor company product offerings. The content of the CME presentation favorably highlights the sponsor company offerings. In addition, during the process of selecting a qualified speaker, the event organizers choose the one who has a positive attitude towards the sponsoring company offerings. The commercial influence that results from these decisions is not necessarily acknowledged or even conscious, but might well reflect the cumulative effect of subtle influences and financial dependency that can affect even the best-intentioned CME providers (Marlow, 2007).

2.4.5 Influential Key Opinion Leaders (KOL) On Colleague Physicians and Medical Students

It has been discovered that innovative promotional techniques in pharmaceutical industry play a key role in keeping physicians' involvement and getting their interest in the product that companies are promoting (Siddiqi, et al., 2011). Around 28% of respondents received payments for consulting, giving lectures or enrolling patients in trial (Campbell, Gruen, Mountford, Miller, Cleary & Blumenthal, 2007). KOLs in the pharmaceutical industry play a great role. They can influence the prescribing behavior of their students and colleagues in their circle. One study showed that physicians' prescription behavior was significantly influenced by the behavior of research active specialists or KOLs in the physicians reference group (Nair, et al., 2008). Similarly, a study conducted on the final year medical students revealed that students prescribe the drug that their teachers and KOLs use as an example during lecture (Tichelaar, et al., 2010).

The contribution of KOLs to pharmaceutical companies is not only by prescribing or influencing the prescription behavior of fellow physicians to use a given drug but also they help companies during the clinical practice guidelines development (Campbell, et al., 2007). A study revealed that around 7% of authors of clinical practice guidelines admitted that their recommendation of drugs in the guidelines is influenced by the relationship they have with pharmaceutical companies and 19% of them believed that the recommendation of their coauthors is influenced by the pharmaceutical companies (Choudhry, et al., 2002).

2.5 Conceptual Framework of the Study

Table 2.5.1: Promotion tools used by private pharmaceutical importers in Addis

Independent Variable   **Dependent Variable**

Promotional tools

- Commercial Detailing
- Drug Sampling
- Give-a-ways
- Continuous Medical Education (CME)
- Influential Key Opinion Leaders (KOL)

Sales of pharmaceuticals products
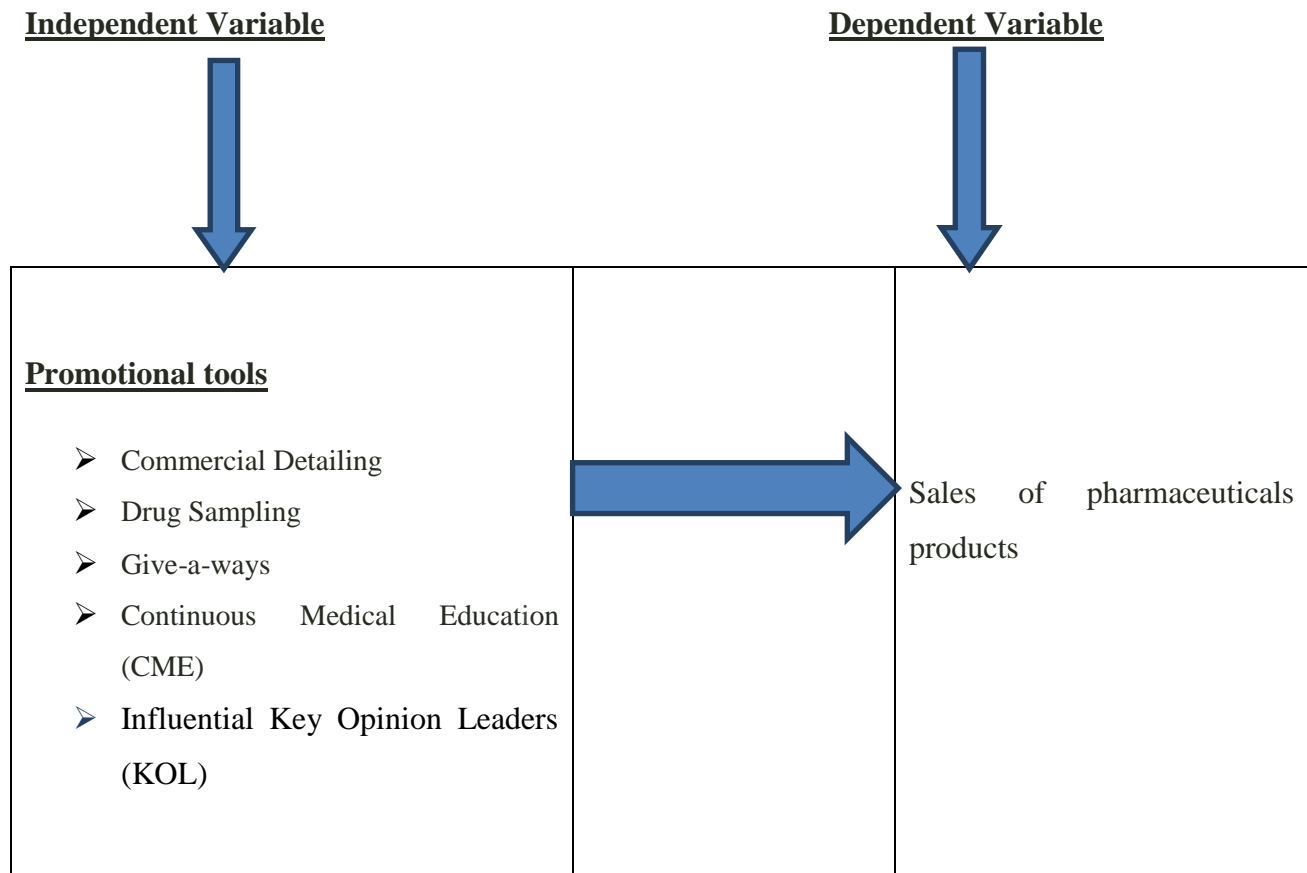
Source: Review of Related Literature and Study Framework

Promotion of drugs involves use of tools such as detailing, give a way, sampling, continuing medical education, community activities, direct to consumer advertising, web sites, symposiums and scientific meetings medical journals among others with an objective of promoting sales. However, the effectiveness of each promotional tools activity undertaken by the private pharmaceutical importers influences the sales performance of pharmaceutical products. The pharmaceutical industries throughout the world are heavily involved in aggressive drug promotion (Campbell et al, 2007). Evidence suggests that extensive pharmaceutical promotion can create potential for ethical dilemma because such activities may influence physician prescribing behaviour without necessarily benefiting the patients (Calin et al, 2005) and (Rohraa, 2006).

2.6 Study Hypotheses

Based on the review of related literature and study framework, to arrive at the real causes of sales of pharmaceuticals products in this study, the following hypotheses have been tested:

1. H1: Promotional tools with commercial detailing is positively related with sales of pharmaceuticals products.

2. H2: Promotional tools with sampling is positively related with sales of pharmaceuticals products.

3. H3: Promotional tools with give-a-ways is positively related with sales of pharmaceuticals products.

4. H4: Promotional tools with continuous medical education (CME) is positively related with sales of pharmaceuticals products.

5. H5: Promotional tools with influential key opinion leaders (KOL) is positively related with sales of pharmaceuticals products.

CHAPTER THREE: RESEARCH DESIGN AND METHODOLOGY

This chapter gives the details regarding the procedure that are used in collecting data and analysis. Pertinent issues that are discussed here include the research design, population of interest, data collection methods and data analysis methods. It focuses on the sources of data and their collection techniques, the sampling procedure to be adapted and tools for data presentation and interpretation.

3.1 Research design

Descriptive research design was applied in the study in order to provide an accurate picture of how the application of the promotion tools by the private pharmaceutical importers affects the sales performance. According to Vieira (2002), descriptive research bases the objective to know and interpret a reality without any interference or change. In this type of investigation the main interest is to find out phenomena, describe, classify, and interpret them. The descriptive research goes further in examining the problem since it is undertaken to ascertain and describe the characteristics of the issue. The data collected is often quantitative and statistical Package for Social Sciences (SPSS) was utilized to perform the analysis as it aids in organizing and summarizing the data by the use of descriptive statistics. (Mattar, 1996) acknowledges that this type of research is well structured and directed to solve the problem.

3.2 Population and sampling techniques

To conduct the study the researcher used purposive sampling technique to select the portion of pharmaceutical importers who were included in the study.

According to FMHACA website, there are sixty one (61) pharmaceutical importers (human medicine importers) in Ethiopia, of which sixty (60) of them are private owned importers and the rest one (1) importer is owned by the government with the name pharmaceutical fund supply agency (PFSA). Since this study focuses on private importers, the total population of the study is 60 that are licensed by FMHACA, in which one respondent is considered from each pharmaceutical importer. The data is collected from the target respondent is the Technical Managers (Pharmacists) or Marketing Managers running these companies because they are assumed that having past and present knowledge of pharmaceutical marketing and is the best in offering valuable information to the study.

The sample size for the study was calculated by using a simplified formula of sample size determination cited by (Israel, 2013). Accordingly, the sample size for the research by using 0.05 sampling error and 95% confidence level is 52.

The formula for sample size determination is:

$$n = \frac{N}{1 + N(e)^2}$$

Where:

n = is the sample size,

N = Total population size,

e = Sampling error (Usually 0.10, 0.05 and 0.01 are acceptable error; the researcher used 0.05 sample error and 95% confidence level).

Then the sample size of the study was:

n= 60/1+60(0.05*.05)

n=60/1+60(.0025)

n=60/1+0.15

n=60/1.15

n=52
accordingly, the sample size for the research by using 0.05 sampling error and 95% confidence level is 52.

The sampling technique used to select the sample in this study was obtained through systematic sampling of random sampling design. After that, numbers are allocated to all study population in the study which is 60 private pharmaceutical importers. Then by using fixed sampling interval, starting with the first institute every 8th institute was selected not to be included in the sample. Accordingly, the 1st, 9th, 17th, 25th, 33th , 41th, 49th, and 57th were selected not to be included in the sample. The rest 52 institutes (importers) were select as samples and considered in the study.

3.3 Source of data and data collection tools used

It refers to gathering of various data required in the research, for this studies both primary and secondary sources of data are used.

The survey instrument for primary data source was a questionnaire with both structured and unstructured questions divided into three sections. The first section sought to gather general information about the firm's background, marketing organization, and the environments. The second section addressed issue related to promotion. The third section addressed the key objectives of the study. To answer the objectives of the study questions are formulated using rating scales.

The primary data was obtained from people managing the marketing department; who included either, marketing manager, sales managers, brand manager, marketing supervisors or the equivalent function in the private pharmaceutical importers.

The secondary data source was obtained through literature survey of the relevant books, journals, magazines, government publications and the internet.

3.4 Procedures of data collection

The researcher was applied both primary and secondary data sources to conduct the study. The researcher prepares questioner. Since the sample size is 60 private pharmaceutical importers the researcher are prepare the questioner by the same amount. Before distributing to the respondents, the completed questionnaires were edited to ensure accuracy, consistency, uniformity, and completeness. After this the researcher were ask an introduction letter from the university together with a specimen letter written by the researcher was attached to the questionnaire. Then the questionnaires were distributed to the selected respondents by the researcher in the form of one questionnaire per firm was administered using the "drop and pick up later' method.

3.5 Methods of data analysis

Descriptive data analysis method was utilized to analyze the primary and secondary sources of data that are gathered. After gathering the data, the researcher used both qualitative and quantitative methods of analysis. The qualitative data was edited for minor errors, coded and classified to have similar characteristics, and ready for analysis. The quantitative analysis was undertaken using percentage and ratio, tables, and mean and the researcher used statistical software called SPSS to see the relationship between promotional tools (as independent variable)

on the causes of sales of pharmaceuticals products (as dependent variable) using regression analysis.

This is followed by the examination and presentation of demographic profile of respondents using Descriptive Statistic. According to Zikmund (2000), descriptive analysis refers to the transformation of the raw data into a form that will make them easy to understand and interpret. Secondly, the Cronbach Alpha testing will be used as it is the most well accepted reliability test tools applied by social researcher (Sekaran, 2006). In Cronbach's Alpha reliability analysis, the closer Cronbach's Alpha to 1.0, the higher the internal consistency reliability. (Cronbach's Alpha; Cronbach, 1946). Cronbach's Alpha measures;

- Reliability less than 0.6 considered poor
- Reliability in the range 0.7 considered to be acceptable
- Reliability more than 0.8 considered to be good

Third, in order to determine whether there are significant relationships among the independent variables and dependent variable, Pearson Correlation Coefficient analysis will be carried out. The scale model suggested by Davies (1971) was used to describe the relationship between the independent variables and the dependent variable, are as shown below:

- 0.7 and above – very strong relationship
- 0.50 to 0.69 – strong relationship
- 0.30 to 0.49 – moderate relationship
- 0.10 to 0.29 – low relationships and
- to 0.09 – very low relationship

Finally, Multiple Regression Analysis is conducted to examine which among the three dimensions in independent variables is the most important in explaining the relationship between Promotional tools and Sales of pharmaceuticals products among private pharmaceutical importers in Addis Ababa. This study has used a regression model to estimate or predict the average value Sales of pharmaceuticals products variable has from the independent promotional tools variables. The equation of multiple regressions on this study is generally built around two sets of variable, namely dependent variables (Sales of pharmaceuticals products) and independent variables (Promotional tools). The basic objective of using regression equation on

this study is to make the researcher more effective at describing, understanding, predicting, and controlling the stated variables.

Table 3. 5. 1 Independent and Dependent Variables

Independent Variables	Dependent Variable
Commercial Detailing	Sales of pharmaceuticals products
Drug Sampling	
Give-a-ways	
Continuous Medical Education (CME)	
Influential Key Opinion Leaders (KOL)	

Sales of pharmaceuticals products = f (commercial detailing, drug sampling, give-a-ways, continuous medical education, and influential key opinion leaders).

$$SPP=\alpha+\beta_1CD+\beta_2DS+\beta_3GW+\beta_4CME+\beta_5KOL+E$$

Where

α is intercept term

SPP= Sales of pharmaceuticals products

CD= Commercial Detailing

DS= Drug Sampling

GW= Give-a-Ways

CME= Continuous Medical Education

KOL= Key Opinion Leaders

E= model error term

α is the intercept term- it gives the mean or average effect on SPP of all the variables excluded from the equation, although its mechanical interpretation is the average value of SPP when the stated independent variables are set equal to zero.

β_1, β_2, β_3, β_4, & β_5 refer to the partial regression coefficient of their respective independent variable which measures the change in the mean value of SPP, per unit change in their respective independent variables.

To determine the extent to which the explanatory variables explain the variance in the explained variable, multiple regression analysis will be performed.

3.6 Validity and Reliability Check

Validity is the degree to which a measure accurately represents what it is supposed to do. It is concerned with how well the concept is defined by the measure(s). Therefore, this study tried to addresses validity through the review of literature and adapting instruments used in previous research. To achieve the validity in the instrument of data collection, the instrument which is prepared in English language is checked by the advisor to comment the extent to which the items are appropriate in securing relevant information to the research. The researcher made change or replaces the construction of some items in the questionnaire based on the consultation of feedback received from advisor.

A pilot test has been conducted in 52 private pharmaceutical importers in Addis Ababa. For this purpose, 52 respondents were selected and the respondents were given the questionnaires. The testing was conducted to check the consistency of all related factors in the study based on Cronbach's Alpha value.

Table 3.6.1 Alpha Coefficient for Each Section of Questionnaire

S/n	Section	No. of Items	Alpha Value
1	Types of promotional tools	5	.823
2	Statements of promotional tools with commercial detailing	3	.748
3	Statements of promotional tools with sampling	5	.751
4	Statements of promotional tools with give-a-ways	3	.769
5	Statements of promotional tools with continuous medical education (CME)	5	.784
6	Statements of promotional tools with influential key opinion leaders (KOL)	4	.773

7	Statement of sales of pharmaceuticals products	5	.772

Source: Research Questionnaire, 2017

3.7 Measurement

To ensure the research is conducted effectively and efficiency, the detail of the procedures of obtaining information is needed in conducting the study to solve the problem. The descriptive research method was primarily used to obtain the information need for the study. The questionnaire was divided into nine sections to study the characteristics of the important variables in identifying the relationship between promotional tools and sales of pharmaceuticals products among the private pharmaceutical importer company. Section A of the questionnaire comprised of demographical background of the respondents. It consists of gender, age, educational levels, working experience, organization year, ownership, marketing staff and pharmaceutical product lines. Section B of the questionnaire comprised of issues related to promotion. It consists of promotion budget determination factors, dilemmas facing the promotion of pharmaceuticals in Addis, and how to reduce dilemmas facing in the organization. Whereas section C, D, E, F, G, H and I of the questionnaire are part of the instrument that were aimed to test the variables constructed. Section C seeks to measure the types of promotional tools, Section D, E, F, G & H seeks to measure Commercial Detailing, Sampling, Give-a-ways, Continuous Medical Education (CME), and Influential Key Opinion Leaders (KOL) of the respondents in respectively. Section I of the questionnaires presents item of Sales of pharmaceuticals products (dependent variable).

Table 3.7.1 Layout of Promotional Tools and Sales of Pharmaceuticals Products

Section		Item
A	Demographic • Gender • Age • Educational Level • Working Experience • Marketing Staff • Product Lines	5

B	Issues Related to Promotion • Promotion Budget Determination Factors • Dilemmas Facing the Promotion of Pharmaceuticals in Addis • How to Reduce Dilemmas Facing in the Organization	6
C	Types of Promotional Tools	5
D	Commercial Detailing	3
E	Sampling	5
F	Give-a-ways	3
G	Continuous Medical Education (CME)	5
H	Influential Key Opinion Leaders (KOL)	4
I	Sales of Pharmaceuticals Products	5

Source: 1. Allen and Meyer, 1990; 3 measures

2. Taylor and Bowers, 1972; 3 measure

A total of 6 measures were selected from established sources. These include measures of promotional tools (Allen and Meyer, 1990; 3 measures) and general satisfaction (Taylor and Bowers, 1972; 3 measure). In addition, a set of 7 items of demographic information and 6 items of issues related to promotion is also included.

Table 3.7.2 Measurement Items

Variables	No of Items	Scales	Sources
Sales of Pharmaceuticals Products	5	Five Point Likert Scale (1-5)	Allen and Meyer,(1990)
Commercial Detailing	3	Five Point Likert Scale (1-5)	Taylor and Bowers (1972)
Sampling	5	Five Point Likert Scale (1-5)	Allen and

			Meyer,(1990)
Give-a-ways	3	Five Point Likert Scale (1-5)	Taylor and Bowers (1972)
Continuous Medical Education (CME)	5	Five Point Likert Scale (1-5)	Allen and Meyer,(1990)
Influential Key Opinion Leaders (KOL)	4	Five Point Likert Scale (1-5)	Taylor and Bowers (1972)

Source: 1. Allen and Meyer, 1990; 3 measures and 2. Taylor and Bowers, 1972; 3 measure

The five-point scale is used to measure the level of the factors as shown in Table 3.8.3.

Table-3.7.3: Five-Point Scale

S/n	Choices	Score
1	Strongly Disagree	1
2	Disagree	2
3	Neutral	3
4	Agree	4
5	Strongly Agree	5

Source: Research Questionnaire, 2017

3.8 Ethical Considerations

Ethical consideration plays an important role during data collection time. Researcher was aware and followed the ethical processes related to the studies. Furthermore, the first page of the questionnaire displays an opening introductory note that requests the respondents' cooperation to provide required information for the study. They are assured that the information they provide was kept confidential. All potential study participants informed about the procedure that was used in the study and the researcher explained the objectives and significance of the study to the respondents. The researcher removed the respondents' information that requires identification of names and other identity. During the data collection and any activities that matter to the research, the researcher made positive interaction with respondent.

CHAPTER FOUR: DATA ANALYSIS AND INTERPRETATION

4.1 Introduction

This chapter presents the findings of the study and is divided into three parts. The first part involves the analysis of the data on general information and marketing organization of the firm. The second part deals with issues related to promotion. The third part deals with the analyzing data touching on the objectives of the study.

4.2 Data presentation

This section describes the frequency distribution of respondents' personal or demographic characteristics. Demographic characteristics (sex, age, working experience, and education level) described by using frequency and percentage. Respondents' view about the effects of promotion in their organization sales performance, and about the relationship between their promotional tools and the skills needed to perform the work is described using descriptive statistics.

4.2.1 Demographic Characteristics of the Respondents

Table 4.2.1: Frequency Distribution-Demographic Characteristic of the Respondents

S/n	Item	Measurement	Freq.	Percentage	
				Valid %	Cumulative %
1	Sex	Male	35	67.3	67.3
		Female	17	32.7	100
		Total	**52**	**100**	**-**
2	Age	21 – 30	10	19.2	19.2
		31 – 40	25	48.1	67.3
		41 – 50	10	19.2	86.5
		51 – 60	5	9.6	96.2
		More than 60	2	3.8	100
		Total	**52**	**100**	**-**
3	Educational Qualification	Diploma holder	2	3.8	3.8
		First degree	40	76.9	80.8
		Second degree	10	19.2	100
		PhD	-	-	100
		Total	**52**	**100**	**-**

4	Working Experience	Less than a year	3	5.8	5.8
		2 – 3 years	9	17.3	23.1
		4 – 5 years	27	51.9	75
		More than 5 years	13	25	100
		Total	**52**	**100**	**-**

Source, Survey (2017)

Table-4.2.1 shows the summary of respondents' demographic factors. Accordingly, item-1 of the table indicates out of 52 respondents, 67.3% is male and the rest 32.7% is female. Based on the information, we can infer that the majority of employees currently working in the private pharmaceutical importers are male.

Item-2 of the table specifies age distribution of the respondents. As the result the greatest number,48.1% of the respondents are in their 31 to 40 age group, followed by respondents aged 21 to 30, 41 to 50, 51 to 60 and more than 60; 19.2%, 19.2%, 9.6% and 3.8% respectively. There are no respondents less than 20 years old. Therefore, almost 67.3% of current employees at the organizations are less than age group of 40 years. So, the majority of current employees are young and mature active enough professionals.

Item-3 of the table is concerning the educational qualification of the respondents. Consequently, the largest numbers of the respondents 76.9% first degree holder followed by second degree holder 19.2% whereas 3.8% diploma holder. There are no respondents who are PhD qualified. Depending on the respondents' response, one can conclude that the majority of employees in the organizations are professional enough.

Item-4 of the table is regarding the working experience or service years of the respondents in the organizations. It indicates that 51.9% of respondents have been working in the organizations for 4 to 5 years, 25% for more than 5 years, 17.3% for 2 to 3 years, and 5.8 less than a year each. Therefore, the majority of the respondents have been working for more than four years in the organizations. So, this is significant for the soundness of the data that provided by the respondents since those who have more stayed in the organizations know more about the organizations and assumed to be they can offer precise information.

4.2.2 Private pharmaceutical marketing organization

Graph 4.2.2 shows that all the private pharmaceutical importers in Addis have marketing staff to carry out the promotional activities. It is noticeable that 34.6% of the pharmaceutical have marketing staff of between 1 to 6 people which is an indication that most of these firms give emphasis to the marketing of their products. Only few (3.8%) had marketing staff exceeding 21 to 27 people.

Figure 4.2.1: Marketing staff in private pharmaceutical importers
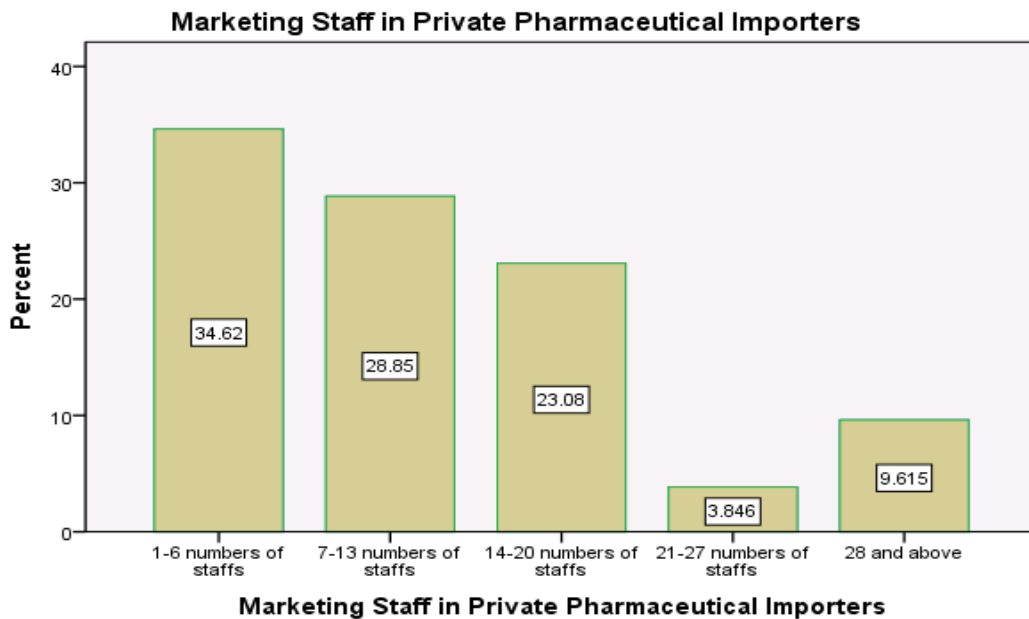
Source, Survey (2016)

Figure 4.2.2: Minimum qualification of the marketing staff in the private pharmaceutical organization

Source, Survey (2017)

32
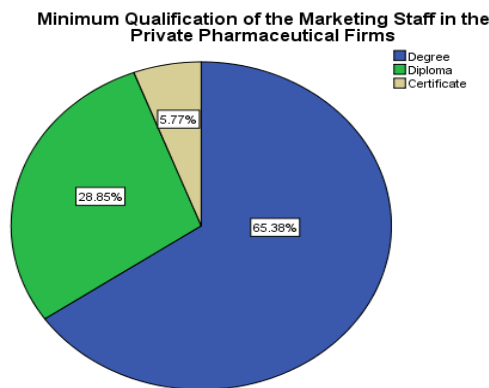
Figure 4.2.2 shows that the minimum qualification for the marketing personnel among the pharmaceutical firms in Addis is first degree in pharmacy for 65.4% and only the minority prefer certificate holders (5.8%). 28.8% of the respondents prefer diploma as the minimum qualification.

4.2.3 Pharmaceutical product lines

Figure 4.2.3: Private pharmaceutical organization product lines

Private Pharmaceutical Importers Product Lines

Legend:
- Over the counter (OTC) drugs
- prescription drugs
- Over the counter (OTC) and prescription drugs
- Over the counter (OTC), Prescription drugs, and Veterinary products
- Veterinary products, Herbal, and Prescription drugs

Values shown: 5.77%, 5.77%, 11.54%, 28.85%, 48.08%
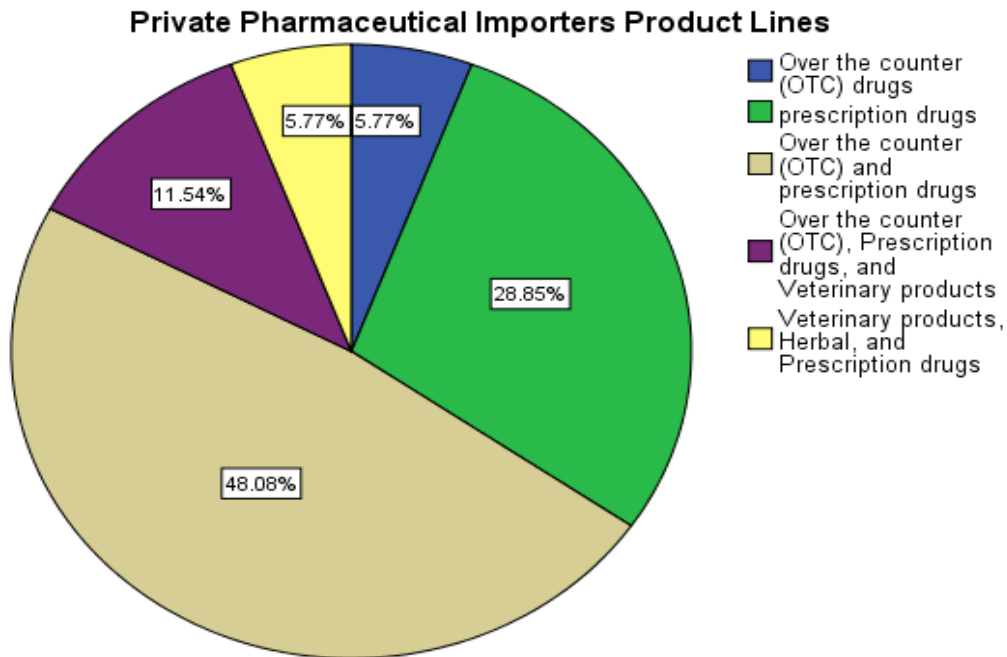
Source, Survey (2017)

Figure 4.2.4 above indicates that 48.1% of the pharmaceutical firms have over-the-counter (OTC) and prescription products lines. Only 5.8% and 28.8% have over-the-counter (OTC) only and prescription only products lines respectively.

4.3 Issue related to Promotional tools

4.3.1 Promotion budget determination factors

Figure 4.3.1: Factors considered by private pharmaceutical importers in determining the promotion budget

Factors considered by private pharmaceutical importers in determining the promotion budget

Legend:
- Level of competition
- Resource availability
- Percentage of Sales
- Promotion objective
- Others

13.46%

13.46%

11.54%

34.62%

26.92%
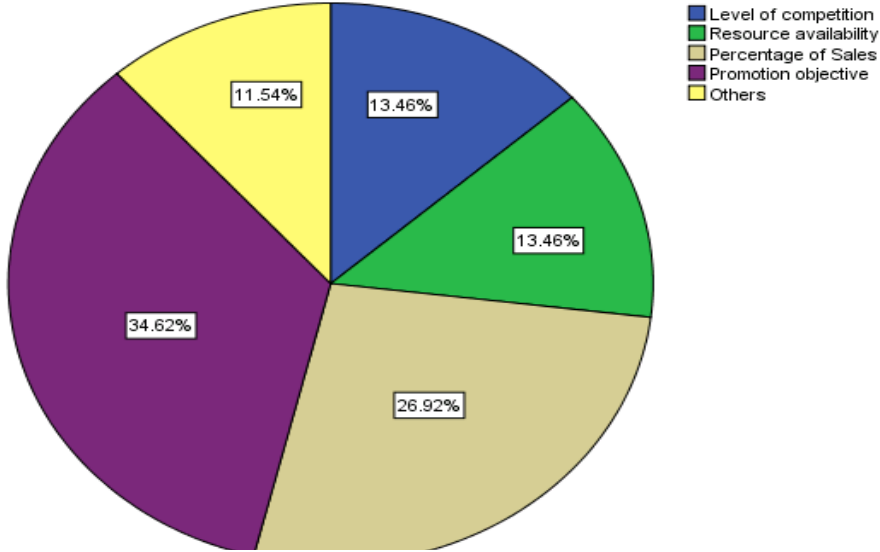
Source, Survey (2017)

Figure 4.3.1 shows the factors considered by pharmaceutical firms in determining the promotion budget. 34.6% of the respondents indicated that promotion objective is main factor of consideration in promotion budget determination. Only the minority of the respondents (13.5%) choose resource availability and level of competition as a factor of consideration.

4.3.2 Dilemmas facing the promotion of pharmaceuticals in Addis

Figure 4.3.2 shows the dilemmas encountered by private pharmaceutical importers in Addis. Resource restriction and high cost of production was highlighted by most of the respondents (21.2%) as key challenges facing most pharmaceutical firms in Addis. Only the minority of the respondents (3.8%) indicated that lack of qualified staff was a challenge to private pharmaceutical organization.

Figure 4.3.2: Dilemmas facing the private pharmaceutical organization in Addis
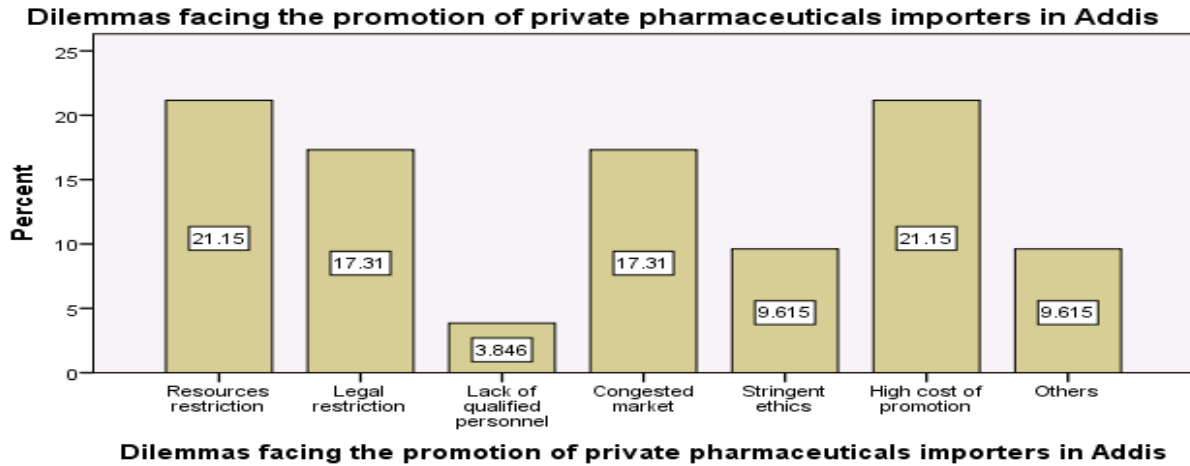
Source, Survey (2017)

4.3.3 How to reduce dilemmas facing the private pharmaceutical organization

Figure 4.3.5 shows the measures to reduce the dilemmas facing pharmaceutical firms in Addis. 36.5% of the respondents indicated that they preferred industry self-regulation and 32.7% government control. Only 9.6% preferred measures other than industry self-regulation and government control

Figure 4.3.3: Measures to reduce dilemmas facing the private pharmaceutical organization

Source, Survey (2017)

35
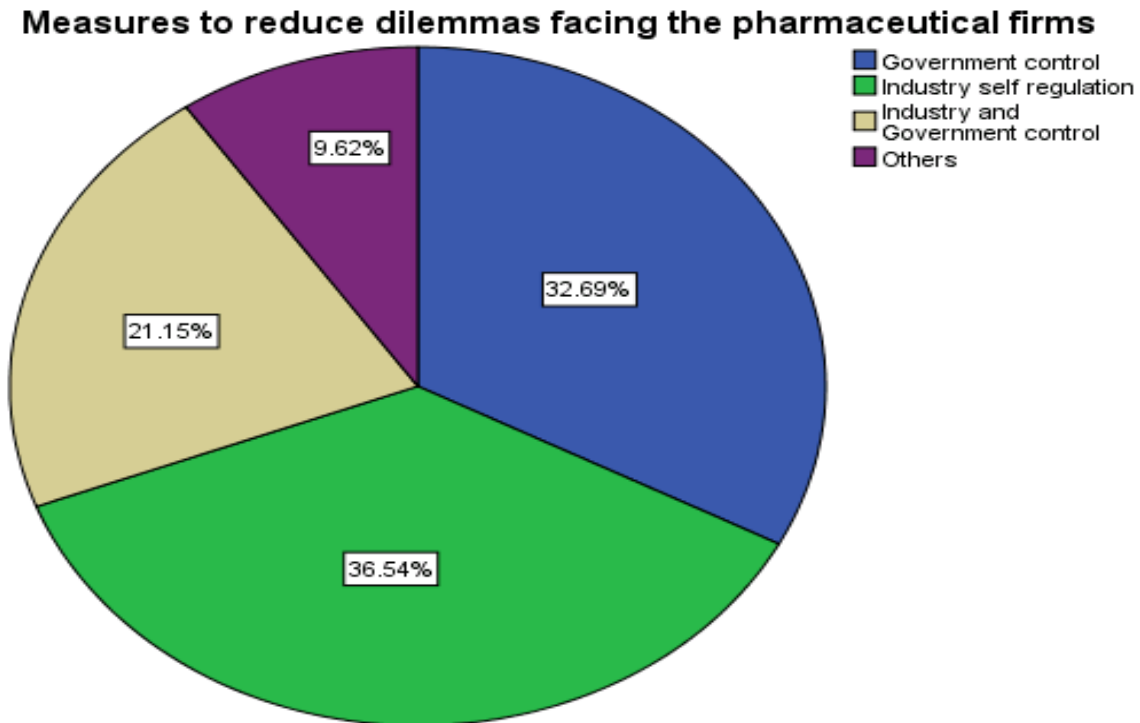
4.4 Goodness of Measure

4.4.1 Reliability Analysis

The reliability test is concerned with the stability and consistency measurement to access the goodness of a measure. It will answer the questions on how consistently it measures a particular concept. For that purpose, the Cronbach's alpha has been used to measure reliability among variables.

According to Sekaran (2003), reliabilities with less than 0.60 are deemed poor while those in the range of 0.70 ranges, is acceptable and those above 0.80 is considered as good. Since the Reliability measure in Alpha scale for the whole study was found to be 0.774, the instrument used to measure each variable in this study is reliable.

Table 4.4.1 Reliability Statistics (Whole Data)

Cronbach's Alpha	N of Items
.774	41

4.4.2 Result of Descriptive Analysis on the factors

In this section, the collected data was entered and reported by using SPSS. The mean value of each satisfaction factor with respect to respondents' category is analyzed and presented.

Table 4.4.2 Overall Descriptive statistics of study variables

Descriptive Statistics

	N	Mean	Std. Deviation
	Statistic	Statistic	Statistic
Commercial Detailing	52	3.7051	.49264
Sampling	52	3.3615	.45510
Give-a-ways	52	2.4231	.63009
CME	52	3.1769	.62454
KOL	52	1.5144	.38186
Sales of Pharmaceuticals Products	52	3.6038	.46189

Source, Survey (2017)

As indicated in the above table the result of the data that gather from the private pharmaceutical importer company; the mean value of Give-a-ways and Influential Key Opinion Leaders (KOL) is below the average this shows that these two promotional tools factors that mean give-a-ways

and influential key opinion leaders (KOL) are the main indication that most private pharmaceutical importer company don't use them much.

The marketing manager believes that their company losing sales and resources due to ineffective promotional tools utilization and marketing strategies. Accordingly, the marketing manager designing an effective promotional tool involves a number of strategic decisions. Speed of return on promotion investment in relation to strategic objectives, nature of information, nature of distribution, image requirement, and others are some of the strategies of evaluating the effectiveness of the promotional tools on sales.

On the other hand table 4.3.1 show that the mean value of Commercial Detailing, Sampling and Continuous Medical Education (CME) are above the average (i.e. 3) the result shows that these promotional tools are commonly used by all the private pharmaceutical importer company. The mean value of the dependent factors that mean Sales of Pharmaceuticals Products are 3.604 this mean that the value is above the average this show that majority of the promotional tools had a great effect on sales.

4.5 Correlation analysis

Correlation is a bivariate analysis that measures the strengths of association between two variables. Inter- correlations coefficients (r) were calculated by the means of Pearson's Product Moment. According to Cohen (1988), r ranging from 0.10 to 0.29 may be regarded as indicating a low degree of correlation, r 0.30 to 0.49 may be regarded as indicating a moderate degree of correlation and r ranging from 0.50 to 1.00 may be regarded as a high degree of correlation. Usually, in statistics, we measure three types of correlations: Pearson correlation, Kendall rank correlation and Spearman correlation. For this study I used Pearson correlation.

Table 4.5.1 Correlation result

Promotional Tools	Sales of Pharmaceutical Products	
	Pearson Correlation	Level of Sig
Commercial Detailing	.474	.0000
Sampling	.393	.0000
Give-a-ways	.195	.0000
Continuous Medical Education (CME)	.445	.0000

Influential Key Opinion Leaders (KOL	-.606	.008

As shown the above tables the relationship between commercial detailing, sampling, give-a-ways, continuous medical education (CME), and influential key opinion leaders (KOL) with respect to sales of pharmaceutical products. The result indicate that sales of pharmaceutical products with commercial detailing, continuous medical education (CME), and sampling are the most dominant figure which has moderate relationship between sales of pharmaceutical products according, to the scale model suggested by Davies (1971) in the range of 0.30 to 0.49 and sales of pharmaceutical products with give-a-ways which has low relationships and next to this sales of pharmaceutical products with influential key opinion leaders (KOL) has not relationship with sales of pharmaceutical products.

4.6 Regression analysis

This section presents finding obtained from statistical analysis of the data gathered through self-administered structured questionnaire and taste of the hypothesis was conducted using multiple linear regression analysis.

Multiple regressions analysis was conducted to determine whether a relationship exists between the independent variable and the dependent variable and their level of significance.

Overall goodness fit of the model

Table 4.6.1 Model Summary Promotional Tools and Sales of Pharmaceuticals Products

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.927[a]	.784	.749	.21430

 a. Predictors: (Constant), KOL, Give-a-ways, Commercial detailing, Sampling, CME

Table 4.6.2 ANOVAa Result Promotional Tools and Sales of Pharmaceuticals Products

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	4.567	5	.913	19.888	.000[b]
	Residual	2.113	46	.046		
	Total	6.679	51			

 a. Dependent Variable: Sales of Pharmaceuticals Products

 b. Predictors: (Constant), KOL, Give-a-ways, Commercial detailing, Sampling, CME

The model analysis includes the independent variable (promotional tools with commercial detailing, sampling, give-a-ways, continuous medical education (CME), influential key opinion leaders (KOL)) and dependent variable (sales of pharmaceuticals products). As indicated in the above model summary table 4.5.1 and ANOVA table 4.5.2 the linear combination of the independent variable was significantly related to the dependent variable, R=.927 between promotional tools & sales of pharmaceuticals products, adjusted R square=.749, F=19.888 (p=0.000) between promotional tools & sales of pharmaceuticals products. This implies that an estimated 74.90% of total variation in the dependent variable; sales of pharmaceuticals products, is jointly explained by the predictors, i.e., promotional tools with commercial detailing, sampling, give-a-ways, continuous medical educations (CME), and influential key opinion leaders (KOL) where as 25.10% is explained by other factors.

Individual factors affecting sales of pharmaceuticals products

Table 4.6.3 Coefficientsa of Promotional Tools Factors with Sales of Pharmaceuticals Products

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	5.895	.675		8.729	.000
	Commercial detailing	.492	.149	.398	3.297	.002
	Sampling	.427	.132	.537	3.231	.002
	Give-a-ways	-.236	.084	-.411	-2.806	.007
	Continuous Medical Education (CME)	.449	.102	.775	4.391	.000
	Influential Key Opinion Leaders (KOL)	-.073	.221	-.057	-.330	.743

 a. Dependent Variable: Sales of Pharmaceuticals Products
Source, Survey (2017)

From the above table 4.6.3, it can be learnt that the higher use of promotional tools with commercial detailing the more sales of pharmaceuticals products (Beta=-0.398), p-value (sig.) is less than α = 0.05 then the coefficient is significant. Thus the effect of promotional tools with commercial detailing' on sales of pharmaceuticals products is significant.

The coefficient of promotional tools with sampling and continuous medical education (CME) variable is .537 and .775 respectively, this implies that promotional tools with sampling and continuous medical education (CME) is positively related with sales of pharmaceuticals products and the p-value (sig.) 0.002 is lower than $\alpha = 0.05$ which means the coefficient of both variables is significant. Therefore, promotional tools with sampling and continuous medical education (CME) on sales of pharmaceuticals products is significant.

Promotional tools with give-a-ways Beta value is -0.411, this implies that give-a-ways is negatively related with sales of pharmaceuticals products. But, when t-value (-2.806) or p-value (sig.) (0.007) for promotional tools with give-a-ways is considered, p-value $< \alpha = 0.05$, thus the coefficient is significant. This implies that the effect of promotional tools with give-a-ways on sales of pharmaceuticals products is insignificant.

The coefficient of promotional tools with influential key opinion leaders (KOL) is -.057, this implies that negatively related with sales of pharmaceuticals products. But, looking at the P-value influential key opinion leaders (KOL) 0.743 are higher than 0.05, it can be understood that the coefficients are insignificant which means promotional tools with influential key opinion leaders (KOL) has no significant effect on sales of pharmaceuticals products.

To summarize the relationship of promotional tools factors with sales of pharmaceuticals products; promotional tools with influential key opinion leaders (KOL) have not significant relationship with sales of pharmaceuticals products. Whereas satisfaction with commercial detailing, sampling and continuous medical education (CME) have a significant impact on sales of pharmaceuticals products. The computed t-value of commercial detailing, sampling and continuous medical education (CME) are 3.297, 3.231 and 4.391 respectively all are statistically significant at 1%. This indicates promotional tools with commercial detailing, sampling and continuous medical education (CME) has a significant effect on sales of pharmaceuticals products. Keeping all other variables constant, a unit change in the promotional tools of commercial detailing and sampling would result in a .398 & .537 unit increased in sales of pharmaceuticals products on the other hand a unit change in the promotional tools of continuous medical education (CME) would result in a .775 unit increased in sales of pharmaceuticals products.

4.7 Hypothesis Testing

Table-4.7.1: Summary of Hypothesis Testing

This sub-topic summarizes each of hypotheses stated in Chapter 2. The results are displayed in the table below.

Hypothesis	Description	Method	Result
H1	Promotional tools with Commercial Detailing is positively related with Sales of pharmaceuticals products	Correlation	Supported
H2	Promotional tools with Sampling is positively related with Sales of pharmaceuticals products	Correlation	Supported
H3	Promotional tools with Give-a-ways is positively related with Sales of pharmaceuticals products	Correlation	Supported
H4	Promotional tools with continuous medical education (CME) is positively related with sales of pharmaceuticals products	Correlation	Supported
H5	Promotional tools with influential key opinion leaders (KOL) is positively related with sales of pharmaceuticals products	Correlation	Rejected

Source: Correlation Analysis Result, 2017

CHAPTER FIVE: SUMMARY OF THE FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The objective of this chapter is to summarize the findings reported and discuss various implications of these findings. Therefore the chapter will present the summary of the findings, conclusions, implications and recommendations of the study.

5.2 Summary of the findings

The main objective of the study was to explore the extent to which private pharmaceutical organization in Addis utilize promotion tools in creating awareness on the pharmaceutical products among medical practitioners and the public to enhance demand and thus sales.

According to the findings, 18 (34.6%) of the private pharmaceutical importers indicated that promotion objective was the main factor of consideration in determining the promotion budget. Only the minority of the firm's 7(13.5%) choose resource availability and level of competitiveness as a factor of consideration.

Private pharmaceutical organizations in Addis face myriads of dilemmas. From the results of the study resource restrictions and high cost of production was highlighted by most of the firm's 11(21.2%) as key challenges. Only the minority of the firms studied 2(3.8%) indicated that lack of qualified staff was a challenge to the private pharmaceutical importers. In reducing such dilemmas, 19(36.5%) of the firms indicated that they would prefer industry self-regulation while 17(32.7%) choose government regulation. Only 5(9.6%) preferred other measures other than industry self-regulation and government control.

 The mean value of the independent variables which means promotional tools factors like Commercial Detailing, Sampling, Give-a-ways, Continuous Medical Education (CME), and Influential Key opinion Leaders (KOL) are 3.705, 3.361, 2.423, 3.177, and 1.514 respectively. The result shows that majority of private pharmaceuticals importers company are commonly used with Commercial Detailing, Sampling, and continuous medical education (CME), because the result of the mean values are above the average value of 3.0. On the other hand, the mean value of the dependent variables sales of pharmaceuticals products indicate that majority of the private pharmaceuticals importers company are willing to use the promotional tools that had a

great effect on sales. The respondents further indicated that the company evaluated the impact of their promotional campaign quarterly.

The relationship between the dependent and independent variables are presented in the correlation analysis. The correlation analysis indicated that promotional tools with Commercial Detailing, Sampling, and continuous medical education (CME) are highly positively related with sales of pharmaceuticals products. However, promotional tools with influential key opinion leaders (KOL) doesn't have a relationship with sales of pharmaceuticals products. On the other hand, promotional tools with give-a-ways to a small related with sales of pharmaceuticals products in a positive way.

According to the result of regression analysis, model summary and ANOVA; 74.90% of total variation in the dependent variable; sales of pharmaceuticals products, is jointly explained by the predictors, i.e., promotional tools with Commercial Detailing, Sampling, Give-a-ways, continuous medical education (CME), and influential key opinion leaders (KOL) whereas only 25.10% is explained by other factors. The regression result indicates that among the independent promotional tools factors; with Commercial Detailing, Sampling, and continuous medical education (CME) are the only three factors which are positively related with sales of pharmaceuticals products and also, they have a significant impact on the private pharmaceuticals importers sales of their products. The result of regression analysis indicated that the rest promotional tools factors that mean give-a-ways and influential key opinion leaders (KOL) have not significant impact on the sales of pharmaceuticals products.

5.3 Conclusions

The study focused on the extent to which promotional tools practices affect the sale of private pharmaceutical importers products. The objectives of this study were to investigate the promotional tools methods used by private pharmaceutical importers companies in Addis Ababa and to determine the extent to which promotion elements affect sales in private pharmaceutical importers companies in Addis Ababa. Based on the major findings explained in the above together with the measurement of questionnaires of pay and fairness, the following conclusions were drawn.

Marketing managers need to determine what combination of the promotion tools that will make effective promotion programs for their ethical products. This is a tricky job since they do not know from the outset, which among the tools will help achieve the goals of their marketing

objectives. An effective promotion tools is a critical part of virtually all marketing strategies, product differentiation, market segmentation, trading up and trading down and branding, all require effective promotion. Designing an effective promotional tool involves a number of strategic decisions. Speed of return on promotion investment in relation to strategic objectives, nature of information, nature of distribution, image requirement, and others are some of the strategies of evaluating the effectiveness of the promotional tools on sales. A company should also carry out a customer value analysis to determine the benefits the customer in a target market segment wants and how they perceive the relative value of competing suppliers' offers.

Important healthcare marketing problems cannot be solved simply by altering the marketing mix of particular health-related products and services. The issues are more complex than these traditional marketing concerns. Clearly the domain of marketing can greatly assist with the diffusion of information on treatment efficacy and quality that are necessary to improve healthcare solutions. The salient marketing issues to improving the healthcare system need to be framed within the context of improving the flow of relevant information to consumers and key service providers.

Public awareness of marketing campaigns can have an important impact. Given the behavioral aspects of many health problems, however, promotions alone can have limited effectiveness. Persuading people to change behaviors is a much more difficult problem than informing them about risks. Moreover, funding for better health awareness needs to be reconsidered as a public spending priority.

Consumers (and their employers or insurers) make healthcare decisions within *quasi*-market system, and better access to salient healthcare information is clearly needed. Equally important, organizational decisions in healthcare call for a careful marshaling of the evidence on effective evidence-based treatment. Organizations clearly need to critically review treatment delivery systems to avoid mistakes and improve quality. Both consumers and healthcare organizations would benefit from more transparent systems to support healthcare decisions.

The marketing challenge in healthcare is to develop and sustain better healthcare relationships for consumers. Traditional doctor-patient relationships have been replaced by intermediary healthcare organizations. Precious few of these have built the trusted relationships that consumers demand.

5.4 Recommendations

In line with the conclusion, the study recommends the use of commercial detailing, drug sampling and continuous medical education (CME) as leading tools in the pharmaceutical marketing. The study recommends the use of combination of the promotional tools that will make effective promotion programs for their ethical products.

The firms should take more active role in sponsoring continuous medical education programs so as to establish closer working links with key stakeholders in the industry. The firms should strengthen their marketing staff to differentiate a product from the competition and provides a barrier that competitors must overcome.

The success of promotional tools adopted should be measured to determine their level of effectiveness. The researcher recommends customer satisfaction and increase in sales as ways of determining the success of the strategies adopted.

5.5 Suggestions for further research

The study mainly focused on promotional tools in private pharmaceutical importers dealing with human drugs leaving veterinary, herbal and agricultural based firms which also have great potential for further research.

The researcher limited the study to private pharmaceutical importers in Addis thus further research touching the local pharmaceutical manufacturing, government and other regions of the country can be carried out to establish whether the findings are consistent.

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SCHOOL OF GRADUATE STUDIES MA IN BUSINESS ADMINISTRATION (MBA)
DEPARTMENT OF GENERAL MANAGEMENT MBA PROGRAM

Questionnaires to be filled by Employees of private pharmaceutical importers

Annex 1 Research Questionnaires

Dear Sir/Madam,

My names are **Ermias Ergete,** a student of St. Mery's University of Addis Ababa pursuing Masters in business administration (**MBA**). In partial fulfilment of the degree, I'm required to write a research paper, therefore this is to kindly request you to fill this questionnaire as honestly as possible.

The information provided here will be used only for the sole purpose of this academic study and will be treated with maximum confidentiality.

NB.

- Encircle the letter of your choice and put [✓] mark in the box provided.
- Please respond accurately as possible and at your earliest possible time.

Thank you in advance for your cooperation!

SECTION ONE: General Information

1. Please provide the following details about yourself.

  A. Please indicate your Gender.

     Male   [   ]   Female   [   ]

  B. Please tick the age bracket in which you fall.

     i)   21-30 years   [   ]

     ii) 31-40 years   [   ]

     iii) 41-50 years   [   ]

     iv) 51-60 years   [   ]

     v) Above 60 years   [   ]

  C. Please indicate your highest academic level

     a) Diploma   [   ]

     b) Degree   [   ]

     c) Post graduate   [   ]

       Other, please state

              ………..

  D. For how long have you worked in this organization?

     a) Below 1 year   [   ]

     b) 2 – 3 years   [   ]

     c) 4 – 5 years   [   ]

     d) Above 5 years   [   ]

2) Please provide the following details about your organization

     a) Name of the firm…………………………………………………………..

     b) Location..

     c) Telephone Number...

     d) E. Mail...

3. State the number of your marketing (sales) staff

....

4. What is the minimum qualification of the above (Q.5)?..

5. What products do you deal with as a business enterprise? (tick)

    a) Beauty products   [ ]

    b) Over-the-counter (OTC) drugs   [ ]

    c) Veterinary products   [ ]

    d) Herbal products   [ ]

    e) Prescription drugs   [ ]

    f) Others   [ ]

      Specify..

SECTION TWO: Issues Related to Promotion

1. Do you think promotion affects sales in your firm?

    a) Yes   [ ]

    b) No   [ ]

If yes, in which trend?

    a) Increase   [ ]

    b) Decrease   [ ]

2) Do you consider any factors when choosing any particular products for promotion at any given time? (tick)

    a) Yes   [ ]

    b) No   [ ]

   If yes, specify

       ....

3) What do you think are the main challenges in promotion of the medicine in Ethiopia today? (tick)

    a. Resources restriction   [ ]

    b. Legal restriction   [ ]

    c. Lack of qualified personnel   [ ]

    d. Congested market   [ ]

e. Stringent ethics   [   ]

f. High cost of promotion   [   ]

g. Others   [   ]

   Specify

....

4) What do you think are the main determinant of sales for the drugs? (tick)

        a) Price   [   ]

        b) Quality   [   ]

        c) Promotion   [   ]

        d) Distribution   [   ]

        e) Others   [   ]

5) What factors considered by pharmaceutical company in determining the promotion budget.

        a.   Level of competition   [   ]

        b.   Resource availability   [   ]

        c.   Percentage of sales   [   ]

        d.   Promotion objective   [   ]

        e.   Others   [   ]

        Specify   ....

6) How can the problems / dilemmas affecting the promotion of the drugs in Addis Ababa be reduced? (tick)

a) Government control   [   ]

b) Industry self-regulation   [   ]

c) Others   [   ]

SECTION THREE: PROMOTIONAL TOOLS AND THEIR EFFECTIVENESS ON SALES

1. On a scale of 1-5, how would you rank the extent of use of the following promotion mix elements by your company? (1= Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strongly Agree)

No.	Statement of Types of promotional tools	Scale				
		1	2	3	4	5
1	I prefer Commercial Detailing to promote company products					
2	I prefer Drug Sampling to promote company products					
3	I prefer promotional Give-a-ways to detailing the company products					
4	I prefer sponsoring Continuous Medical Education (CME) to promote company products					
5	Influential Key Opinion Leaders (KOL)					

2. After how long does the company evaluate the impact of your promotional campaign?

a) ……………………………. Months

b) ……………………………. Quarterly

c) …………………………… Semi annually

d) ……………………………..Yearly

3. On a scale of 1-5, how would you rank the effectiveness on sales of the following promotion elements by your company? (1= Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strongly Agree)

No.	Statement of Promotional tools with Commercial Detailing	Scale				
		1	2	3	4	5
1	Our Medical representatives is quite competent in promoting the company products					

2	Group presentations is fair to promote the company products.					
3	Product demonstrations is good way for promoting the company products					

No.	Statement of promotional tools with Sampling	Scale				
		1	2	3	4	5
4	I always ready to provide Free medical samples to physicians					
5	I always ready to participate in the Exhibits (EPA, EPS, ESOG, ESS, etc.)					
6	I always ready to provide Branded Posters, Brochures, booklets & leaflets					
7	Fair & trade shows (pharmaceutical trade fairs)					
8	I always ready to provide Company magazines					

No.	Statement of promotional tools with Give-a-ways	Scale				
		1	2	3	4	5
9	My company provide Stationeries gifts e.g. pens, calendars, note book					
10	My company provide Physicians benefiting gifts e.g. Money, Coffee mugs, umbrellas, sun shade for cars					
11	My company provide Patient care related gifts e.g. Stethoscope, towels, gowns					

No.	Statement of Promotional Tools with Continuous Medical Education (CME)	Scale				
		1	2	3	4	5
12	I often think about Speaker fees and meal (By leading doctors e.g. Physicians, Surgeons)					
13	I often think about Seminars for doctors & sponsorship (Doctors travel expenses on specific topics)					
14	I often think about Educational grants for programs and Publications in medical journals					
15	I often think about New brand introductions					
16	I often think about Mailings (Individuals and groups of customers)					

No.	Statement of Promotional tools with Influential Key Opinion Leaders (KOL)	Scale				
		1	2	3	4	5
17	I look frequently KOL for consulting					
18	I look frequently KOL lectures or enrolling patient in trial					
19	I look frequently KOL influence the prescribing behavior of their students and colleagues in their circle.					
20	I look frequently KOL in the clinical practice guidelines development					

4. On a scale of 1-5, how would you rank the measures on the effectiveness in sales of pharmaceuticals products following promotion elements by your company? (1= Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strongly Agree)

No.	Statement of Sales of pharmaceuticals products	Scale				
		1	2	3	4	5
1	Promotional tools in my organization increase in Sales					
2	Promotional tools in my organization increase in Prescription					
3	Promotional tools in my organization increase Customer Satisfaction					
4	Promotional tools in my organization increase Customer Awareness					
5	Promotional tools in my organization increase in Sales, Prescription, Customer Satisfaction & Awareness					

Any other comments……………………………………………………………………..
……………………………………………………………………………………………
……………………………………………………………………………………………

Annex 2 List of Pharmaceutical firms in Addis

LIST OF HEALTH INSTITUTIONS IN ADDIS ABABA HUMAN DRUG & MEDICAL SUPPLIES IMPORTER AND WHOLESALERS

S. No	Name of the institutions	Location				Name of the health professionals	Name of the owner	Institution type
		Region/ City	Keb	H.No	Tele			
1	Afri med Human Drug & Medical supplies Importer &wholesale	Akaki Kaliti	08/09	New	09117 73419 01146 73945 09112 53600	Ato Alazar Mengistu Belay	Afrimed General Trading (Ato WondWosen Habtamu 0911253600)	IMPORTER AND WHOLESALER
2	Afro german drug and medical supplies importer and wholesaler	Arada (AA)	2		11155 0200	Ato Desalegne Abebe	Afro Germen Chemicals Est PLC	IMPORTER AND WHOLESALER
3	Agmas Human Drugs and Medical Supplies Importer and wholesaler	Arada (AA)	7	55	01115 60056 01111 13085 01115 69986 09114 05180	W/o Meseret Yemam Boru	Agmas General Tarading (Ato Nure Ahmed Arebu)	IMPORTER AND WHOLESALER
4	Almeta Impex drug and medical supplies importer and wholesaler	kirkos Kirkos (AA)	18	659	01155 34153 01155 34222 09116 80018	Ato Samuel Debebe	Almeta Impex PLC	IMPORTER AND WHOLESALER
5	Amba Drug and Medical Supplies Importer and Wholesale	N/S/Lafto (AA)	15	320/15	01141 96363 01141 96365 09116 71934	Ato Tesfa Mehari Tesfaselassie	Amba Pharamceuticals PLC (W/ro Ambanesh Kebede)	IMPORTER AND WHOLESALER
6	Ashura pharma Human drug and medical supplies wholesaler	Addis Ketema (AA)	19/20	669	01127 66224 09114 85180	Ato Gizaw Jelebo Gebre	Asura Pharma PLC	WHOLESALER
7	Badreg Human Drug and Medical supplies importer and wholesaler	Kirkos (AA)	2	260	01146 63872 01141 63810 09116 67020	W/o Pidloujna Nadiya	Badreg plc	IMPORTER AND WHOLESALER
8	Beker Human And Veterinary Drug And Medical Supplies Importer And Wholesaler	Lideta (AA)	02	234	01155 30702 09112 19292 01155 03833	Ato Nadir Abubeker Ahmed	Beker General Business PLC (Ato Nebil Abubeker Ahmed)	IMPORTER AND WHOLESALER

S/N	Name of the institutions	Region/City	Kebele	H.No.	Tele	Name of the health professionals	Name of the owner	Institution type
9	**Biomed Human Medicines And Medical Devices Importer And Wholesale**	**N/S/Lafto (AA)**	**02**	**New**	**01141 69886 01146 74417 09116 41421**	**Ato Wosagne Muluneh Gemechu**	**Ato Ephrem Desalegne**	**IMPORTER AND WHOLESALER**
10	**Boston Medical Drug And Medical Supplies Importer And Wholesaler**	**Kolfe Keranyo (AA)**	**12/13**	**079**	**01166 22827 09112 17931 09168 23530**	**W/t Meheret Tilahun Mamo**	**Boton Medical PLC (Ato Biruk Fekadu Tessema)**	**IMPORTER AND WHOLESALER**
11	**C.N MAKRIS Human And Vet Drug And Medical Supplies Importer And Wholesaler**	**Lideta (AA)**	**11**	**459**	**01151 55555 01151 57733 01151 57773 09112 11763**	**Ato Lemma G/Yes Begna**	**CN Makris & Company Limited (Ato Lemma G/Yes)**	**IMPORTER AND WHOLESALER**
12	**Caroga Pharma Drug And Medical Supplies Importer And Wholesaler**	**Kirkos (AA)**	**4**	**592**		**Ato Abnet Denberu**	**Ato Abnet Denberu**	**IMPORTER AND WHOLESALER**
13	**Cartina Pharma Human And Vet. Medicines And Medical Devices Importer And Wholesale**	**N/S/Lafto (AA)**	**12/13**	**308**	**0114 42408 5 01144 24086 09114 06645 09118 65699**	**W/o Tesfanesh Kura**	**Cartina Pharma International PLC (Dr Shewazemed Gudu)**	**IMPORTER AND WHOLESALER** **To be revisited after 15 days from today Tik 22, 2003**
14	**Dat Intrnational Trading Drug And Medical Supplies Importer And Wholesaler**	**Addis Ketema (AA)(Moved to Gullele subcity Kebele 09/15)**	**19(09/15)**	**702(634)**	**01112 75340 -45 09112 31164**	**Ato Tarekegne Fikereyes Temporarily Replaced by Ermiyas Taye for 2 months (1/8/2002-30/(/2002) (REPLACED BY ERMIAS TAYE ON 22/10/2002 E.C)**	**Dat International Trading PLC (Dr. Tenaye Lakew Abtew)**	**IMPORTER AND WHOLESALER**
15	**EBG Human And Vet Drug And Medical Supplies Importer And Wholesaler**	**Akaki Kaliti (AA)**	**12/13**	**402**	**01144 24955 01144 22168 09112 06523**	**Ato Girma Daffa Jamo**	**Equatorial Business Group (EBG) PLC (Ato Tadele Tefera)**	**IMPORTER AND WHOLESALER**
16	**Etab Intermedica**	**Bole (AA)**	**12**	**374**	**01164 78647**	**Ato Berehane Tekiea Hiruy**	**Etab Inter medica PLC**	**IMPORTER AND WHOLESALER**

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	Human Drugs And Medical Supplies Importer And Wholesaler				09112 03545		(W/o Etenesh Abreha)	
17	Etmedix Human And Vet Drug And Medical Supplies Importer And Wholesaler	Yeka (AA)	7	121	11662 4105	Ato Feseha Amare (replaced by Ato Daniel Ferede Kasahun on Miazia 4-2002)	ETMEDIX General Business plc	IMPORTER AND WHOLESALER
18	Eyasu Human Drugs And Medical Supplies Importer And Distributor	Yeka (AA)	10/ 13	534	01166 11546 01161 84330 01166 21975 /6 09112 03276	Ato Eyasu G/Abezgi Woreta	Ato Eyasu G/Abezgi Woreta	IMPORTER AND DISTRIBUTOR
19	Getmaz Human Drug And Medical Supplies Importer And Wholesaler	Kirkos (AA)	10	344	01146 72916 01146 72917 09112 52557	Ato Bisrat Getahun Bekele	Getmaz General Business PLC (Ato Bisrat Getahun Bekele)	IMPORTER AND WHOLESALER
20	Gonafer And Son's Human And Vet Drug And Medical Supplies Importer And Wholesaler	Akaki Kaliti (AA)			09112 34717	Ato Million Abebe	Gonafer and son's	IMPORTER AND WHOLESALER
21	Grace Trading Medicines And Medical Supplies Importer And Wholesale	Gulele (AA)	7	431	11156 8205	Ato Zerihun Alemu	Ato Zerihun Alemu	IMPORTER AND WHOLESALER
22	Hosam Pharmaceuticals Trading Drug And Medical Supplies Importer And Wholesaler	Yeka (AA)	7	new		Ato Belaynehe Tamire	Ato Samson Assefa (Changed to Hosam Business Trading on Miazia 11, 2002 E.C)	IMPORTER AND WHOLESALER
23	JOS Hanson And Son's Medical Devices Importer And Wholesaler	Lideta (AA)	05	437	01127 57071 01127 57274 01127 57270 09112 52191 09112 45954	Abreham Getahun Belachew	Jos Hanson and Sons Ethiopia PLC (Jos Schaafsma)	IMPORTER AND WHOLESALER
24	Kefyalew Drug And Medical	N/S/Lafto (AA)	2		11323 3338	Colenel Alemayehu Demesie	Ato Kefyalew Gari	IMPORTER AND WHOLESALER

	Devices Importer And Wholesale							
25	**Labora International Trading Drug And Medical Supplies Importer And Wholesaler**	**Kirkos (AA)**	**49**	**594**	01146 65556 011 46655 53 01146 65554 01146 65555 09112 37893	**Ato Bineyam Seyoume**	**Labora International Trading PLC (Dr Bewketu & Dr Asfaw)**	**IMPORTER AND WHOLESALER**
26	**Leyet Human &Veterinary Drug &Medical Supplies Import & Wholesale**	**N/S/Lafto (AA)**	**18**	**1389**	09116 85656 (0911 85622 0) LAND LINE 01144 01817	**Ato Hileyesus worku** (IS REPLACED BY TEREFE MOGES ON MIAZIA 28-2002 E.C)	**Leyet plc**	**IMPORTER AND WHOLESALER**
27	**Medica Pharma Drug And Medical Supplies Importer And Wholesaler**	**Bole (AA)**	**14/15**	**102**	01115 53444 01164 66926 09116 61601	**Getaneh Eneyew Demisse (Replaced by Addisalem Semma Ejigu on 178/5/2003)**	**Medica Pharma PLC**	**IMPORTER AND WHOLESALER**
28	**Meditech Ethiopia Drug And Medical Supplies Importer And Wholesaler**	**Kirkos (AA)**	**02**	**203 A**	01155 12186 09110 95045	**Ato Mengistu Kumelachew(R eplaced by Ahmed Nurie Jibril 0n 16/5/2003 E.C))**	**Dr Mohammed Nuri Osman**	**IMPORTER AND WHOLESALER**
29	**Mesroy International Drug And Medical Supplies Importer And Wholesaler**	**N/S/Lafto (AA)**	**6**	**71**	11550 3567	**Ato Tibebu Gebre**	**Ato Mesfin &W/o Etenesh**	**IMPORTER AND WHOLESALER**
30	**Micro Farma Drug And Medical Supplies Importer And Wholesaler**	**Arada (AA)**	**7-Jun**	**134 4**	91124 8295	**Ato Daniel Ayele**	**Micro Pharma plc**	**IMPORTER AND WHOLESALER**
31	**Nared Drug And Medical Supplies Importer And Wholesaler**	**N/S/Lafto (AA)**	**12/13 (Moved to kebele 04/05 on Ginbot 13-2002 E.C**		09112 22102 09115 15952 01184 00329	**Ato Shiferaw Habte Worke (Replaced by Aklilu Seyoum Bekele on 20th of Tikimt 2003)**	**Nared General Trading PLC (Ato Shiferaw Habte Worke)**	**IMPORTER AND WHOLESALER**

32	**Nemo Pharma Drug And Medical Supplies Importer And Wholesale**	**Addis Ketema (AA)**	**1**	**1308**	09112 21508 09112 34953 01181 01206	**Ato Tenay e Wurw ur Maru**	**Nemo Pharma PLC (Ato Abdu Yusuf 0911438752)**	**IMPORTER AND WHOLESALER**
33	**P.T.L Medicines And Medical Devices Importer And Wholesale**	**N/S/Laft o (AA)**	**9**	**889**	01141 64665	**W/o Zema mnesh Adamu**	**PTL Pharma Trade link plc**	**IMPORTER AND WHOLESALER**
34	**Petram P.L.C Drug And Medical Supplies Importer And Wholesaler**	**Kirkos (AA)**	**8**	**81**		**W/o Meaza Demis sie**	**W/o Meaza Demissie**	**IMPORTER AND WHOLESALER**
35	**Pharma Birbir P.L.C Drug And Medical Supplies Importer Wholesaler**	**Arada (AA)**	**8**	**682**	01115 71010	**Ato Mengis tu Getane he**	**Pharma Birbir plc**	**IMPORTER AND WHOLESALER**
36	**Pharma Share Company Human Drug And Medical Supplies Importer And Wholesaler**	**Arada (AA)**	**10**	**157/ 02**	01115 50207 09116 17450	**Ato Shamb el Amare**	**Pharma Share PLC**	**IMPORTER AND WHOLESALER**
37	**Pharma Success Medicines And Medical Devices Importer And Wholesale**	**N/S/Laft o (AA)**	**43**	**803**	01132 10176 01141 65311 /17 09116 22343	**W/o Zinet Yimer Moha mmed**	**Pharma Success PLC**	**IMPORTER AND WHOLESALER**
38	**Pharma Union Drug And Medical Supplies And Importer And Wholesaler**	**Addis Ketema (AA)**	**14/20**	**422/4 23**		**W/o Seblew ork Feseha**	**Pharma Union plc**	**IMPORTER AND WHOLESALER**
39	**PVS Pharmaceutic als Human And Veterinary Drug And Medical Supplies Importer And Wholesaler**	**Bole (AA)**	**11**	**341**	09137 84547	**Dr Yisak Gesess e**	**Dr Yisak Gessese**	**IMPORTER AND WHOLESALER**
40	**Ramada Drug And Medical Supplies Importer And Wholesaler**	**Addis Ketema (AA)**	**14**	**483**	01127 70064	**Ato Birhan e Tesfah un**	**Ramada Trading**	**IMPORTER AND WHOLESALER**

41	RG And Parteners Human And Veternery Drug And Medical Supplies Importer And Wholesaler	Lideta (AA)	15	124/0L /B	01155 16255 01155 11918 09112 49305	Ato Nuri Awol ShehM usa	RG and partners PLC	IMPORTER AND WHOLESALER
42	Samuel Deressa Drug And Medical Supplies Importer And Wholesaler	Yeka (AA)	10	29	01155 12366 /10 01155 18534 09111 83323 09112 00195	Ato Yusuf Hasse n Suley	Ato Samuel Deressa	IMPORTER AND WHOLESALER
43	Saron Pharma Chemi Human And Vet Drug And Medical Supplies Importer And Wholesaler	Bole (AA)	05	104/ ʋ	01166 38400 01166 14277 01166 38382 -85 09112 01852	Ato Mekon nen Hailu Tesfay	Saron Pharma Chemi PLC	IMPORTER AND WHOLESALER Re
44	Setema Human Drugs And Medical Supplies Importer And Wholesaler	Yeka (AA)	17	new	01164 78200 01164 78215 01164 78211 09112 43913	Ato Tewod ros Alems eged Gebru	Setema Limited PLC	IMPORTER AND WHOLESALER
45	Shala Bussinus House Human Drug And Medical Supplies Wholesaler	Lideta (AA)	11	1317 /b	09112 34152 01185 00135 01185 00136	Ato Tadess e Haile (Repla ced by Tesfay e Hailu Tesfay e on Hamle 1/200 2).	Shala Business House PLC (Ato Berhanu Kebede)	WHOLESALER
46	Sun Pharma Drug And Medical Supplies Importer And Wholesaler	N/S/Laft o (AA)	09&14	779	91145 7485	Ato Ketem a Kebed e	Sun Pharma plc	IMPORTER AND WHOLESALER
47	Teddy Drug And Medical Supplies Importer And Wholesaler	Akaki Kaliti (AA)	11	1148	01144 04656 01144 31944 09112 07193	Ato Tewod eros Kumsa	Ato Tewoderos Kumsa	IMPORTER AND WHOLESALER
48	The Novel And Trust Whorth Drug And Medical	Bole (AA)	2	5151	11662 5543	Not Renew ede	Not renewed	IMPORTER AND WHOLESALER

	Supplies Importer And Wholesaler						
49	Universal Investors Drug And Medical Supplies Importer And Wholesaler	Lideta (AA)	15	115/01	11551 1622	Ato Dagim Getach ew	Ato Dagim Getachew	IMPORTER AND WHOLESALER
50	Valdes Drug And Medical Supplies Importer And Wholesaler	Kirkos (AA)	02/03	466	01146 72612 01146 74496 09114 11067	Mekde m Admas su Tadess e	Valdes PLC	IMPORTER AND WHOLESALER
51	Vision Pharma Medicines And Medical Supplies Wholesaler	N/S/Laft o (AA)	09,14	361	91170 9373	Ato Tsegay e G/Yes us	Ato Tsegaye G/Yesus	WHOLESALER
52	Vital Pharmaceutic al Human And Veterinary Drug And Medical Supplies Importer And Wholesaler	Gulele (AA) (moved to Arada sub-city)	08/16(04/05)	665(412)	01181 01364 09115 39251	Ato Wosen u Yema m Ahmed	Vital Pharmaceutical PLC	IMPORTER AND WHOLESALER
53	West Pharma Human And Vet Drugs And Medical Supplies Importer And Distributer	Krkos (AA)	05	724	01146 60712 /51 09112 34725 09116 20065	Ato Temes gen Worku Abebe	West Pharma Trading PLC	IMPORTER AND WHOLESALER
54	Wise Team Human Medicines And Medical Supplies Importer And Wholesale	Gullele (AA)	06	629	01115 64514 09118 81683	W/o Dinke nesh Aklilu Habteg ebriel	Wise Team PLC	IMPORTER AND WHOLESALER
55	Yoha International Trading Human Medical Supplies Importer And Wholesaler	Kirkos (AA)	04=50	802		Ato Abera Defar	Yohading plca International Tr	IMPORTER AND WHOLESALER
56	Zaf Pharmaceutic als Drug And	Bole (AA)	2	new	11652 6406	W/o Mulual em	Zaf Pharmaceutical plc	IMPORTER AND WHOLESALER

	Medical Supplies Importer And Wholesaler					Zewdie		
57	REMKALN General Trading Human Drug And Medical Supplies Importer And Wholesaler	K/Keranyo		09	1178	01127 99735 09112 34135	Ato Knife Tesfaye (Replaced by Tesfaye Gebremeskel)	REMKALN General Trading PLC (Tesfaye Gebremeskel)	**IMPORTER AND WHOLESALER** 12/8/2002 E.C
58	JEMA Pharmaceuticals And Medical Supplies Importe And Wholesaler	Bole	13		470	01166 31331 09117 523 22	Ato Asnake Gezahegn Shiferaw	JEMA Private Limited Company	**IMPORTER AND WHOLESALER** 25/8/2002 E.C
59	Woine Chemicals Human Drug And Medical Supplies Importer And Wholesaler	Lideta	02/03		2470	01137 11122	Ato Haileyesus Worku Ayele	Woine chemicals general business PLC	**IMPORTER AND WHOLESALER** 19/9/2002 E.C
60	New Horizone Human Medicine And Medical Supplies Importer And Wholesaler (Change Its Name To Century Pharmaceuticals Drugs And Medical Supplies Wholesaler)	Bole	15		709	09114 26825	W/ro Alemshet Ayalew Dagne	New Horizone PLC (changed to Century Pharmaceuticals PLC)	**IMPORTER AND WHOLESALER** 02/10/2002 E.C (Down graded to wholesaler on 14/10/2002 E.C)