

## **MRS Advanced Certificate in Market & Social Research Practice**

### **Preparing for the Exam: Section 2 Q5- Answer Guide & Sample Answers**

This answer guide was developed to provide support for examiners in marking the **Section 2 Question 5**. It is not intended as a 'model answer' or a completely exhaustive list of all points which could be made. Instead, it summarises a range of points which candidates may be expected to include in answers.

The key to an effective answer is to provide information which is both relevant and clearly justified. If, when writing your practice answer, you have made points which are not included in this summary, don't worry. Examiners are briefed and trained to take into consideration all relevant points in their marking.

Similarly, don't worry if you have not included all the points mentioned in the answer guide. Again, the examiners will be looking for a range of points in which your rationale is clear. Credit will be given for all relevant points which you have made.

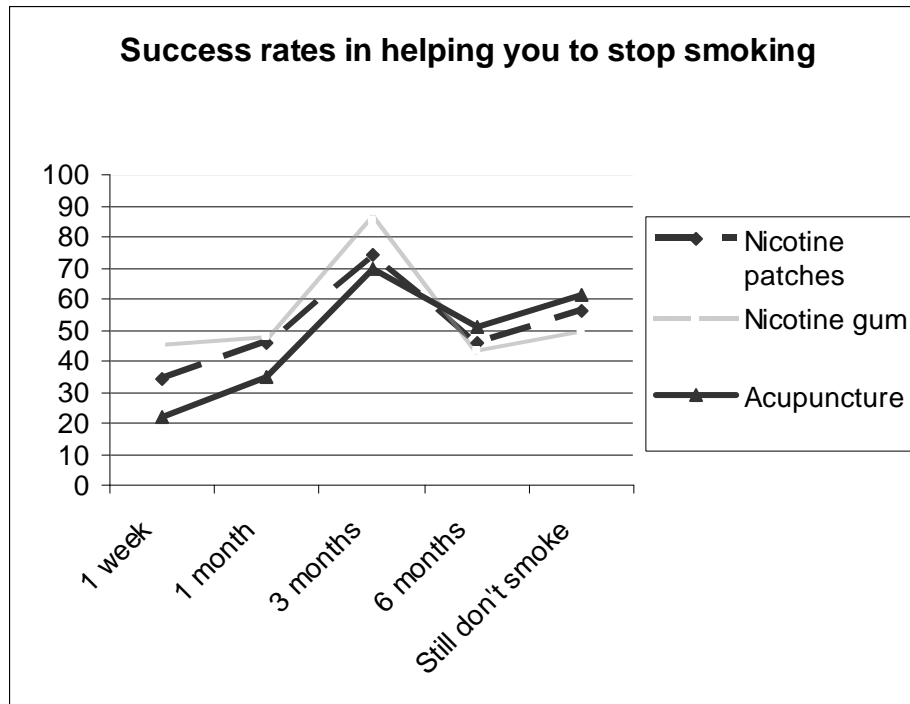
In Section 2 there is a recommended time of 100 minutes and answers account for two-thirds of the total marks.

Candidates are required to answer any TWO questions from the six, giving a full answer to each of the questions you choose.

## Section 2

### QUESTION 5: ANSWER GUIDE

5. For the past year, a chain of pharmacies has been offering a range of support for people who wish to give up smoking. Among its services, it offers free nicotine patches, free nicotine gum and free acupuncture treatment. The company has recently conducted a survey among users of this service to find out which treatment has been most successful in helping them stop smoking.



- a) Identify the strengths and weaknesses of the graph in conveying information about the research findings, giving reasons for your suggestions.

**(Weighting: one-third of total)**

Candidates are expected to evaluate the graph as a presentation of research findings. At pass level, candidates should identify a minimum of one strength and two weaknesses, with appropriate justification.

*Strengths include:*

- Clear line chart, with format of lines used to differentiate findings from different groups
- Key to explain what the lines represents
- Categories being focused on clearly identified in the X axis

*Weaknesses include:*

- No indication as to what the scale on the Y axis represents. Possibly percentages but it's not clear
- The X axis is potentially misleading as the gaps in time are not equal
- No indication of sample size
- No indication of statistical significance

- *The question hasn't been included here – we don't know what respondents were responding to.*
- *What does the data actually mean? Is it the percentage who said they stopped smoking after one month, or after three months etc when questioned at the end of the year? Or the number who said one month into the research that they had stopped smoking, and then the number who said they had stopped when asked at the 3 month point etc?*
- *Is this data based on all respondents or just those who gave up at some point?*
- *No indication of when the fieldwork was conducted*
- *No indication if the data has been weighted*
- *Possibly wrong type of chart being used to display information. Line graphs are usually associated with trend data; if this data is not from a longitudinal survey of the same respondents showing how their views of the method they are using changes over time, then the use of a line graph may be inappropriate.*

- b) The pharmacy chain would like to use these findings and others from the survey in marketing materials to promote the usefulness of nicotine patches, nicotine gum and acupuncture in helping people to stop smoking. What advice would you give to the company on the use of research findings in marketing material? Give reasons for the suggestions you make, with reference to the MRS Code of Conduct where appropriate.

**(Weighting: two-thirds of total)**

*Candidates are expected to demonstrate familiarity with the range of rules included in Section B, particular rules B48 – B61 of the MRS Code of Conduct. At pass level, candidates should identify at least three areas which they should make the client aware of, with some rationale for their selection. Answers which provide only two suggestions should provide enough rationale to demonstrate that the candidate understands the key principles on which the guidance is based.*

*Key areas which should be identified include:*

- *Respondents cannot be identified in marketing material unless consent has been gained for this from the respondents. They must be fully informed as to what will be identified, to whom and for what purpose at the time consent is gained.*
- *Using personal data for research and marketing means that this would be a mixed purpose project. Rule B48 states that separate regulations 'Using research technology for non-research purposes' must be adhered to.*
- *Results cannot be used to mislead the public.*
- *Facts should be clearly differentiated from interpretation.*
- *Research conclusions must be clearly and adequately supported by the research data*
- *Guidance to the client may include some or all of the following points:*
  - *If you are likely to want to attribute verbatim comments, we need to make sure that respondents are informed of this and that permission is sought for re-contact to seek consent for use of the verbatims*
  - *If the findings are to be published (e.g. in marketing or press material), members of the public must be able to access the technical details. How will this be arranged?*
  - *Any graphs/charts and other materials drawing on the results provide enough technical detail to 'enable reasonable interpretation' of the validity of the results. This should include:*
    - *Information on sample size*
    - *Information on the questions asked*
    - *information on weighting*
  - *Any marketing material being prepared must be checked by the researcher before publication to ensure that it is not using the results inappropriately.*
- *Information regarding sample source(s) and possible bias.*
- *Statistically significant differences should be made clear.*

## Section 2 – Q5

**Sample answer 1: This sample answer was awarded a mark in the PASS band.**

### Question 5a

#### Strengths:

- 1) It's easy to comprehend over a glance, it gives a context of time movement from week to more than 6 months and still not smoking.
- 2) A snapshot on how all 3 services (patches, gum vs acupuncture) performs over time.
- 3) It has all the basic info: title/summary, legend, axis.

#### Weaknesses:

- 1) Insufficient technical details such as sample size, question asked, any weighting, or even time this research being conducted.
- 2) Insufficient info on what's the x-axis and what's represented in the Y-axis (is it percentage?)
- 3) While supporting with graph and title is good, what is the message here? "Which method is most successful?" A little bit confusing and hence need to be sharpened further. Perhaps can be compared with those control group (i.e. tried to stop smoking without any help) vs those who tried with help of patches, gum, acupuncture IF the objective is to show that smokers need help to stop smoking (and not to compare which help is most effective).

### Question 5b

In giving suggestions/advice, researcher need to bear in mind:

- 1) No confidential information is being released. If verbatim is needed please get consent from the respondent before releasing any info to the client/media.
- 2) Important to distinguish and separate which is fact and which is deductions, supported with data is being used to make this deduction so not to mislead the public/reader.
- 3) Client prepared materials or any materials should allow reasonable interpretation and not be misleading → provide sufficient technical details such as sample size, when the study was conducted, who the respondents were, any weighting, methodology used etc.
- 4) Offer to provide/assist in publishing the detailed results through website or any other means so that those who are interested to find out more can do so.
- 5) Always check client prepared materials before it goes to media to ensure data is appropriately used and not abused/misleading. In the event you found so, please retrace the approval of having your company name being published with the materials.

## Section 2 – Q5

**Sample answer 2: This sample answer was awarded a mark in the MERIT band.**

### Question 5a

The graph in question 5a is attempting to convey information about which of the treatments has been most successful in helping them, the users of the services, to stop smoking.

The strengths of the graph are that the three services (nicotine patches, nicotine gum and acupuncture) are clearly distinguished between on the chart. (This would be clearer if it was in colour). Another strength is that there is a key to the 3 lines – so that we know which line refers to which service. The labelling of the horizontal axis is clear.

Another strength is that there is a heading to the chart – so that the reader knows it is about success rates in helping to stop smoking. However, there are also a number of weaknesses to the chart.

There is not really enough context to the chart – although the horizontal axis is labelled clearly – perhaps there could also be a label beneath it explaining that it refers to 'length of time not smoking' or something similar.

Another weakness is that there is no clear labelling on the vertical axis – I assume it may be the % of people at each point, but this should be made clear.

Another weakness is that we don't know who the heading – 'Success rates in helping you to stop smoking' refers to, just from viewing the chart. It would be useful to indicate who the research was conducted amongst e.g. users of ..... or remove the word 'you'.

The base size should be indicated on the chart – so that we know how many people the research was conducted amongst.

Finally – another weakness – the chart should have the date that the research was conducted (at least the year) so that the findings can be seen more in context.

### Question 5b

There are a number of key issues that should be considered by the pharmacy chain in terms of using the research findings in marketing material. These issues relate very closely to the MRS Code of Conduct.

In this case –

The reporting of findings would need to be very closely checked by the research agency, to ensure that the use of findings adheres to the MRS Code of Conduct.

Firstly it would need to be established whether or not the users of the service (who were respondents in the research) had given prior informed consent regarding the research, and for the results to be used in this way. This relates to the issue of informed consent → at the outset of recruitment for research, respondents must have

been made fully aware of the purpose of the research, and the way in which the findings would be used. They must have agreed to this – given informed consent.

Whatever assurances were given to respondents at the start, must be adhered to.

The difference between anonymity and confidentiality is key here. Anonymity means that responses cannot be linked to a particular respondent e.g. personal data has been removed from the results.

Confidentiality means that each response can be linked to a particular respondent, but the researcher has promised to do so publicly.

This distinction is important – as the respondent will have given informed consent on the basis of either one → therefore, such assurances must be honoured.

If anonymity/confidentiality has been promised – then the pharmacy chain must uphold this – and not reveal the identity of a respondent without their prior permission. This is especially important in this case, as smoking habits can be seen as a 'socially sensitive' topic.

This should also apply to any verbatim comments that the pharmacy chain wish to use in the marketing material. Respondents should only be identified if prior informed consent has been obtained.

As the research findings are to be used in marketing material, it is important that in accordance with the MRS Code of Conduct, the findings do not mislead or deceive the public. The findings used should be as they were in the data – not changed/alterd in any way.

In the marketing material it is important that the pharmacy chain distinguish between what is fact and what is interpretation.

If conclusions have been drawn on the basis of the data, it is important that they identify which data they are referring to.

I would also advise that they make available the technical details behind the findings. These should be available for the public to view in order to verify the validity of the research.

The entire process of reporting findings in marketing material should be checked with the research agency who conducted the research. The final marketing materials should also be passed to them to be checked.

This will help to ensure that the material adheres to the Code of Conduct, and does not break any assurances made to the respondents. If the agency highlight anything that is incorrect – this should be altered.

The MRS Code of Conduct is there for a reason, and it is vitally important that this is adhered to.

This protects the rights of respondents in accordance with the Data Protection Act.

Following the steps illustrated, helps to ensure that the public are not misled, and that only accurate, valid data is reported.

This is of crucial importance in any research project, particularly this one related to smoking and health.

Finally, the pharmacy chain should remember that the marketing material reflects on the research agency and the research industry as a whole. The research findings should be used carefully and only as permitted in order to give a good representation to the public of the research industry.