

**Point-of-Purchase Promotion Strategies and Brand Patronage of Drugs in
Pharmaceutical Stores in Ibadan, Oyo State, Nigeria**

**Abiodun Sakiru ALI
LCU/PG/000798**

**Being a PhD Thesis Submitted to the Department of Management and Accounting,
Faculty of Management and Social Sciences, Lead City University, Ibadan, Nigeria**

**In Partial Fulfillment of the Requirements for the Award of Doctor of Philosophy
Degree (PhD) in Business Administration**

2022

Certification

This research work, “**Point-of-Purchase Promotion Strategies and Brand Patronage of Drugs in Selected Pharmaceutical Stores in Ibadan, Oyo State, Nigeria**”, was carried out by **Abiodun Sakiru ALI** with Matric No: **LCU/PG/000798**, in the Department of Management and Accounting, Faculty of Management and Social Sciences, Lead City University, Ibadan, Oyo State, Nigeria, under my supervision

Dr. L.A. Balogun

Supervisor

Date

Dr. T.M. Akinbo

Head of Department

Date

Dedication

To the glory of God, who makes all things possible and to all men and women who are able to identify their natural endowments and resourcefulness, who believe in their capabilities and are inspired by the fact that it is never too late to “dream dreams” and set new goals and are willing to make the sacrifices and commit themselves to the actualization of their dreams and goals, irrespective of age, station and degree in life.

DO NOT COPY: Lead City University, Nigeria

Acknowledgment

It has been a great opportunity to undertake this research work at Lead City University, Ibadan, Nigeria and I am highly appreciative of the vast resources provided by the University Library and support from Library staff especially Mr. L. Osaniyi, Mr. A.O. Taofeek, Mr. A.A. Adeoye, Mr. Adetunji O. A.

I appreciate the tremendous support by the academic staff of the Department of Management and Accounting, notably my Supervisor Dr. L.A. Balogun, Prof. F. Onabajo- my initial Supervisor, Prof. A. Oredein-Provost of the Post Graduate College, Prof. O. Campbel-Dean, Fac. Mgt & Soc. Sc., Dr. T.M. Akinbo-HOD, Mgt & Acct., Prof. K.A. Adeyemo, Prof. E.A. Erwat, Prof. G.E. Oyedokun, Dr. A.B. Onamusi, Dr. F. Igbadumhe, Dr. B. Adeleke, Dr. L. Kayode, Dr. C.T. Jegede, Dr. J.A. Adejuwon, Dr. O.O. Adepoju, Dr. O. Olaleye, Dr. J.O.Fatoki, Dr. S.A. Babarinde, Dr. O.J. Oladejo, Dr. O.T. Oreagba, Dr. E.R. Aderinto, Dr. O.O. Adesina, Mr. O. Ibikunle, Mr. I.A. Olateju, Mr. M. Ayilara, Mr. A. Taiwo, Mrs. E.A. Aina, Miss. K.O. Adejuwon, Mrs. D. Oloyede, Mr. A. Adewumi and other scholars who made valuable contributions at the Pre-Field and Post-Field stages of this work.

I also appreciate the support of the Office of the Registrar for making the facilities of University Conference Centre available for use free-of-charge, for the implementation of the Focus Group Discussion component of the research. Many thanks to Prof. E.A Erwat for support in the execution of the FGD, Dr. K. Farinloye for anchoring the FGD as Moderator and the discussants namely Dr. S.O Banjoko, Mrs. E. Ajayi-Dabar, Dr. E.A. Adegbite, Mr. J. Laniyonu, Mr. G. Adebunmi, Mr. S. Onasola, Mrs. T. Adejobi and Dr. T.A.G. Oladimeji

Lastly, I am most grateful to Mr. Toheeb Arowolo for his invaluable secretarial support, my parents, siblings, relatives and friends for their moral and financial support. God bless you all.

“Even though the above-mentioned institutions and persons have assisted in the process of this research work, I alone stand responsible for the errors, if any, found in this work”.

Abstract

Choosing an appropriate brand of drug to buy becomes a big issue of concern in an environment like Nigeria with high prevalence of self-prescription/medication and unrestricted access to purchase both prescription and OTC drugs with undesirable consequences. The problem is worsened further by uncontrolled POP advertising of even prescription drugs. This study investigated the necessity of POP promotions, in what ways and to what extent do they influence decision-making when choosing brand of drug to buy. This study is a deductive, qualitative research, guided by the theories of brand awareness and brand loyalty, to evaluate the causal relationships between the independent variables of point-of-purchase promotion strategies and the dependent variables of brand patronage (choice) of drugs. A questionnaire and focus group discussion were adopted for collecting primary data. For the questionnaire, 1760 respondents were selected using non-probability quota and purposive sampling technique, while 74 registered pharmacies were selected through probability random sampling and later, non-probability convenience sampling techniques. Content validity, reliability and ethical considerations were the adopted quality criteria. The data collected was analyzed using the Statistical Package for Social Science (SPSS) version 23 and presented as descriptive statistical analysis such as frequency distribution tables, percentages, mean, standard deviation, bar and pie charts. The hypotheses were tested using regression analysis and ANOVA Major findings suggest that POP promotions in drug marketing exert positive influences on brand awareness, development of brand attitude, some dimensions of brand loyalty, no significant influence on impulse purchase, while there is no significant difference between the influences of POP promotions on choice of branded prescription and OTC drugs. This confirms that POP promotions have positive influence at the cognitive, attitudinal and behavioral levels of decision making for choosing brands of drugs to buy, particularly within the context of purchasers/consumers in a developing/emerging country like Nigeria

Keywords: Pharmaceutical Marketing, Point-of-Purchase Promotions, Brand Patronage (Brand Choice).

Word count: 299

Table of Contents

Preliminary Pages	Page
Title Page	
Certification	i
Dedication	ii
Acknowledgement	iii
Abstract	iv
Table of Contents	v
List of Tables	xi
List of Figures	xiii
Abbreviations/Glossary/Definitions	xiv
Appendices	xv

Chapter One: Introduction	Pages
1.1. Background to the Study	1
1.2. Statement of the Problem	6
1.3. Research Questions	7
1.4. Aim and Objectives of the Study	8
1.5. Hypotheses	9
1.6. Significance of the Study	10
1.7. Scope of the Study	10
1.8. Limitations to the Study	11
1.9. Operationalization of the Research Variables	12
1.10. Operational Definition of Terms	13
Endnotes	17

Chapter Two: Literature Review

2.1.	Conceptual Issues	20
2.1.1.	Dependent Variables	20
2.1.2.	Independent Variables	29
2.2.	Theoretical Framework	32
2.2.1.	Theory of Brand Awareness	32
2.2.2.	Theory of Brand Loyalty	35
2.2.3.	The Model of Buyer Behaviour	40
2.2.4.	Consumer Buying Behaviour – The Buying Process	41
2.2.4.1.	Need Recognition	41
2.2.4.2.	Critical Levels of Decision Making Leading to Drug Purchase	43
2.2.4.3.	Purchasing the Drug (Purchase Action)	47
2.2.4.4.	Post-Purchase Evaluation of Brand of Drug Purchased	47
2.2.5.	Types of Buying Behavior	49
2.2.6.	Consumer Buying Behaviour and Purchase of Branded Drugs	50
2.2.7.	Uniqueness of Consumer Behaviour in Pharmaceutical Marketing	51
2.2.8.	Factors Influencing Consumer Purchase of Behaviour OTC Drugs	52
2.2.9.	Factors Influencing Consumer Purchase Behaviour for Prescription Drugs	53
2.2.10.	Consumer Behaviour at the Point-of-Purchase	54
2.2.11.	POP Promotion Stimuli and Impulse Buying Consumer Behavior	54
2.2.12.	Branding	56
2.2.13.	Promotion Strategy in Pharmaceutical Marketing	59
2.2.14.	The Concept of Sales Promotion	63

2.2.15. Prescription Drugs Sales Promotion Mix	64
2.2.16. OTC Drugs Sales Promotion Mix	65
2.2.17. Digital Pharmaceutical Marketing as Sales Promotion Platform	66
2.2.18. Consumer Promotions	67
2.2.19. Consumer Promotions in Drug Marketing	68
2.2.20. The Concept of Point-of-Purchase (POP) Promotion	69
2.2.21. The Concept of Point-of-Purchase Advertising	70
2.2.22. Advantages and Disadvantages of POP Advertising	71
2.2.23. Objectives of POP Communication	72
2.2.24. Growth of POP Promotions	72
2.2.25. Utility Value of POP Promotions	73
2.2.26. Point-of-Purchase (POP) Promotion Strategies in Drug Marketing	73
2.2.27. POP Promotions and Stakeholders in Drug Marketing	76
2.2.28. Point-of Purchase Promotion's Impact on Patronage of Branded Drugs	76
2.2.29. Possible Outcomes of POP Promotion on Choice of Branded Drugs	77
2.2.30. POP Promotion Tools and Techniques	78
2.2.31. Point-of-Purchase/In-Store Displays	79
2.2.32. Difference between Point-of-Sale Display and Point-of-Purchase Display	79
2.2.33. Impact of Displays	80
2.2.34. Benefits/POP Value Delivery to Stakeholders	81
2.2.35. POP Plus Radio Advertising	82
2.2.36. Packaging as a Tool of Sales Promotion in Drug Marketing	83
2.2.37. Spectrum of POP Materials	84
2.2.38. Designing POP Displays	84

2.2.39.	Responsiveness to POP Feature Ads	85
2.2.40.	Measuring POP Effectiveness	86
2.3.	Review of Previous Empirical Works	86
2.3.1.	Studies Related to Brand Awareness	86
2.3.2.	Studies Related to Brand Attitude	92
2.3.3.	Studies Related to Impulse Buying	96
2.3.4.	Studies Related to Brand Loyalty	100
2.3.5.	Studies Related to Purchase Intention	106
2.3.6.	Studies Related to Brand Equity	113
2.3.7.	Studies Related to Consumer Behaviour	125
2.4.	Synthesis of Gaps in Literature Reviewed	142
	Endnotes	145

Chapter Three: Methodology

3.1.	Research Design	163
3.2.	Population of the Study	164
3.3.	Sample and Sampling Techniques	165
3.3.1.	Sampling Frame	165
3.3.2.	Sample Size	165
3.3.3.	Sampling Techniques	168
3.4.	Description of the Research Instrument	169
3.5.	Validity of the Research Instrument	171
3.6.	Reliability of the Research Instrument	174
3.7.	Data Collection	177

3.7.1	Method of Data Collection	177
3.7.2	Administration of the Instruments	178
3.8.	Method of Data Analysis	182
	Endnotes	183

Chapter Four: Results and Discussion of Findings

4.1	Presentation of Data	185
4.2	Demographic Data Presentation	186
4.2.1	Data Analysis, Interpretation	192
4.3	Test of Hypothesis	217
4.4	Discussion of Findings	230
4.5	Interpretation of Results	248
4.6	Summary Table of Findings	268
	Endnotes	265

Chapter Five: Conclusion

5.1	Summary of Findings	269
5.2	Conclusion	273
5.3	Recommendations	276
5.4	Contribution to Knowledge	278
5.5	Area of Further Research	281
	Bibliography	285
	Appendices	304
	Biodata	352
	University Compliance Certificate	354

List of Tables

Table	Title	Page
3.1	Reliability of the Research Instrument	176
3.2	Planned Population Distribution of Invitees to FGD	179
4.1	Questionnaire Distribution and Responses	185
4.2.1	Age Distribution of Respondents (Questionnaire)	186
4.2.2	Educational Qualification of Respondents (Questionnaire)	187
4.2.3	Age Distribution of Respondents (FGD)	189
4.2.4	Frequency of Visiting Registered Pharmacy Stores (FGD)	191
4.2.5	Research Question One: The Influence of Point-of-Purchase Promotions in Drug Marketing on Brand Awareness	192
4.2.6	Research Question Two: The Influence of Point-of-Purchase Promotions in Drug Marketing on Brand Attitude	196
4.2.7	Research Question Three: The influence of Point of Purchase Promotions in Drug Marketing on Impulse Buying	200
4.2.8	Research Question Four: The Influence of Point-of-Purchase Promotions in Drug Marketing on Brand Loyalty	203
4.2.9	Research Question Five: Influence of Front-of-Store POP promotions in Drug Marketing on Brand Patronage (choice) in general	207
4.2.10	Research Question Six: Influence of In-Store Point-of-Purchase Promotions in Drug Marketing on Brand Patronage (choice) in general	211
4.2.11	Research Question Seven: Significant Difference between influences of Point-of-Purchase Promotions on Patronage (choice) of Branded Prescription Drugs and Branded Non- Prescription (OTC) Drugs	215
4.3.1a	Model Summary (Hypothesis One Test)	217
4.3.1b	ANOVA (Hypothesis One Test)	218
4.3.1c	Coefficients (Hypothesis One Test)	218
4.3.2a	Model summary (Hypothesis Two Test)	219

4.3.2b ANOVA (Hypothesis Two Test)	220
4.3.2c Coefficients (Hypothesis Two Test)	220
4.3.3a Model summary (Hypothesis Three Test)	221
4.3.3b ANOVA (Hypothesis Three Test)	222
4.3.3c Coefficients (Hypothesis Three Test)	222
4.3.4a Model summary (Hypothesis Four Test)	224
4.3.4b ANOVA (Hypothesis Four Test)	224
4.3.4c Coefficients (Hypothesis Four Test)	224
4.3.5a Model summary (Hypothesis Five Test)	225
4.3.5b ANOVA (Hypothesis Five Test)	226
4.3.5c Coefficients (Hypothesis Five Test)	226
4.3.6a Model summary (Hypothesis Six Test)	227
4.3.6b ANOVA (Hypothesis Six Test)	228
4.3.6c Coefficients (Hypothesis Six Test)	228
4.3.7a ANOVA (Hypothesis Seven Test)	229
4.3.7b Coefficients (Hypothesis Seven Test)	230 4.4.
Summary Table of Findings	264

List of Figures

Figure	Title	Page
2.1	Synthesis of Key Concepts of the Study	31
2.2	The Model of Buyer Behaviour	40
2.3	The Buying Decision Process	42
2.4	Factor Influencing Brand Choice of Drugs at the Point-of-Purchase	45
2.5	The 10-Option Decision Matrix for Choice of Branded Drugs	46
2.6	Consumer Behaviour Model Showing Stages in the Buying Process for Drugs in Nigeria	48
2.7	Outcomes of Promotion Investments in Drug Marketing	62
2.8	Point-of-Purchase Promotions and Stakeholders at Drug Retail Outlets	76
2.9	Conceptual Model Specification of the Influence of Independent Variables On Dependent Variables Under Test	144
4.2.1	Gender Distribution of Respondents (Questionnaire)	186
4.2.2	Marital Status of Respondents (Questionnaire)	187
4.2.3	Frequency of Visiting Registered Pharmacies among Respondents (Questionnaire)	188
4.2.4	Ethnicity of Respondents (Questionnaire)	188
4.2.5	Gender Distribution of Respondents (FGD)	189
4.2.6	Educational Qualification of Respondents (FGD)	190
4.2.7	Marital Status of Respondents (FGD)	190

Abbreviations/Glossary/Definitions

Id Est/ i.e. - That is

e.g. - For example

Et cetera/e.t.c. - And so on

viz. - Namely, that is to say, in otherwords

Circa - About/thereabout (A specific date or number, e.g. Circa 2018)

Et Alibi/et al- And others
(Used when there are more than two authors such as Ali et al - 2018)

Ibidem/ibid. - In the same book, article, work; same author but different pages and page numbers is inserted.

(Used to refer to a book, article or work mentioned immediately above, below or further on in a book, article, etc; e.g ibid. p. 99)

Nota bene/N.B- Note well

Vis-à-vis - As compared with, in relation to – proposition

In a position facing a specified or implied object– adverb

Same as; corresponding position, counterpart – noun

Vol./vols - Volume; volumes

p.; pp. - page; pages

No; Nos - number; numbers

Ed.; eds. - Editor/edition; editors/editions

Below/see below- appearing later in the chapter, essay, article etc.

Above/see above – Appearing earlier in the chapter, essay, article etc.

Opere-Citato/Opt.Cit./Op. cit - in the book cited before (note: you must give the author's name and a page reference; e.g Davies, op. cit., p.107)

Cf./Cp./Compare – compare this with another idea or what another writer says on the topic

DO NOT COPY: Lead City University, Nigeria

Appendices

Appendix	Title	Page
i.	Map of 11 Local Government Areas (LGA) in Ibadanland, Oyo State, Nigeria	304
ii.	Research questionnaire	305
iii.	Research student's letter to superintendent pharmacists of selected registered pharmacy retail stores, requesting for appointment of a "focal person" to help coordinate research activities at each retail store level	313
iv.	Retail Pharmacy Activities – Focal Person's Brief	314
v.	Respondent's Contact Delivery, for follow-up	315
vi.	Registered Pharmacies/List of financial members for the year 2018/2019, Association of Community Pharmacists of Nigeria, Oyo State Branch	316
vii.	Ibadan-Based Registered Pharmacies/Financial members for the year 2018/2019. Association of Community Pharmacists of Nigeria.	326
viii.	Population Data for Ibadanland (11LGA)	330
ix.	Local Government Distribution of Registered Pharmacy Stores where questionnaires were distributed and administered to respondents	336
x.	Invitation to participate in a Focus Group Discussion	338
xi.	Register of Prospects invited for Focus Group Discussion	340
xii.	FGD- Selection Pool/Prospective Discussants' Data Dossier	341
xiii.	Mobilization for Focus Group Discussion	342
xiv.	Socio-Economic Characteristics of Participants at FGD	343
xv.	Focus Group Discussion Execution	344
xvi.	Discussion Guide for Focus Group Discussion	348
xvii.	Photographs of participants at the Focus Group Discussion	351

Chapter One

Introduction

1.1 Background to the Study

Unlike consumer goods, drugs are not items for pleasure consumption driven by the absolute independent decision of the consumer/purchaser. Choosing the brand of drug to buy is strongly influenced by the healthcare professional prescriber.

The basic challenge confronting an individual who has a prescription for a drug, especially generic drug prescription, is, which brand of drug to buy?¹ A brand that will deliver maximum therapeutic value and assured safety, at minimal cost. Before approaching a drug retail store, a typical drug purchaser may be at any of the following three states of decision making; (a) buy the brand prescribed by the healthcare professional, (b) buy the brand chosen by self-prescription, or (c) absolutely undecided on brand of drug to buy.

The key goal of branding is to create uniqueness, differentiation and value promotion for competitive advantage. Branding in pharmaceutical marketing aims to differentiate a company's drug with a distinct identity, recognizable as a mark of assured superior quality, therapeutic value and safety; offered by a company of high integrity; that stakeholders in the healthcare delivery value chain can rely on as being better than competing brands.^{1,2}

Brand patronage (choice) is the logical consequence of a chain reaction in brand development and promotion of a drug, beginning with brand awareness, brand identity, brand knowledge, brand trial, brand experience brand association, perceived quality and

safety, brand loyalty, brand preference, brand love, leading to repeated brand patronage (choice).^{3,4,5,6, 7,8,9,10} Hence brand patronage (choice) is the key to brand success, growth in market share, marketing success, profitability and corporate growth.^{11,12,13,14} Quality, emotion and passion for a brand drives brand love, while brand engagement comprises cognition, affection and activation.¹⁵ Brand love is an expression of positive emotion towards a brand while the process of learning the brand constitutes brand engagement¹⁶

Promoting increasing brand patronage (choice) by an increasing population of brand – loyal customers/ stakeholders is the cornerstone of all marketing investments in brand/ product management.^{17,18} Building a robust relationship between the brand and the consumer is a major concern of marketing research and practices^{19,20,21}

Development of competition compels pharmaceutical companies to increase effort to differentiate their products in relation to competition and in the absence of major therapeutic advantages, pharmaceutical companies seek to achieve advantage through marketing activities, especially promotion strategies focused on creating brand awareness, brand identity, promote brand knowledge and brand differentiation, favourable brand attitude and purchase intention, promote brand loyalty and brand recommendation; all towards promoting brand preferences and brand choice by prescribers, purchase by healthcare institutions, wholesalers and retail pharmacies and purchase by consumers of drugs at the retail pharmacy level^{22,23,18}

Consumers are becoming more educated, demanding more information and more discerning to get the best value for their expenditure on drugs.²⁴

Prescriptions by various categories of healthcare professionals, word-of-mouth recommendations by trusted associates and family members offer opportunity for first-

time awareness of branded drugs. Moreover, clinic-level promotion and retail outlet promotion of brands of drugs directed at medical doctors and other health care professionals also catch the attention of ordinary citizens within the healthcare/retail facilities, creating awareness, familiarity and influencing brand image, perceptions and preferences, upon which the consumer can rely when making a decision on which brand of drug to buy when the need arises.

Of course, this phenomenon is further reinforced by the influences of other components of the Integrated Marketing Communication programme for each brand of drug on the citizenry: advertising, sales promotion, personal selling, public relations and direct marketing, further reinforced by ease of access to information on the internet today.

The point-of-purchase provides unique marketing opportunities for drugs. Shoppers have been described as explorers open to new experiences and “hunting for new bargains, new products and different items to add excitement to their everyday lives”. At the point-of-purchase several factors influence consumer choice. Even item placement on the shelf is an important factor in consumer’s buying behaviour. The point-of-purchase offers product-marketing companies the last opportunity to attract and win the customer over to buy a product.²⁵

In pursuit of increasing market shares and brand dominance in fiercely competitive marketing environment for drugs, drug marketing companies compete for the customers’ attention at the critical level of decision-making when they make their final decision on the brand of drug to buy. POP promotion, a key tool of consumer promotion towards achieving sales promotion, aims to attract attention, inform and influence purchase of the advertised brand.

In-store retail environment provides marketers of drugs a unique opportunity to make a difference, making their brands and products stand out, at the critical moment when customers are confronted with new product ideas and alternative brands. The point-of-purchase, where customers choose the brand of product to buy, is most suitable for effective communication. "It is the time and place at which all elements of sale (consumer, money and product) come together".²⁶

Investment in POP promotions by drug marketers is increasing because they are relatively cheaper, they last long in the drug retail stores and provide an enduring platform to keep engaging and reminding the three categories of stakeholders at the drug retail store level – the pharmacists, the store staff and the patronizing purchasers/consumers of drugs.

POP promotion strategies are deployed by drug marketers as a key component of the sales promotion mix when launching new brands/products and as low-budget promotions for old and maturing products alike.²⁶ POP promotions in drug marketing aim at promoting the drug's brand name, the relevant indications for its use, unique dosage form, unique formulation, efficiency, speed of action, duration of action and safety of the brand of drug being promoted. POP promotions can impact the decision-making of the purchaser of drugs at three levels-cognitive, attitudinal and behavioural.

The impact of POP promotions on consumer purchase behaviour when buying drugs could manifest in three outcomes; (1) Choose the brand being promoted if undecided prior to entering a retail pharmacy, (2). Reinforce the conviction of the buyer to buy the brand being promoted if it is the pre- determined choice of the buyer even before the entering the retail pharmacy, (3) or, convince the buyer to switch choice to the brand

being promoted, especially if the pre- determined brand choice is not available at the retail pharmacy. Any of these behavioural outcomes could be the result of direct impact of the POP promotion on the independent decision by the buyer or the POP promotion empowering the buyer to be more favorably disposed to the recommendations of retail pharmacy staff to buy the brand being promoted.

The variety of drug retail outlets in Nigeria, legal and illegal, is of strategic value to drug marketing companies to execute POP promotions for their brands. POP promotions for drugs are of particular relevance to drug marketing in an environment like Nigeria where there is a high prevalence of self-medication and discretionary purchase of drugs on a very large scale. The drug retail outlets therefore provide strategic locations for off-loading POP promotions that have the potential to influence consumer brand choice for drugs. Registered pharmacy stores provide unique opportunities for POP promotion of both ethical and OTC drug. Registered drug retail outlets under the supervision of superintendent pharmacists are recognized by law as professional practice centers, hence the permissiveness of point-of-sale promotional strategies for even branded prescription drugs, which ideally, are meant for the attention of the superintendent pharmacist (s) just as clinic-level display of promotional materials to healthcare professionals working in healthcare delivery institutions. There are basically two categories of POP promotions front-of-store and in-store,

In summary, various factors influence the final choice of brand of drug to buy at the point-of-purchase amongst which are: (1) brand prescribed originally by the doctor or other healthcare professionals; (2) self-prescription by the purchaser based on previous exposure and influences; (3) direct impact of POP promotions; (4) interaction with staff

of the drug retail store; (5) the health condition of the patient/consumer of the drug being purchased; (6) brand-related considerations and ; (7) economy of the purchase.

Opportunities are open for investigation into the specific influences of POP promotions on: (a). the decision making process by prospective purchasers/ consumers on which brand of drug to buy (b). the drug retailer's staff (c). interactions between purchasers/ consumers of drugs and the drug retailer's staff and the consequent influences on the decision making process of the prospective purchasers/ consumers, on which brand of drug to buy.

1.2 Statement of the Problem

Drug marketers in Nigeria have taken for granted that POP promotions as a promotional tool play an important role in demand generation and choice of branded drugs as much as they impact strategically on choice of consumer goods, which usually is determined by absolute, independent consumer/purchaser decision.^{27,28,29} Whereas, choosing a brand of drug to buy is a more involving process which is influenced by many crucial factors beyond absolute independent consumer or purchaser decision.

The Nigerian pharmaceutical marketing environment is unique in three major ways; (a) poorly-enforced regulations for appropriate drug distribution, sale and advertising, (b) high level of illiteracy, (c) high prevalence of self-prescription and self-medication.^{30,31}

These factors make choosing an appropriate drug and brand of drug to buy to meet a health challenge become a big issue.

The problem is worsened further by poorly regulated advertising practices in Nigerian pharmaceutical marketing environment which condones the placement of POP

promotions for both ethical-prescription drugs and non-prescription/over-the-counter (OTC) drugs at pharmacy retail stores. Thus, making them accessible to the general public. Whereas, promotions of ethical prescription drugs in any manner, should be restricted to only healthcare professionals.

The laxity prevailing in both uncontrolled purchase and advertising of both ethical-prescription and non-prescription (OTC) drugs as well as high level of illiteracy encourage purchase of undesirable, inappropriate, ineffective, and often unsafe medications, as well as drug abuse especially of ethical-prescription drugs which by law should be sold only upon presentation of an authentic prescription by the medical doctor and other authorized healthcare professionals.

Uncontrolled deployment of POP promotions of ethical-prescription drugs in Nigerian pharmacy retail outlets constitute a “direct-to-consumer” advertising which is not permissible by law governing the distribution, sale and advertising of ethical-prescription drugs in Nigeria.^{18,32,33}

Hence, the need for a critical evaluation of the necessity for POP promotions in drug marketing generally within the Nigerian environment and particularly for ethical-prescription drugs; examine the ways and to what extent they influence patronage (choice) of branded prescription and non-prescription (OTC) drugs; as well as determine if they are delivering value for investment to drug marketers who deploy POP promotions as a key component of their promotion mix³⁴

1.3 Research Questions

1. To what extent does point-of-purchase promotion in drug marketing influence brand awareness?
2. To what extent does point-of-purchase promotion in drug marketing influence brand attitude?
3. To what extent does point-of-purchase promotion in drug marketing influence impulse buying?
4. To what extent does point-of-purchase promotion in drug marketing influence brand loyalty?
5. To what extent does front-of-store, point-of-purchase promotion in drug marketing influence brand patronage (choice) of drugs in general?
6. To what extent does in-store, point-of-purchase promotion in drug marketing influence brand patronage (choice) of drugs in general?
7. What is the difference between the influence of point-of-purchase promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs?

1.4 Aim and Objectives of the Study

To investigate and provide empirical evidence and informed insight on the extent to which point-of-purchase promotions influence the decision-making process leading to patronage (choice) of branded drugs in Nigeria pharmaceutical marketing environment, with the following objectives in focus, to:

1. Examine the extent to which point-of-purchase promotion in drug marketing influence brand awareness.
2. Examine the extent to which point-of-purchase promotion in drug marketing influence brand attitude.
3. Examine the extent to which point-of-purchase promotion in drug marketing

- influence impulse purchase
4. Examine the extent to which point-of-purchase promotion in drug marketing influence brand loyalty
 5. Examine the extent to which front-of-store, point-of-purchase promotion in drug marketing influence brand patronage (choice) of drugs in general
 6. Examine the extent to which in-store, point-of-purchase promotion in drug marketing influence brand patronage (choice) of drugs in general
 7. Determine if there is any significant difference between the influence of point-of-purchase promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.

1.5 Hypotheses

Ho1: Point-of-purchase promotion in drug marketing does not have a significant influence on brand awareness

Ho2: Point-of-purchase promotion in drug marketing does not have a significant influence on brand attitude

Ho3: Point-of-purchase promotion in drug marketing does not have a significant influence on impulse buying

Ho4: Point-of-purchase promotion in drug marketing does not have a significant influence on brand loyalty

Ho5: Front-of-store POP promotion does not significantly influence patronage (choice) of branded drugs in general

Ho6: In-store POP promotion does not significantly influence patronage (choice) of branded drugs in general

Ho7: There is no significant difference between the influence of point-of-purchase promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.

1.6. Significance of the Study

This study is of great benefits to brand/product marketing managers in pharmaceutical marketing, purchasers/consumers of drugs and managers of drug retail stores. This study will provide evidence-based insight/opinions that will empower drug marketing companies to reinvent/re-engineer their promotional strategies to improve relevance, appropriateness, and real value delivery from investments in point-of-sale promotions as a complement to other promotional strategies to achieve increasing brand patronage.

Moreover, the outcome of this research will shed light on the necessity for and appropriate use of point-of-purchase promotional materials for marketing prescription and non-prescription (OTC) drugs.

This work is expected to promote improved value-delivery to purchasers/consumers of drugs in terms of appropriateness of brand choice to health need, economy, safety, as well as minimization of self-prescription, self-medication and drug abuse.

This study will provide justification for the elimination of littering and nuisance of unnecessary, carelessly-mounted and poorly managed point-of-sale promotional items, which will promote improved frontage and in-store professional ambience and aesthetic appeal of drug retail outlets in Nigeria, as well as attracting and improving the quality of

attention which drug purchasers give to each point-of-purchase promotional material in the store

1.7 Scope of the Study

This study was conducted within the geographical territory of Ibadan, Oyo State, South-West Nigeria, focusing on regular purchasers of drugs and registered retail pharmacy stores in all Local Government Areas (LGA) namely: Ibadan SE, Ibadan SW, Ibadan NE, Ibadan NW, Ibadan North, Oluyole, Iddo, Akinyele, Egbeda, Lagelu, Ona-Ara.

The restriction of the scope of study to Ibadanland, Oyo State, Nigeria, is based on the fact that about 90% of registered retail pharmacy stores in Oyo State are located within the 11 Local Government Areas (LGA) of Ibadanland. For example, out of the 146 financial members of the Association of Community Pharmacists of Nigeria in Oyo State for the year 2019/2020, 131 (89.73%) are based in Ibadanland.

Moreover, the population of Ibadanland according to the last census of 2009 is 2,559,853 which represent 45.87% of the entire population of Oyo State in Nigeria. Yet, rural-urban migration to Ibadanland is ever increasing.

Furthermore, Ibadanland today, is largely urban/sub-urban, with the highest population of literate citizens possessing a minimum education of WASC/SSCE, male and female above 18 years, the basic qualification criteria set for prospective respondents to the questionnaire and participants in the Focus Group Discussion. Hence, the outcome of this research in the 11 LGA of Ibadanland is expected to give a fair representation of the general influence of point-of-purchase promotional strategies on brand patronage of drugs in Oyo State, South-West Nigeria

1.8 Limitations to the Study

Limited literature and empirical studies are available on the subject matter being investigated, especially in Africa and Nigeria pharmaceutical marketing environment in particular. The population, sample frame and sampling of respondents to the instrument relied on the relatively old last national census of 2009. The results cannot be generalized over the entire population since a non-probability convenience sampling technique was used in selecting respondents. Moreover, the study was compelled to resort to convenience sampling of drug retail outlets in some local government areas due to closure or relocation of some retail stores selected initially by simple random probability from the sampling frame.

This study excludes the larger population of unregistered (illegal) pharmacy stores, licenced and unlicenced patent medicine stores and other categories of drugs retail outlets in Ibadanland, Oyo State, Nigeria; as well as the vast majority of illiterate Nigerians and those educated below WASC/SSCE level. The impact of POP promotions on staff of pharmacy stores and their influence on customers' choice of branded drugs was not evaluated in this study.

1.9 Operationalization of the Research Variables

The study is based on two major constructs, namely FOS and IS point-of-purchase promotions-(X the independent variable) and Brand Patronage-(Y- the dependent variable) i.e. $Y = f(X)$

Where $Y = \text{Brand Patronage} = y^1, y^2, y^3, y^4, y^5$

Where y^1 = Brand Awareness; y^2 = Brand Attitude; y^3 = Impulse Buying; y^4 = Brand Loyalty, y^5 = Brand Choice

Where X = Point-of-Purchase Promotions = x^1, x^2

Where x^1 = Front-of-Store POP Promotions; x^2 = In-Store POP Promotions

Therefore, $Y = y^1, y^2, y^3, y^4, y^5 = f(x^1, x^2)$

1.10 Operational Definition of Terms

Alternative Brands of Drugs: Different brands of the same generic drug, from different companies e.g. Panadol, brand of paracetamol and Pancemol, brand of paracetamol; paracetamol being the basic generic drug

Branded Drug: A drug called by a special name registered as a trademark of a particular company, rather than by its generic name e.g. Ampiclox, a registered brand of Ampicillin/Cloxacillin, made and marketed by Beecham Pharmaceuticals/GSK. A branded drug could be an off-the-counter (OTC) drug (e.g. Panadol, a brand of Paracetamol) or a prescription (ethical) drug (e.g. Clamoxyl, a brand of Amoxycillin).

Brand Patronage of Drugs / Choice of Branded Drugs: Can manifest in several ways at consumer, prescriber and retailer levels. At the purchaser's level brand patronage may manifest as brand awareness, favourable brand attitude, impulse purchase, brand loyalty, or a purchaser choosing to buy a brand of drug or recommending a brand of drug to other people to use or to buy. Various categories of healthcare professionals can prescribe or recommend a brand of drug to a patient/purchaser to buy. Retailers may include a brand

of drug in the procurement list of the drug retail store or regular/frequent procurement of the brand of drug being promoted to ensure regular availability in the drug retail store or increase in stock (holding volume) of the brand of drug at the drug retail store.

Caregiver: Anyone carrying the responsibility of supervising the proper usage of drugs/medications by another person and monitoring the outcomes

Consumer of Drug: The person that actually uses the purchased drug

Generic Drug: A drug called by the industry-approved name of its key active ingredient(s). A generic drug could be an off-the-counter (OTC) non-prescription drug (e.g. Paracetamol) or a prescription (ethical) drug (e.g. Amoxicillin).

Healthcare Professionals: Doctors, pharmacists, nurses, midwives, doctor's assistants, pharmacy assistants, nursing/midwifery assistants, physiotherapists, dieticians, laboratory scientists, medical scientists, occupational health therapists, accident & emergency/ambulatory specialists, radiographers, and all manner of healthcare specialists and therapists

Impact: influence or effect on, outcomes or responses to a stimulus.

Licensed Patent Medicine Stores: Patent medicine stores operating under license issued under the Pharmacy Act, supervised by the Pharmacist Council of Nigeria and the State Ministry of Health, across the 36 States in Nigeria.

Off-the-Counter (OTC) Drug: A drug that is permitted by law of a country or pharmaceutical industry convention, to be sold and purchased by customers without the

prescription of a physician e.g. a pain killer like paracetamol tablet. Hence OTC drugs are alternatively called non-prescription drugs

Point-of-Purchase: Refers to the external and internal environment of a drug retail outlet, where purchasers select drugs to buy

Point-of-Purchase-Promotion: All communication mix and strategies deployed by drug marketing companies and retailers in front and within the premises of drug retail stores

Prescriber of Drug: (i) Healthcare professionals in public and private healthcare institutions, who are authorized to diagnose and determine appropriate medications for individuals seeking to resolve health challenges (ii) In the Nigerian context, will include doctors, pharmacists and other healthcare professionals working in the healthcare delivery centres and pharmacy retail stores (iii) In the Nigerian context, will include the non-healthcare professional, general sales staff working in pharmacy retail stores, who actively engage in recommending drugs to buy to customers.

Prescription: A clear statement of the drug of choice indicated for resolving a particular health challenge, its name, dosage form, dosing/usage instruction and duration of use; preferably in writing but often dictated orally by prescribers within and outside healthcare delivery facilities.

Prescription (Ethical) Drug: A drug that is expected to be sold and purchased only through a prescription by a physician or other authorized healthcare professionals e.g. anti-hypertensive, antibiotics, tranquilizers, sedatives.

Purchaser of Drug: The person who approaches a drug retail store with the intention of buying a drug, either for his/her own use or on behalf of a consumer or caregiver

Registered Pharmacy Store: A drug retail store registered by the Pharmacists Council of Nigeria (PCN) with the practicing license of a Registered Pharmacists who is expected to be the superintendent pharmacist supervising the day-to-day operations of the pharmacy retail store in accordance with the provisions of the Pharmacy Act of Nigeria

Retailer's General Sales Staff: All non-healthcare professionals working as retail sales staff in drug retail outlets

Unregistered Drug Retail Stores: All drug retail stores operating illegally, without approved license from Pharmacist Council of Nigeria and/or relevant State Ministry of Health i.e. unlicensed pharmacies, patent medicine stores, supermarkets and other sorts of unlicensed/illegal drug retail outlets.

Endnotes

1. F. Elahi, A. Muqtadir, S. Anam & K. Mustafiz, “*Pharmaceutical product selection: Application of AHP*”, **International Journal of Business and Management**, 12(8), 2017
2. C. King, “*Brand Management- Standing out from the crowd: A review and research agenda for hospitality management*”, **Int. Journal of Contemporary Hospitality Management**, 29(1), 2017, 115- 40.
3. Z. Shahid, T. Hussain & F. aZafar, “*The impact of brand awareness on the consumers’ purchase intention*”, **Journal of Marketing and Consumer Research**, 33, 2017
4. H. Song, J.H. Wang & H. Han, “*Effect of image, satisfaction, trust, love and respect on loyalty formation for name- brand coffee shops*”, **International Journal of Hospitality Management**, 79, 2019,50- 59.
5. M. Mody & L. Hanks, “*Consumption authenticity in the accommodation industry: The keys to brand love and brand loyalty for hotel and Airbnb*”, **Journal of Travel Research**, 59(1), 2020, 173-189.
6. M. Blackston, *Brand love is not enough: A theory of consumer brand relationship in practice*, (New York, NY: **Routledge**) 2018
7. S.M. Hegner, M. Fetscherin & M. van Delzen, “*Determinants and outcomes of brand hate*”, **Journal of Product & Brand Management**, 26(1), 2017, 13-25.
8. A. Alipour, S.J. Feizi & M. Heidari, “*A survey of the effects of brand value on customer satisfaction in pharmaceutical and biological industries*”, **Archives of Razi Institute**, 71(2) 2016, 109-116. DOI:10.22034/ari.2016.106449
9. P. Verma, “*The effects of brand engagement and brand love upon overall brand equity and purchase intention: A moderated- mediated model*”, **Journal of Promotion Management**, 2020, DOI: 10.1080/10496491.2020.1809591.
10. M. Rahman, M. Rodriguez- Serrano, & M. Lambkin, “*Brand equity and firm performance: The complementary role of corporate social responsibility*”, **Journal of Brand Management**, 26(6), 2019, 691- 704

11. S. Molinillo, Y. Ekinici & A. Japutra, "A consumer based brand performance model for accessing brand success", **International Journal of Market Research**, 61(1), 2019, 93-110.
12. P.J. Andrew, V. Kumar, Y. Polo & F. Javier Sese, "Unlocking the power of marketing: Understanding the link between consumer mindset metrics, behaviour and profitability", **Journal of the Academy of Marketing Science**, 46(5), 2018, 813- 836.
13. Global Market Insight, "Over-the-Counter (OTC) drugs market size by product", 2019, <https://www.gminsights.com/industry-analysis/over-the-counter-otc-drugs-market>
14. P. Verma, "The effect of brand engagement and brand love upon overall brand equity and purchase intention; A moderated and mediated model". **Journal of Promotion Management**, 2020. DOI:1080/10496491.2020.1809591
15. L.S. Pina, S.M. Loureiro, P. Rita, E.M. Samento, R.G. Bilro & J.Guerreiro, "Analyzing consumer brand engagement through appropriate listening on social network platforms", **Journal of Promotion Management**, 25(3), 2019, 304-313 <https://doi.org/10.1080/10496491.2019.1557805>
16. K. Ing-udomnoogoon "Essays on elevation of sales and marketing strategy: A perspective from pharmaceutical industry in Thailand, a Survey", **ABC Research Alert**, 7(1), 2019
17. V. Dickov & B. Kuzman, "The promotion of pharmaceutical products", **Research Gate**, 09/04/2015 <https://www.researchgate.net/publication/267722854>
18. M. Shokri & A. Alavi, "The relationship between consumer brand identification and brand extension", **Journal of Relationship Marketing**, 18(2), 2019, 124-145. <https://doi.org/10.1080/15332667.2018.1534064>
19. C. Sichtmann, V. Davvetas & A. Diamantopoulos, "The relational value of perceived brand globalness and localness", **Journal of Business Research** 104, 2019, 597- 613. <https://doi.org/10.1016/j.jbusres.2018.10.025>
20. V. Basile & O. Code, "Building a strong brand equity in pharmaceutical industry: The case of Over-the-Counter drugs in Italian country", **International Journal of Customer Relationship Marketing and Management**, 10(3), July-September, 2019. DOI: 10.4018/IJCRMM.2019070101
21. L. Garattini & A. Padula, "Competition in pharmaceuticals: more product- than price-oriented?", **Eur. J. Health Econ.**, 2017 DOI: 10.1007/s10198-017-0932-4
22. K. van de Vooren, A. Curto & L. Garattini, "Biosimilar versus generic drugs: same but different?", **Appl. Health Econ. Health Policy**, 13(2), 2015, 125- 127.

23. A. Ekiyor & F. Altan, "Marketing communication and promotion in health services", 2020 DOI: <http://dx.doi.org/10.5772/intechopen.91656>
24. A. Dadhich & K. Dixit, "Consumer perception and brand loyalty towards OTC brand medicines of major pharmaceutical companies with special reference to Rajasthan", **International Journal of Engineering Technologies and Management Research**, 4(9), September 2017, 27-38 <https://doi.org/10.29121/ijetmr.v4.i9.2017.97>
25. J.P. Govender, "Point-of-Purchase displays in the FMCG sector: A retailer perspective", **Journal of Governance and Regulation**, 4(4), 2015
26. R.R. Ahmed, "Pharmaceutical marketing mix strategy and physicians' prescriptions' behavior", **J. Pharm. Innov.**, 3, 2014, 8- 12
27. D. Dogramatzis, *Pharmaceutical marketing: a practical guide*, (US: Taylor & Francis), 2015, 112-149
28. P. Kotler, & G. Armstrong, *Principles of marketing*, 16th ed., Global Edition, (Essex, England: Pearson Education Limited), 2016
29. B. Mohammed, "Self medication practice in Ethiopia: A systematic review", 2017, <http://www.dovepress.com/patient-preference-and-adherence>
30. R. Joshi & A. Gandhi, "Consumer perception of generics drugs in comparison to branded drugs: A qualitative study" **Psychology and Education**, 57(9), 2020, 7466-7476
31. H. Sarah, "How pervasive is brand recognition in the pharmaceutical industry?" **xtalks News – pharmaceutical marketing news**, January 19, 2017. Available at: <https://xtalks.com/brand-recognition-pharmaceutical-industry>
32. M. Solomon, A. Hughes, B. Chitty, G. Marshall, & E. Stuart, *Marketing: Real people, Real choices*: 17-19 ed. (Upper Saddle River, N.J.: Pearson Prentice Hall), 2017
33. Ashok Panigrahi, Komal Aware & Akshay Patil, "Application of integrated marketing communication in pharmaceutical industry", **Journal of Management Research and Analysis**, 5(2), April- June 2018, 133-139 DOI: 10.18231/2394-2770.2018.0021.
34. A. Owusu, "Marketing communications process on the pharmaceutical market in Ghana". **Int. J.AcadRos in Bus & Soc. Sciences** 7(2), 2017, 256-273.

Chapter Two

Literature Review

This section covers conceptual issues, theoretical framework, and review of previous empirical works, leading to the development of conceptual framework and model specification for this study. The conceptual review covers various concepts and constructs relevant to the stated objectives of the study. Theoretical review focused on theories and literature that are relevant to the topic of the research, while empirical review focused on studies in line with the specific objectives of the study within the limits of available literature. The chapter ends with synthesis of research gaps in relation to the statement of the research problem and stated objectives

2.1 Conceptual Issues

2.1.1. Dependent Variables

Brand Patronage of Drugs: Brand patronage of drugs is the positive outcome in favour of a brand of drug in a product category/therapeutic class amongst a host of competing brands. Brand patronage is the eventual response of a drug purchaser/consumer to a host of influencing factors ranging from prescriptions by healthcare professionals, word-of-mouth, usage experience, exposure to all elements of the integrated marketing

communication employed to market and sell a brand at the clinic, pharmacy and public domains, including point-of-purchase promotions as well as the recommendations of pharmacists, healthcare professionals and sales staff of retail drug stores.¹

Brand Awareness: Creating brand awareness is the first and most critical step that must be achieved by drug marketers on the long road to securing prescription for a brand or product trial, brand loyalty and repetitive brand choice.² Prescriptions, word-of-mouth, usage experience and exposure to all elements of the integrated marketing communication-all help to promote brand awareness, brand familiarity, brand recall, brand recognition and most importantly brand knowledge as well as awareness of alternative brands of drugs in a product category/therapeutic class.³

Brand awareness is the primary, rate-determining step in the process of consumer purchase decision making because awareness provides the basic information on which other elements of brand equity are built, directly or indirectly. Consumers can only buy what they are aware of.³

Brand awareness has been defined as “the ability of a buyer to recognize or recall that a brand is a member of a certain product category”⁵

Brand Attitude: In order to build a strong brand, deliberate effort must be made to shape how customers think and feel about the product and build the right type of experiences around the brand, so that customers have specific, positive thoughts, feelings, beliefs, opinions and perceptions about the product^{6,7}

Basic elements defining overall attitude to a brand is a complex matrix of (a) judgement relating to perceived quality credibility, consideration, superiority, etc, (b) positive brand

feelings like warmth, fun, excitement, security, social approval and self-respect, (c) Imagery- how well the brand meets customers' need on a social and psychological level, (d) positive brand associations, (e) attitudinal attachment such as liking, loving and seeing the product as a special purchase. Positive brand attitude is driven by effective communication, of appropriate and convincing product knowledge as well as positive usage experiences. Positive brand attitude also drives first-time trial purchase/usage, repeat purchase and recommendation of the brand to other consumers/purchasers.^{7,8} Brand attitude, as one of the three constructs of brand association (attribute, benefits and attitude) is associated with self motivation, forms of reward, punishment, knowledge and learning⁹

Consumer responses to negative publicity leading to brand blame or attribution can impact negatively on brand attitude and purchase intentions just as brand image can positively influence brand attitudes and purchase intentions.^{8,10} Brand attitude is a key component of brand equity, which mirrors consumer evaluation of product or brand. Negative brand information has a direct, significant and negative effect on consumers' overall attitudes towards the affected brand. Intensity of negative impacts on brand attitudes by negative brand information, such as reviews can be influenced by factors such as proportion of negative comments and the writing quality of such reviews.⁸ Value-related negative publicity does a greater harm to brand attitude than performance related negative publicity

However, highly loyal customers may not be influenced easily and significantly by negative brand publicity. Negative publicity about brand ambassadors impacts negatively on brand attitudes.¹¹ With brand expansions, the negative impact on attitude towards the parent brand increases with the severity of the negative publicity about expansion

Brand Loyalty: Brand loyalty is the eventual dividend to marketers who constantly conceive and implement brand marketing programs and policies that create and consolidate endearing relationships and positive experiences between the products/services and the consumers as well as between enterprises and consumers.¹² Loyalty is a reflection of the depth of confidence and emotional attachment to a brand which evolves over a gradual and sequential process covering cognitive, affective, conative, and action, manifesting practically as familiarity, customer satisfaction, trust and attitudinal loyalty^{13,14}. Thus, brand loyalty is the silent emotional engine that drives repeat purchases.

Brand loyalty is consumers' preference of purchase of a specific brand in a product category.¹⁵ Brand preference "means the brand is accepted and preferred over others in the same product category".^{16,17} Enduring benefits of loyalty to a brand translate into habits like favorable purchase intention, repeat purchase, high volume and high frequency of purchase and brand recommendations. A brand-loyal customer is less sensitive to increases in product price or competitors' price reductions or promotions and will not easily be swayed to buy another brand because of unavailability in a particular store. Customers' perception of good product features, image, quality and proper price promotes re-purchase, the fountain nourishing loyalty.^{15,18,19}

Impulse Buying (Impulse Purchase): Classic impulse buying behaviour is an unplanned purchase of new/novelty products/brands in response to various external stimuli within retail stores, especially sales promotions and in-store communication through various media at the point-of-purchase or at the point-of-sale.²⁰ Reminder impulsive buying relates to a situation where there already exist a need for the product and a trigger such as

sales promotions (POP inclusive) suddenly reminds the consumer and the influence is strong enough to lead to immediate purchase. Impulse buying can manifest in either of two ways- brand switching from one brand to another in response to in-store promotion stimuli or brand substitution when the preferred brand is not available.²² Impulse buying behaviour highlight the importance of point-of-purchase promotions and the fact that 70% of retail purchases for most consumer goods are unplanned and so are greatly influenced by stimulating factors within the retail environment itself²³

The combined influence of the following factors may lead to impulse buying: in-store promotions, ambience, support at POP, convenience, displays and visual communications. POP promotions aim to attract, inform, entice purchasers to focus on specific products and accelerate purchase decision-making to buy such promoted products instantly.²⁴

However, for drugs, impulse buying behaviour possibly, may incline more to OTC non-prescriptions medicines than ethical prescription drugs because drugs generally are not items for pleasure consumption and their purchase decision-making is consequent upon rational, problem-solving evaluation, recommendations or prescriptions.

Purchase Intention: Purchase intention is a sequential step in the purchase decision making process deriving from a favourable attitude towards a brand. Purchase intention is also a manifestation of the level of commitment to the intended purchase and often supported by loyalty to product information such as price, benefit, quality, features and other elements at the cognitive level of brand patronage process. Purchase intention is the antecedent to the actual purchase of a brand.

Purchase intention is an important predictor of ultimate consumer purchase even though differences may exist in purchase intention and actual purchase behavior.²⁵ Purchase intention is formed through mental processing and scrutiny of facts and claims made at the cognitive level of brand engagement and the quality of favorable attitudes, brand love and overall brand equity in the minds of the consumers.^{26,27,28,29,30}

Brand engagement and brand love jointly influence purchase intention through an underlying mechanism of overall brand equity (OBE). Brand engagement stimulates brand love, brand love enhances brand equity, and overall brand equity promotes purchase intention for a brand. Attitudes, evaluations and perceptions impact positively on purchase decision.²⁵ Brand experiences could be at sensory, emotional, intellectual and behavioral levels which comprehensively may have a positive impact on brand purchase intentions.³¹ The higher the brand equity the stronger the consumers' preferences and purchase intentions.³¹ Invariably, purchase intention is an indication of the likelihood that a consumer will plan or want to purchase a product or service in the future.³²

External and internal factors influencing consumers' purchase intention include (1) Trigger, (2) Outcome Expectation, (3) Recommendations, (4) Personal Association (anticipated quality, brand faithfulness, perceived cost, risk perception). Purchase intention is driven by the level of satisfaction customers expect (pre-purchase) or receive (post-purchase and post-usage)²⁶

Purchase intention qualifies the possibility of planning or be willing to purchase a product or brand in future which is a strong indicator of the probability of actually buying the brand.⁵ Brand equity being a strong factor amongst others determining brand preference consequently affects purchase intention⁵

Brand Equity: In contemporary marketing thought, it is now widely recognized that the basic positive derivatives of the branding concept are the conferment of product identity, identifying ownership and product differentiation, the precursors to creating brand awareness, brand image, brand value, brand loyalty and ultimately brand equity— all towards establishing, growing and consolidating competitive advantage of the brand throughout its entire product life cycle.^{33,15,34,35}

In its essence, a brand is an offerer's guarantee that it will continuously and consistently deliver on its promises explicitly or implicitly made on tangible features, specific quality thresholds and benefits and convenience to the consumer^{34,36} Essentially, brand equity is a mirror of brand strength, the net-value in the minds of relevant stakeholders.

Brand equity as been defined as “the value of a brand, which is in itself a function of a high brand loyalty, perceived quality, awareness of brand name, strength of brand associations and other key organizational assets and activities including trademarks, patents, advertising, distribution channels and different types of innovation”³⁴ Brand equity is a “set of brand assets and liabilities linked to a brand, its name and symbol that add to or subtract from the value provided by a product or service to a firm and/or to that firm's customers”³⁷. From this perspective, brand equity reflects the “net-worth” of a brand of product or service to its stakeholders. .Brand equity is also perceived as an asset created by marketing effort that will “drive future cash flows from the sales of that brand”³⁴

Consumer subjectivism is at the core of brand equity and is deeply rooted in the consumer mindset which encapsulates perceptions, thoughts, experiences, attitudes and images and other intangibles that are valued by the consumer

All brands have a brand equity to some degree as consumers develop attitudes, perceptions and associations about each brand as they interact with each product.

Developing strong brands has become an imperative for marketers in a competitive environment, as brands act as aggregators of value to core product functionality. Moreover, “brand equity represents the added value that accrues to organizations, while the brand endows a product with intangible elements”³⁴

Four perspectives for discussing brand equity are: the investor, the manufacturer, the retailer, and the consumer. Each perspective mirrors a different meaning of brand equity as well as “different consequences and ramifications”³⁴. Essentially, brand equity is a mirror of brand strength or net-value in the mind of relevant stakeholders

Aaker’s consumer-based equity perspective focuses on creation of value for both the organization and the consumer, while Keller’s Brand Equity Model suggests that in order to build a strong brand deliberate effort must be made to shape how customers think and feel about your product and build the right type of experiences around your brand, so that customers have specific, positive thoughts, feelings, beliefs, opinions and perceptions about the product.^{34,38} Three basic perspectives of brand equity exist in literature:

- a. Mental brand equity- that is, the impact of the brand on the consumer’s consciousness
- b. Behavioral brand equity- that is, the consumer’s behavioral response to the brand
- c. Financial equity- that is, the financial impact of the brand to stakeholders as expressed through return on investment, profit, turnover, price-to-earnings ratio etc

Consumer-Based Brand Equity: Mental brand equity and behavioral brand equity both constitute the realm of Consumer-Based Brand Equity (CBBE). Consumer-based brand equity derives from customer familiarity with the brand, and the customer holding some favorable, strong and unique brand association in memory. The antecedents to these two constitute the assets of CBBE which must be defined and developed by marketers in order to build brand equity.

Aaker's Brand Equity (CBBE) Model defines four basic dimensions of CBBE- Brand Awareness, Brand Associations, Perceived Quality and Brand Loyalty.⁴¹ The foundation of Keller's CBBE Model is the basic premise that "the power of a brand lies in what customers have learned, felt, seen, and heard about the brand as a result of their experiences over time".⁴ The concept behind Keller's Brand Equity Model is simple: in order to build a strong brand, you must shape how customers think and feel about your product. You have to build the right type of experiences around your brand, so that customers have specific, positive thoughts, feelings, beliefs, opinions, and perceptions about it.

Essentially, emphasizing that brand knowledge is the key to creating brand equity. Strong brand equity means your customers will buy more from you, recommend you to other people, they are more loyal and you are less likely to lose them to competitors. Keller's CBBE Model defines brand equity as the "differential effect of brand knowledge on consumer response to the marketing of the brand"; conceptualizing brand knowledge as being derived from brand awareness and brand image

Keller's BE Model is depicted as a four-step pyramid containing six building blocks that must be in place to reach the top of the pyramid, and to develop a successful brand. These

four steps represent four fundamental questions that your customers will ask-often subconsciously-about your brand.

Step 1: Brand identity- who are you? (Brand Salience or Awareness).

Creating identity and correct perceptions

Step 2: Brand meaning- what are you? (Performance, Imagery)

Step 3: Brand response- what do I think or feel about you? (Judgments & Feelings)

Judgment-Quality, Credibility, Consideration, Superiority

Step 4: Brand Resonance- what about you and me?

Resonance-Behavioral Loyalty, Attitudinal Attachment, Sense of Community, Active Engagement. The task in this last stage of the pyramid, is to strengthen your brand resonance in each of the four categories listed above

Brand Recommendation: Brand recommendation of a person's favourite brand to other potential purchasers/consumers is essentially a demonstration of emotional attachment to the brand through positive experiences, consistent satisfaction derived from repeat purchases and usage and eventual brand loyalty. Such brand loyalty may manifest in recommending specific brands to buy as well as the frequency of recommendation at every opportunity which invariably translates to being a brand ambassador through word-of-mouth advertising

2.1.2 Independent Variables

POP Promotions in Drug Marketing: POP promotions, a key tool of consumer promotion towards sales promotion, aims to attract attention, inform and influence purchase of the brand being promoted.

POP promotions are relatively cheaper, they last long in the drug retail stores and provide an enduring platform to keep engaging and reminding the three categories of stakeholders at the drug retail store level- the pharmacists, the store staff and the patronizing purchasers/consumers of drugs. POP promotions can impact the decision-making of the purchaser of drugs at the three levels cognitive, attitudinal and behavioural.

The impact of POP promotions on consumer purchase behaviour when buying drugs could manifest in three outcomes; (1) Choose the brand being promoted if undecided prior to entering a retail pharmacy, (2). Reinforce the conviction of the buyer to buy the brand being promoted if it is the pre- determined choice of the buyer even before the entering the retail pharmacy, (3) or, convince the buyer to switch choice to the brand being promoted, especially if the pre- determined brand of choice is not available at the retail pharmacy. Any of these behavioural outcomes could be the result of direct impact of the POP promotion on the independent decision by the buyer or the POP promotion empowering the buyer to be more favorably disposed to the recommendations of retail pharmacy staff to buy the brand being promoted.

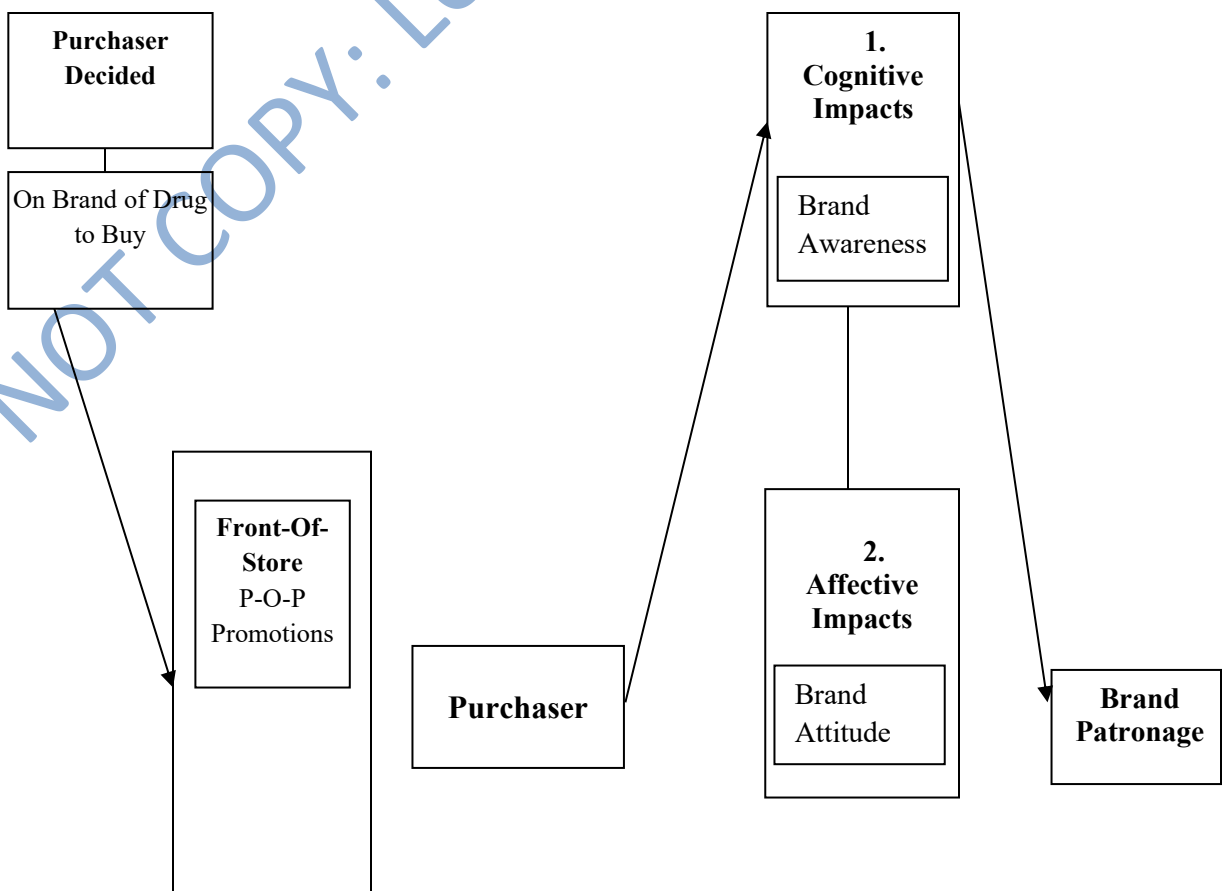
In-store retail environment provides marketers of drugs a unique opportunity to make a difference, making their brands and products stand out, at the critical moment when the purchasers evaluate alternative brands.

POP promotions are particularly more relevant for sales promotion of non-prescription, off-the-counter (OTC) drugs.

Front-of-Store P-O-P Promotion Strategies in drug marketing typically include, window displays, banners, stickers on doors and walls, merchandising costumes, electronic signs and displays, exhibitions, consumer education, demonstrations, product trials, pamphleting.^{38,39}

In-Store P-O-P Promotion Strategies include ceiling danglers, floor signs, floor (aisle) merchandising displays, shelf-top merchandising displays, shelf talkers (signs attached to store shelves), shelf extenders (attachment that extend shelves so that products stand out), wall displays, stickers on shelves, cabinets and walls, banners, merchandising costumes, exhibitions, consumer education, demonstrations, product trials, sampling amongst others.

Other POP promotion strategies that could be used in in-store and front-of-store include inflatable and mobile displays, electronic and non-electronic signs and displays.



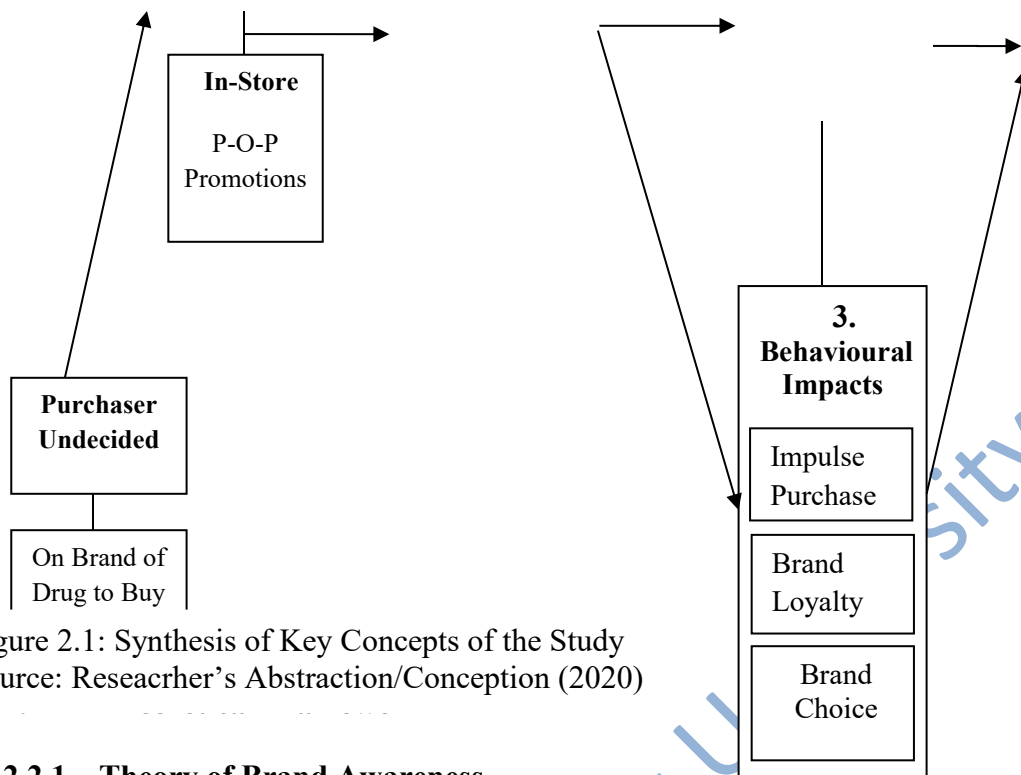


Figure 2.1: Synthesis of Key Concepts of the Study
Source: Researcher's Abstraction/Conception (2020)

2.2.1 Theory of Brand Awareness

The foundation for the theory of brand awareness is laid on the premise that a buyer cannot purchase what he is not aware of, the vital first step, upon which other associations, familiarity, brand attitude, brand image, purchase intention and consideration for purchase are built and attached to the brand in memory of the consumer/purchaser.^{40,41} In theory, two types of brand awareness are widely acknowledged, namely; brand recall and brand recognition^{41,42}

Brand awareness is related to the functions of brand identities in consumer's memory and can be measured by how well the consumers can identify the brand under various conditions. Brands can be identified by its location, packaging or even shape, not necessarily by recall of the brand name. Moreover, brand recall may not be necessary for a purchase, mere recognition of the brand in the store may be sufficient for purchase to occur.

Brand Recall, also known as unaided recall or spontaneous recall, refers to the ability of consumers to correctly elicit a brand name from memory when prompted by a product category. Brand recall indicates a relatively strong link between a category and a brand while brand recognition indicates a weaker link.

Moreover, increases in brand awareness were shown to increase the probability of choice even without any accompanying change in attitude or perceptions.

Brand Recognition, also known as aided recall, refers to the ability of the consumers to correctly differentiate the brand when they come into contact with it at the point-of-sale or after viewing its visual packaging; not necessarily by brand name. In contrast to brand recall, larger number of consumers are able to recognize a brand at the point-of-purchase than the number of brand names they can recall unaided.

The depth perspective of brand awareness relates to familiarity, recall and easy identification while the width perspective relates to issues of purchase process. Brand awareness impacts positively the consumer decision-making process by offering three advantages over competitors- learning, consideration and choice. Levels of progression of brand awareness are as follows:⁴¹

Unaware of Brand → Brand Recognition → Brand Recall → Top-of-Mind

Other concepts closely related to brand awareness are:

Awareness Set refers to the large number of brands in a category which the consumer builds up and constantly changing as consumers acquire more information from diverse sources on a continuing basis.

Evoked Set refers to the set of brands that a consumer can elicit from memory when contemplating a purchase, from the awareness set, of course

Consideration Set refers to the small set of brands which a consumer pays close attention to when making a purchase decision. Consumers will normally purchase one of the top three brands in their consideration set.³⁹ A brand that enjoys top-of-mind awareness will generally be considered as a genuine purchase option, provided the consumer is favourably disposed to the brand name. A brand that is not considered cannot be chosen.³⁹ Brand awareness can determine not only entry to the consideration set but can also determine which brand is chosen from the consideration set.

Top-of-Mind Awareness “is the first brand that comes to mind when a consumer is asked an unprompted question about a category (of products)”, based on brand knowledge, brand opinion and brand dominance beyond just recognition.^{41,4} In relation to larger groups of consumers, top-of-mind awareness is more defined as the “most remembered” or “most recalled” brand name (s), the brand that comes first in the mind when someone thinks about a product category, Top-of-mind awareness is relevant when consumers make a quick choice between competing brands in low-involvement categories or for impulse-type purchases²

Brand Awareness and Hierarchy of Effects: Brand awareness constitutes the first critical step in all the varieties of the linear sequential models built on an assumption that consumers move through a series of cognitive and affective stages beginning with brand awareness (or category awareness) and culminating in the purchase decision. Different models have been developed to interpret the various stages of cognitive, affective, and behavioral processes that consumers go through before making a purchase decision,

awareness being the starting point for all models then followed by other processes like knowledge, liking, interest, attitudes, preference, desire, conviction, search, and ending with purchase action and satisfaction.

Brand Awareness as Value-Adding Assests: Brand name awareness is one of four major brand assets which add value to the product or service and/or its consumers.³⁷ Brand awareness can add value by 1. Placing the brand in the consumer's mind; 2. Acting as a barrier to entry of new, unestablished brands, 3. Reassuring the customer of the organization's commitment and product quality, 4. Providing leverage in the distribution channels.

Strong brand awareness can be a predictor of brand success. It is an important measure of brand strength or brand equity and is also involved in customer satisfaction, brand loyalty and customer's brand relationships.

Investing in Building Brand Awareness: Investments in building brand awareness can lead to sustainable competitive advantage, thus leading to long-term value. Thus brand awareness is a key indicator of a brand's competitive market performance.³⁷

Some notable positive contributions in the development of the theory of brand awareness over the years, apart from the concepts of brand recall and brand recognition include defining brand awareness as the likelihood that a brand name will come to mind and the ease with which it does so; brand awareness having a significant effect on brand choice; brand awareness as a strong cue to brand retrieval; brand familiarity derived from brand awareness has been found to be highly consistent with other brand equity measures.^{41,4}

2.2.2 Theory of Brand Loyalty

The theory of brand loyalty has been examined by scholars from four perspectives, evolving over a gradual and sequential process, from cognitive to affective then conative and finally action (behavioral) loyalty.⁴³ Brand loyalty is a composite of both behavioral and psychological aspects of consumer behavior

Customer's attachment to a brand, can manifest as behavioral loyalty and cognitive loyalty, as well as attitudinal loyalty.⁵ Behavioral loyalty is consumer's strong commitment to purchase a brand consistently in the future, relating to a habit of repeated consumption, implicitly of the same brand and more frequently in higher quantity. A brand becoming first choice to purchase is demonstration of cognitive loyalty and demonstrating the least chance to switch brand. Attitudinal brand loyalty manifests as consumer attachment, repurchase or intention of repurchase either consciously or unconsciously.^{5,44} Certain factors which have been used to measure attitudinal loyalty include: (a) Customer's intention of repeat purchase (b) Recommendation to others (c) Low switching to better rivals (d) Attachment (e) Willingness to pay a price premium

Brand loyalty has been modeled as a four-stage sequence of development:

1. *Cognitive Loyalty*- Loyalty to information such as price, benefits, quality features, etc.
2. *Affective Loyalty*- Loyalty caused by affection, supported by satisfaction, engagement, preference and cognitive consistency.
3. *Conative Loyalty*- Loyalty as an intention, supported by commitment and cognitive consistency
4. *Action Loyalty*- Loyalty as inertial action, associated with overcoming obstacles

Securing, sustaining and consolidating competitive advantage is the key to business growth and survival in today's dynamic and increasingly competitive local and global market environments which suggests that growth and survival is anchored on brand loyalty.

Creation of Brand Loyalty: The FSTA framework suggest that building brand loyalty is anchored on familiarity, satisfaction, trust and attitudinal loyalty.¹⁴ Factors that contribute to creation of brand loyalty include name, awareness, quality, price etc., having sufficient understanding about the brand and confidence while purchasing the brand. Some scholars identified six conditions that must be fulfilled to establish brand loyalty (i). Biased response (ii). Behavioral response (iii). Repetitive behavior (iv). Ignoring regular decision making process (v). Preferential choice among other alternative products (vi). A function of psychological process. Brand image, customer satisfaction and brand experience have been identified as key determinants of brand loyalty²

Value of Brand Loyalty: Loyal customers promise steady growth in sales and increasing profitability as they are more willing to pay a high price and are less sensitivity to price.⁴⁵ Moreover, loyal customers become brand ambassadors offering free word-of-mouth advertising, promote positive image of the parent company and are less eager to switch to a competing brand and are more tolerant of faults. Loyal customers are repeat-purchase customers who do not bother to consider alternatives (quality and/or price), buy more and regularly, and frequently recommending and advising others about their brand of preference.

Guarding Brand Loyalty: Building and guarding brand loyalty demands focus and continuous effort by marketers all through the natural product/service life cycle stages.

Loyal customers are key assets to a brand and company as they guarantee a certain level of success in sales target achievement over time. Brand loyalty is the heart of a brand's values, while it has been observed that there is a strong positive relationship and bonding between customer loyalty and brand image. Other scholars assert that brand loyalty is a key influencer of brand value, as brand value can earn and enhance profit.⁴⁶ Enhancing product value to meet and exceed customers' expectation and need is the key to retaining customer.⁴⁷

The advantages of retaining customers rather than looking for new ones have brought to the fore, the significance of brand loyalty. Loyalty is all about the depth of confidence and emotional attachment to a brand.¹³

It is widely acknowledged that the cost of retaining a consumer's loyalty to a brand is less expensive than the cost of recruiting a new customer. The cost of attracting a new customer may be five times the cost retaining a loyal customer. Three main benefits of consumer retention are: reduced cost of consumer acquisition, opportunities for gaining higher margins as loyal customers are less price sensitive and higher sales are guaranteed as loyal customers tend to buy more from the company they are loyal to. The perceived value and perceived quality of a brand directly influences brand loyalty. Loyal and non-loyal customer segments differ in their buying behaviour and in their responses to varying marketing strategies¹⁴

Other works of scholars in support of the theory of brand loyalty have confirmed that brand satisfaction has a positive effect on brand loyalty, while others have gone further to develop a brand experience scale in which four dimensions are proposed: sensory, affective, intellectual and behavioral.⁴⁸ Some scholars have suggested that the higher the

brand association, the more it will be remembered and the higher the likelihood of loyalty to the brand, and that brand awareness is positively associated with brand loyalty. Also, brand loyalty is the manifestation of favourable attitude and behaviour towards a brand on a long-term and reinforced by pleasant experience

A close relationship exists between brand loyalty and brand equity, as much as brand loyalty is a key element in building brand equity (strength) just as brand equity reinforces brand loyalty⁴⁹. “Even though the purchase and usage experiences are fundamental factors in brand loyalty, the loyalty of a customer is also persuaded by other dimensions of brand equity”.⁴¹ Other scholars suggest that the degree of loyalty can be classified into four groups: *Hard – core loyals* – always buy the same brand; *Split loyals* – loyal to two or three brands; *Shifting loyals* – loyal to one brand for a period of time, but easily shifting from one brand to another, due to certain advantages offered by the new brand; *Switchers*– show no loyalty to any brand, switches the brand with almost any buying situation.

A major criticism of the well-established brand loyalty construct suggests that brand loyalty is a multidimensional construct and is determined by several distinct psychological processes and it entails multivariate measurements.⁵⁰ “Simple univariate measurement in terms of frequency and pattern of repeated brand purchase behavior is not sufficient to fully represent the brand loyalty construct”⁵⁰. This is the foundation for the proposition of the theory of multidimensional brand loyalty.

Moreover, such univariate measurements “drastically limit the realm of products and services in which brand loyalty exists but cannot be measured by repeated observations.

For example, in the case of once-in-a-lifetime consumer decision for housing and mobility behavior”⁵⁰

Brand loyalty has been defined, “as a positively biased emotive, evaluative and/or behavioral response tendency toward a branded, labeled or graded alternative, or choice by an individual in his capacity as the user, the choice maker, and/or the purchasing agent”. A definition that liberates the construct of brand loyalty from the restrictions of repeated overt behavior, which underlies the major differences with other definitions of brand loyalty

Based on the theoretical foundation that not all the three dimensions are present in every situation depending on the product class and the consumer, hence, brand loyalty dimension may be as simple as any of the three dimensions or as complex as any combinations of the three dimensions.⁵⁰ Thus, leading to the hypotheses of seven different types of brand loyalty viz:⁵⁰ (1). Behavioral brand loyalty, (2) Behavioral- evaluative brand loyalty, (3) Behavioral- emotive brand loyalty, (4) Behavioral- evaluative-emotive brand loyalty, (5) Evaluative brand loyalty, (6) Evaluative- emotive brand loyalty, (7) Emotive brand loyalty. Whichever type of brand loyalty prevails in any situation is a function of the product differences and consumer differences

The summary of this multidimensional perspective of the theory of brand loyalty is that different customers manifest different types of brand loyalty for different products or services⁵⁰

Consumer-related attributes relate to the different roles the consumer plays amongst others as a (a). purchasing agent, (b). choice maker, (c). user, and (d). combination of the

all the three roles. Product-related attributes relate to (a) product-related variables like purchase cycle, perceived differentiation among brands, types or categories of product durability and services; (b) product differentiation in terms of necessities of life and those which are luxuries.

2.2.3 The Model of Buyer Behaviour

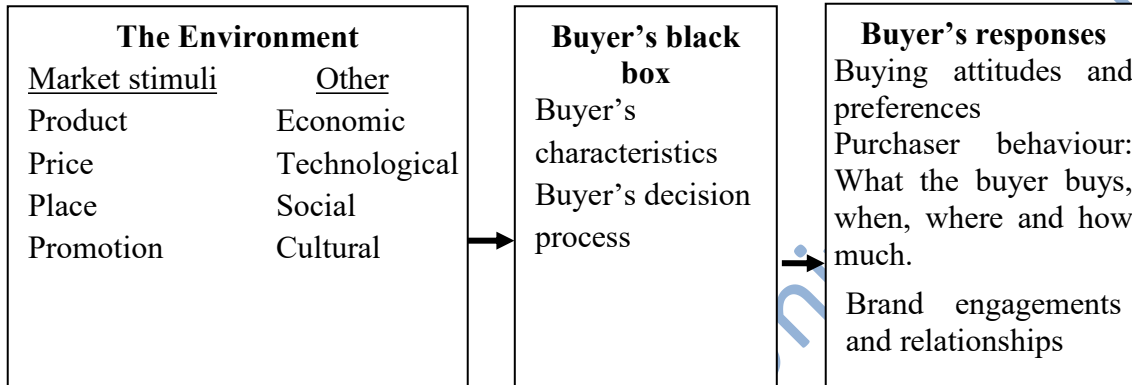


Figure 2.2: The Model of Buyer Behaviour

Source: ⁶

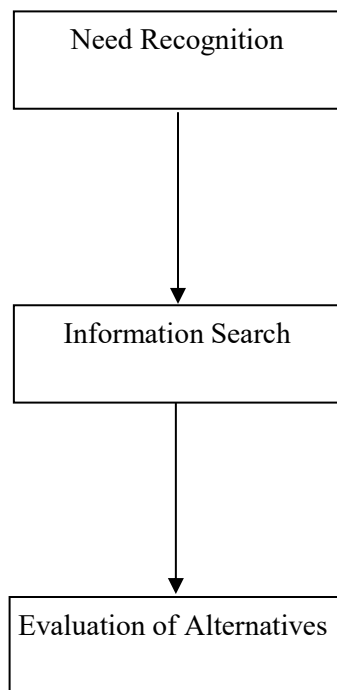
“We can measure the whats, wheres and whens of buyer behaviour. But it is difficult to “see” inside the consumer’s head and figure out the whys (that’s why it is called the black box)”⁶. A combination of internal and external factors coupled with personal, psychological, cultural and social influences generally affect consumer buying decision⁶

In the Nigerian environment, these factors do exert influences to varying degrees on different socio-economic classes on the buying behaviour for drugs in many ways amongst which are attitude to personal healthcare, health consciousness, healthcare need recognition, responsiveness to need recognition, choice of healthcare delivery approach, attitude to prescription compliance, what to buy (brand, quality and price) where to buy and many other considerations.^{51,52,53,54,55,56}

2.2.4 Consumer Buying Behaviour – The Buying Process

2.2.4.1 Need Recognition

An unsatisfied need is the basic precursor of the buying process and the consumer buying behavior is mediated by several factors.^{49,57,58,59} The need for drugs purchase arises as a solution to getting relief from an ailment or any disruption of the normal health status or well-being of an individual, basically to satisfy a utilitarian need rather than hedonic need.



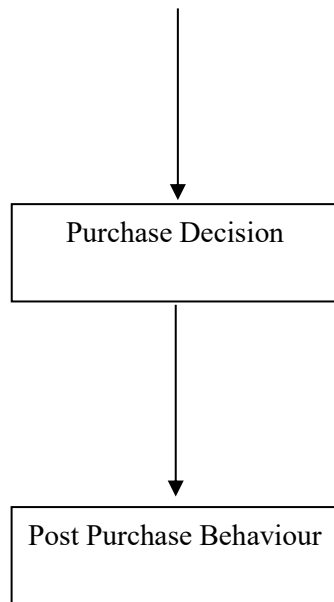


Figure 2.3: Buyer Decision Process

Source: ⁶

Shopping for utilitarian needs typically is done in a more deliberate and efficient manner. For drug purchases, the consumers make deliberate choice of retailer and correctness of the purchase in relation to item specificity, quality, safety, efficacy and economy as well as integrity of the drug retailer to sell genuine products, particularly in the Nigerian economic environment.

Moreover, various types of advertising, promotions and merchandising on the retailers' premises also contribute significantly to stimulating need recognition. Herein, lies the strategic significance of point-of-purchase promotions in drug marketing (at the retailers' level).

2.2.4.2 Critical Levels of Decision-Making Leading to Drug Purchase

Three levels of decision-making confront a typical subject in need of a drug medication viz: (a) Selecting from options of sources for getting a prescription (what to buy?) (b). Deciding where to purchase the drug (where?) (c). Selecting the brand of drug to buy (which brand?) i.e. *buying the drug as prescribed by brand name, (whether a prescription drug or OTC drug) or evaluating alternative/equivalent brands of the same generic drug.*⁶⁰

What Drug to Buy?: So effectively, once the need recognition is stimulated the subject seeks a prescription, from whatever accessible, convenient or affordable source. The prescription obtained could be for a branded drug or a generic drug.

Deciding Where to Purchase the Drug – (Where to Buy?): After securing a prescription, the task of deciding where to purchase, the choice of retail outlet, has three dimensions – which locations?; which type or category of drug retailer?; and which drug retailer in particular?⁶¹ Other considerations at this stage of decision making include evaluating the alternative choices of drug retailer (which store to buy from), the multiple attributes of Nigeria drug retailers, implications of the multi- attribute model of retailers and approaches to influencing consumer patronage of retailers.^{62,63,64} The options are wide and purchasers of drugs may choose based on the following considerations, among others: price, prospect of availability, pharmacists' and sales staff attitude and quality of service, as well as business hour^{65,66}

Which Brand of Drug to Buy?: Having secured a prescription by whichever way (knowing what to buy) and having decided on the drug retailer to buy from (where to buy) the prospective drug purchaser could be in any of the following four states of decision-making with regard to which brand of drug to buy before approaching a drug retail store:

- *Decided* – to purchase the brand of drug as prescribed by healthcare professional or other persons.
- *Decided* – to purchase the brand of drug as determined by self-prescription based on familiarity with the brand which could have been obtained from previous exposure to several point-of-purchase promotions and other sources of information; and/or from the satisfaction derived from previous usage of the brand of drug.
- *Undecided* –on brand of choice, especially if the original prescription is for a generic drug and the purchaser has no information or prior usage experience with any of the alternative brands of the prescribed generic drug
- *Undecided* – on the brand of choice because the health need has not been diagnosed after the need recognition, hence the subject is not even in possession of a prescription, brand-specific or generic. This is a common phenomenon in environments with under-developed healthcare delivery systems and under-regulated/poorly-controlled drug distribution and sale systems, like Nigeria.

The most frequent consumer purchasing behaviour at the Point-of-Prescription Dispensing has been summarized as follows in previous studies⁶⁷:

- (a). Fill prescription as physician has written, 42.7% respondents,
- (b). Fill prescription as pharmacist deems appropriate, 20.8% of respondents,
- (c). Request generic product, 17.7% of respondents,
- (d). Request Brand-name product, 2.5% of respondents,
- (e). Base decision on cost, 9.2% of respondents

The following are logical options in the decision matrix for a Nigerian purchaser of drugs at the point-of-purchase.

Factors Influencing Brand Choice of Drugs at the Point- of – Purchase

Brand Prescribed Originally by Medical Doctor or Healthcare Professional

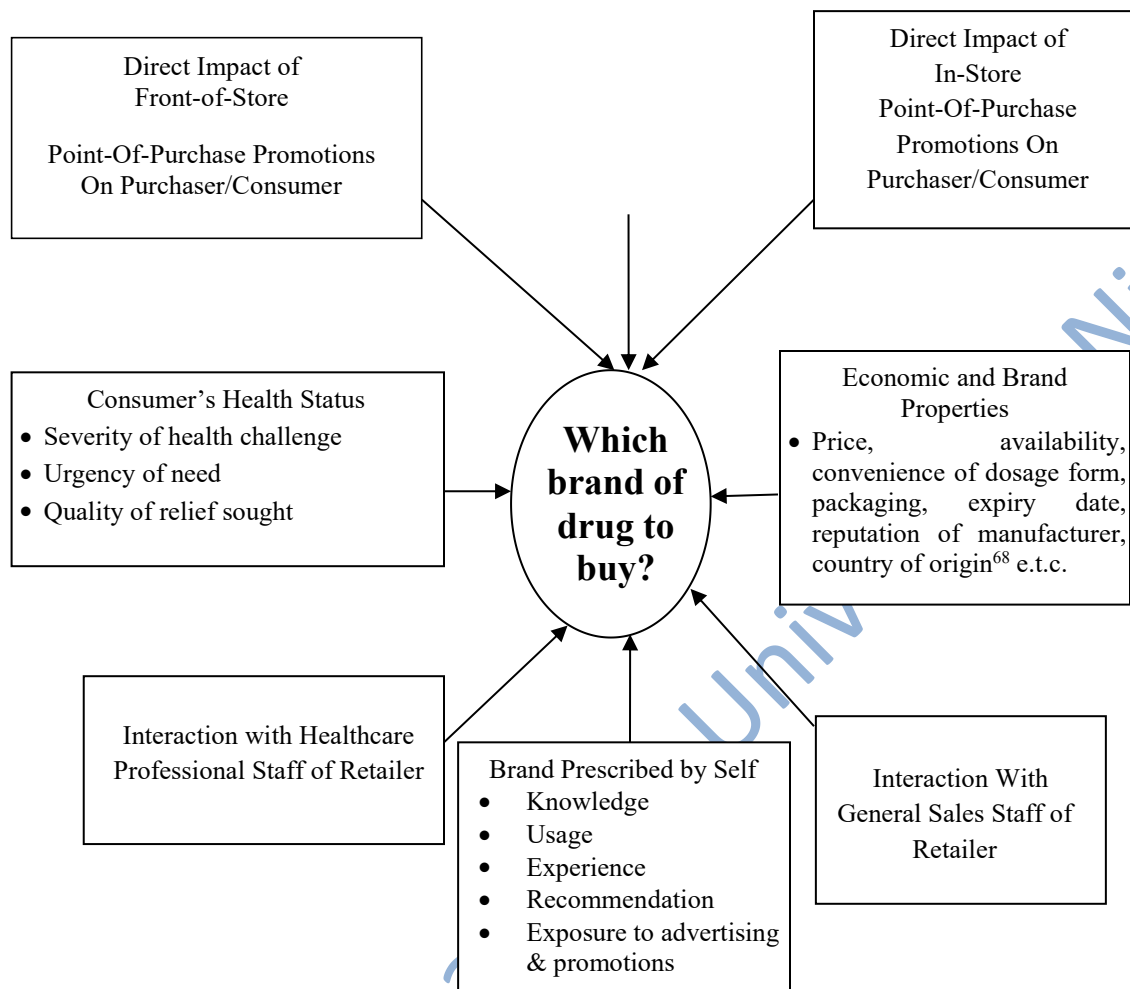


Figure 2.4: Factors Influencing Brand Choice of Drugs at the Point- of – Purchase

Source: Researcher's Abstraction/ Conception (2020)

The 10-Option Decision Matrix for Choice of Branded Drugs

- Option 1: Buy brand of drug as prescribed by informed or uninformed prescriber(s)
- Option 2: Buy brand of drug as determined by “self” (i.e. self-prescription) before entering the drug retail store – often relying on familiarity, usage experience, e.t.c.
- Option 3: Choose from a selection of alternative brands available for a generic prescription (i.e when brand name is not stated)

- *By consulting healthcare professional staff and/or general sales staff of retailer on duty.*
- Option 4: The purchaser taking an independent decision on choice of brand to buy when armed with a generic prescription, based on familiarity with brands within the product category
- *Without consulting the healthcare professional staff and/or general sales staff of retailer on duty.*
- Option 5: Choose from alternative brands if the prescribed brand of drug is not available (i.e out of stock at the retailer's store)
- *As recommended by healthcare professional staff and/or general sales staff of retailer on duty.*
- Option 6: The purchaser taking an independent decision on choice of brand to buy when the prescribed brand of drug is not available i.e out of stock at the retailer's store.
- *Without consulting either the healthcare professional staff or general sales staff of retailer, on duty; based on familiarity with brands within the product category*
- Option 7: The purchaser taking an independent decision on brand of drug to buy based on rationalization of other product properties e.g price/quantity -value evaluation, quality perception, dosage form options/conveniences, reputation of manufacturer, country of origin, expiry date, packaging appeal, e.t.c
- Option 8: Diagnosis and prescription of brand of drug to buy by healthcare professional on duty at the drug retail store.
- Option 9: Health need diagnosis and prescription of brand of drug to buy by non-healthcare professional/ general sales staff of retailer, on duty.
- Option 10: Final selection based on the consideration of more than one of the nine options above.

Figure 2.5: The 10-Option Decision Matrix for Choice of Branded Drugs

Source: Researcher's Abstraction/Conception (2020)

2.2.4.3 Purchasing the Drug (Purchase Action)

Factors that may not make a drug purchaser buy the brand with the best evaluation (benefits) or recommendations include non-availability in the selected retail store or

appeal/convenience of dosage form in which the brand is available, or the feeling that the risks associated outweigh the potential benefits or even cost of purchase, which is very important in final decision-making amongst the poor and low-income customers.

Retailers can easily convert the positive evaluations of merchandise or service into purchases through some of the following steps.⁶⁹ (a). Never stock-out of popular brands or varieties (b). Offer credit (c). Increase convenience of shopping and checking out (d). Reduce the actual and perceived waiting time in lines at checkout terminals

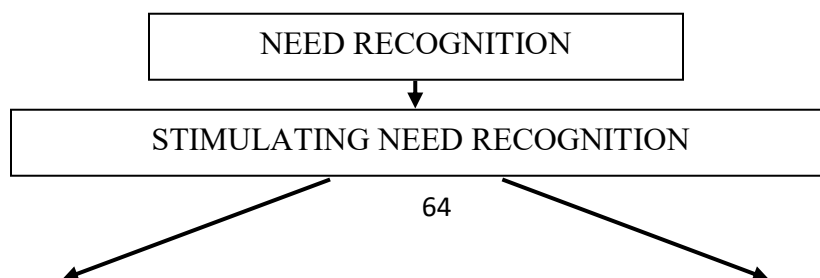
2.2.4.4 Post-Purchase Evaluation of Brand of Drug Purchased

Upon purchase and usage of the branded drug or any merchandise, the customer determines whether the benefits derived or experiences are satisfactory or unsatisfactory and that evaluation affects future store patronage and brand loyalty.⁷⁰

Satisfaction is a post-consumption evaluation of how well customer's expectations are met or exceeded.⁷¹

In an environment of inadequate healthcare delivery systems and uncontrolled access to drugs such customer satisfaction encourages the high prevalence of self-medication in a developing country like Nigeria.

Moreover, post-purchase evaluation is a unique phenomenon in relation to drug purchase because unlike most consumer goods, the purchaser of a drug may not necessarily be the ultimate consumer of the drug. Also, the post-purchase/post-consumption or-usage evaluation for a drug can be made by the user, the prescriber or even by the caregiver to the user, like parents of infants.



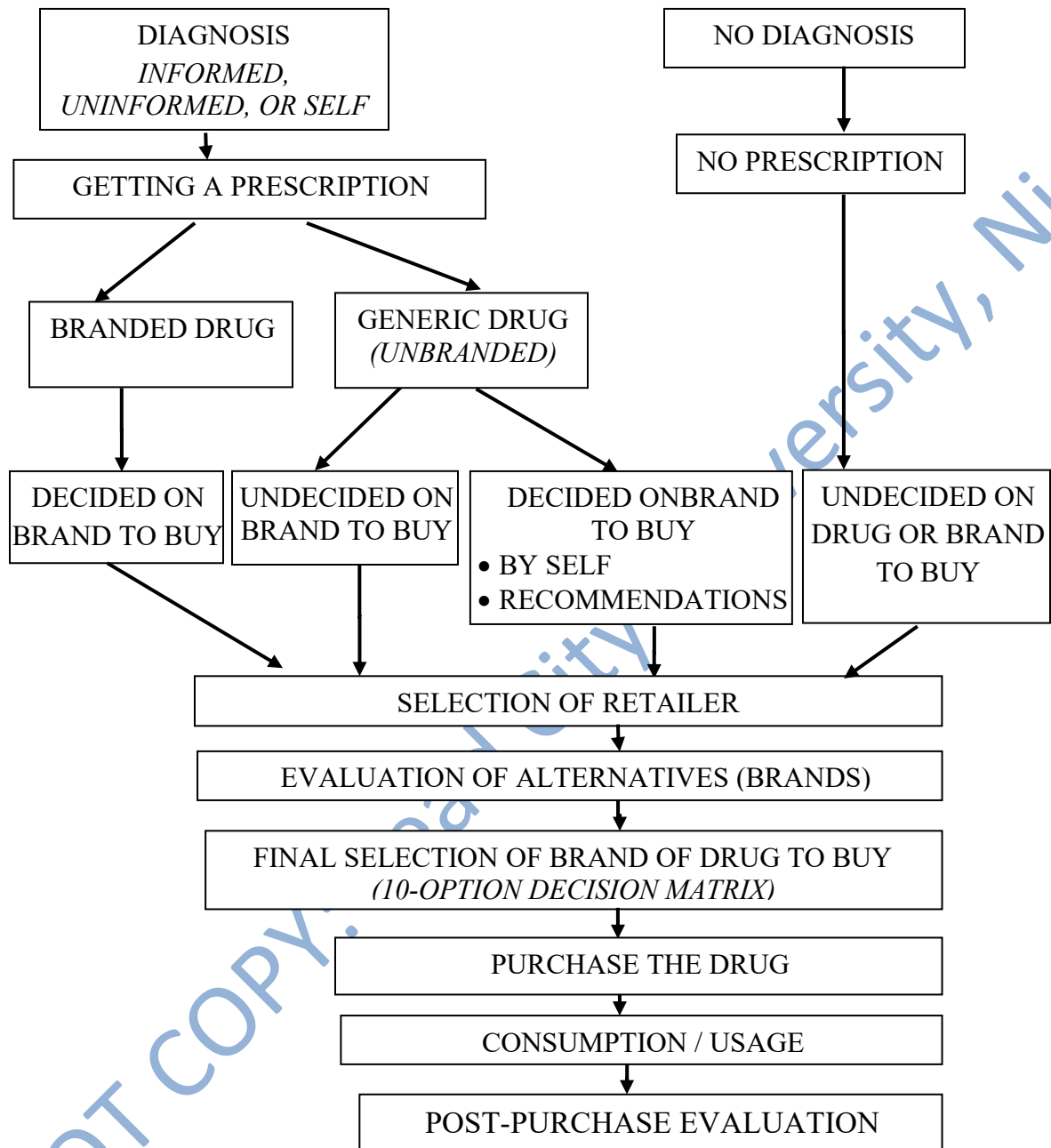


Figure 2.6: Consumer Behaviour Model Showing Stages in the Buying Process for Drugs in Nigeria

Source: Reseacher's Abstraction/Conception, (2020)

2.2.5 Types of Buying Behaviour

Buying decisions do not necessarily always follow the sequential steps in decision making in the typical buying process. Consumers make purchase decisions with varying degrees of effort and time devoted to evaluating alternatives before making a choice.

Extended Problem Solving involves devoting considerable time and effort to evaluate alternatives especially when the purchase decision involves a lot of risk and uncertainty.

For example, the financial risk associated with buying an expensive product or physical risks related to health and safety or even social acceptability risks.

Also extended problem solving purchase decisions are common when buying to satisfy an important need or when consumers have little knowledge about the product or service implying high risks which compel consumers to consult with friends, family and experts and may visit several retailers before making a purchase decision.

Limited Problem Solving involves a moderate amount of time and effort especially when consumers have had some prior experience with the product or service and their risks are moderate, thus relying more on personal knowledge than on external information. The majority of customer decisions involve limited problem solving. Impulse buying, buying decision made on the spot on sighting a product, is one common type of limited problem solving which retailers often encourage by using prominent point-of-purchase (POP) or point-of-sale (POS) displays to attract customers' attention.

Habitual Decision Making involves little or no conscious effort, typically used when decisions aren't very important and involve products they have bought in the past, driven by brand and retailer loyalty.

However, buying behaviour has been presented by other authors as four types:⁶

- **Complex Buying Behaviour** in “situations characterized by high consumer involvement in a purchase and significant perceived differences among brands”¹¹⁷
- **Dissonance – Reducing Buying Behaviour** in “situations characterized by high involvement but few perceived differences among brands which may make consumers respond primarily to a good price or purchase convenience”.⁶ After-sale discomfort, post-purchase dissonance may occur when the consumer notices certain shortcomings of the purchased brand or hears favourable things about the brands not purchased.
- **Habitual Buying Behaviour** in “situations characterized by low consumer involvement and few significant perceived brand differences”.⁶ Repeated purchase of the same brand is not driven by strong brand loyalty but by habit. This is typical with low-cost, frequently purchased products.
- **Variety-Seeking Buying Behaviour** in “situations characterized by low consumer involvement but significant perceived brand differences”.⁶ In such situations, brand switching occurs for the sake of variety rather than because of dissatisfaction.¹²

2.2.6 Consumer Buying Behaviour and Purchase of Branded Drugs

In an ideal healthcare delivery environment, consumer behaviour when buying drugs falls into three broad categories:⁶⁸ (a) buying drugs strictly as prescribed by the doctor for all categories of medicines or (b) buying medicines as recommended by pharmacists while dispensing prescriptions or (c) buying medicines off-the-counter (OTC) by the independent decision of the purchaser with or without the involvement of the pharmacist or the staff of the drug store. Hence in buying prescription drugs, the burden of the complexity of the deciding what to buy should be with the doctor⁷² and what to dispense

or sell, with the pharmacists. But with OTC medicines, the consumer is free to gravitate between limited problem solving buying decision behaviour and habitual buying behaviour. Variety seeking buying behaviour is not common when buying drugs generally, but may happen for the sake of taste or convenience of different dosage forms of the medicines in the same product category.

In relation to purchase of drugs especially branded drugs in the Nigerian environment where there is a high prevalence of self-medication and poorly-regulated drug distribution and retailing, the tendency is for the typical Nigerian drug purchaser/consumer to gravitate from the extended problem solving for first time medical emergency needs (consulting healthcare experts and professionals), to limited problem solving for repeat purchases by self-recommendation and ultimately to the habitual buying behaviour for both prescription and OTC drugs, the bane of self-medication and drug abuse in Nigeria.

2.2.7 Uniqueness of Consumer Behaviour in Pharmaceutical Marketing

National laws regulate where you can offer drugs for sale, who can, and where you can dispense drugs to consumers, promotional messages and channels. Medicinal products are generally not for pleasure-consumption like fast-moving consumer goods. Also unique is the factor of a vital third party influence, the “prescribers”, in shaping drug choice, consumption, usage and purchase – the key drivers of product/brand success, growth, profitability and corporate strength for survival in an increasingly competitive environment. There are two distinct classifications of drugs, one that cannot be bought by consumers except with a prescription by medical doctors and the other group of drugs,

off-the-counter (OTC) drugs that can be purchased freely by consumers without a prescription just like fast-moving consumer goods.

Understanding consumer behaviour in pharmaceutical marketing is more challenging than for general consumer goods because the primary target audience for drugs marketing is not the end user but the influencer i.e the doctor and healthcare professionals who generate prescriptions.⁷³ This is the norm in well-structured and controlled health care delivery systems. Pharmacists constitute a secondary category of influencers as they can switch doctors' prescription between equivalent drugs and brands. In under-developed healthcare delivery systems, like in Nigeria, even pharmacists, nurses, midwives, and laboratory scientists can assume the role of prescribers. Hence, these other categories of healthcare professionals along with doctors constitute the influential and influencing factors in determining consumer purchase behaviour for both prescription and non-prescription drugs in less-developed economies with weak healthcare delivery systems. Even the success of direct-to-consumer advertising (DTCA) which by law is permitted for OTC drugs is determined by and rests on a solid foundation of increasing prescriptions/advice by these healthcare professionals.

2.2.8 Factors Influencing Consumer Purchase Behavior for OTC Drugs

Studies have revealed five factors that play dominant roles in the purchase of OTC pharmaceutical products: influencers, reliability, awareness, corporate image and promotion.^{74,75,76,77} Medicinal factors will include therapeutic value in terms of effectiveness, quick on-set of action, safety, toxicity amongst others, while aesthetics may relate to dosage form presentations and routes of administration, packaging, even taste, colour, size and convenience of unit dosage. Even price, the cost of purchase is

assuming important consideration in the purchase behavior of low-income consumers especially in poor countries.^{78,79} Prices, Promotions and Product availability (place) have been found to impact positively on consumer perception and loyalty to OTC medicines hence are considered major influencing factors of consumer behavior toward OTC medicines⁶⁰

Choosing a brand of drug to buy is a discerning process that evaluates need, and available information about coping with the health challenge, and picking one from the array of alternative brands at the point- of- purchase^{80,81,82,83}

In summary the following parameters are considered while purchasing OTC pharmaceuticals- Direct-to-Consumer-Advertising, brand name, doctor's advice, testimonials from users, friends' advice, safety to use, quality, ethical considerations, authenticity, brand ambassador, product information, previous experience, corporate image, price, packaging, availability, colour, flavours, size, taste, shape, ingredients, quick onset, and information on labels^{84,85,86,87}

According to the Health Belief Model (HBM) the following factors also influence purchase intention for OTC drugs perceived susceptibility, perceived seriousness, perceived benefits, barrier to taking action, cues to action, influence of word-of-mouth (WOM) and self-efficacy⁷⁵

2.2.9 Factors Influencing Consumer Purchase Behavior for Prescription Drugs

However, for ethical prescription drugs, the key parameters for their purchase should be doctor's advice after proper diagnosis of the health challenge, and deciding on the best therapeutic approach and medication.^{88,89} The pharmacist's advice comes second especially where the physician has prescribed a generic drug name and the pharmacist

dispensing or selling the product will be expected to apply his/her professional discretion to recommend an appropriate brand of the prescription drug to the consumer. The key parameters that the pharmacist will consider are quality, safety, quick onset of action, ethical considerations, authenticity, corporate image, price that is affordable to the economic class of the consumer and product availability. In environments with poorly-controlled drug distribution systems, poor healthcare delivery systems and high prevalence of self-medication, consumers purchase behaviour and brand choice of even prescription drugs is largely based on testimonials from users, friends' advice, previous personal experience, price, corporate image, advertisements and pharmacist's advice when they consider it still useful before making their final choice of the prescription drug to buy.⁹⁰

2.2.10 Consumer Behaviour at the Point-Of-Purchase

Essentially, POP/POS activities trigger impulsive consumption that leads to buying not only what is needed but what shoppers are motivated to choose.³¹

Perception is acknowledged as one of the key drivers of consumer behavior.^{91,92} It is the process of receiving, organizing and interpreting stimuli received from In-Store marketing activities.⁵⁹ Purchasers are attracted by what they see in POP promotions and product placement which when assimilated will influence the customers buying decision process^{41,93}

Previous studies measuring the perception of the five human senses revealed the relative perception in percentages as follows: “.....1% by taste; 1.5% by touch; 3.5% by smell; 11% by hearing and 83% by sight”.

2.2.11 POP Promotions Stimuli and Impulse Buying Consumer Behaviour

Generally, impulse buying behavior is a positive response to various external stimuli within the retail store especially sales promotions and in-store communication through various media at the point of purchase or at the point of sale. Pure impulse buying (also known as classical impulse buying) refers to an unplanned purchase, because of the desire to escape monotony or to experience novelty, after being prompted by stimuli at the POP/POS. The consumer feels a strong emotional desire to buy something immediately, even though the consumer may not have been looking for the specific product. However, when there already exists a need for the product and a trigger such as a sales promotion, suddenly reminds the consumer that s/he needs a product and the influence is strong enough to lead to immediate purchase, that is reminder impulsive buying.

Impulse buying is an unplanned consumer purchase decision taking at the point-of-purchase which can manifest in either of two ways - brand switching and brand substitution. Brand switching occurs when consumers switch from brand A to B in response to the stimulus received from an in-store promotion; while "brand substitution refers to the degree of likelihood that the consumer will purchase another brand if their preferred brand is not available".²²

However, when brand loyalty is strong and the urge to substitute is low or nonexistent, a brand loyal customer will leave the store without making a purchase if their preferred brand is not available. Sales promotion is often used as a means of encouraging brand – switching and breaking existing loyalty when introducing new products into the market.

It is well established in marketing literature that exposure to in-store shopping environment and various types of promotion stimuli have strong powers to boost impulse purchases, with each of the promotions producing different kinds of stimuli

The importance of point-of-purchase promotions is highlighted by the fact that 70% of retail purchases are unplanned and are influenced by the factors present within the retail environment itself.²³ Other studies have observed that POP and other retail store environment stimuli prompt impulse purchase.²³

POP is used to promote instant/impulse purchase of a product on display. Six important factors that lead to impulse buying have been identified: In-store promotions, ambience, support at POP, convenience, displays and visual communications.

However, for drugs, impulse buying behavior if at all, inclines more to OTC non-prescription medicines than ethical prescription drugs because drugs generally are not items for pleasure consumption and their purchase decision-making is consequent upon rational, problem-solving evaluation, recommendations/prescriptions.

2.2.12 Branding

A. Concept of Branding

A brand is a “name, term, sign, symbol or design or a combination of these, intended to identify the goods or services of one seller or group of sellers and to differentiate them from those of competitors;” “a name that will register the product in the consumer’s mind as a set of tangible and intangible benefits”^{6,95,96}

American Marketing Association defined “brand” as “a name, term, design, symbol or any other feature that identifies one seller’s goods or services as distinct from those of other sellers”. The legal term for brand is trademark. “A brand may identify one item or a family of items or all items that it sells. If used for a whole firm as a whole, the preferred term is trade name”. Component parts of a brand are brand name, logo, design or packaging, but its central concept is brand identity not brand image.

A brand has also been viewed as the personality of a product, product group or organization, which evolves from consumers' perceptions of tangible and non-tangible characteristics.⁹⁷ "Brands represent consumers' perceptions and feelings about a product and its performances- everything that the product or the service means to the customer. In the final analysis, brands exist in the heads of consumers".⁹⁷

Branding distinguishes products amongst competition which can be a name, symbol or design or combination thereof that identifies a seller's products and differentiates them from competitor's products.⁹⁷

Brands are enduring powerful assets that must be carefully developed and managed, especially with regard to the following notable components of the concept of branding: (a) brand awareness, (b) perceived quality, (c) brand association, (d) brand loyalty, (e) brand equity, (f) brand image, (g) brand meaning, (h) brand attitude, (i) brand preference, (j) brand knowledge, (k) brand trust, (l) brand value chain, (m) brand strength, and (n) brand identity

B. Benefits of Branding

Apart from the most important purpose of product identification" other possible benefits of branding include the following attributes:⁹⁷

- Improved perceptions of product performance;
- Increased consumer loyalty (repeat sales and new product sales);
- Less vulnerability to competitive marketing actions; and marketing crises;
- Larger margins;
- Elastic customer response to price changing;

- Greater trade and intermediary cooperation and support;
- Increased marketing communication effectiveness;
- Additional licensing and brand extension opportunities.⁹⁵

C. The Power of Branding

A powerful brand creates vast opportunity for global marketing, and can also influence behavior and attitudes.⁹⁵

Strong brands enhance the financial value of companies; can have positive effects on consumer perceptions and preferences; constitute effective barrier to competition especially new entrants; good defense against fierce price competition; provide opportunities for higher profits by attracting premium prices, easier distribution, economies of scale and better leverage in bargaining with retailers on discounts; provide the foundation for leveraging positive perceptions and goodwill from the core brand to brand extensions; provide quality certification, which can aid decision-making; builds trusts in consumers, to deliver on its brand promises.

In summary, brand recognition, brand preference, brand loyalty and increase in market share for the branded product are the main aims of branding.⁹⁵ Consumer purchase decision can be significantly influenced especially in the area of product identification, selection, positioning and product differentiation⁹⁹

D. Branding in Pharmaceutical Marketing

Branding of drugs apart from differentiation and distinguishing a brand amongst competitors creates more value for a drug and beyond the generic benefit, generates a competitive advantage, enable prescription loyalty and enable value creation for the brand¹⁷³. Four major groupings of pharmaceutical products include patented products, generic, branded generic and over-the-counter (OTC).¹⁰⁰

Branding in the pharmaceutical industry aims to create product distinctive identity, distinctive value offer, creates loyalty, brand image, brand awareness, building trust, all leading to the generation of competitive advantage.^{101,102,103,104,105}

Branding of drugs promotes the creation of brand awareness and helps to establish trust between the brand and its consumers, which provides a strong leverage for sustained patronage and brand loyalty.^{106,99,95}

Drug companies strive to cultivate and retain these dual corps of loyal prescribers and loyal consumers/ purchasers; who can identify, differentiate and recall positive perceptions about their preferred brand (s) and is a major indicator of a long- term financial performances of companies'.¹⁰⁷ The main advantages of brand loyalty include greater sales revenue, a substantial entry barrier to competitors, stronger company's ability to respond to competitive threats and lower consumer price sensitivity.

Brand loyalty for drugs is a derivative of both functional benefits and emotional attachment with the consumers which can be attained via a sustained campaign.

Trust, an emotional value is built slowly, once gained is a major contributor to brand loyalty and brand building process.

2.2.13 Promotion Strategy in Pharmaceutical Marketing

A. Basic Drug Marketing Mix

The basic marketing mix for consumer-product marketing also applies to the marketing of drugs particularly OTC drugs viz: product, price, promotion and place (distribution) often referred to as the four P's. Drug marketing companies develop an integrated marketing mix strategy towards building and enhancing brand equity and resultant

competitive advantage which translates to preferential patronage of their brands by prescribers and consumers at the points of purchase.¹⁰⁸

B. Goals of Communication in Marketing

Effective communication aims to inform, persuade and remind target consumers, ultimately to secure a favourable purchase decision for a brand, which is achieved through consistent and intense delivery of an appropriate message content through appropriate media and time.

Communication in marketing seeks to achieve four basic goals:

- *Cognitive goals* (such as clarifying consumers' needs, creating brand awareness or increasing the amount of product knowledge);
- *Affective goals* (oriented to creating brand or company image, and developing consumer preferences);
- *Behavioural goals* (stimulating consumers to seek information, try the product or repeat purchase; and
- *Corporate goals* (corporate image, corporate relations, or the reputation of the company among the target public, etc)

Informing, persuading and reminding are the three essential goals of marketing communication.¹⁰⁹

C. Basic Goals of Promotion

The basic role of promotion is to convince consumers that the promoted brand will meet the basic need of consumers and deliver better value than competing brands in the same product category.¹⁰⁸ The persuasive power of promotion can stimulate interest, convert existing need into want or a purchase action, based on real and perceived competitive advantages.

“The ultimate goal of any promotion is to get someone to buy a good or service.”¹⁸⁹

Traditional OTC drug advertising and even direct-to-consumer (DTC) ads for ethical prescription drugs are focused on getting a patient to ask for a drug- not ‘a drug manufacturer’.⁷⁴ Advertising unconsciously induce us to imbibe the notion that it is normal to seek remedies to ailments.^{110,67}

Promotions aim to achieve the following marketing benefits for a brand - brand awareness, positive brand image, growing sales, brand loyalty and competitive brand equity.¹¹¹

D. Imperative for Intergrated Marketing Communication in Drug Marketing

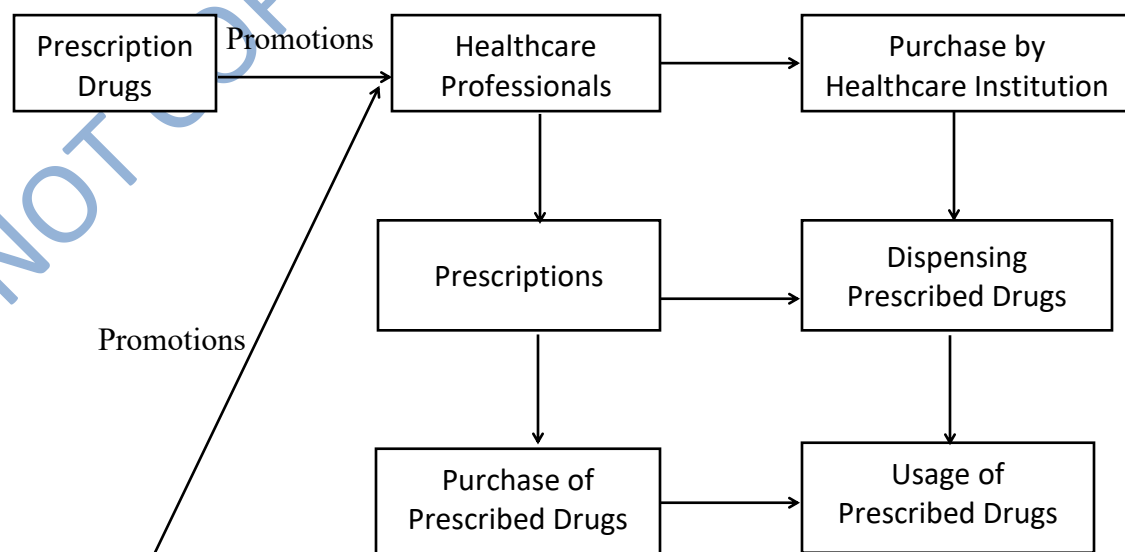
The primary goal of Integrated Marketing Communication (IMC) in pharmaceutical marketing is to ensure consistent and continuous refined message to deliver a consistent brand image to customers at every contact.³⁹

Integrated Marketing Communication (IMC) conceptually, involves a conscious effort by the marketer to achieve maximum impact and maximum return-on-investment from promotion mix expenditures by developing and delivering a range of comprehensive and consistent messages to the target audience across all the communication channels used.¹¹²

Integrated Marketing Communication strategy is the logical approach eliminating the risks of conflicting messages from each element in the promotion mix, which is being handled by different parts of a company, which could result in confusion and blurring of perceptions of company images, brand positions and customer relationships. Integrated Marketing Communication promotes consistency and clarity of messages at every point of consumer contact as well as timing of the execution of the various elements of the promotion mix to achieve synergy and complementarity.¹¹³

E. Outcomes of Promotion Investments in Drug Marketing

Promotion investments in drug marketing aim to achieve the following basic goals: (a) Prescription by a corps of brand-loyal healthcare professionals (b). Purchase/stocking by pharmacy departments of healthcare delivery institutions (c). Purchase/stocking by drug wholesalers and retailers (d). Dispensing drug prescriptions to patients/consumers (e) Recommendation of brands to buy by staff of drug retailers (f). Independent purchases by consumers/purchasers.



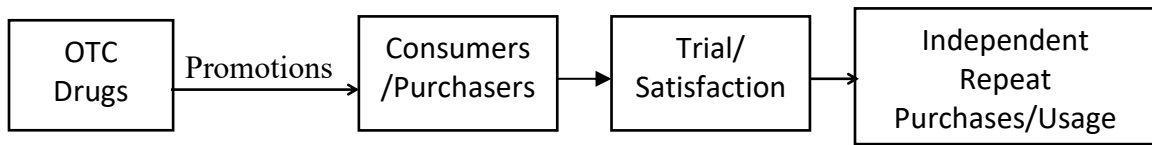


Figure 2.7: Outcomes of Promotion Investments in Drug Marketing

Source: Reseacher's Abstraction/Conception (2020)

2.2.14. The Concept of Sales Promotion

Sales promotion, a marketing communication activity that aims to promote a purchase, usage or trial of a particular brand through the offer of incentives, benefits and information that improve consumers' brand knowledge and make the brand stand out amongst competitors.¹¹⁴

Sales promotion consists of short-term incentives to encourage purchase or sales of a product or service, offering reasons to buy now, whereas advertising offers only reasons to buy.⁵² Studies have shown that sales promotions have a significant impact on the consumer's decision making process.¹¹⁵ Sales promotions provide both utilitarian and hedonic benefits to the purchaser/consumer. Both utilitarian and hedonic benefits (pleasant, positive feelings derived from enjoyment, fun, pleasure) impact positively on the four components of brand equity to varying degrees. Studies have revealed that utilitarian benefits of sales promotion are more effective to generate and support brand equity compared to hedonic benefits of sales promotion.¹¹⁶ Hence, marketers should give serious consideration to incorporating tangible value-adding offers in planning of sales

promotion campaigns (e.g. money saving, quality upgrades, innovative packaging and dosage forms/dispensers, convenience, etc.). Utilitarian benefits have the highest impact on brand loyalty because they attract consumers, provoke consumer to purchase a specific brand, or make trial use, or persuade them for repeat purchase. Persuasion due to utilitarian benefits results in repeat purchase and repeat purchase in turn generates brand loyalty. Some sales promotion tools like discount, gift, bonus, etc., are effective in enhancing utility, which is evaluated by the consumer as enhancement in perceived value, which directs them towards brand loyalty. There are four varieties of sales promotions:¹¹⁷

- Consumer promotions, when targeted toward the final buyer (consumer pull)
- Trade promotions, when targeted toward retailers and wholesalers' (distribution push)
- Business promotions, when targeted at business customers
- Sales force promotions, when targeted at members of the sales force.

2.2.15 Prescription Drugs Sales Promotion Mix

The basic promotion mix for marketing of ethical (prescription) drugs is unique from the promotion mix for OTC drugs. Both contain strong elements of sales promotion, even though the primary target audiences of sales promotion goals, and the content of each type of sales promotion are uniquely different.

Sales promotion in ethical drugs marketing is directly targeted at healthcare professionals in healthcare delivery institutions especially the prescribers and pharmacists involved in distribution, wholesale and retail business.¹¹⁸ They are mostly deployed as part of a long-term, brand building strategy even though they may yield some short-term tactical benefits. The chief goal of deployment of sale promotion in ethical drug marketing is to generate a large and growing pool of loyal prescribers; increase their confidence to

prescribe; increase volume of prescriptions; as well as encouraging purchase/stocking by the pharmacy units of healthcare delivery institutions and other stakeholders in the drug distribution chain. Sales promotion techniques used in ethical drug promotion are mostly emotional and rational appeals including:

1. Clinic- level displays
2. Point-of- purchase displays - at distributors', wholesale and retail establishments
3. Product detailing (personal selling) plus education materials
4. Sample distribution
5. Promotional merchandise (branded gifts) distribution
6. Product presentation-at professional group events/seminars/meetings
7. Advertisement in Healthcare Professional Group Journals and Publications
8. Clinical Trials
9. Product Launch – to healthcare professional groups
10. Sponsorship of research and publication of results in Specialist Journals
11. Sponsoring educational events.
12. Sponsorship to conferences and conventions of healthcare professional groups
13. Sponsorship of events at conferences and conventions of healthcare professionals
14. Merchandising/POP displays at conferences, conventions and events of healthcare professional groups.
15. Disease awareness campaigns.
16. Direct-to-Consumer Advertising of ethical drugs, where permitted
17. Internet and Web page promotions.
18. Public Relations.

19. Sales Force Promotions

In essence, sales promotion complements personal selling, the most powerful element of the drug promotion mix for marketing ethical drugs to doctors and healthcare professionals.

2.2.16 OTC Drugs Sales Promotion Mix

Sales promotion of OTC drugs is directed primarily at the consumers/purchasers similar to sales promotion of fast-moving consumer goods, even though some of the sales promotion techniques of ethical drugs sales promotion to healthcare professionals may be valuable for OTC drugs too. Sales promotion of OTC drugs is most effective when used as a complement to advertising. In OTC drugs marketing, sales promotion can be deployed in three variants.¹¹⁹ (1) Consumer/Purchaser (pull strategy) (2) Trade (push strategy) and (3) Sales force (focused selling).

Incentives when offered in consumer sales promotion for OTC drugs are essentially non-monetary, while trade and sales force sales promoting are mostly monetary and non-monetary based, to promote quick or more purchase by wholesalers/retailers and product sale by the sales force in larger quantities

The pull strategy aims to attract consumers'/purchasers attention, create brand awareness develop strong positive associations, encourage inclusion in the consideration set for purchase, now (impulse buying) or sooner.

The push strategy is to encourage all stakeholders in the drug distribution chain to stock (buy) the brand being promoted in larger quantities. Focus-selling strategy aims to encourage sales force to dedicate more focus, time, energy and resources on the brand

being promoted to achieve larger purchases by each stakeholder in the drug distribution chain at the clinic and commercial levels.

2.2.17 Digital Pharmaceutical Marketing as Sales Promotion Platform

Revolutionary innovations in information and communication technology especially the internet and increasing varieties of devices and information platforms have opened up new opportunities for easy access to information, interactivity between stakeholders-manufacturers, health professionals, patients/consumers and purchasers.^{119,120,121,100,122,123,} This development is empowering consumers of drugs to gravitate more towards self-medication, especially OTC medicines.^{124,125} These technological innovations have made it an imperative for pharmaceutical companies to invest more in social media and the internet as key components of their Integrated Marketing Communication (IMC) strategy for their brands.^{126,127,128,129}

Internet-Based drugs promotion include, Corporate Websites, Corporate Blogs, Social Network Webs (like Facebook, Youtube, Instragram, Twitters, LinkedIn Pintrest, My Space, Google +), Electronic Detailing, Interactive Websites, E-mail Prompts and Viral Marketing Campaigns, E- Sampling, etc.^{130,131,132}

2.2.18 Consumer Promotions

Consumer promotions objectives include short-term customer buying or boost customer brand engagement to achieve any of the following – fast sales boost, encourage trial, encourage repeat purchases, stimulate purchase of larger or more expensive packs.¹³³

A wide range of tools are employed in consumer promotions which are targeted at the final buyer including free samples, coupons, rebates (or cash refund, price packs)

premiums, advertising specialties (promotional products), point-of-purchase promotions, contests, sweep stakes and games, event marketing or event sponsorships. They are grouped into two broad categories – monetary and non-monetary and have different effects on sales, profitability or brand value.^{134,135,136}

Consumer promotions may have more influence on the brand switchers (non-loyal consumers) as compared to loyal customers. Discount-based promotions with short-term goals don't result in or improve brand equity while other studies have suggested that monetary promotions relating to monetary discounts decrease perceived value of the brand. Repeated usage of monetary promotions may have negative influence on brand equity because consumers invariably may develop negative perceptions about the product quality. Cost reduction-based sales promotions encourages brand changing by creating new stimulus for experimenting with new brands.

However, in the long-term, event-based promotions, (non-monetary/non-cost reducing) help to improve brand equity for durable products while other studies have revealed that for industrial goods, non-monetary sales promotions increase brand association as well as increase the perceived value of the brand.

2.2.19 Consumer Promotions in Drug Marketing

Drugs are high-involvement products. Drugs by nature are not items consumed for pleasure like FMCG. Rather, they are purchased as essential remedies for healthcare needs in the short-, medium-, or long-term. Hence, the typical response of consumers/purchasers to sales promotion of drugs is heavily moderated by rationalization of need for the product, the quantity required for the healthcare need, perceived quality of

the brand and economy of the purchase. Consumers and purchasers of drugs are driven more in pursuit of tangible values of product quality, appropriateness for need, efficiency, safety and reliability of source, rather than economy of purchase. Therefore, the exciting arrays of monetary-based promotions that are popular with FMCG are not favorable options for consumer sales promotion of drugs. For example, stock-pilling is not a typical response of consumers/purchasers to consumer sales promotion of drugs, just as purchase value-increasing promotions such as price discounts and adding more quantity to give the consumer/purchaser the feeling of getting more value for money, may not necessarily excite the consumers/purchasers of drugs.

Moreover, such promotions focusing on price reduction directly or indirectly, have been associated with decline in perceived quality and value of even FMCG that are purchased as pleasure items. A typical consumer/purchaser of drug will be suspect of product quality when confronted with price promotions, especially expiry date, adulteration or faking

Value- adding promotions that do not influence the price or the core product are more ideal for consumer sales promotion in drug marketing such as samples, information brochure, premiums (like branded gift), competitions, demonstrations, point- of – purchase promotion/ display, loyalty programs, event marketing and event sponsorship.

In the long-term, these non-monetary/ non- cost reducing promotions may help to improve brand equity as well as increase the perceived value of the brand when deployed for consumer sales promotions in drug marketing.

In the short-term, they promote brand knowledge through brand awareness and development of favorable brand associations, thoughts, images, attitudes, beliefs,

experiences, perceptions and so on that become linked to the brand in the minds of consumers

However, in the short-term, consumer promotions may stimulate pure impulse buying (an unplanned purchase) or a reminder impulse buying of drugs

2.2.20 The Concept of Point-of-Purchase (POP) Promotion

POP Promotions, a key element of the array of consumer promotion strategies toward achieving sales promotion through building traffic, or creating awareness or as a reminder about a brand of drug or to provide convincing information to buy, or an offer of incentive that will influence the purchase decision of the prospective purchasers of drugs.¹³⁷

POP Promotions, also called Point-of-Sale-Promotions, are deployed at the retail level for strategic and tactical purposes. “Point-of-Purchase (POP) promotions include displays and demonstrations that take place at the point-of-sale”, mostly at retail outlets.¹¹⁷

Point-of-purchase sales promotions tactically exploit the fact that buyers make many purchase decisions within the store. Hence the strategic importance of point-of-purchase promotions and displays within the sales promotion mix and the broader context of promotion mix in marketing strategy for a product or brand. The primary goals of point-of-purchase promotions and displays are to attract attention of the consumer, provide comprehensive information and exert enough influence on the consumer to buy the product being promoted, now or sooner, while the promotion lasts.

2.2.21 The Concept of Point-of-Purchase Advertising

Advertising is considered as both a communication process and marketing tool, and the spectrum of advertising media can be classified as above-the-line (ATL), while other media are classified as below-the-line (BTL). Radio, Television, Newspapers/magazines (print media) and Billboard (out of home-OOH) are above-the-line media, while below-the-line media include Point-of-Purchase Advertising (POP), Event marketing, Direct marketing/data, and Road shows

In another perspective, P-O-P advertising effectively influences consumer behaviour because the point-of-purchase is the place and time where consumers make brand choice decisions and at which all elements of sales (consumer, money and product) come together. That is, consumer willingness, ability to buy and product come together in time and place.

In comparison to the traditional above-the-line (ATL) media/marketing communication methods (TV, Radio, OOH, Press) which deliver results in the long-term (the “pull” experience), POP advertising, a below –the-line advertising method, delivers instant and measurable results, particularly taking the product off the shelf.

It is important to note that POP is classified under sales promotions in some literatures while in most others it is classified under advertising and the increasing phenomenon of self-service retailing makes customers resort to eye-catching information displays to get information that will empower them to make independent purchase decisions.

2.2.22 Advantages and Disadvantages of POP Advertising

*Advantages of POP Advertising include.*¹³⁸

- 1.Limitless opportunities and flexibility for placements;
- 2.P-O-P is most effective when it is positioned to reach a clearly-defined consumer target

- closest to the time of purchase;
3. Effective in directly affecting sales, brand switching, portfolio purchasing and multi-unit sales;
 4. Provides opportunity for retailers to influence consumers in a competitive environment;
 5. Can persuade shoppers to purchase additional quantities of a product, or to buy related products that are merchandised together.

Disadvantages of POP Advertising include:

1. Limited reach and studies have shown that P-O-P marketing works best when geared toward younger, single, less-affluent shoppers;
2. Product-oriented, as they influence what products consumers may buy, but not where they will buy them, and they are limited in their ability to attract new customers, build traffic, and improve market awareness for retail advertisers;
3. Consumer perception are not always favourable as many consumers report that in-store TV monitors, electronic signs, and in-store broadcasting have little impact on them;
4. Limited targeting- despite its key placement and general reach, place-based advertising such as in-store television delivers limited results and can be prohibitively expensive

2.2.23 Objectives of POP Communication

Point-of-purchase communications have five key objectives.¹³⁹

- a. To capture the attention of the consumers in order to differentiate the product
- b. To remind consumers of prior and on-going marketing communications stimuli
- c. To inform consumers about the product attributes
- d. To create image of positive associations and

e. To persuade the consumer to make an impulse purchase

2.2.24 Growth of POP Promotions

Point-of-purchase promotion has assumed considerable importance within the sales promotion mix because empirical studies have revealed that 70% to 80% of all retail purchase decisions are made while the consumer is in the store.¹³⁹

Globally, marketers are devoting increasing attention to point-of-purchase promotions which has led to an increasing avalanche of p-o-p promotions flowing to retail stores, each company and its products competing for limited space and prime locations in front and inside the retail stores. This situation has led to cluttering of p-o-p promotional materials in different varieties which is a growing challenge retailers must contend with especially with regards to customer shopping convenience and the general ambience of retail stores. To maintain some control, big retailers with high-bargaining power now determine quality standards and placement controls in their retail outlets, which marketers must comply with if their p-o-p promotions are to be accepted in their stores. Rigorous scrutiny precedes the placement of any display, guided by clean-store policies and the necessity to reduce clutter of the aisles.¹³⁹ Such retailer-marketer relationship gets the p-o-p displays into the retail store and ensure they are effectively set up to optimize their benefits.¹³⁹

2.2.25 Utility Value of POP Promotions

The Point-of-Purchase provides a unique opportunity to interact with purchasers, connecting with the consumer at the point-of-purchase is an interactive platform, entice

new customers, encourage brand switching in favour of the promoted brand and maintain brand loyalty among existing customers.

Point-of-purchase promotions has long-term benefits in building brand awareness just as POP displays aid product search, product choice, making the shopping experience more favourable and reminding consumers¹³⁹

Point-of-purchase displays and promotions are becoming more valuable in aiding consumer choice as they attract the attention of consumers majorities of who are undecided on product or brand to buy by the time they enter a store^{139,30}

2.2.26 Point-of-Purchase (POP) Promotion Strategies in Drug Marketing

Point-of-purchase promotion strategies constitute an important component of sales promotion activities directed at the consumer/buying public, especially to stimulate sales of specific brands of drugs or unique product offerings in any product category.

In less-developed economies, characterized by poor regulatory, monitoring and enforcement institutions, it would not be a surprise to see traces of POP promotions for both ethical and OTC drugs at the drug retail stores, a very common trend in Nigeria for example. These point-of-purchase promotions deployed by drug marketing companies are aimed at the pharmacists, retail store staff and consumers/purchasers of drugs alike. They serve the main purpose of creating awareness for a particular brand in a product category or as a reminder about the drug and its value, or to provide convincing information or an offer of incentive that will influence brand patronage by prospective purchasers/consumers of drugs. These POP promotions are often displayed at the front of the drug retail stores and inside the stores.

Investment in POP promotions by drug marketers is increasing because they are relatively cheaper, they last long in the drug retail stores and provide an enduring platform to keep engaging and reminding the three categories of stakeholders at the drug retail store level – the pharmacists, the store staff and the patronizing purchasers/consumers of drugs.

POP promotions strategies are deployed by drug marketers as a key component of the sales promotion mix when launching new brands/products and as low-budget promotions for old and maturing products alike. POP promotions in drug marketing aim at promoting the drug's brand name, the relevant indications for its use, unique dosage form presentation, unique formulation, efficiency, speed of action, duration of action and safety of the brand of drug being promoted.

Non-monetary promotions have more positive long-term benefits of building strong brands based on product attributes and value-added benefits associated with the brand. Monetary promotions on the other hand are not so commonly used in marketing of drugs but more commonly used in marketing of fast-moving consumer goods. Monetary promotions can produce upsurge in sales revenue for a brand in the short-term while in the long term may produce negative brand associations with regards to quality.¹⁴⁰

Drugs by their nature are only consumed as remedies to ailments and are expected to be used as prescribed for a time frame. Drugs are not consumer goods that you purchase at will and consume as food or pleasure items. Hence monetary promotions like price discounts, at the point-of-purchase immediately attracts suspicion of the product quality especially the expiry date of the batch displayed on the shelves of the drug retail store.

Consumer promotions at the point-of-purchase like buy-one-get-one-free, extra

grammage, saver packs are not so commonly used for marketing drugs, not even consumer OTC medicines, probably because drugs are not items for pleasure consumption.

2.2.27 POP Promotions and Stakeholders in Drug Marketing

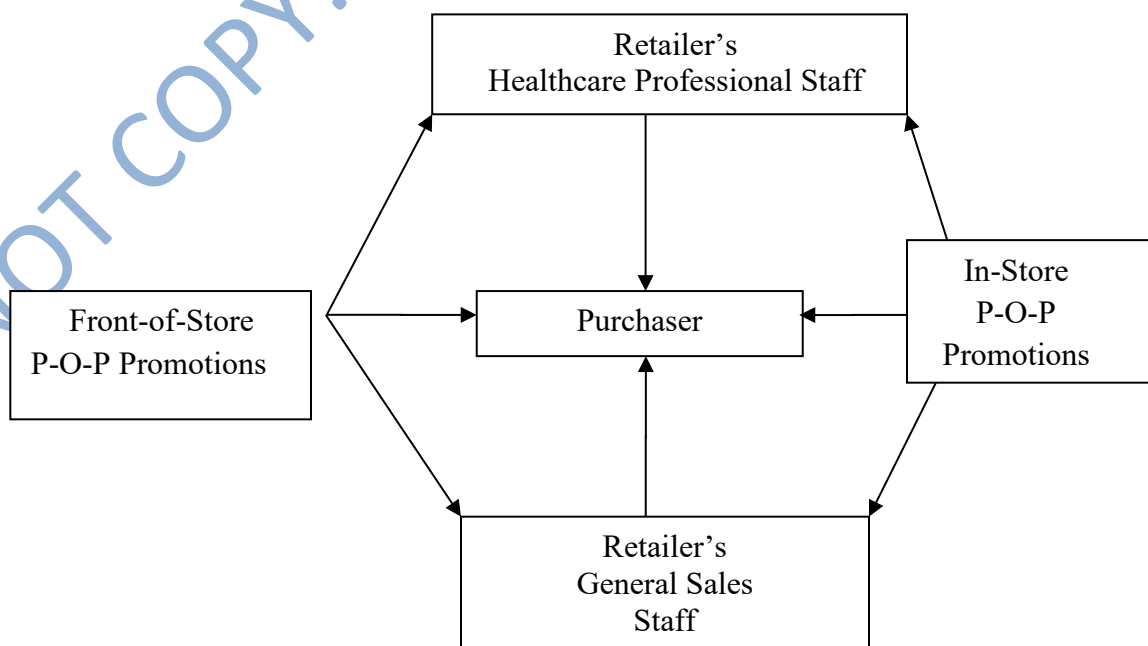


Figure 2.8: Point-Of-Purchase Promotion and Stakeholders at Drug Retail Outlets

Source: Researcher's Abstraction/Conception (2020)

2.2.28 Point-of-Purchase Promotions' Impact on Patronage of Branded Drugs

Point-of-purchase promotion strategies impact on choice of brand of drug to buy basically at three levels of interaction with the purchaser/consumer - (a) prior to need recognition (b) prior to approaching a drug retailer (c) upon approaching and entering a retail drug store.

Prior to need recognition, the typical consumer/prospective purchaser of branded drugs are routinely exposed to a barrage of point-of-sale promotions in the course of regular visits to drug retail outlets. Thus, consciously or unconsciously, purchasers assimilate salient information about different brands of drugs on display. The exposure creates both new brand awareness and reminds to reinforce brand awareness and familiarity.

When the need recognition is stimulated the first and logical step is to recall all relevant information on possible drug solutions and specific brands to be considered for evaluation (the evoked set or consideration set). Also, because of the high prevalence of self-medication and uncontrolled access to drugs in some environments like Nigeria, some subjects may have indulged in self-diagnosis, self-prescription, purchase and usage of some brands of drugs, with satisfactory outcomes that induce brand loyalty. Hence the possibility that some subjects may be "decided" on the brand of drug to buy even before approaching a retailer, when they are in possession of a prescription for either branded drugs or generics. Therefore, POP promotions tend to have a stronger impact on purchasers/consumers who are undecided on the brand of drug to buy before approaching

a drug retail store. However, POP promotions may prompt brand switching and brand substitution amongst those who may have decided on which brand of drug to buy before approaching a drug retail store.

2.2.29 Possible Outcomes of POP Promotion on Choice of Branded Drugs

For both the customer/purchaser that has “decided” or is “undecided” on the brand of drug to buy before approaching a drug retail store, further exposure to and consideration of these retail-level, decision-influencing factors once the subject enters the premises of the retail store, could impact on brand choice in any of the following ways:

1. First-time brand name awareness
2. Awareness of alternative brand (s) of drug in the same product category, as the pre-determined brand of choice, before entering the retail store
3. Awareness of alternative brand(s), in the same product category as a prescribed brand of drug or for a generic drug prescription
4. Increase in familiarity with specific brand names.
5. A reminder of brand names previously known
6. Reinforcement of brand loyalty to pre-determined brand choice
7. Strong persuasion to buy a specific brand name for the first time
8. Increasing confidence to accept brand name recommended by retailer’s sales staff
9. Accepting specific brand recommendation by the healthcare professional staff at the drug retail store
10. Accepting specific brand recommendation by the general sales staff of the retailer
11. Etc.

2.2.30 POP Promotion Tools and Techniques

Modern in-store advertising methods that reinforce the brand through promotional effect include (1) Centrally managing digital signage for significant savings, (2) Increasing sales with consumer-relevant information, (3) Interactive communication channel, (4) Maximizing information kiosks for internal and external use (5) Product and price comparing tools, (6) POP display, (7) Store planning and layout, (8) Audio-video broadcasts, (9) In-store coupons and sampling, (10) Packaging in itself¹⁴¹

Atmospheric, entertaining and experiential effect can be achieved through the employment of the following techniques- Background music, In-store displays, friendly and supportive sales assistants, and even, shop congestion, crowding and density

Effective advertising techniques that are commonly used in in-store advertisements include (1) arouse curiosity, (with words, prints, images or visuals) (2) promise a benefit, (3) emotional appeal (4) children (featuring them as role models) (4) celebrity endorsement, (5) consumer intelligence (no exaggeration), and irrelevant information, appealing to the basic sense and culture of different markets

2.2.31 Point-Of-Purchase/In-Store Displays

Point-of-purchase displays are commonly used to attract consumers'/purchasers' attention, usually placed at high traffic strategic locations, in-front and inside retail stores, showcasing the product to gain distinctive prominence and thereby increasing the probability of purchase and alone can promote sales even without a price reduction.

99,139,142,143

Hence POS display is a form of sales promotion in which products are displayed near, next or on a transactional purchase area, providing a promotional and atmospheric

engagement effects.¹⁴⁴ POS displays are most effective when used to display or promote convenience goods and can take many forms, such as: counter displays, floor display, shelf talkers, light boxes, etc.¹⁴⁴ POS displays provide a visual exposure to products that are not on a consumer's top-of-mind and helps make consumers realize that they may need that particular product to solve a problem. Hence, POS displays are used to trigger what marketers refer to as "problem recognition response".¹⁴⁴ "In-store or point-of-purchase (POP), advertising helps trigger memory recall, effectively introduces new products, promotes sale items and educates consumers¹³⁹

Benefits of a creative in-store display include impulse buying potential, customer creative marketing, brand awareness and exposure, pull marketing and competitive edge in store which translates to competitive advantage for the brand.¹⁴⁵

2.2.32 Difference Between Point-of-Sale Display and Point-of-Purchase Display

Point-of-sale and point-of-purchase displays are terminologies often used interchangeable. However, it is important to clarify the several subtle differences between them, even though both aim to encourage impulse buying purchase.¹⁴⁶

Point-of-sale is "where the actual transaction takes place: where goods are scanned, bagged and paid, the physical checkout or cash register, or the online checkout of an e-retailer¹⁴⁶

In summary, point-of-sale displays "promote products at the exact space where purchases are being made, giving a customer information about the product at the exact same place where the transaction of the purchase will be completed.¹⁴⁶

Point-of-purchase refers to the larger area (of the store) surrounding the cash register, where the customer makes the decision to buy an item, where customers are educated

about the benefits of a product, learn about any special promotions going on, and can often view the product in singular units at eye-level on the shelves.¹⁴⁶

A POP display is essentially a cardboard salesman, designed to show off a specific product and often highly customized to include fast facts and encourage customers to make a purchase.¹⁴⁶ They are usually located in high-trafficked areas anywhere throughout the store and can incorporate technology into their selling strategies, just like POS displays.¹⁴⁶

In summary, at the point-of-purchase display, you can only learn about the product and decide whether or not you want to buy it.¹⁴⁶ The real sale is made at the point-of-sale where the transaction takes place.

2.2.33 Impact of Displays

Display designs that are more effective in directing consumers' observational behavior can improve their impact.^{147,99}

Point of Purchase International study suggests that the impact of effective displays on consumer decision making could be fundamental in leveraging sales as more than 1 in 6 selections are made when display promoting a particular brand is present in the retail store; noting further that 13% of eye fixations were made to in-store displays (which is a high number in the field of eye-tracking).¹⁴⁸

Other studies suggest that a visual-stimuli accompanying a price promotion would receive a higher fixation from shoppers and signs with price attract higher fixation count than signs with product information.^{149,150,99} This would suggest that price should be a secondary message in influencing consumer decision making at point of purchase.

2.2.34 Benefits/POP Value Delivery to Stakeholders

The increasing investment in POP advertising provides useful service for all participants in the marketing process such as manufacturers, retailers, wholesalers and consumers. Highlights of POP value delivery to all stakeholders in the marketing chain are summarized as follows:

- Accomplishments for manufacturers include sustaining the company and brand name, reinforcement of brand image that has been built via previous advertisements, enhancement of sales promotion and stimulating impulse buying.
- Retailers: POP advertising enhances retail profit by drawing attention of customers, growing their interest and extending the length of time they spend shopping, and aiding retailers in using available space to the best advantage, which culminates in enhancing retail profit.
- Retailer's Staff: The Superintendent pharmacists, Duty pharmacists, other healthcare professionals and general sales staff at drug retail stores constitute retailer's staff. POP promotion has the greatest influence on them as they are exposed to POP promotion within the store for longer period than even the targeted consumers/purchasers of drugs. As such, the prolonged exposure improves their brand knowledge, helps them to develop favorable attitudes about the brand being promoted, and keeps the brands alive in their memory. That encourages them to recommend the promoted brand to consumers/purchasers more often than unpromoted brands, either as equivalent alternatives to prescribed drugs or as direct prescription/recommendation to the consumer/purchaser who does not possess a prescription before entering the drug retail store.

- The Consumer/Purchaser: POP promotions influence consumers/purchasers of drugs at three basic levels, cognitive, affective and behavioural.¹⁵¹ Each of these categories of influence consists of a chain of distinct influences on the consumer, which eventually leads the consumer/purchaser to make a final choice of brand of drug to buy. Of course, the first critical and rate-determining step at the cognitive level is brand awareness which progresses to development of favorable attitude to the promoted brand to buy, ending with the actual purchase behavior. Also, exposure to POP promotions can provide stimuli strong enough to compel pure impulse buying behavior or reminder impulse buying and even repeat purchases.

POP advertising delivers great value to consumers by delivering useful information, simplifying the shopping process, setting particular brands apart from similar items and simplifying the selection process; as well as informing consumers of new products and brands.

2.2.35 POP Plus Radio Advertising

One interesting dimension to note is that POP promotions can create a synergistic effect when used in conjunction with mass media advertisements and promotions.

The point-of-purchase provides the last opportunity for brand marketers to influence the consumer with their marketing campaigns Radio drives "desire" and is, therefore, the perfect partner for a P-O-P campaign.¹⁵² POPAI, 2014 report concluded that while at-retail advertising generates 6.5% in incremental sales, a greater sales increase comes from adding advertising to promotion programs, as advertising makes a POP promoted three to four more times more successful.¹⁵²

Studies have shown that POP promotions reinforce a brand's advertising message, the increase in sales can average more than 100% compared to advertising alone.

Advantages of Complimenting P-O-P Promotions with Radio Advertising include:

1. Radio provides excellent reach to a wide range of potential customers;
2. Product and Retailer-Oriented, as a combination of Radio and P-O-P advertising can "sell the store" as well as increase average unit sales;
3. Personal connection, as Radio creates an image and awareness for a product consumers see at the point-of-purchase, making POP more effective;
4. Targetable, to highly likely potential prospects, by age, gender, race, income and lifestyle.¹⁵²

2.2.36 Packaging as a Tool of Sales Promotion in Drug Marketing.

In pharmaceutical marketing, packaging is increasingly used as a tool of sales promotion and stimulator of impulse buying behavior at the point-of purchase.^{153,154,155,156,157,158,159}

Packaging enhances product differentiation on the shelf at the point-of-purchase, attracting consumers' attention to particular brand, enhancing product image, influencing consumers' perception and consumers' purchase decision.^{160,161,158,159} The amount of information displayed on the package of a branded drug could have a strong influence on the choice made by purchasers of the drug^{162,66}

2.2.37 The Spectrum of POP Materials

Today, marketers can choose from a wide variety of POP materials which involves different kinds of signs, plaques, banners, checkout units, mobiles, shelf ads, mirrors, mechanical mannequins, posters, lightens, plastic products, full-line merchandisers, different kinds of product displays, in-store radio and TV ads, floor ads, and electronic billboard ads All these can be classified into four categories:

1. *Permanent displays*- intended for use for six months or more. (POPAI convention)
2. *Semi-permanent displays*- lifespan of less than six months but more than two months
3. *Temporary displays*- designed for fewer than two months' usage
4. *In-store media*- include advertising and promotional materials such as in-store radio & TV advertising, shopping cart advertisement, shelf advertisements (called shelf talkers), floor graphics (advertisements placed on store floors), coupon dispensers and other in-store materials

The vendor shop, which is a “store within a store” idea, is the most elaborate POP promotion where a vendor displays exclusively its brands¹⁶³

Probably, the most powerful form of POP is “signage”; it draws attention, promotes sales especially to a new product, or one that’s on sale, as well as seasonal items”¹⁶³. Signage in essence can be thought of as a silent salesperson. It is no surprise that something as simple as POP display can have a great impact as empirical evidence indicates that about 70% of retail purchases aren’t decided until the customer actually is in the store.¹⁶³

2.2.38 Designing POP Displays

The increasing crowding of products on store shelves compels finding innovative ways to make products stand out amongst competitors¹⁶⁴

The brain creates an impression of a product and its packaging based on the following

hierarchy of factors: colour, shape, imagery and words.¹⁶⁴ The hierarchy applies to P.O.P. Display design as well, because they are forms of product packaging and directly tied to a product's primary packaging. Targeting the impression hierarchy in the design process will ultimately increase the value of P.O.P. Display.

Marketers should pre-evaluate several display designs by their target shopper group and eliminating effects arising from production costs. It is expected that the best of the pre-evaluated display design, not the cheapest, would draw more attention to the product on displays, triggering additional impulse purchases and enhancing the promotion's efficacy¹¹⁴

General principles guiding the design of innovative and impactful displays are: (a) design principle 1- *keep it simple* (b) design principle 2- *functionality before fancy* (c) design principle 3- *remember retail store's placement and requirements*.

By incorporating these basic three principles in your design, you will effectively capture the attention of consumers and differentiate your product¹⁶⁴

2.2.39 Responsiveness to POP Feature Ads

Brand-focused consumers are generally more responsive to feature ads at the point-of-purchase than store-focused consumers, especially in low-concentration (low-involvement) categories.^{165,166,167}

Studies suggest that “83% of all households read the physical store flyers while 26% access the digital version through an app or comparison website, and such readership influences where and what they buy”¹⁶⁶

It is important to distinguish between attention and more evaluative measures of recall, consideration and choice, when evaluating responsiveness of consumers to POP displays.

2.2.40 Measuring POP Effectiveness

The performance of POP promotions can be measured by using different ratios including the following:¹⁶⁸

1. *Impact Ratio*- Measuring the number of shoppers who look at the display, making eye contact for a sufficient period.
2. *Engagement Ratio*- The number of customers that look at the display and then interact with the display or product-touching, reading labels, smelling, opening or testing.
3. *Conversion Ratio*- The number of shoppers that look at the display, interact with it and then put the product in the basket to purchase.
4. *Lost Conversion Ratio*- The number of shoppers that have put the product in their basket, but then return the product to the display, and does not make a purchase.

Point-of-Purchase Software that provide real-time measurement and reporting, flexibility and accuracy could be considered as reliable.

2.3 Review of Empirical Studies

2.3.1 Studies Related to Brand Awareness

This study examined the relationship between social media communication and brand knowledge and the mediating role of brand awareness and brand image.¹⁶⁹ A quantitative study analyzing data collected from 200 respondents who were selected by non-probability, convenience sampling technique and data analyzed using SPSS and AMOS (Analysis Movement of Structure)

H1: There is a positive relationship between social media communication and brand knowledge – supported

H2: There is a positive and significant relationship among social media communication and brand image – supported

H3: There is a significant relationship between brand image and brand knowledge – supported

H4: There is a positive and significant association between social media communication and brand awareness– supported

H5: There is a positive relationship between brand awareness and brand knowledge – supported

The results also indicate that brand image and brand awareness are significant mediators between social media communication and brand knowledge. Moreover, positive and significant relationship exist between all the variables

Future research can be adapted for a wider range of industries, larger sample size, quantitative research methodology, and could be carried out in different countries and geographical territories

This study examined the impact of brand loyalty and brand image upon brand equity given the involvement of brand recognition, a component of brand awareness, as a mediator.¹⁷⁰ A quantitative research design, collected data by non-probability convenience sampling technique from a questionnaire administered on 390 respondents using five-point Likert Scale. Multiple analysis including Confirmatory Factor Analysis (CFA) the indices of Goodness of Fit Index (GFI), Adjusted Goodness of Fit Index

(AGFI), Confirmatory Fitness Index (CFI), and Root Mean Square Error of Approximation (RMSEA), suggest that the model provides substantial fitness and suitable for further analysis.

Further goodness measures for Structural Equation Model produced values of GFI, AGFI, CFI, & RMSEA, within acceptable ranges. Psychometric analysis also confirmed both convergent and discriminant validity of the instrument. Data was further analyzed using regression analysis

H1: Brand image is substantially associated with brand equity - supported

H2: Brand loyalty is substantially associated with brand equity - supported

H3: Brand image is substantially associated with brand awareness - supported

H4: Brand loyalty is substantially associated with brand awareness - supported

H5: Brand awareness is substantially associated with brand equity - supported

The results show that brand image has a positive and significant relationship with brand awareness; brand image and brand loyalty have a significant relationship with brand equity; while brand recognition (awareness) is a significant moderating factor between brand equity and brand image as well as brand loyalty.

Further research could examine other service zones, larger sample size, as well as other perspectives of branding such as value, association, trust, and perceived quality

This study sought to explore the effect in-store promotions have on consumer brand awareness and its resultant impact on consumer buying decision making, particularly brand recall in the context of a given specific product category and awareness increasing the probability that the brand will be a member of the consideration set.⁹⁴

RQ1. Will those consumers who paid attention to the in-store promotions remember the brand names promoted?

RQ2. Will the consumers who paid attention to the in-store promotions and know the brand before remember the name of brand being promoted?

RQ3. Will consumers who paid attention to in-store promotions remember the name of the brand without knowing the brand before?

RQ4. Will the consumers whose brand awareness has been affected actually buy the products?

Methodological Approach/Considerations:

Primary data in this study was gathered from 200 randomly selected respondents through the use of photo elicitation, a method used in combination with survey-based interviews in this case. Three different promotional tools were applied on three different product categories and a brand selected under each- (a). Sampling- oliver (Zeta brand), (b). Point-of-Purchase Display- Pasta (Kongsomen brand); (c). Premium Promotions- juice (Kiviks)

H1-In-store promotion attracts consumer attention (S1)

H2- In-store promotions have effect on consumers' brand awareness (S2)

H3- In-store promotions affect consumers' brand recognition (S2a)

H4: In-Store promotios affect consumers' brand recall (S2b)

H5- In-store promotions impact on consumer's buying decisions and brand awareness (S3)

1. All three in-store promotions used in this study proved to be efficient in catching consumers' attention, though at different levels. Statement SI is supported.
2. All three in-store promotions were effective in generating effective brand awareness, though to varying degrees. Its worthy to note that these are all below- the- line advertising not above –the- line advertising. It is not suprising that sampling which attracted the attention of the highest number of the interviewees 88% also produced the largest proportion of the interviewees who remembered the brands name (64%). This would suggest that sampling provided opportunity for the deepest interaction and experience with the brands promoted
3. The significant positive effect of all three in-store promotions on brand awareness support Statement 2a, that in-store promotions affect consumers' brand recognition. Again sampling stimulated the highest level of brand recognition compared to POP Display and Premium Promotion
4. However, the results from the three promotions did not present a valid and acceptable effect to support Statement 2b, that in-store promotion generates consumer brand recall.
5. Statement 3, is supported, as the results from the three promotions indicate positive impact on consumers' buying decisions and brand awareness.

Future research windows include the following:

- i. Evaluating the impact of other varieties of in-store promotions and the same parameters investigated in this study. (ii). Employing other research methods to explore deeper inputs on brand recall and brand recognition. (iii). By using only one brand for the

study, a clearer picture of the effects of these in-store promotions can be obtained, thus eliminating any bias from brand factors.

The study sought to find out the association between buzz marketing techniques and brand performance of pharmaceutical companies in south-south, Nigeria, based on the theoretical foundation of the Uses and Gratification Theory.¹⁷ The theory shows that motivations influence individual behavior intention through attitude

Buzz marketing involves a process in which actions and attitudes are influenced by others, using high entertainment or news through creative development of technology to draw people into talking, sharing and spreading messages about brands to the extent of making such messages to be viewed as fascinating, entertaining and even news worthy.^{170,17} Buzz marketing attract minimal irritation as they are provided with knowledge, guide and ideas.¹⁷¹ Buzz marketing is hinged on verbal exchange marking a buzz around a product or a happening.¹⁷² The creation of brand awareness helps in the promotion on new products and also in the revival of older ones, since it has the power of holding consumers to acknowledge a brand in the midst of other brands.^{173,17}

Ho1: There is no significant association between buzz marketing and brand awareness

Ho2: There is no significant association between buzz marketing and brand preference

Ho3: There is no significant association between buzz marketing and brand reputation

56 out of 60 questionnaire (15 questionnaire to each of the four selected pharmaceutical companies) were returned and adopted for analysis after due tests of validity and reliability of the instrument. Statistical Package for Social Sciences (SPSS Version 22.00)

was employed for analysis and hypotheses tests using Spearman Rank Order Correlation Coefficient

Decision rule adopted is that: a. If the Significant/Probability Value (PV) < 0.05 (Level of Significance) = Reject the null and conclude significant association, b. If the Significant/Probability Value (PV) > 0.05 (Level of Significance) = Accepted the null and conclude insignificant association

Consequently, the Ho1 null hypotheses was rejected, concluding that there is a significant association between Buzz Marketing and Brand Awareness. Similarly, Ho2 was rejected and concludes that there is a significant association between Buzz Marketing and Brand Preference. Also, Ho3 was rejected, hence there is a significant association between Buzz Marketing and Brand Reputation

Further research could examined association between buzz marketing and other elements of the brand equity construct like brand loyalty, brand attitude and brand association

2.3.2 Studies Related to Brand Attitude

This study investigated the perceptions of Nigeria consumers of the differences between foreign imported and locally manufactured pharmaceutical products across three states in South-Eastern Nigeria.¹⁷⁴ Essentially this study is focused on examining the effect of country-of-origin (COO) on purchase behavior. This study was anchored on the theoretical framework of the Halo Model of the Country-of-Origin Effect which proposes a sequential process starting from experience to belief to COO image leading to the development of brand attitude

This study surveyed a wide spectrum of health practitioners such as doctors, pharmacists, nurses, patent medicine dealers as well as consumers of pharmaceutical products in Nigeria, randomly selected. A total of 2,313 health professionals 2,411 consumers responded to the questionnaire and data was analyzed using non-parametric statistical tools. Major findings are, 1. Preference of Nigeria consumers of pharmaceutical products for foreign made products based on perception that they offer superior quality and efficacy over locally made pharmaceutical products, 2. No significant attachment to the country of origin when prescribing or buying drugs to consume, probably on account of prices and limited disposable income of the consumer.

Further studies can examine relative preferences in relation to product categories of the pharmaceutical products and medical ailments

This study investigated the influence of negative publicity on brand image, brand attitude and brand purchase intentions.⁸ A quasi-experimental approach was used, involving a sample of 203 participants exposed to two negative publicity scenarios (mild and high severity). Partial Least Squares (PLS) was used to test the hypotheses.

H1a- Consumers' attribution of negative publicity to a brand has a negative effect on brand image after a negative exposure (Not Supported)

H1b- The perceived severity of the negative publicity has a moderating effect on the relationship between attribution and brand image (Not Supported)

H2a- Consumers' attribution of negative publicity to a brand has a negative effect on brand attitude after a negative publicity exposure (Supported)

H2b- The perceived severity of the negative publicity has a moderating effect on the relationship between attribution and brand attitude (Not Supported)

H3a- Consumers' attribution of negative publicity to a brand has a negative effect on purchase intention after a negative publicity exposure (Supported)

H3b- The perceived severity of the negative publicity has a moderating effect on the relationship between attribution and purchase intention (Not Supported)

H4a- Brand image has a positive effect on intention to purchase after a negative publicity exposure (Supported)

H4b- The perceived severity of the negative publicity has a moderating effect on the relationship between brand image and purchase intention (Not Supported)

H5a- Brand attitude has a positive effect on intention to purchase after a negative publicity exposure (Supported)

H5b- The perceived severity of the negative publicity has a moderating effect on the relationship between brand attitude and purchase intention (Not Supported)

H6a- Brand image has a positive effect on brand attitude after a negative publicity exposure (Supported)

H6b- The perceived severity of the negative publicity has a moderating effect on the relationship between brand image and brand attitude (Supported)

Overall, the results suggest that attributions of negative publicity impacted more on brand attitudes and purchase intentions than it did on brand image, irrespective of the severity of the negative publicity. These findings also support the conceptual assumptions of the

authors that attribution influences the various components of brand equity in different ways and to different degrees. The result may also suggest that brand image being more enduring than brand attitude, may not be easily influenced by external factors

These insights suggests that brand evaluation in the minds of consumers may be more cognitive based (brand attitude) rather than imagery based (brand image)

This study was limited to only regular consumers of the single product targeted. Further research could focus on potential consumers, other product categories or services, other brand equity components, cultures, personalities and deeper evaluation of each brand equity dimension. For example, investigating the specific impacts of negative publicity on functional brand image (e.g. quality and durability) and symbolic brand image (e.g. fashionable and stylish)

The exploratory study investigated how independent variables like customer care, customer service, sales promotional tools and qualification and experience of pharmacist impact on customer buying behaviour the only dependent variable, as well as the influence of pharmacy branding, the moderating variable 914 questionnaires were analyzed using Smart PLS 3.0 Software for estimation of Structural Equation Modeling using the variance-based approach.^{41,175,56,68,64} The results revealed that only customer care positively and significantly affects consumer buying behaviour at pharmacy store while the remaining independent variable like customer service, sales promotion tools and qualification and experience of pharmacist negatively and insignificantly affect consumer buying behavior. The study reveals further that in respect of the mediating

variable of pharmacy branding, there is insignificant positive interaction for customer care, customer service and qualification and experience of pharmacist with customer buying behaviour, while the interaction of brand with sales promotional tools negatively and insignificantly affect consumer buying behavior

2.3.3 Studies Related to Impulse Buying

This study examined how advertising influences the impulse purchase of over-the-counter drugs using individual interview qualitative research design covering 60 randomly selected consumers and pharmacists, with nine open-ended questions directed at medicine consumers and ten open-ended questions directed at pharmacists in two municipalities in Romania.⁶⁶ All three hypotheses formulated were confirmed in this study, respectively: television commercials influence sale of over-the-counter medication; the role of the pharmacist in recommending other medications decreases due to the increasing influence of television advertising of OTC medicines; avoidable consumption of needless medicines evolves in line with the amount of television commercials that consumers are exposed to.

The researchers “consider that we are the result of our choices; every individual is unique and has a unique way of thinking and it is in our power to choose what is best for us”

More insight on the impact of media advertising on consumers’ choice and preferences for OTC medicines would be revealed if further research examines the impact of radio advertising and other media.

This study evaluated the role of positive emotion in mediating the effect of atmosphere on impulse buying.¹⁷⁶ The study is based on stimulus, organism and response (SOR) Theory Model which views human purchase behavior as a reaction or response of a person (organism) to the situation experienced. The data was collected from 120 samples selected by purposive sampling technique whose responses to a questionnaire were measured by Likert Scale from strongly disagree to strongly agree, and analyzed further using ranges, classic assumption tests, track analysis, path analysis and hypotheses tests

H1: Store atmosphere has a positive effect on impulse buying - supported

H2: Store atmosphere has a positive effect on positive emotion - supported

H3: Positive emotion has a positive effect on impulse buying - supported

H4: Store atmosphere has a positive effect on impulse buying mediated by positive emotion – supported

A positive emotion could also impact on favorable attitudes towards brand being promoted in the store where store atmosphere has a positive and significant effect on positive emotion. Further research could examine other mediating variables beyond positive emotion

This study investigated if and how point-of-purchase (POP) display advertisements actually trigger impulse purchase in case of agriculture-based products like foods and beverages.²³ They investigated the influence of POP advertisements on the five stages of the buying decision process. The five different stages investigated are: (1) recognition of need, (2) Search for information, (3) Evaluation of choices available, (4) purchase decision, and (5) post-purchase evaluation

H1: There is significant difference in POP's influence on different stages of purchase process for foods and beverages purchase.

The study was carried out in two cities on 200 respondents, selected by quota sampling. Primary data was collected using a three-part questionnaire, which sought to measure the frequency with which POP influenced each of the 5 stages in the purchase process for foods and beverages on one hand and cigarettes and alcoholic beverages. Data analysis was done using percentage, mean, standard deviation, Cronbach Alpha and Chi Square test of hypothesis.

The null hypothesis was not accepted. A significant difference was found in the POP influence on different stages of purchase process for foods and beverages. However, the study found that the post-purchase evaluation stage was more influenced by POP as a greater percentage of respondents indicated that they were always affected by POP at the stage more than the other stages of purchase behaviour, where they indicated "sometimes" and "most of the times". This suggests that POP is most effective in reducing post-purchase dissonance. The results also suggest that POP exerts the least influence in "recognition of needs" stage in the buying process.

Likewise for the cigarettes and alcoholic beverages segment of the study, indicates that POP advertisements never influence them across the 5 stages in the buying process.

In summary, a partial, but substantial positive influence of POP was found on the respondents during the purchase of foods and beverages. The results further clarified that POP had the most influence on the respondents at the post-purchase evaluation stage in the buying process. However, for cigarettes and alcoholic beverages, POP does not influence the recognition of needs, search for information, purchase decision and post-purchase evaluation stages in buying process, but it sometimes helped the respondents for

evaluation of choices available, possibly this is limited to reading the packaging of cigarettes and alcoholic beverages. This result is contrary to the findings of earlier studies which reported that POS exposure to the cigarette brand that the consumer buys regularly or to any other cigarette brand resulted in urges to buy and impulse purchases.¹⁷⁷ The finding is also opposite to another study which concluded the POS tobacco displays influence purchase behaviour. The difference may be attributed to the stringent restrictions on promotion of cigarettes and alcoholic beverages that prevail in India, where this study was carried out.

Opportunity is open for further research into if and how, POP display advertisements actually trigger impulse purchase in case of other fast-moving consumer goods, OTC medicines and prescription drugs

This study investigated the drivers of compulsive buying behaviour induced by store-based promotions by reviewing buying behaviour in reference to point-of-sale promotions particularly, the role of point-of-sale promotions in stimulating arousal and the effectiveness of customer relations for building store loyalty.¹⁷⁸ He notes that the concept of using point-of-sale promotions to create compulsive buying behaviour is based on a brilliant understanding of the human mind, which is closely associated with the obsessive behaviour of customers whose minds are oriented to acquire certain products or services, in reference to specific types of external stimuli like sales promotion especially at point-of-sale. Indeed, he notes that purchase acceleration and product trial are found to be the two most influential variables of retail point-of-sales promotions.

H1: Consumers are influenced in making buying decisions by the product attractiveness and by in-store shopping arousal generated by point-of-sales promotions introduced by the retail stores

H2(a): Consumers develop compulsive buying behavior and higher store loyalty while responding to the point-of-sales promotions.

H2(b): During point-of-sales promotions, retailers boost higher shopping arousal, leading to conformity towards the buying decision.

He developed a structured questionnaire incorporating 36 variables (behavioural/ economic) that were closely related towards influencing the shopping arousal and customer satisfaction on point-of-sales promotions, in order to investigate the extent to which point-of-sales promotions have influenced buying behavior, derived post-buying satisfaction and augmented the volume of sales of the retail stores.

The effectiveness of point-of-sales promotions was measured with a 12-variable self-appraisal perceptual scale and analysis of the results reveals that findings are consistent with H1, H2(a), and H2(b) (All supported).

Specifically, the discussion of the study reveals that point-of-sales promotions significantly stimulate the buying behavior among customers towards compulsive buying that is driven by factors amongst which is in-store shopping arousal.

2.3.4 Studies Related to Brand Loyalty

This study explored and verified the existing theory about brand loyalty by examining the relationship between virtual image of the Three Squirrels' brand and relevant theories about brand awareness, brand association, brand satisfaction and brand loyalty.¹⁷⁹ An online questionnaire survey, 135 respondents, which data was analyzed using Smart PLS Software (Version 20). Discriminant, convergent and construct validity were based on the square root of average variance extracted (AVE) while reliability of the instrument was determined by cronbach alpha test

The results reveal that brand virtual image has a positive impact on brand satisfaction, and among all the influencing factors, brand virtual image has the most important influence on brand satisfaction and it is the only influence on brand satisfaction. Moreover, the study indicates that brand association, brand satisfaction and brand awareness directly impact brand loyalty just as brand virtual image directly impact on brand loyalty and indirectly affects brand loyalty through its impact on brand satisfaction.

These results align with findings from previous studies, but particularly that brand image and brand satisfactions are the key determinants that directly influence brand loyalty. Hence, the conclusion that a brand's virtual image affects consumer behavior and loyalty to the brand. For marketers, establishing and managing virtual images can create long-term benefits and economic value for the enterprise. Major limitation of this study is the small sample size (135). Future research can explore the relationship between brand virtual image and the full constructs of brand equity

A study to determine whether perceived risk, pharmacist expertise, promotional activities and price sensitivity affect the creation of consumer loyalty as well as whether consumer loyalty to over-the-counter products results in buying behaviour (consumer patronage).¹⁸⁰

The survey method using a well structured questionnaire to extract respondents' opinions on each statement through a five-point Likert Scale (No 1- I strongly disagree, No 5- I strongly agree) was adopted; covering 105 respondents of different demographic profiles in age, education, working status.

Relationship among the variables and hypothesis were tested by using descriptive statistics, correlation analysis as well as simple and multiple regression employing the Statistics Package for Social Science- SPSS version 21.

Homogeneity/heterogeneity of responses was determined by calculating arithmetic mean and standard deviation for each statement, while Cronbach's alpha coefficient was calculated to determine the reliability and internal consistency of the statements.

Analysis of results and testing of the hypotheses revealed that:

H1- Pharmacists expertise has positive implications regarding consumer loyalty to OTC products (confirmed)

H2- Perceived risk to the use of OTC products affect consumer loyalty (confirmed)

H3- Promotional activities related to OTC affect consumer loyalty (not confirmed)

H4- Consumer price sensitivity affects the loyalty to OTC products (not confirmed)

H5- Consumer loyalty to OTC products has positive implications on consumer purchase intention (confirmed)

Identified gap for further studies include the inclusion of electronic media in the spectrum of promotional activities examined, adopting a larger sample size, a wider territorial scope of research and a clearer categorisation of OTC product groups/segments for deeper probes of consumer attitude

This study investigates the impact of brand perception on brand loyalty and brand purchase intention using a mixed method approach combining qualitative in-depth interviews followed by questionnaire survey.¹⁸¹ The resulting data collected from 321 respondents over a three month period of time were analyzed through content analysis and fuzzy-set qualitative comparative analysis (fsQCA).

The results indicate that the key elements influencing overall brand perception are association, brand fondness, brand image and product country image have a strong impact on brand loyalty and brand purchase intention in the Mexican Fashion dress market. The study contributes to the growing research on perceptual and behavioral components of brand equity. The study revealed further that brand awareness is a significant influence on perception of brand equity.

In conclusion, this research found brand purchasing intention to be the most important outcome relative to brand equity.

A major limitation is that the research was carried out in a single city which calls for further research in different Latin American countries and other territories to permit comparison of results. Other studies could also focus on less prominent national brands.

The study investigated the impact of determinants of brand loyalty on customer purchase intention, specifically brand image, customer satisfaction and brand experience.^{182,183} A quantitative research design was applied and data collected through a structured questionnaire administered on 60 respondents equally from six countries in Asia, all selected through convenience sampling method. Data was analyzed using multiple regression analysis.

H1- Brand image will positively affect purchase decision for Basketball Shoes (Accepted).

H2- Customer satisfaction will positively affect purchase decision for Basketball Shoes (Accepted).

H3- Brand experience will positively affect purchase decision for Basketball Shoes (Accepted).

The study reveals further that brand image was most influential on purchase intention, followed by brand experience, in relation to Basketball Shoes brands. Branding as a key element of product differentiation and competitive advantage make it compelling on marketers to focus on building brand loyalty through the three elements of brand image, customer satisfactions and brand experience.

The study investigated the impact of four variables brand awareness, name, quality, and price on creation of brand loyalty, going further to examine how brand loyalty influences purchase intention.¹⁸⁴ A descriptive research approach, administering questionnaire on 300 respondents and adopting correlation and regression analysis via SPSS.

H1- There is a direct and encouraging relation between brand loyalty and purchase intention of customer (Accepted)

H2- Brand name has a considerable straight effect on brand loyalty (Accepted)

H3- Brand awareness has a positive effect on brand loyalty (Accepted)

H4- There is a direct and positive relation between quality and the brand loyalty (Accepted)

H5- Brand loyalty has a considerable positive direct effect on purchase intention (Rejected)

H6- Brand price has a positive effect on brand loyalty (Accepted)

Major limitations of this study which provide opportunities for further research include use of more inferential statistical to validate results from current descriptive statistics, evaluating other variables like brand trust, brand communication, wider geographical territories and larger sample size.

This study focused on consumers in Puerto Rico using high and low involvement consumer products, reported that both monetary and non-monetary promotions can enhance brand loyalty, contrary to findings of previous studies.¹¹⁵

H1a: Preference for non-monetary promotions will have a greater effect than preference for monetary promotions on brand loyalty for high involvement products.

H1b: Preference for non-monetary promotions will have a smaller effect than preference for monetary promotions on brand loyalty for low involvement products.

The preference for monetary promotions for high-involvement product (deodorant) was higher than that for laundry detergent (low involvement product)

At the same time, preference for non-monetary promotions were similar for both products categories. There was a significant positive correlation between brand loyalty (BL) and involvement for both products.

The level of involvement, however, was a significant predictor of the brand loyalty for both laundry detergent and deodorant, suggesting that a higher level of involvement leads to a higher level of brand loyalty.

Results showed that “Buy 2 and get 20% off” (a monetary promotion) for deodorant, a high-involvement product, increases brand loyalty. Respondents were more brand loyal to high involvement products than low-involvement products. This is one of the most significant findings to emerge from this study, as the assumption was that preference for non-monetary promotions would have a stronger effect on brand loyalty for high-involvement products (H1a). Hence H1a is rejected. Besides “Buy 2 and get 20% off”, involvement was the other independent variable to positively impact brand loyalty on both models: deodorant and laundry detergent.

This study contributes additional evidence suggesting that involvement can be a critical antecedent of brand loyalty even for low-involvement products. This suggests that a higher level of involvement leads to higher brand loyalty.

The most important fact about this finding is that both monetary and non-monetary promotions can enhance brand loyalty contrary to findings of other studies. There may be other external factors that are influencing this shift in behaviours, for example, economic

recession which may compel consumers to seek better value and better bargains for their money on both low-involvement and high- involvement product categories. Further research could cover other categories of low-involvement and high-involvement consumer goods and OTC medicines.

2.3.5 Studies Related to Purchase Intention

A quantitative approach and convenience sampling method were used to obtain data from self-administered questionnaire, completed by 351 respondents.⁸⁶ External independent variables are Professional Advice, Family and Friends' Opinion, Brand Advertising, Brand Packaging, Drug Availability and Price; while internal independent variables included Brand experience, Perception of Country of Origin (COO), Age, Education and Gender.^{92,185,186}

H1A- The internal antecedent factors have a positive influence on the intention to buy non-prescription medicines in Jordan. (Supported)

H2A- The external antecedent factors have a positive influence on the intention to buy non-prescription medicines in Jordan. (Supported)

H3A- The integrated of internal and external factors could significantly better explain the variations in the intentions to buy non-prescription medicines more than taking each one separately. (Supported)

Factor analysis and multiple regression analysis amongst others, were performed. The results reveal that all antecedent factors (internal, external and combined) have significant positive influences on the intentions to buy OTC medicines.¹⁸⁷ While internal factors are

more influential than external factors, however, the combination of internal and external factors resulted in the greatest influence on buying OTC medicines compared to each category separately¹⁸⁸.

Furthermore, the findings indicate that five of the nine factors of the combined categories are significantly associated with the intention to buy OTC medicines in the following order of importance, namely; (1) brand experience, (2) professional advice, (3) drug availability, (4) brand package; and family and friends' opinions.

This study examined the effects of multiple perceived values from sports nutritional supplements on brand attachment and purchase intention.⁷⁸ Data collected from questionnaire answered by 425 athletes was analyzed using Structural Equation Modeling (SEM)

H1a- Consumers' perceived functional value of product price/value for money positively influences the brand attachment (accepted)

H1b- Consumers perceived functional value of product price/value for money positively influences the purchase intention (accepted)

H2a- Consumers' perceived functional value of product performance/quality positively influences the brand attachment (accepted)

H2b- Consumers' perceived functional value of product performance/quality positively influences the purchase intention (accepted)

H3a- Consumers' perceived emotional value of the product positively influences brand attachment (accepted)¹⁸⁹

H3b- Consumers' perceived emotional value of the product positively influences purchase intention (accepted)

H4a- Consumers' perceived social value of the product positively influences brand attachment (accepted)

H4b- Consumers' perceived social value of the product positively influences purchase intention (accepted)

H5- Sports nutritional supplements consumers' brand attachment positively influences purchase intention (accepted)

The results reveal that these multiple perceived values positively influence both brand attachment and purchase intention for sport nutritional supplements.¹⁹⁰ These dimensions should be taken into serious consideration in developing appropriate strategies from product design through the marketing value chain.

Further qualitative research methodologies can provide deeper insights while new researches can be made for a specific brand or a product category of sport nutritional supplements, OTC medicines and new cultural environments

This study investigated the effect of brand engagement and brand love upon overall brand equity and purchase intention.²⁵ The research focused on consumers of mobile hand sets in a cosmopolitan city Delhi, India and data collected from 548 valid respondents to a self-administered questionnaire was analyzed to test the following hypotheses:

H1- Brand engagement is positively associated with brand love (supported)

H2- Brand engagement is positively associated with overall brand equity (not supported)

H3- Brand love is positively associated with overall brand equity (supported)

H4- Overall brand equity is positively associated with purchase intention (supported)

H5- Brand engagement is positively associated with purchase intention (not supported)

H6- Gender moderates all the hypothesized relationships H1-H6 (supported)

H7- Usage frequency moderates all the hypothesized relationships H1-H6 (supported)

The results of the research offer insights on how brand engagement and brand love jointly influence purchase intentions through an underlying mechanism of overall brand equity (OBE). Brand engagement leads to brand love moreover while brand love is positively related to overall brand equity, brand engagement is not. Passion, quality and emotions underlies brand love, passion being the most important construct followed by emotion. Affection and cognitive are the constructs for brand engagement, affection being the most important. The result revealed further that cognitive, affection and activation are key antecedents of brand equity. Brand love is similar to interpersonal love while brand engagement is based on the cost-benefit analysis of the social exchange theory.

The study revealed that gender and usage frequency moderate the outcomes of brand engagement and brand love relationships for mobile handset consumers in the Indian cosmopolitan city of Delhi. This is a clue to developing products for specific groups of customers to increase competitiveness. Marketers should develop strategies to leverage brand engagement and brand love to gain advantage over competitors as engaged customers are more likely to develop brand love which increases brand equity,

consequently evoking intention to purchase. Since brand engagement does not build purchase intention but brand love and a higher love will lead to higher brand equity, therefore, focus should be on making a brand more equitable than competitors.

This could be achieved through increase in awareness programs, positive associations, perceived quality and loyalty schemes.

Further research could cover other product or service categories or other geographical territories. A major limitation of the study is that the result cannot be generalized because a non-probability sampling techniques was employed.

The study reviewed three dimensions of brand equity and their impact on consumer purchase decision in relation mobile phones, namely brand awareness, perceived quality and brand loyalty.¹⁵ Data collected from 1190 subjects selected by quota sampling method and analyzed by Structural Equation Modeling and Correlation through AMOS and SPSS programs.

H1- Brand awareness has an effect on perceived quality (Accepted)

H2- Brand awareness has an effect on brand loyalty (Rejected)

H3- Brand awareness has an effect on overall brand equity (Rejected)

H4- Perceived quality has an effect on brand loyalty (Accepted)

H5- Perceived quality has an effect on overall brand equity (Accepted)

H6- Brand loyalty has an effect on overall brand equity (Accepted)

H7- Overall brand equity has an effect on purchase intention (Accepted)

Further insight can be revealed by applying the techniques of the study to more heterogeneous and wider categories of respondents beyond university students as well as other product categories, including medicines.

A descriptive and casual research design measuring the influence of brand equity dimensions on purchase intentions as well as the moderating role of gender and educational qualification on these relationships.²

H1- Brand awareness positively affects purchase intention (supported)

H2- Brand association positively affects purchase intention (not supported)

H3- Perceived quality positively affects purchase intention (not supported)

H4- Brand loyalty positively affects purchase intention (supported)

H5- Gender moderates brand equity dimension to purchase intention (supported)

H6- Qualification moderates brand equity dimensions to purchase intention (not supported)

Structural equation modeling was applied to validate the proposed model and measuring the influence of brand equity dimensions on purchase intentions of smart phones.

Independent sample t- test and ANOVA was used to test the effect of the moderating variables on purchase intention. The regression coefficients of brand awareness and brand loyalty on purchase intention were found statistically significant. So, H1 and H4 were

supported. The regression coefficients of brand association and perceived quality on purchase intention were statistically not significant

Hence, H2 & H3 were not supported. Thus it was concluded that brand awareness and brand loyalty were the influential factors for purchase intentions of smart phones. Results show that females performed significantly better than male in purchase intention. So, H5 was accepted. Result also revealed that qualification had no significant differences on purchase intention of smart phones. So, H6 was not accepted.

Further research could focus on wider geographical territory and other major cities, product and service categories.

A quantitative causal research conducted through questionnaire survey administered on 300 respondents selected by convenience sampling method and data collected from 197 usable responses were analyzed using correlation analysis and regression analysis.^{5,191,8} Results of correlation analysis indicate a statically highly significant positive relationship of brand equity with purchase intention (.651) as well as with subjective norms (.367).

H1- Brand equity is significantly and positively correlated with purchase intention (Supported)

H2- Subjective norms moderates the brand equity and purchase intention (Supported)

Also, purchase intention has a statistically significant positive relationship with subjective norms (.225**). In summary, the results confirm that brand equity has significant and positive impact on the purchase intention, and subjective norms also positively and significantly moderate the relationship between brand equity and purchase intention.

Major limitations of this study include sample size, convenience sampling techniques and limited number of variables focused upon. A wider representation of the whole population across broader socio-economic and demographic groups would shed more light and permit generalization of findings.

Further research can focus on other cultural and national settings (developed and developing) as well as other socio-cultural and personal characteristics, or a wider geographical territory. Other potential determinants such as brand equity elements, producer's name, brand status (generic vs originator) and health consciousness level could be investigated.

2.3.6 Studies Related to Brand Equity

The study examined the influence of brand awareness, perceived quality, brand association, brand loyalty on brand equity of Zakat Institutions in Greater Jakarta, Indonesia using the descriptive, explanatory quantitative approach.⁹ Data collected by clustered random sampling from 375 respondents to questionnaire was analyzed using Partial Least Square SEM (PLS-SEM). This study was built on Aaker's brand equity model.^{192,193,194,195} The results confirm the acceptance of all four hypotheses thus:

H1: Brand awareness has a significant direct effect on brand equity of Zakat Institutions

H2: Perceived quality has a significant direct effect on brand equity of Zakat Institutions

H3: Brand association has a significant direct effect on brand equity of Zakat Institutions

H4: Brand loyalty has a significant direct effect on brand equity of Zakat Institutions

The results also indicate that brand loyalty followed by brand association contribute more significantly to brand equity which is in line with results of previous studies¹⁹⁶.

This finding implies that Zakat Institutions should focus on building brand loyalty to generate a higher level of brand equity overall through the establishment of effective fundraising strategies.

The main limitation of this study lies in limiting sampling to only Greater Jakarta Area of Indonesia, which can limit generalization of findings to all Indonesia countries. The research model can be adopted further to accommodate additional variables such as brand trust, brand preference, brand performance and the research could focus on other non-profit organizations.

This study, in the context of brand management, is based on the foundation of consumer behavior in relation to Customer-Based Brand Equity (CBBE) and Theory of Planned Behavior (TPB).¹⁹⁷

The Theory of Planned Behavior (TPB), one of the most important theories that is widely used to explain consumer behavior, consists of subjective norms, perceived behavioral control, attitude and behavioral intention.¹⁹⁸ This study sought to develop a comprehensive research model by integrating relevant research constructs using meta-analysis and structural equation modeling. 16 research hypotheses were formulated upon review of a total of 173 studies from 58 published papers with 40 journals during 1991-2014

H1: Brand image has positive influence on brand personality (supported)

H2: Brand personality has positive influence on brand association (supported)

H3: Brand image has positive influence on brand attitude (supported)

H4: Brand personality has positive influence on brand attitude (supported)

H5: Brand Association has positive influence on (a). brand attitude, (b). brand trust (supported)

H6: Subjective norms has positive influence on brand attitude (supported)

H7: Brand awareness has positive influence on brand trust (supported)

H8: Perceived quality has positive influence on brand trust (supported)

H9: Brand awareness has positive influence on brand loyalty (supported)

H10: Brand trust has positive influence on brand loyalty (supported)

H11: Perceived quality has positive influence on brand loyalty (supported)

H12: Perceived behavioral control has positive influence on brand loyalty (supported)

H13: Brand attitude has positive influence on brand loyalty (supported)

H14: Brand attitude has positive influence on brand equity (supported)

H15: Brand loyalty has positive influence on brand equity (supported)

H16: Brand equity has positive influence on behavioral intention (supported)

In summary, the major findings of this study from results are as follow: (a). That brand image, brand personality, brand association and subjective norm are the important

antecedents of brand attitude, (b). Brand awareness, brand trust, perceived quality and perceived behavioral control are the important antecedents of brand loyalty, (c). brand attitude positively influence brand loyalty, which further influence brand equity, and (d). Brand equity positively influences behavioral intention.

This study fill in the research gap by integrating more research variables into CBBE model, particularly the inclusion of social context on consumer behavior through the theory of planned behavior (TPB), beyond the individual consumer-focused CBBE constructs.

Future research can verify the research model through in-depth interviews, case studies, or questionnaire surveys or by integrating more theories and constructs into the model, or evaluation of measurement scales and data collection method. Future research can gain more insight by reviewing paper written in other languages, a major limitation of this study and many more papers which relate with CBBE and TPB in unpublished papers (eg dissertation, conference papers)

The study sought to find out the key factors affecting consumer-based brand equity of Vietnamese pharmaceutical companies.^{199,200} An 18-item questionnaire survey administered on 328 customers selected by convenience sampling, non-probability method at pharmacies and hospitals. Based on Aaker's model, four constructs were evaluated for their impacts on brand equity-Brand Awareness, Brand Association, Perceived Quality and Brand Loyalty. Structural Equation Modeling was used to estimate the parameters in the model and responses to each item was selected from a 5 point Likert Scale of measurement. Convergent validity, discriminant validity and composite

reliability of the instruments were verified with factor analysis and acceptable CFA, CR and AVE results

Hypotheses were tested using correlation analysis Regression Coefficients, Critical Ration (C.R.) and P

H1: Brand awareness has a positive impact on brand equity (supported)

H2: Brand association has a positive impact on brand equity (supported)

H3: Perceived quality has a positive impact on brand equity (supported)

H4: Brand loyalty has a positive impact on brand equity (supported)

All hypotheses were supported. The highest impact on brand equity was demonstrated by perceived quality followed by brand loyalty, according to their respective path coefficients 0.603 and 0.325, while brand awareness scored 0.215 and brand association 0.094, the least score. The authors also found high correlation between perceived quality and brand loyalty

This correlation is not surprising as drugs are purchased primarily for utilitarian purposes with the expectation of effectiveness and safety, upon which both perceived quality and eventual satisfaction after usage depends. Eventual satisfaction after repeated usage of pharmaceutical products naturally promotes brand loyalty. Hence, the high correlation between perceived quality and brand loyalty as well as the relatively stronger impact on brand equity than brand awareness and brand association which probably could have demonstrated high impact in a consumer product survey

Future research on a larger scale of respondents and territorial coverage could provide a deeper insight

Brand value, a major asset for drug manufacturers, is a key determinant of brand equity which drives consumer purchase intention and behavior. The study attempted to identify the major drivers of brand value for OTC medicines following a consumer based brand equity model and employing the Analytical Network Process (ANP) approach.²⁰¹ Elements of decision making which drive consumer-based brand equity for OTC drug were grouped into Benefits, Opportunities and Risks (B.O.R Model)

The results revealed that among the clusters influencing consumer choices for OTC drugs the “benefit cluster” are of highest level priority, accounting for almost 60% in determining consumer behavior. Within the benefit clusters, the highest importance is given to communication strategies which has about 50% priority followed by consumer base. Main drivers of communication strategies are advertising expenditures, the top priority, followed by media coverage, use of popular testimonials and corporate social responsibility initiatives in order of declining priority. The imperative for focus on advertising is compelling on drug manufactures because of stiff competition amongst a wide variety of brands, as advertising guides consumer’s choice towards a specific brand over competing alternatives amongst availability of substitute products which is more attracting than the risk of the side-effects.

Results also revealed that within the “opportunities cluster” the top driver of consumer choice is appropriate pricing strategy followed by pharmacist’s advice, which can be considered as indirect communication element too.

The authors suggest integrating a deep understanding of customer needs values and perceptions to develop competitive marketing strategies for improved market share.

The study investigated the relationships between brand equity dimensions namely, brand awareness, perceived quality, brand association and brand loyalty on behaviour intention to purchase smart phone in Malaysia.^{203,204,205,206} Administering questionnaire on 377 respondents selected via stratified random sampling probability techniques. Data was analyzed using descriptive statistics, correlation and regression analysis.

H1- Brand awareness positively related to purchase intention towards smart phone (not supported)

H2- Perceived quality is positively related to purchase intention towards the smart phone (supported)

H3- Brand association is positively related to purchase intention towards smart phone (not supported)

H4- Brand loyalty is positively related to purchase intention towards smart phone (supported)

Further research could give more insight into these relationships if broader spectrums of respondents are targeted from different demographic classes as the current study is limited to only university students. Other consumer products and medicines can also be investigated

This study investigated the impact of sales promotion's benefits (utilitarian and hedonic benefits) on four components of brand equity (i.e. brand awareness, brand association, perceived quality and brand loyalty) amongst consumers of fast-moving consumer goods.¹¹⁶

Several previous studies have explored the impact of sales promotion on brand equity, with a common academic view that sales promotions raise brand equity. But the role of sales promotions in context of brand knowledge and as brand building tool is underestimated.

The survey instrument was developed by relying on the protocols of previous relevant studies. The measures of dimensions of brand equity; five items that measure brand awareness; three items that measure perceived quality; three items that measure brand loyalty; five items that measure brand association; five items scale to measure the hedonic benefits; five items scale to measure the utilitarian benefits;^{8,140}

Non-probability sampling technique (i.e. Convenience sampling) was adopted to select 276 consumers of fast-moving consumer goods. Data was collected through filling of questionnaire. 265 questionnaires were considered to be accurately filled. All scales were measured using 5-point Likert type scale while the structural equation model is estimated using AMOS 20.

The finding suggests that utilitarian benefits of sales promotions have maximum impact on brand loyalty (i.e more effective to generate repeat purchase and retain existing consumers). This agrees with the fact that satisfaction of basic utilitarian needs is the primary motive of consumer purchase behavior, which generates and develops brand

loyalty. Utilitarian benefits also impact positively on brand awareness and brand association, the results revealed the least impact on perceived quality.

Hedonic benefit has maximum impact on brand association and least impact on perceived quality, while also impacting positively on brand awareness and brand loyalty. This is understandable given that brand association has three dimensions (attributes, benefits and attitudes) Attitude is related to consumer's emotional and intrinsic feeling derived from enjoyment, fun and pleasure during interaction with a product or brand. These create positive memories which result in and develop positive brand association.²⁰⁷

A comparison between hedonic and utilitarian benefits of sales promotion on each of these components of brand equity suggest that utilitarian benefits have a significantly greater impact than hedonic benefits on generating and developing brand awareness, brand loyalty and perceived quality, but hedonic benefits seem to exert more impact on the brand association component of brand equity.

The researchers acknowledged the following limitations and future research scope

This study is limited to fast-moving consumer goods category and sample selected was from one Indian State, Madhya Pradesh. Hence the findings of this research cannot be generalized for other product categories, industries and geographical area, which offer opportunities for future research.

Future research can use better representative sampling technique (i.e. probability sampling) than the convenience sampling (i.e. non- probability sampling) used in this study; as well as incorporating other benefits of sales promotion like fun, cheerfulness, affordability, etc., beyond those extracted from literature which were adopted for this study.

This study was an attempt to find a solution to overcome the presumable negative effects of sales promotions, by combining sales promotions with in-store communication in particular point-of-sales (POS) materials, to investigate the effects of advertising on the shopping floor and its potential to diminish or resolve the presumable negative effects of sales promotions.²⁰⁸ The goal of this study is to find out whether customers perceive the brand differently when the brand uses POS materials in addition to the sales promotion and whether it can overcome the presumable negative effects of sales promotions. The presence of POS materials and different levels of sales promotions are tested for an effect on consumers' brand equity (brand awareness, brand image, brand attitude, perceived quality). Six experimental conditions were investigated

- a) Sales promotion 50% off plus POS material;
- b) Without POS material;
- c) Sales promotion 20% off plus POS material;
- d) Without POP material;
- e) Original prices plus POS material;
- f) Without POS material;

The constructs, seven in number, were measured (the ratings of participants' responses to specific statements) on a 5-point Likert Scale; from strongly disagree (1) to strongly agree (5). Additionally, the participants who were assigned to the conditions with sales promotions filled out an extra list of six statements regarding the "Attitude towards the sales promotion".

Internal reliability of each of the constructs was assessed with Cronbach Alpha measurements above 0.70, signifying appropriateness to include in the study. By using SPSS23, several analyses were carried out to test the hypotheses of the study.

Hypotheses Summary and results based on total data set:

H1a-Monetary promotions have, compared to the original price, a negative influence on:

(a) brand image; (b) brand attitude; (c) perceived quality. (Not supported)

H1b- A deeper promotion (>20% discount), compared to a shallower promotion (<20% discount), will have an increasingly negative influence on: (a) brand image; (b) brand attitude; (c) perceived quality. (Not supported)

H2- POS materials have a positive influence on: (a) brand awareness; (b) brand image; (c) brand attitude (d) perceived quality, compared to a shelf without POS materials. (Not supported)

H3a- The level of (a) brand awareness; (b) brand image; (c) brand attitude; (d) perceived quality, will be increasingly positive when a combination of monetary promotions with POS materials will be used for the brand. (Not supported)

H3b-The level of (a) brand awareness; (b) brand image; (c) brand attitudes; (d) perceived quality, will be increasingly positive when a combination of a shallower promotion (<20% discount) with POS materials will be used for the brand, compared to a deeper promotion (>20% discount) with POS materials. (Not supported)

The expected negative effects of sales promotions on brand equity are not found in this study. Despite the fact that the results on the customers' lowered reference price are significant and in line with the findings in literature, the effects on this reduced reference price do not affect the valuation of the brand.

Summarized, it may be concluded that the findings in the literatures and the findings in this study do not correspond with each other.

Based on the results of this study, it maybe concluded that POS materials do not have a significant effect on the dimensions of brand equity, compared to a shelf without POS

materials as scores on the different variables in the conditions with or without POS materials were almost the same.

This study did not show significant effects for POS materials and brand building. However, the valuation of purchase intention, brand awareness and attitude towards sales promotion showed a small positive trend when POS materials were used. This could be an indication that POS materials might improve (impulse) purchases, with and without sales promotions.

Future research focusing more on specific countries to find out if sales promotions do not negatively influence brand equity anymore.

It is important for future research to have more variety in age among participants, especially customers with children who are more price conscious, compared to single and dual-earning married people who are generally less price conscious.

Further research should focus on increasing visibility of POS materials to stand out on the shopping floor and to be conspicuous for the customer. One research method for getting information about conspicuoussness could be the “eye tracking” method, which will give more insights in the several elements that attract and keep the attention of a customer.

Further research could focus on the use of a virtual- or an unknown brand from a well-familiarized product category (that is used by almost every customer, e.g. toilet paper) which would increase the reliability of the outcomes of the study. Furthermore, the best way of presenting a realistic view is to conduct this research on the shopping floor in a real grocery store where the discounts need to be really given on the products and POS materials need to be present on the shopping floor.

2.3.7 Studies Related to Consumer Behavior

This study focused on evaluating determinants of consumer behavior in respect of purchase of OTC medicines apart from the influence of consultation with healthcare professionals.²⁰⁹ Primary data from questionnaire survey and secondary data from several categories of publication were adopted for the study. Primary data was collected from responses of 417 sample selected by non-random sampling techniques and inferential statistics, KMO, Chi-Square and exploratory factor analysis were applied. Major findings of this study are:

1. Demographic profile of the respondents has a significant impact on determining consumer choice of OTC medicines
2. Consumers are motivated to buy OTC drugs for self-medication on account of time-saving and increasing medical doctors' consultation charges
3. Self confidence about appropriate definition of the health issue and knowledge about the composition of required medicine are also key influences of consumer purchase of OTC medicines
4. The perceived value of information has the highest influence and highly useful for identifying the determinants of purchasing behavior for OTC medicines. These include, previous own experience, references by friends and relatives, advertising and information found in the promotional literature
5. Also, elements relating to the brand of OTC product are useful for identifying determinants of purchasing behavior for OTC products. These include brand name, efficacy, packaging, pricing and promotional offer
6. Generally and most importantly, recommendations by doctors and pharmacists, favorable previous personal usage experience, product information, media advertising

and promotional campaigns are key determinants of purchasing behavior for OTC medicines

7. However, the influencing level of economic factors like brand, price and promotion are lower in the illiterate categories

This study investigated factors impacting consumer behaviour for pharmaceutical products, particularly for OTC pharmaceutical products in three cities in India, and particularly, the difference between metrocity and sub-urban consumers.²¹⁰ Several factors constitute variables which strengthen belief towards consumer purchase behaviour for pharmaceutical products. For drugs, these factors include price, quality, brand name, corporate reputation, sensory acceptance, aesthetics, adverse effects, safety in use, amongst others.²¹⁰

H1: There exists influencing factors like packaging, testimonials, users, safety for use, pharmacist's advice, friend's advice which influence consumer purchase behaviour of OTC products moderated by aesthetics, value and promotional factors.

H2: There exists a variation in factors influencing consumer purchase behaviour for over-the-counter pharmaceutical products vis-a-vis cities like Mumbai, Nashik and Pimpalgaon.

Explorative descriptive research methodology using a questionnaire was adopted, to collect primary data. Random sampling technique was used to select and administer the questionnaire on 300 respondents, male and female between 18-70 years old, three phase 1 of the study cover all three selected cities, phase 2 covered Mumbai city alone while phase 3 covered Nashik and Pimpalgaon town

Using principal component analysis as Extraction method and Varimax with Kaiser normalization as Rotation method, six factors, out of nineteen, extracted together accounted 59.45% of total variances on an overall basis. Thus reducing the number of variables from 19 to 6 underlying factors, each factor consisting of a group of variables. Factor 1, termed as influencers is a combination of the following five variables- packaging, testimonials from users, safety for use, pharmacist's advice and friend's advice. Factor 2 variables include, colour, size, and flavor and are termed as Aesthetics. Brand ambassador and ethical considerations constitute the variables for factor 3 while factor 4 which are also *termed as influencers* as factor 1 consists of variables like brand name, availability of medicine and doctor's advice. Factor 5, termed as *value* factor has price and quality as variables. Factor 6 is *termed promotion* and variables lay DTCA. Results from all three cities adopted for the research (phase 1) uphold the validity of Hypotheses one.

Hypothesis H1: Factors responsible for the purchase of OTC products have been formulated from the analysis above, which proves H1-there exists the factors influencing consumer purchase behaviour for OTC pharmaceutical products.

In phase 2 of the study, they concluded that three factors responsible for consumer purchase behaviour for OTC pharmaceutical products in Mumbai city are *influencers, aesthetics and promotion*.

However, for phase 3 of the study, four factors revealed for Nashik and Pimpalgaon are influencers, accessibility, value and aesthetics.

The author's interpretation of Mumbai and Nashik results revealed that while promotion emerged as a significant factor in Mumbai, accessibility, availability and price were

found to be significant factors for Nashik and Pimpalgaon. This proves hypothesis H2 which stipulates that there exists variation in factors influencing consumer purchase behaviour for OTC pharmaceutical products vis a vis cities, such as Mumbai (Metro), Nashik and Pimpalgaon (Non- Metro).

Upon review of the variables and summary of key factors on an overall basis and for Mumbai City and Nashik and Pimpalgaon, they proposed that Planned Purchase Behaviour is a function of $\alpha \Sigma$ (Influencers + Aesthetics of the product + Brand + Promotion + Value (Price) + type of cities).

The author concluded that influencers, reliability, awareness, corporate image and promotion are the five factors responsible for the purchase of OTC pharmaceutical products. Within the three cities surveyed. Influencers, aesthetics of the product, promotion, value (price), friend's advice, testimonials from users, aesthetic attributes such as size, flavour, colour, taste and shape all have significant impact in both metro and non-metro cities. Comparatively, while price, accessibility and availability are most important factors in non-metro cities of Nashik and Pimpalgaon, promotion emerged as an important factor influencing consumer behaviour in a metro city like Mumbai. Corporate image in the minds of the consumers always does have impact while selecting OTC pharmaceutical products.

Opportunity exists for further investigation to determine the key factors, their component variables and group term that impact consumer behaviour for prescription drug, particularly in environments with poor healthcare systems and weak regulatory and control systems for drug distribution, sale and advertising of drugs

This study focused on customers of pharmacy retail stores and their consumer buying behavior in relation to non-prescription, over-the counter (OTC) medicines.²¹¹ The research also aimed to gain insight on the influence of the 4p's of marketing (product, place, price and promotion) and some psychological factors on consumer buying behaviour for pharmaceuticals⁸⁴

A quantitative research was conducted, administering a well-structured questionnaire on 100 respondents. The questionnaire contained close-ended and multi-choice questions.²¹²

The statistical analysis of data collected was done using simple MS Excel worksheet for calculating percentages and plotting graphs.²¹¹ The study revealed that 61% of respondents choose pharmaceutical products (brands) on the advice of their physicians, 18% as per advice of pharmacists, 15% as suggested by family/friend's advice, 5% by self-choice. On the other hand, 38% of respondents purchased drugs as prescribed by the physician, 14% as per pharmacist advice, 20% purchased branded drugs against 16% for generic products, while 5% of respondents' base purchase decision on cost of medicines and 7% on easy availability. In summary, the study identified the following factors as having different impacts on prescriptions and consumer buying behavior when choosing medicines—the physician, pharmacist, family/friends' advice, magazine literature, advertisement, internet and self. The relative weight of these factors and consumer buying behavior with regards to choice of drugs also vary amongst different health challenges like wounds/cut/injuries, dental problem, skin/ hair problems, fever/common pain and gastro-intestinal (GI) disorders. The study also revealed that respondents were more inclined to self-choice and pricing is a major determinant factor at the point-of-purchase; where purchasing power often ignores physician's or pharmacists' suggestions.

This study compared consumers' attitudinal and behavioral responses to direct-to-consumer prescription drug advertising (DTCA) and over-the-counter, non-prescription drug advertising (OTCA).⁸⁴ The study makes an initial attempt to compare consumers' responses to OTCA with DTCA, and explores where the similarities and differences, if any, originated.

Hypotheses-were not posed because of the paucity of OTCA-specific research.

Research Question 1. What are the differences in consumers' exposure, beliefs, attitudes and behavioral outcomes regarding DTCA and OTCA?

Research Question 2a. What are the predictors of exposure to DTCA and OTCA and attitudinal and behavioral outcomes of DTCA and OTCA?

Research Question 2b. Are there any similarities and differences between DTCA and OTCA in terms of factors influencing consumers' exposure to DTCA and OTCA and attitudinal and behavioural outcomes of DTCA and OTCA?

A self-report online survey was conducted with adults 18 years of age and older who had taken any prescription drugs in the past 6 months. They completed online survey questionnaires. After the deletions, 461 useable surveys remained for analysis.

Comparisons of predictors of consumer responses to DTCA and OTCA revealed similarities and differences in the characteristics and magnitude of these predictors. For example, respondents indicated moderate to low levels of exposure to and the amount of attention paid to DTCA and OTCA. The perceived amount of exposure was higher for DTCA than OTCA, although statistically significant, the difference was small. This finding is consistent with the fact that pharmaceutical companies spend more money on DTCA than OTCA.

Respondents held moderately positive perceptions of both DTCA and OTCA, and their level of skepticism toward DTCA and OTCA were neutral, but respondents showed a more positive attitude towards OTCA than toward DTCA. The perceived amount of attention paid to drug advertising was the most significant predictor of attitudinal outcomes of both DTCA and OTCA, followed by involvement with drugs. Income was more influential in explaining the attitude toward DTCA, whereas health consciousness was a more influential predictor of the attitude toward OTCA. This may imply that those who earn more do not enjoy DTCA because they tend to be in better health and take less prescription drugs, whereas those who are more health conscious may enjoy OTCA because of their higher involvement level with their health. In addition to these predictors, there may be other factors influencing consumer's differential attitudes toward DTCA and OTCA. For example, DTC ads contain more risk information than OTC ads, which may result in more negative affective responses to DTCA. Consumers acted similarly in number of behaviors they engaged in after they saw, read or heard DTCA and OTC. Two common behavioral outcomes of the two forms of advertising was communication with doctors and friends or relatives, the two most commonly reported. In terms of end-result behaviour, 15% of the respondents asked their doctors to prescribe an advertised prescription drug, and 23.5% started using an advertised OTC drug. These findings are especially meaningful in that they provide evidence of DTCA and OTCA effects on actual behaviors (although the nature of the end-result behaviors is different). The internet was the most common source used for searching for further drug information, followed by doctors, pharmacists, and friends or relatives. Respondents reported using a greater number of sources when searching for information for prescription drugs than OTC drugs. This could be attributed to the fact that those who are more skeptical or more positive

about DTCA were inclined to search additional information using a greater number of sources which is consistent with the finding that attitudinal predictors were found to be significant only for the information searches triggered by DTCA. The two exposure variables, the perceived amount of exposure to and attention paid to drug advertising, were the most consistent significant predictors of attitude and behavioural outcomes. The result suggests that exposure to drug advertising is associated with positive perceptions of drug advertising.

The authors suggest that future research should explore whether there is a cause-effect relationship between drug advertising exposure and engaging in drug-related behaviours such as talking to their doctors or actually using the drug. Thus, in terms of media planning, pharmaceutical marketers should examine the variety of sources different target groups use in drug information search.

Many other variables like brand loyalty, price perception, perceived quality and many more that could explain consumer responses to OTCA (and also to DTCA) should be examined and the proposed model should be modified and refined by further research.

Additional research is needed beyond the effects of general forms of DTCA and OTCA, to examine how consumers with certain diseases respond differently to advertising for different types of drugs (e.g. drugs treating life-threatening diseases vs non-life-threatening diseases), categories of drugs or to specific brands, and types of message strategies in specific drug brands.

There is need to examine if prescription-to-OTC switching influences the decision making process of prescription drug user, because the study revealed that the number of

prescription drugs people took on a regular basis was a significant predictor of the behavioral outcomes of both OTCA and DTCA.

This study focused on the two underlying constructs of location-based advertising: mobile (vs. point-of-sales) advertising medium and location congruency (vs. location incongruency); which are thought to underlie the effectiveness of location-based advertising (LBA).²¹³ Specifically, they tested the different effects of medium types and location congruency on consumers' ad attention and brand choice, as well as the interaction between these two constructs. Previous studies have not taken into account that LBA consists of these underlying constructs that could be responsible for its effectiveness. Before this study, the effectiveness of in-store location-based advertising has never been compared with the effectiveness of point-of-sales in-store advertising. Specifically, this study aimed at determining to what extent *location-based mobile advertising* (LBMA) has an added value in in-store retail settings compared to *location-based point-of-sales advertising* (LBPA) when it comes to consumers' ad attention and brand choice. Additionally, the study compared the efficacy of mobile vs. stationary advertising in location-incongruent setting. The study contributes to existing LBA knowledge from theoretical and methodological perspectives. Previous studies have predominantly used verbal scenarios to investigate the effects of LBA, which has significantly limited the ecological validity of their findings.²¹³ This study employed the highly controllable virtual supermarket (VSM) setting which offers participants an immersive and interactive context, enables researchers to measure the actual brand choice (H1): Consumers will be more likely to devote attention to mobile ads than point-of-sale ads, but only in location incongruent situations.

(H2a): Consumers are more likely to devote attention to location-congruent ads than to location-incongruent ads.

H2b: Consumers who are confronted with a location-congruent ad will be more likely to choose the advertised brand than consumers who are confronted with a location-incongruent ad.

H2c: Consumers' attention to an ad positively affects their choice for the advertised brand in location-incongruent conditions.

In order to rule out cofounds, the following were included as covariates in the analysis of data: age, sex, experience with smartphone, and brand attitude.

Ad attention-ANCOVA revealed a significant main effect of media type: Supporting Hypothesis 1, in location incongruent situations, mobile ads were better recognized than display ads. In location –congruent settings, there was no difference between the recognition of mobile and display ads.

Brand choice- Regression analysis was used for testing Hypotheses 2b and 2c. In line with Hypothesis 2b, the analysis revealed that consumers who were exposed to location-congruent ads were more likely to choose the advertised brand (72.2%). Moreover, supporting Hypothesis 2c, ad recognition positively affected consumers' choice for the advertised product brand. Specifically, consumers who were better able to recognize the ad were more likely to buy advertised product.

Moderated Mediation Analysis- A moderated mediation analysis was conducted to test the proposed model that the advantages of LBA rely on location congruency, and that advantages of a mobile medium only take effect in case of location-congruent advertising. Results revealed that medium-type had a positive effect on ad recognition, indicating that

consumers recognized mobile ads better than display ads (Hypothesis 2a). Moreover, the interaction of media type and location-congruency significantly affected consumers' ad recognition. Ad recognition and location-congruency positively affected consumers' choice of the advertised brand. Medium type positively affected brand recognition, which in turn had a positive effect on consumers' choice for the advertised brand, but only when the ad was shown in a location- incongruent situation (Hypothesis 1). In location-congruent situations, the indirect effect of medium type vanished.

The main conclusion of this study, which is aimed at disentangling the two constructs underlying the effectiveness of LBA, is that effects of location congruence seem to overrule the influence of medium type.

Independent of the medium through which the ad was presented (mobile or stationary display), consumers exposed to a location- congruent ad were more likely to choose the advertised brand than consumers exposed to location-incongruent ads. However, in location –incongruent situations, a mobile appeared to be more effective than a point-of-sales ad, by directing consumers' attention to the advertisement. The results confirm that ad attention positively affects brand choice when the ad is presented at a different location than the advertised product. The merits of mobile advertising thus seem to lie in the fact that consumers are more likely to pay attention to an advertisement that is received in a location-incongruent situation. In other words, the closer the sensual personalization of the ad, the better the chance of attention.

This study has established that the advantages of (location- based) mobile advertising, compared to more traditional point-of-sales ads, do not lie in location-congruent

situations. That is, consumers' attention was not affected by the medium in location-congruent settings.

Future research can explore whether the advantage of location-congruent ads over location-incongruent ones also holds for more impulse product purchase (not pre-planned as in this study), and whether it may stimulate consumers differently to buy a certain item that they were not planning to purchase in advance. Furthermore, future research could extend the concept of location-congruency to indoor vs. outdoor advertising. It will be useful to test the advantage of mobile vs. display advertising for consumers passing by a store in which the advertised brand is offered. For future research, a larger, even more representative sample will give further insight to disentangle the two constructs that underline the effects of LBA. Although the present results show that the effects of medium type are overruled by location congruency, mobile phones seem to have the advantage over displays in drawing attention to an ad.

This study explored the impact of in-store, point-of-purchase promotion on sales in a comparative study between a new and a mature product in the same product category.²¹⁴

The impact on sales is a direct consequence of consumer's brand choice (patronage) in response to the point-of-purchase promotion.

H1: Increase in display size will increase sales significantly

H2: Product placement in sighting (within category) will increase sales significantly

H3: Using point-of-sale materials on shelf will have significant role in increasing sales

H4: Changes in display in terms of size, location and point-of-sale materials will increase the sales of new product as compared to mature product.

Using non-probability sampling method of convenience sampling primary data of the unit sales of each product pre-and post- in-store display experiment was analyzed using the paired sample correlations and paired t-test through SPSS and resulting in the validation of hypotheses 1-3 and the rejection of the fourth hypothesis (H4).

In summary, the study has demonstrated that in-store displays (ISD) impact positively on favourable consumer response which is translated to increase brand patronage which ultimately reflects as significant increase in sales figures (units and value).

This study seeks to acquire insight into the perceived value and responses towards sales promotions-by conducting a survey amongst a sample of 600 South African consumers.²¹

The empirical results provide insights into the development of sales promotion strategies to successfully enhance consumers' perceived value and to induce a positive response.²¹

A quantitative strategy of inquiry in the form of a survey research was used for this study, and a structured, three-part, questionnaire was the measurement instrument.

A quota sample was specified for this study, focused specifically on middle-and upper-class consumers and set on the basis of income, living standards and ethnicity.

The study adopted Cronbach's alpha to analyse the reliability of the measures and the results showed that all the scales had good Cronbach's alpha reliability scores (i.e above 0.70)

The sample clearly met the requirements of the quotas set for the sample. Overall, utilitarian benefits (4.42) were regarded as being less important than the hedonic benefits (4.02), although both these dimensions were regarded as being relatively important.

Within the utilitarian dimension, “value” was regarded as being the most important (4.51) issue, followed by “quality” (4.47) and lastly, “convenience” (4.28). With regard to “value”, the respondents felt that sales promotions should save them money (4.69), and offer a good deal (4.66). Quality should be addressed by providing a higher quality product at the same price (4.64), and allowing customers to afford a better than usual product (4.53). The convenience factor is associated with the fast and easy use (4.51), and guidance of consumers on selecting the best brands. (4.45).

Within the hedonic dimension, “value expression” was regarded as being the most important (4.29), followed by “exploration” (3.91), and lastly, “entertainment” (3.86). “Value expression” is concerned with customer satisfaction (4.49), and feeling pleased about the purchase decision (4.2); while “exploration” is associated with the experience of stimulus, and guidance on which brands or products to consider. With regards to “entertainment”, the respondents felt that sales promotions should be fun to participate in (4.23), as well as promising (4.02). This verifies the findings by other studies which suggested that offering consumers hedonic or emotional benefits, such as pleasure seeking, variety, and expression of values could indeed influence buying behavior.

Most of the respondents preferred to be informed about sales promotions via traditional broadcast and print media-television (82.5%), newspapers (66.4%), magazines (65.9%), radio (63.4%) outdoor advertising (59.7%), and mall-media (56.3%), rather than via online-media (46.0%) and via social, media (42.8%)

Differences in preferences were in particular evident amongst gender and ethnic groups. Males preferred newspapers significantly more than females did; while females' preferences lay with magazines and malls. Respondents with African home languages preferred television as their medium of choice slightly more than the Afrikaans and English respondents did. As expected, African respondents also selected transit media and taxis, as their preferred options, compared with Afrikaan-speaking and English speaking -respondents.

While most respondents agreed that sales promotions usually influence them, buying behavior seems to be mostly associated with product trials, with 61.4% of the respondents agreeing with the statement; which is in agreement with the notion that sales promotion can effectively be used to influence consumers to buy a product that they have never tried before. Sales promotions also seem to be associated strongly with brand switching (57.0%) and purchase acceleration (56.7%). However, sales promotions are to a lesser extent associated with stockpiling (52.7%) and brand loyalty (48.0%).

The differences between demographic groups, in terms of the perceived impact of sales-promotion techniques on buying behaviour are as follows:

- a) Most respondents younger than 25years (52.8%), agreed that sales promotions influenced their brand loyalty, compared with 35.9% of those respondents older than 25years ($P= 0.004$). This suggests that the application of suitable sales-promotion techniques can actually result in increased brand loyalty, when targeting younger consumers.
- b) The majority of respondents (63.7%) between ages 26-35 indicated that sales promotions could influence them to buy more quantities of the same (product

stockpiling); while older respondents aged between 36-50, and those older than 50 years, seemed to be increasingly less convinced with, respectively 54.9% and 45.7% agreeing with the statement. Interestingly, respondents younger than 25 had similar reservations as did those respondents older than 50 years (40.4%) (P=0.001).

- c) Sales promotions, leading to product trials, seemed to be less effective amongst respondents older than 50 years (47.8%), than they did amongst respondents between 36 and 50 years (58.2%), and with those younger than 35 years (65.1%) (P= 0.037).

The study also revealed that each sales promotion technique is more associated with specific buying behaviors: (1) *Stockpiling and brand loyalty* are associated with bonus packs. The impact of bonus packs on reminder-impulsive buying or stockpiling-to meet future needs-is inline with the findings of previous studies (2) *Brand switching* is associated with coupons, free samples and point of sale displays; (3) *Product trials* seemed to be most associated with point-of- sale displays and free samples, (4) *Purchase acceleration* accomplished via competitions and live events was not strongly significant.

With regards to demographic profiles, the study revealed significant differences in consumers' responses and their valuation of sales promotions, preferences with regard to products and the services promoted, and the marketing communication methods used for promotional messages.

Practical Implications for Marketers: (a), define clearly the specific targeted consumer segment. (b), set the objectives of the sales promotion. (c), determine the most-appropriate sales promotion technique to achieve the objectives.

If the object is to influence consumers to try a new product, sampling should be used; while loyalty rewards and bonus, packs might be more successful in getting consumers to buy more quantities of the same product. Coupons, free sampling and point-of-sales

displays can be used to induce brand switching, while competitions and live events might influence consumers to buy a product sooner than they had planned.

Further research can focus on other sales promotion techniques and different types of trade promotion; investigate how the types of sales-promotion techniques match the value dimensions, or the benefits expected; as well as explore the reasons behind the preferences of the marketing communication methods used to deliver promotional messages.

This study evaluated the effectiveness of three sales promotional schemes namely discount, price off and buy one get one, free on consumer buying behaviour, measuring the effect of these sales promotional schemes on seven buying behaviour responses like visit to store, purchasing the product, purchase acceleration stockpiling, spending more, trial and brand switching. Four hypothesis were developed.²¹⁵

H1: Discount is very effective in inducing customer response like (a) visit to store (b) purchase of the product, (c) purchase earlier than planned, (d) stockpiling, (e) spending more per visit (f) product trial and (g) brand switching

H2: Price off is very effective in inducing customer responses like those listed under H1 above

H3: Buy-one-get-one-free is very effective in inducing customer response like those listed under H1 above

H4: There is no difference among all the three sales promotion schemes to induce buying behaviour among the customers.

Data was collected from 152 respondents, chosen by non-probability convenience sampling method, through a structured questionnaire and respondents behavioural responses to each of the three sales promotion schemes being investigated was collected using a 5-point Likert Scale

Discount promo was found effective in inducing store visit, purchasing and buying earlier than planned, but not effective in inducing more spending, stockpiling, brand switching and product trial. For the discount promotional scheme, H1(a), H1 (b) and H1(c) hypothesis has been accepted while H1(d), H1(e), H1(f) and H1(g) have been rejected.

Price-off was found to be effective in inducing store visit, purchasing and buying earlier than planned, but not effective in inducing move spending, stockpiling, brand switching and product trial. For price-off promotional scheme, H2(a), H2(b) and H2(c) have been accepted while H2(d), H2(e), H2(f) and H2(g) have been rejected.

For price-off promotions, it is very easy for customers to understand the readily available price of the product and compare it with the reference price they have in mind. Hence the instant value of the incentive is vivid and a good motivator to visit the store, purchase the product and can be attractive enough to make customers buy earlier than planned.

Buy-one-get-one-free was effective in inducing store visit and purchasing but not effective in inducing respondents to buy earlier than planned, more spending, stockpiling and product trial. For the buy-one-get-one-free (BOGOF) promotional scheme, the results of the Friedman's t-test make H3(a) and H3(b) acceptable while H3(c), H3(d), H3(e), H3(f) and H3(g) are rejected.

All the three sales promotion schemes namely, discount, price-off and BOGOF have been found very effective to attract the customers to the retail store and generate sale of the product. Discount and price-off are also effective in stimulating purchase acceleration. The interesting finding in this study is that all the three sales promotional schemes are less effective to prompt stockpiling, product trial, spending more and brand switching. This suggests that branded apparel manufacturers and retailers need to employ other sales promotion schemes like coupon and loyalty cards in combination with the three tested schemes in this study in order to meet their sales objectives.

2.4 Synthesis of Gaps in Literature Reviewed

Most of the literature accessed focused more on studies relating to point-of-purchase promotions and consumer goods and their impacts on the elements of brand equity, and brand choice. Most of these studies were carried out in more developed economic and enlightened marketing environments. The few studies focusing on the impact of point-of-purchase promotions on the basic processes leading to the choice of branded drugs were also carried out in relatively more organized socio-economic environments with higher literacy levels and well-regulated drug distribution, advertising and sale controls systems.

Moreover, there has been limited research on POP promotions and their influence on choice of consumer goods in an emerging market like Nigeria

Scanty literature exists for studies focused on evaluating the influence of point-of-purchase promotions on patronage (choice) of branded drugs in developing/under-developed socio-economic environments like Nigeria; where there is a high prevalence of illiteracy, self-medication, open and unrestricted access to both prescription and non-

prescription (OTC) drugs. This is largely due to poor regulatory systems and weak enforcement institutions for the control of drug importation, manufacturing, distribution and sale.

Furthermore, a wide research gap exist for studies in such environments like Nigeria, to gain deeper insight into influences of point-of-purchase promotions on decision making process by buyers/consumers of drugs when selecting the brand of drug to buy, especially the influence of point-of-purchase promotions at the cognitive, attitudinal and behavioural levels of decision making process.

Research gaps also exists for studies in these third-world/under-developed socio-economic environments like Nigeria, to gain deeper insight on the difference in the impact of point-of-purchase promotions on brand patronage (choice) of branded prescription drugs versus branded non-prescription (OTC) drugs; as well as the difference in impact between front-of-store POP promotions and in-store POP promotions on choice of brands of drugs to buy at the drug retail store level.

Certainly, there is a paucity of studies and literature on the real value of point-of-purchase promotions as a strategic component of the promotions mix as well as examining to what extent POP promotions deliver good return-on-investment within the Nigerian pharmaceutical marketing industry.

Focusing this study on the Nigeria territory aims to fill some of these major gaps in research and literature.

Conceptual Model Specification:

The figure below presents the model specification for this study

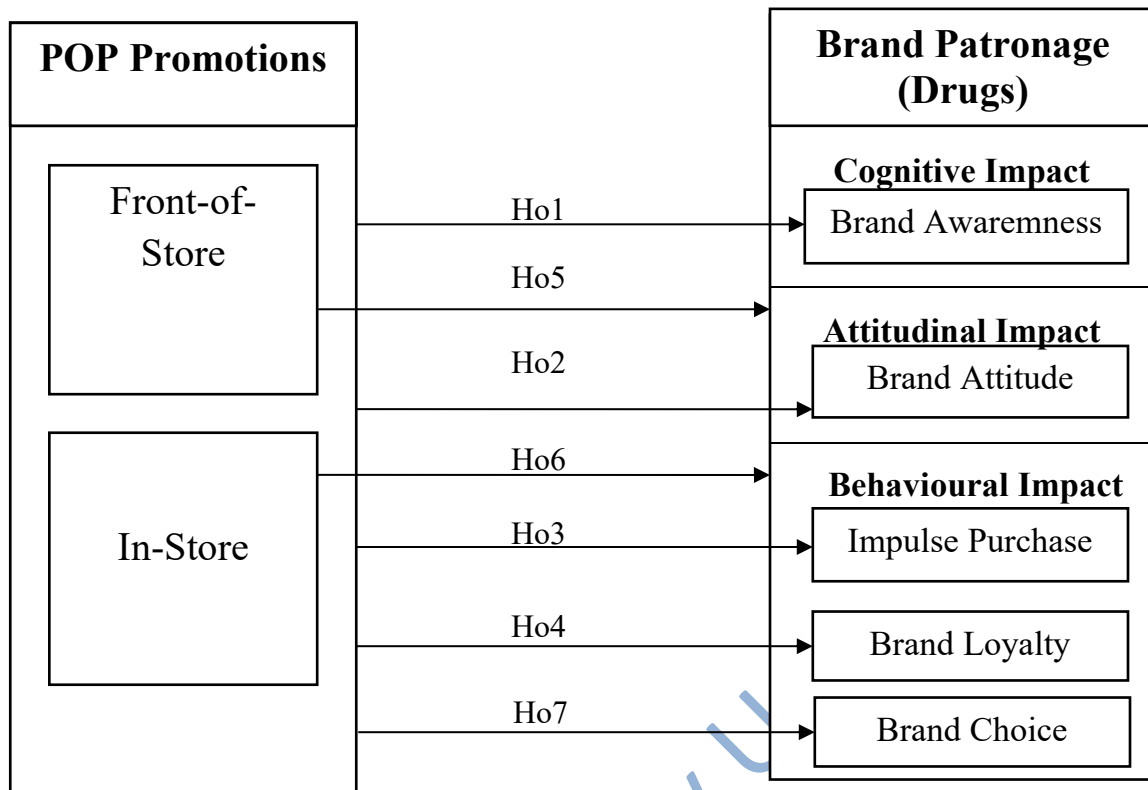


Figure 2.9: Conceptual Model Specification of the Influence of Independent Variables on Dependent Variables Under Test.
Source: Reseachr's Abstraction/Conception (2020)

Endnotes

1. G. Consuela-Madalina, P.V. Lorin & G.I. Raluca, "Assessing the effectiveness of OTC advertising on artificial tear drops from an experiential marketing perspective", **Romanian Journal of Opthamology**, 63(3), July-September, 2019, 297-305
2. D.K. Guatam & S.K. Shrestha, "Impact of brand equity on purchase intention of smart phones", **Asian-Pacific Journal of Business**, 9(1), 2018, 1-18
3. M.N. Khan, M. Rizwan, F. Islam, Z. Aabdeen & M. Rehman, "The effect of brand equity of mobile phones on customer satisfaction: An empirical evidence from Pakistan", **American Journal of Business and Society**, 1(1), 2016, 1-7
4. K.L. Keller, *Conceptualizing, measuring and managing customer based brand equity*, **Journal of Marketing**, 57(1), 1993, 1-22
5. S.M. Shah, M. Adeel, F. Hanif & M. Khan, "The impact of brand equity on purchase intentions with moderating role of subjective norms", **Universal Journal of Industrial and Business Management**, 4(1), 2016, 16-24

6. K.L. Keller & T.O. Brexendorf, "Measuring brand equity" **Handbuchmarkenführung**, 2019, 1409-1429. <https://doi.org/10.1007/978-3-658-13342-972>.
7. <https://www.mindtools.com/pages/articles/keller-brand-equity-model.html>
8. M. Yu, F. Liu, J. Lee & G. Soutar, "The influence of negative publicity on brand equity: attribution, image, attitude and purchase intention", **Journal of Product & Brand Management**, 2018. <https://doi.org/10.1108/JPBM-01-2017-1396>
9. M. Doddy, J. Ali, A. Hindarjo & C. Ratnasih, "The influence of brand awareness, perceived quality, brand association, brand loyalty on brand equity of Zakat Institutions" **ICETLAWBE 2020, September 26, Bandar, Lampung, Indonesia** DOI:10.4108/eai.26-9-2020.2302683
10. H. Park & S. Park, "The effects of emotional image on customer attitude", **Journal of Asian Finance, Economics and Business**, 6(3), 2019, 259-268 <https://doi.org/10.13106/jafeb.2019.vol6.no3.259>
11. N.H. Um & S. Kim, "Determinants for effects of negative celebrity information: when to terminate a relationship with a celebrity endorser in trouble", **Psychology & Marketing**, 33(10), 2016, 864-874
12. P.S. Coelho, P. Rita, & Z.R Santos, "On the relationship between consumer brand identification, brand community, and brand loyalty", **Journal of Retailing and Consumer Services**, 43, 2018, 101-110 DOI: 10.1016/j.jretconser.2018.03.011.
13. I. Alnawas & A. Shadi, "Exploring the role of brand identification and brand love in generating higher levels of brand loyalty", **Journal of Vacation Marketing**, 22(2), 2016, 111-28.
14. M. Mody & L. Hanks, "Consumption authenticity in the accommodation industry: The keys to brand love and brand loyalty for hotel and Airbnb", **Journal of Travel Research**, 59(1), 2020, 173-189.
15. V. Ozcifci, "Determining the impact of brand equity on consumer purchase intention", **International Journal of Social Sciences and Education Research**, 3(4), 2017, 1164-1177
16. M. Kalyanasundaram & T. Sangeetha, "A study on consumer brand preference of refrigerator among working women in Truichirappalli town, special reference to Thiruvarambur zone". **International Journal of Research and Analytical Reviews (IJRAR)** 6(1), 2019, 170-175
17. Jennifer A. Goodie-Okio, "Buzz marketing and brand performance of pharmaceutical companies in South-South, Nigeria", **International Academic Journal of Management and Marketing Annals**, 8(1), February, 2020, 71-85

18. A.H. Oh & H.Y. Park, “*The effects of airline’s professional models on brand loyalty: Focusing on meditating effect of brand attitude*”, **Journal of Asian Finance, Economics and Business**, 7(5), 2020, 155-166
19. V. D. Tran, V.N.L. Vo & T.Q. Dinh, “*The Relationship between brand authenticity, brand equity and customer satisfaction*”, **Journal of Asian Finance, Economics and Business**, 7(4), 2020, 213-221 <https://doi.org/10.13106/jafeb.2020.vol7.no4.213>
20. A. Prakash & A. Sharma, “*Dimensions of Point-of-Purchase factors in impulse buying of women’s skincare cosmetics in India*”. **Journal of Business and Retail Management Research (JBRMR)**, 10(2), 2016, 30-43.
21. A.T. Roux, “*South African consumers’ views and responses to sales promotions*”, **J. SocSci**, 41 (2), 2014, 243-251.
22. S. Baohong, A. N. Scott & S. Kannan, “*Measuring the impact of promotions on brand switching when consumers are forward-looking*”, **Brandeo**, 2009 <http://www.brandeo.com/node/1134> 6(5), May 2017
23. K. Kathuria, K. Kumar, N. Kumari & K. Kumar, “*Point-of-Purchase and consumer purchase process for agriculture-based products: A study of Chandigarh and Shimla*”, **Journal of Pharmacognosy and Phytochemistry**, 8(5), 2019, 182-184.
24. C. Kathiravan, P. Mahalakshmi & V. Palanisamy, “*Online impulse buying behavior of consumer triggered by digital marketing*”, 2, 2019, 648-653 <https://doi.org/10.35940/ijre.b1124.0782s619>
25. P. Verma, “*The effect of brand engagement and brand love upon overall brand equity and purchase intention; A moderated and mediated model*”. **Journal of Promotion Management**, 2020. DOI:1080/10496491.2020.1809591
26. Z. Shahid, T. Hussian & F. aZafar, “*The impact of brand awareness on the consumers’ purchase intention*”, **Journal of Marketing and Consumer Research**, 33, 2017
27. C. Rodrigues & P. Rodrigues, “*Brand love matters to millennials; the relevance of mystery, sensuality and intimacy to neo-luxury brand*”, **Journal of Product and Brand Management**, 28(7), 2019, 830-848. <https://doi.org/10.1108/JPBM-04-2018-1842>
28. D. Jimenez- Castillo & R. Sanchez- Fernandez, “*The role of digital influencers in brand recommendation; examining their impact on engagement, expected value and purchase intention*”, **International Journal of Information Management**, 49, 2019, 366-376
29. C. Prentice, X.Y. Han, L.L. Hua & L. Hu, “*The influence of identity driven customer engagement on purchase intention*”, **Journal of Retailing and Consumer Services**, 47, 2019, 339-347 <https://doi.org/10.1016/j.jretconser.2018.12.014>

30. J. Kumar & J.K. Nayak, “Brand engagement without brand ownership; A case of non-brand owner community member”, **Journal of Product and Brand Management**, 28(2), 2019, 216-230
31. A.C. Moreira, N. Fortex & R. Santiago, “Influence of sensory stimuli on brand experience, brand equity and purchase intention”, **Journal of Business Economics and Management**, 18(1), 2017, 68-83.
32. J. Martins, C. Costa, T. Oliveira, R. Goncalves & F. Brance, “How smartphone advertising influences consumer purchase intention”, **Journal of Business Research**, 94, 2019, 378-387
33. J. He, & B.J. Calder, “The experimental evaluation of brand strength and brand value”, **Journal of Business Research**, 115, 2020, 194-202
34. N.S. Davcik, R. Vinhas da Silva, & J.F. Hair, “Towards a unified theory of brand equity: conceptualizations, typologies and avenues for future research”; BRUOIUL Business Research Unit (UNIDE-IUL), ISTCE Instituto Universitario de Lisboa, **Working Paper-14/02, FCT Strategic Project UI 315PEst-OE/EGE/UIO315**, 2014 Online: <http://bru-unide.iscte.pt/>
35. O. Iglesias, S. Markovic, & J. Rialp, “How does sensory brand experience influence brand equity? Considering the roles of customer satisfaction, customer affective commitment, and employee empathy”, **Journal of Business Research**, 96, 2019, 343-354
36. K. Sultan, S. Akram, S. Abdulhaliq, D. Jamal & R. Saleem, “A Strategic approach to the consumer perception of brand on the basis of brand awareness and brand loyalty: A comparative analysis of Coke & Pepsi brand in Erbil KRI”, **International Journal of Research in Business and Social Science** 8(3), 2019, 33-44 <http://doi.org/10.20525/ijrbs.v8i3.259>
37. D.A. Aaker, “Are brand equity investments really worthwhile?” **Admap**, 1991, 14-17
38. D.L. Romanello, O. Freire, F. Quevedo- Silva & E.B.A. Santos, “Brand equity and brand value: proposition and validation of a model”, **Brazilian Journal of Marketing**, 19(3), July/Sept. 2020, 496- 514. <https://doi.org/10.5585/remark.v19i3.17261>
39. M. Solomon, A. Hughes, B. Chitty, G. Marshall, & E. Stuart, *Marketing: Real people, Real choices*: 17-19 ed. (Upper Saddle River, N.J.: Pearson Prentice Hall), 2017
40. Business Dictionary Online (A): http://www.businessdictionary.com/definition/brand_awareness.html
41. D.A. Aaker, *Managing Brand Equity*, (Ontario: The Free Press), 1991, 62-63
42. Wikipedia: en.wikipedia.org/wiki/Brand_awareness

43. H. Han and S.S. Hyun, “*An extension of the four-stage loyalty model: The critical role of positive switching barriers*”, **Journal of Travel and Tourism Marketing**, 29(1), 2012, 40-56
44. D.K. Guatam & S.K. Shrestha, “*Impact of brand equity on purchase intention of smart phones*”, **Asian-Pacific Journal of Business**, 9(1), 2018, 1-18
45. K.C deSilva, A.A.L. Madhushani & S.D.S. Jayalath, “*Impact of brand loyalty on customer purchase intention: An empirical study on Basketball shoe brand of Adidas, Nike and Puma*”, **Journal of Physical Education and Sports Management**, 7(2), 2020, 17-25 DOI:10.15640/jpesm.v7n2a3
46. Merriam-Webster Dictionary, Online: <http://www.merriam-webster.com/dictionary/household%20name>
47. H.O. Kegoro & M. Justus, “*Critical review of literature on brand equity and customer loyalty*”, **International Journal of Business Economics and Management**, 7(3), 2020, 146-165
48. J. Sasmita & M.S. Norazah, “*Young consumers’ insight on brand equity: Effects of brand association, brand loyalty, brand awareness and brand image*”, **International Journal of Retail and Distribution Management**, 2015
49. N. Suwarnajote & W. Mekhum, “*Factors contributing to customers’ buying behavior at pharmacy? Does the brand image mediate the customer buying behavior in Thailand*”, **Systematic Reviews in Pharmacy**, 11(4), 2020, 127-134
50. J.N. Sheth & C.W. Park, “*A theory of multidimensional brand loyalty*”, **In: NA-Advances in Consumer Research**, eds., Scott Ward and Peter Wright, Ann Arbor, MI: Association for Consumer Research, 1, 1974, 449-459
51. J.U. Islam, Z. Rahman, & L.D. Hollebeek, “*Consumer engagement in online brand communities: A solicitation congruity theory*”, **Internet Research**, 28(1), 2018, 23- 45 DOI: 10.1108/IntR-09-2016-0279.
52. J. Liao, D. Yang, H. Wei & Y. Guo, “*The bright side and dark side of group heterogeneity within online brand community*”, **Journal of Product and Brand Management**, Vol. Ahead-of-Print No. Ahead-of-Print, 2019 DOI. 10.1108/JPBM-08-2018-1972
53. J.U. Islam, Z. Rahman & L. Hollebeek, “*Personality factors as predictors of online consumer engagement: An empirical investigation*”, **Marketing Intelligence and Planning**, 35(4), 2017, 510- 528. <https://doi.org/10.1108/MIP-10-2016-0193>
54. A.B. Jubril, M.A. Kwarteng, M. Chovancova & N. Vykydalova, “*The role of the social media brand community on consumers’ purchasing attitude*”, **InECSM 2019 6th**

55. A.A. Mahrous & A.K. Abdelmaaboud, “Antecedent of participation in online brand communities and their purchasing behavior consequences”, **Service Business**, 11(2), 2017, 229- 251. DOI: 10.1007/ s11628-016-0306-5.
56. R.K. Srivastava & S. Wagh, “Factors impacting consumer behaviour for pharmaceutical products”, **Int. J. Healthc Manag**, 2017, 1-9 DOI: 10.1080/20479700.2017.1348004
57. M.W. Temechewu & M. Gebremedhin, “Factors affecting consumers’ purchase decision of over-the-counter (OTC) medicines: Empirical evidences from community pharmacies in Ethiopia”, **Journal of Medicine Physiology and Biophysics**, 65, 2020
58. S.D. Cirstea, M.C. Teselios & A.I. Iancu, “Analysis of factors that influencing OTC purchasing behavior”, **Springer International Publishing International Conference on Advancement of Medicine and Health Care through Technology**, 59, 2017
59. A. Dadhich & K. Dixit, “Consumer selection and buying behavior towards over-the-counter (OTC) medicine”, **Apeejay-Journal of Management Sciences and Technology**, 4(2), 2017
60. M. Dimoula, T. Fotiadis D. Folinas & A.Gasteratos, “Confronting pharmaceutical products selection criteria: A comparative survey of consumer in Greece, France and Bulgaria”, **International Journal of Business and Economic Sciences Applied Research (IJBESAR)**, 11(2), 2018,23-35
61. K. Slaton, D. Testa, S. Bakhshian & A.M. Flore, “The small, inventory free retail format: The impact on consumer- based brand equity and purchase behaviour”, **Journal of Retailing and Consumer Services**, 57, 2020, 102246
62. H. Harcourt, “Brand equity and brand performance of retail pharmaceutical firms in Rivers State of Nigeria” **International Journal of Entrepreneurship and Business Innovation**, 3(1), 2020, 100-112
63. D.S. Ghattas & G.M. Al-Abdallah, “Factors affecting customer selection of community pharmacies: The mediating effect of branded pharmacies and the moderating effect of demographics”, **Management Science Letters**, 10, 2020, 1813-1826
64. D.P Kevrekidis, D. Minarikova, A. Markos, I. Malovecka & P. Minarik, “Community pharmacy customer segmentation based on factors influencing their selection of pharmacy and over-the-counter medicines” **Saudi Pharmaceutical Journal**, 26(1), 2018, 33-43
65. D. Lovin, M. Raducan, A. Capatin & N. Cristache, “Sustainable knowledge transfer from business simulations to working environments: Correlational vs. Configurational approach”. **Sustainability** 2021, 13, 2154 <https://doi.org/10.3390/su13042154>

66. M. Stefan, V. Andreiana, I.A. Tanasescu & G. Stoica, "*Impact of television advertising on the impulse to purchase over-the-counter medicine*", **Annals of "Dunarea de Jos" University of Galati, Fascicle, Economics and Applied Informatics, Years XXVII**, 3, 2021 DOI: <https://doi.org/10.35219/eai15840409239>
67. M.F. Mudzakkir & I.N. Nufarida, "*The Influence of brand awareness on brand trust through brand image*". **PROCEEDING International Conference on Accounting, Business & Economics, Indonesia. (December 10th-11th,2015)** Article in **SSRN Electronic Journal**, January, 2015 DOI:10.2139/ssrn.2670597.
68. S.K. Shekhar, T.P. Jose, & K. Rehin, "*Consumer buying behaviour and attitude towards pharmaceuticals*" **International Journal of Research in Pharmaceutical Sciences**, 10(4), 2019, 3392- 3397.
69. A. Zia, S. Younus & F. Mirza, "*Investigating the impact of brand image and brand loyalty on brand equity: The mediating role of brand awareness*", **International Journal of Innovation, Creativity and Change**, 15(2), 2021
70. B. Popp & H. Woratschei, "*Consumers' relationships with brands and brand communities- The multifaceted roles of identification and satisfaction*", **J. Retail. Consum. Serv.**, 35, 2017, 46- 56. DOI.org/10.1016/j.jretconser.2016.11.006
71. V. Davvetas & A Diamantopoulos, "*Regretting your brand-self? The moderating role of consumer-brand identification on consumer responses to purchase regret*", **J.Bus. Res**, 80, 2017, 218- 227 DOI.org/10.1016/j.busres.2017.04.008
72. A. Eryandra, B. Sjabadhyni & M.D. Mustika, "*How older consumers' perceived ethicality influences brand loyalty*", **SAGE Open**, April- June 2018, 1- 5. DOI: 10.1177/2158244018778105.
73. N.M. Pujari, A.K Sachan, P. Kumari & P. Dubey, "*Study of consumer's pharmaceutical buying behaviour towards prescription and non-prescription drugs*", **Journal of Medical and Health Research**, 1(3), 2016, 10-18
74. H. Sarah, "*How pervasive is brand recognition in the pharmaceutical industry?*" **xtalks News – pharmaceutical marketing news**, January 19, 2017. Available at: <https://xtalks.com/brand-recognition-pharmaceutical-industry>
75. S. Villaverde, D. Gavilan & M. Avello, "*Utilizing the health belief model to predict the purchase intention of over-the-counter diet drugs*", **Millenium**, 2(5), 2018, 35-42 DOI: <https://doi.org/10.29352/mill0205.03.00168>
76. G. Mortimer, L. Grimmer & S.M. Fazal-e-Hasan, "*Examining consumer purchase intentions of non-prescription medicines in supermarkets and community pharmacies*", **International Journal of Pharmacy Practice**, 27, 2019, 232-240

77. S. Thomas, A. Jadeja, K. Vaghela & R. Shreevastave, "Investigating the consumer attitude toward brand and purchase intention within the context of cause-related marketing campaign for a pharmacy product", **Int. Rev Public Nonprofit Mark**, 2021 <https://doi.org/10.1007/s12208-021-00327-x>
78. C. Ozgen & S. Reyhan, "The effect of consumer multiple perceived value on the purchase intention: A study of sports nutritional supplements", **African Education Research Journal**, 8(2), 2020, 194-200 DOI:10.30918/AERT.82.20.045.
79. P. Foroudi, Z. Jin, S. Gupta, M.M. Foroudi & P.J. Kitchen, "Perceptual components of brand equity: Configuring the symmetrical and asymmetrical paths to brand loyalty and brand purchase intention", **Journal of Business Research**, 2018, <http://doi.org/10.1016/j.jbusres.2018.01.031>
80. S. Sagic, M. Kocic & K. Radakovic, "Creating consumer loyalty in the field of using over-the-counter products", **Economic Themes**, 57(1), 2019, 1-20.
81. N. Mekawie & A. Hany, "Understanding the factors driving consumers' purchase intention of Over-the-Counter (OTC) medications using social media advertising in Egypt", **Procedia Computer Science**, 164, 2019, 698-705.
82. A. Dadhich & K. Dixit, "Consumer perception and brand loyalty towards over the counter brand medicines of major pharmaceuticals companies with special reference to Rajasthan", **International Journal of Engineering Technologies and Management Research**, 4(9), 2017, 27- 38. <http://doi.org/10.2913/ijetmr.v4.i9.2017.97>
83. M.D. Forecast, "Over-the-Counter (OTC) drugs market by product type (Analgesics, cough, cold and flu products, dermatological products, gastrointestinal products, vitamins, minerals, weight loss products, sleep aids, ophthalmic products, smoking cessation aids, and other products.)", <http://www.marketdataforecast.com/market-reports/global-over-the-counter-drugs-market-509/>
84. M. Lee, K.W. King & L.N. Reid, "Factors influencing consumers' attitudinal and behavioral responses to Direct-to-Consumer and Over-the-Counter drug advertising." **Journal of Health Communication: International Perspectives**, 20(4), 2015, 431-444 DOI: 10.1080/10810730.2014.965367.
85. M. Memisoglu, "Marketing communications for over-the-counter drugs and non-pharmaceutical products: the professionals' perspective", **International Journal of Healthcare Management**, 2017 DOI: 10.1080/20479700.2017.1417075.
86. R. Habash & H. Al- Dmour, "Factors influencing the intention to buy over-the-counter medicines: Empirical study", **International Journal of Pharmaceutical and Healthcare Marketing**, 14(2), 2020, 305-323 DOI: 10.1108/IJPHM.07.2019.0050.

87. B. Abraham, P. Sreeja, D. Sarju & S. San, “*Study of self- medication patterns and perspectives of over-the-counter (OTC) drugs*”, **International Journal of Pharmacy Research and Review**, 14(11), 2015, 30-34
88. M.A. Murshid & Z. Mohaidin, “*Physicians’ perceptions toward brand medicine and its effect on prescribing*”, **Journal of Generic Medicines**, 13(4), 2017, 157-183.
89. M. Stros, N. Lee & D. Riha, “*A Model of prescription pharmaceuticals sales process*”, **Business Trends**, 7(2), 2017, 50- 62.
90. R. Arcaro, C.R. Pereira da Veiga, W. Viera da Silva & C. Pereira da Veiga, “*Attitude and purchase intention to generic drugs*”, **International Journal of Environmental Research and Public Health**, 18, 2021, 45-79
<https://doi.org/0.3390/ijerph18094579>
91. K.Z.K. Zhang & M. Benyoucef, “*Consumer behaviour in social commerce: A literature review*”, **Decision Support Systems**, 86, 2016, 95- 108. DOI: 10.1016/j.dss.2016.04.001
92. M. Ayub & M. Mustafa, “*Consumer buying behaviour of retail pharmacy industry with special references to Delhi and NCR*”, **International Journal of Management Studies**, 4(2), 2017, 1-17
93. B. K. Behe, P.T. Huddleston, K.L. Childs, J. Chen & Iago S. Muraro, “*Seeing through the forest: The gaze path to purchase*”, **PLoS ONE**, 15(10), 2020, e0240179
<http://doi.org/10.1371/journal.pone.0240179>
94. L.G.P. Rodrigues, “*Effect of in-store promotion on brand awareness: An exploratory study*”. **Master Thesis in International Marketing, Lund University School of Economics and Management**, 2010.
95. M. Memisoglu, “*Branding of prescription and non-prescription drugs.*” **Acta Pharma Sci.** 56(1), 2018. DOI: 10.23893/1307-2080.APS.05602.
96. M. M. Akbar, & W. Wymer, “*Refining the conceptualization of brand authenticity*”, **Journal of Brand Management**, 24(1), 2017, 1- 19
97. S. Fournier & C. Alvarez, “*Brands as a relationship partners: Warmth, competence, and in-between*”, **J. Consum. Psychol.** 22, 2017, 177-185.
<http://dx.doi.org/10.1016/j.jcps.2011.10.003>
98. P.Kotter & G. Armstrong, **Principles of Marketing (United Kingdom: Pearson Education)**, 2018
99. P. Huddleston, B.K. Behe, S. Minahan & R.T. Fernandez, “*Seeking attention: an eye-tracking study of in-store merchandising displays*”, **Int. J. Retail Distrib. Manag**, 43(6), Jan 1 2015, 561- 74

100. Abdul Bashiru Jibril, M.A. Kwarteng, M. Chovancova, & M. Pilik, “*The impact of social media on consumer brand loyalty: A mediating role of online based-brand community*”, **Cogent Business and Management**, 6, 2019, 1673640
101. N.F.M. Vaz & A. Parulekar, “*Branding and marketing in the pharmaceutical industry*”, (2021) DOI:10.4018/978-1-7998-3034-4.ch003
102. Dwivedi, L.W. Johnson, D.C. Wilkie & L. De Araujo-Gil, “*Consumer emotional brand attachment with social media brand and social media brand equity*”, **European Journal of Marketing**, 53(6), 2019, 1176- 1204.
103. A. Panigrahi & V. Joshi, “Developing brand equity through consumers: A study of pharmaceutical industry”, **Journal of Management Research and Analysis**, 7(4), October-December 2020, 159-166
104. R.W. Gakuya & N.K. Njue, “*Effects of differentiation strategy on customer loyalty among pharmaceutical companies in Nairobi County, Kenya*”, **European Journal of Management and Marketing Studies**, 3(2), 2018
105. R.W. Gakuya & D. Mbugua, “*Effects of cost leadership strategy on consumer loyalty among pharmaceutical companies in Nairobi County, Kenya*”, **European Journal of Management and Marketing Studies**, 2(2), 2018
106. Blog Posts, “*The importance of brand awareness in pharmaceutical industry*”, **Fuld + Company Competitive Strategy Consultancy**, <https://www.fuld.com/the-importance-of-brand-awareness-in-the-pharmaceutical-industry/>
107. C. Macit, N. Taner, G. Mercanoglu & F. Mercanoglu, “*Brand loyalty as a strategy for the competition with generic drugs: physicians’ perspective*”, **Journal of Developing Drugs**, 5(3), 2016, 159 . DOI: 10.4172/2329-6631.1000159.
108. P. Kotler, & G. Armstrong, *Principles of Marketing*, 16th ed., Global Edition, (Essex, England: Pearson Education Limited), 2016
109. V. Dickov & B. Kuzman, “*The Promotion of Pharmaceutical Products*”, **Research Gate**, 09/04/2015 <https://www.researchgate.net/publication/267722854>
110. N. Cristache, M. Nastase, R. Petrariu & M. Florescu, “*Analysis of congruency effects of corporate responsibility code implementation on corporate sustainability in bio-economy*” **Amfiteatru Economic**, 21(52), (2019): 536-553
111. T.A.T. Hoang, “*The impact of advertising and promotion on brand equity: The case of the FMCG supermarket industry in Hue*”, **VNU Journal of Science: Economics and Business** 32(4), 2016, 49-58

112. A. Panigrahi, K. Aware & A. Patil, "Application of integrated marketing communication in pharmaceutical industry", **Journal of Management Research and Analysis**, 5(2), April- June 2018, 133-139 DOI: 10.18231/2394-2770.2018.0021.
113. A. Owusu, "Marketing communications process on the pharmaceutical market in Ghana". **Int. J. Acad Ros in Bus & Soc. Sciences** 7(2), 2017, 256-273.
114. M. Dahl & A. Johnsson, "Extending the understanding of sales promotion's influence on brand knowledge – A quantitative study", **Masters Thesis, Linnae University, Sweden**, 2015
115. M. Mendez, M. Bendixen, R. Abratt, Y. Yurova & B. O'Leary, "Sales promotions and brand loyalty: Some new insights", **International Journal of Education and Social Science**, 2(1), January 2015, 103-11.
116. S.K. Sinha & P. Verma, "Impact of sales promotion's benefits on brand equity: An empirical investigation", **Global Business Review**, 19(6), 2018, 1-18
117. P. Kotler, G. Armstrong, with M.O. Opresnik, *Principles of marketing*. 17th Ed., Global Edition (Harlow, UK: Pearson Education Limited) , 2018
118. S. Hussain, G. Saheed & A. Hussian, "Factors determining, physicians' loyalty to pharmaceutical brands in Peshawar" **City University Research Journal**, 6(2), July 2016, 295-310.
119. M. Johnen & O. Schnittka, "When pushing back is good: The effectiveness of brand responses to social media complaints", **Journal of the Academy of Marketing Sciences**, 2019, 1- 21.
120. K. Kasemsap, "The roles of social media marketing and brand management in global marketing", **In Social Media Marketing: Breakthroughs in research and practice**, 2018, 425- 453. IGI Global. DOI: 10.4018/978-1-5225-5637-4.ch021
121. U. Sehlstedt, N. Bohlin, F. de Mare, et al., "Embracing digital health in the pharmaceutical industry", **Int. J. Healthc Manag**, 9(3), 2016, 145-148. DOI:10.1080/20479700.2016.1197513.
122. H. Akrouf & G. Nagy "Trust and commitment within a virtual brand community: The mediating role of brand relationship quality", **Information and Management**, 2018 DOI: 10.1016/j.im.2018.04.009.
123. E. Bigne, L. Andreu, B. Hernandez & C. Ruiz, "The impact of social media and offline influences on consumer behaviour: An analysis of the low-cost airline industry", **Current Issues in Tourism**, 21(9), 2018, 1014-1032.

124. T. Gong, "Customer brand engagement behaviour in online brand communities", **Journal of Services Marketing**, 32(3), 2018, 286-299 DOI: 10.1108/JSM-08-2016-0293.
125. N. Hansen, A.K. Kupfer & T. Hennig- Thurau, "Brand crises in the digital age: The short-and long-term effects of social media firestorm on consumers and brands", **Int. Journal of Research in Marketing**, 35(4), 2018, 557-574 DOI: 10.1016/j.ijresmar.2018.08.001.
126. P.L. Hsieh & S.L. Wei, "Relationship formation within online brand communities: Bridging the virtual and the real", **Asia Pacific Management Review**, 22(1), 2017, 2-9 DOI: 10.1016/j.apmr.2016.10.008.
127. W. Tafesse & A. Wien, "Implementing social media marketing strategically: An empirical assessment", **Journal of Marketing Management**, 34, 2018, 732-749. DOI: 10.1080/0267257X.2018.1482365.
128. Dwivedi, L.W. Johnson, D.C. Wilkie & L. De Araujo-Gil, "Consumer emotional brand attachment with social media brand and social media brand equity", **European Journal of Marketing**, 53(6), 2019, 1176- 1204.
129. B. Agrawal & Y. Mandhanya, "Promotional strategies for Indian pharmaceutical companies in the era of digital marketing", **Pacific Business Review International**, 11(6), 2019, 81-85.
130. A. Ceyhan, "The impact of perception related social marketing applications on consumers' brand loyalty and purchase intention", **Emerging Markets Journal**, 9(1), 2019 DOI: 10.5195/emj.2019.173
131. M. Putter, "Impact of social media on consumer buying intention", **Journal of International Business Research and Marketing**, 3(1), 2017, 7-13 <https://doi.org/10.18775/jibrm.1849/8558.2015.31>
132. D. Jimenez- Castillo & R. Sanchez- Fernandez, "The role of digital influencers in brand recommendation: Examining their impact on engagement, expected value and purchase intention", **International Journal of Information Management**, 49, 2019, 366-376 <https://doi.org/10.1016/j.ijinfomgt.2019.07.009>
133. D.O. Santini, C.H. Sampaio, M.G. Perin, L.B. Espartel & W.J. Ladeira, "Moderating effects of sales promotion types", **BAR-Brazilian Administration Review**, 12(2), 2015, 169-189.
134. P. Kakani, M. Chernew & A. Chandra, "Rebates in the pharmaceutical industry: Evidence from the medicines sold in retail pharmacies in the U.S", **Working Paper 26846**, National Bureau of Economic Research, March 2020. <http://www.nber.org/papers/w26846>

135. N. Sood, R. Ribiero, M. Ryan, & K.V. Nuys, “*The association between drug rebate and list price (White Paper)*”, **Leonard D. Schaffer Centre for Health Economics Policy**, 2020
136. A. Sarpatwari, J. DiBellow, M. Zakarian, M. Najafzadeh & A.S. Kesselheim, “*Competition and price among brand- name drugs in the same class: A systematic review of the evidence*” **PLoS Medicine**, 16(7), 2019
137. I. Linton, “*Definition of Point-of-Sale marketing*” **bizfluent**, 2017.
138. M. Young, “*Direct-to-Consumer advertising in the pharmaceutical industry: An analysis of information disparities*” **Am Soc Bus Behav Sci**, 20 (1), 2013, 213-218.
139. J.P. Govender, “*Point-of-Purchase displays in the FMCG sector: A retailer perspective*”, **Journal of Governance and Regulation**, 4(4), 2015
140. M. Reid, P. Thompson, F. Mavondo & K. Brunso, “*Economic and utilitarian benefits of monetary versus non-monetary in-store sales promotions*”, **Journal of Marketing Management**, 31(3/4), 2015, 247-268.
141. K. Mukherjee, “*Technology at Point-of-Purchase– A journey from electronic cash registers to all inclusive Point-of-Purchase systems*”, **Asian Journal of Applied Science and Technology (AJAST)**, 1(8), 2017, 01-04.
142. H. Khachatryan, A. Rihn, B. Behe, C. Hall, B. Campbell, J. Dennis et al, “*Visual attention, buying impulsiveness and consumer behaviour*”, **Mark. Lett**, 29(1), Mar 2018, 23- 35.
143. X. Deng, B.E. Khan, H.R. Unnava, & H. Lee, “*A wide variety: Effects of horizontal versus vertical display on assortment processing, perceived variety, and choice*”, **J. Mark. Res**, 53(5), Oct 1 2016, 682- 98.
144. Point of Sale Display-Overview, *Rationale and how to generate sales*
<https://corporatefinanceinstitute.com/resources/knowledge/other/point-of-sale-display/>
145. **The ODM Group**, “*Using an In-Store display: The need to know*”
<https://www.theodmgroup.com/in-store-display/>
146. **Blog** “*What’s the difference between point of sale and point of purchase displays*”,
<https://www.creativedisplaysnow.com/whats-difference-point-sale-point-purchase-displays/>
147. R. Altman, “*The importance of visual merchandising to brands*”. **Chron.com** 3/11/2019
148. H. Khachatryan, A.L. Rihn, B. Campbell, C.Yue, C.Hall, & B.K. Behe, “*Visual attention to eco- labels predicts consumer preferences for pollinator friendly plants*”, **Sustainability** 9, 2017, 1743-1756.

149. G. Blitzer, "Spreading brand awareness and brand recognition through visual merchandising", **Zen Merchandiser**, 2017, available on:<http://zenmerchandizer.com/visuals/spreading-brand-awareness-visual-merchandising/>
150. R.G.V. Menon, V. Sigurdsson, N.M. Larsen, A. Fagerstrom & G.R. Foxall, "Consumer attention to price in social commerce: Eye tracking patterns in retail clothing", **Journal of Business Research**, 2016
151. Y. Ben Said, N.L. Bragazzi, & N.V. Pyatigorskaya, "Influence of sales promotion techniques on consumers' purchasing decisions at community pharmacies" **Pharmacy**, 7(4), 2019, 150
152. **POPAI** (2014), *Mass merchant shopper engagement study*. from <http://www.popai.com/Research%20library/popai-mass-merchant-shopperengagement-study.pdf>
153. G.C. Lorenzini, R. Mostaghel, & D. Hellstrom, "Drivers of pharmaceutical packing innovation: A customer- supplier relationship case study", **Journal of Business Research**, 2017, <http://doi.org/10.1016/j.jbusres.2017.11.030>
154. N. Ford, P. Trott & C. Simms, "Exploring the Impact of packing interactions on quality of life among older consumers", **Journal of Marketing Management**, 32(3-4), 2016, 275-312, <http://dx.doi.org/10.1080/0267257X2015.1123758>
155. **Healthcare Compliance Packing Council**, "Patient friendly pharmaceutical pack design", <http://www.hcpc-europe.org/download-hcpc-white-paper/>
156. M.B. Alagala, B.M. Bagbi & A.B. Shaleye, "Impact of pharmaceutical packaging on consumer behavior of OTC drugs in Portharcourt Nigeria". **The Pharmacy Innovation Journal**, 7(9), 2018, 90-95.
157. C. Jin, M. Yoon & J. Lee, "The influence of brand color identity on brand association and loyalty", **Journal of Product & Brand Management**, 28(1), 2019, 50- 62.
158. M. Husic- Mehmedovic, I. Omeragic, Z. Batagelj & T. Kolar, "Seeing is not necessarily liking: Advertising research on package design with eye- tracking", **Journal of Business Research**, 80, 2017, 145- 154. <http://dx.doi.org/10.1016/j.jbusres.2017.04.019>
159. G.C. Lorenzini & D. Hellstrom, "Medication packaging and older patient: A systematic review", **Packaging Technology and Science**, 30(8), 2017, 525-558. <http://dx.doi.org/10.1002/pts.2241>
160. J. Balmford, R. Borland & H.H Yong, "Impact of the introduction of standardized packaging on smokers' brand awareness and identification in Australia", **Drug and Alcohol Review**, 35(1), 2016 102-109

161. M. Bae, "Attention- grabbing power of branded vs. unbranded packaging", **Journal of Promotion Management**, 25(7), 2019, 1059-1086. <https://doi.org/10.1080/10496491.2019.1612489>
162. C. Voss, D. Ziegler, R. Lowe, L. Ouyang, N. Stiennon, J. Wu & P. Christian, "Learning to summarize with human feedback," 2020 (Online) Available at: <https://openai.com/blog/learning-to-summarize-with-human-feedback>
163. S. Waters, "What is a retail Point-of-Purchase display? Why POP displays are effective for marketing retail products", 2019 <https://www.thebalancesmb.com/what-is-a-retailer-point-of-purchase-display-2890206>
164. Making your Products' P.O.P: *Designing Point-of-Purchase (POP) displays* <http://www.landsberg.com>
165. F. Horstmann, "Measuring the shopper's attitude toward the point-of-sale display: scale development and validation". **Journal of Retailing and Consumer Services**, 36, 2017, 112-123.
166. J. Guyt & E. Gijbrecchts, "On consumer choice patterns and the net impact of feature promotions". **International Journal of Research in Marketing**, 35, 2018, 490-508.
167. J. C. Gazquez –Abad & F.J. Martinez-Lopez, "Understanding the influence of store flyers on purchase behaviour: An empirical analysis in the context of Spanish households", **Journal of Retail Consumer Services**, 28, 2016, 263-273.
168. U.R. Kumar, "A study on the effectiveness of point of purchase (POP) advertisement & displays in the new generation supermarket and the traditional Kirana Stores", **Int. Journal of Basic and Applied Research**, 8(9), September, 2018, 221- 232.
169. A. Bhatti, Mariam, S. Arif & S. Younus, "Impact of social media brand communication on brand knowledge: Mediating role of brand image and brand awareness-application of CBBE Model theory of Keller", **Journal of Management Info.** 4(4), 2017, 12-18
170. A. Zia, S. Younus & F. Mirza, "Investigating the impact of brand image and brand loyalty on brand equity: The mediating role of brand awareness", **International Journal of Innovation, Creativity and Change**, 15(2), 2021
171. I. Mohr, "Managing buzz marketing in the digital age", **Journal of Marketing Development and Competitiveness**, 11(2), 2017, 10-16
172. H. Bhasin, "What is buzz marketing? Types, tips, examples, advantages". **Marketing, Management Article**, 2020 <https://www.marketing91.com/buzzmarketing>

173. H. Horshall & O.J. Ubarka, “Brand awareness and market performance of food and beverages firms in River State, Nigeria”. **International Journal of Business & Law Research** 6(4), 2018, 1-10
174. Poly I. Emenike, *Nigeria consumers’ perceptions of foreign and domestic pharmaceutical products in South-Eastern Nigeria*, **Forshen Hub International Journal of Entrepreneurial and Cooperative Studies** 5(1), 2020
175. C.N. Wang, D.C. Dang, N. Van Thanh & P.K. Quang, “A study of customers’ behavior in the use of pharmaceutical services-drug stores in the South of Vietnam”, **Res World Econ** 9, 2018, 1-8
176. O.N. Amalia & S.N.A. Marsudi, “Effect of store atmosphere on impulse buying mediating positive emotion (Case study of guardian’s customers at Olympic Garden Mall)”, **Jamanika**, 1(1), March 2021
177. M. Siahpush et al, “Point-of-Sale cigarette marketing and smoking-induced deprivation in smokers: results from a population-based survey”, **BMC Public Health**, 16, 2016, 479.
178. P. Rajagopal, “Point-of-Sales promotions and buying stimulation in retail stores”. **Journal of Database Marketing and Consumer Strategy Management**, 15, 2008, 249-266
179. Y. Chen & H. Qin, “The relationship research between brand association, brand awareness, brand satisfaction and brand loyalty in three squirrels’ virtual image”. **Advances in Economics, Business and Management Research, Volume 203, Proceedings of the 2021 3rd International Conference on Economic Management and Cultural Industry (ICEMCI 2021)**
180. S. Sapic, M. Kocic & K. Radakovic, “Creating consumer loyalty in the field of using Over-the-Counter products”, **Economic Themes** 57(1), 2019, 1-20
181. O. Foroudi, “Perceptual components of brand equity: Configuring the symmetrical and asymmetrical paths to brand loyalty and brand purchase intention”, **Journal of Business Research**, 2018 <https://doi.org/10.1016/j.jbusres.2018.01.031>
182. K.C deSilva, A.A.L. Madhushani & S.D.S. Jayalath, “Impact of brand loyalty on customer purchase intention: An empirical study on Basketball shoe brand of Adidas, Nike and Puma”, **Journal of Physical Education and Sports Management**, 7(2), 2020, 17-25 DOI:10.15640/jpesm.v7n2a3
183. S.D.S. Jayalath & A.A.L. Madhushani, “The relationship between service quality of sport event and customer satisfaction: A study of President’s Gold Cup Volleyball Tournament- 2017”, **International Journal of Scientific and Research Publications** 9(9), 2019, 724-729

184. R.Q. Danish, M.K. Khan, M.M. Ghafoor, I. Ahmad, A.A. Humayon & S. Aslam, "Impact of brand loyalty in assessing purchase intentions of a customer: A study of automobile industry in South Asian perspective", **A Research Journal of South Asian Studies**, 33(2), July-December 2018, 347-364
185. K. Gomathisanka & A. Selverasu, "Viral marketing power for Over-the-Counter medicines" **J. Bus.** 2014, 55-84
186. K. Bakhtiar, F. Bastami, N. Sharafkhani & M. Almasian, "The psychological determinants of self-medication among the elderly; An explanation based on the health belief model", **Elderly Health Journal**, 3(2), 2017, 59-66
187. Drug Applications for Over-the-Counter (OTC) medicines, FDA (2018), FDA, www.fda.gov/drugs/developmentapprovalprocess/howdrugsaredevelopedandapproved/approvalapplications/over-the-counterdrugs/default.htm#Laws
188. A.S. Deshpande & T. Saxena, "Effects of consumer buying behaviour on durable sellers", **4D International Journal of Management and Science**, 8(1), 2017, 32-44
189. N.H.N. Asshidin, N. Abidin & H.B. Borhan, "Consumer attitude and uniqueness towards international products", **Procedia Economics and Finance**, 35, 2016, 632-638
190. M.A. Khan, R. Panditharathna, & D. Bamber, "Online store brand experiences impacting on online brand trust and online repurchase intention; The moderate role of online brand attachment", **European Journal of Management and Marketing Studies**, 5(1), 2020, 138-163
191. Q. He, J.M. Guaita- Martinez & D. Botella- Carrubi, "How brand equity affects firms productivity: the role of R&D and human capital", **Economics Research- Ekonomska Istrazivanja**, 2019. DOI:10.1080/1331677X.2019.1686045
192. D.A. Aaker, *Managing brand equity: Capitalizing on the value of a brand name*, (New York: The Free Press), 1991
193. D.A. Aaker, "Measuring brand equity across products and markets", **Calif Manag. Rev.**, 38(3), 1996, 102-120
194. D.A. Aaker, *Brand relevance: Making competitors irrelevant*, (San Fransisco: Jossey-Bass), 2011
195. D.A. Aaker, "Managing the most important asset: Brand equity", **Plan Rev.**, 20(5), 2006, 56-58
196. Y. Mahfooz, "Brand equity-consequence relationship: Evidence form automobile industry", **Int. J. Bus. Manag.**, 10, September 2015, 81-90

197. W.Y. Wu, T-Y. Do, P-T. Nguyen, N. Anridho & M-Q. Vu, "An integrated framework of customer-based brand equity and theory of planned behavior: A meta-analysis approach", **Journal of Asian Finance, Economics and Business**, 7(8), 2020, 371-381
198. I. Ajzen, "The theory of planned behavior", **Organizational Behavior and Human Decision Process**, 50, 1991, 179-211
199. C.T.Q. Nguyen & T.D. Luu, "Factors affecting consumer-based brand equity of Vietnamese Pharmaceutical Companies", **Dalat University Journal of Science**, 8(IS), 2018, 145-147
200. Business Monitor International, "Vietnamese pharmaceuticals and healthcare report", (London, UK: **Business Monitor International Research**), 2018
201. E. Battistioni, A.F. Colladon & P. Puglia, "Exploiting the potential value of Over-the-Counter drug through brand equity: An analytical network process approach" **International Journal of Engineering Business Management, Special Issue: Innovation in Pharmaceutical Industry**, 6(201), 2014 DOI: 10.5772/59157
202. A.C. Moreira, N. Fortex & R. Santiago, "Influence of sensory stimuli on brand experience, brand equity and purchase intention", **Journal of Business Economics and Management**, 18(1), 2017, 68-83.
203. I.S. Alkoliby & M. Abdul Rahman, "Influence dimensions of brand equity on purchase intention towards smart phone in Malaysia", **VFAST Transactions on Education and Social Sciences**, 15(1), 2018, 07-19.
204. International Data Corporation, "IDC Malaysia: OPO and Huawei make strides as Samsung remains Malaysia's top smart phone player in 2016", 17th February, 2017
205. A. Rahim, S.Z. Safin, L.K. Kheng, N. Abas & S.M. Ali, "Factors influencing purchase intention of smart phone among university students", **Procedia Economics and Finance**, 37, 2016, 245-253
206. L. Eui-Bang, L. Sang-Gun & Y. Chang-Gyu, "Influences of advertising attitude and brand attitude on purchase intention of smart phone advertising", **Industrial Management & Data Systems**, 117(6), 2017, 1011-1036
207. K. Srivastava, & N.K. Sharma, "Consumer perception of brand personality An empirical evidence from India". **Global Business Review**, 17(2), 2016, 1-14.
208. I. Smedema, "Sales promotions and point of sales materials, does it work or not?" **Master's Thesis for degree of Master of Science, Communication Studies, specialization: marketing communication, (University of Twente)**, August 2016
209. C. Kathiravan, S. Dinesh, P. Mhalakshmi, V. Suresh & A. Rajasekar, "Determinants of Over-the-Counter (OTC) purchasing behavior of medicines in the pharmaceutical

industry”, **TEST Engineering and Management**, 81, November-December, 2019, 6600-6607

210. R.K. Srivastava & S. Wagh, “Factors impacting consumer behaviour for pharmaceutical products”, **Int. J. Healthc Manag**, 2017, 1-9 DOI: 10.1080/20479700.2017.1348004
211. N.M. Pujari, A.K. Sachan & Y. Kumar, “Cross-sectional study on availability and affordability of some essential child-specific medicines in Uttar Pradesh”, **Int. J. Med Sci. Public Health**, 2016 (B) DOI: 10.5455/ijmsph.2016.260 22016400.
212. N.M. Pujari, A.K. Sachan & D. Guptu, “Indian consumers’ buying behaviour and perception to herbal drugs: a report”, **Int. J. Progr. Pharmacy**, 1(1), 2015, 11-19.
213. P.E. Ketelaar, S.F. Bernritter, J. van’tRiet, A.E. Huhn, T. J van Woudenberg, B.C.N. Muller & L. Janssen, “Disentangling location-based advertising: The effects of location congruency and medium type on consumers’ ad attention and brand choice”, **International Journal of Advertising**, 2015 <http://dx.doi.org/10.1080/02650487.2015.1093810>
214. S. Loya, S. Ismail, & M.Z. Khan, “Impact of In-Store display on sales: A comparative study among new and mature product”, **International Journal of Humanities and Social Science**, 5(11), November 2015, 188-196
215. P. Salvi, “Effectiveness of sales promotional tools: A study on discount, price-off and buy-one-get-one free offers in branded apparel retail industry in Gujarat”, **ELK Asia Pacific Journal of Marketing and Retail Management**, 4(4), October 2013

Chapter Three

Methodology

This chapter essentially describes how this study was conducted and the methods used to collect and analyse the data collected. Major highlights of this chapter include research design, population of the study, sample of the study, sampling techniques, description of the research instrument, validation of the research instrument, reliability of the instrument, method of data collection and method of data analysis.

3.1 Research Design

Research design is an operational framework for information gathering, highlighting what information is desired, from where (which source) and how (what procedure)¹

The attitudes being probed in this study are not subjectable to accurate measurement of physical phenomena and application of statistical analysis as in quantitative studies. An integrative methodology combining questionnaire survey and focus group discussion adopted for this study is an effective tool for obtaining accurate and valid data and for testing the hypotheses formulated for this study. This study focused on testing causal

relationships between the independent variables of point-of-purchase promotion strategies (front-of-store and in-store), and the dependent variables of brand awareness, brand attitude, impulse purchase, brand loyalty and brand choice.

This research project was designed to obtain relevant information from adult, educated and regular purchasers of drugs in urban and sub-urban territories of Ibadanland, Oyo State, Nigeria, in order to gain insight into the exact nature of the influences that point-of-purchase promotion strategies have on decision-making process leading to the choice or recommendation of a particular brand of drug of buy. The broad aim is to gain insight specifically on the influence of POP promotions at the cognitive, attitudinal and behavioural levels of decision-making; a comparative assessment of the impact of POP promotions on choice of branded prescription and non-prescription drugs as well as comparison of impacts of front-of-store and in-store POP promotions on choice of branded drugs in general.

Respondents were selected based on the following consideration amongst others:

1. Those identified by the drug retailer's staff as regular patrons of their store
2. Those who give a high level of confidence that they are capable of understanding the questions and provide reliable responses
3. Those who it will be convenient to return the completed questionnaire promptly, as the drug retail store where they would be given the questionnaire are close by in their neighbourhood or on the route of their daily transit for everyday activities

3.2 Population of the Study

A representative sample for any study will be selected from a clearly defined population. Two types of population were relevant to this study.

1. Registered (Licensed) Pharmacy Retail Stores, registered by the Pharmacist Council of Nigeria (PCN) under the supervision and control of Registered Pharmacists; located within the eleven Local Government Areas (LGA) of Ibadanland, the territorial scope of this study- Ibadan SE, Ibadan SW, Ibadan NE, Ibadan NW, Ibadan North, Oluyole, Iddo, Akinyele, Egbeda, Lagelu, Ona-Ara (see attached map – Appendix 1)
2. The regular purchasers of drugs at Registered Pharmacy Retail Stores, male and female adults above 18 years with a minimum of WASC/SSCE. The full list of potential drug purchasers over 18 years may be deduced from the most recent census data of the eleven Local Government Areas of Ibadanland with adjustment for exits and new entrants to date, which is not known for certain. So the last census figure shall subsist for defining the population for this study, which is 1,663,904 persons, male and female above 18 years of age, as per the last census of 2009 (Appendix viii).

3.3 Sample and Sampling Techniques

3.3.1 Sampling Frame

The sample frame or list used often defines operational or working population. Sample frame refers to the complete list of all the elements (subjects) in the population being considered for the study. The full list of registered Pharmacy Retail Stores in Oyo State which are financial members of the Association of Community Pharmacist of Nigeria (ACPN) for the year 2019/2020 consists of 146 stores, out of which 131 stores (89.73%) are based in Ibadanland, (the sample frame).

The sampling frame for respondents in this study is the estimate of potential drug purchasers, male and female, 18 years and above, with a minimum of WASC/SSCE education, and who have the potential to patronize Registered Pharmacy Retail Stores regularly; which is estimated at 505,851 (Appendix viii).

3.3.2 Sample Size

Sample size was determined considering the features of the study, the number of the variables and appropriate representation of the population in tune with the selected analytical tools that will provide more valid and reliable data in order to achieve realistic insight to the relationships under this study.

a. For Questionnaire Administration.

Initial plan was to select 4 No Registered Pharmacy Retail Stores per Local Government Area (LGA), making a total of 44 No from the 11 LGA; on criteria of equality, convenience of access, cost and time limitation for this study

b. Regular purchasers of drugs (Respondents) targeted:

Per pharmacy retail store = 40

Total number of Respondents targeted.....= 1760

Choosing 40 respondents in each retail store is expected to ensure administration of the questionnaire to a fair sample of the four broad categories of respondents in each neighbourhood, namely; (a) male, 18-40 years old, with minimum education of SSSE/WASC; (b) male, over 40 years old, with minimum education of SSSE/WASC; (c) female, 18-40 years old, with minimum education of SSSE/WASC; (d) female, over 40 years old, with minimum education of SSSE/WASC. Choosing 40 respondents in each

targeted pharmaceutical store also gives a high level of assurance that at least 50% of the questionnaire distributed will be returned and valid for analysis

However, field reality compelled adjustment of sampling plan.

Firstly, some of the selected pharmacy stores had relocated to other Local Government Areas (LGA). Secondly, it was realized that some pharmacy stores were located in Local Government Areas (LGA) different from the pool from which they were selected. Thirdly, some selected pharmacy stores were not committed to the survey as some returned all the questionnaire given to them unfilled, while others returned very low responses out of the 40 questionnaires allotted to each selected Pharmacy store in the first instance. Hence the researcher was compelled to seek replacements for those Pharmacy stores from the financial members of the Association of Community Pharmacists of Nigeria, Oyo State, within their LGA.

Also while trying to distribute the uncompleted Questionnaires, the researcher encountered reluctance of the management of pharmacy stores and their respective focal persons, to take on what they considered a “high volume” of questionnaires. At the extreme end, some were willing to take between 5-10 questionnaires only. Hence the sample size of selected registered pharmacy stores increased beyond the original size of 4 No per LGA in some local government areas.

Even after the second round of retrieval of questionnaires, a sizable number were still unfilled. Hence the researcher resorted to convenience sampling of pharmacy stores that were willing to collect and return the questionnaires within a two-week duration. For sure, all are registered pharmacy stores with a superintendent pharmacist in-charge.^{2,3}

That explains why more than 4 No. Registered Pharmacy Stores were eventually sampled in most Local Government Areas, 74 No in total. The sample size for Ibadan North LGA is the highest because it has the highest concentration and population of Registered Pharmacy Stores in Ibadanland and the LGA is located in the central part of Ibadan Urban City with one of the highest population of literate persons possessing more than WASC/SSCE minimum qualification requirement for prospective respondents to the questionnaire. That gave assurance of likelihood of cooperation and quick return of the filled questionnaires. In the case of Ona Ara LGA, a largely rural/sub-urban territory, only 3 No Registered Pharmacies were sampled. Appendix IX shows the detail of Local Government distribution of Registered Pharmacy Stores where questionnaires were distributed and administered.

3.3.3 Sampling Techniques

“Random sampling is that method of drawing a portion (sample) of a population so that all possible samples of fixed size “n” have the same probability of being selected”⁴. “The larger the sample used the better. Also a large unrepresentative sample is as meaningless as a smaller representative sample.

While probability sampling method allows the calculation of confidence limits for sampling error (computation of sampling variation) and results can be projected to the entire population, cost and time often make it impractical to collect data through probability sampling.

The use of non-probability sampling technique is justified because the objective of the study is to find meaningful relationships between the independent and dependent variables of the research model, eventhough sampling errors cannot be measured in such

cases (statistically impossible) and results though valid, may not be projectable to the entire population^{5,6}. Allocating quota often increases quality of such sampling.

Several factors that must be considered in determining the appropriateness of the sampling method: (1) research objectives (2) desired accuracy (3) availability of resources (4) time frame (5) knowledge of the target population (6) scope of the research, and (7) statistical analysis needs, (8) the nature of the probes under investigation⁷

From the sampling frame of registered pharmacy stores in Ibadanland, pharmacies were grouped on local government basis as a first step (Appendix vii). The exclusion method of the simple random sampling (probability sampling) technique was employed to select four registered pharmacy retail stores within each of the eleven Local Government Areas of Ibadanland, making a total of 44 targeted pharmacy retail stores.

Since no full list of regular purchasers of drugs at pharmacy retail stores exists, a combination of quota and purposive sampling techniques was used to hand-pick respondents patronizing each selected pharmacy retail outlet. Though it may be difficult to justify the representativeness of the resulting samples, respondents were picked on the basis of four groupings to build up a sample of sufficient size having the desired traits viz:

- a) Male, 18- 40 years old, with minimum education of SSS3/WASC =440
(10 No. per pharmacy store x 44 stores in 11 LGA)
- b) Male, over 40 years old, with minimum education of SS3/WASC =440
(10 No. per pharmacy store x 44 stores in 11 LGA)
- c) Female, 18- 40 years old, with minimum education of SSS3/WASC = 440
(10 No. per pharmacy store x 44 stores in 11 LGA)
- d) Female, over 40 years old, with minimum education of SS3/WASC =440

(10 No. per pharmacy store x 44 stores in 11 LGA)

Total =1,760

It was expected that between 1,000 – 1,200 respondents will be responsive, completing the questionnaire appropriately and returning them promptly to the point of collection within a time frame of one to two weeks, maximum.

3.4 Description of the Research Instrument

Closed questions, easy to comprehend and elicit appropriate responses, each question with a range of answers to pick from and using majorly the Likert Scale, a self-reporting semantic differential scale which measures attitudes and comprise statements with which the respondent has to agree or disagree to varying degrees.⁸

Basically, an eight-section questionnaire. Cover sheet carries a brief introduction, tick boxes for filling details of socio-economic profile of each respondent (Section A), followed by a refreshing note on branding, prescription drugs, non-prescription/off-the-counter (OTC) drugs, and most commonly used point-of-purchase promotional displays.

Section B: Statements that probe respondents on the influence of POP promotions on awareness of brands of drugs available for purchase at pharmacy retail stores, particularly, familiarity with POP promotions, brand name awareness, recall and recognition, as well as awareness of alternative brands, top-of-mind awareness, and consideration for purchase.

Section C: Statements probing the influence of POP promotions on development of attitude towards brands of drugs being promoted, particularly, interest stimulation, desire, brand beliefs, as well as stimulation for trial.

Section D: Examines the influence of POP promotions on impulse buying (purchase) of the brand of drug being promoted at pharmacy retail stores, particularly, unplanned- and reminder- impulse purchase, brand switching and brand substitution in relation to both prescription and non-prescription (OTC) drugs.

Section E: Statements that examine the influence of POP promotions on brand loyalty dimensions in the behavior of purchasers of drugs, particularly accepting recommendations by pharmacy's staff, recommending preferred brand to others, emotional attachment/endearament to the brand, buying more quantity, regularity/frequency of repeat purchase, stock-piling, and sensitivity to incentives offered by competing brands.

Section F: Investigates the influence of Front-of-Store POP promotions on patronage (choice) of branded drugs in general, particularly, attention, brand knowledge, brand identification, development of favorable attitudes and possible behavioral outcomes.

Section G: Examines the influence of In-Store POP promotions on patronage (choice) of branded drugs in general, particularly, attention, brand knowledge, brand identification, development of favorable attitudes and possible behavioral outcomes.

Section H: Probes whether there exists any significant difference between the influence of POP promotions on patronage (choice) of branded prescription drugs and branded non-prescription drugs.

3.5 Validity of the Research Instrument

Validity reflects the degree to which the question measures what it's supposed to be measuring. The difference between intended measurement and the actual measurement

has been expressed as the degree of invalidity. Three basic forms of validity: (1) Content validity, which demands that all the relevant dimensions of the concept being measured are considered, (2) Predictive Validity, when the measurement can be used to predict other established measurements relating to the same respondent group (s) and (3) construct validity, when results correspond with the predictions of theory. Other scholars have highlighted the most common measure of validity as content validity, construct validity, convergent validity and criterion validity.⁹

In this study, the principles of face validity and content validity have been explored by the researcher in the development of the measuring instrument, the questionnaire.

The pretest was carried out as a debriefing session, presenting the questionnaire to a small sample of the intended respondents in exactly the same manner as it would in a real study, and probing respondents on their observations, challenges and thought processes while completing the questionnaire. The sole aim was to determine if the instrument is good enough to be well understood by respondents, to extract the correct information desired by the research; as well as to identify gaps or weaknesses in the structure, content and layout of the questionnaire which need to be improved upon for better understanding of questions, and to elicit sincere responses from respondents during the main field survey.

This pretest involved the administration of the questionnaire on 20 respondents, 5 persons each from the same population segments from which the sample for the study will be taken i.e. 5 Males – 18 – 40 years; 5 Males – over 40 years; 5 Females – 18 – 40 years; 5 Females – over 40 years, with a minimum of WASC-SSCE education.

Content validity was ascertained by subjecting the instrument to further review and feedback from my supervisor and other scholars on the subject matter of my research, thus, providing further insight on the construction and phrasing of questions. The instrument was modified and improved by incorporating all comments, suggestions and observations until the instrument was certified by my research supervisor as being appropriate and effective for obtaining the desired information from the respondents, and assurance to measure precisely what they are intended to measure.

Subsequently, a pilot study was carried out on a larger population of respondents using the pre-tested, refined questionnaire

- All the eleven Local Government Areas (LGA) in Ibadanland
- Eleven pharmacy retail stores were targeted, one per LGA
- Ten respondents were targeted per pharmacy retail store (10 questionnaire)
- Stores were selected on basis of convenience, traced and located in each LGA.
- Personal introduction of the research student to the MD/Superintendent Pharmacist at each pharmacy store, and briefed on the pilot study.
- The researcher requested for the nomination of a focal person to coordinate the pilot study in each selected pharmacy store
- The focal person was well briefed by the researcher on the pilot study, its relevance and the strategic role of a focal person in such a study.
- The researcher subjected each focal person to trial presentation on how to approach a prospective respondent and win his/her consent to participate in the pilot study; followed by appropriate corrections and demonstration by the researcher.

- Handing over of 10 No. Questionnaire to each focal person in each selected pharmacy store, for distribution to prospective respondents
- In the presence of the researcher each focal person targeted prospective, qualified respondents one by one, inviting them to participate in the study by filling a questionnaire.
- The respondents were assured by the focal person that the filling of the questionnaire is not stressful at all, requiring only to tick the answer that reflects their candid opinion on each question
- Each respondent was well appreciated with a big “Thank You” for agreeing to collect the questionnaire and promising to return the filled questionnaire to the focal person at the pharmacy store latest within one week from the day of collection.
- 60 (55%) filled questionnaire were returned within the stipulated time limit.

A review of the exercise at each pharmacy store revealed the following insight and action notes for the main field work:

- a. Further briefing of focal persons to sharpen their communication skills towards winning the consent of prospective respondents, especially the sequence and quality of presentation
- b. Importance of reassurance of willing respondents that the task is not stressful and confidential, only for academic research purpose only.
- c. Noting if there will be need for further amendments on any specific question(s) for easy and better understanding by the respondents

- d. The success of the exercise suggests that it is possible to secure the consent of the targeted number of 40 respondents per pharmacy store in the larger field research as anticipated, relying on the enthusiasm and cooperation of the focal person.
- e. Necessary but appropriate minor amendments were made on a few questions and the lessons learnt from the pilot study were applied in the major field survey over all the 11 LGA of Ibadanland

3.6 Reliability of the Instrument

The reliability of an instrument gives a measure of the assurance that the research instrument will yield the same result on repeated trials.

The cronbach alpha was used to determine the reliability co-efficient of the instrument (Questionnaire) because it is the most common measure of internal consistency (reliability) of constructs.^{10,11} It is considered acceptable and good measure of reliability of an instrument when its range value is greater than 0.70. That is, the measurement scales of the construct are stable and consistent in measuring each construct.

Acceptable cut-off point is 0.70. As such all values of construct reliability (CR) higher than 0.70 indicates the internal consistency of data is accepted and reflects a good reliability measure.¹²

The result of the test achieved acceptable cronbach alpha reliability scores, higher than 0.70 for the measuring scales of each construct. Hence the instrument is considered reliable.

Table 3.1: Reliability of the Research Instrument

Variable	Predictive Parameters (Indicators)	No. of Questions (Items)	Cronbach Alpha
A. Dependent Brand Awareness	1. Familiarity with POP promotions	3	0.811
	2. Brand name awareness, recognition, recall	5	0.824
	3. Awareness of alternative brands, top-of-mind awareness, consideration for purchase	3	0.817
Brand Attitude	1. Interest stimulation, desire	3	0.877
	2. Brand beliefs	6	0.712
	3. Stimulation for trial	2	0.881
Impulse Buying	1. Unplanned -and reminder-impulse-purchase	4	0.861
	2. Impulsive Brand switching and brand substitution	5	0.888
Brand Loyalty	1. Accepting recommendations by pharmacy's staff	2	0.912
	2. Recommending preferred brand to other people	2	0.889
	3. Emotional attachment/endearament to	2	0.871

	brand		
	4. Buying more quality	2	0.719
	5. Regularity/frequency of repeat purchases	2	0.813
	6. Stockpiling	2	0.881
	7. Sensitivity to incentives offered by competing brands	2	0.777
Brand Choice	1.Prescription drugs	3	0.791
	2.OTC drugs	3	
B. Independent Front-of-Store Promotion	1.Attention, brand knowledge, brand identification	8	0.801
	2.Favorable attitudes and possible outcomes	5	0.855
In-Store Promotion	1.Attention, brand knowledge, brand identification	8	0.712
	2.Favorable attitudes and possible outcomes	5	0.912

Source: Field Survey 2022

External reliability is assured if a study can be performed over and over, and the same results would be obtained. While internal reliability can be achieved by the consistency of the results delivered within a test⁹

External reliability of this study is achieved as the methodology is explained in great details to make it easy for any researcher to understand how to replicate it, as well as the employment of closed questions and response options within a five-scale range for all the questions.

Both validity and reliability are reflections of accuracy of responses based on the quality of information and memory recall capability of respondents to the questionnaire.

a. **Data Collection**

3.7.1 Method of Data Collection

A qualitative, primary data collection method, a dual approach, using a questionnaire and focus group discussion was adopted for this research. The data from the questionnaire survey was collected from each respondent after they must have read the instructions and understood each question, followed by choosing whichever response from the options of answers available to each question, which best represents their sincere opinion on each question or statement. All that is required is to tick the box of their chosen option from a 5-point Likert Scale of responses ranging from strongly agree, agree, uncertain, disagree to strongly disagree. Completed questionnaire were submitted to the focal person in the pharmacy retail store where the respondents were recruited.

The Focal Group Discussion was anchored by an experienced academician and researcher, sequentially throwing up issues for discussion among the participants, who made voluntary contributions to each issue. The discussion session was recorded, transcribed and analysed to extract valuable insight into the influence of POP promotions on brand patronage of drugs especially at the brand awareness (cognitive), brand attitude (attitudinal), impulse buying, brand loyalty and brand choice (behavioral) levels of decision-making process in consumer behavior when purchasing drugs.

3.7.2 Administration of the Instruments

A. Focus Group Discussion (FGD) Administration

Focus Group Discussion (FGD) is an exploratory, qualitative research that provides an insight for understanding of perceptions, feelings, attitudes, and motivations in relation to a subject of survey. Focus group discussion is guided by a moderator and best conducted with 6 to 10 participants and it is not suitable as research tool for large sample size. FGD

is a forum of free discussion and contribution of opinions by each participant on the topic of interest, volunteering different ideas, attitudes and experiences about the subject in focus. The quality of responses depends to a large extent on the expertise of the interviewer. Their ability to ask appropriate questions and also the willingness of the interviewees to respond to this request.^{12,13} Visual contact, the verbal or paraverbal language is much more effective than questionnaire and may be interpreted beyond words.^{14,15}

It was observed that after the initial slow responses, the eagerness and depth of individual's responses increased as the FGD progressed, with more discussants becoming more receptive and willing to express their opinions freely on each subject raised by the moderator^{16,14}

- a. A pool of 20 persons was pre-selected as discussants by purposive-quota sampling method, with a minimum of WASC/SSCE education, hoping that on the day of event, between 6 to 10 discussants will show up.
- b. Comprising 10 males and 10 females according to the format below:
- c. Male 5 No.....18-40 years old Female 5 No
- d. Male 5 No over 40 years old Female 5 No
- e. Attempt was made to achieve a distribution of discussants as shown below:

Table 3.2: Planned Population Distribution of Invitees to FGD

MALE Above 40 years	MALE 18-40 years	Highest Academic Qualification	FEMALE 18-40 years	FEMALE Above 40 years
1	1	SSSE/WACE	1	1
1	1	OND/NCE	1	1
1	1	HND/Bsc/BA	1	1

1	1	Master /Ph.D.	1	1
1	1	Professional/CERT.	1	1
5	5	TOTAL	5	5

Source: Research's Abstraction/Conception (2020)

Invariably, eight persons participated in the focus group discussion, 5male, 3female, all over 30 years of age, mostly married with the minimum education of HND/1st Degree.

Securing their commitment and getting them to arrive promptly at the venue was a highly demanding, stressful task as I encountered last minute disappointments.

- f. Location –The initial plan was to rent a suitable private room of an Eatery or Hotel or the Seminar Room in an Educational Institution; at a city-centre location; easy to reach by invited Discussants. The FGD was eventually conducted at the Conference Centre of the Lead City University.
- g. Duration – 2 hours
- h. Preparation of invitation letters (Appendix X) and other arrangements for compiling a pool of prospective Discussants (Appendix XI, XII,XIII)
- i. Selection, notification, consent and communication of event programme to all invitees was completed at least two weeks before event date
- j. Reminder messages/phone calls to invitees at least twice weekly during the last two weeks before event date, in order to ensure full attendance.
- k. A University Lecturer was engaged as moderator for the FGD
- l. Drafting of Focus Group Discussion Guide (Appendix XVI), and production of programme of event ahead of event date (Appendix XV)
- m. Arrangement for audio-visual coverage and recordings
- n. Arrangement for refreshments and lunch for all invitees

- o. Arrangement for honorarium to cover transportation costs of invitees
- p. Review of recorded discussions.
- q. Analysis of data based on subjective interpretation of facts and ideas as revealed, as well as observed phenomena.

B. Questionnaire Administration

Basically, a self-administered questionnaire (Appendix ii), it is recognized that a major limitation of the purposive quota sampling being adopted for the identification, and selection of respondents to the questionnaire by the retail staff/focal person in each selected pharmacy retail store, is the introduction of discretion and consequently introducing a possible source of bias.^{5,17,3} The protocol highlights are as follows:

- a. Identification of location and visit to selected registered pharmacy retail stores in each Local Government Area of Ibadanland.
- b. Detailed introduction of the researcher, the data collection objective, explanation of data collection instrument, assurances of confidentiality and the importance of obtaining willful consent of each targeted respondent from among the pool of identified regular patrons of the drug retail store.
- c. In each drug retail store, the researcher with the management, identified and enrolled a “focal person” from amongst the healthcare professional staff and general sales staff, the management of the drug retail store being the proprietor, business manager or superintendent pharmacists as may be applicable in each store (Appendix iii).
- d. The researcher educated the selected focal person further on the importance of selecting appropriate respondents as defined in the questionnaire; who are regular patrons of their drug retail store; in whom they have high confidence of likelihood to

- fill the questionnaire appropriately and to return the completed questionnaire promptly, with little or no stress. The focal person's brief (Appendix iv) prepared by the researcher was thoroughly explained to and understood by each focal person.
- e. Each "focal person" was given a specific number of questionnaires to be administered in their premises, accompanied by a Respondents' Contact Directory, (Appendix v).
 - f. Questionnaire were administered on each respondent by the "focal person" within the drug retail store, who identified each prospective respondent visiting the pharmacy retail store; whom are considered to be regular patrons; and fit into the age range and educational status specified by the researcher in the questionnaire, i.e. male and female over 18 years old and with a minimum of secondary school education (WASC/SSCE). Each respondent was given a questionnaire by the focal person; well briefed; encouraged to review the questionnaire and ask for clarifications before going off to fill the questionnaire; and return it to the pharmacy store – (the focal person) promptly within one week, latest two weeks from date of collection.
 - g. As much as respondents are willing to cooperate, the focal person endeavoured to collect telephone number of respondents which was filled into the Respondents' Contact Directory for follow-up prompting to ensure quick completion and return of questionnaire, back to the focal person at the drug retail store within one to two weeks
 - h. All completed questionnaire were retrieved by the researcher from the focal person at each targeted drug retail store on a weekly basis, up to a maximum duration of four weeks, after which all unreturned questionnaire were classified as non-responsive and consequently of no value to the study.

3.8 Method of Data Analysis

The data collected by questionnaire in this study was coded, processed and analyzed using statistical package for social sciences (SPSS) version 23.¹¹ The researcher employed multiple tools of data analysis including descriptive statistics such as frequency distribution table and percentage, mean, standard deviation, visual description of data like bar chart, pie chart etc., as well as inferential statistics like linear regression analysis and ANOVA.¹⁸ Regression analysis was used to measure influence, effects and impacts between independent and dependent variables, while ANOVA was used to measure difference in influence on patronage (choice) of branded drugs between front-of-store and in-store point-of-purchase promotions.^{19,10}

The Focus Group Discussion (FGD), was recorded, transcribed and analyzed. Some comments from the participants in the FGD were quoted verbatim to highlight essential points.

Endnotes

1. D.M. Mertens, *Research and evaluation in education and psychology: Integrating diversity with quantitative, qualitative and mixed methods*, (4th ed.), (Thousand Oaks, California 91320: SAGE Publications, Inc), 2015
2. A.C. Moreira, N. Fortex & R. Santiago, “*Influence of sensory stimuli on brand experience, brand equity and purchase intention*”, **Journal of Business Economics and Management**, 18(1), 2017, 68-83.
3. K.C deSilva, A.A.L. Madhushani & S.D.S. Jayalath, “*Impact of brand loyalty on customer purchase intention: An empirical study on basketball shoe brand of Adidas, Nike and Puma*”, **Journal of Physical Education and Sports Management**, 7(2), 2020, 17-25 DOI:10.15640/jpesm.v7n2a3
4. J. Rowley, “*Designing and using research questionnaires*”, **Management Research Review**, 37(3), 2014, 308-380.

5. P. Verma, “*The effect of brand engagement and brand love upon overall brand equity and purchase intention; A moderated and mediated model*”. **Journal of Promotion Management**, 2020. DOI:1080/10496491.2020.1809591
6. I. Etikan. S.A. Musa & R.S Alkassim, “*Comparison of convenience sampling and purposive sampling*”, **American Journal of Theoretical and Applied Statistics**, 5(1), 2016, 1- 4 DOI: 10.11648/j.ajtas.20160501.11.
7. D.M. Dave, “*Pharmaceutical marketing and promotion*”, **Encyclopedia of Health Economics**, 2014, 9-19.
8. R. Likert, *A technique for the measurement of attitudes*, **Archives of Psychology**, 140, 1932
9. V. Clark & J. Creswell, *Under research: A consumer’s guide*, 1sted. (Pearson Higher Education), 2014
10. K. Kathuria, K. Kumar, N. Kumari & K. Kumar, “*Point-of-Purchase and consumer purchase process for agriculture-based products: A study of Chandigarh and Shimla*”. **Journal of Pharmacognosy and Phytochemistry**, 8(5), 2019, 182-184.
11. Imke Smedema, “Sales promotions and point of sales materials, does it work or not?” Master’s Thesis for degree of Master of Science, communication studies, specialization: marketing communication, (University of Twente, August) 2016.
12. R. Habash & H. Al-Dmour, “*Factor influencing the intention to buy over-the-counter medicines: Empirical study*”, **International Journal of Pharmaceutical and Healthcare Marketing**, 14(2), 2020, 305-323.
13. R. Bailey & M. L. Tupy, “*Ten global trends that every smart person needs to know: and many other trends you will find interesting, chapter: people trends*” (E-book) Cato Institute, ISBN:978-1-948647-74-8, 2020, 54-55
14. M. Stefan, V. Andreiana, I.A. Tanasescu & G. Stoica, “*Impact of television advertising on the impulse to purchase over-the-counter medicine*”, **Annals of “Dunarea de Jos” University of Galati, Fascicle, Economics and Applied Informatics, Years XXVII**, 3, 2021 DOI: <https://doi.org/10.35219/eai15840409239>
15. K. Lavingia & S. Tanwar, “*Augmented reality and industry 4.0. In: Nayyar A. Kumar (ed) A roadmap to industry 4 .0: smart production, sharp business and sustainable development*”. **Advances in Science, Technology & Innovation, 2020 (IEREK Interdisciplinary Series for Sustainable Development) Springer Cham** DOI: <https://doi.org/10.1007/978-3-030-14544-68>
16. A. Micu, A.E. Micu, A. Capatina, N. Cristache, & B.G. Dragan, “*Market intelligence precursors for the entrepreneurial resilience approach: The case of the Romanian eco-*

label product retailers”, **Sustainability**, 2018, 10, 190
<https://doi.org/10.3390/su/0010190>

17. C. Ozgen & S. Reyhan, “*The effect of consumer multiple perceived value on the purchase intention; A study of sports nutritional supplements*”, **African Educational Research Journal**, 8(2), 2020, 194-200. DOI:10.30918/AERJ.82.20.045
18. D.K. Guatam & S.K. Shrestha, “*Impact of brand equity on purchase intention of smart phones*”, **Asian-Pacific Journal of Business**, 9(1), 2018, 1-18
19. I.S. Alkoliby & M. Abdul Rahman, “*Influence dimensions of brand equity on purchase intention towards smart phone in Malaysia*”, **VFAST Transactions on Education and Social Sciences**, 15(1), 2018, 07-19.

Chapter Four

Results and Discussion of Findings

This chapter focuses on data presentation and analysis according to the statistical methods highlighted in Chapter Three. The analysis is based on the responses obtained

from administered questionnaire distributed to the customers of selected seventy-four pharmacy stores in the eleven local governments in Ibadan, Nigeria. Tables are used to present the analysis of responses to the variables followed by brief analysis of the result, with regression and ANOVA test been employed to test the validity of the hypotheses. The statistical tail test is used to validate the acceptance or rejection of the Null and Alternate hypotheses.

4.1. Presentation of Data

The researcher distributed a total of one thousands seven hundred and sixty (1760) questionnaire which covered the entire sample size.

Table 4.1 Questionnaire Distribution and Responses

Responses	Questionnaire distributed	Percentage distributed	No returned	Percentage returned	Number not returned	Percentage not returned
Total	1760	100	1020	60%	740	40%

Source: Researcher Field Survey, 2021

Of the one thousand seven hundred and sixty (1760) questionnaire that were distributed, only 1020 (60%) were returned. Hence, the total questionnaire response rate was 1020 representing 60%.

4.2 Demographic Data Presentation

Table 4.2.1: Age Distribution of Respondents (Questionnaire)

AGE DISTRIBUTION	FREQUENCY	%
------------------	-----------	---

20 – 29	266	26.08
30 – 39	398	39.02
40 – 49	230	22.55
50 – 59	107	10.49
60 & above	19	1.86
TOTAL	1020	100.0

Source: Field Survey, 2022

Total male respondents were 549 (53.82%) while female respondents were 471 (46.18%)

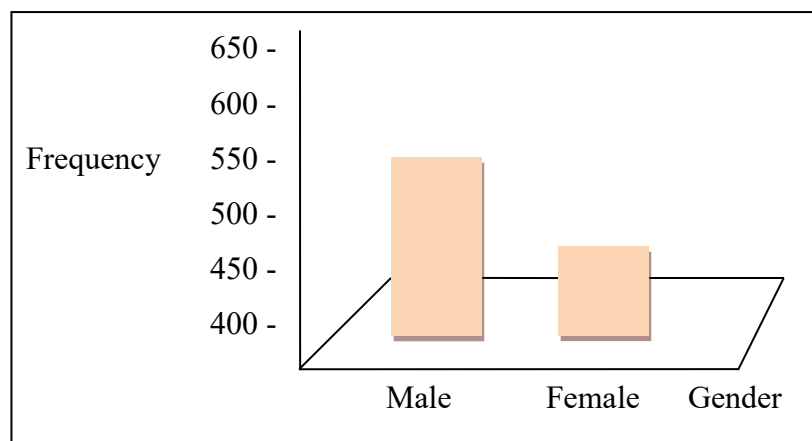


Figure 4.2.1: Gender Distribution of Respondents (Questionnaire)

Source: Field Survey, 2022

285 respondents were single (27.94%); 602 were married (59.02%) while 133 (13.04%) were widows





Figure 4.2.2: Marital Status of Respondents (Questionnaire)

Source: Field Survey, 2022

Table 4.2.2: Educational Qualification of Respondents (Questionnaire)

Education Attainment	Frequency	%
Primary	9	0.88
Secondary	41	4.02
OND	81	7.94
NCE	101	9.90
HND	184	18.04
B.Sc.	310	30.39
PGD	161	15.78
M.Sc	97	9.51
M. Phil	18	1.76
Ph.D	18	1.76
D.Sc	0	0.00
Total	1020	100

Source: Field Survey, 2022

42.94% respondents (438 No.) visited registered pharmacies at least once in a month,; 25% (255 No.) visited at least once in two months, while 32.06% (327 No.) claimed they visit registered pharmacies at least once every three months.

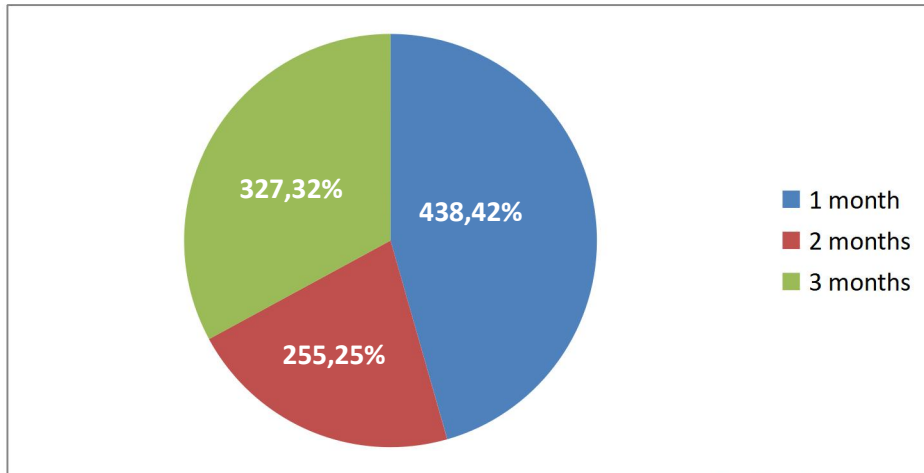
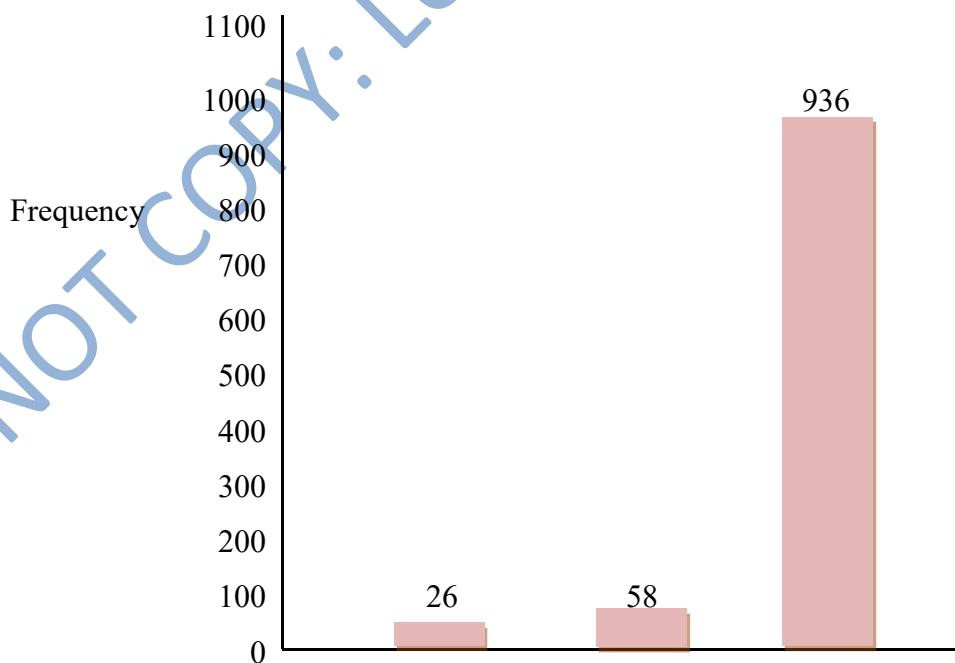


Figure 4.2.3: Frequency of Visiting Registered Pharmacies among Respondents (Questionnaire)

Source: Field Survey, 2022

26 respondents (2.55%) were Hausa; 58 respondents (5.69%) were Igbo, while the majority of the respondents, 936 (91.76%) were Yoruba.



Hausa Igbo Yoruba
 Figure 4.2.4: Ethnicity of Respondents (Questionnaire)

Source: Field Survey, 2022

5 Male respondent (62.50%) and 3 Female respondents (37.50%) participation in the Focus Group Discussion (FGD)

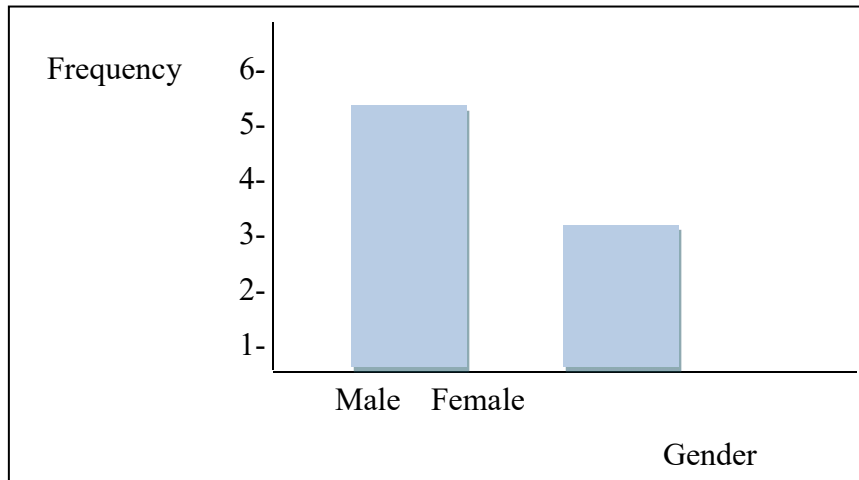


Figure 4.2.5: Gender Distribution of Respondents (FGD)

Source: FGD, 2020

Table 4.2.3: Age Distribution of Respondents (FGD)

Age Group	Frequency	%
18-30	0	0.0
31-40	1	12.5
41-50	1	12.5
51-60	2	25.0
61 and above	4	50
Total	8	100

Source: FGD, 2020

One discussant possessed HND/1st Degree, while the other seven participants in the Focus Group Discussion possessed Masters/Ph.D Degree.

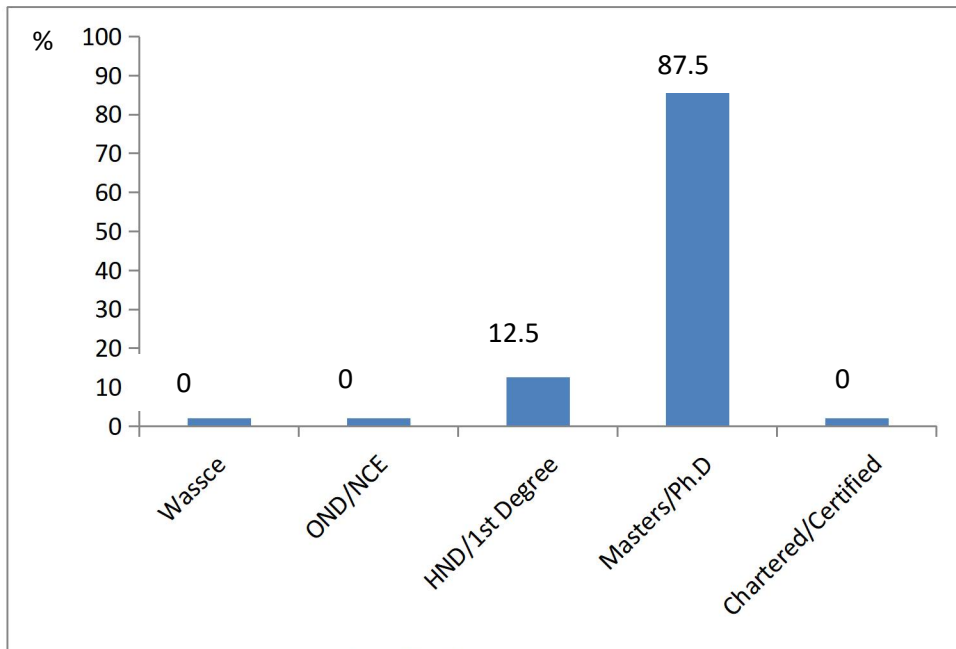


Figure 4.2.6: Educational Qualification of Respondents (FGD)
Source: FGD, 2020.

Seven of the eight discussants at the Focus Group Discussion were married, while one discussant belongs to the “Others” category.

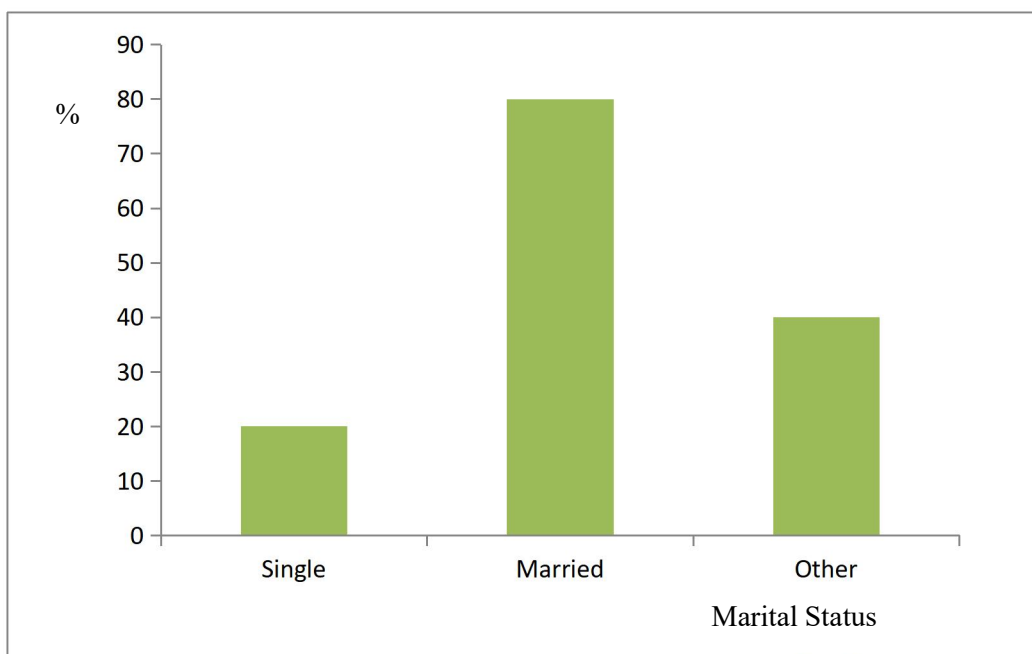


Figure 4.2.7: Marital Status of Respondents (FGD)
Source: FGD, 2020

Nationality of Respondents (FGD): All respondents were Nigerians

Ethnicity of Respondents (FGD): All respondents were Yoruba

Table 4.2.4: Frequency of Visiting Registered Pharmacy Stores by FGD Respondents

Interval of visit	Frequency	%
1 month	2	25.0
2 months	2	25.0
3 months	4	50.0
Total	8	100

Source: FGD, 2020.

4.2.1. Data Analysis, Interpretation

Table 4.2.5: Research Question One: The influence of point-of-purchase promotion in drug marketing on brand awareness

Front-of-Store and In-Store POP Promotions in Pharmacy Retail Outlets...	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. FAMILIARITY WITH POP PROMOTIONS								
1. There is a high level of familiarity with front-of-store POP Promotions in Pharmacy retail stores	531 (52.1%)	462 (45.3%)	6 (0.5%)	9 (0.9%)	12 (1.4%)	1020	3.11	1.02
2. There is a high level of familiarity with In-Store POP Promotions in Pharmacy retail stores	519 (50.9%)	483 (47.3%)	0 (0.0%)	9 (0.9%)	9 (0.9%)	1020	3.22	1.10
3. Both exert collective positive influence on purchase decisions when buying drugs	351 (34.4%)	474 (46.5%)	36 (3.5%)	111 (10.9%)	48 (4.7%)	1020	3.06	1.78
B. BRAND NAME AWARENESS, RECOGNITION, RECALL								
4. Provide opportunity for first time encounter with the product and awareness of brand name	219 (21.5%)	261 (25.6%)	264 (25.8%)	213 (20.9%)	63 (6.2%)	1020	3.42	1.96
5. Serve as a reminder that reinforces previous brand name awareness	273 (26.8%)	261 (25.6%)	99 (9.7%)	264 (25.8%)	123 (12.1%)	1020	3.03	1.41
6. Offer no significant effect on increasing brand name familiarity	297 (29.1%)	108 (10.6%)	243 (23.8%)	216 (21.2%)	156 (15.3%)	1020	3.12	1.11
7. Make brand recognition easier whether the product is standing alone or among other products.	225 (21.1%)	123 (12.1%)	239 (23.4%)	241 (23.6%)	192 (18.8%)	1020	3.11	1.09
8. Offer no significant impact on recall from memory other previously known brands within the same product group as the drug being advertised	142 (14%)	206 (20.2%)	256 (25.1%)	241 (23.6%)	175 (17.2%)	1020	3.07	1.12
C. AWARENESS OF ALTERNATIVE BRANDS, TOP-OF-THE MIND AWARENESS, CONSIDERATION FOR PURCHASE								
9. Often promote awareness of alternative brands of drugs to the drug I plan to buy	226 (22.2%)	204 (20.0%)	239 (23.4%)	158 (15.5%)	193 (18.9%)	1020	3.19	1.18
10. Reinforce the retention of the name of the drug being promoted in memory amongst those that easily come to mind in a product class or group	350 (34.3%)	421 (41.3%)	167 (16.4%)	48 (4.7%)	34 (3.3%)	1020	3.21	1.55
11. Do not significantly influence my decision to include the brand of drug being promoted in my list of options to be considered for purchase	276 (27.1%)	297 (29.1%)	144 (14.2%)	171 (16.7%)	132 (12.9%)	1020	3.01	1.11

Source: Researcher's Field Survey, 2022

Commentaries

- As presented in **Table 4.2.5**, 531 (52.1%) respondents and 462 (45.3%) respondents strongly agreed and agreed respectively that there is high level of familiarity with front-of-store POP promotions in Pharmacy retail stores, while 9 (0.8%) respondents and 12 (1.4%) respondents disagreed and strongly disagreed. A number of 6 (0.5%) were undecided. Having a mean response score of 3.11 ± 1.02 , majority of the sampled

respondents believed that there is high level of familiarity with front-of –store POP promotions in Pharmacy retail stores.

2. Five hundred and nineteen (50.9%) respondents strongly agreed that there is high level of familiarity with in-store POP promotions in Pharmacy retail stores. 483 (47.3%) respondents agreed, 0(0.0%) respondents did not have any opinion, 9(0.9%) respondents disagreed and 9(0.9%) respondents strongly disagreed. With a mean response score of 3.22 ± 1.10 , the majority of respondents finalized that there is high level of familiarity with in-store POP promotions in Pharmacy retail stores.
3. From the mean response score of 3.06 ± 1.78 and the responses of 351 (34.4%) respondents, 474 (46.5%) respondents, 36 (3.5%) respondents, 111 (10.9%) respondents and 48(4.7%) respondents who strongly agreed, agreed, did not have any opinion, disagreed and strongly disagreed, respectively, the majority of respondents agreed that both front-of store and in-store POP promotions in pharmacy retail outlets exert collective positive influence on purchase decision when buying drugs.
4. With 219 (21.5%) respondents strongly agreeing, 261 (25.6%) respondents agreeing, 264 (25.8%) respondents having no opinion, 213 (20.9%) respondents disagreeing and 63 (6.2%) respondents strongly disagreeing as well as a mean response score of 3.42 ± 1.96 , the majority of respondents agreed that the front-of store and in-store POP promotions in pharmacy retail outlets provides opportunity for first-time encounter with the product and awareness of brand name.
5. With 273 (26.8%) respondents strongly agreeing, 261 (25.6%) respondents agreeing, 99 (9.7%) respondents having no opinion, 264 (25.8%) respondents disagreeing and 123 (12.1%) respondents strongly disagreeing as well as a mean response score of $3.03 \pm$

- 1.41, the majority of respondents agreed that front-of store and in-store POP promotions in pharmacy retail outlets serve as a reminder that reinforces brand awareness
6. With 297 (29.1%) respondents strongly agreeing, 108 (10.6%) respondents agreeing, 243 (23.8%) respondents having no opinion, 216 (21.2%) respondents disagreeing and 156 (15.3%) respondents strongly disagreeing as well as a mean response score of 3.12 ± 1.11 , the majority of respondents agreed that the front-of store and in-store POP promotions in pharmacy retail outlets offer no significant effect on increasing brand name familiarity
7. Two hundred and twenty-five (21.1%) respondents and 123 (12.1%) respondents strongly agreed and agreed respectively that POP Promotions make brand recognition easier whether the product is standing alone or among other products, while 241 (23.6%) respondents and 192 (18.8%) respondents disagreed and strongly disagreed respectively. A number of respondents 239 (23.4%) were undecided. Having a mean response score of 3.11 ± 1.09 , majority, of the respondents indicated that POP Promotion do not necessarily make brand recognition easier whether the product is standing alone or among other products.
8. One hundred and forty-two (14%) respondents strongly agreed that Pop Promotions offer no significant impact on recall from memory other previously known brands within the same product group as the brand of drug intended for purchase. 206 (20.2%) respondents agreed, 256 (25.1%) did not have any opinion, 241 (23.6%) disagreed and 175 (17.2%) respondents strongly disagreed. With a mean response score of 3.07 ± 1.12 , the majority of respondents finalized that POP Promotions offer no significant impact on recall from memory other previously known brands within the same product group as the drug intended to be purchased.

9. From the mean response score of 3.19 ± 1.18 and the responses of 226 (22.2%) respondents, 204 (20.0%), 239 (23.4%), 158 (15.5%) and 193 (18.9%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that to a significant extent, POP Promotion often promote awareness of alternative brands of drugs to the drug intended to be purchased. This is logical as soon as the purchasers can recognize that the generic name of the active components of two or more branded drugs are the same and of equivalent contents in weight, volume or percentage composition.
10. With 350 (34.3%) respondents strongly agreeing, 421 (41.3%) respondents agreeing, 167 (16.4%) having no opinion, 48 (4.7%) disagreeing and 34 (3.3%) respondents strongly disagreeing, as well as a mean response score of 3.21 ± 1.55 , the majority of respondents agreed that POP Promotions reinforce the intention of the name of the drug being promoted in memory amongst those that easily come to mind in a product class or group
11. Two Seventy six (27.1%) respondents strongly agreed that POP promotions do not significantly influence their decision to include the particular brand being promoted in the list of options to be considered for purchase. 297 (29.1%) respondents agreed, 144 (14.2%) respondents did not have any opinion, 171 (16.7%) respondents disagreed and 132 (12.9%) respondents strongly disagreed. With a mean response score of 3.01 ± 1.11 , the majority of respondents finalized that POP Promotions do not significantly influence their decision to include the particular brand being promoted in their list of options to be considered for purchase

Table 4.2.6: Research Question Two: The Influence of Point-of-Purchase promotions in drug marketing on brand attitude

Point-of-Purchase Promotions at Pharmacy Retail Outlets.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. INTEREST STIMULATION, DESIRE								
1. Encourage me to like the brand of drug being promoted	156 (15.4%)	138 (13.5%)	30 (2.9%)	444 (43.5%)	252 (24.7%)	1020	1.57	0.88
2. Increase my interest to know more about the advertised brand of drug	520 (51.0%)	320 (31.4%)	96 (9.4%)	50 (4.9%)	34 (3.3%)	1020	3.31	1.23
3. Stimulate my desire to buy the advertised brand of drug	360 (35.3%)	496 (48.6%)	83 (8.1%)	61 (6.0%)	20 (2.0%)	1020	3.22	1.19
B. BRAND BELIEFS								
4. Make me belief that the advertised brand of drug is of good quality	325 (31.9%)	382 (37.5%)	280 (27.5%)	10 (1%)	23 (2.3%)	1020	3.28	1.21
5. Make me belief that the advertised brand of drug will be effective	260 (25.5%)	380 (37.3%)	282 (27.6%)	48 (4.7%)	50 (4.9%)	1020	3.21	1.19
6. Make me belief that the advertised brand of drug will be safe to use, without risks to my health	340 (33.3%)	310 (30.4%)	191 (18.7%)	30 (2.9%)	149 (14.6%)	1020	3.22	1.21
7. Give me the impression that the manufacturer of the advertised drug has good reputation and integrity	425 (41.7%)	268 (26.3%)	250 (24.5%)	50 (4.9%)	27 (2.6%)	1020	3.33	1.19
8. Empower me to develop an overall good image of the advertised brand of drug	271 (26.6%)	485 (47.5%)	107 (10.5%)	85 (8.3%)	72 (7.1%)	1020	3.23	1.18
9. Make me belief that I am being offered a good deal, value for money	205 (20.1%)	261 (25.6%)	215 (21.1%)	285 (27.9%)	54 (5.3%)	1020	3.28	1.17
C. STIMULATION FOR TRIAL.								
10. Encourage me to collect and use a free sample of the advertised brand of drug	276 (27.1%)	462 (45.3%)	131 (12.8%)	65 (6.4%)	86 (8.4%)	1020	3.19	1.04
11. Provide conviction to make a trial purchase of the advertised brand of drugs	100 (9.8%)	374 (36.7%)	305 (29.9%)	174 (17.1%)	67 (6.6%)	1020	3.01	1.07

Source: Researcher's Field Survey 2022

Commentaries

- As presented in **Table 4.2.6**, 156 (15.4%) respondents and 138 (13.5%) respondents strongly agreed and agreed respectively that POP promotions encourage them to like the brand being promoted, while 444 (43.5%) respondents and 252 (24.7%) respondents disagreed and strongly disagreed. A number of 30 (2.9%) were undecided. Having a

mean response score of 1.57 ± 0.88 , majority of the sampled respondents did not believe that POP promotions encourage them to like the brand being promoted.

2. Five hundred and twenty (51.0%) respondents and 320 (31.4%) respondents strongly agreed and agreed respectively that POP Promotions at pharmacy retail outlets increase their interest to know more about the advertised brand of drug, while 50(4.9%) respondents and 34(3.3%) respondents disagreed and strongly disagreed respectively. 96(9.4%) respondents were undecided. Having a mean response score of 3.31 ± 1.23 , majority of the respondents agreed that POP Promotions at pharmacy retail outlets increase their interest to know more about the advertised brand of drug.
3. From the mean response score of 3.22 ± 1.19 and the responses of 360 (35.3%) respondents, 496 (48.6%), 83 (8.1%), 61 (6.0%) and 20 (2.0%) respondents who strongly agreed, agreed, did not have an opinion, disagree and strongly disagreed respectively, the majority of respondents agreed that POP Promotions at Pharmacy retail outlets stimulates their desire to buy the advertised drug.
4. With 325(31.9%) respondents strongly agreeing, 382 (37.5%) respondents agreeing, 280 (27.5%) having no opinion, 10 (1.0%) disagreeing and 23 (2.3%) respondents strongly disagreeing, as well as a mean response score of 3.28 ± 1.21 , majority of respondents agreed that POP promotions in pharmacy retail outlets make them believe that the advertised brand of drug is of good quality.
5. Two hundred and sixty (25.5%) respondents strongly agreed that POP Promotions make them believe that the advertised brand of drug will be effective. 380 (37.3%) respondents agreed, 282 (27.6%) did not have any opinion, 48 (4.7%) disagreed and 50 (4.9%) strongly disagreed. With a mean responses score of 3.21 ± 1.19 , the majority of

respondents agreed that POP Promotions make them believe that the advertised brand of drug will be effective.

6. Three hundred and Forty (33.3%) respondents and 310 (30.4%) respondents strongly agreed and agreed respectively that POP Promotions make them believe that the advertised brand of drug will be safe to use without risk to health, while 30 (2.9%) respondents and 149 (14.6%) respondents disagreed and strongly disagreed respectively. 30 (2.9%) respondents were undecided. Having a mean response score of 3.22 ± 1.21 , majority of respondents agreed that POP Promotion in pharmacy retail outlets make them believe that the advertised brand of drug will be safe to use, without risk to health.
7. From the mean response score of 3.33 ± 1.19 and the responses of 425 (41.7%) respondents, 268 (26.3%), 250 (24.5%), 50 (4.9%) and 27 (2.6%) respondents who strongly agreed, agreed, did not have an opinion, disagree and strongly disagree respectively, the majority of respondents agreed that POP Promotions at pharmacy retail outlets give the impression that the manufacturer of the advertised drug has good reputation and integrity.
8. With 271 (26.6%) respondents strongly agreeing, 485 (47.7%) respondents agreeing, 107 (10.5%) having no opinion, 85 (8.3%) disagreeing and 72 (7.1%) strongly disagreeing, as well a mean response score of 3.23 ± 1.18 , majority respondents agreed that POP Promotions in pharmacy retail outlets empower them to develop and overall good image of the advertised brand of drug.
9. Two hundred and five (20.1%) respondents strongly agreed that POP Promotions make them believe that they are being offered a good deal, value for money. 261 (25.6%) agreed, 215 (21.5%) did not have any opinion, 285 (27.9%) disagreed and 54 (5.3%) strongly disagreed. With a mean response score of 3.28 ± 1.17 , majority of respondents

agreed that POP Promotion in pharmacy retail outlets make them believe that they are being offered a good deal, value for money.

10. Two hundred and seventy-six (27.1%) respondents and 462 (45.3%) respondents strongly agreed and agreed respectively that POP Promotions encourage them to collect and use a free trial sample of the advertised brand of drug, while 65 (6.4%) respondents and 86 (8.4%) respondents disagreed and strongly disagreed respectively. 131 (12.8%) respondents were undecided. Having a mean response score of 3.19 ± 1.04 , majority of respondents agreed that POP Promotions in pharmacy retail outlets encourage them to collect and use free trial sample of the advertised brand of drug.
11. From the mean response score of 3.01 ± 1.07 and the responses of 100 (9.8%) respondents and 374 (36.7%), 305 (29.9%), 174 (17.1%) and 67 (6.6%) respondents who agreed and strongly agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents did not agreed that POP Promotions at pharmacy retail outlets provide conviction to make a trial purchase of the advertised brand of drugs

Table 4.2.7: Research Question Three: The influence of Point-of-Purchase promotions in drug marketing on impulse buying

POP Promotions in Pharmacy Retail Outlets.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. UNPLANNED AND REMINDER IMPULSE PURCHASE								
1. Can provide strong persuasion to make an unplanned impulse purchase of the brand of prescription drug being promoted at first time encounter	72 (7.1%)	92 (9.0%)	204 (20.0%)	285 (27.9%)	367 (36.0%)	1020	1.21	0.56
2. Can provide strong persuasion to make an unplanned impulse purchase of the brand of non-prescription (OTC) drug being promoted at first time encounter	85 (8.3%)	153 (15.0%)	255 (25.0%)	340 (33.3%)	190 (18.6%)	1020	1.19	0.61
3. Can provide strong reminder and persuasion to make an impulse purchase of the brand of prescription drug being promoted, if I had prior intention to buy the same drug	126 (12.4%)	149 (14.6%)	245 (24.0%)	264 (25.9%)	236 (23.1%)	1020	2.19	0.99
4. Can provide strong reminder and persuasion to make an impulse purchase of the brand of non-prescription (OTC) drug being promoted, if I had prior need and intention to buy the same drug	156 (15.3%)	201 (19.7%)	249 (24.4%)	258 (25.3%)	170 (16.7%)	1020	2.11	0.84
B. IMPULSIVE BRAND SWITCHING AND BRAND SUBSTITUTION								
5. Empower and persuade me to buy my pre-determined choice of brand of drug when I see it being advertised	243 (23.8%)	198 (19.4%)	273 (26.8%)	246 (24.1%)	60 (5.9%)	1020	3.02	1.09
6. Can empower me to switch from my preferred brand of prescription drug to the brand being advertised	12 (1.2%)	50 (4.9%)	255 (25.0%)	300 (29.4%)	403 (39.5%)	1020	1.06	0.56
7. Can empower me to switch from my preferred brand of non-prescription (OTC) drug to the brand being advertised	20 (2.0%)	87 (8.5%)	262 (25.7%)	298 (29.2%)	353 (34.6%)	1020	1.01	0.51
8. Can empower me to buy an alternative brand being advertised, if my preferred brand of prescription drug is not available	18 (1.8%)	48 (4.7%)	302 (29.6%)	253 (24.8%)	399 (39.1%)	1020	1.06	0.42
9. Can empower me to buy an alternative brand being advertised, if my preferred brand of non-prescription (OTC) drug is not available	180 (17.6%)	425 (41.7%)	263 (25.8%)	80 (7.8%)	72 (7.1%)	1020	3.22	1.12

Source: Researcher's Field Survey, 2022

Commentaries

1. From a mean response score of 1.21 ± 0.56 , and the responses of 72 (7.1%) and 92 (9.0%) respondents strongly agreeing and agreeing respectively, while 204 (20.0%), 285 (27.9%)

and 367 (36.0%) did not have an opinion, disagreed and strongly disagreed respectively, majority of respondents disagreed that POP Promotions in pharmacy retail outlets can provide strong persuasion to make an unplanned-impulse purchase of the brand of prescription drug being promoted at first-time encounter.

2. With a mean score response of 1.19 ± 0.61 , and 340 (33.3%) respondents disagreeing, 190 (18.6%) strongly disagreeing, 255 (25.0%) undecided, while 85 (8.3%) and 153 (15.0%) strongly agreeing and agreeing respectively, the majority of respondents disagreed that POP Promotions in pharmacy retail outlets can provide strong persuasion to make an unplanned-impulse purchase of brand of non-prescription (OTC) drug being promoted at first-time encounter.

3. Two hundred and thirty-six (23.1%) respondents and 264 (25.9%) respondents strongly disagreed and disagreed respectively, while 126 (12.4%), 149 (14.6%) and 245 (24.0%) respondents strongly agreed, agreed, did not have an opinion respectively. Having a mean response score of 2.19 ± 0.99 , majority of the respondents did not agree that POP Promotions in pharmacy retail outlets can provide strong reminder and persuasion to make a reminder-impulse purchase of the brand of prescription drug being promoted, even if they had prior intention to buy the same drug.

4. From the mean response score of 2.11 ± 0.84 , and the responses of 156 (15.3%) respondents, 201 (19.7%), 249 (24.4%), 258 (25.3%) and 170 (16.7%) respondents who strongly agreed, agreed, did not have an opinion, disagree and strongly disagreed respectively, the majority of respondents disagreed that POP Promotions in pharmacy retail outlets can provide strong reminder and persuasion to make a reminder-impulse purchase of brand non-prescription (OTC) drug being promoted even if they had prior intention to buy the same drug.

5. Two hundred forty-three (23.8%) respondents strongly agreed that POP Promotions empower and persuade them to buy their pre-determined choice of brand of drug. 198 (19.4%) respondents agreed, 273 (26.8%) respondents did not have an opinion, 246 (24.1%) respondents disagreed and 60 (5.9%) respondents strongly disagreed. With a mean response score of 3.02 ± 1.09 , the majority of respondents agreed that POP Promotions empower and persuade them to buy their pre-determined choice of brand of drug when they see it being advertised.

6. With 12 (1.2%) respondents strongly agreeing, 50 (4.9%) respondents agreeing, 255 (25.0%) having no opinion, 300 (29.4%) disagreeing and 403 (39.5%) respondents strongly disagreeing, as well as a mean response score of 1.06 ± 0.56 , majority of respondents disagreed that POP Promotions in pharmacy retail outlets can empower them to switch from their preferred brand of prescription drug to the brand being advertised.

7. From the mean response score of 1.01 ± 0.51 and the responses of 20 (2.0%) respondents, 87 (8.5%), 262 (25.7%), 298 (29.2%) and 353 (34.6%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents disagreed that POP Promotions in Pharmacy retail outlets can empower them to switch from their preferred brand of non-prescription (OTC) drug to the brand being advertised.

8. Eighteen (1.8%) respondents and 48 (4.7%) respondents strongly agreed and agreed respectively, while 302 (29.6%), 253 (24.8%) and 399 (39.1%) respondents were uncertain, disagreed and strongly disagreed respectively, as well as a mean response score of 1.06 ± 0.42 , majority of the respondents disagreed that POP Promotions in pharmacy retail outlets can empower them to buy an alternative brand being advertised if their preferred brand of prescription drug is not available.

9. With 180 (17.6%) respondents strongly agreeing, 425 (41.7%) agreeing, 263 (25.8%) having no opinion, 80 (7.8%) disagreeing and 72 (7.1%) respondents strongly disagreeing, as well as a mean response score of 3.22 ± 1.12 , the majority of the respondents agreed that POP Promotions in pharmacy retail outlets can empower them to buy an alternative brand being advertised if their preferred brand of non-prescription (OTC) drug is not available. Table 4.2.8: Research Question Four: The influence of point-of-purchase promotions in drug marketing on brand loyalty

Table 4.2.8: Research Question Four: The influence of point-of-purchase promotions in drug marketing on brand loyalty

DO NOT COPY: Lead City University, Nigeria

POP Promotions in Pharmacy Retail Outlets.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. ACCEPTING RECOMMENDATIONS BY PHARMACY'S STAFF								
1. Do not increase my confidence to accept brand names recommended by the pharmacist or other healthcare professional staff in pharmacy retail outlets	303 (29.7%)	456 (44.7%)	33 (3.2%)	108 (10.6%)	120 (11.8%)	1020	3.37	1.21
2. Increase my confidence to accept brand names recommended by the non-healthcare professional staff in pharmacy retail outlets	231 (22.6%)	276 (27.1%)	129 (12.6%)	273 (26.8%)	111 (10.9%)	1020	3.12	1.11
B. RECOMMENDING PREFERRED BRAND TO OTHER PEOPLE								
3. Increase my confidence to recommend my preferred brand of drug to other people	297 (29.1%)	241 (23.6%)	243 (23.8%)	101 (9.9%)	138 (13.5%)	1020	3.21	1.14
4. Significantly increase the frequency of recommending my preferred brand of drug to other people	230 (22.6%)	267 (26.2%)	91 (8.9%)	263 (25.8%)	169 (16.6%)	1020	3.12	1.21
C. EMOTIONAL ATTACHMENT / ENDEARMENT TO BRAND								
5. Generally increase my emotional attachment and endearment to the advertised brand of prescription drug	20 (2.0%)	18 (1.8%)	199 (19.5%)	458 (44.9%)	325 (31.9%)	1020	1.02	0.56
6. Generally increase my emotional attachment and endearment to the advertised brand of non-prescription (OTC) drug	17 (1.7%)	24 (2.4%)	211 (20.7%)	400 (39.2%)	168 (16.5%)	1020	1.01	0.41
D. BUYING MORE QUANTITY								
7. Encourage me to buy more quantity of the advertised brand of prescription drug at each purchase session	5 (0.5%)	3 (0.3%)	285 (27.9%)	599 (58.7%)	128 (12.5%)	1020	0.88	0.11
8. Encourage me to buy more quantity of the advertised brand of non-prescription (OTC) drug at each purchase session	7 (0.7%)	8 (0.8%)	302 (29.6%)	499 (48.9%)	204 (20.0%)	1020	0.89	0.13
E. REGULARITY / FREQUENCY OF REPEAT PURCHASE								
9. Encourage me to buy the advertised brand of prescription drug more frequently	20 (2.0%)	18 (1.8%)	158 (15.5%)	504 (49.4%)	320 (31.4%)	1020	1.12	0.21
10. Encourage me to buy the advertised brand of non-prescription (OTC) drug more frequently	31 (3.0%)	45 (4.4%)	208 (20.4%)	536 (52.5%)	200 (19.6%)	1020	1.22	0.12
F. STOCK-PILING								
11. Encourage me to stockpile the advertised brand of prescription drug	0 (0.0%)	5 (0.5%)	45 (4.4%)	150 (14.7%)	820 (80.4%)	1020	0.11	0.12
12. Encourage me to stockpile the advertised brand of non-prescription (OTC) drug	1 (0.1%)	4 (0.4%)	100 (9.8%)	169 (16.6%)	746 (73.1%)	1020	0.11	0.14

G. SENSITIVITY TO INCENTIVES OFFERED BY COMPETING BRANDS								
13. Do not significantly increase my sensitivity or attraction to incentives offered by advertised brands competing with my preferred brand of prescription drug	205 (20.1%)	521 (51.1%)	52 (5.1%)	100 (9.8%)	142 (13.9%)	1020	3.61	1.88
14. Do not significantly increase my sensitivity or attraction to incentives offered by advertised brands competing with my preferred brand of non-prescription (OTC) drug	218 (21.4%)	485 (47.5%)	121 (11.9%)	100 (9.8%)	96 (9.4%)	1020	3.54	1.74

Source: Researcher's Field Survey, 2022

Commentaries

1. From the mean response score of 3.37 ± 1.21 and the responses of 303 (29.7%) respondents, 456 (44.4%) respondents, 33 (3.2%) respondents, 108 (10.6%) respondents and 120 (11.8%) respondents who strongly agreed, agreed, did not have any opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that POP promotions do not increase their confidence to accept brand names recommended by the pharmacist or other health care professional staff
2. With 231 (27.6%) respondents strongly agreeing, 276 (27.1%) respondents agreeing, 129 (12.6%) respondents having no opinion, 273 (26.8%) respondents disagreeing and 111 (10.9%) respondents strongly disagreeing as well as a mean response score of 3.12 ± 1.11 , the majority of respondents agreed that POP promotions increased their confidence to accept brand names recommended by the non-health care professional staff in the pharmacy retail store.
3. With 297 (29.1%) respondents strongly agreeing, 241 (23.6%) respondents agreeing, 243 (23.8%) respondents having no opinion, 101 (9.9%) respondents disagreeing and 138 (13.5%) respondents strongly disagreeing as well as a mean response score of 3.18 ± 1.19 , the majority of respondents agreed that POP promotions increase their confidence to recommend their preferred brand of drug to other people

4. Two hundred and thirty (22.6%) respondents and 267 (26.2%) respondents strongly agreed and agreed respectively, 91 (8.9%), 263 (25.8%) and 169 (16.6%) respondents did not have no opinion, disagreed and strongly disagreed and respectively. Having a mean response score of 3.12 ± 1.21 , majority of respondents agreed that POP Promotions significantly increase the frequency of recommending their preferred brand of drug to other people/
5. From the mean response score 1.02 ± 0.56 , and the responses of 20 (2.0%) respondents, 18 (1.8%), 199 (19.5%), 458 (44.9%) and 325 (31.9%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents disagreed that POP Promotions generally increase their emotional attachment and endearment to the advertised brand of prescription drug.
6. With 17 (1.7%) respondents strongly agreeing, 24 (2.4%) respondents agreeing 211 (20.7%) having no opinion, 400 (39.2%) disagreeing and 168 (16.5%) respondents strongly disagreeing, as well as a mean response score of 1.01 ± 0.41 , majority of respondents disagreed that POP Promotions generally increase their emotional attachment and endearment to the advertised brand of non-prescription OTC drug.
7. Five (0.5%) respondents strongly agreed, 3 (0.3%) agreed, while 285 (27.9%), 599 (58.7%) and 128 (12.5%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 0.88 ± 0.11 , majority of the respondents disagreed that POP Promotions encourage them to buy more quantity of the advertised brand of prescription drug at each purchase session.
8. From the mean response score of 0.89 ± 0.13 , and the response of 7 (0.7%), 8 (0.8%), 302 (29.6%), 499 (48.9%) and 204 (20.0%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of

respondents disagreed that POP Promotions encourage them to buy more quantity of the advertised brand of non-prescription (OTC) drug at each purchase session.

9. With 20 (2.0%) respondents strongly agreeing, 18 (1.8%) agreeing, 158 (15.5%) having no opinion, 504 (49.4%) disagreeing and 320 (31.4%) strongly disagreeing, as well as a mean response score of 1.12 ± 0.21 , majority of respondents disagreed that POP Promotions encourage them to buy the advertised brand of prescription drug more frequently.
10. 31 (3.0%) respondents strongly agreed, 45 (4.4%) agreed, while 208 (20.4%), 536 (52.5%) and 200 (19.6%) respondents did not have an opinion, disagree and strongly disagreed respectively. Having a mean response score of 1.22 ± 0.12 , majority of the respondents disagreed that POP Promotions encourage them to buy the advertised brand of non-prescription (OTC) drug more frequently.
11. With no respondents (0.0%) strongly agreeing, 5 (0.5%) agreeing, 45 (4.4%) having no opinion, 150 (14.7%) disagreeing and 820 (80.4%) strongly disagreeing as well as mean response score of 0.11 ± 0.12 , majority of respondents disagreed that POP Promotions encourage them to stockpile the advertised brand of prescription drug.
12. From the mean response score of 0.11 ± 0.14 , and the response of 1 (0.1%) respondent, 4 (0.4%), 100 (9.8%) and 746 (73.1%) respondents strongly agreeing, agreeing, did not have opinion, disagreed and strongly disagreed respectively, the majority of respondents disagreed that POP Promotion encourage them to stockpile the advertised brand of non-prescription (OTC) drug.
13. 205 (20.1%) respondents and 521(51.1%) strongly agreed and agreed respectively, while 52 (5.1%), 100 (9.8%) and 142 (13.9%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.61 ± 1.88 ,

majority of the respondents agreed that POP Promotions do not significant increase their sensitivity or attraction to incentives offered by advertised brands competing with their preferred brand of prescription drug.

14. With 218 (21.4%) strongly agreeing, 485 (47.5%) agreeing, 121 (11.9%) having no opinion, 100 (9.8%) disagreeing and 96 (9.4%) respondents strongly disagreeing, as well as a mean response score of 3.54 ± 1.17 , majority of respondents agreed that POP Promotions do not significantly increase their sensitivity or attraction to incentives offered by advertised brands competing with their preferred brand on non-prescription (OTC) drug.

Table 4.2.9: Research Question Five: The Influence of Front-of-Store point-of – purchase promotions in drug marketing on brand patronage (choice) in general

Front-of-Store POP Promotions generally.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. ATTENTION, BRAND KNOWLEDGE, BRAND IDENTIFICATION								
1. Are powerful in attracting attention to the advertised brand of drug	482 (47.3%)	495 (48.5%)	32 (3.1%)	30 (2.9%)	13 (1.3%)	1020	3.33	1.11
2. Are easy to read	400 (39.2%)	537 (52.6%)	18 (1.8%)	42 (4.1%)	23 (2.3%)	1020	3.32	1.21
3. Attract my commitment to spend good time, looking, reading and digesting the information being displayed	50 (4.9%)	216 (21.2%)	498 (48.8%)	149 (14.6%)	107 (10.5%)	1020	3.12	1.12
4. Bodily communicate all essential information for purchase decision making	147 (14.4%)	407 (39.9%)	325 (31.9%)	92 (9.0%)	49 (4.5%)	1020	3.14	1.11
5. Bodily advertise key promotion offers, if any	382 (37.5%)	464 (45.5%)	145 (14.2%)	19 (1.9%)	10 (1.0%)	1020	3.12	1.18
6. Make identification of product pack easy	481 (47.2%)	485 (47.5%)	22 (2.2%)	15 (1.5%)	17 (1.7%)	1020	3.55	1.21
7. Promote quick awareness of brand name	524 (51.4%)	386 (37.8%)	41 (4.0%)	40 (3.9%)	29 (2.8%)	1020	3.67	1.13
8. Promote retention of brand name of drug in memory	164 (16.1%)	467 (45.8%)	285 (27.9%)	53 (5.2%)	41 (4.0%)	1020	3.21	1.21
B. FAVOURABLE ATTITUDES AND POSSIBLE OUTCOMES								
9. Empower me to develop favourable attitudes towards the advertised brand of drug	246 (24.1%)	324 (31.8%)	206 (20.2%)	100 (9.8%)	144 (14.1%)	1020	3.12	1.27
10. Encourage me to collect and try free samples of the advertised brand of drug	475 (46.6%)	462 (45.3%)	63 (6.2%)	5 (0.5%)	15 (1.5%)	1020	3.24	1.56

11. Encourage me to make a trial purchase of the advertised brand of drug, sooner than later	359 (35.2%)	503 (49.3%)	78 (7.6%)	42 (4.1%)	38 (3.7%)	1020	3.12	1.23
12. Empower me to buy a brand of drug I am already familiar with when I see it being advertised at the pharmacy retail store	421 (41.1%)	385 (37.7%)	42 (4.1%)	62 (6.1%)	100 (9.8%)	1020	3.21	1.13
13. Reinforce my brand loyalty to a brand of drug I have used before	382 (37.5%)	495 (48.5%)	104 (10.2%)	10 (1.0%)	29 (2.8%)	1020	3.88	1.45

Source: Researcher's Field Survey, 2022

Commentaries

1. Four hundred and eighty-two (47.3%) and 495 (48.5%) respondents strongly agreed and agreed respectively, 32 (3.1%), 30 (2.9%) and 13 (1.3%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.33 ± 1.11 , majority of respondents agreed that front-of-store POP Promotions generally are powerful in attracting attention to the advertised brand of drug.
2. From the mean response score of 3.32 ± 1.21 , and the responses of 400 (39.2%) respondents, 537 (52.6%), 18 (1.8%), 42 (4.1%) and 23 (2.3%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that front-of-store POP Promotions generally are easy to read
3. With 50 (4.9%) respondents strongly agreeing, 216 (21.2%) respondents agreeing, 498 (48.8%) having no opinion, 149 (14.6%) disagreeing and 107 (10.5%) strongly disagreeing, as well as a mean response score of 3.12 ± 1.12 , majority of respondents are undecided whether front-of-store POP Promotions attract their commitment to spend good time, looking, reading and digesting the information being displayed.
4. One hundred and forty-seven (14.4%) respondents strongly agreed, 407 (39.9%) agreed, while 325 (31.9%), 92 (9.0%) and 49 (4.5%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of $3.14 \pm$

1.11, majority of respondents agree that front-of-store POP Promotions generally boldly communicate all essential information for purchase decision making.

5. From the mean response score of 3.12 ± 1.18 and the responses of 382 (37.5%), 464 (45.5%), 145 (14.2%), 191 (1.90%) and 10 (1.0%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed the front-of-store POP Promotions generally, boldly advertised key promotional offers, if any.
6. With 481 (47.2%) respondents strongly agreeing, 485 (47.5%) agreeing, 22 (2.2%) having no opinion, 15 (1.5%) disagreeing and 17 (1.7%) strongly disagreeing, as well as a mean response score 3.55 ± 1.21 , majority of respondents agreed that front-of-store POP Promotions make identification of product pack easy.
7. Five hundred and twenty-four (51.4%) respondents and 386 (37.8%) respondents strongly agreed and agreed respectively, while 41 (4.0%), 40 (3.9%) and 29 (2.8%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.67 ± 1.13 , majority of the respondents agreed that Front-of-Store POP Promotions generally, promote quick awareness of brand name
8. From the mean response score of 3.21 ± 1.21 , and the responses of 164 (16.1%) respondents, 467 (45.8%), 285 (27.9%), 53 (5.2%) and 41 (4.0%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that front-of-store POP Promotions generally promote retention of brand name of the drug being advertised in memory.
9. With 246 (24.1%) respondents strongly agreeing 324 (31.8%) agreeing, 206 (20.2%) having no opinion, 100 (9.8%) disagreeing and 144 (14.1%) respondents strongly disagreeing as well as a mean response score of 3.12 ± 1.27 , majority of respondents

agreed that Front-of-Store POP Promotions generally empower them to develop favorable attitudes towards the advertised brand of drug.

10. Four hundred and seventy-five (46.6%) respondents strongly agreed, 462 (45.3%) agreed, while 63 (6.2%), 5 (0.5%) and 15 (1.5%) of respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.24 ± 1.56 , majority of the respondents agreed that front-of-store POP Promotions generally encourage them to collect and try free samples of the advertised brand of drug.
11. From the mean response score of 3.12 ± 1.23 , and the responses of 359 (35.2%), 503 (49.3%), 78 (7.6%), 42 (4.1%) and 38 (3.7%) respondents who strongly agreed, agreed did not give an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that front-of-store POP Promotions generally encourage them to make a trial purchase of the advertised brand of drug sooner than later.
12. With 421 (41.1%) respondents strongly agreeing, 385 (37.7%) agreeing, 42(4.1%) having no opinion, 62 (6.1%) disagreeing and 100 (9.8%) respondents strongly disagreeing, as well as a mean response score 3.21 ± 1.13 , majority of respondents agreed that front-of-store POP Promotions generally empower them to buy a brand of drug they are already familiar with when they see it being advertised at the pharmacy retail store.
13. Three hundred and eighty-two (37.5%) respondents and 495 (48.5%) respondent strongly agreed and agreed respectively, while 104 (10.2%), 10 (1.0%) and 29 (2.8%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.88 ± 1.45 , majority of respondents agreed that front-of-store POP Promotions generally reinforce their brand loyalty to a brand drug which they have used before, when they see it being advertised in pharmacy retail outlets

Table 4.2.10: Research Question Six: The influence of in-store POP promotions in drug marketing on board patronage (choice) in general

In-Store POP Promotions generally.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. ATTENTION, BRAND KNOWLEDGE, BRAND IDENTIFICATION								
1. Are powerful in attracting attention to the advertised brand of drug	464 (45.5%)	521 (51.1%)	1 (0.1%)	22 (2.2%)	12 (1.2%)	1020	3.77	1.11
2. Are easy to read	480 (47.1%)	497 (48.7%)	15 (1.5%)	17 (1.7%)	11 (1.1%)	1020	1.22	1.33
3. Attract my commitment to spend good time, looking, reading and digesting the information being displayed	381 (37.4%)	484 (47.5%)	108 (10.6%)	27 (2.6%)	20 (2.0%)	1020	1.44	1.33
4. Bodly communicate all essential information for decision making	161 (15.8%)	426 (41.8%)	284 (27.8%)	98 (9.6%)	51 (5.0%)	1020	3.11	1.22
5. Bodly advertise key promotion offers, if any	401 (39.3%)	475 (46.6%)	120 (11.8%)	14 (1.4%)	10 (1.0%)	1020	3.22	1.12
6. Make identification of product pack easy	490 (48.0%)	486 (47.6%)	30 (2.9%)	9 (0.9%)	5 (0.5%)	1020	3.27	1.11
7. Promote quick awareness of brand name	492 (48.2%)	486 (47.6%)	24 (2.4%)	11 (1.1%)	7 (0.7%)	1020	3.28	1.19
8. Promote retention of brand name of drug in memory	208 (20.4%)	374 (36.7%)	247 (24.2%)	100 (9.8%)	91 (8.9%)	1020	3.47	1.08
B. FAVOURABLE ATTITUDES AND POSSIBLE OUTCOMES								
9. Empower me to develop favourable attitudes towards the advertised brand of drug	262 (25.7%)	350 (34.3%)	235 (23.0%)	83 (8.1%)	90 (8.8%)	1020	3.45	1.02
10. Encourage me to collect and try free samples of the advertised brand of drug	468 (45.9%)	452 (44.3%)	71 (7.0%)	11 (1.1%)	18 (1.8%)	1020	3.51	1.04
11. Encourage me to make a trial purchase of the advertised brand of drug, sooner than later	305 (29.9%)	497 (48.7%)	104 (10.2%)	48 (4.7%)	66 (6.5%)	1020	3.44	1.04
12. Empower me to buy a brand of drug I am already familiar with when I see it being advertised at the pharmacy retail store	490 (48.0%)	401 (39.3%)	21 (2.1%)	52 (5.1%)	56 (5.5%)	1020	3.93	1.01
13. Reinforce my brand loyalty to a brand of drug I have used before	325 (31.9%)	498 (48.5%)	95 (9.3%)	55 (5.4%)	47 (4.6%)	1020	3.71	1.22

Source: Researcher's Field Survey, 2022

Commentaries

1. Four hundred and sixty-four (45.5%) and 521 (51.1%) respondents strongly agreed and agreed respectively while 1 (0.1%), 22 (2.2%) and 12 (1.2%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.77 ± 1.11 , majority of respondents agreed that In-Store POP Promotions generally are powerful in attracting attention to the advertised brand of drug.
2. From the mean response score of 1.22 ± 1.33 , and the responses of 480 (47.1%) respondents, 497 (48.7%), 15 (1.5%), 17 (1.7%) and 11 (1.1%) respondents who strongly agreed, agreed did not have an opinion, disagreed and strong disagreed respectively, the majority of respondents agreed that In-Store POP Promotions generally, are easy to read.
3. With 381 (37.4%) respondents strongly agreeing, 484 (47.5%) agreeing, 108 (10.6%) having no opinion, 27 (2.6%) disagreeing and 20 (2.0%) respondents strongly disagreeing, as well s a mean response score of 1.44 ± 1.33 , majority of respondents agree that In-Store POP Promotions attract their commitment to spend good time, looking and digesting information being displayed.
4. One hundred and sixty-one (15.8%) respondents strongly agreed, 426 (41.8%) agreed while 284 (27.8%), 98 (9.6%) and 51 (5.0%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.11 ± 1.22 , majority of respondents agreed that In-Store POP Promotions generally, boldly communicate all essential information for purchase decision making.
5. From the mean response score 3.22 ± 1.12 , and the responses of 401 (39.3%), 475 (46.6%), 120 (11.8%), 14 (1.4%), and 10 (1.0%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the

majority of respondents agreed that In-Store POP Promotions generally, boldly advertise key promotional offers, if any.

6. With 490 (48.0%) respondents strongly agreeing, 486 (47.6%) agreeing, 30 (2.9%) having no opinion, 9 (0.9%) disagreeing and 5 (0.5%) respondents strongly disagreeing, as well as a mean response score of 3.27 ± 1.11 , majority of respondents agreed that In-Store POP Promotions generally make identification of product pack easy.
7. Four hundred and ninety-two (48.2%) respondents and 486 (47.6%) respondents strongly agreed and agreed respectively, while 24 (2.4%), 11 (1.1%) and 7 (0.7%) respondents did not have an opinion, disagreeing and strongly disagreed respectively. Having a mean response score of 3.28 ± 1.19 , majority of respondents agreed that In-Store POP Promotions generally promote quick awareness of brand name.
8. From the mean response score of 3.47 ± 1.08 and the responses of 208 (20.4%) respondents, 374 (36.7%), 247 (24.2%), 100 (9.8%) and 91 (8.9%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that In-Store POP Promotions generally promote retention of brand name of the drug being advertised in memory.
9. With 262 (25.7%) respondents strongly agreeing, 350 (34.3%) agreeing, 235(23.0%) having no opinion, 83 (8.1%) disagreeing and 90 (8.8%) respondent strongly disagreeing, as well as a mean response score of 3.45 ± 1.02 , majority of respondents agreed that In-Store POP Promotions generally empower them to develop favorable attitudes towards the advertised brand of drug.
10. Four hundred and sixty-eight (45.9%) respondents strongly agreed, 452 (44.3%) agreed, while 71 (7.0%), 11 (1.1%) and 18 (1.8%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of $3.51 \pm$

1.04, majority of the respondents agreed that In-Store POP Promotion generally, encourage them to collect and try free samples of the advertised brand of drug.

11. From the mean response score of 3.44 ± 1.04 , and the responses of 305 (29.9%), 497 (48.7), 104 (10.2%), 48 (4.7%) and 66 (6.5%) respondents who strongly agreed, agreed, did not have no opinion, disagree and strongly disagreed respectively, the majority of respondents agreed that In-Store POP Promotions generally, encourage them to make a trial purchase of the advertised brand of drug, sooner than later
12. With 490 (48.0%) respondents strongly agreeing, 401 (39.3%) agreeing, 21 (2.1%) having no opinion, 52 (5.1%) disagreeing and 56 (5.5%) respondents strongly disagreeing, as well as a mean response score of 3.93 ± 1.01 , majority of respondents agreed that In-Store POP Promotions generally empower them to buy a brand of drug they are already familiar with when they see it being advertised at the pharmacy retail store.
13. Three hundred and twenty-five (31.9%) respondents and 498 (48.5%) respondents strongly agreed and agreed respectively, while 95 (9.3%), 55 (5.4%) and 47 (4.6%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.71 ± 1.22 , majority of respondents agreed that In-Store POP Promotions generally, reinforce their brand loyalty to a brand of drug which they have used before, when they see it being advertised in pharmacy retail outlets.

Table 4.2.11: Research Question Seven: The significant difference between the influences of point-of-purchase promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.

Front-of-Store versus In-Store POP Promotions.....	SA No.(%)	A No.(%)	U No.(%)	D No.(%)	SD No.(%)	Total	Mean	SD
A. INFLUENCE ON CHOICE OF PRESCRIPTION DRUGS								
1. Front –of-Store POP Promotion only to a little extent, influence my choice of brands of prescription drugs to buy	487 (47.8%)	426 (41.8%)	85 (8.3%)	15 (1.5%)	7 (0.7%)	1020	3.21	1.11
2. In-Store POP Promotion only to a little extent, influence my choice of brands of prescription drugs to buy.	462 (45.3%)	430 (42.2%)	96 (9.4%)	21 (2.1%)	11 (1.1%)	1020	3.11	1.19
3. There is no significant difference between the influences of Front-of-Store and In-Store POP Promotion on my choice of brands of prescription drugs to buy.	344 (33.7%)	368 (36.1%)	62 (6.1%)	146 (14.3%)	100 (9.8%)	1020	3.11	1.19
B. INFLUENCE ON CHOICE OF NON-PRESCRIPTION (OTC) DRUGS								
4. Front –of-Store POP Promotion only to a little extent, influence my choice of brands of non-prescription (OTC) drugs to buy	299 (29.3%)	224 (22.0%)	251 (24.6%)	141 (13.8%)	105 (10.3%)	1020	3.12	1.11
5. In Store POP Promotion only to a little extent, influence my choice of brands of non-prescription (OTC) drugs to buy.	282 (27.6%)	250 (24.5%)	208 (20.4%)	176 (17.3%)	104 (10.2%)	1020	3.11	1.09
6. There is no significant difference between the influences of Front-of-Store and In-Store POP Promotions on my choice of brands of non-prescription (OTC) drugs to buy.	112 (11.0%)	107 (10.5%)	348 (34.1%)	254 (24.9%)	199 (19.5%)	1020	3.56	1.11

Source: Researcher’s Field Survey, 2022

Commentaries

- Four hundred and eighty-seven (47.8%) and 426 (41.8%) respondents strongly agreed and agreed respectively, while 85 (8.3%), 15 (1.5%) and 7 (0.7%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.21 ± 1.11 , majority of respondents agreed that Front-of-Store POP Promotions only to a little extent, influence their choice of brand prescription drugs to buy.
- Form the mean response score of 3.11 ± 1.19 , and the responses of 462 (45.3%) respondents, 430 (42.2%), 96 (9.4%), 21 (2.1%) and 11 (1.1%) who strongly agreed,

agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that In-Store POP Promotions only to a little extent, influence their choice of brands of prescriptions drugs to buy.

3. With 344 (33.7%) respondents strongly agreeing, 368 (36.1%) agreeing, 62 (6.1%) having no opinion, 146 (14.3%) disagreeing and 100 (9.8%) respondents strongly disagreeing, as well as a mean response score 3.11 ± 1.19 , majority of respondents agreed that there is no significant differences between the influences of front-of-store and in-store POP Promotions on their choice of brand of prescriptions drugs to buy.
4. Two hundred and ninety-nine (29.3%) respondents strongly agreed, 224 (22.0%) agreed, while 251 (24.6%), 141 (13.8%) and 105 (10.3%) respondents did not have an opinion, disagreed and strongly disagreed respectively. Having a mean response score of 3.12 ± 1.11 , majority of respondents agreed that Front-of-Store POP Promotions only to a little extent, influence their choice of brand of non-prescription (OTC) drugs to buy.
5. From the mean response score of 3.11 ± 1.09 , and the responses of 282 (27.6%), 250 (24.5%), 208 (20.4%), 176 (17.3%) and 104 (10.2%) respondents who strongly agreed, agreed, did not have an opinion, disagreed and strongly disagreed respectively, the majority of respondents agreed that In-Store POP Promotions only to a littler extent, influence their choice of brands of non prescriptions (OTC) drugs to buy.
6. With 112 (11.0%) respondents strongly agreeing, 107 (10.5%) agreeing, 348 (34.1%) having no opinion, 254 (24.9%) disagreeing and 199 (19.5%) respondents strongly disagreeing, as well as a mean response score of 3.56 ± 1.11 , majority of respondents disagreed that there is no significant differences between the influences of front-of-store and in-store POP Promotions on their choice of brands of non-prescriptions (OTC) drugs to buy.

4.3. Test of Hypotheses

Seven hypotheses were formulated in chapter one and are tested as follows using linear regression analysis and ANOVA. SPSS 23 was used to analyze the various tests. The data used to test each of the hypotheses were derived from the respondents' opinions.

Hypothesis One:

H₀₁: Point-of-purchase promotions in drug marketing do not have a significant influence on brand awareness

H_{a1}: Point-of-purchase promotions in drug marketing have a significant influence on brand awareness

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where Y = brand awareness

X = POP promotion

μ = error term of random variable

α = a constant amount

β = effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 14.112 + 0.667X$

Table 4.3.1a: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.639 ^a	.556	.552	57.91131

a. Predictors: (Constant), POP promotion

Table 4.3.1b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	16221.117	1	19110.019	6.103	.004 ^a
	Residual	7711.221	1019	3131.060		
	Total	23932.338	1020			

a. Predictors: (Constant), POP promotion

b. Dependent Variable: brand awareness

Table 4.3.1c: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	14.112	42.533		1.117	.028
	POP promotion	.667	.312	.819	3.710	.019

a. Dependent Variable: brand awareness

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to determine if point-of-purchase promotion in drug marketing have a significant influence on brand awareness, the **Tables 4.3.1 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .556$, $F = 6.103 > p < 0.05$). The significant level was found to be 0.04, and due to this we reject the null hypothesis and

accept the alternate one which states that *Point-of-purchase promotions in drug marketing have a significant influence on brand awareness.*

Hypothesis Two:

Ho2: Point-of-purchase promotions in drug marketing do not have a significant influence on brand attitude.

Ha2: Point-of-purchase promotions in drug marketing have a significant influence on brand attitude

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where Y = brand attitude

X = POP promotion

μ = error term of random variable

α = a constant amount

β = effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 13.177 + 0.991X$

Table 4.3.2a: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
-------	---	----------	-------------------	----------------------------

1	.611 ^a	.511	.506	56.92217
---	-------------------	------	------	----------

a. Predictors: (Constant), POP promotion

Table 4.3.2b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	16221.117	1	19110.019	5.212	.003 ^a
	Residual	7711.221	1019	3131.060		
	Total	23932.338	1020			

a. Predictors: (Constant), POP promotion

b. Dependent Variable: brand attitude

Table 4.3.2c: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	13.177	42.188		1.123	.023
	POP promotion	.991	.391	.715	3.971	.011

a. Dependent Variable: brand attitude

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to determine if point-of-purchase promotion in drug marketing have a significant influence on brand

attitude, the **Tables 4.3.2 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .511$, $F = 5.212 >$ at $p < 0.05$). The significant level was found to be 0.03, and due to this we reject the null hypothesis and accept the alternate one which states that *Point-of-purchase promotions in drug marketing have a significant influence on brand attitude*.

Hypothesis Three:

H₀₃: Point-of-purchase promotions in drug marketing do not have a significant influence on impulse buying

H_{a3}: Point-of-purchase promotions in drug marketing have a significant influence on impulse buying

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where $Y =$ impulse buying

$X =$ Point-of-purchase promotion

$\mu =$ error term of random variable

$\alpha =$ a constant amount

$\beta =$ effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 99.123 + 1.313X$

Table 4.3.3a: Model Summary

Model	R	R Square	Adjusted Square	R	Std. Error of the Estimate
1	.827 ^a	.719	.818		29.22111
a. Predictors: (Constant),point-of-purchase promotion					

Table 4.3.3b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	18112.049	1	22122.051	12.101	.002 ^a
	Residual	2413.151	1019	1372.335		
	Total	20525.200	1020			

a. Predictors: (Constant), point-of-purchase promotion

b. Dependent Variable: impulse buying

Table 4.3.3c: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	99.123	46.849		3.121	.007

point-of-purchase promotion	1.313	.416	.732	3.123	.006
-----------------------------	-------	------	------	-------	------

a. Dependent Variable: impulse buying

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to determine if point-of-purchase promotion significantly influence impulse buying, the **Tables 4.3.3 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .724$, $F = 16.122 >$ at $p < 0.05$). The significant level was found to be 0.01, and due to this we reject the null hypothesis and accept the alternate one which states that *point-of-purchase promotion in drug marketing have a significant influence on impulse buying*

Hypothesis Four:

H₀₄: Point-of-purchase promotions in drug marketing do not have a significant influence on brand loyalty

H_{a4}: Point-of-purchase promotions in drug marketing have a significant influence on brand loyalty

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where Y = brand loyalty

X = POP promotions

μ = error term of random variable

α = a constant amount

β = effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 116.031 + 1.964X$

Table 4.3.4a: Model Summary

Model	R	R Square	Adjusted Square	R Std. Error of the Estimate
1	.513 ^a	.431	.442	30.46883

a. Predictors: (Constant), POP promotions

Table 4.3.4b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	20670.151	1	20670.151	22.265	.002 ^a
	Residual	2785.049	1019	928.350		
	Total	23455.200	1020			

a. Predictors: (Constant), POP promotions

b. Dependent Variable: brand loyalty

Table 4.3.4c: Coefficients^a

Model	Unstandardized Coefficients	Standardized Coefficients	t	Sig.
-------	-----------------------------	---------------------------	---	------

	B	Std. Error	Beta		
1 (Constant)	116.031	47.849		2.425	.004
POP promotions	1.964	.416	.939	4.719	.004

a. Dependent Variable: brand loyalty

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to ascertain if point-of-purchase promotions in drug marketing have a significant influence on brand loyalty, the **Tables 4.3.4 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .431$, $F = 22.265 >$ at $p < 0.05$). The significant level was found to be 0.02, and due to this we reject the null hypothesis and accept the alternate one which states that *Point-of-purchase promotions in drug marketing have a significant influence on brand loyalty*.

Hypothesis Five:

H₀₅: Front-of-store POP promotions do not significantly influence patronage (choice) of branded drugs in general

H_{a5}: Front-of-store POP promotions significantly influence patronage (choice) of branded drugs in general

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where Y = patronage (choice) of branded drugs

X = Front-of-store POP promotions

μ = error term of random variable

α = a constant amount

β = effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 15.434 + 0.771X$

Table 4.3.5a: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.719 ^a	.622	.561	55.95588

a. Predictors: (Constant), Front-of-store POP promotions

Table 4.3.5b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	19110.019	1	24111.091	5.402	.003 ^a
	Residual	9393.181	1019	4463.120		
	Total	28503.200	1020			

a. Predictors: (Constant), Front-of-store POP promotions

b. Dependent Variable: patronage (choice) of branded drugs

Table 4.3.5c: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	15.434	42.533		1.363	.041

Front-of-store POP promotions	.771	.312	.819	3.470	.090
-------------------------------	------	------	------	-------	------

a. Dependent Variable: patronage (choice) of branded drugs

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to evaluate if front-of-store POP promotions significantly influence patronage (choice) of branded drugs in general, the **Tables 4.3.5 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .622$, $F = 5.402 >$ at $p < 0.05$). The significant level was found to be 0.03, and due to this we reject the null hypothesis and accept the alternate one which states that *Front-of-store POP promotions significantly influence patronage (choice) of branded drugs in general.*

Hypothesis Six:

Ho6: In-store POP promotions do not significantly influence patronage (choice) of branded drugs in general

Ha6: In-store POP promotions significantly influence patronage (choice) of branded drugs in general

Regression model: $Y = \alpha + \beta X + \mu \dots$ (For all observations $i, = 1, 2 \dots n$)

Where $Y =$ patronage (choice) of branded drugs

$X =$ In-store POP promotions

μ = error term of random variable

α = a constant amount

β = effect of X hypothesized to be positive

Hence, the regression (predict) equation will be $Y = 99.123 + 1.313X$

Table 4.3.6a: Model Summary

Model	R	R Square	Adjusted Square	R	Std. Error of the Estimate
1	.813 ^a	.724	.823		30.11122
a. Predictors: (Constant), In-store POP promotions					

Table 4.3.6b: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	22122.051	1	22122.051	16.122	.001 ^a
	Residual	2533.149	1019	1372.335		
	Total	24655.200	1020			

a. Predictors: (Constant), In-store POP promotions

b. Dependent Variable: patronage (choice) of branded drugs

Table 4.3.6c: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	99.123	46.849		3.121	.007
	In-store POP promotions	1.313	.416	.732	3.123	.006

a. Dependent Variable: patronage (choice) of branded drugs

Interpretation of Result

Having analyzed the data from the questionnaire using regression analysis to evaluate if In-store POP promotions significantly influence patronage (choice) of branded drugs in general, the **Tables 4.3.6 a, b & c** revealed that the regression result shows the existence of significant result on the variables ($R^2_{\text{calc}} = .724$, $F = 16.122 >$ at $p < 0.05$). The significant level was found to be 0.01, and due to this we reject the null hypothesis and accept the alternate one which states that *In-store POP promotions significantly influence patronage (choice) of branded drugs in general.*

Hypothesis Seven:

H₀₇: There is no significant difference between the influence of POP promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.

Ha7: There is a significant difference between the influences of POP promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.

Table 4.3.7a: ANOVA^b

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	22223.044	1	22223.044	14.177	.077 ^a
	Residual	2500.076	1019	1567.539		
	Total	27223.12	1020			

a. Predictors: (Constant), patronage between front-of-store and in-store POP promotions

b. Dependent Variable: patronage (choice) of branded drugs

Table 4.3.7b: Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	103.443	47.849		2.991	.045

patronage between front-of-store and in-store POP promotions	1.771	.416	.878	2.985	.004
--	-------	------	------	-------	------

a. Dependent Variable: patronage (choice) of branded drugs

Interpretation of Result

Having analyzed the data from the questionnaire using ANOVA to see if there is a significant difference in the influence on patronage (choice) of branded drugs between front-of-store and in-store POP promotions, the **Tables 4.3.7 a&b** revealed that the ANOVA result shows the existence of significant result on the variables ($F = 14.177 >$ at $p < 0.05$). The significant level was found to be 0.077, and due to this we do not reject the null hypothesis which states that *there is a significant difference between the influence of POP promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs.*

4.4 Discussion of Findings

First, is the discussion of findings from the questionnaire survey followed by the discussion of findings from the focus group discussion.

A. Discussion of Findings from Questionnaire Survey

The discussion of findings under each Research Question shall be within the context of the predictive parameters/indicators as summarized below

1. The influence of POP Promotions in drug marketing on brand awareness

a) Familiarity with POP Promotions

b) Awareness, Recognition and Recall

c) Awareness of Alternative brands, Top-of-the-mind Awareness and Consideration for purchase

2. The influence of POP Promotions in drug marketing on brand attitude

a) Interest stimulation, desire

b) Brand beliefs

c) Stimulation for trial

3. The influence of POP Promotions in drug marketing on impulse buying

a) Unplanned - and Reminder-Impulse Purchase

b) Brand Switching and Brand Substitution

4. The influence of POP Promotions in drug marketing on brand loyalty

a) Accepting recommendations by pharmacy's staff

b) Recommending preferred brand to other people

c) Emotional attachment/endearament to brand

d) Buying more quality

e) Regularity/frequency of repeat purchases

f) Stockpiling

g) Sensitivity to incentives offered by competing brands being promoted

5. The influence of Front-of-Store POP Promotions in drug marketing on patronage (choice) of branded drugs in general

a) Attention, Brand Knowledge, Brand Identification

b) Development of favorable attitudes and possible behavioral outcomes

6. The influence of In-Store POP Promotions in drug marketing on patronage (choice) of branded drugs in general

a) Attention, Brand Knowledge, Brand Identification

b) Development of favorable attitudes and possible behavioral outcomes

7. The significant difference between the influences of POP Promotions in drug marketing on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs

a) Influence on choice of prescription drugs

b) Influence on choice of non-prescription (OTC) drugs

A1. The influence of POP Promotions in drug marketing on brand awareness

a) Familiarity with POP Promotions:

Majority of respondents expressed a high level of familiarity with the front-of-store and in-store POP Promotions at pharmacy retail outlets as well as acknowledging that they exert a collective positive influence on purchase decision when buying drugs.

b) Brand Name Awareness, Recognition and Recall:

The majority of respondents agree that front-of-store and in-store POP Promotions at pharmacy retail outlets provide opportunity for first-time encounter, awareness of brand name, serve as a reminder that reinforces brand awareness, offer no significant effect on increasing brand name familiarity, do not necessarily make brand recognition easier whether the product is standing alone or among other products, and offer no significant impacts on recall from memory other previously known brands within the same product group as the drug being advertised.

c) Awareness of Alternative Brands, Top-of-the-Mind Awareness, Consideration for Purchase:

The majority of respondents agreed that to a significant extent, front-of-store and in-store POP Promotions often promote awareness of alternative brands of drug to the drug intended to be purchased, reinforce the retention of the name of drug being promoted in memory amongst those that easily come to mind in a product group. However, majority of the respondents finalized that POP Promotions do not significantly influence their decision to include the particular brand being advertised in their list of options to be considered for purchase.

A2. The influence of POP Promotions in drug marketing on brand attitude

a. Interest Stimulation, Desire:

Majority of respondents did not agree that POP Promotions in pharmaceutical outlets encourage them to like the brand being promoted. However, majority of respondents agreed that POP Promotions increase their interest to know more about the advertised brand of drug as well as stimulate their desire to buy the advertised brand of drug.

b. Brand Beliefs:

Majority of respondents agreed that POP Promotions at pharmacy retail outlets make them believe that the brand of drug is of good quality, will be effective, safe to use without risks to health, give the impression that the manufacturer has good reputation and integrity, empower them to develop on overall good image of the advertised brand of drug, as well as make them believe that they are being offered a good deal, value for money.

c. Stimulation for Trial:

While majority of respondents agreed that POP Promotions at pharmacy retail outlets encourage them to collect and use free trial samples of the advertised brand of drug, majority of respondents still did not agree that they provide conviction to make a trial purchase of the advertised brand of drug.

A3. The influence of POP Promotions in drug marketing on impulse buying

a. Unplanned- and Reminder-Impulse Purchase:

Majority of respondents disagreed that POP Promotions at pharmacy retail outlets can provide strong persuasion to make an unplanned-impulse purchase or reminder-impulse purchase of both prescriptions drugs and non-prescription (OTC) drugs being advertised.

b. Brand Switching and Brand Substitution:

Majority of respondents agreed that POP Promotions in pharmacy retail outlets empower and persuade them to buy their pre-determined choice of brand of drug when they see it being advertised, as well as empower them to buy an alternative drug being advertised if

their preferred brand of non-prescription (OTC) drugs is not available. However, majority of respondents disagree that POP Promotions can empower them to buy an alternative brand if their preferred brand of prescription drugs is not available, or switch from their preferred brand of prescription drug to the brand being advertised, or switch from their preferred brand of non-prescription (OTC) drug to the brand being advertised.

A4. The influence of POP Promotions in drug marketing on brand loyalty:

a. Accepting Recommendations by Pharmacy's Staff

Majority of respondents agreed that POP Promotions increased their confidence to accept brand names of drugs recommended by non-healthcare professional staff in pharmacy retail outlets, while majority of the respondents also agreed that POP Promotions do not increase their confidence to accept brand names recommended by the pharmacist of other healthcare professional staff. This is not surprising as many purchasers of drugs rely absolutely on the competence and professional discretion of these healthcare professionals working in many pharmacy retail outlets beyond any information that they may glimpse from POP promotions.

b. Recommending Preferred Brand to Other People:

Majority of respondents agreed that POP Promotions increase their confidence to recommend their preferred brand of drug to other people, as well as increase the frequency of recommendation.

c. Emotional Attachment/Endearment to Brand:

Majority of respondents disagreed that POP Promotions generally increase their emotional attachment and endearment to the advertised brands of both prescription and non-prescription (OTC) drugs

d. Buying More Quality:

Majority of respondents disagreed that POP Promotions encourage them to buy more quantity of the advertised brands of both prescription and non-prescription (OTC) drugs at each other purchase session

e. Regularity/Frequency of Repeat Purchase:

Majority of respondents disagreed that POP Promotions encourage them to buy more frequently, the advertised brands of both prescription and non-prescription drugs

f. Stockpiling:

Majority of respondents disagreed that POP Promotions encourage them to stockpile the advertised brands of both prescription and non-prescription (OTC) drugs, because drugs, unlike general consumer goods, are not items for pleasure consumption. Rather drugs are purchased and consumed only to meet a particular health need over a definite period of usage and under a rigidly regulated dosage regime. Hence, it is undesirable to stockpile drugs even in an environment like Nigeria where self-medication is highly prevalent and access to both prescription and OTC drugs is generally unrestricted

g. Sensitivity to Incentives Offered by Competing Brands:

Majority of respondents agreed that POP Promotions do not significantly increase their sensitivity or attraction to incentives offered by advertised brands competing with their

preferred brands of both of prescription and non-prescription (OTC) drugs. This is understandable because drug purchasers and consumers generally focus more on assurance of quality, effectiveness, safety and relying more on prescriptions or recommendations by health professionals, and much less on economic incentives associated with the purchase of a drug.

A5. The influence of Front-of-Store POP Promotions in drug marketing on patronage (choice) of branded drugs in general

a. Attention, Brand Knowledge, Brand Identification:

Majority of respondents agreed that Front-of-Store POP Promotions at pharmacy retail outlets generally, are powerful in attracting attention to the advertised brand of drug, are easy to read, boldly communicate all essential information for purchase decision making, boldly advertise key promotional offers, if any, make identification of product pack easy, as well as promoting quick awareness of brand name and retention of brand name in memory. However, majority of respondents are undecided whether front-of-store POP Promotions attract their commitment to spend good time, looking, reading and digesting the information being displayed.

b. Development of Favorable Attitudes and Possible Behavioral Outcomes:

Majority of respondents agreed that Front-of-Store POP Promotions generally empower them to develop favorable attitudes towards the advertised brand of drug, encourage them to collect and try free samples, to make trial purchase, to buy a brand of drug they are already familiar with, as well as reinforcing their brand loyalty to a brand of drug they have used before when they see it being advertised in pharmacy retail outlets.

A6. The influence of In-Store POP Promotions in drug marketing on patronage (choice) of branded drugs in general

a. Attention, Brand Knowledge, Brand Identification:

Majority of respondents agreed that In-Store POP Promotions in pharmacy retail outlets generally are powerful in attracting attention to the advertised brand of drug, are easy to read, attract their commitment to spend good time, looking, reading and digesting the information being displayed, boldly communicate all essential information for purchase decision making, boldly advertised key promotional offers if any, make identification of product pack easy, promote quick awareness of brand name, as well as retention of brand name of the drug being advertised in memory.

b. Development of Favorable Attitudes and Possible Behavioral Outcomes:

Majority of respondents agreed that in-store POP Promotions in pharmacy retail outlets generally empower them to develop favorable attitudes toward the advertised brand of drugs, encourage them to collect and try free sample, to make trial purchase, to buy a brand of drug they are already familiar with as well as reinforcing their brand loyalty to a brand of drug they have used before when they see it being advertised in pharmacy retail outlets.

A7. The significant difference between the influences of POP Promotions on patronage (choice) of branded prescription drugs and branded non-prescription (OTC) drugs

A. Influence on Patronage (Choice) of Branded Prescription Drugs

Majority of respondents agreed that both front-of-store and in-store POP Promotions do not significantly influence their choice of brand of prescription drugs to buy. Moreover, majority of respondents agreed that there is no significant difference between the influence of front-of-store and in-store POP Promotions on their choice of branded prescription drugs.

These findings are justifiable because prescription drugs can be considered as high involvement products which ordinarily should be purchased only upon prescription by the doctor or by other approved healthcare professionals within challenging healthcare environments in under-developed nations like Nigeria. The prescription is expected to be dispensed by the pharmacists in the hospital or sold at the point-of-purchase in pharmacy retail outlets, where the pharmacist is expected to use his professional discretion to recommend an appropriate brand of the prescribed generic drug or sell the prescribed brand or switch to an alternative brand as the circumstances may demand. Hence, in the process of deciding which brand of prescription drug to buy, virtually no discretion is allowed for interference by extraneous influencing agents such as the influence of both front-of-store and in-store POP Promotions on the prospective purchasers and consumers of prescription drugs.

B. Influence on Patronage (Choice) of Branded Non-Prescription (OTC) Drugs:

Majority of respondents agreed that both front-of-store and in-store POP Promotions only to little extent influence their choice of brands of non-prescription (OTC) drugs to buy.

However, majority of respondents disagreed that there is no significant difference between the influence of front-of-store and in-store POP Promotions on their choice of brands of non-prescription (OTC) drugs.

OTC drugs can be considered as lower-involvement products compared to prescription drugs and purchasers/consumers are permitted by drug access regulations to freely select brand of choice as well as obtain prescriptions from healthcare professionals. Therefore, OTC drugs are similar in this respect to consumer goods and can be promoted like consumer goods even though other unique factors play influential roles in choosing brands of OTC drugs to buy, apart from POP promotions. These other influencing factors include word of mouth recommendations, media advertising, sales promotions, interaction with staff of pharmacy stores, price, packaging, dosage form, reputation of the manufacturer, country of origin, etc.

Moreover, the indication by majority of the respondents that there could be a significant difference between the influence of Front-of-Store and In-Store POP Promotions on their choice of brands of non-prescription (OTC) drugs could be supported by previous findings in this study which suggest that it is logical that In-Store POP Promotions which attract stronger attention will provide better quality and more impactful communication to the prospective purchaser/consumer than Front-of-Store POP Promotion. Therefore, In-Store POP Promotions may be expected to impact more on purchase decision making process for OTC drugs than Front-of-Store POP Promotions

B. Discussion of Findings from Focus Group Discussion (FGD)

1. **State of decision before approaching a drug retail store:** Drug purchasers often are not always decided on the brand of drug they wish to buy before approaching a drug retail store. This is consistent with well established fact that most retail purchase decisions are made within the store. Sometimes, they have decided which brand of drug to buy either by having a prescription or making a repeat purchase of a brand of drug which they have used before and found effective for similar ailment or symptoms treated earlier. Otherwise, the respondents suggest that without a prescription, most people are not decided on the drug to buy and often rely on the recommendations of the pharmacist and general sales staff at pharmacy retail stores.
2. **Factors aiding being “decided”:** Possession of a prescription detailing a specific brand of drug to buy and a satisfactory experience from previous use of a particular brand of drug for the same health challenge as the current need, are the major factors empowering prospective drug purchasers to be “decided” on the brand of drug to buy.
3. **Factors behind being “undecided”:** Prospective drug purchasers may be undecided on which brand of drug to buy when they do not have a prescription at all, or are in possession of a prescription for a generic drug or they do not have any previous experience with any brand of drug that is appropriate for their health need or they cannot associate specific brand names with generic drugs that they may have used before.
4. **Recall of FOS P-O-P promotions:** Front-of-store promotions which respondents could recollect easily include banners, posters, stickers, merchandisers and their promotional costumes. This confirms familiarity with front-of-store POP promotions and it is consistent with findings from the questionnaire survey.

5. **General attitude of drug purchasers to FOS P-O-P promotions :** While these front-of-store promotions attract general attention of patrons of retail drug stores, most drug purchasers do not devote sufficient attention and time to digest the information being communicated, perhaps due to discomfort of the weather (hot, humid, rainy, chilly etc.) and over-worded content of these P-O-P promotions as well as the belief that they will always get more information about the front-of-store promotion once they enter the drug retail store which is more comfortable for purchasers of drugs, encouraging them to dedicate more time and attention. This findings is consistent with findings from the questionnaire survey.

Voice of FGD Participant

6. *“When I am in a hurry to make a purchase, I pay less attention to those banners and stickers in-front of pharmacy stores and also depending on the state of the weather”* is:

The product (or brand name) being promoted, its basic utility value, its unique benefits and the general aesthetic appeal of the front-of-store promotions are considered most attracting to a prospective purchaser of drugs visiting a retail drug store. This finding is consistent with findings from the questionnaire survey.

7. **Recall of IS P-O-P promotions:** In-store promotions which respondents could recollect easily include, ceiling danglers, shelf stickers, shelf-top merchandising displays (stands), aisle merchandising displays (stands), product pamphlets (brochures), and branded merchandising costumes worn by staff of the retail drug store. This confirms familiarity with in-store POP promotions and it is consistent with findings from the questionnaire survey.

8. **General attitude of drug purchasers to IS P-O-P promotions:** These in-store P-O-P promotions often attract enough attention that compels purchasers of drugs to take more than a fleeting glance at them, to digest as much information that time and

urgency of purchase transaction permits. This finding is consistent with findings from the questionnaire survey.

9. What purchasers of drugs consider most attractive in IS P-O-P Promotions?:

The product (or brand name) being promoted, its basic utility value, its unique benefits and the general aesthetic appeal of the in-store promotion are considered most attracting by the respondents. This finding is consistent with findings from the questionnaire survey.

- 10. Message content mostly retained by drug purchasers:** The picture of the product (pack), the brand name and basic utility value for a particular healthcare need are the information mostly retained by the respondents. This finding agrees with the findings from the questionnaire survey which suggest that POP promotions reinforce the retention of the name of the drug being promoted in memory, amongst those that easily come to mind in a product group.

Voice of FGD Participant

“When I see an advert for a medicine in the store, the first thing I want to extract is-what is it used for?”

- 11. General impression about drug being promoted at retail stores:** Respondents get the impression that such medicinal products being promoted at retail drug stores are of general good quality, likely to be effective and to deliver on promise made and are backed by a reputable and responsible drug manufacturing and marketing company. This finding agrees totally with the findings from the questionnaire survey.

Voice of FGD Participant

“I believe that since the pharmacy store has allowed their display, then it is an endorsement of the trust in the product being advertised”

12. **Influence on brand awareness:** Respondents suggest that these promotions at retail drug stores contribute to purchasers' knowledge of a particular brand being promoted, especially serving as first-time brand awareness, increasing brand name familiarity, easier brand recognition on the shelf, standing alone or amongst other brands as well as awareness of alternative brands in addition to previously known brands or brands that the purchaser has decided to buy prior to visiting the retail drug store. These findings are consistent with findings from the questionnaire survey, but findings from the questionnaire survey suggest that POP promotions do not necessarily make brand recognition easier and offer no significant effect on increasing brand name familiarity.

Voice of FGD Participant

"They are particularly useful for letting me know about new products and promo"

13. **Influence on attitude of drug purchasers:** Respondents suggest that exposure to these P-O-P promotions at retail drug stores influence the development of a favourable attitude towards consideration to purchase the brand of drugs being promoted in the following ways amongst others:

- Linking of specific brand names to generic product names enlarges the "evoked set" and "consideration list" for a product category in the mind of the drug purchaser
- Easier recognition of brand
- Development of favourable attitude arising from positive presumptions on product quality, specific utilitarian value in specific healthcare needs, unique benefits, effectiveness and backing by a reputable drug manufacturing and marketing company

14. **Influence on persuasion to buy the brand of drug being promoted:** Respondents suggest that at first-time encounter, these P-O-P promotions generally do not provide a strong persuasion to buy the promoted brand of drug. All they do is to encourage purchasers to include them in their “evoked set” and “consideration list” for a product category, when the need to purchase such drugs arises in future. It is only when the healthcare need of the purchaser is being addressed by the advertised brand of drug and the pharmacist or general sales staff of the retail drug store also recommend the same brand of drug being promoted that a purchaser may be persuaded to buy the branded being promoted at first-time encounter in the retail drug store. These findings are consistent with the findings of the questionnaire survey.

Voice of FGD Participant

“They can’t convince me to buy such an advertised drug at first-time encounter. I can only buy if the pharmacist on duty or the sales attendants recommend it”

15. **Exceptional circumstances encouraging instant purchase:** These P-O-P promotions can only empower or encourage purchasers of drugs to buy pre-determined choice of brand in a product’s category if the information being conveyed by the advertisement illustrates clearly the products basic utility value and unique benefits in relation to specific healthcare need of the prospective purchaser, and backed by previous positive usage experience with the drug being promoted or by a prescription detailing the specific brand of drug being promoted. This finding agrees with the findings from the questionnaire survey, which suggests that POP promotions can empower and persuade respondents to buy their pre-determined choice of branded drug when they see it being advertised at the pharmacy retail store.

16. Influence on changing a predetermined brand choice: Despite exposure to these P-O-P promotions, respondents suggest that they will not change their pre-determined choice of brand to the brand being promoted at the retail drug store unless the pre-determined brand choice is not available (out-of-stock) and then the pharmacist or general sales staff on duty convince them that the drug being promoted is the same drug, and assurance that it will deliver same or better value than the pre-determined choice of brand to buy. This finding is consistent with findings from the questionnaire survey, but the FGD reveals in addition, the convincing power of the pharmacists or sales staff at the pharmacy retail store to change a pre-determined brand of drug.

17. Influence on purchaser's confidence to take independent decisions: Beyond creating awareness and enhancing familiarity and inclusion in the "evoked set" and "consideration list" for purchase in a product category, these P-O-P promotions do not necessarily increase the confidence of a purchaser to take an independent decision to buy a particular brand of drug, especially a high-involvement product like a prescription (ethical) drug. This finding is consistent with findings from the questionnaire survey.

Rather, purchasers of drugs will seek the opinion and assurance of the pharmacist or general sales staff on duty and as such, are more inclined to accept the brand as may be recommended by the staff of the retail drug store.

18. Influence on purchaser's empowerment to recommend "brand of choice": These P-O-P promotions do not empower the respondents, to recommend the brand being promoted as "brand of choice" to other people.

Rather it is positive satisfaction derived from previous use of a drug, promoted or not, that empowers individuals to recommend a brand as “brand of choice” to other people.

This finding is not in agreement with findings from the questionnaire survey in which majority of respondents agreed that POP promotions increase their confidence to recommend their preferred brand of drug to other people.

Perhaps, the disagreement of findings from the two studies could be rationalize better by probing further, the difference in influence of POP promotions in recommending a choice brand of prescription drug to other people in contrast to recommending a choice brand of non-prescription (OTC) drug to other people.

Voice of FGD Participant

“I can only recommend a brand of drug to other people based on the satisfaction I derived from previous use”

19. **Influence of POP promotion on quantity of drug purchased:** Respondents declared emphatically that POP promotions cannot encourage them to buy more quantity of brand of drug being promoted at the pharmacy retail store. Neither will POP promotions make them buy more frequently. This is in agreement with the findings of the questionnaire survey.

20. **Comparative influence of FOS and IS P-O-P promotions:** Respondents suggest that in-store promotions at retail drug stores have a greater impact on them than front-of-store promotions, simply because they spend more quality time within the premises which allows them to digest the information being conveyed by the advertised brand. The findings are consistent with findings of the questionnaire survey.

21. **On necessity of P-O-P promotions generally:** Respondents suggest that P-O-P promotions may be necessary for OTC (non-prescription) drugs as they may exert a

significant influence on choice of branded OTC drugs. However, respondents are of the opinion that P-O-P promotions are really not essential for influencing choice of branded prescription, ethical drugs, because they are high-involvement products which ordinarily should only be purchased via prescription by a medical doctor, and noting the peculiarities of the Nigerian healthcare system, by other healthcare professionals like pharmacists, nurses, midwives, laboratory scientists etc.

22. Comparative influence of P-O-P promotions in purchase decisions for OTC and prescription drugs: Respondents suggest that the significance of these P-O-P promotions at retail drug stores in influencing decision making when buying drugs is relatively higher when buying non-prescription (OTC) drugs than when buying prescription drugs. These findings are consistent with findings from the questionnaire survey.

4.5 Interpretation of Results

A. Brand Awareness- The results generally indicate that POP promotions in drug marketing can play a strategic role in the process of demand generation by providing opportunity for first-time-encounter with a brand of drug, awareness of brand name in a therapeutic class or product group, as well as serving as a reminder that reinforces brand awareness. The results indicate that POP promotions in drug marketing can transform a prospective buyer of a drug from a state of being unaware of brand to higher levels of progression of brand awareness like brand recognition, brand recall and top-of-mind.¹ This suggests that POP promotions in drug marketing can be a significant influence of brand awareness which is the first and most critical step in the sequence of cognitive and affective stages culminating in the purchase decision, because a brand of drug that is not

known to the prospective purchaser cannot be considered for purchase and cannot be chosen^{2,3}

The results indicate that POP promotions in drug marketing play a positive role in achieving that vital first step, brand awareness, around which other elements of consumer behavior and other bundles of association are built which are attached to the brand in memory^{1,2}

Hence, the positive impact of POP promotions on brand awareness is expected as revealed in other studies to provide a foundation for the development of brand knowledge, brand image, favorable attitude, perceived quality, purchase intention, brand trust, brand loyalty, as well as overall brand equity^{4,5,6,7,8,9,10,11,12,13,14,15}

The results of this study with regards to the positive influence of POP promotions on brand awareness in drug marketing aligns with findings from other studies, which prove that POP promotions, especially in-store promotions, are efficient in catching customer's attention and effective in generating brand awareness particularly brand recognition as well as positive impact on brand patronage (choice) and consumers' buying decision, while the amount of exposure and attention paid to advertising is a significant predictor of attitudinal and behavioral outcomes of direct-to-consumer advertising (DTCA) and OTC advertising.^{16,17,18} Other studies also confirmed that consumer buying decisions are influenced by product attractiveness (recognition potential), a key element of brand awareness which is also influenced positively by POP promotions as revealed in this study.

Furthermore, it is not a surprise that the results of this study confirmed that POP promotions in drug marketing promote awareness of alternative brand of drugs especially among the literate purchaser who can easily discern from the advertisement content of promotions at the pharmacy retail stores that the advertised brand(s) contain(s) the same active ingredient(s) or equivalent composition as the drug intended to be purchase either by self-prescription or prescription from a doctor or other healthcare professionals. Awareness of alternative brands of drugs can only influence two outcomes: (1). Empowering the purchaser to make an independent choice from amongst the alternative brands or (2). Empowering the purchaser to agree with the recommendation of pharmacy sales staff or the pharmacist on the appropriate brand of drug to buy from amongst the alternative brands, especially when the brand intended to be purchased is not available in stock.^{19,20}

The results of the study also confirm that POP promotions reinforce the retention of the name of the drug being promoted in memory amongst those that easily come to mind in a product group, the antecedent to top-of-mind awareness.⁸ Thus, POP promotions in drug marketing can be considered a positive influence of the developments of top-of-mind awareness for a brand of drug in a product group. However, the results of this study indicate POP promotions does not significantly influence the decision to include the particular drug being advertised in the list of options to consider for purchase (i.e consideration set) when the need to purchase arises. Perhaps this is so because other important factors come into consideration before a drug is considered for purchase as revealed by findings of other studies.¹⁹ These include prescription by doctors, pharmacists and other healthcare professionals (Nigeria context), family and friends'

advice, personal experience from previous usage of the advertised brand of drug, information from literatures and internet sources, media advertisement and promotional campaigns and even corporate image of the manufacture/marketer of the brands of drugs^{19,20,21}

Moreover, the results of this study indicate that POP promotions in pharmacy retail stores offer no significant positive effect on increasing brand name familiarity even though they attract good attention and positively influence awareness of brand name of the drug(s) being advertised. Perhaps repeated exposure and quality of attention paid to the POP promotions, other sales promotions media advertising of the same brand of drug would aggregate to promote a significant positive effect on increasing familiarity to the brand name.¹⁸ Also, contrary to expectation, the result of the study indicate that POP promotions in pharmacy retail stores do not necessarily make brand recognition easier whether the product is standing alone or among other product.^{22,23,24} Again, the amount of exposure and quality of attention could make brand recognition easier. In relation to unaided and spontaneous recall of brand name of drugs, the results of this study indicate that POP promotions in pharmacy retail stores do not offer any significant influence on recall from memory other previously known brands within the same product group as the brand of drug being advertised.^{22,1,23,24} This finding is not surprising as a reservoir of brand names of drugs in a product group can only exist in memory based on acquisition of extensive knowledge of the brands in the same product group from stored information, past prescriptions and personal usage experiences with different brands of the drug in the same product group. Thus, this result aligns with findings from previous works which affirms that brand awareness does not necessarily require recall of the brand name²

B. Brand Attitude- The results indicate that POP promotions in pharmacy retail outlets increase the interest to know more about the advertised brand of drug as well as stimulate desire to buy the brand if it is particularly indicated for their health need. Interest to know more about the advertised brand is one of the key outcomes expected if the POP promotions attracts appropriate attention to the information being displayed which is in agreement with previous works, while other studies have confirmed that amount of exposure and attention paid to drug advertising is a significant predictor of attitudinal and behavioral outcomes.^{16,18} It is expected that attention-catching POP promotions will ordinarily arouse interest of the prospective purchaser to know more about the brand of drug being advertised. POP promotions in pharmacy retail stores stimulate desire to buy the advertised brand of drug sooner or later as revealed in this study, which is an indication that POP promotions influence a favorable purchase intention towards the advertised brand. Other studies have indicated that a favorable brand attitude has a positive effect on intention to purchase, just a brand image and a positive emotion also impact positively on favorable brand attitude, brand attachment and purchase intention towards the brand being promoted.^{7,11,25,26} Previous studies also confirmed that brand advertising and brand packaging which are often displayed in POP promotions have significant influences on intentions to buy OTC medicines; and that purchase intention is the most important outcome relative to brand equity, while brand image, brand personality and brand association are the important antecedents of brand attitude^{11,12,20,26}

Furthermore, the results indicate that POP promotions at pharmacy retail stores make respondents believe that the advertised brand of drug is of good quality, effective and safe.

This aligns with results of previous studies which indicate that one key factor influencing brand preference is the perception of superior quality and efficacy; just as consumer perception of functional value of the product positively influences brand attachment and purchase intention, brand attachment itself positively influencing purchase intention.^{9,26,27}

Other studies have confirmed that perceived quality has a positive influence on brand trust, brand loyalty and overall brand equity.¹¹

The result of this study also indicate that POP promotions at pharmacy retail stores convey positive impression of good reputation and integrity of the manufacturer of the brand of drug being advertised as well as empowering purchasers to develop an overall good image of the advertised brand of drug. Good image about the brand being advertised and the manufacturer are key antecedents to brand preference, purchase intention, brand trust and brand loyalty, while previous works have suggested that brand image, brand personality and brand association are the important antecedents of brand attitudes.^{11,13,27} Other studies have confirmed that corporate image in the minds of the consumers always does have impact while selecting OTC pharmaceutical products²¹

Overall favorable brand image and corporate image of the advertised brands of drugs are key antecedents amongst other factors that would be expected to drive purchasers' belief that they are being offered a good value for money when they purchase such advertised brands of drugs.

The results indicate further that POP promotions at pharmacy retail outlets encourage collection and usage of free trial samples of the drug being advertised, which is an opportunity for consumers to have a personal engagement, deep interaction and experience with the brand of drug and a higher level of brand recognition compared to

POP displays and premium promotions.^{28,19,20} This takes the consumer from the level of perception to the higher level of evaluation of the functional value of product performance/quality, which ultimately, positively influences the attachment to the brand and purchase intention as confirmed in previous works.²⁶ This finding also aligns with those of other studies which suggest that such brand engagement based on affection and the cognitive is positively associated with brand love which is driven by passion, emotion and quality; brand love being positively associated with overall brand equity, and overall brand equity is positively associated with purchase intention.^{10,28} It is expected that the satisfaction and brand association derived from such product sample trial is expected to further promote favorable attitude towards purchase intention, the stimulation of desire to purchase, which has been revealed in this study.¹¹ This agrees with findings of other studies which suggest that brand attitude has a positive influence on brand loyalty which further influence brand equity; while purchase intention is the most important outcome relative to brand equity.^{11,12} As confirmed in previous studies, the results of the study also suggest that retail POS promotions can promote purchase acceleration and product trial especially when free samples are made available. However, the result of this study does not agree that POP promotions at pharmacy retail outlets can provide conviction to make a trial purchase of the advertised brand of drugs. This is probably so because drugs, whether OTC or prescription OTC drug, are not like consumer items for pleasure consumption. Their purchase entails a more involving process including clarifications, assurances and recommendations by healthcare professionals, pharmacists and even experienced sales staff at pharmacy retail outlets. Therefore, even if the information displayed on the POP promotions seems to suggest that the product being advertised may

be appropriate for an established health need, the purchasers mostly are compelled to seek further consultation before embarking on a trail purchase.

C. Impulse Buying- While the findings from previous works suggest that consumers develop compulsive buying behavior while responding to point-of-sales promotions, the results from this study disagreed that POP promotions in pharmacy retail outlets can provide strong persuasion to make an unplanned-impulse purchase or even reminder-impulse purchase of both prescription and OTC drugs.^{29,25,30,31,32 33,34,35} Again, purchase of drug unlike consumer goods is not to satisfy the urge for pleasurable consumption of goods. Rather, drugs are purchased to meet specific health needs and the choice of the appropriate drug to buy is a very involving process, the most critical being either empowerment with adequate information and or personal experience from previous usage or a prescription by a doctor or recommendation by the pharmacists or other healthcare professionals, within the Nigerian healthcare systems context.^{19,20,36} The antecedents to these prescriptions are proper diagnosis of the health challenge, and determination of appropriate drug medication.

Even with regard to OTC drugs where the consumer enjoys the latitude of self-prescription and self-medication, the wise purchaser will still rely on further clarification and assurance by the pharmacist and pharmacy sales staff, which at best will empower the prospective purchaser to include the advertised brand of drug in the consideration list, an option to be considered for purchase when the need arises in future. Even in circumstances where an instant purchase of an advertised brand of drug is made, that purchase decision will be determined primarily by assurances and conviction by the advice of the pharmacists or pharmacy sales staff that the advertised brand of drug is the

most appropriate for a critical healthcare need, and certainly not by the strong persuasive power of the POP promotions in the pharmacy retail outlet. Impulse purchase in drug marketing in response to POP promotions at pharmacy retail outlets may only arise with respect to impulse purchase of non-drug, consumer healthcare products and utilities. The results of this study indicate that purchasers are empowered and persuaded by POP promotions to buy their pre-determined choice of brand of drug when they encounter the same drug being advertised at the pharmacy retail outlets. The pre-determined choice of brand of drug to buy could have been arrived at from a variety of sources—the physician, pharmacist, family/friends' advice, literature, advertisement, internet and self, all of which have different impacts on prescription and consumer behavior with regards to choice of branded drugs.¹⁹ Encountering the advert of the pre-determined choice of brand of drug at the pharmacy retail store simply reinforces their conviction to buy their pre-determined choice of branded drugs.

With regards to impulsive brand substitution, the results reveal further that if the preferred brand of drug is not available in the pharmacy retail store, then purchasers of OTC drugs indicate that encountering the advertisement of an alternative brand at the pharmacy store can empower them to buy the alternative brand being promoted. Of course, with the underlying presumption that before making such impulse brand substitution such purchasers are equipped with knowledge and appropriate information to be certain that the other brand of drug being advertised is truly an alternative brand to the initial pre-determined choice. This finding is consistent with earlier studies which assert that in-store promotions stimuli can prompt brand substitution when the preferred brand is not available.³⁷ On the contrary, the results reveal that with respect to prescription

drugs, seeing the advert of an alternative brand will not empower them to buy the alternative drug being advertised if their preferred brand of prescription drug is not available at the pharmacy store. These findings are understandable and consistent with findings of other studies which suggests that higher level of involvement leads to higher brand loyalty because the process of deciding on a preferred brand of a prescription drug is more discerning and more-involving than for OTC drugs over which purchasers enjoy the latitude of free choice like for consumer goods.³⁸ Whereas, deciding on the preferred brand of a prescription drug to buy under normal circumstances should be based strictly on the recommendation of the doctor, or other healthcare professionals, under the Nigerian healthcare system environment. So, if the preferred brand of prescription drug is not available, the purchaser should and is expected to revert to the prescriber or seek the advice of the pharmacist on location on the most appropriate alternative prescription drug, not necessarily the brand being advertised in the pharmacy. The findings of this study in relation to impulsive brand substitution is consistent with those of other studies which have suggested that when exposed to promotions, the level of involvement in arriving at a purchase decision can be critical antecedent for both high- and low-involvement products and that a higher level of involvement leads to higher brand loyalty, as demonstrated by purchasers' attitudes to impulsive brand substitution in this study.³⁸

With regards to impulsive brand switching under the influence of POP promotions at pharmacy retail stores, the results of this study reveal that purchasers of both OTC and prescription drugs are not inclined to switch from their preferred brand of drug to the brand of drug being advertised. That is, POP promotions at pharmacy retail outlets do not have any significant power or influence to cause brand switching. Switching a brand is a

more discerning decision that will need strong conviction and assurances by the pharmacist on duty.

D. Brand Loyalty- The results of this study revealed that exposure to POP promotions in pharmacy retail outlets can increase confidence to accept brand names of drugs recommended by non-healthcare professional staff but on the contrary, not increasing their confidence to accept brand names recommended by the pharmacist or other healthcare professionals working in pharmacy retail stores. The interpretation of these results is that the POP promotions have stronger influence on the decision making of the purchaser when they are compelled to rely on opinions of recommendations of non-healthcare staff on choice of appropriate drug to buy, the POP promotions essentially reinforcing the information/advice given by the non-healthcare staff. On the other hand, the results suggest that purchasers who are undecided on their choice of brand of drug to buy before entering a pharmacy retail store base their purchase decision absolutely on the professional expertise, discretion and recommendation of the pharmacist or other healthcare professional staff and are not influenced at all by the information or offer from the POP promotions in the pharmacy retail store.

This finding from this study agrees with findings from other studies which assert that pharmacists' expertise has positive impact on prescription and consumer buying behavior with regards to choice of brands of drugs; positive implication regarding loyalty to drugs as well as having significant positive influences on the intention to buy.^{19,20,21,26,39} Other studies have also confirmed that the pharmacists' advice is top driver of consumer choice and loyalty.³⁹ Another interesting dimension is that other studies have revealed that increasing exposure to and influence of television advertising of OTC medicines decrease

the role of the pharmacist in recommending alternative medicine brands which perhaps is another dimension to the justification of this study's finding which suggests that the respondents did not agree that POP promotions can increase their confidence to accept brand names recommended by the pharmacist as increasing numbers of enlightened and educated purchasers of drugs are loaded with a lot of information about the drug they intend to buy and may have decided on the brand of drug to buy particularly OTC drugs before approaching a pharmacy retail store, even though other studies have indicated that increase in amount of consumer exposure to TV commercials increases the tendency for avoidable consumption of needless medicines.⁴⁰

The results of this study reveal that POP promotions increase confidence to recommend preferred brand of drug to other people as well as increase the frequency of recommendation. It can be interpreted that POP promotions act as strong endorsement of their loyalty to a preferred brand, an endorsement presumably based on perception of superior quality and efficacy, which have been confirmed by previous works to have positive influence on brand trust and brand loyalty and overall brand equity^{10,11,26,27}. Also, POP promotions can serve as a valuable reminder of the brand and reinforcement of the satisfaction that may have been derived from personal usage experience of the advertised brand, which could positively influence the frequency of recommending a preferred brand of drug to other people. Repeated exposure to POP promotion of a preferred brand of drug has the tendency to positively influence brand name recall which has been confirmed by earlier studies to have considerable positive effect on brand loyalty, which can manifest as increasing confidence to recommend a preferred brand to other people, and even more frequently.^{12,41}

Interestingly, the results of this study indicate that exposure to POP promotions generally do not increase emotional attachment and endearment to the advertised brands of both prescription and OTC drugs. Emotional attachment and endearment are deep manifestations of a favorable brand attitude and previous works have confirmed that brand attitude has a positive influence on brand loyalty¹¹. The quality of emotional attachment and endearment to a brand is defined more by deep involvement with the brand beyond the stages of brand identity and brand meaning, and often developed and expressed more at the level of brand response and brand resonance (relationship) according to Keller's Customer Based Brand Equity Model.^{42,43} Hence, the findings of this study is not surprising because POP promotions only impact more positively at brand identity level and even less at the brand meaning level which building blocks are performance and imagery and not judgments, feelings or relationship with the brand of drug being advertised at the point-of-purchase.

With regards to the tendency of POP promotions at pharmacy retail stores to encourage buying more quantity at each purchase session, or increase in the regularity/frequency of purchase of branded drugs or even stockpiling, the results of this study confirm such tendencies do not exist with regards to purchase of branded drugs. This is because drugs are not purchased for pleasure consumption and usage like consumer goods. Rather purchase of drugs is generally a compelling and usually unavoidable imperative demanded to meet a health challenge and expected to be consumed over a specific period of time in compliance with a prescription of an appropriate drug to be consumed under a strictly regulated dosage compliance regime. Hence, it is undesirable to buy more quantity than prescribed nor is it necessary to make frequent unprescribed repeat

purchases of needless medicines or stockpile, apart from the fact that drugs have expiry dates beyond which their quality, efficacy, stability and safety cannot be guaranteed at 100percent level by the manufacturers.

The results of this study reveal further that POP promotions do not significantly increase drug purchasers' sensitivity or attraction to incentives that may be offered by other advertised brands at the point-of-purchase that are recognized as competitors to their preferred brand of both prescription and OTC drugs.

Firstly, drug purchasers and consumers generally in deciding which brand of drug to buy, are influenced more by parameters of good quality, effectiveness, safety, stability and relying more on prescriptions or recommendations by healthcare professionals or favorable personal usage experience amongst several factors, but certainly much less, if at all on taking advantage of economic incentives associated with the purchase of the brand of drug.

Earlier studies have also confirmed that brand image, customer satisfaction and brand experience positively affect brand loyalty and purchase decision just as perceived risk to use of drugs affect consumer loyalty. Studies have also confirmed that loyal customers to a brand are less likely to switch to a competing brand than non-loyal customers, sale promotions acting as reason or incentive^{39,44}

E. Front-of-Store (FOS) Promotions: Despite all the acknowledged positive influences of FOS promotions on various dimensions like attracting attention, brand identification and brand knowledge as revealed in this study, the results do not indicate a decisive confirmation that FOS promotions attract commitment to spend good time,

looking, reading and digesting the information being displayed in front of pharmacy retail outlets.

A good explanation for this is that generally, most purchasers of drugs are in a hurry and aim primarily to enter the pharmacy retail store and conclude their purchase transaction speedily. Thus, purchasers often exhibit the tendency to view FOS promotions generally as a time-wasting distraction from their main purpose of visiting the pharmacy store and consequently take a quick and passing glance of the FOS promotions, rarely spending good time to digest the highlights of the FOS promotions. Moreover, they may be uncomfortable with the ambience and prevailing environmental conditions they are exposed to in front of the store which typically are not as comfortable and welcoming as the interior of a pharmacy retail store. Studies have confirmed that the perceived amount of exposure to and attention paid to drug advertising is a significant predictor of attitudinal and behavioral outcomes of direct-to-consumer advertising of prescription drugs and off-the-counter drug advertising¹⁸. Hence, the imperative is to design and place FOS promotions in a manner that will attract compelling attraction either before a purchaser enters the pharmacy retail store or upon exit after completing the preplanned purchase transaction or purpose for visiting the pharmacy.

Moreover, the results also indicate that FOS promotions empower them to develop favorable attitude, encourage collection and trial of free samples, make trial purchase soonest, buy a brand of drug they are already familiar with as well as reinforcing brand loyalty to a brand they have used before. These are remarkable general influences of FOS promotions as revealed in this study and the findings are consistent to a large extent

with most of the findings under variables like brand awareness, brand attitude and brand loyalty which have been discussed earlier.

F. In-Store (IS) Promotions: The results indicate generally that both front-of-store and in-store promotions have positive influences on the various elements of attention, brand knowledge, brand identification, favorable attitude and positive outcomes highlighted in the preceding section. However, the result highlights a significant difference between the influences of FOS and IS promotions. While most respondents were undecided whether front-of-store promotions attract their commitment to spend good time, looking, reading and digesting the information being displayed, most respondents agreed that in-store POP Promotions generally attract commitment to spend good time, looking, reading and digesting the information being displayed. This could be so because of the more comfortable environment and ambience inside the pharmacy retail store and the assurance of getting quick clarification of facts and further information from the staff of the pharmacy.

Moreover, the primary mission of a typical purchaser of drug is to enter the store and buy the drug that meets their health needs as quickly as possible, whether they are decided or undecided on the brand of drug they wish to buy before entering the pharmacy store. Hence, the first natural reaction is to see front-of-store promotion as an initial distraction from their primary assignment, in addition to the less comfortable outdoor environment in front of a pharmacy retail store especially on account of intolerable extremes of weather conditions like rain, sunshine, heat, cold or even the unappealing ambience of the external environment like untidyness, cleanliness and even dust pollution and absence of pharmacy staff in front of the pharmacy store to help with further enquires. Herein lies

the rationale for the tendency of in-store promotions to attract more attention and commitment to spend good time, looking, reading and digesting the information about the product being advertised inside the store.

The quality of attraction and attention given to a point-of-purchase promotion determines the quality of the information assimilation, comprehension, perception, agreement, information retention and retrieval for purchase decision-making and subsequent purchase action.

Like FOS promotions, the results also indicate that In-Store promotions also exerts positive influences on behavior of purchasers/consumers of drugs by empowering the development of favorable attitudes, encourage collection and trial of free samples, make trial purchase, buy a brand of drug they are already familiar with as well as reinforcing brand loyalty to a brand of drug that they have used before, when they encounter the brand being advertised inside pharmacy retail outlets.

G. Brand Choice

- I. Influence on Choice of Prescription Drugs: The results of this study indicate that POP promotions do not significantly influence the choice of branded prescription drugs to buy. This finding is in line with the basic fact that choosing which drug or which brand of drug to buy is a highly involving process particularly for prescription drugs which ordinarily should derive from a prescription from a doctor, pharmacist or other healthcare professionals and/or favorable experience from personal usage especially in an environment like Nigeria where there is a high prevalence of self-prescription, self-medication and uncontrolled access to all categories of drugs.^{19,20,36}

II. Influence on Choice of Non-Prescription (OTC) Drugs: The result also confirmed that both FOS and IS promotions only to an insignificant extent, influence their choice of brand of non-prescription (OTC) drugs but also suggest that there could be a difference between the influences of Front-of-Store and In-Store promotions on the process of choosing which OTC drugs to buy. This finding can be rationalized from two perspectives. Firstly, choosing OTC drug to buy is a lower involvement task compared to choosing prescription drugs, as OTC drugs like consumer goods, enjoy the latitude of independent discretionary choice. Secondly, as revealed earlier by other findings in this study, In-Store promotions have the tendency to attract more quality attention than Front-of-Store promotions and as such, could be expected to impact more on purchase decision making process for OTC drugs than Front-of-Store promotions especially on lower-involvement product like OTC drugs.

4.6 Summary Table of Findings

Table 4.4: Summary Table of Findings

Hypotheses	Findings
Ho1: Point-of-Purchase promotions in drug marketing do not have a significant influence on brand awareness	Rejected
Ho2: Point-of-Purchase promotions in drug marketing do not have a significant influence on brand attitude	Rejected
Ho3: Point-of-Purchase promotions in drug marketing do not have a significant influence on impulse buying	Rejected
Ho4: Point-of-Purchase promotions in drug marketing do not have a significant influence on brand loyalty	Rejected
Ho5: Front-of-Store promotions do not significantly influence patronage (choice) of branded drugs in general	Rejected
Ho6: In-Store promotions do not significantly influence patronage (choice) of branded drugs in general	Rejected

Ho7: There is no significant difference between the influence of POP promotions on patronage (choice) of branded drugs and branded non-prescription (OTC) drugs	Supported
---	-----------

Source: Field Survey, 2022

Endnotes

1. D.A. Aaker, *Managing brand equity*, (Ontorio: The Free Press), 1991, 62-63
2. E. Macdonald, & B. Sharp, *Marketing Research Online*, 1, 1996, 1-15; Reprinted in marketing bulletin, 14, article 2. <http://marketing-bulletin.massy.ac.nz>
3. M. Solomon, A. Hughes, B. Chitty, G. Marshall, & E. Stuart, *Marketing: Real people, Real choices*: 17-19 ed., (Upper Saddle River, N.J.: Pearson Prentice Hall), 2017
4. A.Bhatti, Mariam, S. Arif & S. Younus, "Impact of social media brand communication on brand knowledge: Mediating role of brand image and brand awareness-application of CBBE Model theory of Keller", **Journal of Management Info.** 4(4), 2017, 12-18
5. A. Zia, S. Younus & F. Mirza, "Investigating the impact of brand image and brand loyalty on brand equity: The mediating role of brand awareness", **International Journal of Innovation, Creativity and Change**, 15(2), 2021
6. A.A. Barreda, A. Bilgihan, K. Nusair & F. Okumus, "Generating brand awareness in online social networks", **Computers in Human Behavior**, 50, 2015, 600-609
7. V. Ozcifci, "Determining the impact of brand equity on consumer purchase intention", **International Journal of Social Sciences and Education Research**, 3(4), 2017, 1164-1177
8. D.K. Guatam & S.K. Shrestha, "Impact of brand equity on purchase intention of smart phones", **Asian-Pacific Journal of Business**, 9(1), 2018, 1-18
9. I.S. Alkoliby & M. Abdul Rahman, "Influence dimensions of brand equity on purchase intention towards smart phone in Malaysia", **VFAST Transactions on Education and Social Sciences**, 15(1), 2018, 07-19.

10. P. Verma, “*The effect of brand engagement and brand love upon overall brand equity and purchase intention; A moderated and mediated model*”. **Journal of Promotion Management**, 2020. DOI:1080/10496491.2020.1809591
11. W.Y. Wu, T-Y. Do, P-T. Nguyen, N. Anridho & M-Q. Vu, “*An integrated framework of customer-based brand equity and theory of planned behavior: A meta-analysis approach*”, **Journal of Asian Finance, Economics and Business**, 7(8), 2020, 371-381
12. O. Foroudi, “*Perceptual components of brand equity: Configuring the symmetrical and asymmetrical paths to brand loyalty and brand purchase intention*”, **Journal of Business Research**, 2018 <https://doi.org/10.1016/j.jbusres.2018.01.031>
13. C.T.Q. Nguyen & T.D. Luu, “*Factors affecting consumer-based brand equity of Vietnamese pharmaceutical companies*”, **Dalat University Journal of Science**, 8(IS), 2018, 145-147
14. M. Doddy, J. Ali, A. Hindarjo & C. Ratnasih, “*The influence of brand awareness, perceived quality, brand association, brand loyalty on brand equity of Zakat Institutions*” **ICETLAWBE 2020, September 26, Bandar, Lampung, Indonesia** DOI:10.4108/eai.26-9-2020.2302683
15. S.M. Shah, M. Adeel, F. Hanif & M. Khan, “*The impact of brand equity on purchase intentions with moderating role of subjective norms*”, **Universal Journal of Industrial and Business Management**, 4(1), 2016, 16-24
16. S. Loya, S. Ismail, and M.Z. Khan, “*Impact of in-store display on sales: A comparative study among new and mature product*”, **International Journal of Humanities and Social Science**, 5(11), November 2015, 188-196
17. P.E. Ketelaar, S.F. Bernritter, J. van'tRiet, A.E. Huhn, T. J van Woudenberg, B.C.N. Muller & L. Janssen, “*Disentangling location-based advertising: The effects of location congruency and medium type on consumers’ ad attention and brand choice*”, **International Journal of Advertising**, 2015 <http://dx.doi.org/10.1080/02650487.2015.1093810>
18. M. Lee, K.W. King & L.N. Reid, “*Factors influencing consumers’ Attitudinal and behavioral responses to Direct-to-Consumer and Over-the-Counter drug advertising.*” **Journal of Health Communication: International Perspectives**, 20(4), 2015, 431-444 DOI: 10.1080/10810730.2014.965367.
19. N.M. Pujari, A.K Sachan & Y. Kumar, “*Cross-sectional study on availability and affordability of some essential child-specific medicines in Uttar Pradesh*”, **Int. J. Med Sci. Public Health**, 2016(B) DOI: 10.5455/ijmsph.2016.260 22016400.

20. C. Kathiravan, S. Dinesh, P. Mhalakshmi, V. Suresh & A. Rajasekar, “Determinants of over-the-counter (OTC) purchasing behavior of medicines in the pharmaceutical industry”, **TEST Engineering and Management**, 81, November-December, 2019, 6600-6607
21. R.K. Srivastava & S. Wagh, “Factors impacting consumer behaviour for pharmaceutical products”, **Int. J. Healthc Manag**, 2017, 1-9 DOI: 10.1080/20479700.2017.1348004
22. Wikipedia: en.wikipedia.org/wiki/Brand_awareness
23. Business Dictionary Online (A): <http://www.businessdictionary.com/definition/brand.awareness.html>
24. K.L. Keller, *Strategic brand management: building, measuring and managing brand equity*, 2nd ed., (Upper Saddle River, NJ., Prentice Hall), 2003
25. O.N. Amalia, S.N.A. Marsudi, “Effect of store atmosphere on impulse buying mediating positive emotion (Case study of guardian’s customers at Olympic Garden Mall)”, **Jamanika**, 1(1), March 2021
26. R. Habash & H. Al-Dmour, “Factor influencing the intention to buy over-the-counter medicines: empirical study”, **International Journal of Pharmaceutical and Healthcare Marketing**, 14(2), 2020, 305-323.
27. Poly I. Emenike, *Nigeria consumers’ perceptions of foreign and domestic pharmaceutical products in South-Eastern Nigeria*, **Forshen Hub International Journal of Entrepreneurial and Cooperative Studies** 5(1), 2020
28. A.C. Moreira, N. Fortex & R. Santiago, “Influence of sensory stimuli on brand experience, brand equity and purchase intention”, **Journal of Business Economics and Management**, 18(1), 2017, 68-83.
29. A. Prakash & A. Sharma, “Dimensions of point-of-purchase factors in impulse buying of women’s skincare cosmetics in India”. **Journal of Business and Retail Management Research (JBRMR)**, 10(2), 2016, 30-43.
30. M. Hwang & R. Thomadsen, “How point-of-sale marketing mix impacts national-brand purchase shares” **Management Science, Articles in advance**, 2015, 1-20 <http://dx.doi.org/10.1287/mnsc.2014.2113> (c) 2015 INFORMS.
31. A.T. Roux, “South African consumers’ views and responses to sales promotions”, **J. Soc Sci**, 41 (2), 2014, 243-251.

32. U. C. Amechi & C. S. Iong, "The impact of point of purchase advertising on consumer behaviour", **Interdisciplinary Journal of Contemporary Research in Business**, 4(10), 2013, 84-91
33. K. Kathuria, K. Kumar, N. Kumari & K. Kumar, "Point-of-Purchase and consumer purchase process for agriculture-based products: A study of Chandigarh and Shimla", **Journal of Pharmacognosy and Phytochemistry**, 8(5), 2019, 182-184.
34. Dot Activ, "10 Things you need to know about the point-of-purchase", **Dot Activ Team**, September 2016 <https://www.dotactiv.com/blog/point-of-purchase>
35. C. Kathiravan, P. Mahalakshmi & V. Palanisamy, "Online impulse buying behavior of consumer triggered by digital marketing", **International Journal of Recent Technology and Engineering**, 8(2), 2019, 648-653 <https://doi.org/10.35940/ijre.b1124.0782s619>
36. D.A. Aaker, "Managing the most important asset: brand equity", **Plan Rev.**, 20(5), 2006, 56-58
37. S. Baohong, A. N. Scott & S. Kannan, "Measuring the impact of promotions on brand switching when consumers are forward-looking", **Brandeo**, 2009 <http://www.brandeo.com/node/1134> 6(5), May 2017
38. M. Mendez, M. Bendixen, R. Abratt, Y. Yurova & B. O'Leary, "Sales promotions and brand loyalty: Some new insights", **International Journal of Education and Social Science**, 2(1), January 2015, 103-11.
39. S. Sapic, M. Kocic & K. Radakovic, "Creating consumer loyalty in the field of using over-the-counter products", **Economic Themes** 57(1), 2019, 1-20
40. M. Stefan, V. Andreiana, I.A. Tanasescu & G. Stoica, "Impact of television advertising on the impulse to purchase over-the-counter medicine", **Annals of "Dunarea de Jos" University of Galati, Fascicle, Economics and Applied Informatics, Years XXVII,3**, 2021 DOI: <https://doi.org/10.35219/eai15840409239>
41. R.Q. Danish, M.K. Khan, M.M. Ghafoor, I. Ahmad, A.A. Humayon & S. Aslam, "Impact of brand loyalty in assessing purchase intentions of a customer: A study of automobile industry in South Asian perspective", **A Research Journal of South Asian Studies**, 33(2), July-December 2018, 347-364
42. K.L. Keller, "Strategic brand management: Building, measuring and managing brand equity", (New Jersey: **Pearsons Education Limited**), 2013
43. <https://www.mindtools.com/pages/articles/keller-brand-equity-model.html>

44. K.C deSilva, A.A.L. Madhushani & S.D.S. Jayalath, “*Impact of brand loyalty on customer purchase intention: An empirical study on basketball shoe brand of Adidas, Nike and Puma*”, **Journal of Physical Education and Sports Management**, 7(2), 2020, 17-25 DOI:10.15640/jpesm.v7n2a3

Chapter Five

Conclusion

This chapter contains the summary of findings, conclusion, recommendations, contribution to knowledge and ends with a highlight of areas of further research.

5.1 Summary of Findings

A. **Brand Awareness:** The results indicate that POP Promotions in drug marketing exerts influence on brand awareness in some positive ways such as providing opportunity for first-time encounter, awareness of brand name, serving as a reminder that reinforces

brand awareness, promoting awareness of alternative brands of drugs to the drug intend to be purchased, as well as reinforcing the retention of the name of drug being promoted in memory amongst those that easily come to mind in a product group, the antecedent of top-of-mind awareness. However, the results from this study indicate that in relation to drugs, these POP Promotions do not necessarily make brand recognition easier whether the product is standing alone or among other products, offer no significant effect on increasing brand name familiarity and do not significantly influence the decision of the respondents to include the particular brand being advertised in their list of options to be considered for purchase, nor any significant influence on recall from memory other previously known brands within the same product group as the product being advertised at the pharmacy retail outlets.

B. **Brand Attitudes:** The results suggests that POP Promotions in drug marketing exert influence on brand attitude in some positive dimensions such as increasing the interest of respondents to know more about the advertised brand of drug, stimulate their desire to buy, make them believe that the brand of drug is of good quality, will be effective and safe to use without risks to health, give a general impression that the manufacturer has a good reputation and integrity, empower them to develop on overall good image of the advertised brand of drug, make them believe that they are being offered a good deal, value for money as well as encourage them to collect and use free trial samples. However, majority of the respondents did not agree that POP Promotions in pharmacy retail outlets encourage them to like the brand being promoted, as well as disagreeing that they provide conviction to make a trial purchase of the advertised brand of drug

C. **Impulse Buying:** In summary, majority of respondents agreed that POP Promotions in pharmacy retail outlets empower and persuade them to buy their pre-determined choice of brand of drug when they see it being advertised. Furthermore, majority of respondents disagreed that they can provide strong persuasion to make an unplanned-impulse purchase or reminder-impulse of both branded prescription drugs and non-prescription (OTC) drugs. In relation to prescription drugs, the majority of respondents disagreed that POP Promotions can empower them to buy an alternative brand being advertised if their preferred brand of prescription drug is not available or switch from their preferred brand of prescription drug being advertised. Regarding non-prescription (OTC) drugs, majority of respondents agreed that POP Promotion can empower them to buy an alternative brand being advertised if their preferred brand of non-prescription (OTC) drug is not available. However, majority of respondents disagreed that POP Promotion can empower them to switch from their preferred brand of non-prescription (OTC) drug to the brand being advertised.

D. **Brand Loyalty:** While POP promotions in pharmacy retail stores can increase confidence on purchasers/ consumers to accept brands of drugs recommended by non-healthcare professional staff working in pharmacy stores, this study suggests in the contrary that POP promotions do not increase their confidence to accept the brand of drugs recommended by pharmacists or other healthcare professionals working in pharmacy retail stores. Perhaps so, because the purchaser's acceptance of brands recommended by such healthcare professionals is based primarily on the confidence they have in their professional expertise and discretion, which to a large extent is not influenced or reinforced by any promotional stimuli within the pharmacy retail store.

A major finding of this study suggests that POP promotions can positively influence purchasers/ consumers' confidence to recommend preferred brands of drugs to other people as well as increase the frequency of their recommendations. Perhaps so, because repeated exposure to POP promotions of their preferred brands has the tendency to positively influence brand name recall, reinforcement of previous satisfaction derived from personal usage experience, brand trust and loyalty.

However, findings in this study suggest that exposure to POP promotions at pharmacy retail stores do not increase emotional attachment and endearment to the brands of both prescription and non-prescription (OTC) drugs being advertised. The quality of emotional attachment and endearment to a brand especially medicines, evolves from a deeper involvement with the brand beyond the stages of brand identity and brand meaning but defined more by higher levels of involvement like brand response (judgments and feelings) a brand resonance (relationships)

The findings from this study indicates that with respect to purchase of branded drugs, POP promotions at pharmacy retail stores do not exert the tendency to encourage buying more quantity at each purchase session, or increase regularity/frequency of purchase of branded drugs or even stockpiling. Rather, these considerations are determined strictly by specific healthcare needs, and prescriptions from doctors and other healthcare professionals (Nigeria context) in tune with progression of recovery and subsequent needs for more specific quantities of drugs under specific dosage regimes (quantity to be use at each dosing, number of doses per day and duration of medication-days, weeks, months, etc)

This study suggests that POP promotions do not significantly increase sensitivity or attraction of purchasers/consumers of drugs to incentives that may be offered at the point-

of-purchase by advertisements of other brands of drugs that are recognized as competitors to their preferred brands of both prescription and OTC drugs

E. **Front-of-Store Promotions:** The findings of this study indicate positive influence of Front-of-Store promotion on key dimensions of brand awareness particularly attracting attention, brand identification and brand knowledge as well as empowering the development of favorable attitudes, encouraging collection and trial of free sample, make trial purchase especially after favorable personal trial experience, buy a brand of drug purchasers are already familiar with, as well as reinforcing brand loyalty to a brand they have used before, when they see it being advertised in pharmacy retail outlets.

However, this study did not reveal a decisive confirmation that FOS promotions attract quality time to read and digest the information being displayed on the front-of-store promotions.

F. **In-Store Promotions:** This study confirms that just like FOS promotions, In-Store promotions also demonstrate the tendency to effect similar positive influences on attracting attention, brand identification, brand knowledge as well as development favorable attitudes towards the advertised brand of drug, followed by favorable positive outcomes as enumerated under FOS promotions above. However, the findings also highlight a significant difference between the influence of Front-of-Store and In-Store promotions. While most respondents were uncertain that FOS promotions attract their commitment to spend quality time to read and digest the information being displayed, the findings indicate that In-Store promotions generally attract better quality time and attention than FOS promotions. This suggests that In-Store promotions which attract stronger attention will provide more quality information to purchasers of drugs than

Front-of-Store promotions and therefore should impact more on purchase decision-making process for drugs than FOS promotions.

G. Brand Choice: POP promotions do not exert any significant influence on choice of branded prescription drugs while there is no significant difference influence of front-of-store and in-store promotions on choice of branded prescription drugs. Simply, both FOS and IS promotions do not exert any significant influence on choice of branded prescription drugs

The findings from this study also suggest that POP promotions could have a little influence on choice of branded non-prescription (OTC) drugs, while also indicating that there could be a difference, significant or not, between the influences of FOS and IS promotions on choice of branded OTC drugs, probably in account of greater flexibility permitted for independent choice of preferred OTC drugs as well as the stronger pulling power of In-Store promotions which is expected to provide more impactful communication and consequent stronger influence on purchase decision-making for OTC drugs

5.2 Conclusion

This study set out to investigate the relationship between Point-of-Store promotions strategies and brand patronage of drugs within the setting of selected pharmaceutical retail stores in Ibadan, the largest city in south-western Nigeria. Basically, the investigation was designed to examine a series of related research questions, research objectives and formulated hypotheses, particularly focusing on gaining deeper insight into specific influences of point-of-purchase promotions on various dimensions of brand patronage of drugs such as brand awareness (cognitive impact), brand attitude (attitudinal

impact) as well as impulse buying, brand loyalty and brand choice (behavioral impact).

The findings from this study lead to the following conclusion:

- i. POP promotions exert some notable positive influences on brand awareness in multiple dimensions which are consistent with the outcome of the test of relevant hypothesis
- ii. POP promotions have significant positive influence on various dimensions of brand attitudinal development which are consistent with the outcome of hypothesis test which postulate that POP promotions in drug marketing have a significant influence on brand attitude.
- iii. POP promotion will not provide strong persuasion to make an unplanned-impulse purchase or a reminder-impulse purchase of both branded prescription and non-prescription (OTC) drugs. Moreover, POP promotions have been found not to be effective in stimulating impulse brand substitution or impulse brand switching with respect to prescription drugs. However, with respect of OTC drugs they may exert positive influence on impulse brand substitution but not on impulse switching. Most of these findings are not consistent with the outcome of the test of hypothesis when suggests that POP promotions have a significant influence on impulse buying. However, the positive influence on brand substitution with OTC drugs aligns with the rejection of the null hypotheses which suggests that POP promotions do not have a significant influence on impulse buying. Perhaps a deeper research will shed greater insight
- iv. POP promotions in drug marketing indeed have a significant influence on some dimensions on brand loyalty which aligns with the rejection of the null hypothesis.

However, the study demonstrates clearly that POP promotions do not have a significant influence on some other dimensions of brand loyalty like buying more, buying more regularly/frequently, stockpiling-purchase and sensitivity or attraction to incentives offered by competing brands

- v. It has been demonstrated that front-of-store promotions do have some influence on attention, brand knowledge, brand identification and development of favorable attitude, behavioral outcomes to the brand being advertised at the pharmacy retail store. These findings are consistent with the rejection of the null hypothesis
- vi. Likewise, in-store promotions exert similar positive significant influence on brand patronage of drugs just as front-of-store promotions which is also consistent with the rejection of the null hypothesis. However, the study has revealed that in-store promotions command more commitment to devote quality time to digest the information being displayed compared to front-of-store promotions, of course with consequential implication for more impactful communication and expected stronger influence on the decision making process on brand of drug to buy
- vii. POP promotions do not significantly influence choice of branded prescription and non-prescription (OTC) drugs. The findings indicate further that there is no significant difference between the influence of POP promotions on patronage (choice) of both branded prescription drugs and non-prescription (OTC) drugs; which is consistent with the support of the null hypothesis under test. However, the study suggests that while there may not be a difference between the relative impacts of front-of-store and in-store promotions on patronage of branded prescription drugs, there could be a difference, significant or not, in respect of patronage of branded OTC drugs between the influence of front-of-store and in-store promotions

viii. The above conclusions from the questionnaire survey on the influences of POP promotions on various dimensions of patronage of branded drugs are generally consistent with the deductions from the Focus Group Discussion, the second part of this study.

In summary, the outcomes have provided a rational basis for evaluating the objectives, research questions and hypotheses set forth in this study. This study has provided empirical evidence for evaluating the necessity of P-O-P promotions in the drug marketing promotion mix and the various dimensions of their impact or influence on the decision making process leading to choice of particular brands of drug to buy.

In particular, this study provided empirical evidence on the nature and influence of point-of-purchase promotions on the purchasers of drugs at the cognitive, attitudinal and behavioural levels in the decision making process on which brand of drug to buy.

5.3 Recommendations

Industry: Drug manufacturers and marketers in Nigeria should continuously re-evaluate the strategic relevance of POP promotions within their promotion mix and the necessity to invest in the deployment of these POP promotions especially for prescription drugs marketing. This will ensure the optimal allocation of limited promotion budget for maximum communication and sale revenue impacts. Moreover, it is imperative to imbibe innovation and creativity in the design and deployment of these POP promotions to convey simple, easy-to-grasp message contents and less space invasion within the premises of drug retail stores. The study also suggests innovativeness and creativity in designing and deploying promotion strategies focused on both healthcare professional

staff and general sales staff working in pharmacy retail stores whose opinions and recommendation matter much in influencing choice of branded drugs by purchasers.

Government Regulatory Agencies (GRA): I advocate that drug marketing regulatory agencies of government, henceforth, should ban the deployment of POP promotions for prescription drugs at all categories of drug retail stores in Nigeria. POP promotions should only be permitted for OTC drugs and consumer healthcare products.

That should eliminate any negative tendencies from POP promotions of prescription drugs such as encouraging indulgence of the populace in self-prescription and self-medication, particularly in the Nigerian healthcare environment where self-medication is highly prevalent due to several factors. Even for OTC drugs and consumer healthcare products, GRA should set and enforce guidelines for the approved message content” within POP promotions.

Pharmacists’ Professional Bodies: The Association of Community Pharmacists of Nigeria in particular and the Pharmaceutical Society of Nigeria in general, should resolve to reject the deployment of POP promotions for prescription drugs within pharmacy retail stores.

Pharmacy Store Managers: Retail store executives must reject any POP promotions for prescription drugs within their stores.

Concerned Non-Governmental Organizations: NGOs campaigning against self-prescription and self-medication should also advocate for the ban of POP promotions for prescription drugs at retail stores in Nigeria.

5.4 Contribution to Knowledge

Overall, this study has contributed to knowledge particularly on the relevance of POP promotions within the promotion mix in the marketing of drugs and their specific influences on the decision making process when choosing which brands of drugs to buy amongst purchasers of drugs in Ibadanland, Oyo State, South-West Nigeria.

1. This study has conceptualize a comprehensive scope of research for investigating the subject of point-of- purchase promotion strategies, patronage of branded drugs and influence on all relevant stakeholders within the Nigerian pharmaceutical marketing environment. This is an asset for guiding future research.
2. This thesis aggregates a comprehensive review of the key elements of the subject of pharmaceutical marketing, as a specialty area in marketing theory and management, as well as specific focus on the Nigerian pharmaceutical marketing environment.
3. Moreover, this thesis provides a concise integration of relevant literature linking the marketing concepts of branding, consumer behavior, demand generation and consolidation, promotions strategy, sales promotion, consumer promotion, POP promotions, particularly in relation to brand patronage in pharmaceutical marketing, especially within the context of an emerging economy like Nigeria, with weak healthcare systems and poorly regulated drug distribution, sale and advertising.
4. This research provides empirical evidence for informed insight on the following subjects, within the context of literate purchasers/users of medicines in the Nigerian pharmaceutical marketing environment:

- a. Specific influences of POP promotions on Brand Awareness (Cognitive Impact), Brand Attitude (Attitudinal Impact), Impulse Buying, Brand Loyalty and Brand Choice (Behavioral Impacts).
 - b. The influence of front-of-store point-of-purchase promotion strategies on brand patronage (brand choice) of medicines, in general.
 - c. The influence in-store point-of-purchase promotion strategies on brand patronage (brand choice) of medicines, in general.
 - d. Comparison of the relative influences between front-of-store versus In-store point-of-purchase promotion strategies on purchaser's patronage (choice) of branded medicines.
 - e. The general influence of point-of-purchase promotion strategies on patronage (choice) of branded prescription medicines.
 - f. The general influence of point-of-purchase promotion strategies on patronage (choice) of branded, non-prescription (OTC) medicines.
 - g. Comparison of the relative influences of point-of-purchase promotion strategies on patronage (choice) of branded prescription drugs versus non-prescription (OTC) medicines.
5. This work has contributed significantly to the development of conceptual issues as demonstrated by the various abstractions/conceptual models developed by the researcher and highlighted in various sections of this thesis, such as, 1. The brand loyalty development process, 2. Factors influencing brand choice decision at the point-of-purchase of drug, 3. The ten-option decision matrix for choosing which brand of drug to buy, 4. Consumer behavior showing stages in the buying process for drugs in Nigeria, 5. Outcomes of promotions investments in drug marketing, 6. POP

- promotions and stakeholders at the drug retail outlets, 7. A conceptual model for evaluating the impact of POP promotion on patronage of branded drugs.
6. This study presents a holistic empirical insight to the specific influences of POP promotions on patronage of branded drugs at the cognitive, attitudinal, and behavioural levels of decision making.
 7. This research has filled some of the gaps existing in literature and empirical works that were highlighted, particularly with respect to investigating the influence of POP promotions on patronage of branded drugs apart from the avalanche of previous works on consumer goods; a new focus of research in an underdeveloped/emerging economy like Nigeria; investigating the difference in influence of POP promotions on patronage of prescription and OTC drugs; and a comparison of the influences of front-of-store and in-store promotions on patronage of branded drugs.
 8. The application of Focus Group Discussion (FGD) as a methodology to complement the often-used questionnaire survey is a unique contribution to knowledge because the review of relevant literature and empirical works did not reveal any study that used FGD as a methodology for evaluating the influence of POP promotions on patronage of branded drugs.
 9. This research becomes a good reference for further work by other researchers who desire to investigate the influences of point-of-purchase promotion strategies on brand patronage (brand choice) of medicines among a population of literate purchasers/users of medicines who live in a metropolitan city; as the study was conducted within Ibadan, capital city of Oyo State, South-West Nigeria, and the third most populated city in Nigeria.

10. Moreover, this study provides a good reference for further research when the target population is in under-developed/developing economic environments like Nigeria; Nigeria being the country with the largest population of black people in the world, and the largest and fastest- growing population in Africa.

5.5 Areas of Further Research

A. Territorial Scope of Research

1. Extending the research scope to cover other States within South-West geo-political zone of Nigeria – Lagos, Ogun, Osun, Ondo, Ekiti
2. Replicating the research for other geo-political zones within the territory of the Federal Republic of Nigeria – South-South, South-East, North-East, North-Central and North-West

B. Drug Retail Store Scope

1. Extending the research at any scale of territorial coverage, to include the vast majority of other categories of drug retail stores beyond “registered pharmacy stores.” For example, supermarkets, unregistered pharmacy stores, registered and unregistered patent medicine stores.

C. Respondents’ Scope

1. Specific research to assess the influence of these P-O-P promotions in drug retail stores on brand patronage of drugs by illiterates and those purchasers of drugs whose education is below WASCE/SSCE.

2. Specific research to assess the impact of P-O-P promotions on brand patronage of drugs by healthcare professional staff of pharmacy retail stores in Nigeria – pharmacists, nurses, auxiliary nurses etc.
3. Specific research to assess the impact of P-O-P promotions on brand patronage of drugs by the general sales staff of pharmacy retail stores and other categories of drug retail stores in Nigeria.

D. Investigating other dimensions of brand equity

Investigating the relationship between POP promotions and brand patronage of drugs in relation to other constructs/dimensions of brand equity and consumer behavior beyond those investigated in this study eg, brand association, perceived quality, brand trust, brand preference, brand love, brand confidence etc.

E. Effectiveness of Advertising Message

1. An incisive research to assess what specific content of the POP promotions message do Nigerian purchasers of drugs find most striking or attention catching.
2. Further research to determine what information content in these arrays of POP promotions is mostly retained in the mind (memory) of patrons of drug retail stores.

F. Decision-Making Process for Drug Purchase

1. An incisive empirical research to define the decision making process on which brand of prescription drug to buy, within the Nigerian context.
2. An incisive empirical research to define the decision making process on which brand of OTC drug to buy, within the Nigerian context.

3. An incisive empirical research to define the decision making process on which brand of consumer healthcare product to buy, within the Nigerian context.
4. Further research to assess the impact of POP promotions on the cognitive stages of the decision making process for prescription drugs, OTC drugs and consumer healthcare products.
5. Further research to assess the impact of POP promotions on the affective stages of the decision making process for prescription drugs, OTC drugs and consumer healthcare products.
6. Further research to assess the impact of POP promotions on the behavioural stages of the decision making process for prescription drugs, OTC drugs and consumer healthcare products.

G. Querying the necessity for POP promotions in influencing choice of brand of drug to buy

1. Further empirical research, within Nigerian context to determine the specific range of factors that influence the purchaser's decision on which brand of prescription drug to buy.
2. Further empirical study, within the Nigerian context, to determine the specific range of factors that influence the purchaser's decision on which brand of drug OTC to buy.
3. Further empirical study, within the Nigerian context, to determine the specific range of factors that influence the purchasers' decision on which brand of consumer healthcare product to buy

H. Relative Effectiveness of Front-of-Store and In-Store POP Promotions

More incisive research on which has a greater impact and why, between front-of-store and in-store POP promotions, within the Nigerian drug retailing environment.

I. Tendency of POP promotions to encourage undesirable self-prescription/self-medication

1. Further empirical study to determine if and to what extent POP promotions encourage undesirable self-prescription/self-medication with prescription drugs
2. Further empirical study to determine if and to what extent P-O-P promotions encourage undesirable self-prescription/self-medication with OTC drugs.