

# Understanding Brand Relationships with OTC Pharmaceutical Products and Corporate Brand Experienced by the Consumers: Case Orion Oyj

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### Objectives

The purpose of this thesis was to study consumer-brand relationships of OTC products and pharmaceutical corporate brand. The practical aim was to determine whether the corporate brand should be utilized in product marketing and to what extent. As branding of drugs is a rising trend and something not yet properly understood, this study will provide both practical and theoretical implications that are novel, regarding the research conducted in this field is extremely limited.

### Methodology

Six in-depth interviews were conducted by following existential-phenomenological methodology, which is a means of conducting qualitative research. The interviewees were chosen based on their lifestyles and demographic qualities were left in a diminished part. In terms of some participants, second interviews were conducted in order to discover more information. The empirical analysis was built around consumer profiles of five respondents. The purpose was to explain their consumption by life values, personal history, and involved persons in addition to study what type of brand relationships there exist. Moreover, trust formation and brand relationship typology were central themes of the analysis.

### Results

The results of the study indicate that consumers share deep emotions and long relationships with OTC brands that are frequently regarded to solely provide rational and functional benefits. The strong relationships not only have been already developed in childhood, but also have increased price tolerance and affected trust. The relationships with OTC products evolve during time and are based on both emotional and functional attributes. Despite experiencing Orion rather distant, the consumers valued its trustworthiness and quality of being domestic. These are attributes that should be used in the future when constructing a strong corporate brand and differentiating from other companies in this market characterized by low growth and increasing competition. Only after efficient corporate brand building is it justified to attach it in the product marketing, as currently the brand is not strong enough to separate Orion's products from others. This is especially important as the consumer behaviour is rapidly changing in addition to the evolving sales environment and legislation. Moreover, there was a need to exercise more influential branding strategies in terms of memorable brand name development, more personalized advertising, and as a whole, investing in marketing and branding rather than simply in sales and R&D, which regarding the current market situation is not sufficient.

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**Keywords** Pharmaceutical business, OTC, corporate brand, product brand, FMCG, consumer-brand relationships, trust, pharmacies, consumer behaviour.

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### Tutkielman tavoitteet

Tämän tutkimuksen tarkoituksena oli selvittää kuluttajien kokemia suhteita itsehoitolääkevalmisteiden sekä lääkeyrityksen kanssa. Käytännön tavoitteena oli tutkia miten yritysbrändiä voitaisiin käyttää tehokkaasti myös tuotetason markkinoinnissa ja miten tämä vaikuttaisi kuluttajakäyttämiseen. Kyseistä suhdehierarkiaa ja brändäystä on tutkittu lääketeollisuuden alalla erittäin vähän, jolloin tutkimus tarjoaa uutta näkökulmaa myös erinäisiin kuluttajamarkkinoinnin teorioihin.

### Tutkimusmenetelmät

Tutkimuksessa käytettiin eksistentiaalistis-fenomenologista metodologiaa, joka on kvalitatiivisen tutkimuksen tekotapa. Aineisto kerättiin toteuttamalla kuudelle kuluttajalle syvähaastattelu, jossa selvitettiin suhteita itsehoitolääkevalmisteisiin sekä kohdeyritystä kohtaan kuluttajien kertomien kokemusten kautta. Joitakin kuluttajia haastateltiin myös toisen kerran lisätietojen saamiseksi. Haastateltavat valikoituivat tutkimukseen elämäntyyliinsä perusteella ja demografiset valintaperusteet jätettiin pois. Itse aineiston analysointitapana rakennettiin viidestä kuluttajasta omat profiilinsa, jotka keskittyivät selvittämään lääkewalmisteiden merkitystä kuluttajalle sekä heidän elämäntyyliinsä ja -arvojen vaikutusta kulutukseen. Myös luottamuksen muodostuminen lääkkeitä kohtaan sekä brändisuhteiden typologia toimivat keskeisinä analyysiteemoina.

### Keskeiset tulokset

Lääkkeet nähdään usein rationaalisena ja vain tarpeeseen perustuvana hyödykkeenä. Tutkimuksessa kuitenkin selvisi, että kuluttajilla on pitkiä ja intensiivisiä suhteita itsehoitolääkemerkkeihin. Näihin liittyy myös keskeisesti eri elämänvaiheita, ihmisiä sekä kuluttajien itselleen tärkeinä pitämiä elämänarvoja. Kuluttajat myös ilmentävät elämäntyylejään sekä roolejaan ostamalla tiettyjä lääkemerkkejä. Brändisuhteet kehittyvät ja muuttuvat ajan kuluessa, vaikkakin vahvimmat suhteet ulottuivat kuluttajilla aina lapsuuteen saakka. Tällaiset suhteet tekivät kuluttajista myös hintajoustavampia. Vaikka kuluttajat kokivat Orionin hieman etäisenä, he arvostivat kotimaisuutta ja lääkkeiden luotettavuutta. Näitä ominaisuuksia voidaankin jatkossa käyttää hyväksi markkinoinnissa, ja suosituksena onkin rakentaa vahva yritystuotemerkki, jota voidaan jatkossa käyttää myös tuotemarkkinoinnissa hyväksi. Orionin tulisi myös tehostaa markkinointiaan esimerkiksi kehittämällä tuotebrändien nimeämisstrategiaa sekä mainontaa. Vetoamalla suomalaisuuteen, luottamukseen ja laatuun Orion voi erottautua kilpailijoista, saada uskollisia kuluttajia asiakkaikseen sekä kohdata muuttuvan kuluttajakäyttämisen haasteet.

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**Avainsanat** Läketeollisuus, itsehoitolääkkeet, yritysbrändi, tuotebrändi, FMCG, kuluttajien brändisuhteet, luottamus, apteekki, kuluttajakäyttämisen muutos.

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# 1 INTRODUCTION

This chapter will introduce the topic of the thesis. It first starts by discussing the pharmaceutical industry and its products due to their varying nature from other consumer products. In what follows, the research problem as well as objectives of this study are presented along with the structure of the thesis.

## 1.1 Pharmaceutical industry

The product lifespan of a medicine varies quite an extent from a typical consumer product. Firstly, introducing a new, patented drug to the market is an expensive process that can take nearly 12 years due to the long product development process as well as applying for commercial licenses and certifications. In the end, the product may only have eight years time to be sold on the market before the patent expires and price competition commences. (Rafiq & Saxon, 2000) Thus, the industry has traditionally largely relied on strong R&D, aggressive sales force, and defense of patents, while branding has not been the focus. (Veloutsou & Panigyrakis, 2001; Moss & Schuiling, 2004; Moss, 2007). When compared to fast moving consumer goods (FMCG), pharmaceutical products have shorter lifespans and require particular product lifecycle management (Moss, 2007). Following, pharmaceutical companies have not typically focused on building centuries-lasting brands, as has been the practice in the FMCG industry. There has also been confusion about the concept of a brand and how it should be managed.

The whole business strategy of pharmaceutical companies has conventionally been innovative and R&D-oriented, which has led to stressing the importance of few, cash cow products called “blockbusters”. They are patented products that are created after an extensive and expensive R&D process and alone bring significant profit to the company. (Trombetta, 2004; Moss, 2007) This has also implied that the product comes before the consumer and branding has been rather tactical than strategic (e.g. Moss, 2007; Tebbey et al., 2009). However, introducing a new blockbuster drug to the market is becoming even more expensive as the costs of R&D increase and governments are looking for tightening the existing marketing (Veloutsou & Panigyrakis, 2001; Moss & Schuiling, 2004; Moss, 2007; Rod et al., 2007). Moreover, the amount of new molecular entities (NME), which the blockbusters are based on, has recently

decreased. Consequently, this has led to the product pipeline shrinking despite the increased investments in R&D (Kvesic, 2008; Dubey & Dubey, 2009). It has further resulted in looking for new procedures to maintain the business and therefore also postulated for new marketing methods in addition to migrating to a consumer-led business strategy (Moss & Schuiling, 2004; Moss, 2007; Trombetta, 2007).

To acquire new competitive advantage and answer the tough competition, Moss and Schuiling (2004) suggest that pharmaceutical companies should start paying more attention to building brands than simply products, therefore transferring from research-oriented, product-centric strategy to brand and consumer centrality. In addition, Moss and Schuiling (2004) as well as Griffiths (2007) clearly state that pharmaceutical companies ought not to solely rely on their sales force and R&D anymore – the emphasis needs to be put on marketing and branding. Veloutsou and Panigyrakis (2010) add that simply counting on price competition and personal selling methods is not a long-lasting strategy and not sufficient in today's market. According to Blackett and Harrison (2001), there is a growing need for the pharmaceutical companies to learn how to construct and manage brands.

Further on, the consumer behavior in the pharmaceutical market is changing. Consumers are becoming more aware of the variety of medicines due to the increased role of the Internet (e.g. Moss & Schuiling, 2004), and are demanding more information and options from their physicians. End users of pharmaceutical products are no longer merely patients, but rather educated consumers and the whole health-care industry has become consumer-driven (Maddox, 1999). Concentrating on building strong, trusted brands in the corporate as well as product level could perhaps help to cope with the tightening regulation and the above barriers, and act as a strategic asset for the industry suffering from low growth, diminished pipelines, accelerating patent expiries, and immense pressure on prices (Moss, 2007; Moss, 2008).

## **1.2 Objectives**

The objective of this study is multisided. Firstly, I am investigating a conservative, behind-lagging industry through a window of modern consumer culture theory. Moreover, the specific theoretical framework will address a current and complex subject of utilizing corporate branding in product marketing. As this may seem as a great deal of various theories and work,

it must be noted that even corporate brands have been researched rather slightly in the pharmaceutical market (e.g. Moss, 2007), let alone consumer-brand relationships. Namely, based on various articles (e.g. Moss & Schuiling, 2004; Griffiths, 2007; Moss, 2007; Tebbey et al. 2009; Kauppinen-Räsänen et al., 2012), there is hardly any research on this topic and nearly all the studies I found focused on other types of consumer products such as food products. However, various studies (e.g. Moss, 2007) found that branding of pharmaceuticals is a rising trend as is building consumer attachment towards brands (Malär et al., 2011). This thesis will thus provide new insight into the theoretical discussion. In addition, as Moss (2007) defines, the pharmaceutical industry is at least 10 years behind the FMCG sector in branding. The goal is to bring the industry to this day by applying modern consumer theories of emotional branding and combine them with corporate branding. Therefore, I will suggestively present some new angles to various theories as well.

The thesis will focus on investigating self-care products due to several advantages compared to prescription medicines. Firstly, although self-care products may also have a doctor or a hospital as a mediator in the buying process, it is not as significant as with prescription medicines, which typically require an arbitrator and therefore create the buying process more complicated. In addition, advertising of self-care products is not as restricted as it is with prescription medicines. This way, I may also apply the consumer-brand relationship theory because the point of sale situation does not vary as much. In academic literature, self-care pharmaceutical products are referred to as over-the-counter products, “OTC”, which is why I will use this term in the text. I will also use the abbreviation “POM” for prescription-only-medicines.

The research was conducted in co-operation with Orion Oyj that is a Finnish pharmaceutical company and almost 100 years old. For Orion this will not only help to understand various OTC product categories’ brands and evaluate their marketing, and what these brand relationships indeed denote to individual consumers, but to learn how the role of the consumer is changing through culture and new consumer behavior. Due to its important and strategic nature, branding should be the concern of the top management. Schuiling and Moss (2004) even state that since there has been such an insufficient focus on brand management in pharmaceutical companies, concentrating on this and mastering it could offer true competitive advantage and help surpassing ever-increasing challenges. Finally, the thesis will help to understand how the consumers experience brands and what kind of meanings brands maintain in their daily lives.



### 1.3 Research problem

The target and purpose of this thesis is to answer to the following research question that is quite simplistic but outright encapsulates the whole substance of this document:

*Q1: How do consumers experience relationships with a pharmaceutical corporate brand and OTC product brands?*

This is to investigate the finding by various academic articles (e.g. Blackett & Harrison, 2001; Schuiling & Moss, 2004; Moss, 2007) that there nearly exist no strong, medical corporate brands and the pharmaceutical companies are seen as strangers to consumers and even to doctors. As the practical purpose of this thesis is to examine to what extent the corporate brand should be utilized in product marketing, it is justified to first determine how consumers experience the corporate brand, especially Orion that is a long-standing and presumably renowned brand in Finland due to the extensive advertising as well. In addition, the emotions and experiences are investigated in terms of single product brands:

*Q:2 What kind of experiences and emotions do consumers share with OTC brands?*

This is to further elaborate the first question by condescending to the actual emotional level. The question will thus proceed more into detail by explaining how the consumer-brand relationships are built and how they evolve during time. The third chapter of the theory will discuss consumer emotional branding, which will be the framework guiding this question.

*Q3: How is the consumer trust built towards the OTC products?*

Blackett and Harrison (2001) find trust the most important emotional value in the pharmaceutical industry, which is why it is justified to study it more in order to also understand the composition of a brand relationship. Moreover, through loyal, trusting customers a pharmaceutical company could survive the price war as these consumers have higher tolerance towards premium pricing (Hess & Story, 2005). Needless to say, branding has a great impact on consumer trust, which validates combining the two theories of corporate and product brand relationships and consumer emotional brand attachment. Through this question, I seek to explain how

the consumer's trust is constructed and how brands may facilitate creating a committed and enduring relationship.

#### **1.4 Structure and research type**

This thesis is formed by nine main chapters. Followed by the first chapter, which contained introduction and research objectives, a short literature review on branding will be presented, after which product brands and corporate brands will be thoroughly discussed along with the consumer emotional brand attachment building. In the fifth chapter, a synthesis of the literature review will be presented as a theoretical framework that the research will focus on. The literature review of this thesis has two sides: investigating the phenomenon from the viewpoint of the corporation and the consumer. This is seen in first discussing the nature of corporate branding and strategies of applying it to the product level, and then introducing the consumer-brand relationship typology. To begin with, the empirical part will introduce consumer profiles of the interviewees to explain what kind of experiences the consumers share with OTC brands in their history and daily lives. Secondly, larger empirical themes of trust and brand relationship construction are explored.

The research type of this thesis is qualitative consumer interviews focusing on the consumer experiences and stories with the brands they prefer to explain. Due to the sensitive nature of the pharmaceutical products to consumers, it was justifiable to conduct personal interviews where the discussion could, moreover, be directed. The interviewee group was not chosen based on their demographic differences, but rather psychographic in terms of including specific lifestyles. Neither was the group supposed to represent the whole consumer group of OTC products, but to provide insight on how an individual consumer feels.

*“Eventually all pharmaceutical brands will need to behave like the most successful consumer-brands and that may mean taking a global approach to branding, through advertising and identity”*

Blackett & Robins (2001)

## **2 AN OVERVIEW TO BRANDING**

This chapter presents a brief literature review on brands to support the importance of this topic. Such key concepts as brand meanings, brand associations, brand equity, and brand awareness are discussed. I will also display the special characteristics of pharmaceutical and OTC brands.

### **2.1 Structure and qualities of a brand**

Brands include both intangible and tangible benefits to the consumer, which help to differentiate and therefore exceed the concept of a product. These benefits are all communicated to the consumer by a brand name that distinguishes the product (Schuiling & Moss, 2004). Brands are intangible assets, market organisms that are maintained through actions performed by managers and the environment (Jevons et al., 2005). Managers and consumers together build the meaning of the brand, which causes certain uncontrollability of brands and leaves only parts of the brands observable for the managers. Moreover, consumers as well as managers all have various cognitive meanings for brands, which creates managing and understanding brands complex. According to Jevons et al. (2005), the altering environment of communications also creates barriers to control brand associations since Internet and other types of media, where consumers can share experiences, gain popularity.

de Chernatony (2002) states that a brand is formed by a dynamic encounter of managers' actions and the customer receptions. She continues to explain that brands contain two types of values: functional and emotional. The values aim at producing a specific experience for the customer, therefore creating a promised brand experience. For Orion, this type of promise could be an analgesic drug increasing wellbeing, also a core corporate value, through the functional benefit of removing the pain and the emotional value of enhancing the customer's mood and providing reliability as well as quality. In the article, de Chernatony mentions that executing a brand successfully presumes the managers to define the core values, the staff to implement them, and the customers to appreciate the implemented values.

Jevons et al. (2005) stress the importance of paying attention to the associations perceived by the customers and the relationships brands have with each other in order to understand the meaning of brand relationships. According to de Chernatony (2002), a brand includes meanings formed by the brand identity, which is created by the managers, and meanings associated by the users or customers. These brand associations are defined as perceptions, meanings, and preferences attached to the brand in one's mind (Keller, 1993). Jevons et al. (2005) thus identify as one of the key challenges and missions of managers to narrow down the gap between customers and brands by harvesting proper brand associations. If successful, a brand may have the power of exceeding the market and even borders of countries (Blackett & Harrison, 2001).

### **2.1.1 Brand values**

Brand values are beliefs, thoughts, and feelings consumers attach to brands and discover positively influencing their behavior, potentially leading to a purchase decision (Blackett and Harrison, 2001). In such, they are corner stones of building a brand; what the consumer manufacturer relationship is truly like. Furthermore, brand values may represent emotional or rational beliefs. Blackett and Harrison divide the brand values into three categories: functional, expressive, and central values. The values are constructed through various influences the consumers experience – advertising, purchasing environment, packaging, brand name, brand logo, and personal experiences, to name but a few. Indeed, as defined in the previous section, the challenge of managers is to control these, typically unmanageable beliefs and seek to lead the brand to fulfill the consumer's beliefs in order to influence the consumer response.

The rational beliefs are much based on the perceived, functional attributes of the product; for example, does the pain remedy take the headache away or not. In short, the functional values answer the consumer's question of "how the brand helps me?" The most important functional value for the pharmaceutical industry has been promoting the safety of products, which can be seen in such benefit as the efficacy of the product. Namely, does the product help with the specific condition? Or convenience; is the product easy to administer, what is the dosage form like? Thus, functional values are already included in the product during manufacturing. (Blackett & Harrison, 2001; Moss & Schuiling, 2004; Schuiling & Moss, 2004)

On the other hand, expressive values proceed beyond the perceived factors of the brand. They are non-rational, emotional values and based on the image of the brand the consumer maintains. Blackett and Harrison (2001) along with Schuiling and Moss (2004) define one of the most powerful emotional values that should be harvested in the pharmaceutical field to be trust. According to the both articles, the pharmaceutical field has much to learn in promoting and appealing to consumers' expressive values, to which the consumers may reflect. Safety, another key aspect in terms of medicine, was in fact discovered to be associated with higher priced items (Tse, 1999). It is also suggested that safety of a product will in future gain even more importance, therefore offering yet another, essential expressive value for the pharmaceutical field to utilize in branding.

### **2.1.2 Brand positioning**

In building a branding strategy, the most important first step is to define the brand positioning; what aspects of the brand represent unique, distinctive and attractive attributes to the consumers that will help to differentiate the brand? These may be functional benefits; such as the amount of vitamin B a food supplement contains; or simply emotional, the energy that the vitamin brand represents and evokes in a consumer. At best, these benefits are defensible and unique to the consumer, which set and maintain the brand in a place different from the competitors. This type of position requires the company to understand the product and needs of the consumers buying it. Thus, a target segment that holds an interest towards the product must be selected and the brand accordingly developed. Finally, the brand must be cultivated and refined according to the consumer responses. (Blackett & Harrison, 2001)

However, according to various studies (e.g. Blackett & Harrison, 2001; Moss, 2007; Malär et al., 2011), positioning brands based on simply functional benefits is not enough, and the stress should be in emotional values. Emphasizing emotional values has not been the reality in the pharmaceutical industry, despite, as discussed already, the key brand value of the pharmaceutical products appears to be trust. Though it might sound simple, building consumer trust is extremely difficult and once won, it should indeed be cherished. In addition, a pharmaceutical brand should represent relief and effectiveness to the consumer, otherwise trust will not be built. This varies quite an extent from, for example, food brands, which are composed around much simpler needs than relieving different types of pains, symptoms, or illnesses. Yet, few

pharmaceutical brands have been able to master communicating these emotional values to consumers. (Blackett & Harrison, 2001; Moss & Schuiling, 2004; Schuiling & Moss, 2004)

### **2.1.3 Brand personality**

Brand personality facilitates the brand to differentiate and position itself as it represents the emotional characteristics the brand signifies to the consumer. A brand personality is developed and maintained through visual marketing and advertising of the brand, and is best explained by how the brand appears to the market audience. These visual attributes are the package, brand name, and advertising, through which the brand personality is built. Blackett and Harrison (2001) explain that though a brand name is only one part of the branding strategy, it is extremely important as it has the power of associating the brand to all audiences. In particular, the brand name is crucial in the OTC market, which has along with the whole pharmaceutical industry, suffered from misleading and inefficient brand name building (Schuiling & Moss, 2004).

## **2.2 Brand equity**

Brand equity represent the process where the consumer pays more for the product that contains the same qualities as others, but holds a specific brand name to it (Bello & Holbrook, 1995). Thus, brand equity represents the specific position a product maintains on the market place, in the consumer's mind. Schiffman and Kanuk (1997) further define brand equity as the facilitator of enhanced value and also premium pricing, in a way signifying "added value" to the customer. According to Aaker (1991), brand equity consists of five dimensions; brand name awareness, perceived brand quality, brand associations, brand loyalty, and other brand assets such as patents and trademarks.

In the pharmaceutical market, as products generally have shorter life spans, brand equity has not been stressed as much (Moss, 2007). According to Griffiths (2007), it is possible to build brand equity to medical products through increased consumer loyalty, which would eventually lead to elongated product lifecycles. This is well seen with such painkiller brands as Bura-na and Aspirin that contain high brand equity. Though they include the same ingredients as

other, competing brands, consumers are willing to financially invest much in them because of the brand name.

Elliot and Percy (2007) claim that brand equity may also be explained by the consumer awareness towards the brand. The awareness results in specific associations to the brand in the consumer's mind, which in time evolve to emotional associations that contain more than simple affection towards the brand. For the awareness to result in a purchase, the associations need to evoke either brand recall or recognition. However, this to happen, the brand must have salience in the consumer's mind (Sanyal & Datta, 2011); the associations must meet the consumer's needs and arise when these needs take place (Ehrenberg et al., 1997). Brand awareness also increases brand dominance, which consequently leads to a more probable purchase decision (Sanyal & Datta, 2011).

### **2.3 OTC Brands**

Lyon (2001) defines one of the key trends in the pharmaceutical industry the growing interest of consumers towards preventive self-care products and resulting growth in purchases of non-prescription medicines. Blackett and Harrison (2001) as well as DeLorme et al. (2010) claim the OTC market being in rise of becoming an increasingly interesting, attractive, and growing area. Though the OTC market at present enjoys a considerably lower growth rate than prescription-only-medicine market, the arising consumer behavior of self-medication by the help of the Internet has had a positive impact on the OTC market (ibid). Namely, consumers are looking for easing their pains and other symptoms by using OTC products for self-diagnosed diseases (Ashman et al., 2007), after searching on the Internet a cause for their symptoms. In fact, Blackett and Harrison (2001) claim that over 90 percent of consumers in the US are in favor of switching more brands to OTC.

The OTC market also has the ability to help the pharmaceutical companies with patent expires and increased generic competition by offering a new, consumer, and brand-based market. What is more, since with OTC brands, advertising and other visual marketing is much less restricted, the market presents an important opportunity also in terms of branding. Despite, there are only relatively few and safe OTC products that have enjoyed companies' focus on their branding. (Blackett & Harrison, 2001; Lyon, 2001; Moss & Schuiling, 2004; Griffiths,

2007; Kvesic, 2008). In terms of strengths of OTC brands, there are still quite few strong brands especially outside the US. This has resulted in as Blackett and Harrison (2001) express it: “There is no pharmaceutical equivalent to coke, ‘the number one cola’ for decades.”

Blackett and Harrison (2001) claim that the OTC market functions much the same as other retail markets - that is, in the US. Though the OTC pharmaceutical products are less restricted and more broadly sold than prescription-requiring medicines, they are frequently still very regulated compared to other consumer goods, especially in Finland. For example, all of Orion’s products are only sold in pharmacies and in pharmacy web stores, which according to Lyon (2001), largely affects reachability and vision for consumers. This, so to speak, restricts the consumer purchase behavior, as there is only one, rather regulated purchasing environment the consumer may operate in. Moreover, pharmacies are specialty stores, where the pharmacist may affect the consumer purchase decision to a great extent.

Griffiths (2007) defines that for many companies, focusing on OTC products is an approach of building sales and developing new business value, which has resulted in some companies to switch from POM to OTC brands. This has been especially common in the US and is predicted to grow because of the Internet (Blackett & Harrison, 2001). The switching products need to be developed for non-serious and easy-to-self-diagnose diseases, contain non-addictive ingredients, and carry a wide safety margin to prevent overdose. It is also necessary that the brand name is transferable from POM to OTC, an ideal being transferring a trademark, which helps to protect the brand from a legal point of view. This will aid the new OTC brand to gain existing customers, brand value, and reputation of the old POM product. However, if a prescription-only-medicine and OTC brand are sold simultaneously, the consumers tend to favor the POM brand due to the state funding, which will result in an underdeveloped OTC brand and market. (Lyon, 2001) In this case, advertising of the OTC brand will also have an indirect effect on the POM brand (Eggleston, 2003). Consequently, switching from POM to OTC also benefits governments as the funding costs diminish.

Sanyal and Datta (2011) researched the effect of the country of origin in the category of generic drugs. In particular, as Orion is the market leader in Finland and is one of the few Finnish pharmaceutical companies, it could be thought that the country of origin has a major value in the minds of Orion’s consumers as well. This was actually validated in Kauppinen-Räsänen et al.’s (2012) study, which investigated the importance of the country of origin in



the OTC market of Finland, and found it to be one of the most important attributes. Sanyal and Datta (2011) also discovered that the country of origin has an impact on consumer's total perceptions of the brand, and a great, positive influence on brand equity. What is more, Usunier and Lee (2000) explored that the less the consumer is familiar with the brand, the more the country of origin influences their perception of the brand, possibly leading to a buying decision. Sanyal and Datta (2011), further on, discovered that limited time and product knowledge, typically qualities of a "novice" consumer, were also identified as increasing the power of the country of origin. They also verified higher involvement products to be more susceptible to the concept of the country of origin. As an advice, the authors encouraged brand managers to highlight the country of origin in order to enhance brand recognition.

### **3 CORPORATE BRAND DOMINANCE AND CONSUMER RESPONSE**

Following the literature review on branding, this chapter introduces corporate brands and varying strategies on how to apply them to the product level. The discussion will still maintain a broader course and focus on the corporation. Dual-branding strategies will be explained to provide understanding for the synergy between the corporate brand and the extension, the product brand. Consumers will be the focus in the final section, where it is discussed how the individuals experience the influence of the corporate brand.

#### **3.1 Corporate brand**

Due to the consumers becoming even more and more educated and capable, it is not only product brands that draw their interest. Moreover, consumers are seeking for information about the company that manufactures the product, in which case the corporate aspects such as corporate responsibility, employee working conditions, and community involvement gain attention (Shamma & Hassan, 2011). As written in the previous chapter, consumers are no longer solely looking for functional benefits of the products, but stress the importance of the emotional values behind them, which is where corporate branding steps in (de Chernatony, 2002). Namely, Ind (1998) explains that the corporate brand is not only the image or visual aspects of the corporation, but the core values that define the corporation. This results in that corporate branding includes more than dimensions simply related to products, such as stakeholder relations and corporate responsibility matters.

According to Roberts and Dowling (2002), corporate reputation affects not only the value of the company, but can act as a differentiator when compared to other companies. A positive link to financial performance is also found with good corporate reputation (ibid), and Goldsmith et al. (2000) even state that corporate credibility, defined as the company's reputation for honesty and expertise, is regarded to affect consumer-brand attitudes along with consumer responses towards advertising. Moreover, Hall (1993) claims that the corporate brand provides unique value to the company because it is difficult to imitate and if attempted, it would require an extensive time.

Following, Shamma and Hassan (2011) draw a conclusion that a strong corporate brand holds an important strategic place in the company. It enables the company to attract new employees and partners through unique associations attached to the corporate brand, called corporate brand equity. According to Shamma and Hassan, the recent studies of corporate branding have clarified that companies should no longer only concentrate in harvesting a narrow customer group as the only strategic relationship, but to understand the role of other stakeholders as well. This is due to positive corporate associations leading to positive word-of-mouth communications, which consequently could bring more customers and improve the corporate image. Corporate brands, therefore, are no longer seen as apart from consumers.

When compared to product brands, it is evident that the corporate brand usually has a much more varying target group and therefore requires varying management (de Chernatony, 2001). Berens et al. (2005) add that product brands in general do not evoke same kinds of associations as corporate brands do; for example, corporate social responsibility and corporate ability associations. To consumers these values are, however, difficult to communicate. For example, an advertisement in the newspaper about a company building a school in a developed country could result in negative consumer responses and even hatred towards the brand, though the intention was to communicate corporate brand values. Berens et al. (2005) further explain that corporate associations are evoked by multiple sources, which results more confidently held impression compared to what is drawn from individual products.

When considering pharmaceutical brands, Moss and Schuiling (2004) state that building and maintaining a strong corporate brand can result in clear competitive advantage as it also helps to link the products to the brand and differentiate both the company and its products. However, according to Moss and Schuiling, pharmaceutical corporate brands are still very weak when compared to other consumer brands, and exceeding in this area could differentiate the company from others. In addition, building a strong corporate brand may help developing more powerful brand portfolios as well as transfer the corporate brand associations to the product level, called leveraging the corporate brand (Uggla, 2006). Moss and Schuiling (2004), nevertheless, explain that this has not been the reality in the pharmaceutical companies, where it has been a struggle to even connect brand names to the company name, an efficient tool of corporate brand leveraging.

### **3.1.1 Corporate brand dominance**

The amount to which the corporate brand is visibly utilized in product marketing is called corporate brand dominance (Berens et al., 2005). Laforet (2011) explains that a considerable amount of the branding literature has found the corporate brand positively affecting a product brand. While some studies (e.g. Aaker, 1991) proved that corporate brands affect consumers in an approach varying from single product brands, Souiden et al. (2006) discovered that corporate brands directly and positively affect consumer's views on products as well as opinions on corporate image and reputation. Furthermore, Saunders and Fu (1997) established the value-adding side of corporate brands to products.

Laforet (2011) identifies cost effectiveness, improved product positioning, and segmentation as benefits of utilizing corporate or single brand in marketing. However, she also defines that a recent trend has been returning to using multiple product brands instead of a single brand due to not being able to utilize the synergies between corporate and product brands. Mastering these types of extensions is not an effortless task. Corporate branding can at worst cause negative associations or lead to dilution of the brand (Leong, 1997), which is why it should be carefully thought of in which products it is used. This has been the situation with Nestlé, after utilizing the corporate name in nearly all products' marketing has led to the corporate brand becoming somewhat blurry (Saunders & Fu, 1997).

The consumer involvement as well as the product type play an important role in terms of how the corporate brand strategy ought to be exercised. Silayoi and Speece (2004) explain that with low-involvement categories, utilizing the corporate branding in visual product marketing does matter as much as the packaging and colors do. In addition, they recognized that not all corporate brands have the same impact on product brands. Namely, the more the corporate brand advertises the more value it adds to the product. Laforet (2011) concludes that if the company is less known, its corporate brand adds less value to the consumer and therefore would unlikely affect their purchase decision. Here, according to Nelson (2002), it would thus be wiser to utilize the product brand in marketing. Yet, as Fournier (1998) claims, products should not be labeled as only attracting consumers of specific involvement type, but each consumer regarded individually.

### 3.1.2 Corporate brand dominance strategies

According to Ugglå (2006), product brands may be mere extensions of the corporate identity and its values, for example, McDonald's, or the company to revolve around various single product brands. Laforet and Saunders (1994) explain this by introducing three simplified strategies to structure corporate brand identities and exercise brand synergies of corporate and product brands. Firstly, there is *Monolithic* strategy, where the company uses only one name and visual style in marketing, which produces the corporate identity the same as the individual brand to the consumer. This would be the case with a luxury consumer goods brand, for example, Louis Vuitton. On the other hand, the company may exercise an *Endorsed* strategy, where the corporate identity is maintained behind multiple products that have their own visual look and name. Endorsed strategy generally indicates using a "dual brand name", which includes the product's name as well as the company. An example of this could be Vaasan Ruispalat or Fazerin Sininen, where the corporate brand is mentioned with the product. This seems to be a common method among well-known, FMCG brands, especially in the food industry.

Products may also have their completely own brand identities and names, which contain hardly any link to the corporation. This approach, called *Branded Identities*, is best seen in Procter & Gamble's and Unilever's strategies, where the products have their own, strong brands (Laforet & Saunders, 1994). Only for a while have these companies mentioned the corporate brand in product marketing as well, which could indicate that there is a willingness to transfer from branded identities to an endorsed strategy. Moreover, GlaxoSmithKline has shown a move from an endorsed to a mono brand strategy, implying that the benefits of utilizing a monolithic strategy is also comprehended by a pharmaceutical company. With monolithic strategy, corporate brand dominance (CBD) is naturally high, whereas with endorsed or branded identities strategies it is diminished.

Berens et al. (2005) also investigated the fit between associations caused by the brand and the associations caused by the product, and their moderating effect on corporate brand dominance. According to them, consumers utilize brand images as predictors of product quality. Namely, when the brand image matches the product, consumers tend to think that their prior knowledge on the brand predicts the product quality as well. Berens et al. even discovered that the corporate brand strategy influences consumer product attitudes and corporate associa-

tions. According to their study, an endorsed strategy should be maintained when products are high-involvement type. Consequently, a monolithic strategy ought to be exercised when certain corporate associations are to be leveraged to the product, especially when the fit between the product and corporate brand is proper and the product is perceived as low-involvement type. This type of division, on the other hand, struggles to agree with Fournier's (1998) idea of involvement not being the way to categorize consumer-brand relationships.

## **3.2 Dual branding strategies**

Schuiling and Moss (2004) discuss two methods of restructuring brands and supporting corporate branding: co-branding and brand extensions, the latter which also includes line extensions. By utilizing these dual-branding strategies, the company could leverage its corporate brand to the product level as well (Uggla, 2006).

### **3.2.1 Co-branding**

Moss and Schuiling (2004) define co-branding as visible alliances of two known brand names, developed to transfer their associations, awareness, technical capabilities, brand image, and target market to a new product. The new brand may be created to satisfy completely new consumer needs, but it will also aid the old brands to gain new customers, distribution partners, and enhance the brand image in addition to even sharing costs of marketing and product development. At very simplest, co-branding may only happen in shared R&D, which has been the tradition in the pharmaceutical industry. In addition, it could take the form of co-promotion, again a popular method of pharmaceutical companies. This signifies that two separate companies act together to promote the same brand name with the same alloy and for the same target market. It generally occurs when a company owns a specific compound, but allows another company to sell and market it, sharing the profits. However, due to the weak corporate brands and resulting positioning, the pharmaceutical industry has had limited luck with successful co-branding. (Schuiling & Moss, 2004)

Jevons et al. (2005) outline co-branding as management's technique of developing customer associations between brands, which Grossman (1997) points out to be especially effective in

attaching new brands to existing ones in order to gain the positive associations and images of the old brands. Though this, usually, is thought of as a positive process and a benefitting one, it may also lead to negative outcomes; for example, if the brands contain varying involvement natures (Buchanan et al., 1999). Jevons et al. (2005) provide an example of a retailer utilizing high-equity brand to lure customers and at the same time create profit for low-involvement brands. This could lead to unwanted brand associations for the high-involvement brand in the eyes of the brand owner, since the brand is thus associated with the images of the low-involvement products. What is more, Perepelkin and Di Zhang (2011) state that consumers of pharmacies are generally highly involved and contain knowledge of the products. Nevertheless, according to Jevons et al. (2005), brand associations may also lead to customer confusion and consequently lower the brand value. Therefore, brand communications need to be in line with wanted brand associations.

On the other hand, Washburn et al. (2000) argue for co-branding leading to increased brand equity after forming a unique and differing product, despite there were varying involvement categories. Based on this, Jevons et al. (2005) conclude that co-branding should work if the resulting associations exceed ones that would have been created by unassociated brands. Rao et al. (1999) add that especially valuable benefit would be gained in an alliance where a brand's quality is unobservable. This could easily be applied to Orion's self-care products, since, for example, a gastrointestinal drug's quality is unobservable to the consumer until the product is purchased, swallowed, and its effect experienced. Utilizing Orion's brand in newer products could, therefore, help creating positive brand associations and boost sales. Also, if this theory was applied to corporate and product brands, it could either strengthen the brands or lead to inappropriate associations.

### **3.2.2 Brand extensions**

As explained in the first theory chapter, the brand owner, a manager of the company, continuously seeks for procedures to strengthen the relationship and narrow down the gap between customers and brands. An approach to this and a method of modifying the brand meanings in the eyes of consumers is to develop brand extensions. Brand extensions are methods of transferring associations of strong, existing brands to new brands. This can be operationalized by simply using the existing brand's name or by developing a whole new marketing strategy.

When utilizing the brand name, the new product is associated with the old one and therefore acts as a cue for the consumer in representing, for example, the quality of the parent brand. Preferably, these associations should be positive and facilitate marketing of the new product. (Schuiling & Moss, 2004; Jevons et al., 2005)

Laforet (2011) writes that while brand extensions have been researched to a vast extent, the studies have usually focused on consumer associations and perceptions by concentrating on a parent brand, typically the corporate brand, and the extension. According to her, a brand name is a valuable asset for the company and has a large impact on the consumer buying decision. A brand name has the power of associating a product or a service to the company, and these associations may contain physical, symbolic, or emotional meanings to the customer. Consequently, utilizing a brand name in packaging or communications may result in various associations towards the brand though the product was unrelated or unused. Ugglä (2006) defined this as leveraging the corporate brand.

In terms of extending to unrelated product categories, consumers tend to prefer narrow brands. Broader brands, on the contrary, work better than narrow brands when extended into an unrelated category. (Laforet, 2011) Hem (2003) suggests that the brand extension should fall into the original brand's category to gain benefits. According to Laforet (2011), successfulness of an unrelated brand extension depends on the customer's response towards the extension and effect on buying decision. Utilizing a corporate brand extension indicates using the corporate brand for a new product or a service (Keller & Aaker, 1998). The best example of this type of extension would be S-ryhmä's own brand, Rainbow, which is sold in all of the chain's stores.

In the pharmaceutical industry, the brand extension strategy can be executed by marketing the same product to a variety of diseases with the same brand name or a new one. This can also occur in a more extensive approach, where the brand is researched, developed, and launched to a number of diseases at the same time, in the same market area. In terms of line extensions, pharmaceutical companies may develop new dosage forms; for example, different oral solutions or intravenous forms to support sundry end users' needs. In addition, the brand may be extended by amending the tablet form, for example, to reduced size, content of the active ingredient, or to a completely different form such as melt tablets. However, utilizing line extensions is still not well enough understood in the pharmaceutical industry. (Schuiling & Moss,



2004) Another way of executing an extension of a medical brand is utilizing the old NME to a new purpose or combining it with another NME, which can facilitate reaching new markets and maximize the usage and lifecycle of already invented NMEs. This, moreover, benefits the consumer as well, since drug efficacy is improved, safety profile enhanced, and novel usage patterns found. (Dubey & Dubey, 2009)

Brand extensions do not come without a risk; customer confusion may be created by inappropriate brand messages, even leading to reduced brand value. Various studies have investigated this problem, and while Keller and Aaker (1992) explored that consumer attitudes of the parent brand do not change after brand extensions, Sheinin (2000) claimed that they do. Moreover, Martinez and de Chernatony (2004) discovered that the original brand image is diluted by the extension. For pharmaceutical companies, brand extensions carry a risk of confusion to the consumers, which may result in misuse of medicines. In Finland, there has been discussion on the drug packages resembling each other, which has confused some consumers and had the potential to lead to consumption of wrong medicine. Schuiling and Moss (2004) define the possible confusion as one of the reasons there are so few brand extensions in the pharmaceutical sector. In addition, they find pharmacists as one the key influencers restricting brand extensions. Namely, pharmacists tend to fear that name extensions would result in distribution mistakes, which, for example, to allergic consumers could be fatal. This along with other reasons has led to the industry not being able to successfully execute brand extensions, and there have been only few success stories in the self-care sector. (ibid) According to Dubey and Dubey (2009), however, brand extensions carry the opportunity to benefit both the company and the patient by creating new markets and extending product lifecycles, and also answering to new consumer needs.

### **3.3 Corporate brand associations and consumer response**

Laforet (2011) explains that in packages, a corporate name can add value if the consumers are familiar with it and it creates something unique. Though she specifically investigated brand names, her findings were also extended to visual marketing and in this part match with Berens et al.'s (2005) study. According to Laforet, if the product is a public necessity or a luxury good, such as a high fashion brand purse, the corporate, core brand values benefit the product they are extended into, leading to positive consumer associations and even to a purchase deci-

sion. This will also happen when a brand name is extended into a category that is similar to the established brand, which is in line with Berens et al.'s (2005) research. Namely, the product should be fit with the core brand in terms of, for example, visual image, value, personality, and image in addition to core brand values. According to Laforet (ibid), when the brands are in line, a positive brand symbiosis emerges.

On the other hand, if the corporate brand and product brand share no fit or common attributes, utilizing the corporate brand's name or visual marketing will not benefit the extension and purchase decision will not be gained. An interesting finding from Laforet (2011), however, is that when the core brand is not established, it can still benefit the extended product if there is a fit between them, and advertising may be utilized to evoke source credibility and to enhance positive usage experiences. Further, communicating the core brand values and emphasizing the key brand identity enhances positive consumer associations, possibly leading to a purchase decision. With an extended, low-involvement product a purchase is unlikely to result if there is high switching in the market.

Negative consumer associations may also result from utilizing corporate brands in extensions. As explained above, the fit between the corporate and extended brand is a key attribute, and if there is no such, negative symbiotic branding will result that, further on, can cause negative brand associations for both the product brand and the corporate brand. Corporate image could also suffer and become diluted in the minds of consumers. (Laforet, 2011) In this case, Laforet and Saunders (1994) recommend focusing on product brands rather than trying to force usage of corporate brand.

Brand involvement guides choosing an appropriate branding strategy, since associations of the parent brand descend to product brands. Laforet (2011) suggests that it is more difficult to differentiate corporate branded products than those with their own brand, and that consumers can identify products that do not carry the corporate name in them. According to her, corporate branding may work if the consumers are genuinely interested in the company and associate the company with a strong identity. In this part her study was in contradict with Berens et al.'s (2005) study by claiming that the corporate name does not add value to the product or affect the purchase decision. Therefore, regarding this thesis a question arises: How does the corporate brand name affect consumer trust, when used in product marketing? This will be examined in the discussion chapter.

From the academic literature, a simplistic conclusion could be drawn that the closer the brand is to the company's core business, the more value utilizing the corporate brand in product marketing will produce. If this was applied to Orion, it would be suggested that with Favora and Sebamed, cosmetics brands of Orion, corporate brand or name would not be utilized in their marketing, since these brands are the furthest away from Orion's main business of manufacturing pharmaceutical products. Also, this could be the case with nutritional supplements, because consumers might not want to think that they are consuming "medicine" regarding these products. On the other hand, since all of Orion's products are only sold in pharmacies, including cosmetics products and supplements, the consumers might choose these products over others because of the point of sale environment.

## **4 CONSUMER-BRAND RELATIONSHIPS: BUILDING BRAND ATTACHMENT**

To investigate what kind of effect corporate and product brands have on consumers of OTC products, it is necessary to explore consumer behavior and building emotional attachment through branding. As de Chernatony (2002) states, it is corporate branding that best represents emotional values of the company. In this chapter, I will present the concept of emotional branding, including consumer's ideal and real selves as well as brand authenticity, and analyze what constructs consumer loyalty, a main building block being consumer trust. In addition, I will discuss the consumer-brand relationships and what types of emotions construct them. Finally, I will introduce the consumer trust-based commitment process.

### **4.1 Appealing to consumer's emotions through branding**

Emotional branding is defined as the attachment of emotions and a bond to a brand, and is found to be one the key branding topics of today (Malär et al., 2011). Consumers are no longer seen as passive victims of marketing that only seek for functional benefits of the products, but active relationship-forming and experience-searching partners (e.g. Fournier, 1998; Valette-Florence & Valette-Florence, 2011). Rossiter and Bellman (2012) introduce five widely utilized and known emotions to be attached to brands: bonding, resonance, companionship, love, and trust – the latter which Blackett and Harrison (2001) as well as Schuiling and Moss (2004) defined a value especially important in the pharmaceutical market. These are also emotions Fournier (1998) finds are related to the strongest brand consumer relationships. Thomson et al. (2005) add that brands may use emotions of passion, connection, and affection. To consumers, all of these emotions are strong, particular, and usage-specific-type, and when properly attached to a brand they bring profitable, loyal customers who do not require promotion of the brand or a price competition, the traditional challenge in the pharmaceutical industry. Thomson et al. even claim that emotional branding may be used as a strategy of differentiating a brand from others, because in reality consumers become attached to only a few brands.

## 4.2 Brand authenticity – from the ideal self to the real self

Creating strong emotional brand attachment towards consumers can increase consumer loyalty, brand defense, and therefore lead to increased profits (Park et al., 2010). Malär et al. (2011) discuss appealing to various types of self-concepts of the consumer and its effect on consumer emotional attachment. According to them, when communicating emotional brand values, the companies should try appealing to the consumer's self-concept, which has two forms: the ideal self and the actual self. The real self is literally the mirror image of what the consumer is truly like, whereas the ideal self represents what the consumer would like to be and is thus shaped by dreams, imaginations, and aspirations. Consequently, the fit between the consumer's self and the brand's image is defined as self-congruence and it has the power of affecting consumer responses towards a brand. Namely, the closer the brand personality is to the consumer's self-concept, the closer the emotional bond between the consumer and the brand is. Despite the importance of addressing the consumer's self-concept through branding, it has been much underestimated before. (Malär et al., 2011)

Through the actual self-congruence the consumer experiences fit between the brand personality and the actual self (Aaker, 1999), meaning "the brand personality matches the real me", whereas the ideal self-congruence evokes in the consumer thoughts of "I would like to become the image of this brand personality" (Malär et al., 2011). When the brand is congruent with the actual self, the consumer experiences positive reinforcement to the self as a result of self-verification. This, on the other hand, leads to positive feelings towards the brand, and further, emotional attachment. Self-verification is suggested to occur more with higher involvement requiring products, and thus the actual self-congruence is preferred more by these types of consumers, Malär et al. analyze.

Malär et al. (2011) present an example of the Dove advertising campaign, which successfully appealed to the female consumers by portraying normal weighing women. According to the authors, this could be a sign of the consumers looking for authenticity and reality rather than something they just wish to be. Controversially, this has been commonly neglected by the marketers, as they have focused on the ideal self too much, for example, the mascara advertisements of L'Oréal that include false lashes as well as top models, both far from the reality of an average consumer. This can result in negative consumer feelings, if the consumer expe-

periences the brand being too distant to him or her self-concept. However, these types of brands also attract certain consumers because of the aspiration of being something that they are not.

Moreover, when an emotional attachment of consumers is preferred it is essential that the consumer self-concept be involved in the process along with self-congruence. Malär et al. (2011) explain that both the ideal and actual self-congruencies affect consumer emotional brand attachment. However, the actual self-congruence led to higher emotional brand attachment. In addition, the authors state that consumers consume certain products not because of simple needs, but because through consuming brands of specific personalities consumers express themselves and this way seek comfort in using brands that fit their self-concept.

An authentic brand relationship resembles much the above-discussed actual self, as it refers to the consumer operating the way that mirrors the consumer's true self, the actual self. When the consumer develops an authentic relationship with a brand, the consumer exposes his or her true self, which creates genuine, strong feelings and a bond to the brand, in addition to high level of intimacy and trust (Harter, 2002). This, consequently, develops consumer loyalty and the consumer becomes emotionally attached to the brand. According to Malär et al. (2011), brand authenticity is especially important in building emotional brand attachment. The brand, namely, should not act too unreachable and distant to consumers or otherwise a bond with feelings is difficult to form. Brand authenticity seems especially important when consumers hold high involvement towards the brand.

### **4.3 Brand relationships**

Fournier (1998) discusses the diverging relationship types in her widely utilized paper among relationship marketing literature. Though she notes consumer loyalty to be important, it is only one form of a brand relationship in which the marketer should not limit themselves due to the existence of also other, valuable relationship types. Brand relationships by nature may be functional and utilitarian, or psychological and emotional. At best, the relationships help the consumer to fulfill his or herself, whether it is the actual or the real self, leading to intense relationships with brands. Through brand relationships, consumers may thus mirror their identities and new personal attributes such as independence after a divorce or harvest a memory after a loss.

Fournier (1998) describes six brand qualities to characterize a strong relationship. The first one, *Love and Passion*, is the deepest and most lasting one of all and difficult for the consumers to express, which Papista and Dimitriadis (2012) also discovered. Some studies (Bengtsson, 2003) even claim that consumers do not experience love towards brands, but it is more of a feeling of fondness that they do. *Self-connection*, on the other hand, refers to what was mentioned before: the brand expressing the consumer's identity. Self-connection may also address the past and the anticipated self, much like with the real and aspired self. Traces between the personal image of a consumer and the brand's image were also validated in Papista and Dimitriadis's (2012) study. It could be suggested that through self-connection, the consumers express their life values in the relationships with brands.

*Interdependence*, the third quality, is present in routine-oriented brand usage and reflects consumption rituals. An example of interdependence would be a consumer's tendency to consume the vitamin product during the breakfast in the morning. Following, *Commitment* is a result of holding on to a brand and thus an antecedent of consumer loyalty, Fournier summarizes. The second final brand relationship attribute refers to the brand exceeding its competitors and indicating superior performance in the minds of consumers. In this way, the consumers develop an *Intimate* relationship with the brand that is highly based on ongoing satisfaction, creating the brand irreplaceable. The final relationship quality is about the brand being a relationship partner to the consumer. How does the brand fulfill its partnership role to the consumer, is the question. Here such issues as brand dependability and trust become important and whether the consumer regards the brand placing the consumer's needs and wants first. Fournier defines this type of *Brand Relationship Quality* much resemble consumer loyalty.

Fournier (1998) states that the consumer-brand relationship should not only be thought from the functional relationship attributes point of view or based on consumer personal traits. Rather, the relationships are constructed on goal compatibility and the mutual history the consumer and the brand share. Malär et al. (2011), consequently, identified as one of the key trends individual branding due to the increased desire for the brands to resemble the consumer's real self. Fournier (1998) explains this by defining that relationships with brands are unique and vary according to the consumer, and therefore can only be understood through first studying the life-world of the consumer. Brands for consumers are partners of their daily lives and as such may contain unique memories that in time have evolved to strong and emo-

tional relationships. Despite, Papista and Dimitriadis (2012) explain that strong relationships may exist even if the brand was not used daily or even frequently, and the consumers still be committed to the brand.

#### **4.4 Consumer-brand relationship form typology**

To proceed to the actual definition of the relationship between consumers and brands, Fournier (1998) introduces fifteen particular relationships that contain varying labels related to friendships, marriages, and affairs. After all, brand relationships do not much differ from relationships between humans, finds Fournier, though Bengtsson (2003) claimed that a relationship with a brand could not contain feelings of love. These relationship types vary according to their need of maintenance, effect on personality development, and also the actual relationship's development cycle.

There are three relationship types that though are intended for long-term purposes, are not that intimate to the consumer. Firstly, *Arranged Marriages* are frequently derived from a third person's influence and thus non-voluntary. These brand relationships aim at long-term, though to a consumer they do not contain much emotional attachment. *Casual Buddies*, on the other hand, is a relationship type that is provoked by situation, has low levels of intimacy, and is not intended for reciprocation. *Marriage of Convenience*, finally, contains commitment though it is affected by environmental influences and is more based on accepting a brand to replace another.

The most personal and ego-addressing relationships for consumers are ones that are enduring, contain high levels of trust and even fondness, in addition to providing constant positive rewards. The first one, *Committed Partnership*, is characterized by voluntariness and includes strong feelings of love, trust, and intimacy. *Best Friendships* are relationships where the consumers expose their true selves to the brands and share common personal interests with brands. Then there are *Compartmentalized Friendships* that are more situational than the previous two, and include lower levels of intimacy. Despite, they have higher level of interdependence and the consumer develops as well as disposes these relationships easily.



*Avoidance-driven Relationship / Rebounds* well portray negative-driven relationships as they are only developed to abandon another brand. *Enmities* are also negative by nature, as may be parts of *Dependent* relationships. Namely, dependencies are based on obsession and not being in the relationship creates uncomfortable feelings for the consumer. This would be a common relationship with addiction to something, and in the OTC world this could represent almost anything from an addictive use of a painkiller brand to a specific lotion. *Secret Affairs* resemble this to certain extent as these would be relationships that the consumer would keep away from exposure to others and contain high levels of risk as well as privacy. An OTC product intended to relieve an embarrassing symptom would be an example. Finally, there are *Enslavements* that are also negative and caused by the environment. These are non-voluntary and occur because the consumer has no other choice.

The final four relationship types do not follow the same logic as the previous ones in belonging to a certain form. *Flings*, literally, are short-term relationships that come and go, though they provide the consumer high levels of emotional reward. It could be imagined that a very impulsive consumer maintains many flings with brands and thus continuously seeks for new experiments though there existed satisfaction with brands. This behavior, namely, results from the drive to experience. *Kinships* are non-voluntary and inherited from a relative or a family member. Fournier describes an example to be the consumer's inheritance of a tea brand from her mother. *Courtships* are relationships aiming for commitment, of which an example would be a product in trial use. Lastly, there are *Childhood Friendships*, which remind the consumer of their past self and provide security though usage was infrequent.

#### **4.5 Consumer loyalty**

Following from the consumer-brand relationship typology, the most preferred consumer-brand type in general thinking is thought to be consumer loyalty, which Fournier (1998) defined as *Brand Relationship Quality*. Consumer loyalty is in turn affected by trust and commitment towards a brand, as discussed before, which Delgado-Ballester and Munuera-Aleman (2001) also evaluate in their study. As Shocker et al. (1994) find, consumer loyalty is especially important in markets where there is high competition and reduced product differentiation along with rising unpredictability, all characteristics of the pharmaceutical market (e.g. Moss & Schuiling, 2004). This is because building consumer loyalty has many benefits, such

as increasing profits through less price sensitive consumer base and building an entry barrier to competitors. Fournier (1998), on the contrary, defines loyalty to be more than its operational form of consequent purchases or increased amount of spending.

#### **4.5.1 Consumer trust and commitment**

According to Delgado-Ballester and Munuera-Aleman (2001), brand loyalty is formed by a relationship between the customer and the brand that includes customer trust and commitment. The authors further define trust as “a feeling of security held by the consumer that the brand will meet his/her consumption expectations”, and it is formed from past experiences and interactions (Rempel et al., 1985). The past experiences may be indirect, thus based on advertising, brand reputation or word-of-mouth; or direct, resulting from actual consumption or trial. However, for trust to occur, the consumer must have overall satisfaction with a brand, which is based on the consumer thinking that the brand holds important the consumer’s welfare and interests (Hess & Story, 2005; Papista & Dimitriadis, 2012) – in Fournier’s (1998) paper, called *Intimacy*. If this occurs, the consumer can rely on the brand satisfying in the future as well, despite this had not been the reality before. If consumer trust develops, it leads to a commitment towards the brand, which on the other hand increases the price tolerance for the product. Simply written, if the consumer trusts a brand, he or she will choose it over others because of the emotional attachment – and also pay extra. Trust is thus defined as one of the corner stones of building a consumer-brand relationship. (Hess & Story, 2005)

Delgado-Ballester and Munuera-Aleman (2001) identify the moderating variable of trust and commitment as well as trust and satisfaction to be consumer involvement. Moreover, when the consumer regards information of the product more relevant and is more interested in the purchase, trust issues naturally gain importance. This is especially the situation with high-risk containing products and products that carry uncertainty (Selnes, 1998), for example, pharmaceutical products, and also when there is not enough information provided. Here, the brand trust also plays a central role since consumers want to avert risk-taking and therefore seek for trustworthy brands to build relationships with.

In building of consumer trust - that has potential to lead to high and profitable consumer loyalty - the company must remember that brand trust is an emotion gained with difficulty, but

one lost easily. Therefore, authenticity is a key issue and also transparency – as Malär et al. (2011) stressed. Information and honest communication with the consumer on brand and its values along with acting non-opportunistically could lead to enhanced trust, or at least maintaining it (Hess & Story, 2005). In addition, it cannot be stressed enough that the trust is built on genuine, authentic promises and attributes for the relationship to be long-term and trust to become commitment. For example, if the brand defines its key values as delivering high quality, corporate social responsibility, and care, these must be shown in its operations as well or the consumers' trust will be lost when the truth is revealed.



*Chart 1: Consumer trust formation based on Delgado-Ballester and Munuera-Aleman's (2001) analysis*

#### **4.5.2 Brand trust's influence on brand extension acceptance**

Valette-Florence and Valette-Florence (2011) define trust as one of the key components of a consumer-brand relationship. Moreover, brand trust is associated with brand equity, brand value, and brand loyalty (Reast, 2005). Reast also explains that investing in harvesting consumer-brand relationships and consumer trust allows the company to leverage the brand to new categories; in other words, exercise brand extensions. Based on Selnes's (1998) paper, the more risk there is associated in a purchase, the more important trust is with a brand extension. McWilliam (1993) adds here that the better the consumers trust brands that are extended, the more willing they are to try the new extensions. In addition, if there is not much direct knowledge on the new product, consumers may rely on their beliefs of strong brands when considering brand extensions (Hem et al., 2003). Finally, Reast (2003) discovered that the more the brands are trusted, the higher their extensions are rated despite these extensions were unrelated.

When considering trust in brand extension acceptance, Reast (2005) finds two dimensions especially important: brand credibility and brand performance acceptance. Credibility refers to the authenticity of the brand and the brand's ability to deliver what was promised in its communication, including personal interaction, packaging, and advertising. The brand must be sincere and honest in the eyes of consumers, maintain a good reputation, and carry a concern for the consumers – which again was verified in various other studies (e.g. Fournier, 1998; Hess & Story, 2005; Malär et al., 2011). Performance, on the other hand, is defined by how well the brand meets its expectation and satisfies the customers. Simply, how well can the brand be relied on? In a way, this reminds of Fournier's (1998) relationship type of *Interdependence* that denoted to the brand becoming a natural part of the consumer's daily life. Finally, these brand experiences do not necessarily have to be experienced by the consumers themselves. Rather, they might be based on word-of-mouth.

#### **4.6 Trust-based consumer commitment**

Hess and Story (2005) define the components of the chronological chain of consumer trust-based commitment to be satisfaction, trust, personal and functional connections, and commitment. Traditionally, marketers have highly stressed consumer satisfaction as a predictor of purchases and profits. However, according to Hess and Story, satisfaction is only one component of the committed and profitable consumer-brand relationship and alone does not result in trust or commitment. Rather, the trust-based consumer commitment is a complex process, which requires different corner stones as building blocks and has moderators affecting the strength of it. On the other hand, Papista and Dimitriadis (2012) claim that satisfaction should not be undervalued, as it is still a prerequisite of a consumer-brand relationship.

To develop, trust-based commitment requires certain antecedents defined as brand characteristics, consumer characteristics, product service/performance, and firm responsiveness. Though the product quality and consumer trust towards a brand were high, a consumer-brand relationship does not necessarily develop. This is due to consumer, product, and brand characteristics moderating the relationship formation, and with specific product categories, such as with high-risk containing products, relationships form easily. On the other hand, some consumers prefer to seek for better alternatives and new choices and therefore do not commit to

brands. (Papista & Dimitriadis, 2012) Consequently, these consumers would only develop *Fling*-type of relationships with brands (Fournier, 1998).

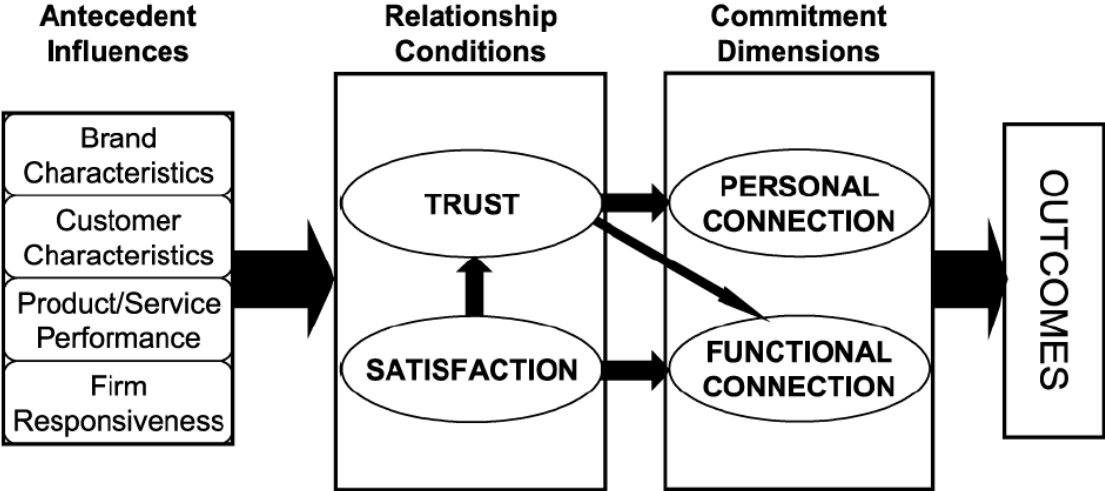
The very first relationship condition required for a trust-based commitment to occur is consumer satisfaction - that is regularly built on transactional qualities and utilitarian components, such as risk reduction, minimized shopping efforts, and efficient information usage. An ongoing satisfaction is formed from consistent, individual, and satisfying transactions that result in expectations of performance and credibility. Ongoing satisfaction, on the other hand, leads to functional connections towards the brand, which are utilitarian by nature and therefore represent the shallow connections consumers have towards the brand. In more specific, they represent the tangible benefits the brand offers to the consumer, for example, the product performance quality. Consumers with functional connections towards brands are more likely to recommend the brands over others, while companies with only disconnected consumers need to partake in the price competition and execute heavy sales promotions. (Hess & Story, 2005)

For consumer trust to occur, however, functional connections and ongoing satisfaction is seldom enough. Instead, the relationship needs to be built on personal connections, which exceed merely utilitarian based benefits. (Hess & Story, 2005) Affiliation, value matching, and association are examples of personal benefits consumers gain from brand relationships (Fournier, 1998). A personally connected brand relationship requires more time to develop, but offers a more flexible, enduring, and even forgiving nature that allows the consumer to trust a brand, which in turn leads to commitment. As a result, these types of consumers have a varying reaction to higher pricing and brand extensions.

It can be summarized that according to Hess and Story's (2005) trust-based consumer commitment process model, satisfaction and trust together lead to lasting consumer-brand relationships; in other words, consumer commitment. This process is influenced by consumer commitment dimensions that are functional and personal by nature, and their relative strengths resolve the nature of the relationships. Though forming relationships and trust with customers requires extensive investments and carries risks, it has the possibility of resulting in higher brand profits. Moreover, it allows a more competitive market position as well as efficient segmentation by identifying the most profitable customers and permits to target market-

ing accordingly. In addition, intense customer relationships are a necessary component of building strong brands.

**Figure 1** Trust-based commitment process model



*Picture 1: Trust-based commitment process model (Hess & Story, 2005)*

## 5 THEORETICAL SYNTHESIS

This thesis followed the order of proceeding from larger theoretical phenomena and entities to narrower and more specific details. It commenced by introducing fundamental concepts of branding, such as brand equity, brand positioning, brand personality, and brand values. In addition, the second chapter discussed the special attributes of the pharmaceutical OTC brands, since they are quite varying from typical consumer products.

After discussing brands in specific, the third chapter introduced corporate branding – what it is and how it can be used in the product level as well. Corporate branding strategies of monolithic, endorsed and brand identities were addressed and further explained what dual-branding strategies, in specific, brand extensions and co-branding are. The aim was to explain why it is suggested to use the corporate brand in some products' marketing more than with others, which was explained by the fit and nature of the product and consumer characteristics. This was all reviewed from the perspective of the pharmaceutical industry, which is found not to have used the corporate brand as an extension to the product brands, or focused on building strong brands (Blackett & Harrison, 2001; Moss & Schuiling, 2004; Schuiling & Moss, 2004).

In the fourth chapter, consumer emotional brand attachment was discussed, including such key concepts as consumer self-concept, self-congruence, and brand authenticity. In addition, consumer-brand relationship typology and relationship quality attributes of strong brand relationships were explored. This all boiled down to analyzing what constructs consumer commitment towards a brand - introducing consumer trust, ongoing satisfaction, functional and emotional connections, and consumer loyalty. As a concluding framework, consumer trust-based commitment process model was portrayed, including all the above-mentioned concepts as corner stones of building trust and resulting commitment. Consumer trust was identified as a vital component with medicines since they contain high risk, which the consumers seek to diminish (Blackett & Harrison, 2001; Moss & Schuiling, 2004).

To summarize the two theories and present their dynamics, I have developed the following graph. It is based on various articles regarding corporate brands, consumer-brand relationships, emotional branding, and also pharmaceutical brands. The purpose is to explain the for-

mation of consumer-brand relationships and trust of corporate and product brands, which will be examined in the empirical part.

My theoretical framework, as I am about to demonstrate, is rather more based on brand consumer relationships than corporate brands. However, I feel that the corporate brand could be a powerful influence behind the relationships so it does hold an important place in the framework. Despite, in the empirical part the stress is more in discovering how consumers experience the brand relationships and what kind of relationships there are, as I defined my research problem to be. I will analyze the corporate brand strategies thus based on my consumer interviews and this will be executed more in detail in the trust and discussion sections.

The following framework consists of three acting agents: corporate brand (Orion), product brands (e.g. Burana, Multivita, Aqualan L), and the consumer. I will investigate the corporate brand product brand relationship from the viewpoint of corporate brand dominance based on Laforet and Saunder's (1994) and Berens et al.'s (2005) studies along with other corporate brand research in minor part. Secondly, product brand consumer relationships will be studied based on Fournier's (1998) consumer-brand relationship typology and relationship quality. I will also research the consumers' emotions towards brands based on Hess and Story's (2005) article of trust-based commitment process and Blackett and Harrison's (2001) definition of trust being a central emotional value of medication. Lastly, I will concentrate on a particular, strong brand relationship by building a case-type examination according to Fournier's (1998) relationship attributes. This well explains the complexity of the subject of the thesis and substantiates the lack of a specific theory.

In particular, I am interested in discovering what kind of consumer-brand relationships there are, how the consumers experience them, and what kind of emotions are included in the relationships. Thus, the interconnections between the brands will be studied based on the consumers' experience. Since this is a qualitative study, the idea is not to derive straightforward, simplistic relationships but to uncover how the relationships are formed and develop in time, regarding consumers as individuals. Finally, my research methods will be very informal and I will keep my role to the minimum in the actual interviews, which is why not all the aspects of the theoretical framework are examined in the empirical part regarding each individual.



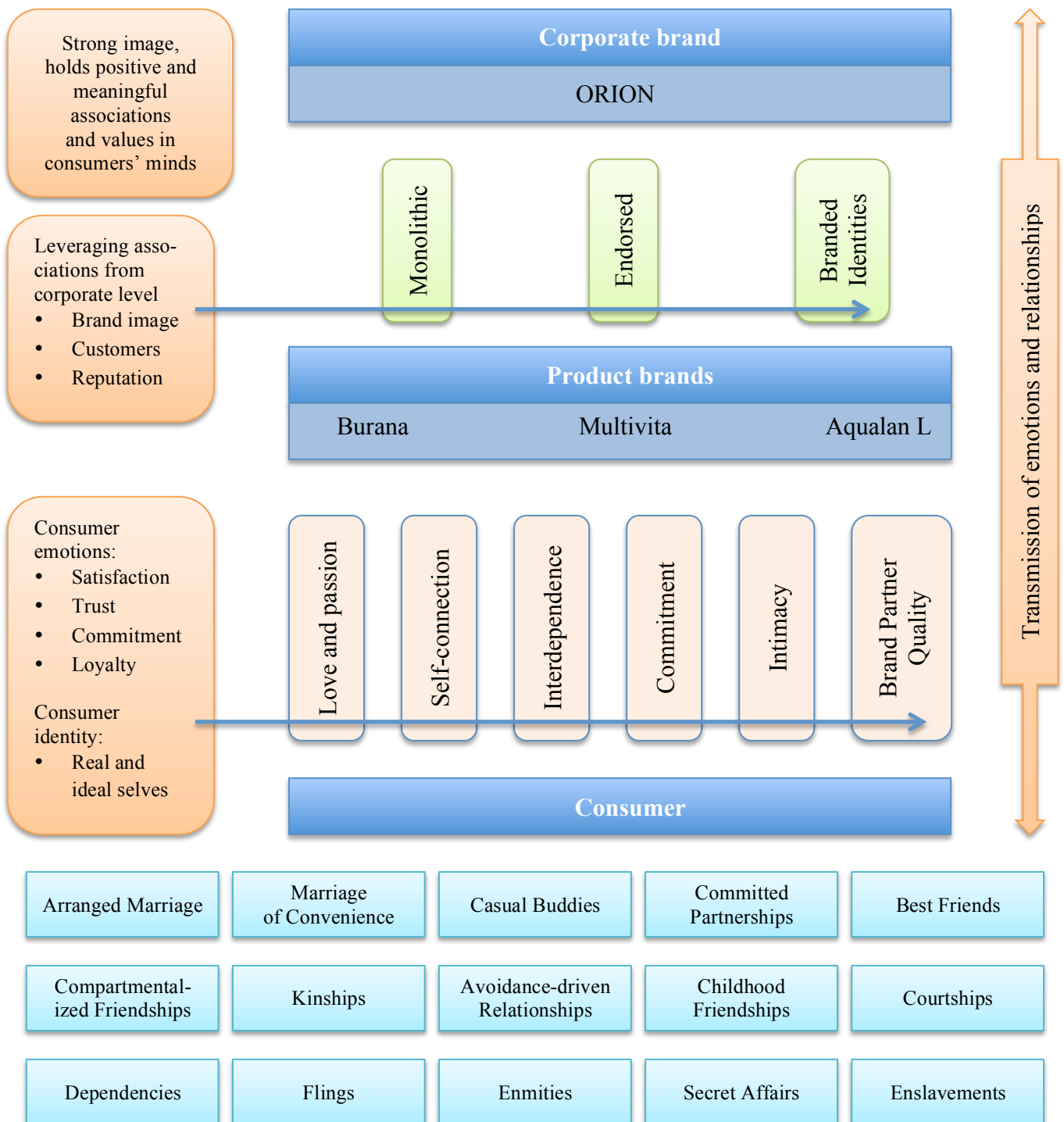


Table 1: Theoretical framework for the empirical part

## 6 METHODOLOGY

This chapter will begin the empirical part by introducing the case company and the methodology used. The best technique for conducting this type of research is defined to be qualitative interviewing and more specifically, existential-phenomenological interviews. The interviews were conducted during two weeks and there were in total seven interviewees, some of which were interviewed twice. The data analysis follows clauses set by existential-phenomenology: the stress being in interpreting the experiences lived by the consumer from their aspect instead of providing objective, theoretical assumptions or comprehensive sample of specific kind.

### 6.1 Case company Orion Oyj

Orion, a Finnish pharmaceutical and diagnostic test manufacturing company was formed in 1917 and has since globally marketed, developed, and sold pharmaceutical products to consumers and medical entities. Orion's product portfolio consists of proprietary products, specialty products, animal health products, and Fermion Oyj's products, which are active pharmaceutical ingredients manufactured for the company's purposes and to be sold outside. In addition, Orion Diagnostics sells diagnostic tests and machinery used for patient treatment and follow-up purposed. The only distribution channel Orion's products are sold in Finland are pharmacies. ([www.orion.fi](http://www.orion.fi))

As outlined in the introduction part, the focus of the thesis will be on Orion's self-care (OTC) pharmaceutical product brands because these alone form a vast part of Orion's product portfolio and provide more insight into branding due to the marketing being much easier than with prescription medicines or other categories (Blackett & Harrison, 2001). Regarding this study, self-care products are defined as products that do not require prescription to purchase and are directed to humans. The definition, therefore, expands the channels to retailing because it is allowed to sell cosmetics products and supplements there and in the future perhaps even milder pharmaceutical products. For Orion, self-care products are positioned in the specialty products category along with generic products and off-patent products.

Selecting a case company provided certain benefits that focusing on multiple medical companies might not have done. Firstly, Orion is probably the best-known pharmaceutical company

among the Finnish consumers. As identified in the theoretical part, the visibility of medical companies to consumers is an ongoing challenge. Asking about experiences related to, for instance, Pfizer would not presumably result in as much variation and rich descriptions as with Orion because consumers are not familiar with the corporation, but only the single product brands. Nevertheless, Orion will only be used when examining the corporate brand, and product brands may be manufactured and marketed by various pharmaceutical companies. This is because multiple times the consumers were not even aware of the corporation behind the product or had interesting relationships with brands of other pharmaceutical companies.

## **6.2 Qualitative research**

The research method of this thesis belongs to qualitative marketing, which offers many advantages regarding this type of research and compared to quantitative methods. Firstly, as the objective of the study is to discover emotions consumers hold towards brands, a survey solely would not be enough to explore how consumers actually feel that McCracken (1988) believes, may be hidden behind the words or discovered in utterance. McCracken also confirms that compared to quantitative research, qualitative methods seek to understand the interrelationships between the analytical categories under studying rather than isolating the categories and explaining the relationship between a narrow set of them. This is especially important in this research since due of the lack of a clear, unified theory, investigating multiple interrelationships among the brand hierarchy is justified.

In addition, qualitative research offers a more dynamic approach because the investigator has the option to influence the research process as it proceeds, by posing various kinds of spontaneous sub-questions or simply listening to the respondents' narratives. The qualitative process, therefore, is considerably less strict than quantitative and also less organized, which generates the approach complex. In addition, McCracken (1988) outlines that the respondents must use more of their own knowledge and thinking than with quantitative research, which commonly has answers prepared to choose of. It could be thought that the qualitative process for the respondent is more intensive and for the investigator provides richer understanding of the consumer, in particular, in what is left unsaid but expressed in non-verbal communication. This was also seen during the interviews when the consumers would stress certain words with their tone to truly emphasize them.

Disadvantages of qualitative research are the limited time the respondents have and their privacy-matters (McCracken, 1988), which was also noticed when preparing for the data collection. In addition, as the consumers are extremely busy and perhaps security concerned when it comes to a taped interview and open-to-public thesis, it is difficult to have respondents sit for many hours and openly discuss their lives, especially their consumption of remedies. However, if trust between the investigator and the respondent is constructed by correct ways, the interview process offers a means for understanding how the consumer encounters the world, which is the aim of a qualitative study (ibid), and also of this research.

### **6.3 Consumer interviews**

Since the research problem is multisided and requires deeper investigations into the consumer's mind, an interview where the investigator has the option to influence the process is best suited as a data collecting method. As Papista and Dimitriadis (2012) define, consumers do not prefer discussing strong emotions with brands similarly as they would perhaps do with humans. Hence, the focus will be more on how they tell the stories and what kind of life-situations, people, and values are involved to enrich the analysis. Finally, since medicines to consumers are a not like foodstuff, but a sensitive subject, there is a need to build a connection and trust before the interviewees will open up and honestly depict feelings. Due to this, interviews were sought to keep personal and relaxed by nature, as well as regarding some participants, second interviews were conducted.

McCracken (1988) advises that the investigator should not use active listening skills when interviewing, but rather techniques that include gestures encouraging the consumer to continue discussion and explore what he or she prefers, not the questions the researcher has developed beforehand. Unstructured and exploratory are the words to describe what qualitative interview process is at its most effective like. Despite the suggested nondirective and somewhat unorganized nature, the investigator should nevertheless exercise certain control over the interview, but the control should be demonstrated in identifying key terms and asking elaborations, not forcing words to the consumer's mouth, explains McCracken. The interviewees should be encouraged to develop conversation and provided with plenty of room to narrate.

## 6.4 Existential-phenomenological interviews

The purpose of the empirical part is to investigate the research problem from an in-depth view and thus utilizing the method of existential-phenomenological interviewing is argued for. Namely, the purpose of this methodology is to provide rich, non-dualistic, and first-person understandings of the respondent's life as they themselves see it, not as the interviewer does (Thompson et al., 1989). The emphasis is on the respondents depicting how they have experienced situations and matters, which is a proper method of investigating brand relationships since brands merely exist in the consumers' minds and experiences. The method was also exercised by Fournier (1998) in her investigation of consumers' relationships with brands. Thompson et al. (1998) further mention that the purpose behind existential-phenomenological interviews is not to provide an objective description of a causal relationship, but rather lived experiences of the consumer to explain meanings resulting from them.

The nature of an existential-phenomenological interview process is loosely structured and informal (Thompson et al., 1989). This represents that the respondent is more in charge of the interview, and the interviewer's role is to follow through what the respondent describes. Thompson et al. even claim that there should be no predetermined questions involved, but simply an opening question and a resulting, flowing conversation. To exercise this method, Thompson et al. suggest utilizing such descriptive question forms as "Can you tell me about...", "How was it like", and "How did you feel when..." Why-questions, on the other hand, should be avoided since they may provoke the respondent to rationalize their thoughts too much as the aim is to discover lavish descriptions of the respondent's life-world and experiences. The questions should be short and descriptive to encourage the respondent freely describe experiences. What-questions may be used for asking for an explanation (Thompson, 1990), especially when using the technique of "playing dumb" (McCracken, 1988) and seeking for the interviewee to explain their terms.

However, though there were no actual questions, certain themes can still be developed beforehand (Thompson et al., 2006) and the interview to include "grand tour" questions regarding the interviewee's life, background, and experiences of brands. These questions can serve as building trust and creating feelings of comfort, which is why they should be kept relatively informal and short. (McCracken, 1988) Further on, Thompson et al. (2006) even provided their respondents a list of predetermined topics that would be investigated in the interview.

Their purpose was not to guide the interview, though, but to provide the respondents subjects to grasp on if there were silent pauses during the conversation. This way, the purpose of existential-phenomenological interviewing was kept alive by the interviewee having the control and the situation proceeding in their terms.

When interviewing the respondents, Thompson et al. (1989) suggest the interviewer to exercise great caution towards confidentiality and protecting privacy. This is conducted by explaining that the interview is recorded along with defining the purpose of the research, and that an in-depth analysis will follow afterwards. The respondents are also promised anonymity and before the actual interview, their consent requested. This is all performed to avoid any ethical concerns that may arise from this type of method, where the stress is on finding deep emotions and personal experiences as well as relationships and underlying feelings. Due to the privacy matters, one interviewee felt afterwards that they did not want to participate in the study though the instructions had been discussed thoroughly beforehand. Naturally, this interview will not be included in the thesis. Moreover, the data analysis has been provided to all of the interviewees to view before publishing, if there was something to be altered.

## **6.5 Data collection**

Regarding the interviews, a questionnaire had not been developed beforehand as was suggested by Thompson et al. (1989; 1990; 2006) when conducting an existential-phenomenological interview, but there were certain themes developed in advance. As written, the interview would be categorized as an unstructured and informal. This was seen in first conversing with the respondents about their lives and other unrelated matters to build conversation and trust in addition to easing the nervousness experienced by certain consumers, probably due to taping. The interviews had two sides: firstly, a personal profile of their consumption was to be built that would include studying the respondent's life values and history to certain extent, and secondly, to explore the consumption experiences with OTC medicines. Consequently, in the analysis part the consumption experiences of certain brands could be affiliated with the specific brand relationship forms (Fournier, 1998). In addition, life experiences related to consumption of self-care medical products were sought and if there were other persons, places, or specific situations involved.

Moreover, there was an interest in discovering how the corporate brand of Orion addresses the daily lives of consumers, and how they transfer these emotions into actions when selecting also other or new OTC brands belonging to the Orion brand family. The purpose was, furthermore, to discover what kind of life situations there were related to these brands and how the brands were seen in the consumers' personal relationships. In order to encourage conversation, some of the respondents were requested to bring a self-care pharmaceutical product they were most fond of to the interview. This was performed so the interviewee would have something concrete to discuss and associate feelings to, in addition to aid the research due to not having questions. What is more, the advertisement of Orion included in the appendices section (Picture 2) was brought to provide help if needed. However, the advertisement would only be introduced if there were silent times, as Thompson et al. suggested (2006), in order to maintaining the leading role of the respondent. In addition, due to not having practically any experience of this type of very loosely structured interview, it was justified to follow Thompson et al.'s (2006) footsteps of developing a short list of themes to be covered in the interview and provide it to the respondent. These themes addressed consumption of OTC products, trust, corporate brands, and the quality of being Finnish.



Picture 3: Respondent's favorite OTC products

The interviewees were chosen from my extended network due to the difficulty of attaining random interviewees who would have the time to discuss their lives, and moreover, such a delicate subject as medication and even illnesses. The purpose was not to distinguish the respondents based on their demographical information so this was not paid attention during the selection. However, both genders were interviewed to see if this affected anything in addition to finding people with different lifestyles. Also, the respondents' willingness to participate in the interview was a key attribute of choosing because then it was known that there was motivation to talk about the topic, especially if the respondents themselves asked to be interviewed. For participating in the interview, Orion provided the respondents a product package to thank, and in total six in-depth interviewees were attained, which was an amount enough suggested by McCracken (1988). The background data of the respondents is summarized in the Table 2 found in the appendices section.

Compared to Fournier (1998), the interviews were not as extensive and the sample was larger, but still the emphasis was on quality rather than quantity. This was seen in focusing mostly on only five interviewees in the consumption analysis part and also conducting second interviews with certain persons. However, though Fournier's means of investigating both the life-story and brand usage of a consumer were followed, the stress was more on brand usage than extensive life story telling that Fournier had. This seems reasonable since Thompson et al. (2006) mostly concentrated on the interviewees' attitudes towards coffee shops rather than their life stories, though using the same methodology as this research. In addition, the sample of this thesis consisted also of men. Although Fournier based her selection of interviewees on the claim that women would experience emotions stronger, Rossiter and Bellman (2012) found that emotional branding is as effective to men as it is to women. This is a fascinating issue to be investigated in the empirical part.

The interviews began by asking certain "grand tour" questions (McCracken, 1988) of the consumers' lives and backgrounds, even though they would already be known, along with questions of usage experiences of self-care medication and related opinions. In addition, the topic of the research was explained and the purpose behind conducting these types of interviews. Also, the data analysis method of utilizing their personal experiences and thoughts was discussed, added to that the study would be executed in co-operation with Orion. It was also reasonable to explain what was indicated by self-care medication and what kind of brands it included, to establish their understanding. Many were concerned that they were not currently



using any self-care medication, so the purpose being in investigating their whole lives' experiences was explained. Afterwards, it was made sure the interviewees were comfortable with all of the above and when agreed, recording of the interview begun and the opening question was asked, which varied according to the situation, but encouraged the consumer to explain their usage experiences of OTC medicines.

## **6.6 Data analysis**

Thompson et al. (1989) write that, chronologically, after the taped interviews have been transcribed, the analysis phase begins. This may occur already during the interviews, which signifies that not all the interviews have to be finished in order to analyze the prior ones. Again, the stress is on understanding the experiences lived by the consumers rather than creating conceptual, unified hypotheses and causal relationships out of the data. The goal of existential-phenomenology is to be empirical and any interpretation or conclusion must be supported by empirical evidence of consumers' lived experiences (Thompson et al., 1989). In other words, the findings of the research, the themes, must emerge from the respondent describing an experience and not from theoretical assumptions. The research, therefore, should be free of personal assumption and contain other people to agree with the conclusions of the research, which naturally are supported by the empirical evidence. The latter Thompson et al. define especially important, because the interpretations should be something seen by also others, not based on the researcher's own dogmas, superstitions, or prejudices, which indeed is one of the challenges of this methodology.

Thompson et al. (1989) suggest treating data as "an autonomous body of data". According to them, autonomous refers to methodological matters. Firstly, the respondents' description of their lived experiences is believed without the need to verify the statements by external cues. For example, if a respondent were to describe a situation with a strong feeling, there is no need to authenticate the statement by investigating if the emotion actually existed, but the importance is on discovering the meanings behind the feeling. Secondly, Thompson et al. claim that the researcher should not combine the respondent's stories with hypotheses or theoretical terms that are apart from the interview. Thus, there should not be assumptions that the respondent implied something they did not express, because the interviewer must believe the respondent's experiences as they are presented.

When analyzing the data, Thompson et al. (1989) identify the need for bracketing the theoretical definitions behind the research. The theoretical assumptions and the interviewee's experiences must be analyzed from a non-dogmatic viewpoint. Hudson and Ozanne (1988) write that the researchers sometimes have difficulties bracketing, which Thompson et al. continue to perhaps result from the unavailability of proper methods to do it. They thus suggest utilizing an interpretive group of researchers to provide multiple interpretations in order to allow bracketing.

On the other hand, McCracken (1988) claims the best way to analyze qualitative data is to think how the researcher him or herself would experience the phenomenon and what thoughts it evokes in the researcher. This is in conflict with Thompson et al.'s (1989) definition of the research to be regarded only from the viewpoint of the respondent and the interpretation not to contain the investigator's own assumptions, prejudices or objective conclusions. If I were to consider my own consumption of medical products and reflect it to the interviewees' stories, assumptions could easily occur because then I would compare their experiences to my own. Hence, the focus will solely be on the respondents' experiences and lived situations as is suggested by Thompson et al. This is also one of the reasons there are no questions developed in advance except for the first one that in fact varied according to the situation.

For the concrete method of analysis, the consumption profiles were constructed already in the meantime while conducting other interviews. This way it could be seen what kinds of themes were brought up and focused on these regarding new interviews or conducting second interviews. The consumption profiles were built by utilizing idiographic analysis methods (Thompson, 1989; Fournier, 1998) of focusing on the single case and not deriving comparisons at this stage. This was performed due to the willingness to understand each consumer as an individual and not permitting assumptions guide the analysis. The second part of the analysis gathers around themes that have occurred in the interviews as a whole, in which coding was used to derive these from the text. There the concentration will also be on evaluating why consumers either share same themes in their experiences or do not. This will thus unfasten from the strict guidelines of existential-phenomenology. As the interviews were conducted in Finnish, they have been translated to English rather freely, but as written, the analyses have been shown to the interviewees to attain their consent and for them to view if something is to be amended.

## **7 EMPIRICAL FINDINGS**

The findings will be divided into two: explaining the consumption of selected respondents and then discussing the larger themes that emerged in the interviews. Firstly, I will present the consumption behavior of OTC medicines of selected interviewees. This is performed in a phenomenological, idiographic method, where I will only focus on describing the consumption through experiences and their attitudes. Secondly, I will discuss what truly forms their trust towards the OTC products since here the corporate brand may be examined. Lastly, brand relationship types of the consumers will be analyzed and brand relationship quality of one consumer and her favorite OTC brand introduced.

### **7.1 Consumer profiles**

Before beginning to discuss the themes that came up in the interview, I will provide introductions to the interviewees' backgrounds and their consumption. This is to help understanding their consumption and how the life values affect it, therefore partly addressing the first research question and completely the second. Moreover, I feel that it provides a deeper understanding on how their experiences, thoughts, and attitudes are constructed, in addition to how their life values affect consumption of OTC products. I have only left one interviewee out of this section due to the similarities with another consumer.

#### **7.1.1 Mika**

Mika is a 24-year old postgraduate of two degrees, currently living in the city center of Helsinki but originally comes from Eastern Finland. Mika moved away from his childhood home to live in another city already at the age of 16, in order to study in a good school that offered an international secondary school degree. He now lives in a small apartment with his sister and actively studies both economics and humanistic sciences. In addition, during the two degrees he has maintained two jobs, which results in him being extremely busy and thus also affects his consumption of pharmaceutical products. In fact, from all the interviewees, Mika is the first and only one to embark on a discussion of the poor availability of medicines, already in the beginning of the conversation. As he describes:

M: In Finland, self-care products are very poorly available in pharmacies and supermarkets. I would really want them to be sold in other stores.

I: Oh you would?

M: Yeah, of course, because when pharmacies are only open for a certain period during the day it is hard to get medication from there. It would probably be much easier if they were available in grocery stores.

Mika explains that he sometimes shops for moisturizing cream from the pharmacy during Saturday night. For most of the people, this would probably be a time to be doing something completely else or they would purchase the product from a grocery store while shopping for something else. Mika, on the other hand, goes the extra mile to fetch the cream from a specialty shop. He also tells that his consumption is much driven by what he needs, not what he desires. In addition, price-consciousness is a key value close to Mika. This he discusses when distinguishing his and his parents' consumptions:

M: They consume much more than me, because I try to consume the minimal amount. It is so that I don't want to consume much since it takes a lot of money and then I want to live simplistically. Like only for the subsistence.

I: What do you mean by subsistence?

M: Well the consumption only for staying alive.

When compared to an average consumer, Mika has much more information about medical products due to having studied biochemistry in the university. This, he says, is one of the matters that affects his brand selection and purchase behavior. When shopping in the pharmacy, he first asks the pharmacist the price and then what are the active ingredients in the product, and which of those affect his health. Mika also depicts to google how the medication affects one's body, in terms of how the active ingredients engage with cells. For example, he never purchases a product that includes lactose though he is not allergic. In this fashion, Mika is a perfect example of the modern, demanding, and educated consumer of OTC products (Blackett & Harrison, 2001).

When selecting OTC brands, price is the most important factor for Mika. He identifies not to be very brand loyal and always purchases the product that is the least-expensive one and contains the largest quantity. In addition, there seems to be confusion about brand names.

M: I'll buy that Ibumax. Or the one that is the cheapest, I don't remember what it is called, ibu, what's the name of that? Well anyway, Ibumax or Ibusal. The one that you get lots of with a cheap price.

Despite the price and ingredient-consciousness, Mika tells that he may as well change a brand if the pharmacist argues well for the product and demonstrates that it is better than what he has been using, therefore permitting power to the pharmacists and challenging them. Mika outlines an example of Aco moisturizer, which he received from his mother as a Christmas present and has been using since. One particular time as he went to purchase it from the local pharmacy, the product was sold out and the pharmacist did not even care to present other products. This resulted Mika to leave the store, proceed to another pharmacy, and experience extreme disappointment.

M: Well it was just that Aco cream, because I wanted just that moisturizer, and they did not have that. If they would've presented some other options, like if they had Vichy creams or other pharmacy products, I could have bought it without a doubt - if they had presented the benefits of the product and argued well for it. Like buy this and don't buy that, because there is less oil in this and it's more moisturizing for your face, but since they didn't even try, of course it affected my choice. But it's more like a wholesome experience, I can change a brand if I get good justifications for that in a service form. It's like a unified package.

This, service-stressing attitude of his is further seen when he is simply being asked about an event when purchasing a product from the pharmacy. Consequently, Mika becomes passionately inflamed and reiterates that the service was so poor and the pharmacist seemed "mean and repulsive", which was extremely upsetting. This is because Mika values the human contact when shopping and also being closer to people "more than an average Finn", therefore distinguishing himself from others, yet again. Having traveled around the world, Mika also draws a comparison between the Finnish service culture and what exists in the Western Europe.

M: Well I think that the difference is shown in Finland there that they just do their jobs and when they have a bad day, it shows in their service. That I don't like, when personal issues affect your job. It shouldn't be like that.

Mika continues the story and explains experiencing that he was not served because of his clothing and that the pharmacists probably established their kindness on how much the consumer spends.

M: She was like so repulsive and mean, I thought how does this pharmacy even exist if everybody gives as poor service as she does. I just thought she only served old ladies well, because there are a lot of them living near. I felt like that, because the other person [pharmacist]

was serving an old lady who was getting a whole bunch of prescription medicines and I was only getting a facial moisturizer. And then when I went there, I had sweatpants on. Well you don't think every Saturday night when I go shopping for facial moisturizer that I would put some kind of suit on.

Mika lists that in his life, such matters as friends, family, studying, and parties as well as free time are important factors. However, he especially stresses succeeding, which he then continues to detail: "*Well, getting a good job or studying place. To do what's fun.*" This is also seen in his lifestyle of trying to achieve as much as possible already in the young age. That said, during the past five years he has almost completed a master's degree in economics, bachelor's degree in humanistic sciences, studied abroad biochemistry for a year, and served in the military, in addition to maintaining the two jobs. When continuing the conversation on his values, he begins:

M: Well, maybe I'm a bit of an individualistic person. I do care about other people, but still.

I: Tell me more about this individualism?

M: Well maybe in that sense that I don't really care about what others think of me. Maybe it's something like a good self-esteem, and that's my value. Not being egoistic, but like being who I am and so on.

This Mika portrays is seen in his consumption of also OTC medication - he does not buy "brand medicines" or if he purchases inexpensive products, he does not mind if the pharmacist thinks of him as poor. Mika further renders his relationship with OTC medicines being a "healthy" one, and that he does not employ medication for a minor headache, "only when it is necessary". He explains that due to this, he seldom preserves painkillers stored at home because he always consumes them for the need. Afterwards, Mika begins to depict the latest experience he had when consuming analgesic drugs. It was a journey to London he embarked on though he had caught a dreadful flu and suffered from a soaring fever. There, the OTC product rescued his vacation.

M: It was a summer there [London] so that already healed me mentally. But I didn't realize I was sick and then I just walked around like 25 kilometers everyday, and I even lost my toenails because of that. Then I just took Ibusal, I used it for the flu, so I wouldn't feel myself sick and could just do as much as possible. Which isn't really smart but it helped a lot.

I: Tell me about the feelings you experienced during this?

M: What kind of? Well positive in that sense that I could be and feel myself healthy though I was actually extremely sick. I could go everywhere, like being outside because the weather was so good, go shopping, and meet my friends.

When talking about vitamins, on the other hand, Mika mentions that it is partially preventive consumption, which in his words implies to simply averting diseases. To him medicines are “a tool for a better life and wellbeing”, which was also seen in consumption of Ibusal in London. Mika admits that when suffering from a cold, he is no stranger to consuming considerable amounts of painkillers. He even admits to use his family members’ prescription medicines, if they help. Therefore, his trust towards medicines is rather immense.

When Mika initiates a conversation on his usage of a vitamin D product, he explains that there exists “no trust that content is 100% vitamin”, and specifies that the amount of the vitamin mentioned in the package is not necessarily included. This is because he realizes that there are flaws in the world and corporations can deceive people. However, Mika explains that since the vitamin products are sold in pharmacies, they ought to be trustworthy. In addition, a central component in creating his trust is to espy that the product works. This might be problematic with vitamins, because not catching a disease could be a result from other causes. Regarding painkillers it is another story, since when the product takes away the pain, the efficiency is proven with his own eyes.

When Mika explores his relationship with being Finnish, he defines that one of the core values of the Finnish people is not to act like what they are not, thus maintaining true to themselves. Authenticity (Malär et al., 2011) is therefore important to Mika. He also criticizes people who are too decorative and ones who purchase products “without purpose”. To Mika, the basic cornerstones of life are more important; for example, having a decent place to live, in addition to leading a hedonistic life. When depicting his consumption in general, Mika mentions not to own a smartphone - not because he cannot afford it, but because technical devices do not interest him. Although, Mika later specifies that if his earnings were more comprehensive he could as well spend money on technology, but even then he would not purchase “a Swarovski crystal decorated TV”.

M: It is I, myself that decides precisely what interests me and then I purchase those kinds of products.

I: What are *those kinds of products*?

M: Well, for example, good food, and then eating at restaurants. Also something like champagne, alcohol. When I went to Portugal, I brought all kinds of wines and Port wine from there. I’m not an alcoholic or anything like that, but I’ll spend money on all kinds of delicacies. Technology, I couldn’t give a crap.

Though Mika at first does not admit having any strong brand relationship, he eventually enters a discussion on a nasal spray brand. The product is called Nasolin, which he shares a long relationship with. Nasolin was introduced to him already in the childhood by his mother, who used to apply the spray to him during sickness. When describing the relationship with Nasolin, he tells that it is a warm one, and portrays it as a symbiosis where he benefits from consuming the product. Mika even remembers what the package looks like in detail, though he does not know who manufactures it. In addition, his relationship with the product does not limit to the sickness seasons, as he tells:

M: It's like you become addicted to it in some way. I've used this product called Nasolin. I used the product when I was sick and I continued to use it when I felt even a bit of coryza, I *had* to have it.

At this point, when asked about the price that to him is an important factor, Mika surprisingly mentions not take it into account regarding this product. This, however, seemingly arises distress in Mika and he commences to rationalize.

M: I don't look at it [price] much. I could ask the pharmacist if there was another product. If I noticed it costs like 500 euros, I would probably ask them if there was a cheaper one. In fact, I think I will. Perhaps if I now went shopping, I would ask them.

**Mika's keywords:** Preventive consumption, need-driven consumption, service stressing, price-consciousness, brand loyalty, savior, individualism, hedonism, authenticity.  
**Components of trust:** Finland, assessing the products through own knowledge, pharmacy.

### 7.1.2 Sara

Sara, a 21-year old female, is a student of polytechnics and lives in Helsinki, but originally comes from a smaller sized town. She occasionally works in a clothing retail store but mostly focuses on school and student life. Her hobbies contain playing piano and practicing martial arts, the latter in which she has actively competed in the national and international levels. Her current lifestyle of being a young student reflects her consumption of OTC medication, as she tells to first construct her criteria of selection purely on the price. Sara begins to talk about her purchasing behavior of analgesic drugs.



S: Well I don't usually buy Burana because it's more expensive than Ibumax. Or is it even Ibumax, or Ibusal? Anyway, Ibumax has become to me, well like I've started to think that it's the cheapest one, so I don't even look at the price now but just grab it from the shelf because I'm used to it being cheaper than some kind of Burana.

Therefore, it is not only the rational motive of price that in reality guides her choices, but the habit and the mental image of this specific brand carrying the least expensive price. In addition, due to the sports background, she says to have consumed ice bags that are sold in pharmacies. Neither regarding these products does she consider the price, due to the habit and functional benefit of durability.

S: I just noticed that I have also had them before, like at my parents' house, so I knew they're good and then I just realized I don't have them and I need them. Then I just purchased them and didn't even look at the price or go to another pharmacy to compare prices, because I just thought that now that I remember it, I'll buy. In any case, it's something that preserves for a longer period of time.

Sara is also actively involved in student life, which includes attending parties and celebrating sometimes multiple times during the week. This occasionally results in an irregular schedule of days, as she tells to have partied "even somewhat too much lately". Despite, Sara mentions one of her key life values to be healthiness though after not actively competing in sports any more, it has been left in a secondary part. This leads to exploring her consumption of vitamins, which follows rather much preventive reasons and provides relief for her conscience that suffers due to the athlete background. Indeed, through consumption of vitamins, she validates her unhealthy habits of eating.

S: I've purchased these multivitamins sometimes, but I don't eat them daily, because it's like I take them if I remember or if I've eaten unhealthy. To cover for the Big Mac, multivitamins.

Sara continues that she knows people who tend to avoid consuming medication, but because she has been sick so frequently since early age, she has been used to taking medication and therefore does not question consumption and tends to consume drugs rather much during the flu. Avoidance, thus, is not a key issue because she has formed a casual relationship with medication due to experiences and authorities that underpin trust. When asked what type of consumer of medicines she is, she depicts to be one looking for convenience and comfort, and consequently tells of a situation when her back was hurting terribly and for the cure used her

father's muscle relaxants. Afterwards, Sara was told by her boyfriend that the particular muscle relaxant product is banned in all other Northern countries due to causing cerebral hemorrhage, which despite did not scare her and consumption has occurred even after the information. Sara tells of her reasoning behind the story:

S: This was after I had used it, I have this "bird's nest" [a Finnish phrase of an extremely safe place] image in my head that if it's sold in Finland it's ok. I don't know how smart that is, but somehow a lot of people think that "It won't happen to me". That kind of thought that it won't happen to me if it's one of a hundred - it won't be me.

Trust, especially, is important to Sara because she does not like that corporations loosely use consumers' private information. When asked about her trust towards pharmaceutical companies, she informs that it is not the brand or manufacturer, but rather the doctor and Finland that affect her as was evident from the prior story.

S: Finnish people in general are like that we think that we live in this "bird's nest" and no one can hurt us. And I think that with medicines it is the same thing - if a doctor prescribes me something, I won't question if it's bad for me.

However, when asked if Sara purchases Finnish products she admits that price is a more important factor in her life situation although there is a willingness to support domestic businesses. In addition, when talking about usage of specific brands, she tells not to be brand loyal towards anything.

S: I think it's like this general way for everything, I have never had this "I have to have all Guess handbags" or anything. Or like, for example, with grocery stores that I would only have to go to S-market or K-market. I don't have to buy specific stuff in everything, it just depends.

This philosophy is also seen in Sara's loyalty towards nasal spray, a product she is very fond of but has not become attached to any particular brand. She explains that throughout years, an especially close relationship has developed with this product, almost one of an addiction. However, the addiction only exists during the flu season and afterwards she could just forget about the whole product. Sara shares an intimate experience she had while consuming the nasal spray that well explains her attachment.

S: I remember I was dating this guy and going at his place, and I wondered what would this night be like because I had the flu and had forgotten my nasal spray at home, and I just panicked.

I: How did you experience the panic?

S: Like I started wondering if I should search for the closest pharmacy and go get the spray. After many years, I had been used to putting it on when I have the flu and then go to bed. Then I'd sleep normally and wouldn't have to wake up during the night.

In this type of consumption, the medication acts almost as of a savior in rescuing her night and easing her symptoms. Another similar experience she maintains with a caffeine tablet brand called Cofi-tabs that her friend introduced to her. Sara recites that she takes caffeine pills if she has not slept enough and needs to take an exam, or wake up early for school; in other words, when “there is a feeling of the world ending”. After all, they are a more convenient choice than coffee because her stomach does not handle coffee well. She remembers one memorable and emotional experience with Cofi-tabs, which saved her day.

S: When we had broken up with Kari, I didn't get much sleep and I had an exam the following morning. I had slept for like an hour during the night. Then in the morning, my friend gave me a couple of these Cofi-tabs, maybe this is a single time that I remember the best, and it was the first time I used them. I thought that since I've slept so little it's better to take a few pills than go there to doze off.

Afterwards, when depicting what generates her becoming attached to a pharmaceutical product, Sara immediately announces the functional benefits: that the product produces encouraging feelings and provides relief, which is demonstrated in her various narratives. In addition, she explains that medication represents being able to live like the others, a normal life. Medicines offer a path of handling daily tasks though she would feel herself sick, or being able to intensively exercise though there were symptoms of her asthma.

S: It is this nasal spray again, it's an awesome invention. Like it eases things, I wouldn't like to go school when I would have the flu, but I wasn't so sick that I would dare to stay at home. It eases daily life, you can have a normal life. It applies to other medicines as well: you can live like so called healthy people when you take medicines. You won't let coryza bother your life. It's good in that sense, deficiencies, like the flu, you can relieve symptoms and go to school.

On the other hand, Sara prefers to avoid becoming addicted to products. It could easily happen with the nasal spray, after having her friend tell her that they apply it even after the flu. This arose questions in her mind and brought uncomfortable feelings, though she is very fond

of the product. However, when conversing about relieving neck pain, she mentions that it is either medication, exercising, or alcohol that provides aid, therefore placing medicines in line with the two activities she most enjoys: parties and playing sports.

As a consumer, Sara describes to be the type that readily recommends products to her friends and also receives recommendations with great delight (Hess & Story, 2005). When asked what kind of influence her parents have in her consumption, she explains that they recommend products to her. This might provoke usage, but in reality the impact does not differ much from her friends'. However, it is noteworthy that the relationship with her mother is more of a friend type rather than an authority. Sara also tells that she has learned the price-consciousness from her parents, and her disloyalty towards brands can also be seen as a quality shared by her mother.

**Sara's key words:** Savior, prevention, being able to act as healthy people, relieving conscience, brand images, price-consciousness, functional qualities.

**Components of trust:** Being sold in Finland, having doctor prescribe or recommend, having friends recommend.

### 7.1.3 Esa

Esa is a 25-year old male, who has recently graduated from the military academy and now works as an officer for the Finnish Defense Forces. Esa has always lived in Helsinki except for some periods during his schooling, is unmarried and lives alone in the center of Helsinki. Throughout his life, Esa has practiced both team and individual sports, including track, football, dancing, and marathon running. He frequently tells his mantra to be when consuming OTC medicines:

E: I never treat the symptom. I always treat the cause.

Afterwards, Esa explains that he sees medication as something that facilitates pain management, provides relief, and is in his words "a need-driven product". Thus, he does not admit having strong brand relationships and stresses logical issues behind his purchase decision,

such as the price of the product. Despite, he does begin to talk about Finrexin, a flu medicine, which he tells to have grown especially attached to and has used since he was an infant. He even remembers the outlook of the package and promptly points out that it is not a product manufactured by Orion. But when asked about the relationship with the brand, he begins to rationalize and becomes uncomfortable.

E: Now if I wanted to observe myself, I should notice that I have victimized myself like that and grown attached to something, then I should see if there is any reason for this kind of attachment. I should re-evaluate my actions.

Avoidance is a theme that keeps coming up in Esa's interview quite frequently. When describing the consumption of painkillers, he stresses how medication is never the primary option, but how he rather rationally thinks of the situation as what causes the headache and could something else relieve it, such as drinking water or flexing neck muscles. On these types of other ways than medication he utilized the term "light tools", whereas medication and surgery in his terms are "bulldozers". After trying all the "light tools", if medication is still needed - as he says, befalls extremely rarely - Esa does not rely on modest doses.

E: I took a lot of painkillers because then I knew, I did try to flex my neck, but I knew it wouldn't go away just like that. In a way, like I already said in the beginning, you take nothing or when you take, you take a lot. Like you would take booze during the weekend.

As the above might sound slightly black and white, it well reflects Esa as his interests predominantly follow "all or nothing" style. In addition, he explains that when he finds something interesting, he does not yield easily until it is resolved. Persistence is the word that he uses when he describes his persona. Another issue that characterizes Esa is his highly logical thinking and explaining that is already visible in his tone of voice when speaking. As Esa verbally walks through his visit to a pharmacy, he depicts:

E: I usually know what I want, or/and I have a prescription. If I have a prescription, I'll take the queue number and get in the line. I answer questions if there're such and I pose them if I have any. Afterwards I probably leave the pharmacy.

This effortlessly escorts the conversation to another theme following Esa, impulsiveness. Esa defines that one of his key life values is to do what he desires. He firstly begins to describe this as individualistic behavior but quickly starts to explain how completing something today

instead of tomorrow is what he indeed implies to. This is because he himself realizes that impulsiveness and his stressing of rationality in all his actions are in contradict, and thus threaten his logicity. To explain, he utilizes the word “the golden middle path” of his own relationship between being impulsive and at the very same time rational.

Impulsiveness shows in Esa’s consumption in a way that if he wants to purchase, in his words, a motorcycle, he will readily execute it. But on the other hand, when narrating about purchasing a new computer, he stresses how he first comprehensively compared the different options, did not invest in the most expensive one and when decided, closed the computer without saving the plan and slept over night. A few years back the situation would have had a disparate ending: he would have speedily purchased the computer because otherwise he had known that the money would be vanished to other causes rather quickly. Esa reasons this by pointing out that now that his earnings are steady, his consumption is not as hasty as he knows cash flows will not be ceased. He adds that in life, he thinks that if one truly wants to do something, they should perform actions today instead of tomorrow. However, he does not imply anarchism or such with this philosophy. Rather, it has to do with expressing his persona and being true to himself. Here he begins to talk about his hobby of dancing, which for a Finnish man and someone in particularly working in the military could be somewhat peculiar, according to Esa.

E: If I wanted to do something, like practice something or go somewhere, it is my decision, no one can tell me what to do. For example, I’m a soldier who dances and that’s something that always puzzles people. As it usually would be, or for most people, to have martial arts as a hobby or so on. It would be much more stereotypical. But I like it [dancing] and that’s why I do it. Or if I wanted to travel somewhere out of Finland, well I’ll just go. I think that if I want to do something, I’ll do it and I won’t have to look back and feel sorry that I didn’t.

Esa frequently expresses doubts about the power of the pharmaceutical products and in several situations mentions placebo. Even when he envisions his favorite product, the Finrexin flu medication, and explains how committed he is to the brand that results him even not looking at the price, his final comments are: “Placebo works with it”. In addition, when considering Duact that is a flu medication provided by the military, Esa says that for him it does not work because of the lack of trust.

E: Apparently my trust towards medication is too weak that placebo doesn’t work, or my body resists it.

When asked to elaborate his thoughts on placebo, Esa presents yet another logical process. Namely, the effect of a drug results from him reading the product caption and then knowing how the medication affects his body. This, on the other hand, leads to his trust towards the product to found. Hence, Esa wants to be in charge of building his trust and therefore uses placebo as a primary shield to question. However, the philosophy is not only restricted to pharmaceutical products, but other health products as well, such as Activia yoghurt.

E: Is it so that when you take it, your stomach starts to act better because you take it and it has active ingredients, or because you start to watch your diet and so on, and then your stomach gets better?

Because of the placebo issues he is also continuously looking for proof that the medication functions, and to him it is important to see that the product in fact works instead of hearing it from someone else. This is also related to his thought of him being in control of his decisions and actions, because trust needs to be formed by the support of his own findings and not outside influence. He tells of an incident of being very sick and having to stay in the garrison hospital to be treated. There he was offered “Burana or some other ibuprofen” for the severe fever.

E: I remember when the nurse came in and said to take clothes off because soon I would start sweating a lot. I wasn’t naked, I don’t mean that, but with my t-shirt and combat pants on, then suddenly the sweat came, I remember that. Then you just realized that maybe this really works. Or for the fever in general, it lowers that. That I realized. I could establish that it works due to the fever.

Though Esa works in the military, patriotism is not the value he brings up himself. Being Finnish he explains is “a value by itself”, but it does not strictly guide his consumption decisions. If the products are priced the same, Esa selects the Finnish product, but if the domestic product is “expensive and crap” he will rather purchase the good and foreign one. Neither does he regard pharmaceutical companies badly, but rather defines that he is not ignorant and accepts that “money rules the world due to capitalism”. Here he also expresses another component in building his general trust towards medical companies.

E: Maybe I’m naïve or not, but I do trust that they [pharmaceutical companies] do their things right, because if they made crappy medicines, pretty crappy business it would be if people died because of their drugs.

After this, Esa mentions to trust that in Finland risks are “under control”, which consequently also consolidates his trust. In addition, he iterates that trust along with the placebo effect is founded after reading the product caption, which tells what kind of ingredients there are and how they affect, again stressing that trust is something he develops after seeing and experiencing. Also, he does not regard OTC medicines risky, because “you can buy them from a pharmacy”. To Esa, the basic corner stones of trust thus seem to be the sales environment, product labels, Finland, and the market mechanism.

The final issue, which Esa becomes extremely passionate about, is the advertising by pharmaceutical companies. When looking at Orion’s corporate advertisement, Esa tells that it is appropriate on the other parts except for the military medication bag, because it is not believable since it is too petite for a doctor. Also, he tells the first impression being “taking advantage of patriotism”, which arises negative feelings. In addition, when viewing the web advertisement of a burping wolf, he wonders why the pharmaceutical companies always exercise only two strategies to present their products: either being “over appropriate” or “using crappy humor”, both of which cause him to feel ashamed on behalf of the companies. Authenticity and originality (Malär et al., 2011) are qualities Esa would appreciate with advertising.

I: What do you think about the advertising by pharmaceutical companies?

E: I should probably first see these ads myself, before I could tell if I were ashamed, ashamed on behalf of them, or like what the crap is this now. Probably as it would be directed towards Finnish people, it would have some kind of yellow hayfield with a blue-eyed, blonde-haired girl in a white dress running around and coughing a bit. Then she’d be given some kind of medication and a company logo would come there and it’d say “the healthiest Finns since year x”, and you’d be like oh well that was an original theme.

**Esa’s key words:** Need-driven usage, avoidance, treating the cause, placebo, authenticity, individualism, logicity.

**Components of trust:** Pharmacy, Finland, having proof and being in charge of developing trust, capitalism.



#### 7.1.4 Lisa

Lisa is the mother of Sara. She is 52 years old and lives in a smaller town about 100 kilometers away from Helsinki. She holds a master's degree in economics, but has recently had to leave her job due to severe health issues and has applied for early retirement. Before the health problems, she was employed in career counseling and tells of her thoughts on work back then:

L: I remember back then when I talked to my classmate about career goals and all, and I have always had this “un-business-student-like” attitude as to me it's always been important to do something that makes me happy. So that life would be happy and balanced, I don't reach for a career in this sense.

Along with having children, falling sick has rearranged her life values as she nowadays tells to enjoy “the little things”. Despite, being healthy has always been the most important value to her and also having her children and husband healthy. Children, especially, she stresses to be the most important matter to her, which is indeed shown in her very close relationship with Sara. Another key value to her is to be able to help others. This utilitarian attitude has been shown in her choice of career, too, which she depicts offered the possibilities to “really help people”.

The need to provide aid and care along with her role as a mother also affects Lisa's purchase behavior of OTC medicines. She narrates that during the years Sara actively pursued sports, she tended to purchase “magnesium and other vitamins for athletes” for Sara, and that she has advised her to take iron tablets if there are experiences of fatigue during the period. In addition, Lisa tells to worry of her son, who is in Japan for student exchange, and that he might not be leading the healthiest life there. To take action, she was about to include a multivitamin product “half-joking” in a Christmas package that contained his clothing and other things. During this story, she repeatedly refers to the word “caring” and tells of her behavior:

L: I thought that the mother would care a little bit that the son gets vitamins. Because if they just party there and don't eat so well.

Consequently from her permanent sickness, Lisa is no stranger to drugs, neither prescription nor OTC. In her life, medication plays an important role as it helps her to manage through daily tasks. When talking about medication, however, she regularly uses the word “useless”

or “purposeless”. This is because in her mind no one should consume drugs for “no purpose”, and consumption should only occur when it is absolutely necessary. Lisa also thinks of the pharmacy as a place where they do not sell products “purposelessly”. Namely, to her pharmacy is an institution that is reliable, truthful, and maintains the people’s interest as top priority. She remembers an example from before that took place while shopping for body lotion.

L: And it was just this pharmacist who told that for me that’s an excellent facial moisturizer and that “you don’t have to buy those more expensive ones”. This is just what I meant that they would not just start praising the most expensive one, which you should by no doubt purchase.

When Lisa discusses trust towards drugs, it appears that the pharmacy is a major component creating it. According to her, the pharmacy does not sell any “non-sense” and the product being sold in a pharmacy is “a guarantee of quality”. Further, when talking about if medication were available in supermarkets, she tells that if they were exactly same products sold in pharmacies, she could as well buy them elsewhere, but otherwise operating in a pharmacy environment seems more reliable to her. This could be due to her close relationship with a local pharmacy, which she describes as “I’m pharmacy-loyal, like my mother”. In this particular pharmacy, they have her product information on the computer and there is a pharmacist that is “extremely helpful and friendly”. In addition, her trust towards the pharmacy has grown through experiences with the pharmacist revealing that certain medicines should not be used simultaneously.

L: I heard it from the pharmacist and not a doctor that “did you know Panacod does not work as well when you use this other medicine?” I was just like no wonder it doesn’t work as efficiently as it could. Then I told the doctor and they said, “yes it’s not that good”. Then once the doctor had prescribed me a painkiller product they told me in the pharmacy I can’t take since I use this other drug.

Having proof and experience is another theme that belongs to Lisa. As she talks about her consumption of OTC brands, she narrates of a vitamin B product that she was recommended by a doctor and began using. However, it was not the doctor’s word that resulted in her to trust the item, but blood tests that visibly showed her vitamin B levels having risen.

L: I trust their power, especially the vitamin B product after seeing it in fact raised the levels. The calcium product it’s hard to say, but in a way I do believe the bones would maintain. I

have this trust towards these medicines that they work and they will benefit me. That they wouldn't be complete non-sense.

Seeking for proof was also seen in how Lisa argued for the pharmacy being reliable: after having the pharmacist recommend her less expensive products and therefore demonstrating not to simply sell products but to view her needs and values important. In addition, when telling about a heartburn product that she is especially fond of, Pepcid Duo, she mentions that it is due to the product qualities, especially the efficiency of the product and that it affects immediately, not after a while that some other products do. Also, after trial she has established this OTC product as powerful as another prescription heartburn medicine, which has fortified her trust towards the brand even more. Regarding this medicine, she also tends to avoid taking it as long as she can, because again she averts consumption of medicine "for no purpose".

Lisa values her OTC medicines to be easy to administer, implying a functional product quality (Hess & Story, 2005). She commences a discussion on gastrointestinal medicines and how she prefers a product named Laxoberon, because it is in a tablet form instead of liquid, which creates it convenient to administer and consume with her prescription medication. Here, she stresses the easiness of taking the product.

L: I thought I'd try those peculiar-looking little pearls [tablets]. Now when I think, I'd rather take a few of those pearls instead of having to measure the mixture to a cup, so maybe the easiness is one thing there.

L: I have my medication there, my dosette, and also the Laxoberon bottle. Then I might remember when I take my evening medication that "Oh I'll take those too".

What indeed affects Lisa's trust towards drugs, in addition to that it is sold in a pharmacy, is that a doctor recommends it to her. Moreover, the product being sold in Finland to her is "a guarantee of quality". Therefore, the manufacturer holds a diminished role in her mind, as she tends to look at the prices more than who manufactures the product. She also points her vast trust towards the supervision in Finland and that the medicine would not be allowed to enter the Finnish market if it was not properly working. Buying a foreign product for her is not a problem, unless they are natural remedies in which case she prefers domestic products.

L: I think it's especially important to be a large employer in Finland. It's important, well the product for sure could be manufactured by someone else if the same raw materials would be used. And of course the products could be done in some place else, there would naturally exist quality inspection.

**Lisa's keywords:** Easiness, effectiveness, avoidance, price-consciousness, pharmacy-loyalty, utilitarianism, functional qualities.

**Components of trust:** Pharmacy, recommended by the doctor, being sold in Finland, having proof.

### 7.1.5 Milla

Milla, a 25-year old postgraduate of business administration, also comes from Helsinki. She lives alone near the city center and is about to finish her degree. She is a vegetarian and holds ethical and ecological values important. When she explores her consumption of OTC medication, she says to avoid taking the medication for a headache as long as she can and frequently takes only half of the tablet. To this behavior she has multiple reasons. Firstly, she does not want her tolerance to grow towards medication. Secondly, her father's example has taught her not to consume drugs for "no purpose" and thirdly, she has shared an unpleasant experience with analgesic drugs after a surgery.

M: I came home and they told me to take 1000 mg at once, and I would take like 250 mg because it was enough. After that I've become a little bit more careful that I will only consume the drugs I know, and I'll take small doses. Because I hadn't really realized that you could take enormous amounts and how bad of a tolerance I have. Afterwards you probably realize to be more careful. And then I've taken just something I know. Like Burana.

To Milla, it might be her parents' example of supporting Burana or this particular event that has formed a contiguous bond with the brand. Though she has unpleasant experiences with the product of administering too much of it and feeling ill, it is not the brand's fault, as she defines it. When talking about Burana, namely, she frequently uses words such as "safe", "familiar", "trustworthy", and even admits an emotional bond towards the brand after becoming accustomed to. When asked if she preferred consuming the less expensive, unbranded pain medication, she explains that even though her parents have Ibumax or other inexpensive

product stored, she will always take Burana. This is because experience has taught her what kind of amount to take and how long it will affect her body. In a sense, Burana has become a partner to Milla after familiarity and watching family members consume the brand. Also, she lists that because it is such an old medicine, the recipe probably will not be altered any more as it has been discovered to work. At this point she does not experience the price difference, as her consumption tends to be minimal.

M: I don't always know about each drug who manufactures it or care to find out, but with Burana you know that it's Orion. I don't know if I think about it, but in a way, it's Finnish. It would be a different thing if I consumed a lot of it and it was very expensive. In the end, the difference won't be much because I buy a package or two in a year and then I'll rather support a Finnish company.

Another important theme for Milla, deriving from her life values of ethicality and ecological-awareness, is the animal experimentation the pharmaceutical companies conduct. Due to a school project where she investigated the responsibility of pharmaceutical companies, she has gained profound information of this business and companies, which has disturbed her. She stresses how because of this she also prefers to consume Burana, since it is most likely not tested as much as new medication. Though learning about the animal testing and how much the companies conduct those, it unexpectedly did not affect her views of the pharmaceutical business because to her "health comes first". Despite, it did influence her choose of brands, also in the corporate level.

M: When I went through them, it left certain names in my memory, like what are the five biggest and then Orion. Then I probably always try to look for it [drug] to belong to a company in the list of the top five biggest. I don't know if it really matters, but to me it brings safety. Because they have well-researched medicines and they can't screw it up.

Milla also lists one clear reason she consumes Burana and other Orion's products, such as Ceralan body lotion, that they are manufactured by a Finnish company. In frequent cases when she depicts her consumption of Burana she tells that a primary reason is that it is Finnish. However, it is not only this that forms her trust, but as told that the manufacturer is a large company and that the medication is recommended by a doctor, even if it was an OTC product. Doctor, to her, is an important authority and she even tells that if a budget product was offered to her by the pharmacist, she would not trade because having someone prescribe her the product forms feelings of safety, since the responsibility is thus the doctor's, not her.

M: I do feel that with medicines it is good that it is a familiar product, or someone recommends it. Like a doctor says that this is especially good. Even if the doctor didn't write a prescription and it was an OTC product, I would still go get what they recommended.

The doctor is not the only authority Milla confirms affects her selection, but her parents maintain a considerable role in her choice of products though it is not necessarily conscious behavior. When she depicts her usage of Burana, she describes how it was always the brand purchased at her childhood home and even brings feelings of "home". In addition, Milla feels that medicines especially are a product that is affected by her parents' consumption because compared to clothing or such, she would not necessarily support the same brands.

However, when asked how she would act if Burana was not available in one particular pharmacy, she says to select some other, well-known analgesic medication brand, such as Panadol or Aspirin. Her loyalty, therefore, is not extremely deep towards only Burana, but rather exists in the top brand category of painkillers. However, Milla quickly points out that Burana not being available in a pharmacy has never occurred and therefore it is only hypothetical. Neither is the efficiency of the drug important to her, as she mentions that simply the improved functional qualities would not result in a switch of the brand to a bargain one.

The brand bond with Burana results Milla's price tolerance to expand (Hess & Story, 2005). However, it is not only with analgesic medicines that she experiences such thoughts with, but also body lotions that Orion manufactures. Ceralan is a brand she purchases because it is the most effective one for her skin and she does not rely on "the market products" with her skin-care because they do not moisturize as efficiently as the products sold in pharmacies. Thus, in terms of body lotions she stresses more of the functional values whereas with Burana it was the more abstract and personal connections that affected. However, she does mention that familiarity, again, guides her consumption of lotions as well.

M: You easily go with what you've purchased before. It is like easy, you don't have to study and see which kinds of issues this affects and if it is good. And with lotions you don't have to think about if it is effective enough.

Milla also assures that she always has pain medication with her, in her purse and at her home. Especially if there were occasions when she would proceed from work to see a movie, she tells to already prepare by ensuring there is Burana available due to the neck pain of staring at a screen "for 12 hours or such". This follows from an experience she had after going to the

movies after work and having to depart due to the pain. Despite the preparing, she describes her consumption of painkillers to be more avoiding than frequent, and that she only uses painkillers if she absolutely has to do something.

M: Of course if I have to do something, like take an exam, then I'll take it [drug], but if I don't have anything that I *have* to do, I'll rather try to rest because then I know what my real condition is. Because otherwise you'll feel yourself healthier than you are and you don't realize that it is the medication that makes you feel good, not because you're well. And then you easily go do too much.

The final issue Milla addresses is that she has started to pay attention to who manufactures the medical and cosmetics products she uses (Shamma & Hassan, 2011). When looking at the advertisements, discovering the manufacturer sometimes evokes feelings of surprise; for example, when it is a company she would not believe manufactures those types of products, or feelings of being “tricked” if the company reveals to be a subsidiary company of someone else's (Malär et al., 2011).

M: Well maybe you could feel a bit conned if you realized afterwards that it's someone's subsidiary company and you've thought it's some other company. Maybe that is why with medication, I like to know who manufactures it, to me it's more honest, if you can say so.

**Milla's key words:** Carefulness, brand loyalty, safety, familiarity, avoidance, parents' example, preparing, transparency, corporate brands, ecologic and ethical values.

**Components of trust:** Brand loyalty, having the doctor recommend, being manufactured by a Finnish company, pharmacy, large corporations.

### **7.1.6 Summary of the profiles: What forms the consumption of OTC products?**

Though the experiences, stories, and backgrounds varied quite an extent, the interviewees share certain similar themes that may be summarized here. In addition, it is interesting how differently they argue for consumption and what in fact affects their trust. The first, most agreed theme was the avoidance of medication. Most of the consumers namely want to avoid taking medicines as long as they can, due to various reasons. Examples would be the fear of tolerance growing, seeing this type of consumption useless, or being afraid of a developing addiction. On the surface, medication represents a need-driven, symptom-relieving way of handling sickness, or in Esa's situation, treating the cause. Lisa and Milla even distinguish Finnish people from other cultures where medicines are consumed with lighter reasons, such as preparing for an upcoming cold with antibiotics. As Lisa phrases: "We [Finnish people] are more aware of these things".

However, though Esa stressed treating the cause instead of a symptom, this was not a thought shared by all other interviewees. Mika, for instance, tends to use extensive amounts of analgesic medication during the flu to diminish the feelings of the sickness and to be able to act normal. Sara follows this behavior with Cofi-tabs as she takes them to not feel herself weary instead of resolving the problem by sleeping enough. As Esa tends to use the natural or "lighter" tools, Mika and Sara are more eager to take the pain medication sooner, though they as well emphasize not to consume drugs for a minor headache. Furthermore, both males identify their consumption of painkillers to be heavy, if it takes place. Milla, on the other hand, is the most careful consumer of them all since she avoids taking even a whole tablet of a painkiller for a headache due to an unpleasant experience of being administered too much of the medication and losing control. This also results her not taking painkillers during a cold because she does not want to feel herself too healthy, but to control her real state. Milla also tells to "over watch" herself when she trials new medicines.

When Sara and Mika talk about taking vitamins, it follows the theme of prevention. Through consumption of vitamins, they can cover for their bad eating habits and validate unstable life and partying, in addition to protecting themselves from becoming sick. They do not necessari-



ly trust that the vitamins would prevent from catching a disease, but the products act more as empowering means for their unhealthy lifestyles and provide relief for their conscience.

Supplements are also a method of expressing motherly caring, which Lisa showed in her experience of purchasing these for her son, who would probably exercise unhealthy habits during his student exchange. When she talked about her children, she did not mention to provide them painkillers or other medication from the pharmacy, but iron tablets, lotions, and multi-vitamin products. As her children have both recently left their childhood home, it is still important for Lisa to indicate care and through purchasing these products she demonstrates that their health is a priority, also expressing a life value close to her whole family.

Another important role OTC products play in the consumer's mind is *the Savior*. With Mika, this was seen in the pain remedy saving his vacation though he had a terrible flu. Sara, on the other hand, was able to take an exam despite the break-up she experienced just the night before and the resulting inadequate sleeping. In addition, Sara carried the nasal spray with her all the time if she had a cold, and not having it with her caused a panic. Milla tended to prepare for the coming movie after work by reserving painkillers beforehand, because otherwise her neck pain would force her to leave the movie theater. With this type of behavior, however, Milla emphasized the expression *having to do* something. To Lisa, this role of medicines is evident as they help her with her sickness and treat the symptoms. In addition, Lisa described that when she was younger, she used to take Burana before entering the nightlife, because it would ease the following morning. Sara even defines drugs being a key to a normal life and allowing to function like the healthy people do. In this sense, the consumption follows much a preparing way since some of the consumers already know what is coming and from experience store medicines for this purpose.

Consumers also admitted to use certain brands or products after becoming familiar with them. For Milla, in particular, this was an important factor as it had turned her very brand loyal towards Burana. Consuming Burana evoked feelings of familiarity and even cozy, resembling her parents and childhood home where the product is used. As a result of habit, Milla had learned what kind of dose to take and how long the product affects, creating a strong partnership with the brand. Mika and Sara shared the same feelings with a nasal spray product, though Sara did not have a particular brand to buy. Through using the product already as infants they had developed close relationships with it, which vitalized during the flu season and

contained stories of their mothers, who in both of the consumers' lives play an extremely important role. Esa shared this type of experience with Aqualan L body lotion and Finrexin that were used in his home. Both relationships resulted him to not look at the prices any more or to compare the products.

There were dissimilarities in the consumers' life values of the sexes, as both males stressed individualism and authenticity whereas females had softer values such as being healthy and ecological. Further, Esa and Mika both emphasized the need-driven side of OTC products, which Lisa, Milla, and Sara expressed more in a sense of "not consuming medication without a purpose". When looking at brand relationships, Esa carried a close relationship with Finrexin and even admitted fondness, therefore overruling Fournier's (1998) thought of males not defining their emotions easily. This was the same with Mika, too, regarding the nasal spray that he admitted being addicted to though there was no disease present. Both male consumers shared long relationships with their favorite brands and the type that was already built in childhood and contained their mothers in the stories.

To all of the interviewees the pharmacy represented a reliable, safe place to purchase the products from. Though some experienced it not such a pleasant purchase environment, it was a place where they would obtain expert help for their need and also a relief. The setting thus emphasizes the need-driven role of the OTC products, too. As in their minds pharmacies do not sell "purposeless" products, neither should the products these stores sell be used for "no purpose". I will analyze the role of the pharmacy as a purchase setting further in the next chapter.

The life values consumers had seemed to also follow their purchase and consumption habits of OTC products. Lisa, who valued her children and caring for them along with health, described how she would purchase products and offer them to her children to look after. Sara followed this style in consumption of vitamins, which she used to cover for her unhealthiness, and thus pursued the life value of health. Ethical-awareness and avoiding medication that would be extensively experimented with animals were important factors for Milla, who also valued domestic products and ecological values. Mika and Esa both identified impulsiveness and individualism important for them. This restricted them from becoming attached to brands or buying "brand products" and explained their consumption being price-conscious. Despite, they both shared long brand relationship they had not thought of and became uncomfortable

when admitting that they do not evaluate the price when purchasing these products. In this sense, Fournier (1998) might be correct that male consumers are not eager to admit their feelings towards brands as openly as females, but it is still important to notice that these relationships exist though they would not be discussed directly or preferably.

The final, central theme Lisa, Mika, and especially Esa share is having proof that the product functions before trust can occur. This happens after using in Esa’s case pain medication and in Lisa’s case the vitamin B product, and experiencing themselves the products’ visible effects. To Esa, having a physical reaction as a result of the medicine was enough as for Lisa it was a blood test that unveiled her vitamin levels having risen. Mika also tells that his trust is constructed after having watched the product affect him, which occurred with Ibusal in London. Milla, on the other hand, does not emphasize the efficiency of the product, but to her trust and being familiar with the product are more important, though with moisturizers she values the functional benefits.

Prevention	Rescuing	Relieving	Habit	Applying life-values
<ul style="list-style-type: none"> <li>•Protecting from catching a disease or a symptom</li> <li>•Validating an unhealthy lifestyle</li> <li>•Reserving medication for the upcoming situations</li> </ul>	<ul style="list-style-type: none"> <li>•Saving the day; being able to do what is have to do when being sick</li> <li>•Preparing for rescue learned by experience</li> </ul>	<ul style="list-style-type: none"> <li>•Relieving either the symptom or the cause</li> <li>•"Leading a normal life"</li> <li>•Not feeling oneself sick, being able "to do what is fun despite the state"</li> </ul>	<ul style="list-style-type: none"> <li>•Close brand relationships derived from childhood</li> <li>•Feelings of familiarity and safety</li> <li>• Increased price tolerance and loyalty</li> <li>•Positive views of the brand not based on facts</li> <li>•Biased mental images</li> </ul>	<ul style="list-style-type: none"> <li>•Pursuing the role of a mother</li> <li>•Looking after children</li> <li>•Individualism - not limiting oneself to purchase certain brands</li> <li>•Ethical values - seeking for and maintaining with brands not experimented with animals</li> <li>•Relieving conscience - covering for bad habits</li> </ul>

Chart 2: Reasons for consuming OTC products

## **7.2 Trust and OTC products**

After describing what evokes consumption of medicines, I will now analyze how the consumer trust is built and discuss it through the viewpoint of the purchase environment, country of selling, and the role of manufacturer. As the prior section discussed the consumers' experiences in detail, I will now concentrate on depicting the larger phenomena. This is also necessary to support the upcoming, brand relationship section since trust seems to be a vital component of a successful consumer-brand relationship. This section will move a step further away from phenomenological methodology since I seek to develop certain general themes and also answer to the third research question of what constructs trust.

### **7.2.1 Role of the purchase environment**

Probably the most unanimous and positive thoughts the interviewees shared were on the role of the pharmacy when purchasing medicines. To all, the pharmacy is a safe place to purchase medicine and one of reliance. However, the consumers had varying levels of trust regarding this institution. Firstly, as Lisa would proceed as far as defining herself pharmacy-loyal and describing how in pharmacies "nonsense" is not sold, Mika stressed how he would purchase the recommended products only if the pharmacist argued well enough for them. In addition, Mika defined that while he was living in England, the pharmacies were much more convenient as one could also purchase candy and food there, and the shelf placement of drugs was more lucrative. Tuuli also joined this thought as she told that even the products resemble what the purchase environment is like: dull.

Pharmacists seem to play a key role in building consumer trust as do doctors in both recommending and prescribing the products. In particular, Esa told how pleased he is to receive help from the pharmacists, though he would not necessarily need it. He even mentioned that if his favorite brand were out of stock, he would rely on the pharmacist recommending another, presumably good product. Lisa stressed that she is extremely delighted that her favorite pharmacy keeps records of her purchases in the computer and the information is easily reached. She also told of an amiable pharmacist, who was always ready to help her and knew everything about OTC products, another reason why she would return to the particular pharmacy time after time. In addition, when Mika depicted a situation he bought vitamin D from a pharmacy, he told how he would first ask the pharmacist to come along and present him the

various choices, then decide. Though he had used the product and even defined his life value to be individualism, the pharmacist still maintains a key role in convincing him to purchase. As told in his consumption profile, he would even go as far as leaving the pharmacy if the service did not meet his standards.

When discussed whether the consumer would be willing to purchase their OTC products from grocery stores, differing opinions arose. Lisa is the most negative towards this transmission, as she fears that then children would be able to purchase these products and that the general tendency to use medication such as pain remedies would lower. However, she does admit that if the products were ones sold in pharmacies and familiar ones, it would not matter, again stressing the importance of the pharmacy creating trust in her mind, also in the product level. To Mika, this would be a change preferred very much as he would like to see the pharmacies being open until late hours and to have an environment of more interest. On the other hand, he defines as well that his purchases of pharmaceutical products are “done with sense”, so the color of the package does not consciously matter to him. Tuuli joins here by saying that she would like to purchase her products from a supermarket, too, and that in the pharmacy one does not experience feelings of “Wow, this is a new product, I want to purchase just this!” She tells that in the pharmacy, the products are not beguilingly placed and that it is a “clinical” place, the adjective used by Mika as well. On the other hand, Tuuli claims that she is pleased to pay more for a cosmetics product that is sold in a pharmacy due to it probably including less preservatives and color ingredients - a thought that could be biased.

### **7.2.2 Country of manufacturing – or selling?**

In addition to the importance of the pharmacy, the consumers felt it is the homeland that creates trust. The consumers had explained to themselves that the products are extensively controlled and the Finnish regulation ensures that there are no low-quality medicines on the market. This is a thought somewhat biased when considering the narcolepsy incident just a few years back, but the consumers seem to have forgotten about it. Moreover, Tuuli tells that she purchases Ibusal not only because it is the least expensive one, but it is also manufactured in Finland, which she had read somewhere. Milla goes even further in defining that the pain medication brand must be well known and something she is familiar with rather than simply

being manufactured or sold in Finland. Though to her the country of origin plays an important role, she would still not use Ibusal or other budget products simply because they are domestic.

When the consumers are asked whether it is the country of selling or manufacturing that convinces them, they do not seem to place much importance to the manufacturing side. Lisa explains that to her it is more important that the company employs people and conducts R&D in Finland than that the medicine would be manufactured exactly in Finland. She trusts that someone else could manufacture the medication as well if the same raw materials and proper instructions were available. If the manufacturing were done in Finland it would not affect her decision as much as the price. She mentions, though, that if there were two products priced exactly the same and the other one was manufactured by a Finnish company, she would take the Finnish one, a thought shared by Esa, Sara, and Tuuli as well.

The consumers' trust towards the country of selling extends as far as even utilizing prescription medication stated harmful in other countries, consuming a family member's prescription medication, and using products that are outdated. In Sara's case, she had told herself that it cannot be harmful if it is sold in Finland and that she could use her father's muscle relaxants because "in Finland everything is safe". Tuuli specified that she did not care that the Bepanthen lotion had expired a long time ago, because it could not harm her. Regarding trust in medicines being safe, Mika would go the furthest by using Tylenol that is not even sold in Finland and was supplied to him by his friend. This could denote that trust is not simply developed due to the drugs being sold in Finland, but rather generated due to the mindset that exists among the Finnish people in terms of "we cannot be harmed".

The reason behind the low importance of the country of manufacturing could be because the consumers do not necessarily know about the nationality of the pharmaceutical companies and their trust is hence composed of other reasons. Sara, Tuuli, and Lisa were not sure if Orion is a Finnish company, and Esa as well as Mika did not even remember the names of their favorite brands. However, they recalled the exterior features of the package and would describe them with detail. In addition, there was confusion with the brand names consumers would purchase, as Ibusal and Ibumax would be mixed as well as Multitabs and Multivita, and various other vitamin products. All of this shows that there is a growing need for better name developing, differentiation, and brand building along with spreading knowledge of the corporate values and origin to build trust that is based on the manufacturer.

### **7.2.3 The role of the corporation**

The role of the manufacturer seemed to have a minor place in the consumers' minds in creating trust. As written above, the consumers were not familiar with the pharmaceutical companies and when showed the advertisement that told Orion is nearly 100 years old, all of them were surprised. This, however, evoked very positive feelings in the consumers. Regardless of, they did not feel that the advertisement would indeed speak to them, though they found the information interesting. Tuuli and Esa also were rather upset about the commercials that would joke about sicknesses and felt that the pharmaceutical companies should develop their advertisement in a fashion that was neither too serious nor would jest about uncomfortable illnesses. Esa also accented that his favorite brand Finrexin is not manufactured by Orion, but neither did he know who manufactures it, which was also the situation with Mika and Nasolin. When asked how Esa knew it, he would remember that the package did not include Orion's logo, implying that consumers do note the corporate brand's communication at least to certain extent. However, though the vitamin product Calsorin D3 is currently much advertised in television with the corporate name stressed in the advertisement, Lisa did not know who manufactures this product, which she shares a rather close relationship with.

### **7.3 Brand relationships**

The final section of the empirical part will unveil the brand relationships the interviewees shared with OTC products and explain how these have been constructed. For the upcoming discussion and theoretical analysis, I will use Fournier's (1998) article already here when describing the brand relationships and thus elaborate the first and the second research questions.

#### **7.3.1 Brand relationship forms of consumers**

By using Fournier's typology of consumer-brand relationships (1998), the interviewees' relationships with OTC brands may easily be understood and further examined. In the following page, there is a table summary of the respondents' brands and their categorization according to this. However, certain brands were discovered to contain qualities of two or more relationship types, which made the division challenging. Moreover, the relationships the consumers described had once contained attributes of a certain brand relationship and currently another one's. No brand relationships characterized as *Dependencies*, *Secret Affairs* or *Enmities* were found.



Table 3: Consumer-brand relationship forms of the research (Fournier, 1998)

Brand relationship type	Case examples
<b>Arranged Marriages</b>	<ul style="list-style-type: none"> <li>- Tuuli: Vitamin D resulting from the request by her grandmother</li> <li>- Sara: Iron tablets &amp; magnesium bought by her mother</li> </ul>
<b>Childhood</b>	<ul style="list-style-type: none"> <li>- Esa: Aqualan L</li> </ul>
<b>Friendships</b>	<ul style="list-style-type: none"> <li>- Lisa: Multitabs</li> </ul>
<b>Kinship</b>	<ul style="list-style-type: none"> <li>- Tuuli: inheritance of Aqualan L brand from her mother and cousin</li> <li>- Sara: consumption of lotions bought by her mother from the pharmacy</li> </ul>
<b>Best Friends</b>	<ul style="list-style-type: none"> <li>- Milla: Burana</li> </ul>
<b>Committed Partnerships</b>	<ul style="list-style-type: none"> <li>- Esa: Finrexin (“partner of trust”)</li> <li>- Lisa: Calsorin D3 &amp; vitamin B brand</li> <li>- Mika: Nasolin</li> <li>- Tuuli: Bepanthen</li> </ul>
<b>Marriages of Convenience</b>	<ul style="list-style-type: none"> <li>- Lisa: switch to Losec and other heartburn brands due to Pepcid duo always being out of stock</li> <li>- Mika: Tylenol (characteristics of a courtships as well)</li> </ul>
<b>Enslavement</b>	<ul style="list-style-type: none"> <li>- Lisa: use of Panadol, resulting from her not being able to use Burana</li> </ul>
<b>Avoidance-driven</b>	<ul style="list-style-type: none"> <li>- Lisa: Pepcid duo, consumption deriving from switching Nexium</li> </ul>
<b>Courtships</b>	<ul style="list-style-type: none"> <li>- Sara: Cofi-tabs</li> </ul>
<b>Fling</b>	<ul style="list-style-type: none"> <li>- Mika and Tuuli: Aco creams</li> <li>- Mika: Unikuu</li> </ul>
<b>Casual Friends / Buddies</b>	<ul style="list-style-type: none"> <li>- Esa: Voltaren</li> <li>- Mika: Vitamin B and D products</li> <li>- Tuuli: Multitabs</li> </ul>
<b>Compartmentalized Friendships</b>	<ul style="list-style-type: none"> <li>- Sara: Ice bags, Bepanthen, and Ibumax/Ibusal</li> <li>- Lisa: Laxoberon</li> <li>- Tuuli: Vi-Siblin</li> <li>- Milla: Ceralan</li> <li>- Mika: Ibumax/Ibusal</li> </ul>

Firstly, there are *Arranged Marriages* that have started by a third party introducing the brand to the consumer. For Tuuli, this was her grandmother nearly forcing her to commence taking vitamin D for long-term purposes. Perhaps due to the start of the relationship by a third party, Tuuli was not extremely committed to the brands and would also consume the product when remembered. However, since her grandmother plays such an important role in her life in terms of being “a health guru”, she was convinced to begin consumption of this product even if it was irregular. Regarding Sara, Lisa would recommend using magnesium and OTC iron tablets during the period, another brand relationship formed by the preference of a third party and thus resulted in an *Arranged Marriage*.

*Childhood Friendships* to the consumers would resemble from the past self and provide comfort. These relationships would be infrequently engaged in, which Esa’s consumption of Aqualan L is a perfect example of. He would identify this consumption deriving from his childhood home, resembling him from the past, and being very infrequent, as he would purchase the body lotion when his skin was absolutely in need of it, generally during winter. For Lisa, it would be same with Multitabs that she identified was used in her childhood as well. The usage was also rather infrequent, as she would usually purchase this brand for her children. The usage of Multitabs along with memories of Aspirin and Disperin, though she would no longer use these brands due to stomach problems, could also be labeled as *Kinships*, relationships deriving from lineage ties. This relationship type also existed in Sara’s and Tuuli’s consumption of body lotions purchased from the pharmacy, in Tuuli’s situation Aqualan L as it would remind her of her mother and her cousin, who introduced the brand to her during her early years.

Though no relationship of *Dependence* was found, Milla’s consumption of Burana much reminds of the *Best Friend* type. She shared very intimate feelings with this brand, as the brand would support her life value of ethical-awareness in not experimenting with animals that much and being domestic, as well as providing her feelings of safety and “home”. As she described, the relationship was so strong due to there not being any negative experiences with the brand, thus Burana continuously providing positive feelings for her. However, there was no *Dependence* either due to Milla identifying that if the brand was out of stock, she could easily purchase another premium analgesic medication brand’s products, though this had never occurred.

The second strongest relationship type, *Committed Partnerships*, was found in Esa's, Lisa's, and Mika's consumption. Esa would purchase Finrexin time after time, though identifying himself extremely price-conscious. As he described, Finrexin is a "partner of trust and commitment" and the consumption derives from his childhood. Though it might have begun as a *Kinship*, implying that Finrexin was first bought by his mother, it had developed to a quite intense and voluntary relationship during time. Aqualan L could also be labeled as a *Committed Partnership*; however, it is categorized as a *Kinship* because Esa did not regard it as important as Finrexin. Similarly, Mika shared a *Committed Partnership* with Nasolin, a nasal spray that broke the rules of price-consciousness and followed long-term consumption. The relationship was so strong that Mika would continue the usage even when he was not suffering from a cold, almost one of *Dependence*. Finally, Lisa shared committed relationships with Calсорin D3 and a vitamin B brand, though after an *Arranged Marriage* of these brands being recommended by a doctor. Despite, in time she had developed such an intense relationship with these products that she would keep them with her other, daily medication and thus consider them nearly the same level as prescription medicines.

*Marriage of Convenience* existed in Lisa's use of Losec and other heartburn brands after Pepcid Duo always being out of stock in pharmacies. Thus, the consumption was long-term, but lacked deliberate use and was more influenced by the environment, which evoked negative feelings in her as these products were not as effective as Pepcid Duo. The relationship, therefore, could also be labeled as an *Enslavement*, because she has to use these other brands due to the circumstances of needing relief, but not being able to purchase the brand of preference. This was also the situation with Panadol, which she told was not effective at all, but since she could not use acetylsalicylic acid or ibuprofen containing products, she would be forced to use this OTC painkiller. Again, this would evoke negative feelings in her because she would feel the consumption thus being nearly "purposeless", the worst feeling she could experience with consumption of medication. On the other hand, consumption of Pepcid Duo would follow an *Avoidance-driven* relationship, as by using this brand she would be desisting from the use of Nexium, an expensive, prescription-requiring heartburn brand. Mika experienced both a *Marriage of Convenience* and a *Courtship* with Tylenol, because he had taken it for alleviating reasons, but highly preferred the product and was interested in developing a long-term relationship with this brand. However, since it is not sold in Finland, this is not possible, which caused negative feelings and could further result Ibumax/Ibusal to be labeled as an *Enslavement*.

One of the examples of an evolved brand relationship would be Sara's use of Caffeine tablets. It started out as a *Fling*, which is a common way of Sara's brand relationships to begin due to her impulsive and disloyal purchase behavior. Quickly after the intimate experiences she shared with the brand of it helping her through a painful breakup and simply providing aid in daily life, she started to grow attach to it, thus implying a *Courtship*. Following, Mika and Tuuli are both currently experiencing a *Fling* with Aco brand of skincare. They considerably like the brand and emphasize its great qualities, yet define that are already looking for switching to a new, better brand. They, therefore, are not searching for a committed relationship, but one of trying something new, which could be explained by their impulsive nature.

Tuuli also shares a *Casual Buddy* type of relationship with a multivitamin brand called Multitabs that she claimed to be Multivita during the interview, but was revealed to be Multitabs by the picture she provided. Tuuli told that her consumption is infrequent and that she does not actually believe in the brand helping her. Moreover, she is annoyed by the advertisements that to her do not represent authentic values. Mika shares the same thoughts regarding all vitamin brands and both of these consumers' attachment towards the brands is rather low, as they would only consume the product if remembered. Sara joins in with somewhat similar behavior with her consumption of vitamins: she expects the product to balance her lifestyle and thus believes in it. With Esa, Voltaren could be categorized as a *Casual Buddy* since his belief and expectations towards the product are low, the usage infrequent, and experienced effect minimal.

The final relationship type easily identified and perhaps most commonly experienced by the interviewees is *Friendships*. These relationships are highly specialized, but contain high interdependence and are situation-specific. They are enduring ones, as can be seen from Sara's usage of the specific ice bag brand and Lisa's use of a constipation medication called Laxoberon. Tuuli also shares this relationship with a gastrointestinal medicine called Vi-Siblin that she relies on in situations of stomach problems. Regarding Sara, the relationship may also be seen in her consumption of Ibusal/Ibumax and Bepanthen. Milla's relationship with Ceralan can, moreover, be understood by labeling it as a *Compartmentalized Friendship*, because there is high interdependence and commitment, but it is not as involved as a *Best Friend* type of a relationship. Mika's relationships with Ibumax/Ibusal also follows this relationship type,

since it is not extremely loyal but situation-specific. All of these relationships are characterized by easy entry and quitting.

### 7.3.2 Brand Relationship Quality: Case Milla and Burana

Fournier (1998) introduces five attributes that characterize a strong *Brand Relationship Quality*. In this part, it seems reasonable to use a particular brand relationship as an example due to it being the strongest one and thus providing most insight regarding the theory. This relationship is the one shared by Burana and Milla, which was defined as the *Best Friend* type in the above section. Though from the categorization, *Dependence* would be the most powerful one, no one admitted having such, which may be explained by the consumers not wanting to become dependent on OTC medicines, or in fact with any medicines as it is not healthy.

The first dimension Fournier described implies a strong brand relationship was *Love and Passion*, which was found in Milla's case, but more in a form of fondness that had developed over time. Milla would carry Burana in her purse all the time, and if she did not have the product available, she would not feel comfortable. Neither would she feel pleasant using other, inexpensive medication, but rather Burana because it is a brand she is attached to. In addition, her perception of Burana solely follows positive attributes, as she uses such adjectives as "friendly", "partner", and "trustworthy" of this brand. *Self-connection* may also be seen here, when Milla depicts her values of purchasing domestic products and not supporting animal experiments. With Burana, she has reasoned herself that since it is such an old brand, it does not harm animals that much and therefore is more ethical. Moreover, Milla knows that Burana is manufactured in Finland, which brings her comfort of supporting domestic brands that is a value derived from her childhood and parents' example. She also told how her parents had relied on Burana for a long time, indicating another self-connection. In particular, it is interesting that Milla does not emphasize the strength or functional qualities of Burana, but rather prefers to talk about more abstract values.

*Interdependence* is also present in Milla's consumption. Though the usage is not so frequent, which regarding OTC analgesic drugs is justified since she does not use the medicine for any type of sickness, she has developed certain consumption rituals. As was described in her consumption profile, she would prepare for a movie after work by assuring there was Burana

available due to knowing that the day would yield a terrible headache. In addition, she had developed a special dosage of taking only half of a tablet after learning from experience how strongly and long the product affects. Milla also experienced high levels of *Intimacy* with the brand, but not because of the product being superior due of its functional qualities, but rather the personal connections that she shared with the brand, resulting from long-term usage and experiences with the brand. She shared an experience very personal to her that had strengthened her trust towards Burana. This all has created her relationship extremely strong and resistant towards competitors' brands.

The final attribute, *Relationship Quality*, is well seen in Milla's explaining of:

M: - such as Burana, probably they do those [animal tests] to some extent like every pharmaceutical company, but since it's such an old medicine it does not have to be tested that much.

In this part, Milla's trust and relationship quality is best seen in, as she has explained and developed her own biases of the brand that are not based on facts but merely exist in a mental image. After all, she feels that the brand has her feelings in priority, is one of dependence, and will deliver what it promises rather than what she would fear, which would be uncontrollability of her actions and acting against her life values. Hence, Fournier's (1998) *Brand Relationship Quality* may easily be seen in this specific relationship.

## 8 DISCUSSION

The second final chapter will unify the empirical part and theory as well as suggest practical implications for the management. The most central themes and literature findings will be presented and the research questions answered. This chapter will include my own personal suggestions regarding branding and the following strategic decisions. Theoretical framework and the case company are also examined from a critical point of view. Afterwards, limitations and suggestions for future research will be presented and the final chapter of this thesis contains conclusions in a form of introducing the future trends of the industry and how proper branding is a vital component of it.

### 8.1 Brand relationships with the corporate brand

The topic of the thesis addressed brand relationships between consumers and OTC brands as well as the corporate brand. The practical aim was to discover whether it would be suggested to utilize corporate brand in product marketing or not (Laforet & Saunders, 1994; Berens et al., 2005; Laforet, 2011). For this clear suggestion the answer is negative, because the corporate brand of Orion at present is not recognized enough to provide differentiation to a consumer, except for very educated and involved individuals (Moss, 2007; Shamma & Hassan, 2011).

If, however, Orion was to commence a strong development of their corporate brand, emphasizing attributes that are important for the consumers such as trust, the quality of being Finnish, and having old and ethical brands should be used. In addition, the corporate brand should be brought closer to an individual consumer in terms of marketing. Only after that would it be justified to be utilized in the product level. Currently, the corporate brand is simply too weak (Moss & Schuiling 2004; Moss, 2007) to work as a cue for the consumer in a market that still principally seems to be driven by price. The answer to the first part of the research question then is that consumers do not seem to maintain any particular relationships with the corporate brand of Orion, as they regard it too distant. *Branded Identities* is, therefore, the suggested corporate brand dominance strategy to use for now in product marketing (Laforet & Saunders,

1994; Nelson, 2002; Berens et al., 2005), which already seems to be the status quo in the industry.

However, if the corporate brand were strengthened and afterwards utilized, it is suggested that it would not be applied to product lines that are not close to the corporate business strategy; manufacturing medical products (Berens et al., 2005; Laforet, 2011). With vitamins and cosmetic brands, such as Multivita and Favora, the product brands should only be used because the corporate brand does not bring any extra value to the marketing, especially since the consumers have very neutral thoughts towards it. If, however, a new OTC drug were brought to the market, Orion's brand could be leveraged (Uggla, 2006), but to what kind of extent is another chapter due to the weakness of it (Moss, 2007).

What is interesting is that companies that traditionally have strongly exercised the branded identities strategy have recently begun to indicate signs of endorsed branding in their product marketing (Laforet & Saunders, 1994). This has clear benefits of cost effectiveness, easiness of leveraging brand extensions, and gaining awareness of the existing customers. In this situation, however, the companies are acting against the suggestion of only utilizing corporate brand when there is a fit between the product brand (Laforet & Saunders, 1994; Berens et al., 2005; Laforet, 2011), and Laforet's claim of the companies returning to practice mono branding strategy.

Not using the corporate brand in the consumer level also brings certain benefits, since the corporate brand dominance strategy contains risks (Saunders & Fu, 1997). Namely, the risks may exist in one of the products failing and this mirroring to the other products. I did not find this in my empirical research. However, consumers did frequently emphasize that their trust towards a specific product was supported by "the product never having failed". This was also the thought with the pharmacy, as some consumers depicted how they would trust the institution so vastly because they had never confronted negative, product-related experiences and in general were satisfied (Hess & Story, 2005). Thus, it is questionable whether the corporate brand should be avoided when marketing already powerful brands such as Burana and Aqualan L because they simply do not need it and it could present significant risks. On the other hand, if Orion was to begin strong marketing of its corporate brand and executed the strategic choice of utilizing it in the product level, it could be applied to the strong brands' marketing to leverage the associations of these products and their customers. Further on, the strong



product brands could act as “mini corporate brands” and their presence utilized in novel, similar products’ marketing to gain benefits.

## **8.2 Brand relationships and consumption of OTC products**

When considering the actual brand relationships, it is evident that consumers maintain strong feelings among with private and emotional histories with even such rational-driven products as medicines that operate in a market suffering from intense price competition (Moss, 2007; Moss, 2008; Veloutsou & Panigyrakis, 2010). The example by Milla and Burana well authenticated Fournier’s (1998) theory of brand partner quality, as did the consumers’ relationships with OTC brands the typology of relationships. However, certain relationship types as such as *Dependencies*, *Secret Affairs* and *Enmities* were left out, but this was explained by reason in the last chapter.

What becomes fascinating, however, when looking at the theory is the formation of trust. Blackett and Harrison (2001) explained pharmaceutical products to demand especially high trust from the consumers. I discovered that trust was something the consumers regarded important but had developed by the power of the culture and environment. It was not the manufacturer that to most brought comfort, excluding Milla, but the spirit and general thinking among the nation in terms of “we live in a safe place, where we cannot be harmed”. This would drive the consumers to use expired medicines, purchase brands they had never heard of, use other people’s prescription products, and even consume medicines that are not sold in Finland. In this sense, various studies’ (e.g. Usunier & Lee, 2000; Sanyal & Datta, 2011; Kauppinen-Räsänen et al., 2012) claim of the country of origin driving the purchase decision was not found here, which I reckon was because this attribute is not utilized in the marketing as efficiently as possible. All in all, the consumers did not regard medicines as a “scary” product, though they would prefer to avoid consumption.

I detected several reasons driving consumption of OTC products in my empirical part. The most significant, regarding the methodology and theory (e.g. Fournier, 1998), was that consumers exercise their life values when consuming even the most dull products, OTC medicines. To a consumer, selecting an analgesic medication brand is much more than solely the pharmacist convincing them to purchase a product they would be completely clueless about. It

is about the consumer's feelings, memories, people around, culture, and habits. By purchasing a vitamin product the consumer could develop feelings of caring for her adult children's health, a life value shared by the whole family. Moreover, the product could act as a savior for the consumer. Taking analgesic drugs would enable the consumer to enjoy his vacation like a healthy person though he was suffering from a severe flu. Despite a terrible personal crisis, the consumer would be able to perform needed acts; for example, take the exam in the following morning of a bad breakup. Or by using medicines, the consumer would be able to lead a "normal" person's life and compete even in the national level in sports despite suffering from asthma. This all indicates that though consumers would have some questions with OTC drugs in terms of addictions and pharmaceutical companies in whether their actions were always done in favor of the end user's, the consumers regard the products safe, positive, and reliable, sometimes even as heroes of their lives.

### **8.3 Need for better brand awareness building**

The study validated Moss and Schuiling's (2004) claim that pharmaceutical companies are not exercising proper brand naming strategies, especially in utilizing the corporate brand name in product brand marketing. This would provide the associations of the corporation to the product level and could be used more extensively in the future, if the corporate brand was strengthened. I also found correct what Moss and Schuiling wrote about descriptive names of medical brands, which are based on the compound or the disease and the most common way of naming, to lead to consumer confusion. Moreover, the consumers would frequently mention Burana as a synonym for painkiller, again validating Moss and Schuiling's statement of short and unique names working the best.

The consumers I interviewed were confused whether it was Ibusal or Ibumax, Multivita or Multitabs they were using, and would not even recall the vitamin D or B brands consumed because these would have a name of "vitamin D" or such, which for the consumer is too unrecognizable. This is something that should be paid attention to, especially since Laforet (2011) described how proper brand names may have a significant impact on consumer purchase behavior, and as my empirical part proved, the consumers would purchase either one of the similar named products due to not noticing any differences. This stresses the importance of the brand name that in fact is one of the most central components of efficient brand posi-

tioning. Moreover, utilizing corporate branding efficiently and properly may also be exercised here, since Ladha (2007) suggests that the limited lifespan of pharmaceutical products could be stimulated by attaching the corporate name more strongly to product brand names.

#### **8.4 Consumer trust**

Hess and Story (2005) defined that consumer commitment is a sum of satisfaction and trust, the latter which was formed by personal and functional connections. Though some consumer would experience both trust and satisfaction, commitment would not be developed because of their impulsive nature and willingness to experiment with new products. This relationship type in Fournier's (1998) typology reminds of a *Fling*, and I discovered two of these types of consumers in my research. Despite, these consumers also had certain brands that they would remain with and not try new ones. In my experience, this type of behavior cannot be understood by simply evaluating functional and personal connection let alone satisfaction, but it is something more complex that is developed over time and affected by certain people in the consumers' lives. However, I discovered that consumers build their relationships mostly based on either personal or functional connections, and though ones including personal connections seem to be the strongest (Milla and Burana), functional connections also play a key role and can lead to a strong relationship (Milla and Ceralan). It is also worth mentioning that as Papista and Dimitriadis (2012) found, strong relationships are not necessarily ones engaged in everyday.

Trust is also affected by the purchase environment. The consumers described how buying the OTC products from a pharmacy creates feelings of safety. On the other hand, the pharmacy was seen a purchase environment as rational as the products and the consumers did not think that the environment evoked purchase desires. By branding the products better, for example, focusing on the displays and brand communication already in the point of sale situation, this problem could be overcome. Perhaps a suggestion is to move further down to the same techniques strong FMCG brands utilize, such as efficient placement planning and brand name communication. Moreover, if OTC products in the future were available in retail stores, this would ease the transmission from pharmacies, because the consumers would easily identify the products they had bought from pharmacies.

## 8.5 In search of authentic pharmaceutical advertising

Authenticity (Malär et al., 2011) was discovered important for the consumer in terms of also OTC brands, especially in advertising. The consumers expounded Orion's corporate brand advertisement to be something that first irritated them, because of the hidden means of taking advantage of the delicate issue of the War. Moreover, they would see pharmaceutical advertising as something that did not speak to them, because the methods of affecting consumer emotions were wrong and would at the end simply annoy. This was the situation in using over appropriate presentation of only the functional product attributes or humor in the product marketing, which consumers found tacky and fake. Originality, on the other hand, was something they would prefer along with stressing the quality of being Finnish.

In terms of advertising, some academic studies (e.g. Blackett & Harrison, 2001; Friedman & Gould, 2007) have identified direct-to-consumer advertising (DTCA) the rising trend and key for differentiation in the pharmaceutical business. According to my empirical part, it would work since the consumers indeed differ in terms of what drives their consumption of medicines. Digital marketing would offer methods for DTCA through blog co-operation and social media. Nevertheless, according to Friedman and Gould, this is not properly understood, and consumers experience the marketing rather negatively since benefits and risks of the advertised products are not communicated well enough. If this were duly conducted, affecting the consumers personally would be an efficient method (DeLorme et al., 2010) of also emotional branding and bringing the brand closer to the consumer, but of course this presents certain challenges due to the Finnish legislation.

It should also be noted that if the corporate brand dominance strategy is desired to be brought to the individual brand level, advertising the logo simply along with brand commercials is not sufficient because this does not evoke salience in the consumers' minds. Firstly, the company would need to begin quite an extensive corporate brand campaign to have something for the consumers to clasp, because simply mentioning a logo in the advertisement is not powerful enough for the consumer to remember after being exposed to dozens of similar types of advertisements during the day (Moss, 2007).

Malär et al (2011) described how consumers would either be attracted to advertisements appealing to consumers' real selves or the ideal selves. From the empirical part, it may be seen

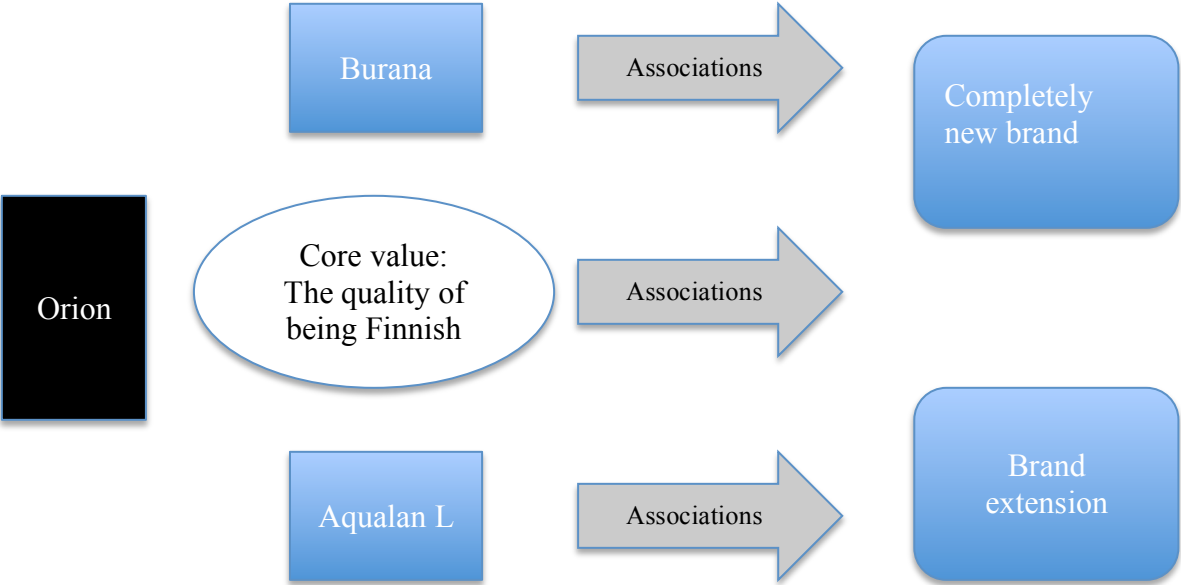
that some consumers would prefer appealing to the ideal self; for example, the healthy person they wanted to be by using vitamins. On the other hand, Milla's example revealed that she was attracted to Burana because the brand served her extremely personal life values, thus also appealing to the real self. Milla's example, moreover, verified Malär et al.'s claim that actual self-congruence led to higher emotional brand attachment. Indeed, she expressed herself by consuming Burana that supported the ethical and domestic values.

## **8.6 Practical implications**

Though Orion is somewhat distant and unknown for consumers, its advantages are that there are no negative associations, as there are with, for example, Nestlé. Therefore, concentrating on strengthening the corporate brand so that it would become meaningful to the consumer provides extensive opportunities. In fact, there are signs that the large pioneers of consumer behavior, FMCG companies, are now altering their strategies towards applying corporate brand in product marketing. Various academic studies have further proven the relevance of branding in the medical field (Blackett & Harrison, 2001; Kauppinen-Räsänen et al., 2004; Moss & Schuiling, 2004; Schuiling & Moss, 2004; Moss, 2007). Consequent of corporate branding, brand extensions might be developed to benefit from the associations and existing consumers. In addition, it is interesting that some consumers regarded the pharmaceutical business not that innocent, but regarding Orion they did not hold these thoughts.

What could be exercised in practice would be to, first of all, alter the slogan of the corporate brand that the consumers did not even remember as it is not differentiating enough to portray the core benefits of the company. Here such adjectives as trustable, high quality, and the quality of being Finnish that lie in the core of the whole business should be utilized. Though the products were not manufactured in Finland, this does not hinder because the company is Finnish and holds long traditions in the culture, therefore differentiating it from others. As consumers expressed, if there were two products priced the same, they would choose the Finnish one. Moreover, regarding their favorite products they were highly price tolerant. Being Finnish and products belonging to a Finnish company could thus be more efficiently communicated, in particularly since Pecotich and Ward (2007) found that consumers employ the company's quality of being domestic as a risk reduction cue. Indeed, some of the consumers were not even sure Orion is still a domestic company.

Stressing the quality of being Finnish, in particular, could be exercised with known brands such as Burana and Aqualan L, which are both manufactured in Finland, in order to transfer this association. As a result, customers and profits would be leveraged to Orion’s other products as well.



*Chart 3: Utilizing the new core value in brand hierarchy*

Practicing more efficient advertising by appealing to consumer emotions should also be a method to consider. Instead of indicating body parts where the analgesic drug affects, the advertisements should include softer and more personal aspects to the consumer. When looking at American pharmaceutical commercials, this is a method widely used in appealing to the values of the target group instead of only presenting the functional benefits. However, the Finnish legislation ought to be kept in mind here as well as transparency and utilitarian image.

The management also needs to note that even though drugs are functional products instead of “candy” or something to be enjoyed, the brands still represent emotional memories of people and places deriving from as far as the consumer’s childhood. These consumers do not simply rely on price when selecting products, neither is the product purchased because it would be

the most efficient one. Even OTC medical brands can contain strong feelings and act as partners in daily routines, or as means for saving a person’s day. Focusing on these, differentiating attributes from other consumer products is a method of building consumer attachment and should, therefore, be stressed in marketing.

The final managerial suggestion is to comprehensively consider entering the retail market. Especially in the future, if OTC painkillers were allowed to be sold in grocery stores, this is something to be thought of. After all, the company should always maintain the consumers’ preferences as top priority, especially due to the altering role and increasing empowerment of an individual customer. If purchase desires are to be formed and the consumers to be provided with the feeling of being in control, this is a method worth considering. In the empirical part it was discovered that nothing negative could come out of this in the minds of consumers, if the brands were ones sold in pharmacies as well, and products the type that contain no large risks. Entering the retail channel above all would require efficient corporate branding that should immediately be started, because in the future there could be an opportunity to market such products as “Orion’s OTC pain medicine” in grocery stores.

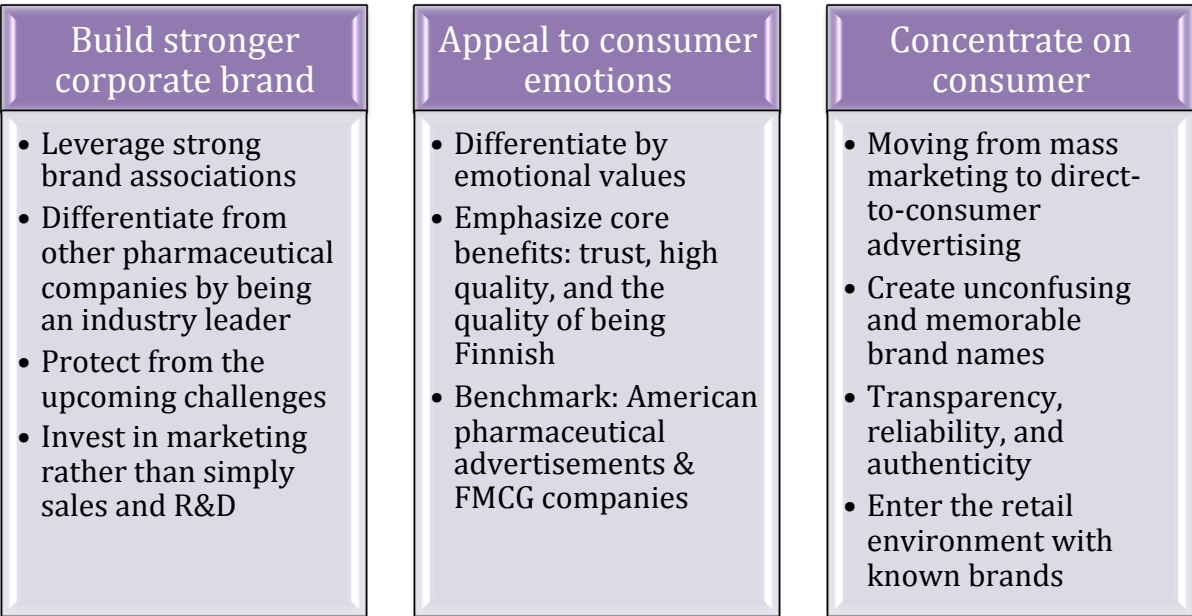


Chart 4: The most central practical implications

## 8.7 Limitations and suggestions for future research

The research includes certain limitations. The purpose of neither this study nor the interviewee group is to present any simple and universal truths about the subject, but rather to explain how the consumers experience consumption of OTC medicines and brands. Consequently, the consumers did not distinguish prescription medication from OTC products all the time, but would discuss medicines in general. The only time some of them would stress the difference was when asked about what actually separates these two from each other. For this reason, the empirical part may at times also discuss the role of prescription medication.

Moreover, though existential-phenomenological methodology suggests not to compare the consumers' experiences with each other, but merely describe them as idiographic cases, I have analyzed these differences as well since it seems proper when investigating such a new phenomenon and one that is so complex. The limitation with brand relationship typology is that it is based on my own analysis and many of the relationships could have belonged to two or more groups, so I have chosen the one that matches the best. The final limitation would lie in the methodology as it investigates consumer narratives, which are not questioned or asked what causes them. The experiences are rather subjective views that may be biased.

It would be interesting to concentrate on a particular relationship type of Fournier's (1998) typology and investigate it in the pharmaceutical field. *Dependencies* would be this type of relationship to study as well as the strong relationship types, such as *Best Friends*. In addition, the participant group could include various types of consumers to see if this affected, though phenomenology stresses that demographic attributes do not affect the outcome of the research as all consumers share own, differing experiences and stories with brands. However, this type of research could be conducted in a different culture to see if the cultural issues indeed affect trust formation. Finally, a study where the difference between an industry including strong brand relationships and pharmaceutical business could be conducted. I would also suggest researching the effect on consumer behavior of OTC products being sold in the retail environment. Properly speaking, there are multiple interesting topics emerging from the thesis that would deserve to be researched.



## 9 CONCLUSIONS

From the empirical part it can be seen that there is a need for better brand building in corporate level as well as product level. This offers a new business strategy to pharmaceutical companies that have trouble in advancing new blockbuster medicines or with traditional marketing channels such as affecting doctors or pharmacies by personal selling. The pharmaceutical industry indeed is experiencing certain quite extensive changes as legislation and regulations are tightening and new geographical areas offering opportunities for manufacturing bargain remedies in masses. Focusing solely on R&D and sales is an old-fashioned method and the companies need to maintain the pace of the evolving consumer behavior. Moreover, the OTC market is expected to expand in the future and thus offers significant opportunities for the companies in terms of also concentrating on branding.

Nevertheless, branding of products is not the sole rising trend to eclipse the above changes. Foundations of specific diseases such as breast cancer have commenced to brand conditions in order to spread knowledge of the sicknesses and fundraise research (Angelmar et al., 2007). For pharmaceutical companies this offers an opportunity to be associated positively in the minds of consumers. However, one could question whether this type of behavior is ethical, or even if product branding is ethical in terms of medication, because the aim is to develop higher price tolerance and benefit the company. To diminish the ethical concerns, the companies thus should invest in building the utilitarian image and stressing that the actions are conducted in order to aid the patients and consumers instead of only providing financial benefit for the company. Here, the ability to appeal to consumers' emotions is in particular needed. Hence, practicing it efficiently should already be started, in addition to building a corporate brand that indicates concern for the consumers' needs.

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## 11 APPENDICES



### Kun sota syttyi, tarvittiin suomalaista lääketehdasta

Orion perustettiin itsenäistymisvuonna 1917 suomenmieliseksi lääkkehteaksi. Orion oli päävastuussa koko sota- ja kotirintaman lääkehuollosta, ja tänäänkin suomalaiset luottavat lääkkeisiimme. Lähes ainoana lääkkehteana Orion on pysynyt Suomessa ja suomalaisessa omistuksessa hyvinä ja huonoina aikoina.

**ORION**  
**PHARMA**  
Hyvinvointia rakentamassa

*Picture 2: The corporate brand advertisement of Orion*

Table 2: Background data of the interviewees

	<b>Mika</b>	<b>Sara</b>	<b>Lisa</b>	<b>Tuuli</b>	<b>Esa</b>	<b>Milla</b>
Gender	M	F	F	F	M	F
Age	24	21	52	25	25	25
Hometown	Eastern Finland	Capital area	Capital area	Helsinki	Helsinki	Helsinki
Occupation, lifestyle, life values	Postgraduate of two degrees. Has held two jobs while studying. Definition: Busy, young, and urban male consumer. Regards succeeding and hedonistic values important. Consumption driven only by need and price-consciousness.	Student, works occasionally in a fashion retail shop. Former athlete, competed in the international levels in martial arts. Definition: Rather recently moved out of the childhood home, young, athletic, and likes to party. Consumption driven by prices, but also domestic products and ethical issues important.	Retired for health reasons, degree in economics. Definition: Permanently sick, held a long career in career counseling. Enjoys softer values in life such as looking after her children and maintaining good health.	Communications consultant, degree in business. Definition: At the beginning of her ambitious career, busy female consumer. Steady earnings, regards also softer values important such as spending time in her summer cabin, and ecological matters.	Officer in the military, degree in military sciences. Actively practices various kinds of sports. Definition: Opinionated, initiative. Wants to make decision by himself and regards individualistic values important. Highly rational and logical thinking as well as “all or nothing” philosophy.	Postgraduate, works part-time in a manufacturing company. Definition: Finishing her degree, and about to enter working life. Regards ethical values important, is a vegetarian and stresses animal rights. Is not as price-conscious. Initiative and information seeking way of consuming. Values familiarity and safety.
Marital status	Unmarried, lives with his sister	Unmarried, shares a student apartment with 2 other students	Married, 2 children	Common-law marriage	Unmarried, lives alone	Unmarried, lives alone
Length of the interview	1) 44 2) 26 <b>70</b>	<b>87</b>	<b>77</b>	<b>81</b>	1) 33 2) 42 <b>75</b>	1) 77 2) 9 <b>86</b>
Brands consumed and discussed	Nasolin, Ibusal/Ibumax, Unikuu, Rennie, Burana, Cough medicine, Aco, vitamin D	Ibusal/Ibumax, Imodium, Multivita, Nasolin, Ice bags, Nasal spray brands, Burana, Multivitamins, vitamin D	Aspirin, Pepcid Duo, Calsorin D3, Burana, Multitabs, Laxoberon, Panadol, lotions	Bepanthen, Multivita/Multitabs, Vi-Siblin, Aqualan L, Ibusal	Finrexin, Ibusal/Ibumax, Burana, Aqualan L, Duact	Burana, Ceralan, Ibumax