



EFFECTIVE MESSAGING ON PRESCRIPTION DRUG PRICING



The convergence of two trends over the past several months creates an opportunity to advance progressive change on prescription drug pricing. First, prescription drug prices emerged as a top concern among the public when thinking about health care costs. Second, high-profile examples of questionable prescription drug company behavior – the overnight price increase of Daraprim by Martin Shkreli’s Turing Pharmaceuticals, Gilead Sciences’ pricing for the hepatitis C medication Sovaldi that resulted in Congressional investigations, and Pfizer’s proposed tax inversion – brought a renewed focus on the ethics of prescription drug pricing. While this represents a critical opportunity on the issue of prescription drug pricing, the ways in which critics, advocates, and analysts talk about drug prices and policies need to be consistent and up to this enormous task.

Toward this end, Anat Shenker-Osorio and Lake Research Partners conducted new messaging research to help advocates connect with Americans and increase support for a progressive agenda to reduce high drug prices. The research shows that the public strongly supports reform. For example, a 70 percent majority of Americans think the government should be doing more to regulate prescription drug prices to make them more affordable. Eighty-nine (89) percent of Americans agree prescription drugs that are developed with taxpayer dollars should be made affordable to every American. More specifically:

- ✓ **Making Prescription Drugs Public Goods.** Two-thirds (67 percent) of Americans favor making prescription drugs public goods paid for by the federal government and available to all Americans at an affordable price, while 25 percent oppose and 8 percent are undecided.
- ✓ **Allowing Medicare to Negotiate Lower Drug Prices:** Seventy-two (72) percent of Americans favor allowing Medicare and other government programs that pay for prescription drugs to negotiate prices directly with drug companies, while 18 percent oppose and 9 percent are undecided.
- ✓ **Ending Pay-for-Delay:** Seventy-two (72) percent of Americans favor making it illegal for a drug company to pay a different company that manufactures generic drugs to delay the release of a generic version of their drug.
- ✓ **Reforming Patents:** Seventy-three (73) percent of Americans favor regulating patents on prescription drugs developed from public research to ensure they are available to everyone, while 18 percent oppose and 8 percent are undecided.

With such broad public support, advocates do not face a *persuasion* problem. Rather, advocates face a challenge of *intensity*. That is, how can advocates connect widespread concerns about prescription drug pricing to a sustained demand for policies to make essential medicines affordable? How do we help the public see life-saving prescription drugs as human rights, not items for profit? The recommendations here come from analysis of existing language, advocate interviews, focus groups, and an online survey of over 1,500 Americans. We probed competing values, tested moment-to-moment reactions to messaging from both sides, and measured movement toward our policy solutions after people heard all of the messages.

The messages recommended here engage our supporters, elicit firm approval from activists, and persuade the middle. The messages do this while distancing us from the beliefs of our immovable opponents. We defined our target groups based upon their core attitudes, not partisanship. Our base begins and ends the survey on our side: we want messages they not only like, but will repeat. The persuadables agree with some of our propositions, but also those of the prescription drug industry. Our messages are intended to activate their most progressive side and move them toward our solutions. The opposition are Americans we will never persuade to our cause because they disagree, at their core, with our premises. We want to marginalize their ideas. Finally, if our words won’t spread they won’t work, so we had a sample of activists take the survey to ensure those already engaged and on our side will endorse and repeat the winning words.

Base (21% of adults)	Persuadables (69% of adults)	Opposition (10% of adults)
<ul style="list-style-type: none"> • Strongly believe that it is ethically wrong to deny people drugs for the sake of profits. • Strongly believe government should make drugs affordable for all. • Reject that government regulation increases costs of drugs. • <i>More likely to be Democrats, women, and over 65.</i> 	<ul style="list-style-type: none"> • Believe that it is ethically wrong to deny people drugs for the sake of profits. • Believe government should make drugs affordable for all. • Believe that government regulation increases costs of drugs. • <i>Mirror the demographics of the US adult population.</i> 	<ul style="list-style-type: none"> • Neutral on whether it is unfair to deny people drugs for the sake of profit. • Not convinced government should make drugs affordable for all. • Believe government regulation increases the costs of drugs. • <i>More likely to be Republicans, men, and white.</i>

MESSAGING PRINCIPLES

MESSAGING DO'S

- ✓ **Focus on shared values.** Lead with values like family, health and fairness. Describe the issue with value-based language. Don't start by naming problems.

We win this debate on shared values. People know there are problems, but talking too much about the problems demobilizes people for long-term action. Describing the issue with appeals to fairness as a value — “it’s not fair that people are denied access” — highlights the issue in terms that resonate with both our base and persuadables.

- ✓ **Be aspirational.** Present aspirational solutions about “changing the rules” and making drugs affordable for everyone who needs them.

Discuss creating something good – not just ending something bad. Hopeful solutions – like benefiting from taxpayer investment and providing medicines to people who need them, or making sure that people who need lifesaving drugs can afford them – keep people engaged.

- ✓ **Convey lived experiences.** Use relatable language like caring for family, making ends meet, and dealing with a cancer diagnosis, and speak about what humans need for self and family, not just economic concerns.

Focusing on what people need and using language that describes experiences and connects to core values, keeps the public engaged and moves persuadables to support government regulation that will reduce prescription drug prices. When the debate is on a more transactional level using economic framing, persuadables are more open to the opposition’s call for less regulation of prescription drugs.

- ✓ **Evoke contrast.** Use tradeoff language, like “choose between lifesaving drugs and putting food on the table,” to put the prescription drug price tag in stark perspective.

Make it clear that it is the price tag and profits that stand in the way of people getting the medicines they need. “Put people and patients before profits” is strong language.

MESSAGING DON'TS

- X **Don't rely on facts alone.**

People hear facts differently, and default to their preconceived notions. Focusing on values rather than facts moves people toward reform. Anchor your facts to powerful value-based messages.

- X **Don't just play the villain card.** Referencing the prescription drug industry's record profits can be effective, but cataloging all of their bad deeds makes change seem impossible.

Highlighting record industry profits helps make it clear for Americans that drug companies value profits more than people. However, if we focus on prescription drug corporations as the villain too much, it feeds people’s cynicism and demobilizes them over the long-term. Instead, focus on the aspirational solutions!

- X **Don't limit the argument to a discussion about market efficiencies.**

When we talk about ways to make the drug market more efficient, we are engaged in a transactional conversation that keeps the opposition worldview front and center. This depresses the enthusiasm of our base and misses the opportunity to win the argument on values.

WORDS THAT WORK

Words to Replace	Words to Embrace	Notes
Pharmaceutical drugs	Prescription drugs	Pharmaceutical is too “high register” of a word. Use more recognizable words.
Drug companies	Drug corporations	Corporation taps into a popular sentiment to challenge corporate power.
Cost of drugs	Price of drugs, priced out of reach	“Cost” implies something has an intrinsic and fixed value, while “price” implies that it was set by someone and can therefore be changed.
Patent protection(s)	Monopoly	Monopoly is a more recognizable word and implies that one company has an unfair advantage.
Charge extremely high prices	Price gouge	It is stronger language and implies greed and questionable morals.
Let the market for drugs operate like a market	Life and health should [not be for sale] [be equally available to all], don’t put life/health before greed/profits	Market language emboldens oppositions’ claims and de-activates the view of drugs as public goods.
Implement new policy/policies	Change the rules, curb excess profits and monopolies	Implies greater agency in solutions to problems.
Overnight price hike	Higher profits than any other industry	Much more effective attack on prescription drug corporations.
Rig the rules	Spend millions on lobbying	Use this when calling out drug companies for keeping prices high. It taps into popular sentiment that money in politics creates dysfunction in government.
Ethically wrong	Morally wrong, unfair	Both are strong. Morally wrong and unfair work best with our base.
Public research, public funding	Taxpayer dollars, taxpayer funded research	Creates a stronger sense of ownership of government funded research.
People are denied	Drug corporations deny	Active voice creates agency and sheds light on bad actors.

SUPPORT FOR A REFORM AGENDA

Americans strongly support a reform agenda that would make prescription drugs more affordable. They see a strong role for government regulation that puts care for people ahead of profits for drug corporations. They want to make sure that drugs developed from taxpayer-funded research are kept affordable, and that doctors are free to decide treatments. Strong support for policies exists across demographic and partisan lines, but is particularly strong among women and older Americans.

Full List of Policies Tested (* indicates a split sampled question)	Favor	Oppose
Regulate patents on lifesaving prescription drugs for illnesses developed from public research to ensure they are available to everyone.*	75	16
Shorten the length of monopoly granted on prescription drugs so that cheaper generic drugs are made available sooner.*	75	16
Let doctors decide what to prescribe based in part on how much better the treatment is than an alternative and how much it costs.*	74	17
Require pharmaceutical drug companies to justify their prices by disclosing how much they spend on research, manufacturing, and marketing.*	74	20
Require pharmaceutical drug companies to disclose how much they spend on research, manufacturing, and marketing.*	74	18
Regulate patents on prescription drugs developed from public research to ensure they are available to everyone.*	73	18
Allow Medicare and other government programs that pay for prescription drugs to negotiate prices directly with drug companies.	72	18
Make it illegal for a drug company to pay a different company that manufactures generic drugs to delay the release of a generic version of their drug.	72	18
Require drug companies that benefit from taxpayer funds to spend set amounts on research, not just on marketing and profits.*	72	20
Require drug companies that benefit from taxpayer funds to spend set amounts on research relative to what they spend on marketing.*	72	18
Make prescription drugs public goods paid for by the federal government and available to all Americans at an affordable price.	67	25
Shorten the length of patent protection on prescription drugs so that cheaper generic drugs are made available sooner.*	66	25
Stop prescription drug companies from spending money marketing drugs to doctors who write prescriptions.	65	24
Make Medicare and government programs that pay for prescription drugs pay according to how well they actually prolong life and improve health so that expensive drugs that only provide minimal improvements are not used.*	60	27

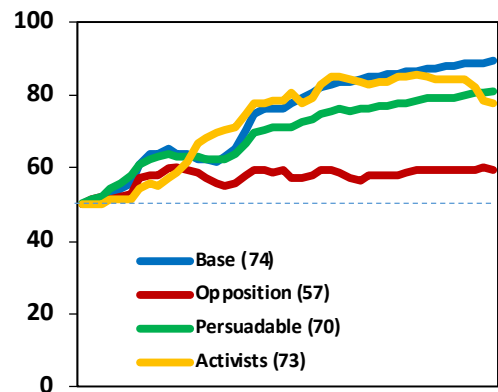
WINNING MESSAGES

Messages were tested in an online survey with 1503 adults plus 73 activists, gauging moment-to-moment responses. Below are the winning messages that beat the opposition arguments and moved our target audiences toward our solutions. The lines on the graphs are the moment-to-moment reactions to an audio recording of each message by our base, opposition, persuadables, and activists. People dialed positively (above 50) when they had a favorable reaction to what was being said, and negatively (below 50) when they had an unfavorable reaction. The number in parenthesis represents the mean dial rating for that message.

Equality

We say America was founded on the idea that people are created equal. That's why access to the medicines we need to live healthier should be equally available to all; getting sick and needing care doesn't depend on what's in your wallet. No one should go into debt to get well. By curbing excess profits and monopolies, we will benefit from the vast taxpayer investment we already make in drug development, and provide medicines to anyone who needs them. Then, we'll live up to the promise of life, liberty, and pursuit of happiness for every American.

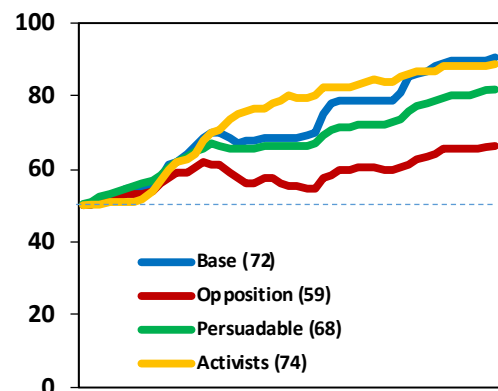
This message leads with **values**, and focuses on **equality and fairness**. It uses **lived experiences** and sets up profits as the contrast to affordability. Making this about **people, life, health, and wellness** taps into the core values in this debate that call for change.



Public Good

Whether it's routine like strep throat or scary like cancer, illness reminds us that at our core, we're all human. Everyone wants proven treatments without fearing we'll go bankrupt to get them. Corporations extract large profits selling medicines developed from taxpayer funded research. Life and health should not be for sale. Around half of prescription drugs come from research we fund with our tax dollars. We must make lifesaving medicines affordable for all Americans. Everybody deserves the best chance possible to live healthy lives. A life-saving medicine doesn't work if people can't afford it.

This message effectively uses **lived experiences** to tap into the core value of **health**. It also positions **positive solutions** to problems and undercuts arguments for profits by highlighting taxpayer funded research.

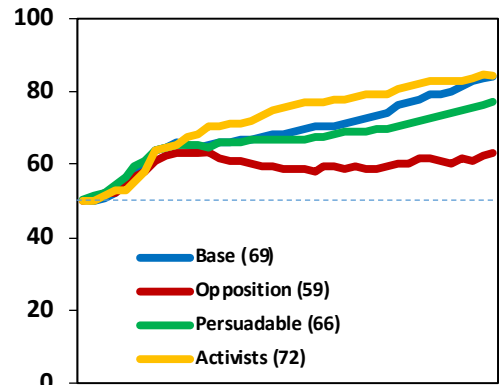


WINNING MESSAGES

Out of Reach

Ask a parent what they would spend to cure their child's illness and they would likely say "anything." But no one should go into debt to get the medicines they need to survive or be healthy. For too many Americans, affording prescription drugs means sacrificing on something else like bills, or even buying groceries. Drug corporations price medicines out of reach for too many Americans who are struggling to make ends meet. We must make these lifesaving cures and remedies affordable for people who need them.

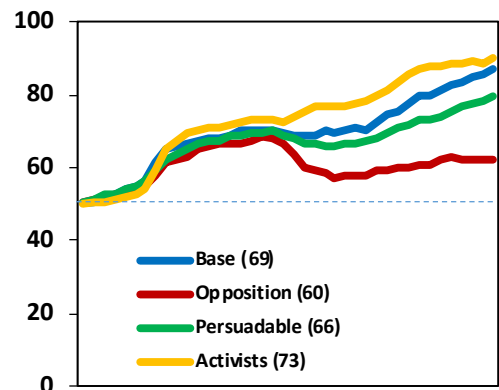
Grounding this message in **family** generates immediate connection. It effectively **provides a tradeoff** that resonates with people and uses **active voice** to highlight drug corporation profits.



Health

When you or a family member is sick or in pain, the number one priority becomes getting better. Prescription drugs help many people get and stay healthy. And they ensure many people with chronic illnesses can work and provide for their families. But today, drug corporations raise prices for medicine beyond reach. Nobody should have to choose between affording a lifesaving drug and putting food on the table for their family. We need to change the rules about pricing, patents, and profits to put people first.

This message taps into the powerful values of **health and family**. It uses strong **tradeoff** language and uses a strong contrast, of people versus profits, to call for solutions.

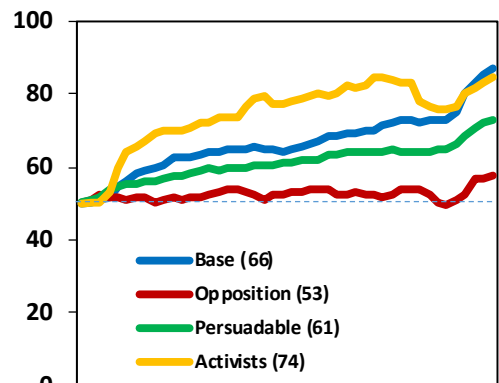


SECOND TIER MESSAGE

Villain Focus

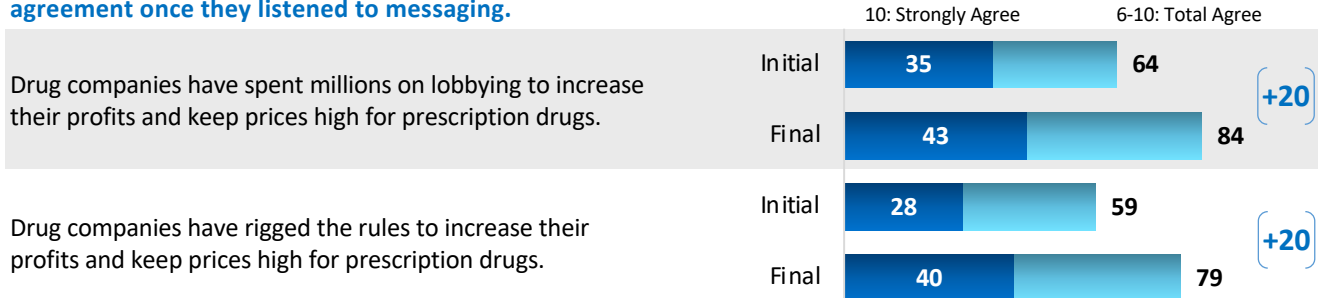
Many drug companies put profits over people. Some of these corporations have hedge fund managers with no medical background making decisions about what to research and what price to charge. Last year, a drug company bought a medicine that sold for \$13 and raised the price to \$750 overnight. The drug industry spends more on marketing and lobbying for loopholes than on developing cures. No wonder they have higher profits than any other industry. You might see someone dying as a tragedy, but these C-E-O's see it as a financial opportunity. It is time we put patients first and curb the greed of pharmaceutical CEOs.

Villainizing drug corporations can be effective, particularly with the base. While people found this message strong, it did not change people's attitudes. Typically, messaging focusing on a villain can create short-term anger but not generate long-term activism because it lacks hope for a solution.

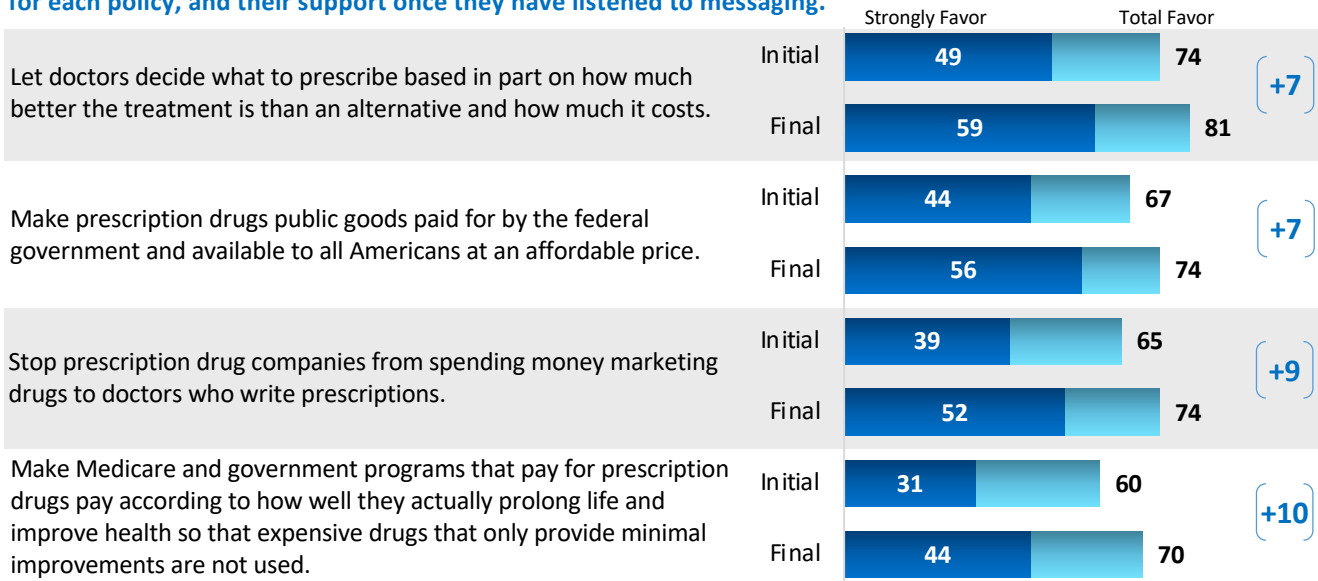


MESSAGING IMPACT

Messages move Americans to greater, and more intense, agreement about drug corporations' manipulation of our rules for their financial gain. The data below shows people's initial agreement with each statement, and their agreement once they listened to messaging.



Messaging increases the intensity of support for our policy agenda. The data below shows people's initial support for each policy, and their support once they have listened to messaging.



Methodology

Language Analysis: Using a variety of techniques from cognitive linguistics, a field dedicated to how people process information and communicate, ASO Communications examined how people reason and come to conclusions about social issues. Principally, these conclusions emerged from metaphor analysis. This involves cataloging the common non-literal phrases in discourse. Noting patterns in these expressions reveals how people unconsciously make sense of complexity.

Elicitation Interviews: In February and March of 2016, ASO Communications conducted 29 cognitive elicitation interviews in collaboration with Open Society Foundations' Access to Essential Medicines Program. Respondents interviewed included anti-corporate campaigners, health policy experts, buyers' club representatives and community organizers. The key selection criterion for participation was belief in and effort on behalf of making essential medicines more readily available to people in the U.S.

Focus Groups: Lake Research Partners conducted eight focus groups. Groups were conducted on April 11 in Denver, Colorado (among persuadable white mixed-gender near-retirees (age 50-64), base Latina women, and base mixed-gender, mixed-race Millennials), on April 12 in Richmond, Virginia (among opposition mixed-gender white voters and persuadable Republican mixed-race men who oppose the Affordable Care Act but support prescription drug reform), and on April 13 in Cleveland, Ohio (among base white mixed-gender seniors, and base African American women). Participants were recruited to reflect a mix of ages (unless specifically noted otherwise), education levels, and marital status. The base, persuasion, and opposition groups were determined based on favorability toward the Affordable Care Act, prescription drug reform, and considering prescription drugs public goods.

National Online Dial Survey: Lake Research Partners designed and administered this survey that was conducted online from May 17 to 22, 2016. The survey reached a total of 1,503 adults and 73 activists. The sample of adults was drawn from an online panel and respondents were screened to be over the age of 18. The sample of adults was weighted slightly by education, race, and party affiliation. Activists were contacted by OSF as well as by several partners. They were sent a link to complete the survey and interviews were conducted from May 17 through June 3, 2016. The margin of error for the national sample is +/-2.5%.

The language analysis and elicitation interviews were lead by [Anat Shenker-Osorio](#) of ASO Communications. The focus groups and dial testing were led by [Celinda Lake](#), President of Lake Research Partners, and [Jonathan Voss](#), Vice President.