

## Guidelines for inclusive recruitment for Market Research Studies

### Introduction and purpose of guidelines

The purpose of this document is to provide guidelines and support for pharmaceutical clients, market research and fieldwork agencies in conducting inclusive market research and ensuring the sample is as diverse as necessary to ensure it is inclusive of the targeted population, from raising the business question, to delivering the insights.

The Market Research Society's (MRS) best practice recommendation is that for market research and data collection to be inclusive of the population, all relevant personal characteristics should be included. This ensures that all participants are equally valued and that their opinions and attitudes are being gathered and represented.

The discourse around Diversity, Equity & Inclusion (D, E & I) is evolving and this document aims to support the conversation rather than to provide final and definite guidelines for our members. **The aim is to ensure D, E & I is considered throughout the market research process, from design to data presentation.**

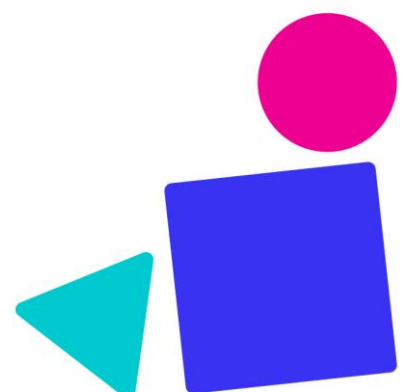
Where we give examples of wording for screener questions, they should not be considered a template, but a suggestion. The client, agency and fieldwork partner should determine suitable questions together, bearing Inclusivity in mind.

Personal characteristics that fall under the umbrella of D, E & I are commonly, but not limited to:

- Age
- Gender identity
- Ethnicity
- Religion
- Sexual orientation
- Disability
- Health conditions
- Socioeconomic factors

These all play a part in how a person perceives their surroundings and thus also how they respond to market research.

At times, we may need to segment answers based on these characteristics where this impacts the market research itself. In those situations, questions confirming the characteristics may be part of the screening criteria. At other times, we simply need to ensure we take these characteristics into account to ensure our market research is inclusive and that our respondents feel comfortable throughout the process.



It is always important to take extra care and show the highest level of respect when obtaining answers to such questions. Respondents must always know why they are being asked and what we will do with the data. They must always be allowed not to answer, bearing in mind that this may mean they cannot participate in the market research.

We must always follow GDPR and current BHBIA and MRS guidelines and avoid obtaining unnecessary data. This applies in particular to those characteristics that are considered “special categories of data” under UK GDPR (<https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/special-category-data/what-is-special-category-data/>)

These special characteristics are:

- Personal data revealing racial or ethnic origin;
- Personal data revealing political opinions;
- Personal data revealing religious or philosophical beliefs;
- Personal data revealing trade union membership;
- Genetic data;
- Biometric data (where used for identification purposes);
- Data concerning health;
- Data concerning a person’s sex life; and
- Data concerning a person’s sexual orientation

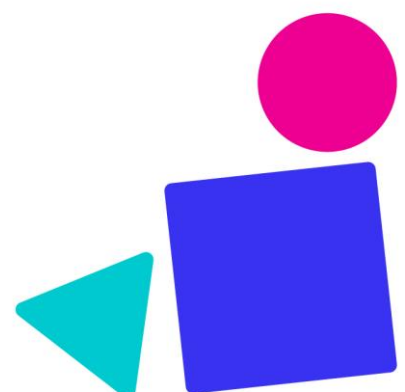
### **Some key points when considering collecting special characteristics**

#### Why do we need to know?

- Is it to ensure the sample is reflective of the patient population?
- Is it for segmenting/understanding the data?
- Is it to ensure diverse perspectives are represented?
- Is it to ensure the respondent feels comfortable participating?
- Is it for segmentation/analysis and, therefore, you need to know this information as part of the screening process?

### **Useful tips for inclusive screening**

When listing out characteristics in written screener questions, always list them in alphabetical or randomised order and ensure it is clear to the respondent when randomised, so as not to put particular emphasis on one characteristic over another.



### For example

The examples below use sexual orientation to demonstrate this principle

#### 1. Common non-inclusive format:

***Which of the following best describes your sexual orientation?***

- *Heterosexual*
- *Homosexual*
- *Bisexual*
- *Prefer not to say*

#### 2. Alphabetically ordered inclusive example:

***Which of the following best describes your sexual orientation?***

- *Asexual*
- *Bi/bisexual*
- *Gay man*
- *Gay woman/lesbian*
- *Queer*
- *Straight/heterosexual*
- *Prefer to self-describe (type in)*
- *Prefer not to say*

Always ensure you provide an option for respondents to **self-describe**. This makes it easier to ensure screening is inclusive across the range of topics that fall under D, E & I.

### Obtaining sensitive data

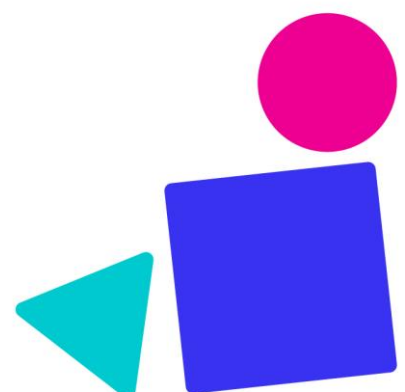
If you are including questions to ensure the respondent feels comfortable and we get the most out of the interview, can we confirm this in a different way without obtaining such sensitive data?

Sharing a detailed brief on what will happen in the interview and confirming the respondents are on board and comfortable with this can be a way.

- For example, advise the gender of the moderator for qualitative interviews during recruitment and confirm whether the respondent is comfortable being interviewed by a man or a woman on this topic. This may be relevant for conversations around reproduction, contraception, erectile dysfunction, infectious diseases, etc.
- Confirm if the respondent will be required to read lengthy documents or provide feedback on colourful images. This may be relevant for respondents with certain neurodivergent conditions that may make the interview experience stressful or challenging for them.

### Further issues for consideration

If you do need to include questions because they are relevant to the study or you cannot provide a detailed enough brief, some examples of questions are included below.



## 1. Gender

### **How do you identify?**

- *Gender non-conforming*
- *Man*
- *Non-binary*
- *Woman*
- *Prefer to self-describe (please describe)*
- *Prefer not to say*

The following could also be used only if relevant for the study

### **Which sex were you assigned at birth?**

- *Female*
- *Intersex*
- *Male*
- *Prefer not to say*

## 2. Ethnicity

### **What is your ethnic group?**

Choose one section below, A to E, then tick one box to describe your ethnic group or background

#### **A. White**

- *English, Welsh, Scottish, Northern Irish or British*
- *Irish*
- *Gypsy or Irish Traveller*
- *Roma*
- *Any other White background, write in:*

#### **B. Mixed or multiple ethnic groups**

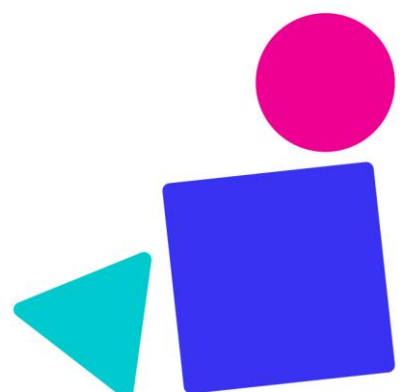
- *White and Black Caribbean*
- *White and Black African*
- *White and Asian*
- *Any other Mixed or Multiple background, write in:*

#### **C. Asian or Asian British**

- *Indian*
- *Pakistani*
- *Bangladeshi*
- *Chinese*
- *Any other Asian background, write in:*

#### **D. Black, Black British, Caribbean or African**

- *Caribbean*
- *African background, write in below*
- *Any other Black, Black British or Caribbean background, write in*



E. *Other ethnic group*

- Arab
- Any other ethnic group, write in
- Don't know
- Prefer not to say

3. Sexual Orientation

**Which of the following best describes your sexual orientation? (Alphabetically ordered)**

- Asexual
- Bi/bisexual
- Gay man
- Gay woman/lesbian
- Queer
- Straight/heterosexual
- Prefer to self-describe (type in)
- Prefer not to say

4. Health/ Physical Disability/Neurodiverse Characteristic

**Do you consider yourself to have a disability or long-term condition? (such as a heart condition, arthritis, diabetes, a mental health condition or a neurodiverse condition)**

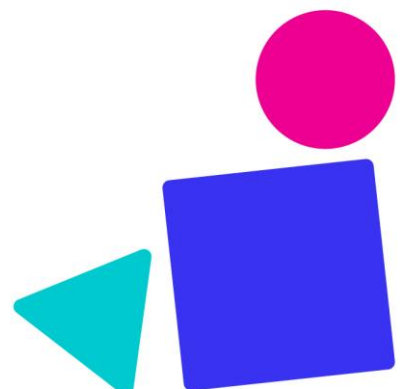
- Yes
- No
- Don't know
- Prefer not to say

**If yes, does your condition, disability or illness/do any of your conditions, disabilities or illnesses impact your ability to carry out day-to-day activities?**

- Yes
- No

**Does this condition or illness/do these conditions or illnesses affect you in any of the following areas?**

- Vision (for example blindness or partial sight)
- Hearing (for example deafness or partial hearing)
- Mobility (for example walking short distances or climbing stairs)
- Dexterity (for example lifting or carrying objects, using a keyboard)
- Learning, understanding or concentrating
- Memory
- Mental health
- Stamina or breathing or fatigue
- Socially or behaviourally
- Other (please specify)
- None of the above
- Prefer not to say



(Here, we can then suggest either a more detailed brief if a respondent says (for example) vision and they are meant to look at stimulus or socially and they have to do some form or role-play in a focus group setting... and this cannot be covered in a way other than asking this question...)

## 5. Socio Economic status

**When you were 18, had any of your parents or guardians completed a university degree course or equivalent (e.g., BA, BSc or higher / or equivalent if not in the UK)?**

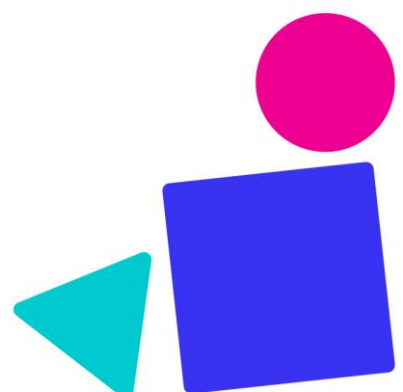
- Yes
- No
- I don't know
- Prefer not to say

**Which of these statements applies to you? (Multi-select)**

- I have a full-time job
- I have a part-time job
- I am self-employed
- I am a full-time parent/caregiver
- I am registered as a student (part-time or full-time)
- I don't do paid work (e.g. unemployed, long-term illness)
- Other (please specify)

**Please tell us about the occupation of your main household earner when you were aged 14.**

- Modern professional occupations such as teacher/lecturer, nurse, physiotherapist, social worker, welfare officer, artist, musician, police officer (sergeant or above), software designer
- Clerical and intermediate occupations such as secretary, personal assistant, clerical worker, office clerk, call centre agent, nursery nurse
- Senior managers and administrators usually responsible for planning, organising and coordinating work and for finance such as finance manager, chief executive
- Technical and craft occupations such as motor mechanic, fitter, inspector, plumber, printer, tool maker, electrician, gardener, train driver
- Semi-routine manual and service occupations such as postal worker, machine operative, security guard, caretaker, farm worker, catering assistant, receptionist, sales assistant
- Routine manual and service occupations such as HGV driver, van driver, cleaner, porter, packer, sewing machinist, messenger, labourer, waiter/waitress, bar staff
- Middle or junior managers such as office manager, retail manager, bank manager, restaurant manager, warehouse manager, publican
- Traditional professional occupations such as accountant, solicitor, medical practitioner, scientist, civil/mechanical engineer
- Long term unemployed (claimed Jobseeker's Allowance or earlier unemployment benefit for more than a year)
- Retired
- Don't know
- Not applicable (e.g. grew up in care)
- Prefer not to say



## 6. Level of education

**What levels of education have you completed? (Multi-select)**

(In the UK)

- *Primary school*
- *Secondary school up to 16 years*
- *Higher or secondary or further education (A-levels, BTEC, etc.)*
- *College or university degree*
- *Post-graduate degree / Master's degree*
- *PhD*
- *Professional qualifications*
- *Degree apprenticeship*
- *Prefer not to say*

(Outside of the UK, if applicable)

- *Primary school - or country equivalent*
- *Secondary school - or country equivalent*
- *Higher or secondary or further education - or country equivalent*
- *College or university degree*
- *Post-graduate / Master's degree or country equivalent*
- *PhD / Doctorate - or country equivalent*
- *Prefer not to say*

## 7. Religion

**What religion, religious denomination or body do you belong to, if any?**

- *Buddhist*
- *Christian*
- *Hindu*
- *Jewish*
- *Muslim*
- *Sikh*
- *Spiritual*
- *No religion*
- *Any other religion or belief (please describe)*
- *I have a religion or strongly held belief but prefer not to specify what this is*
- *Prefer not to say*

### **Disclaimer**

*The BHBIA is providing this guidance as general information for its members. It is not legal advice and should not be relied upon as such. Specific legal advice should be taken in relation to any specific legal problems or matters. Whilst every reasonable effort is made to make sure the information is accurate, no responsibility for its accuracy or for any consequences of relying on it is assumed by the BHBIA.*

New Guidelines May 2024

