# 

**Project Mega**

**Screener – Consumer**

**31st January 2023**

**CONSENT FORM**

***IQVIA – PROJECT PARTICIPATION AND CONSENT FORM***

|  |  |
| --- | --- |
| ***Project Name*** | ***Mega*** |
| ***SFDC code*** | ***2945278*** |
| ***Recruiter/ Interviewer Name*** |  |

Good morning/afternoon, I am calling on behalf of IQVIA, an independent international healthcare market research organization. We are conducting a study **Understanding current market and the usage and attitude for skin healing among Consumers** and would like to speak to some people in (country) about this subject. May I ask you a few preliminary questions?

**IF RESPONDENT IS ELIGIBLE SAY:**

The purpose of our study is **Understanding current market and the usage and attitude for skin healing among Consumers**. The discussion will be conducted telephonically / online and will last for about **75 mins**. The discussion will be arranged at a time to suit you and we can offer honorarium in appreciation of your time and participation.

Please let me reassure you that this Market Research is sponsored by a company and is conducted in accordance with International Market Research guidelines. The research is not designed to be promotional in any way – we are not trying to sell you anything. You have a right to withdraw from the interview at any time and withhold information as you see fit. All information provided will be treated in the strictest confidence and all data will only reported in a consolidated form – no personal information (including your name, email address and phone number) will be included in any reports provided to the company sponsoring the research, or to their affiliated companies or business partners.

Based on the (above) information, would you be interested in taking part in this market research program?

Yes……………………………………… …1 **→ CONTINUE**

No……………………………………… …2 **→ THANK AND CLOSE**

**Recruiter, please read out -**

As I mentioned earlier, we would be pleased to offer an honorarium in appreciation of your time and participation in the study. This compensation will be provided through PAYTM

1. Do you agree to receive compensation in this method?

Yes………………………………………1 **→ CONTINUE**

No……………………………………….2 **→ THANK AND CLOSE**

**[USE IF APPLICABLE]** I am going to audio record our discussion, because I cannot possibly remember everything that is said or write it down. However, as I mentioned earlier the meeting is completely confidential. The recordings will be listened to by an analyst who will summarize the data for confidential reporting purposes.

1. Do you agree to audio recording of the interview?

Yes………………………………………1 **→ CONTINUE**

No……………………………………….2 **→ THANK AND CLOSE**

It may also be necessary at a future date to re-contact you if we have a query on any of the information you have provided for our analysis.

1. Do you agree to be re-contacted in case of a query?

Yes………………………………………1 **→ CONTINUE**

No……………………………………….2 **→ CONTINUE BUT NOTE ON FILE**

**[USE IF APPLICABLE TO PROJECT]**

**Adverse Events**

We are now being asked to pass on to our client details of adverse events that are mentioned during market research interviews. Although what you say will of course be treated in confidence, should you raise an adverse event during the discussion we will need to report this even if it has already been reported by you directly to the company or regulatory authorities. In such a situation you will be asked whether you are willing to waive the confidentiality given to you using the market research codes of conduct specifically in relation to that adverse event. Everything else you say during the interview will continue to remain confidential, and you will still have the option to remain anonymous if you so wish.

**RECRUITER:** Did the respondent agree to the AE statement?

Yes………………………………………1 **→ CONTINUE**

No……………………………………….2 **→ CONTINUE BUT NOTE ON FILE**

**CONSENT TO PROCESSING OF PERSONAL DATA OF MARKET RESEARCH PARTICIPANT**

This form constitutes a privacy notice explaining how [IQVIA AG] (“IQVIA”/ “we”, “our”, “us”) will process your personal data for purposes of the Study and a consent declaration form for you to give your consent to this use, should you so choose.

For the purposes of this form, “personal data” means any data relating to you as a person and your personal circumstances, including your contact details, information about your specialization and responses provided in the course of participating in the Study.

If you choose to participate in the Study, you will need to read the following information carefully and provide your consent.

**PURPOSE OF PERSONAL DATA PROCESSING:**

IQVIA will serve as the Controller of personal data collected, and processing of such personal data will relate to conducting the Study and any follow-up contact that you have consented to.

Your responses and any personal contact information you provide in participating in the Study (i.e.: name, business address, email address, and phone number) will be processed by the IQVIA group of companies (“IQVIA”) on a strictly need-to-know basis, for purposes of informing IQVIA and its client(s) **Understanding current market and the usage and attitude for skin healing among Consumers**

**THIRD PARTY TRANSFERS**

In order for IQVIA to conduct the Study, IQVIA may need to transfer your data to third party companies providing services to IQVIA. IQVIA shall ensure adequate contractual terms are in place with such third parties in order to ensure there are protections for your data.

If such third parties are located outside the EEA which may not benefit from a European Commission adequacy decision, IQVIA shall ensure Standard Contractual Clauses approved by the European Commission are in place with such third parties in order to ensure an adequate level of protection.

Your data will not be disclosed to the Study sponsor except in aggregated or non-identified form, provided however that your identity may be disclosed to the Study sponsor and the applicable national regulatory authority if you give your consent for your personal details to be passed on in the event of adverse event reporting, or if the Study Sponsor is required to do so by applicable law to meet mandatory regulatory reporting requirements.

**How we store your information and your rights**

We retain your data for no longer than is necessary for the purposes for which your personal data is collected. Your responses in the Study and your associated personal data will be maintained for ­­­3 years except to the extent required to comply with a legal obligation.

You may contact us to request access to your personal data or to be provided with information on your personal data stored by us, object to the processing of it and request that we correct or delete it. If you have any queries or wish to know more about the information we hold, you can call us on- **avani.deshraj@iqvia.com** or contact our data protection officer mentioning the name of the Study and one of our team will be happy to assist. You also have the right to complain to a data protection authority in the country where you live, work, or where you believe data protection laws have been breached.

The granting of your consent is voluntary and may be revoked at any time without any detrimental effect to you. You will not suffer any detriment should you choose not to participate in the Study.

**Compliance with Anti-Corruption and Anti Bribery Laws:**

You confirm that you are not a Government Official with the ability to influence IQVIA business and have not taken any action, directly or indirectly, that would constitute a violation of any applicable law including any anti-corruption laws or regulations (such as FCPA or UKBA), or IQVIA’s Policy against Bribery and Corruption.

You further confirm that in carrying out the Interview, you have not directly or indirectly made an, offer, authorized, promised to make, or received any Payment:

* to obtain or retain any contract, business opportunity or other similar benefit; or
* to or for the use or benefit of any Government Official; or
* to any person where such Payment violates any laws, decrees, regulations or policies having the force of law in the country or countries of such person or applicable to such person or the laws of [the United States of America and] England and Wales]; or
* to or from any person, whether or not a Government Official, with the intention to bring about or reward the improper performance of a duty or obligation to which you are subject to; or with the knowledge or belief that the acceptance of the advantage in itself constitutes the improper performance of your duty or obligation.
* By participating in this study/survey, you confirm that you are authorized to participate without violating any other commitments/engagements/contracts including but not limited to your employment contract/charter/rules and service agreements.

***Following new regulations, we require you to indicate that you have understood and agree to the information above by signing on the project participation sheet.***

*PLEASE COMPLETE DETAILS ACCURATELY AS THIS INFORMATION WILL BE USED TO PROCESS THE PAYMENT.*

|  |  |  |
| --- | --- | --- |
| **PROJECT NUMBER** | 2945278 | *To be completed by IQVIA* |
| **PROJECT NAME** | Mega |
| **DATE OF INTERVIEW** |  | *To be completed by Participant* |
| **RESPONDENT NAME** |  |
| **COUNTRY** |  |
| **CITY** |  |
| **TELEPHONE** |  |
| **MOBILE** |  |
| **DATE OF BIRTH** |  |
| **E-MAIL ADDRESS** |  |
| **CARD DELIVERY ADDRESS** |  |  |
| **INCENTIVE TYPE** |  |  |
| **INCENTIVE AMOUNT** |  |  |

**PARTICIPANT CONSENT:**

* **YES**, I want to take part in the Study as outlined above and confirm my consent to the collection, storage and use of my personal data as outlined above.
* **YES**, I confirm that I may be contacted by IQVIA directly by telephone or e-mail using the contact information I have given above.
* **YES,** I have complied with anti-corruption and anti-bribery laws.
* **YES,** I agree to have received the incentive as stated above, in lieu of my interview.

**PARTICIPANT Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

**Centers and Sample Spread***: Enter relevant code for each city*

|  |  |  |  |
| --- | --- | --- | --- |
| **TOWN CLASS** | **CITY** | **CONSUMERS** | |
| **(SUFFERER)** | **(NON-SUFFERERS)** |
| **METRO** | Mumbai | **1** | **1** |
| Delhi | **1** | **1** |
| Bangalore | **1** | **1** |
| Kolkata | **1** | **1** |
| **TIER 1** | Ahmedabad | **1** | **1** |
| Lucknow | **1** | **1** |
| Cochin | **1** | **-** |
| Pune | **1** | **-** |
| **Sub Total** | | **9** | **6** |
| **Total** | | **15** | |

**QUOTAS:**

***GENDER***

*MALE: 0%*

*FEMALE: 100%* ***(ONLY FEMALES TO BE RECRUITED)***

**SOFT QUOTAS:**

***BRAND USERSHIP***

*CETAPHIL: 20%*

*SEBAMED: 15%*

*BIODERMA:15%*

*AVEENO: 15%*

*VENUSIA:15%*

*PHYSIOGEL: 10%*

*OTHERS: 10%*

***PLACE OF PURCHASE***

*CHEMIST: 25%*

*ONLINE PHARMACY: 25%*

*E-COMMERCE: 25%*

*OTHERS: 25%*

***AGE***

*18 TO 25: 33%*

*25 to 35: 34%*

*35 to 45: 33%*

|  |
| --- |
| **SCREENER** |

**NOTE TO SCRIPTER: KEEP A RECORD OF RESPONSES AND NUMBER OF CONSUMERS GETTING TERMINATED AT EACH SCREENING QUESTION**

**S1.** Are you associated with any pharmaceutical company as an employee, a panel member or consultant? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Yes | 1 | **THANK AND CLOSE** |
| No | 2 | **CONTINUE** |

**S2.** Have you participated in any market research study related to skin related products in the last 1 month? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Yes | 1 | **THANK AND CLOSE** |
| No | 2 | **CONTINUE** |

**S3.** How old are you? **IN YEARS**

INSTRUCTION FOR RESPONDENT: RECORD AGE IN YEARS

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | **AGE IN YEARS** |

**ACTION: RECRUIT IF AGE IN YEARS >=18 AND <=45**

**S4.** What is your gender? **PLEASE SELECT THE GENDER OF THE CONSUMER**

|  |  |  |
| --- | --- | --- |
| **GENDER** | **CODE** | **ACTION** |
| Male | 1 | **TERMINATE** |
| Female | 2 | **CONTINUE** |

**S5.** A. Could you please indicate the **highest level of education** that you have completed? **CODE APPROPRIATELY. SINGLE CODING ONLY**

|  |  |  |
| --- | --- | --- |
| **EDUCATION** | **CODE** | **ACTION** |
| Less than SSC/HSC | 01 | **TERMINATE** |
| SSC/HSC | 02 | **CONTINUE** |
| Graduate | 03 |
| Post-graduate master’s degree | 04 |
| Post-graduate master’s degree & Higher | 05 |

1. Which of the following best describes your **working status** currently? **CODE APPROPRIATELY. SINGLE CODING ONLY**

|  |  |  |
| --- | --- | --- |
| **WORKING STATUS** | **CODE** | **ACTION** |
| Corporate executive/ Middle level manager | 01 | **CONTINUE** |
| Self -employed- Own business/shop owner | 02 |
| Freelancer | 03 |
| Homemaker | 04 |
| Retired | 05 | **TERMINATE** |

1. What is your **Family status**? **CODE APPROPRIATELY. SINGLE CODING ONLY**

|  |  |
| --- | --- |
| **FAMILY TYPE** | **CODE** |
| Conjugal unit (2 individuals) | 01 |
| Nuclear (small family with children/parents) | 02 |
| Joint or extended family (3 lateral/vertical generations) | 03 |

1. What is your **household size**?

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | **RECORD NO. OF FAMILY MEMBERS** |

1. Please indicate the **total annual household income**. **SINGLE CODE ONLY**

|  |  |
| --- | --- |
| **HOUSEHOLD INCOME** | **CODE** |
| < 5 lakhs | 01 |
| 5- 10 lakhs | 02 |
| > 10 lakhs | 03 |

1. Could you please indicate the **level of education of the Chief Wage Earner (CWE)** of your household? By Chief Wage Earner, we mean the person who contributes maximum to the expenditure of your household? **SINGLE CODE ONLY**

|  |  |
| --- | --- |
| **EDUCATION** | **CODE** |
| Uneducated | 01 |
| School up to 4 years | 02 |
| School 5 to 9 years | 03 |
| SSC/HSC | 04 |
| Some College, but not graduate | 05 |
| Graduate/ Post-graduate – General | 06 |
| Graduate/Post-Graduate- Professional | 07 |

1. From the below list of items, please indicate which of these **items do you own**? (It could be owned by you or any of your family members)? **MULTIPLE CODING POSSIBLE**

|  |  |
| --- | --- |
| **ITEMS** | **CODE** |
| Electricity connection | 01 |
| Ceiling Fan | 02 |
| LPG Stove | 03 |
| Two-wheeler vehicle | 04 |
| Colour TV | 05 |
| Refrigerator | 06 |
| Washing Machine | 07 |
| Personal Computer/Laptop | 08 |
| Car/Jeep/Van | 09 |
| Air conditioner | 10 |
| Agricultural land (currently under cultivation or plantation) | 11 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **EDUCATION 🡪**  **NUMBER OF DURABLES** 🡻 | **Uneducated** | **School up to 4 years** | **School 5-9 years** | **SSC/ HSC** | **Some college but not graduate** | **Graduate/ Post-**  **Graduate:**  **General** | **Graduate/**  **Post-**  **Graduate:**  **Professional** |
|  | (1) | (2) | (3) | (4) | (5) | (6) | (7) |
| None | E3 | E2 | E2 | E2 | E2 | E1 | D2 |
| 1 | E2 | E1 | E1 | E1 | D2 | D2 | D2 |
| 2 | E1 | E1 | D2 | D2 | D1 | D1 | D1 |
| 3 | D2 | D2 | D1 | D1 | C2 | C2 | C2 |
| 4 | D1 | C2 | C2 | C1 | C1 | B2 | B2 |
| 5 | C2 | C1 | C1 | B2 | B1 | B1 | B1 |
| 6 | C1 | B2 | B2 | B1 | A3 | A3 | A3 |
| 7 | C1 | B1 | B1 | A3 | A3 | A2 | A2 |
| 8 | B1 | A3 | A3 | A3 | A2 | A2 | A2 |
| 9+ | B1 | A3 | A3 | A2 | A2 | A1 | A1 |

**ACTION: RECRUIT ONLY SEC A CONSUMERS**

**S6.** Have you suffered from any dry skin problems in the last 6 months? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Yes | 1 | CONTINUE |
| No | 2 | TERMINATE |

**S7.** Have you ever been diagnosed by a doctor for dry skin/dry skin-related problems? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Yes | 1 | CONTINUE |
| No | 2 | CONTINUE |

**ACTION: IF CODED 1 THEN RECRUIT AS “SUFFERERS”**

**IF CODED 2 THEN RECRUIT AS “NON-SUFFERERS”**

**ASK S8 ONLY FROM SUFFERERS RECRUITED IN S7**

**S8.** Which of the following dry skin/dry skin-related problems have you beendiagnosed with? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Dermatitis | 1 | **CONTINUE** |
| Eczema | 2 |
| Ichthyosis | 3 |
| Pruritis | 4 |
| Psoriasis | 5 |
| Xerosis | 6 |
| I do not remember the name of the skin issue, but doctor gave me a medicine to apply | 7 |
| General Winter Dry Skin | 8 | **TERMINATE** |
| Other \_\_\_\_\_\_\_\_ | 98 | **TERMINATE** |
| Other \_\_\_\_\_\_\_\_ | 99 | **TERMINATE** |

**ASK S9 ONLY FROM SUFFERERS IN S7**

**S9.** Which of the following symptoms have you complained about with the doctor? **MULTIPLE CODE POSSIBLE**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Flaky Skin (Peeling of skin) | 1 | **CONTINUE** |
| Itchy Skin | 2 |
| Scaly Skin  (Dry thick patches on skin) | 3 |
| Redness | 4 |
| Burning Sensation | 5 |
| Blisters (Boils) | 6 |
| Sore & tender skin | 7 |
| Skin crusts (thickened hardened skin with or without pus/blood) | 8 |
| None of the above | 9 | **TERMINATE** |
| Others\_\_\_\_\_ | 99 | **TERMINATE** |

**ASK S10 ONLY FROM SUFFERERS IN S7**

**S10.** Where on the body have you experienced these symptoms? **MULTIPLE CODE POSSIBLE**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Abdomen | 1 | **CONTINUE** |
| Back | 2 |
| Elbows | 3 |
| Face | 4 |
| Foot | 5 |
| Hands | 6 |
| Knees | 7 |
| Legs | 8 |
| None of the above | 9 | **TERMINATE** |
| Others\_\_\_\_\_\_\_\_\_ | 98 | **CONTINUE** |
| Others\_\_\_\_\_\_\_\_\_ | 99 | **CONTINUE** |

**ASK S11 ONLY FROM NON-SUFFERERS IN S7**

**S11.** Which of the following symptoms have you experienced? **MULTIPLE CODE POSSIBLE**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Severe Dry Skin throughout the year (Dry Skin faced frequently, requires creams/lotions to frequently to manage dryness) | 1 | **CONTINUE** |
| Sensitive Skin  (Skin Issues such as small bumps, redness faced frequently, requires milder creams/lotions to frequently to manage sensitivity) | 2 |
| Flaky Skin (Peeling of skin) | 3 |
| Itchy Skin | 4 |
| Scaly Skin  (Dry thick patches on skin) | 5 |
| Redness | 6 |
| Burning Sensation | 7 |
| Blisters (Boils) | 8 |
| Sore & tender skin | 9 |
| Skin crusts (thickened hardened skin) | 10 |
| General Winter Dry Skin | 11 | **TERMINATE** |
| None of the above | 12 | **TERMINATE** |

**ASK S12 ONLY FROM NON-SUFFERERS IN S7**

**S12.** Where on the body have you experienced these symptoms? **MULTIPLE CODE POSSIBLE**

|  |  |
| --- | --- |
| **RESPONSE** | **CODE** |
| Abdomen | 1 |
| Back | 2 |
| Elbows | 3 |
| Face | 4 |
| Foot | 5 |
| Hands | 6 |
| Knees | 7 |
| Legs | 8 |
| Others\_\_\_\_\_\_\_\_\_ | 98 |
| Others\_\_\_\_\_\_\_\_\_ | 99 |

**ACTION: CONTINUE ONLY IF ATLEAST TWO CODES SELECTED IN S12**

**S13.** When did you last purchase the product to manage your dry skin problem? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| In Last 1 month | 1 | **CONTINUE** |
| In last 3 months | 2 | **CONTINUE** |
| In last 6 months | 3 | **CONTINUE** |
| More than 6 months before | 4 | **TERMINATE** |

**S14.** Which of the following brand are you using currently to manage your dry skin problem? **SINGLE CODE ONLY**

|  |  |  |
| --- | --- | --- |
| **RESPONSE** | **CODE** | **ACTION** |
| Aveeno | 1 | **RECRUIT AS PER QUOTA** |
| Bioderma | 2 |
| Cetaphil | 3 |
| Physiogel | 4 |
| Sebamed | 5 |
| Venusia | 6 |
| Others\_\_\_\_\_\_\_ | 98 |
| Others\_\_\_\_\_\_\_ | 99 |

**THANK AND CLOSE**