COVID-19 Vaccine

Communications and Engagement Approach

Work in Progress. Version 1 March 8 2021
### Strategic Principles

- **Citizen and community centric**
  We work with and empower communities so they feel a sense of co-ownership.

- **Partner wherever possible**
  We make the most of existing networks and access that our partners (e.g., DHBs) already have.

- **Agile and adaptive**
  We adapt our approach and respond as more information becomes available.

- **Research and insight led**
  We prioritize and target those who need the information, supported by an overall awareness raising.

### Key Objectives

- **Uptake of the vaccine is high.**
- **Trust and confidence in the vaccine and the roll-out is high.**
- **New Zealanders say their information needs have been met.**
- **Our partners and communities feel we have worked with them.**

### Measurement

*How we will know we have succeeded*

- [TBC 70] percent or above of adult people in New Zealand will take up the offer of a COVID-19 vaccine.
- People in New Zealand say their communication and information needs have been met.
- People in New Zealand say they are confident the vaccines we use are safe.
- We will retain or enhance high levels of trust in the Ministry and the government.
COVID-19 Vaccine Communications and Engagement Team

Ministry of Health

Paul Giles
GM Communications & Engagement

Stakeholder Engagement
Media & Reporting
Strategic Comms
Channels & Content
Public Info & Campaign

COVID-19 Group

Heather Peacocke
Head of Public Engagement & Communications

Accountabilities
- Paid Public Information Campaign & Public Messaging
- Public Sector Engagement
- Unite Against COVID-19 Content, Channels, Brand
- Agency Management

Support from wider COVID-19 Comms & Engagement Team including response, channels, campaigns, strat comms, engagement, media

Support from wider MoH Comms & Engagement Team including response, channels, campaigns, strat comms, engagement, media
Find everything you need to know about your free vaccine at Covid19.govt.nz
## Key Audiences — motivations and barriers

<table>
<thead>
<tr>
<th>Audience</th>
<th>Channels to reach audience</th>
<th>Timing of vaccinations</th>
<th>Motivators that influence the intention to be vaccinated*</th>
<th>Barriers that influence the intention to be vaccinated*</th>
</tr>
</thead>
</table>
| Border and MIQ workers | • Direct communications  
• Collateral  
• Stakeholder engagement  
• Unpaid media | Starting February and March | • Previous experience with flu vaccine defines people’s perception of the COVID vaccine  
• A feeling of not wanting to put others at risk  
• Communication in the appropriate language | • NZ is perceived as safe and therefore reducing the sense of urgency  
• Detachment from the negative impacts of COVID-19  
• Misinformation can skew people’s perceptions  
• Additional safety concerns for people with underlying health conditions  
• Uncertainty the vaccine will work with new virus strains |
| Frontline workers and those most at risk | • Direct communications  
• Collateral  
• Stakeholder engagement  
• Unpaid media  
• Low-level paid public information campaign commencing in March  
• Key websites; specifically UAC | Starting March, April, May and June | • Feeling well-informed about the vaccine and the vaccination process  
• That other people are either considering or receiving the vaccination | |
| Our community’s most at-risk people | • Mass media advertising campaign targeting general public commences.  
• Stakeholder engagement.  
• Community leaders / influencers.  
• Unpaid media  
• Key websites; specifically UAC | Starting June | • Knowing of, or being close to, people who have had COVID-19  
• Credible communicators they can identify with  
• Desire to travel overseas again | |
| General population over the age of 16 | • Mass media advertising campaign targeting general public.  
• Stakeholder engagement.  
• Community leaders / influencers.  
• Unpaid media  
• Key websites; specifically UAC | Starting July | | |
| Other priority audiences | • Tailored stakeholder engagement  
• Community leaders/influencers  
• Targeted campaign material and advertising  
• Targeted website content | | | |

*Source - Insights from interviews with New Zealanders about vaccine update - PWC
Principles and plan
We are actively gathering research and insights that will span the duration of the vaccination programme.

- We have commissioned Horizon Research to run frequent general population surveys (online) to continually track New Zealander’s attitudes and public sentiment towards COVID-19 vaccines. We established a benchmark with our initial surveys in September and December 2020. On-going regular research will enable us to gain better insight into key issues and themes occurring across the population, and this will be fed back into our communications and engagement planning.

- The Ministry’s Behavioural Insights team are working with the programme to provide insights as part of their ongoing programme of work. They are currently compiling a literature review on vaccine hesitancy to identify attitudes, beliefs and behaviours around immunisation that may affect COVID-19 vaccine decision making in Aotearoa New Zealand. They will also identify any strategies and/or interventions that have been successfully used in previous vaccination programmes to enhance uptake and equity in New Zealand. This insight will be shared and utilised across the broader programme to help support service design and delivery as well as communications and engagement.

- In collaboration with UAC, CERT and a range of other agencies, we are proactively tracking and addressing vaccine misinformation, disinformation and scams (see more details later in this pack).

- We are ‘listening’ across a range of Ministry channels to help us track public sentiment and identify information gaps:
  - Assessing key questions and themes on social media to identify themes
  - Reviewing public sentiment and attitudinal segmentation, through our social media reporting tool (in collaboration with UAC)
  - Understanding user behaviour on our website as well as gathering feedback via polls and Google analytics
  - Collating key themes from the COVID response team, Healthline key themes and the Ministry call centre

Key insights
The following are some of the key insights from the Horizon research undertaken in September and December 2020:

Accepting a vaccine
- 69 percent (an estimated 2,487,900 adults) of respondents are prepared to receive a ‘well-tested and approved’ COVID-19 vaccine.
- Uptake is likely to be highest among those aged 65+.

Barriers to uptake
- 24 percent of respondents indicated that they would be unlikely to have a COVID-19 vaccine if offered.
- 16 percent of New Zealand adults will not accept an offered vaccine.
- Between the first and the second Horizon Research reports, there is a slight increase in overall vaccine hesitancy (if not a reduction in overall ‘acceptance’ numbers).
- Pasifika and Māori have less confidence in the safety and quality of the vaccine and of its protection.

People who are unlikely to take an offered COVID-19 vaccine are more likely to:
- be female
- have a lower household income than those who are likely to take a vaccine if offered
- have lower educational qualifications than those who are likely to take a vaccine if offered
- be a parent with children in their household.
Māori, Pasifika and Other European, and people who are 35–44 years, are less willing to take a follow-up vaccine.

In December, 72 percent (2,574,200) of respondents are prepared to have a follow-up dose if required, up three percent from September.

18 percent (an estimated 652,600 adults) are unlikely to have a follow-up dose if required.

Respondents of Māori, Pasifika and ‘Other European’ ethnicities had lower than average willingness to take a follow-up vaccine.

**Safety**

The major reasons for hesitancy towards a vaccine are concerns regarding the vaccine’s safety. This is particularly the case for females.

When considering whether to take a COVID-19 vaccine, the top four thoughts that New Zealanders have are about potential side effects.

A third of people believe vaccines can be approved without knowing all the potential side effects.

**Next steps**

Horizon’s next survey output, part of the on-going quantitative general population research we will do regularly throughout the duration of the vaccine programme, will be available to us the week of 8 March. Their report will enable us to gain better insight into key issues and themes occurring across the population towards the COVID-19 vaccine and contrast the results with our benchmark data from 2020.

We have recently collaborated with Horizon on an additional piece of research that specifically targets Māori sentiment towards the COVID-19 vaccine. This complementary piece of research will also be available to us the week of 8 March.

We are exploring options to augment our quantitative general population research, including targeted post-vaccination research, and a series of qualitative research with specific audiences.
Branding

The vaccine communications and engagement programme will be delivered under the Unite Against Covid brand in partnership with Ministry of Health.

Why is purple the vaccine colour

• On the colour wheel, purple is the opposite, complementary colour to yellow
• Yellow is an alert; it requires immediate attention & action
• Purple is a calm colour; it denotes a long term plan, a calm, collected response that people will see for next 12-18 months

The look and feel will be consistent with the Unite Against Covid-19 brand, but with the purple rather than yellow – this shows the public that is part of the same family but denotes anything in purple will be directly related to vaccine messages.

Key visual elements

There is also a series of icons that can accompany messaging.

Vaccine brand guidelines are available that provide guidance on visual identify, voice and tone.
The following resources have been developed as at 1 March.

<table>
<thead>
<tr>
<th>Audience</th>
<th>Title</th>
<th>Purpose</th>
<th>Distribution channels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Border and MIQ workers</td>
<td>Nominating your household contacts</td>
<td>Form to capture the details of household contacts of those receiving the vaccine</td>
<td>For distribution via DHBs to relevant groups</td>
</tr>
</tbody>
</table>
| Border and MIQ workers        | COVID-19 vaccine: FAQs No. 2                                          | Advice about the vaccine for all border and MIQ workers                                                      | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| Border and MIQ workers        | COVID-19 vaccine: FAQs No. 3                                          | Information about the vaccination process for all border and MIQ workers                                      | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| Border and MIQ workers        | Consent form — border and MIQ workers                                | Consent form for tier 1a only                                                                                | For distribution via DHBs to relevant groups                |
| Household contacts            | COVID-19 vaccine: Information for whānau of border and MIQ workers   | Information to help whānau of border and MIQ workers understand they can soon receive the vaccine and why     | For distribution via DHBs to relevant groups                |
| All people in NZ              | Getting your COVID-19 vaccine: what to expect                         | Information about the vaccine, safety and side effects                                                      | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | After your immunisation                                              | Information about aftercare and potential side effects                                                      | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | Getting your COVID-19 vaccine: simplified version                     | Simplified factsheet for people with low literacy                                                           | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | COVID-19 vaccine: FAQs No. 1                                          | General information on COVID-19 vaccines                                                                   | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | Consent form — general                                               | Generic consent form                                                                                        | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | Privacy statement                                                    | Information about what data we are collecting and what we are doing with it — use these in place of seeking consent because we don’t want people to be able to opt out of having their information recorded on the CIR from a monitoring perspective | • MoH website  
• UAC website  
• For distribution via DHBs to relevant groups |
| All people in NZ              | Record card                                                          | Records information about people’s first vaccination, and when their appointment for the second vaccination is | For distribution via DHBs to relevant groups                |
| Speakers of languages other than English | Getting your COVID-19 vaccine: what to expect—translations | Information about the vaccine, safety and side effects — translations in Cook Islands Māori, Fijian, Hindi, Niuean, Samoan, Simplified Chinese, Tagalog, Te reo Māori, Tokelauan, Tongan | UAC website  
• For distribution via DHBs to relevant groups |
| Speakers of languages other than English | After your immunisation — translations                              | Information about aftercare and potential side effects — translations in Cook Islands Māori, Fijian, Hindi, Niuean, Samoan, Simplified Chinese, Tagalog, Te reo Māori, Tokelauan, Tongan | UAC website  
• For distribution via DHBs to relevant groups |
Examples of resources

<table>
<thead>
<tr>
<th>Title</th>
<th>Purpose</th>
<th>Distribution channels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pull up banner</td>
<td>Together protecting Aotearoa</td>
<td>MoH to supply directly to DHBs</td>
</tr>
<tr>
<td>Pull up banner</td>
<td>Vaccinations here</td>
<td>MoH to supply directly to DHBs</td>
</tr>
<tr>
<td>Posters A4</td>
<td>Signposting vaccination sites</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Posters A3</td>
<td>Signposting vaccination sites</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Posters A0</td>
<td>Large version signposting vaccination sites</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Teardrop flag</td>
<td>Flag for outside a testing station</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Large banner for vaccination tent</td>
<td>Large visual to be placed on vaccine testing station</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Directional signage</td>
<td>Signage with arrows pointing to vaccination centres</td>
<td>Restricted Dropbox</td>
</tr>
<tr>
<td>Stickers</td>
<td>For people who have been vaccinated</td>
<td></td>
</tr>
</tbody>
</table>

### Getting your COVID-19 vaccine: what to expect

**Vaccines are one of the ways we can fight the COVID-19 pandemic and protect the welfare and wellbeing of our communities.**

**Protection**

COVID-19 vaccines are available to everyone in New Zealand. Vaccines protect our health and prevent severe outcomes such as hospitalisation. The vaccine provides more protection than any other measure we have ever had to control COVID-19.

**Getting a COVID-19 vaccine**

We encourage everyone that can get vaccinated to do so, including people whose medical condition may make them more vulnerable. Vaccination will help to protect older people and those with underlying health conditions.

**Who can and can’t get vaccinated**

People who are fully vaccinated will be protected against COVID-19 and its variants, with the exception of rare cases of severe allergic reactions or atypical presentations of COVID-19. People who have had COVID-19 may be protected against severe outcomes. People who are not fully vaccinated will get the same benefit from vaccination, but will be at higher risk if they become infected with COVID-19.

**Safety**

We advise that people who are pregnant should get vaccinated after consulting their health professional. There is no evidence that the COVID-19 vaccine causes harm to pregnant women or their babies.

**Who should get vaccinated**

People who can get vaccinated include those who:

- Have not been vaccinated
- Are unwell or have underlying health conditions
- Need to be able to work
- Are very vulnerable to COVID-19
- Are experiencing symptoms

**Consent**

Consent to vaccination will be obtained.

**Things to consider before getting your vaccine**

- You should clean your hands before and after getting your vaccination.
- If you have a cold, flu-like symptoms or have been in close contact with someone who has been in close contact with someone who has COVID-19, you should not get vaccinated until you are well.
- If you have a cold, flu-like symptoms, you should not get vaccinated until you are well.
- If you have a cold, flu-like symptoms, you should not get vaccinated until you are well.

**Resources in development or being finalised**

<table>
<thead>
<tr>
<th>Audience</th>
<th>Title</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Border and MIQ workers</td>
<td>COVID-19: Help with the vaccination process</td>
<td>Additional guidance for border and MIQ workers in the first instance. Simple checklist for booking appointments, getting both doses, and registering the details of household contacts</td>
</tr>
<tr>
<td>Household contacts</td>
<td>COVID-19 vaccine: Information for the people who live with border and MIQ staff</td>
<td>Information about the process for household contacts getting vaccinated, general information about the vaccine</td>
</tr>
<tr>
<td>All people in NZ</td>
<td>COVID-19 vaccine: A quick guide</td>
<td>Booklet about the vaccine, safety and side effects</td>
</tr>
<tr>
<td>All people in NZ</td>
<td>The COVID-19 vaccine rollout plan (A3)</td>
<td>Outlines how the vaccines will be rolled out, based on risk of exposure, and risk of severe outcomes</td>
</tr>
<tr>
<td>All people in NZ</td>
<td>COVID-19 vaccine: Keeping New Zealand safe from COVID-19</td>
<td>Booklet outlining in more detail our vaccine strategy, including how the vaccines will be rolled out, who we are partnering to deliver the programme, and safety of the vaccine</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>Guide to COVID-19 vaccinations</td>
<td>Consolidated information about the vaccination to be translated into accessible formats – Easy Read, large print, audio and NZSL</td>
</tr>
<tr>
<td>Speakers of languages other than English</td>
<td>Getting your COVID-19 vaccine: simplified version - translations</td>
<td>Simplified information about the vaccine, safety and side effects – translations in Cook Islands Māori, Fijian, Hindi, Niuean, Samoan, Simplified Chinese, Tagalog, Te reo Māori, Tokelauan, Tongan</td>
</tr>
</tbody>
</table>
# Stakeholder Engagement Framework

## General Awareness & Engagement

<table>
<thead>
<tr>
<th>Protect our border and MIQ workers</th>
<th>Border/MIQ Workforce</th>
<th>Border/MIQ worker’s close contacts: people they live with</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supported by: Proactive media engagement, translated factsheets &amp; FAQs, Q&amp;A sessions &amp; webinars</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protect our frontline workers and people living in high risk places</td>
<td>Non-border frontline health workforce most at risk of contracting or spreading</td>
<td></td>
</tr>
<tr>
<td>Workforces critical to safety &amp; security; those at risk of severe health outcomes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional collateral: Targeted social media campaign for Māori &amp; Pacific communities comes online</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct engagement with representative networks, Q&amp;A sessions, targeted and translated resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protect the people who are at risk of getting very sick from COVID-19</td>
<td>Aged-care workforce</td>
<td></td>
</tr>
<tr>
<td>Those with elevated risks (elderly, Māori, Pacific, disability, long-term conditions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional collateral: Direct engagement with networks and collective associations, further videos to address areas of hesitancy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protect everyone</td>
<td>General population</td>
<td></td>
</tr>
<tr>
<td>Full public campaign online</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
</tr>
</thead>
</table>

### Engagement Sequence

- **Step 1: General awareness raising**
  - High-level awareness via media and general communications (letters, newsletters etc)

- **Step 2: Initial engagement**
  - Plan approach with employers, unions and other networks and collective associations

- **Step 3: Understanding information needs**
  - Address key general needs through factsheets, FAQs, posters etc

- **Step 4: Direct engagement with workforce**
  - Direct access to Q&A sessions with expert & clinicians

- **Step 5: Service delivery**
  - Vaccinations delivered in partnership with DHBs & vaccinator teams

- **Step 6: Review**
  - Refine and improve

### Engagement Focus

- **Sequencing** – next stages of the rollout
- **Service design** – potential delivery models
- **Their needs** – ensuring no one falls through the cracks

### Engagement Approach

#### Engagement Sequence

- Initial engagement
- Understanding of community
- Understanding of programme
- Partnership
- Developed leadership

#### Engagement Outcomes – Supporting Confidence in Vaccines

- Initial understanding of sequencing including timing (this covers: health, community and business)
- Identification of concerns of their communities (e.g. co-design)
- Understanding of vaccine safety and core messages (e.g. communications material/videos etc.)
- Partnership with the Ministry to support their communities
- Leadership by trusted voices to address concerns and advocate for vaccination
Engagement Framework Case Study

Our overall engagement approach relies on strong partnerships with those who hold the direct relationship with the people who are being vaccinated first (i.e., employee, member, stakeholder, etc.). The rollout to the border and MIQ workforce was the first opportunity to test the engagement approach, which involves six, discrete but related steps designed to lead to a high vaccine uptake at each of the initial stages of the roll-out, and potentially, beyond.

General communications across a range of channels ensures there is some level of awareness (Step 1) about the vaccine roll-out and the focus on those at greatest risk – in this case, MIQ and border workforce. The next step was initial engagement with border agencies, employers, unions, and other employee representatives to confirm the engagement approach and ensure a clear understanding of the information needs for each segment of the workforce (Step 2) and ensure those needs would be met. This led to a series of regular factsheets and frequently asked questions for employers to share with their workforce, as well as support for other workplace collateral such as posters, postcards, and content in industry newsletters (Step 3).

Key insights and findings from initial research have highlighted a strong desire among New Zealanders to hear their questions and concerns addressed by those with medical credibility. This set the scene for the next stage of direct engagement with workers, inviting them to a series of webinars and online ‘Q&A forums’ with vaccine specialists and clinicians (Step 4). People were able to hear from clinicians and vaccine specialists directly and raise any questions or concerns they had. These sessions were extremely well received with reports from managers and employers of numerous workers ‘flipping their stance’ on vaccines from being hesitant to being a definite ‘yes’ as a result of the sessions. This provided strong support for the model of engaging with legitimate questions and concerns people hold directly, and providing access to voices they trust and respect.

These initial steps provided the groundwork for the DHB’s vaccinator teams to then pick up the direct engagement with workers as people were invited to book an appointment to receive the initial dose of the Vaccine (Step 5). To support the planning and execution of this stage, several Border agencies directly provided resource within the Ministry of Health over a period of several weeks to support the operational planning of the rollout, with a strong focus on co-ordinating communications and engagement activities across agencies and DHBs. This has created a pool of expertise and experience we are now drawing on as we continue to review and refine our approach (Step 6) as we prepare for the next stage of the roll-out.

Community Engagement

As part of engaging and communicating with priority audiences, we are planning to roll out a series of community-based information ‘pop-ups’ to complement our public information campaign and stakeholder engagement programme. We will pilot our concept with the Auckland DHB, particularly looking to prioritise communities where there is evidence of a rise in misinformation. Timeframes are being finalised, but we plan to align the pop-ups with local events and existing public health campaigns that have an established community presence.
Engagement with Māori:

- Specialist resources
  - Māori engagement and equity specialists embedded in the programme team
  - Partnering with specialist Māori creative agencies to develop targeted resources
- Equity lens integrated throughout the development of the wider national public information campaign
- Shared narrative – ongoing collaboration with the broader Māori community on the sequencing framework and what that means
- Community voices – empowering Māori providers, community leaders and clinicians to engage with and inform their communities, while relaying any feedback, questions or concerns to the programme
- Dedicated funding
  - Support for Iwi and Māori providers to develop resources that are tailored specifically for the needs of their communities
  - Support for Māori providers to deliver vaccines in a way that works for Māori communities
- Feedback loops – meeting regularly with Iwi and key Māori networks to provide progress updates, test approaches and bring their feedback into the programme
- Partnerships – connecting through existing government and DHB networks and the Iwi Leaders Forum to support consistent engagement with Māori communities

Engagement with Pacific:

- Specialist resources
  - Pacific engagement and equity specialists embedded in the programme team
  - Partnering with specialist Pacific creative agencies and providers to develop targeted resources
- Shared narrative – ongoing regular collaboration with the pacific community on the sequencing framework and what that means
- Community voices – supporting Pacific providers, community and church leaders and clinicians to engage with and inform their communities, while relaying any feedback, questions or concerns to the programme
- Feedback loops – meeting regularly with key Pacific stakeholder networks to provide progress updates, test approaches and bring their feedback into the programme
- Partnerships – connecting through existing government, Pacific NGOs, Pacific media network to support consistent engagement with Māori communities
- Community outreach – establishing, in partnership with Auckland DHB and a specialist Pacific creative agency, a social media campaign for Pacific communities that will be adapted for national use
- Supporting ministerial engagement – collaborating with Pacific Ministers to convene a range of national and regional community forums (in English and Pacific languages)

Example
Ministry of Pacific Peoples and MOH brought together over 600 church leaders and community leaders on Zoom to talanoa (have a conversation) about the Vaccination programme (COVID-19, MMR and Influenza). Hosted on Zoom by Minister for Pacific Peoples and Associate Minister of Health (Pacific) Hon. Aupito William Sio. Dr Ashley Bloomfield and a range of Pacific Health Clinicians and Nurses answered questions from attendees. This was followed up with specific FAQs to common questions and things unanswered.
Our media focus has been on building support and momentum for the vaccine roll-out by telling the story of the individuals who have been vaccinated and what that means for them and their families. The priority to date has been on stories emphasising those first MIQ and border workers to be vaccinated.

To support this programme, we are working closely with district health boards including co-ordinating timeframes around media opportunities, commissioning footage and images from the vaccine events, and providing support as required. The DHBs are also using their channels to promote and share this content.

Our focus is shifting to vaccinations of the people who live with border and MIQ workers. We will take a similar approach as above with this group, with our initial focus starting in South Auckland at community vaccination clinics. We will focus on the stories of the workers’ families and the reasons why they are choosing to be vaccinated.

Once the vaccination of household contacts is underway, our media focus will then shift to non-border frontline health workers.

**Next steps**

- Develop an overall approach to proactive media scene setting, including highlighting key milestones in the roll-out, signalling of a shift in focus - such as a move towards a particular group or population - and the likely timing, etc.
- Investigate opportunities for paid advertorial.
- Identify opportunities and placements of Opinion-editorials from influencers, such as members of the IIAG etc.

**Earned Media**

Covid-19: First South Island border workers get vaccine as second batch of Pfizer/BioNTech arrives

About 40 border workers from Christchurch Airport have been vaccinated today as the Covid-19 vaccination programme starts rolling out in the South Island.

Timaru port workers receive Covid-19 vaccines

Esther Ashley-Coventry · 16:28, Mar 04 2021

PrimetPort Timaru health, safety and security manager Steve Wills was one of the first border workers in the region to receive a Covid-19 vaccine on Thursday.
2021 Paid Advertising Strategy

Maintain social licence

- High level of tolerance / willingness for required responses in Aotearoa

Emotive campaigns that signpost our collective focus for 2021, and add meaning and motivation to what is being asked of New Zealanders.

Emotive AV piece
A nod to re-energise the public, and set the intent for 2021. BY: The stronger our immunity, the greater our possibilities.

Activate/mobilise the nation
A national call for the rest of Aotearoa to prepare for vaccination/get vaccinated.

Ongoing research, insights, data inputs, performance monitoring and audience feedback loops.

Regular testing of creative and messaging.

Participation (involuntary actions)

- Vaccinations

Testing of creative and messaging
Brief: Build strength as a nation as vaccine rolls out. Remain active: we all have a job to do.

In-market: Lower level of activity. Channels: digital, social, radio, press.

Brief: Activate the nation to get the vaccine. Strong call to action.

In-market: High level of mass media activity. Channels: TV, outdoor, digital, social, radio, press.

Build strength
Brief

Social & Radio FAQs

Social & Radio Live AMAs

Influencer campaign: Credible voices across audience groups

Collective Experts

‘Priority audience’ heroes

‘All of us’ heroes

Mobilise action

Priority audiences

All of us

Vaccinations

Border and MIQ workers

Frontline workers and those at risk

Milestone

- e.g. vaccinating is underway

- e.g. 250,000 people vaccinated

- e.g. 500,000 people vaccinated

- e.g. 1 million people vaccinated

- e.g. 2 million people vaccinated

Resurgence messaging

- e.g. Contact tracing campaign

- e.g. Encouraging ongoing testing in high-risk regions

- e.g. Event activations

- e.g. Encouraging ongoing vigilance during flu season

Contact tracing

Hygiene (hands, elbows, etc.)

Wearing masks

Getting tested

Staying home

Physical distancing

Bubbles

Travel

Gatherings

Movement

Masks

Business operations

Compliance

(With required actions)

2021 Timeline:

Feb
March
April
May
June
July
Aug
Sept
Oct
Nov
Dec

Commit

Strengthen

Immunise
Paid Advertising Campaign

The diagram on the previous page outlines the integration of the vaccine paid advertising campaign with the wider Unite Against Covid campaigns. It shows the development of the campaign as the year progress and builds momentum as we get closer to the general public rollout.

The paid advertising campaign will begin in March through a variety of channels. The key messages will include:

- Vaccines are available for everyone, and it will be free
- What is the plan – in particular the sequencing
- Direct people where to go if they want to find out more
- At the moment the general public’s main role is to continue key health behaviours to keep COVID-19 at bay (stay home if sick, face coverings on public transport, scanning, turning on Bluetooth tracing).

As the vaccination programme rolls out, the momentum of the campaign will increase. This will include messages on the progress and recognising milestones, ramping up the ‘why’ messaging through to the main call to action to get vaccinated. Timeframes around each stage of the campaign will be determined once rollout timings are confirmed.

Creative executions will include:

- Using well known New Zealanders and experts to provide information, answer questions and ask people to get vaccinated
- Celebrating the border and MIQ workers who are getting vaccinated.
- Activations
- An advocacy programme for those who have got vaccinated to influence others

We will be working on an all of Aotearoa campaign and also specific Maori and Pacific campaigns.

We will be using a variety of creative agencies to develop the campaign elements who have expertise in developing campaigns for particular audiences.

Next Steps

- Following confirmation of the sequencing, agency briefings will be confirmed and creative message and executions finalised
- Confirmed timing around each the sequence will allow ‘Get Vaccinated’ brief to be confirmed and timings more accurately planned out in terms of campaign activity.
Approach to vaccine Misinformation and Disinformation

Supporting principles that are aligned to our overarching key objectives:

- Be insights and data led by incorporating sentiment reporting from our social listening tool, channels data, direct communication via Healthline and information from our data intelligence team and behaviour and insights teams
- Maintain public confidence in our channels as the trusted sources of vaccine information in New Zealand
- Ensure social media content responds in a timely manner to information needs about the vaccine
- Contain the spread of dis/misinformation while respecting freedom of expression
- Don’t acknowledge misinformation or engage with anti-vax content to reduce the spread and impact
- Build resilience for those most at risk through trusted community networks
- Cross agency response with COVID-19 Group, MOH, CERT, NSG, Netsafe
- Underpinned by strategic framework for strengthening resilience to mis/disinformation (still in development by DPMC)

We’ll do this by:

- Frequent community management (moderation and engagement) of social media
- Provide timely and relevant content that addresses information gaps
- Collaborate with community leaders, social influencers and sector/media partners to promote the official narrative

Key themes we are seeing repeatedly across our channels will guide our focus. We’ll continue to monitor and respond with proactive content to address key issues such as:

- Safety and efficacy
- Hesitancy
- Speed of vaccine development