Welcome to the COVID-19 Vaccine Education Initiative Briefing

We will wait a few minutes to allow everyone to join the meeting.

AGENDA

WELCOME /
Lisa Sherman, President & CEO, The Ad Council
John Bridgeland, Co-founder and CEO, COVID Collaborative

CONSUMER INSIGHTS / Charysse Nunez, The Ad Council

GUEST SPEAKER / Dr. Georges C. Benjamin, President & CEO, American Public Health Association

VACCINE EDUCATION CAMPAIGN / Kate Emanuel, The Ad Council

COALITION BUILDING / Sherry Thompson, The Ad Council
POWERFUL PARTNERSHIP

"WHERE CREATIVITY AND CAUSES CONVERGE"

Unparalled and passionate network of partners across media and tech, marketing and advertising

Co-chaired by former Governor and U.S. Senator Dirk Kempthorne (R-Idaho) and former Governor Deval Patrick (D-Massachusetts)
COVID-19 Vaccine Education Initiative

COVID Collaborative’s scientific advisors
HHS, CDC + Biden Administration
Media companies + Tech Platforms
News Media and PR
Medical community
Creative Community
Trusted Messengers & Microinfluencers
Vaccine advocacy organizations
Community-based organizations (focus on Black and Hispanic communities)
Corporate & Business Sectors
Faith-based community
State and city leaders
ROBUST PARTNERSHIPS

Formative Research
- COVID Collaborative
- Ipsos
- Feedback Loop

Early Strategic & Creative Development
- dentsu health
- BEEN THERE DONE THAT
- Perciara O'Dell
- alma
- JOY

In-Market Messaging Research
- IBM Watson
- FACEBOOK
COVID-19 VACCINE DEMAND CONTINUUM

Q: If a vaccine against COVID-19 were available to you today at no cost, how likely would you be to get it?
Absolutely certain; Very likely; Somewhat likely; Uncertain; Definitely will not

Q: If the COVID-19 vaccine were available to you, when would you become vaccinated?
Immediately when available; Wait about 1-3 months; Wait at least 4-6 months; Wait longer than 6 months; Not sure if, or when, I would get it, I would not get it at all

RESISTANT 20%
SKEPTICAL 20%
OPEN BUT UNCERTAIN 30%
INTENDING 30%

“WAIT AND SEE” ATTITUDE
COVID VACCINATION INTENT
RACE/ETHNICITY

Q: If a vaccine against COVID-19 were available to you today at no cost, how likely would you be to get it?
Absolutely certain; Very likely; Somewhat likely; Uncertain; Definitely will not

Q: If the COVID-19 vaccine were available to you, when would you become vaccinated?
Immediately when available; Wait about 1-3 months; Wait at least 4-6 months; Wait longer than 6 months; Not sure if, or when, I would get it. I would not get it at all

National survey conducted Dec 15-21, 2020 │ n=1,992 adults 18+ │ * Caution small Base N= 78
WHY ARE PEOPLE HESITANT

People’s hesitancy is driven by four key areas where information deficits and misinformation exist.

Concerns about safety and side effects from COVID-19 vaccination

- Speed of the clinical development process
- Distrust in the political and economic motives of the government and corporations
- Established and novel conspiracy theories involving vaccines

Reasons behind distrust vary by race/ethnicity & political affiliation.

“I’m not sure if I trust a government vaccine. Before they were saying it would take much longer to have one ready.”

“I heard that this is a new type of vaccine. How do they really know if it’s safe, especially in the long term? At some point, are we going to be seeing ads from lawyers saying, ‘Did you get the COVID vaccine in 2021 and have suffered serious problems?’”

“It’s a good thing that they have a vaccine. But I don’t want to get it until I know for sure that it really is safe and effective. I’m not going to get it right away.”
COVID VACCINATION ATTITUDES

PUBLIC ATTITUDES IN FAVOR OF COVID VACCINATION OUTWEIGH NEGATIVE ATTITUDES, BUT WE STILL FACE SIGNIFICANT CHALLENGES IN BRIDGING THE TRUST GAP

**GENERAL PUBLIC**
(agree strongly or somewhat agree)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Black (%)</th>
<th>Hispanic (%)</th>
<th>Asian (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I can protect people I know and love by getting a COVID-19 vaccine</td>
<td>54%</td>
<td>60%</td>
<td>75%</td>
</tr>
<tr>
<td>I feel confident that I know enough to guide my decision about getting a COVID-19 vaccine</td>
<td>40%</td>
<td>42%</td>
<td>48%</td>
</tr>
<tr>
<td>Getting vaccinated against the COVID-19 virus is important to me</td>
<td>51%</td>
<td>54%</td>
<td>73%</td>
</tr>
<tr>
<td>The benefits of COVID-19 vaccines are much greater than the risks</td>
<td>39%</td>
<td>45%</td>
<td>69%</td>
</tr>
<tr>
<td>People have a responsibility to get a COVID-19 vaccine when it is available to them</td>
<td>42%</td>
<td>50%</td>
<td>69%</td>
</tr>
<tr>
<td>I would trust a COVID-19 vaccine only after millions have had it</td>
<td>47%</td>
<td>47%</td>
<td>70%</td>
</tr>
<tr>
<td>COVID-19 vaccines are effective</td>
<td>28%</td>
<td>35%</td>
<td>54%</td>
</tr>
</tbody>
</table>

National survey conducted Dec 15-21, 2020 | n=1,992 adults 18+
<table>
<thead>
<tr>
<th>Demographic Skews</th>
<th>Psychographic Skews</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WHITE</strong>&lt;br&gt;68 million Americans</td>
<td><strong>Psychographic Skews</strong>&lt;br&gt;Low trust in government&lt;br&gt;No personal experience w/ serious case of COVID (self or others)</td>
</tr>
<tr>
<td>Women</td>
<td><strong>Low trust in government</strong>&lt;br&gt;Regularly attend religious services</td>
</tr>
<tr>
<td>Age 34-59</td>
<td></td>
</tr>
<tr>
<td>White American</td>
<td></td>
</tr>
<tr>
<td>Lower educational attainment</td>
<td></td>
</tr>
<tr>
<td><strong>HISPANIC</strong>&lt;br&gt;32 million Americans</td>
<td><strong>Low trust in government</strong>&lt;br&gt;Regularly attend religious services</td>
</tr>
<tr>
<td>Women</td>
<td></td>
</tr>
<tr>
<td>Under age 50</td>
<td></td>
</tr>
<tr>
<td>Employed as essential worker</td>
<td></td>
</tr>
<tr>
<td>Resides 3+ member and/or multi-generational household</td>
<td></td>
</tr>
<tr>
<td>Limited access to high quality healthcare</td>
<td></td>
</tr>
<tr>
<td><strong>BLACK</strong>&lt;br&gt;20 million Americans</td>
<td><strong>Psychographic Skews</strong>&lt;br&gt;Reside in South&lt;br&gt;Low trust in government&lt;br&gt;Limited access to high quality healthcare&lt;br&gt;Suspicious of being 'guinea pigs'&lt;br&gt;Democrat</td>
</tr>
<tr>
<td>Women</td>
<td></td>
</tr>
<tr>
<td>Married/living with partner</td>
<td></td>
</tr>
<tr>
<td>Employed as essential worker</td>
<td></td>
</tr>
<tr>
<td>Resides in predominantly Black neighborhood</td>
<td></td>
</tr>
</tbody>
</table>
| Refer to Dentsu audience profiles for media targeting
# Messaging Elements That Resonate Across Audiences

<table>
<thead>
<tr>
<th>Acknowledge Concerns</th>
<th>Moments Missed</th>
<th>Protection</th>
<th>Positive Tone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledge people’s hesitancy rather than challenge it</td>
<td>Highlighting moments of human connection missed serve as a powerful reminder that vaccination is a pathway to regaining these moments</td>
<td>Emphasis on protecting myself, loved ones and those most vulnerable.</td>
<td>Inviting &amp; respectful as opposed to demanding</td>
</tr>
<tr>
<td>Provide the promise of scientific unbiased answers</td>
<td></td>
<td></td>
<td>Acknowledge that the choice is yours to make, which ties to deeply rooted American values of liberty and freedom</td>
</tr>
</tbody>
</table>
Which of the following do you most want to get back to how it was before COVID-19? (Multiple select)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visiting family and friends</td>
<td>74%</td>
</tr>
<tr>
<td>Getting stores and restaurants open again</td>
<td>68%</td>
</tr>
<tr>
<td>Not having to wear a mask when outside my home</td>
<td>64%</td>
</tr>
<tr>
<td>Getting children back in school full-time</td>
<td>54%</td>
</tr>
<tr>
<td>Traveling in buses, trains, or planes</td>
<td>46%</td>
</tr>
<tr>
<td>Concerts, fairs and festivals</td>
<td>41%</td>
</tr>
<tr>
<td>Religious services</td>
<td>34%</td>
</tr>
</tbody>
</table>

**Black**
- 47%

**Hispanic**
- 42%

*The holidays this year and not getting together with all my family like I usually do and celebrating. It's been hard.*

*I'm working from home and trying to stay on top of my kids’ remote schooling. It’s exhausting.*

*I attend church online and as much as I enjoy it, I miss seeing my community.*

National survey conducted Dec 15-21, 2020 │ n=1,038 vaccine hesitant adults
# Messaging Elements Rejected Across Audiences

<table>
<thead>
<tr>
<th>Negativity &amp; Fear</th>
<th>The Right Thing To Do</th>
<th>Overpromising or Obfuscation</th>
<th>‘Back to Normal’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoid reminders of how difficult the year has been, as it can invoke a sense of hopelessness.</td>
<td>References to “many people already stepping up” can come off as pushy or accusatory.</td>
<td>Most understand that mass vaccination is a long-term process. Avoid messages that imply vaccine availability will “flip the switch”.</td>
<td>For most post-pandemic life will never be “the way it was.” It’s more about getting back to life rather than back to normal.</td>
</tr>
<tr>
<td>Fear tactics don’t generate trust or answer questions about vaccines.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## CONSUMER LANGUAGE DO’S & DON’TS

<table>
<thead>
<tr>
<th>DO SAY</th>
<th>DON’T SAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>A safe and effective vaccine</td>
<td>A vaccine developed quickly</td>
</tr>
<tr>
<td>Authorized by FDA based on clinical testing</td>
<td>Operation Warp Speed; Emergency Use Authorization</td>
</tr>
<tr>
<td>Get the latest information</td>
<td>There are things we still don’t know</td>
</tr>
<tr>
<td>Keep your family safe; keep those most vulnerable safe</td>
<td>Keep your country safe</td>
</tr>
<tr>
<td>Public Health</td>
<td>Government</td>
</tr>
<tr>
<td>Medical experts and doctors</td>
<td>Scientists</td>
</tr>
<tr>
<td>People who have questions</td>
<td>People who are hesitant, skeptical, resistant, or “Anti-vaxxers”</td>
</tr>
</tbody>
</table>

Sources: A/B testing & language evaluation  
*n= 434 vaccine hesitant adults. Conducted 11/24/20-12/1/20*
DIFFERENT MESSENGERS EMBODY DIFFERENT LEVELS OF TRUST AND REACH

Analysis based on polling reports from multiple sources
Facts about safety are key, but the messenger is critical—and medical experts are most trusted.
**TIMING**

**PHASED APPROACH:**

Our campaign will be timed to sync with the supply of vaccines and target priority audiences in phases:

<table>
<thead>
<tr>
<th>December 2020</th>
<th>January 2021</th>
<th>February/March 2021</th>
<th>March/April 2021</th>
<th>Late Spring/Early Summer 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Healthcare/LTC Professionals:</strong> Launch of video/social assets featuring Dr. Fauci &amp; nurses &amp; doctors</td>
<td><strong>Initial PSAs (social/digital assets)</strong> targeting priority audiences (priority on Black &amp; Hispanic community)</td>
<td><strong>Full suite of assets</strong> (digital, mobile, social, TV, cable, radio, print)</td>
<td><strong>Continue to develop assets for priority audiences</strong></td>
<td><strong>General market and young adults</strong> (depending on when vaccine is available for mass deployment)</td>
</tr>
<tr>
<td><strong>Vetted FAQs</strong></td>
<td><strong>Open-source toolkit</strong> Website Social/digital assets (insights, briefs, messaging recommendations)</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**January 2021**

Initial PSAs (social/digital assets) targeting priority audiences (priority on Black & Hispanic community)

**February/March 2021**

Full suite of assets (digital, mobile, social, TV, cable, radio, print)

**March/April 2021**

Continue to develop assets for priority audiences

**Late Spring/Early Summer 2021**

General market and young adults (depending on when vaccine is available for mass deployment)
CAMPAIGN TARGETING HEALTH CARE PROFESSIONALS

• American Hospital Association American Medical Association American Nurses Black Coalition Against COVID-19 Morehouse School of Medicine National Association of Hispanic Nurses National Black Nurses Association National Hispanic Medical Association National Medical Association

SHARED MATERIALS: Press release / FAQs / Customizable social copy Website / email blurb / Talking points / Videos and cut downs
IT’S UP TO YOU
COVID-19 VACCINATION
7 things we must do:
WHAT WE NEED TO DO

Appeal to their desire to protect their loved ones.

Tap into their unifying aspiration.
WHAT WE NEED TO DO

Respect their Independence.

Tell them to get informed, not to get the vaccine. This should be a choice, not a mandate.
WHAT WE NEED TO DO

Accept their reluctance.

Recruit through empathy, honesty and kindness. Appreciate the concerns of specific groups such as African-Americans, Latinx, women, conservatives...
WHAT WE NEED TO DO

Flip the burden of proof.

Some people try to plant the seed of doubt by saying the vaccine isn't safe. We need to flip it and make people doubt how safe they are if they don't get vaccinated.
WHAT WE NEED TO DO

Regain trust through Radical Transparency.

Fight misinformation by using data to show what we know, what we don’t know, and the risk of not taking a vaccine.
WHAT WE NEED TO DO

Remind them of moments pre-COVID.

Getting back to human connection moments - the people and events we miss so much.
WHAT WE NEED TO DO

Welcome their Questions

This is an important decision. Having questions is completely ok.
Any time now, a Covid-19 Vaccine will be available to you.

You’re probably asking yourself: Should I take it? Will it help get me back to work, to meeting friends and travelling?

Will I be able to do it all without putting my family and those I love at risk? And speaking of risks, is it safe?

You’ve got questions. And that’s normal.

So visit itsuptoyou.org and get all the information about the vaccines. Change won’t happen overnight, but it starts with getting informed.
Overall, the “it’s up to You” Campaign Succeeded at motivating “vaccine hesitants” across cultures to learn more

**Struck right balance** of rational acknowledgement of questions and concerns w/emotional reminder of why getting a vaccine matters.

Communicated that it’s up to people to learn more about the vaccines and that we need them to get back to the **moments we miss most**.

**Appreciated not being guilted or shamed** into getting a vaccine and liked by the campaign’s **positive yet realistic tone**.

**Pragmatic invitation** to seek out more information (in a single place) was well received.
<table>
<thead>
<tr>
<th>CAMPAIGN EVALUATION &amp; OPTIMIZATION FRAMEWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPOSURE</strong></td>
</tr>
<tr>
<td>• Donated, earned, paid, shared media</td>
</tr>
<tr>
<td><strong>AWARENESS</strong></td>
</tr>
<tr>
<td>• Awareness of messages and assets</td>
</tr>
<tr>
<td><strong>ENGAGEMENT</strong></td>
</tr>
<tr>
<td>• Digital and social media metrics</td>
</tr>
<tr>
<td><strong>CONSIDERATION</strong></td>
</tr>
<tr>
<td>• Taken steps to learn about vaccination</td>
</tr>
<tr>
<td>• Shifts in intent to get vaccinated</td>
</tr>
<tr>
<td><strong>IMPACT</strong></td>
</tr>
<tr>
<td>• Got vaccinated (self-reported)</td>
</tr>
<tr>
<td>• Vaccination rates and other COVID-19 public health indicators</td>
</tr>
<tr>
<td><strong>ADVOCACY</strong></td>
</tr>
<tr>
<td>• Vaccination endorsements via social media and word of mouth</td>
</tr>
</tbody>
</table>

COVID Collaborative-Langer monthly survey
BUILDING OUR GROUND GAME

COMMUNITY PARTNERSHIPS & RESOURCES

+ INFLUENCERS / TRUSTED MESSENGERS

+ DIVERSE COMMUNITY OUTREACH
Building community partnerships is essential to our strategy

State, County, & Local Organizations
Nonprofit Networks
Medical / Public Health Associations
Diverse Community Organizations
Academic & Research Institutions
Faith Community
Foundations
Created Advisory Councils to inform campaign & dissemination plans
We’re committed to providing **helpful tools & resources**

Online Toolkit

- Campaign PSAs & assets
- Messaging Recommendations
- Attitudes & Hesitancy
- Audience Snapshots: Black and Hispanic
- FAQs
- Videos targeting Healthcare Providers (Featuring Dr. Fauci, doctors, & nurses)
- Timing: Late February
We’ve developed custom toolkits for communities

Public Health Toolkit
Media Playbook
Brand Playbook
Black Community Toolkit

Hispanic Community Toolkit
Faith-Based Community Toolkit (Black & Hispanic)
Business / Corporate Toolkit
Establish a communications framework across all types of influencer engagements

**THE FACTS**
Trusted and credentialed medical experts.

**FACT AMPLIFIERS**
Trusted and relevant amplifiers-responsible for sharing, reposting or curating.

**VACCINATION EXPERIENCES**
Includes videos, images or text posts about personal experiences.
INFLUENCER CATEGORIES

- Medical Community
- Government
- Celebs
- Social Influencers
- Faith-Based & NGO’s
- Business
- News Media
- Hyperlocal

The Facts
The Fact Amplifiers
Vaccination Experiences
Reaching & Engaging Diverse Communities...

BLACK & HISPANIC FOCUS GIVEN HESITANCY DATA

Culturally Relevant Agency Partners

Coalitions & Partnerships

Virtual Events

- Medical, non-profit, civil rights, and community organizations (sororities & fraternities)
- Strategic coalitions
- Customized toolkits

- National programs
- Local, customized events
- Content partnerships
Faith is a critical component to reach the Black & Hispanic community as well.

**Strategic Plan**

- **Understand** faith community needs and concerns
  - Custom research underway

- **Convene** faith leaders and formally engage them and their organizations
  - Establishing National Steering Committee

- **Empower** those leaders, their networks, and other faith leaders with impactful messaging and resources
  - Custom toolkit

- **Host** national and local events to get that messaging in the hands of people of faith

**Agency Partner:**

Values Partnerships
“Alone we can do so little; together we can do so much.”

- HELEN KELLER