

2023 Measles Campaign

Direct Channels Campaign Brief

National roll out of MMR campaign via direct channels

March 2023

Version Control

| Version | Date | Author | Notes |
|---------|----------|------------|-----------------------------------|
| 0.1 | 16 March | [REDACTED] | Brief for stakeholder circulation |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Background and Context

Full background and context is detailed in the original brief [MMR Direct Campaign Brief Feb 23](#).

At a high level, NIP is currently reaching out to people born between 1989 and 2004, some of whom may not have received both doses of the MMR vaccine. Direct and digital channels were used to initially reach people living in Auckland, the Bay of Plenty, Waikato and Northland. Messages were phased as the promotion commenced during the weather events of Cyclone Gabrielle. Several areas that were particularly affected were excluded from initial activity.

As at 9 March, approximately 460k people in those regions were contacted via email and SMS, with outreach calls progressing.

We are now rolling out direct activity nationwide.

Purpose of this document

This brief details the proposed campaign activity across direct channels to roll out the approved email and SMS content to all regions.

It includes objectives, audience selection (and exclusions), timelines, stakeholders and copy.

Scope of this brief

In scope

- Direct channels campaign via CPIR to agreed audience and locations – including email, SMS and outreach calls.
- Reference to district/region led activity to align to NIP Comms lead activity

Out of scope

- Outreach calls via Whakarongorau. Capacity planning will commence in order to determine when outreach calls may commence.
- Those regions who wish to opt out of national comms in order to complete their own activity via their own channels
- Outbreak response communications
- All other marketing channels.

Objectives

Overall Programme Objectives

1. Raise population immunity and prevent possible outbreak of measles
2. Vaccinate 95 percent of the population against measles
3. Deliver a catch-up campaign for those born between 1989 and 2004
4. Address the equity gap in MMR rates for Māori and Pacific people.

Direct Marketing Campaign Objectives

- Raise awareness to a selected audience born between 1989-2004, across all New Zealand (excluding those that were contacted in phase 1 and 2 of the campaign) who may have missed their childhood measles immunisation
- Make it easy for this cohort to understand the risks of measles and why it is so important to get fully immunised against the measles
- Direct these people (and their children) to get their measles vaccination at their doctor, health provider or selected pharmacies
- Deliver messages and information that resonates (with particular focus on Māori and Pacific people) and in a way that is easily understood
- Achieve an engagement rate in line with average open and delivery rates of other immunisation direct programmes - ~50% open rate
- Achieve **1%** uptake rate of vaccinated to those contacted. Assess uptake of vaccines by additional people residing at the same address (e.g. children).

Note – measurement of results may take a number of months due to the lag of updating NIR.

Direct messaging is one part of the overall communications and engagement plans across Te Whatu Ora.

Campaign Approach and Detail

- **Email and SMS are selected channels for this campaign.**
Due to the amount of information needed to communicate with this audience, email is the most appropriate channel to lead with. Te Whatu Ora NIP Campaign team will lead with email (or SMS where no email address) for all regions.
- The send address (email domain) and 'signatory' for this campaign is Te Whatu Ora.
- The call to action will direct people to participating pharmacies, or their GP or health provider. For more information, people may click the link included that will land at the measles page at www.moh.govt.nz/measles. Alternatively, people may call Healthline on 0800 611 116.
- The template will include the existing header banner created in 2022 – specs 800 pixel wide (high resolution) and image to connect the audience with the communication. Banners and images have already been set up to be hosted. Alt text will to be set up for image.
- URL links to be provided and tested once call to action criteria is confirmed.
- Please include the following stakeholders as a seed group to receive the email:
 - Kim.rousell@health.govt.nz
 - Nick.yee@health.govt.nz

Approved Key Messages

Note: key messages are not email/SMS copy – please do not change.

- New Zealanders should ensure they are fully protected against measles following a confirmed case of the highly infectious disease in Aotearoa.
- Any person born during or since 1969 and who does not have documented evidence of receiving two doses of a measles vaccine and has not had measles previously is at risk.
- Unvaccinated tamariki are at particularly high risk of serious illness from measles.
- Measles spreads more easily than almost any other disease, and can cause serious illness including pneumonia, brain infection and death.
- MMR is given as two doses. If you're not sure that you've had two doses, play it safe and get vaccinated. There are no safety concerns with having an extra dose.
- MMR vaccines are free for everyone born after 1 January 1969. Visit your local pharmacy or call your doctor or health provider today.
- Two doses of the MMR vaccine provide lifelong protection against measles in 99 out of 100 vaccinated people.

Supporting messages

- The MMR vaccine protects against measles, mumps and rubella. All three can be very serious illnesses.

- If you have been exposed to measles, getting the MMR vaccine within 72 hours can prevent you from getting the disease.

Supporting messages – rangatahi and adults

- Measles, Mumps and Rubella can affect your chances of getting pregnant or having a healthy baby
 - Measles can increase the risk of miscarriage and premature labour
 - Mumps can affect fertility for both men and women
 - Rubella can increase the risk of major birth defects
- These days two MMR vaccinations are given to you as a child but people born before 2004 may have missed having one or both doses.
- We're encouraging everyone born before 2004 to check with a parent, caregiver or family doctor to see whether you had both MMR vaccinations as a child.
- If you're not sure that you've had two doses, play it safe and get vaccinated. MMR vaccines are free at your GP, other local health providers and many pharmacies. There are no safety concerns with having an extra dose.

Target Audience (people we will contact)

- Eligible and registered people born between 1 January 1989 and 31 December 2004 inclusive, who are eligible for free healthcare in New Zealand
- Target domiciles: All regions excluding Northland, Auckland, Waikato, Bay of Plenty.
- Send date: **Monday 20 March**
- Must have a valid email address, or phone number. Where no email address exists, mobile phone number may be used to send SMS.

Total eligible people (exclusions applied).

| | Asian | Maori | Other | Pacific | Total |
|--------------------|---------------|---------------|----------------|---------------|----------------|
| Canterbury | 17,239 | 12,042 | 77,876 | 3,937 | 111,094 |
| Capital and Coast | 11,671 | 9,466 | 48,245 | 5,342 | 74,724 |
| Hawkes Bay | 2,176 | 9,388 | 14,496 | 1,398 | 27,458 |
| Hutt Valley | 5,039 | 5,969 | 15,420 | 2,714 | 29,142 |
| Lakes | 2,003 | 6,698 | 7,731 | 530 | 16,962 |
| MidCentral | 3,143 | 7,423 | 19,973 | 1,309 | 31,848 |
| Nelson Marlborough | 1,734 | 3,164 | 16,289 | 817 | 22,004 |
| Overseas | 91 | 89 | 402 | 46 | 628 |
| South Canterbury | 783 | 1,023 | 7,035 | 330 | 9,171 |
| Southern | 6,968 | 7,262 | 51,998 | 2,210 | 68,438 |
| Tairāwhiti | 402 | 4,938 | 2,953 | 230 | 8,523 |
| Taranaki | 1,106 | 4,210 | 12,619 | 358 | 18,293 |
| Wairarapa | 355 | 1,708 | 4,635 | 254 | 6,952 |
| West Coast | 223 | 645 | 3,035 | 71 | 3,974 |
| Whanganui | 513 | 3,468 | 6,143 | 380 | 10,504 |
| Total | 53,446 | 77,493 | 288,850 | 19,926 | 439,715 |

Exclusion criteria (to remove from the data extract)

- Remove all people/regions included in the first phase of the campaign – including Northland, Auckland, Waikato, and Bay of Plenty
- **Remove people from districts Tairāwhiti, Canterbury and West Coast**
- People who have had two doses recorded
- Deceased people
- Invalid contact details

- Email addresses that have ‘bounced’ from other email campaigns
- Opted out of all communications
- Opted out of receiving messages via email or SMS channel
- Anyone born before 1989 or after 2004
- Has a Medical Exemption
- Any person who has received an email/SMS/outbound call from Te Whatu Ora within the last 7 days (starting at day 0)
- Remove people where the same email address is being used by more than 3 people
- Remove people where the same mobile number is used by more than one person i.e. if two people are linked to same mobile neither will be sent an SMS
- Individuals residing outside of New Zealand / addresses outside of NZ.

Campaign Measurement

- The campaign will be measured by uptake of vaccinations and assessment of channel engagement metrics (open rate, click rate, delivery rate, unsubscribe rate), plus any anecdotal feedback captured through Healthline or via external partners
- Tracking links to be included on URLs to assess traffic via google analytics
- Assessment of uptake from people residing at the same address as primary contact (to assess if children were vaccinated at the same time)
- Kim Rousell, Direct Marketing Lead will circulate results. All requests for information should go to Kim Rousell to coordinate across stakeholders.

Timings

| Task | Date | Completed | Responsible |
|-------------------------------------------------------------------------------------------------------------|---------------------|-----------|----------------------------------------------------------------------------|
| Circulate brief to stakeholders | Thurs 16 Mar | | ██████████ |
| Confirm any districts who wish to be excluded | Fri 17 Mar | | ██████████ |
| Audience numbers run SMS volumes/ budget approved | Fri 17 Mar | | ██████ to run numbers ██████ to gain approval on SMS budget from ██████ |
| Template set up (using existing design assets) | Fri 17 Mar | | ██████████ |
| Data extracted, HTML/template built and tested Links checks QA completed | Fri 17 / Mon 20 Mar | | ██████████ |
| Engagement team to brief external stakeholders/partners *check if Steph or RAMs to complete briefing | Fri 17 Mar | | ██████ |

| | | | |
|-------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|--|---|
| Stakeholder check-in to confirm production set up, checks completed, appropriate stakeholders informed and ready. | Mon 20 Mar | | ■ |
| Final approval received to send | Mon 20 Mar | | ■ |
| Email (and SMS) sent | Mon 20 Mar | | ■ |
| Campaign analysis | Engagement stats – 27 Feb Uptake rates – from Weds 1 March | | ■ |

Stakeholder responsibility

| Name and role | Business Unit | Responsibility |
|---------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ■ Direct Marketing Lead | Communications & Engagement | Campaign Manager |
| ■ Interim Director, Prevention | Prevention | Overall approval ■ confirmed approval not required by ■ in this instance as key messages signed off by ■. |
| ■ General Manager | Communications & Engagement | Approve |
| ■ General Manager, Operations Manager, Regional Accounts, SROs and Logistics | Operations | Approve Budget approval Share brief with RAMs Confirm any districts to exclude Confirm with Ops that participating pharmacies are set up and ready and have vaccine stock. |
| ■ Manager Immunisation | Operations | Approve |
| ■ Programme Manager | Operations | Inform, feedback |
| ■ NIP Campaign Manager | Communications & Engagement | Approve |
| ■ Programme Manager Katherine Wisnewski | Operations (CPIR and Whakarongorau lense) | Inform Brief in Healthline for inbound calls Consider outreach for a later time |
| ■ Co-Clinical Lead, NIP | Operations | Inform |

| | | |
|--------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| | | (no change to approved copy) |
| ██████████ Comms and Engagement Manager | Communications & Engagement | Inform and ensure activity is in line with Strategic Comms plan. Inform and communicate to internal and external stakeholders / partners |
| ██████████ Analyst | Data & Digital, Operations | Data extraction, QA, Production, Test and Deployment Review/feedback/Inform |
| ██████████ Manager, Data Analysts | Data & Digital, Operations | Inform/feedback Approve data process followed and accurate |
| ██████████ | CPIR team | Inform |
| ██████████ Māori Lead | Communications and Engagement | Inform |
| ██████████ Pacific Comms Lead | Communications and Engagement | Inform |
| ██████████ Te Aka Whai Ora | Communications | Inform |
| ██████████ Operations Manager, Data Partnerships | Operations | Inform |

Released under the Official Information Act 1982

Appendices - Email copy (final approved version)

Kia ora <name>

Did you know we've recently had a case of measles in New Zealand? Measles is a serious disease which is highly infectious.

Why worry about measles?

Measles is a virus that spreads more easily than almost any other disease and can make you very sick. About 1 in every 10 people with measles needs to go to hospital. <Māori are 4 times more likely and Pacific people are 14 times more likely to need hospital admission.> In serious cases measles can be fatal. Symptoms may include a fever, cough, a runny nose and sore, watery 'pink' eyes. A rash could follow that may start on the face then behind the ears before moving down the body.

Immunisation can help protect you

Immunisation can help protect you against measles and other diseases. If you're not sure that you're fully immunised against measles, check with your doctor or your Plunket or Well Child book to make sure you've had both doses. And if you have <children/tamariki>, check they are up to date for measles and their other regular immunisations.

If you do not know if you've have had two doses, play it safe and get immunised. There's no risk with getting an extra dose.

Getting immunised is easy and it's FREE

You can get protected by visiting your doctor, nurse or healthcare provider. A number of pharmacies also offer measles immunisation. [Search Healthpoint to find a vaccination site near you](#). It might also be a great time for everyone who is eligible in your <family/whanau> to get immunised.

Need more information?

Call Healthline on 0800 611 116 or visit the [immunise website](#).

Keep safe and well.

Ngā mihi
Te Whatu Ora Health New Zealand

SMS Copy

To be used for both follow up to email/outreach call or as lead communication (where no email address is listed)

Kia ora <name>

Did you know we've recently had a case of measles in New Zealand? Measles is a serious disease which is highly infectious.

If you're not sure if you're fully immunised, check with your doctor, nurse or your Plunket or Well Child book to check you've had both doses. And if you have <children/tamariki>, check they are also up to date for measles and their other immunisations.

You can get protected by visiting a pharmacy that provides this service (check out www.healthpoint.co.nz - then type 'MMR vaccine' into the search box) or through your GP or healthcare provider. It might also be a great time to get everyone who is eligible in your <family/whanau> immunised.

If you need more information call Healthline on 0800 611 166 or visit www.moh.govt.nz/measles.

Noho ora mai
Te Whatu Ora Health New Zealand

Released under the Official Information Act 1982