

HAGER SHARP



WHAT'S AGE GOT TO DO WITH IT?

Starting marijuana use at a young age increases the risk of problem use, such as addiction.



Source: *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*

ImmunizeDC: The Immunization Coalition of Washington, DC

INTRODUCTION TO HAGER SHARP

**HAGER SHARP:
A SMALL BUSINESS THAT
DOES BIG THINGS.**

We have dedicated more than 50 years to developing award-winning strategic communications, marketing, and behavior change campaigns and initiatives for mission-driven organizations working to help people live healthier, happier, and safer lives.

Hager Sharp is and always will be committed to creating and executing ideas that make a difference.

HOW WE HELP CLIENTS MAKE A DIFFERENCE



Integrated Marketing and Communications Campaigns



Strategic Planning, Research, and Evaluation



Branding and Message Development



Creative and Digital Services



Website and Digital Product Development



Media Buying



Media Relations



Digital Engagement



Partnerships



Events



Thought Leadership



Meetings and Conferences



Multicultural Outreach



Technical Assistance and Training

WORKING TOGETHER TO MAKE A DIFFERENCE IN HEALTH

AARP Foundation

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

 **CDC Foundation**
Together our impact is greater



AASM
American Academy of
SLEEP MEDICINE™



 American
Kidney
Fund®

 **Elizabeth Dole Foundation**
CARING FOR MILITARY FAMILIES

CHANGE Sexual &
reproductive
health & rights
for all.



Johns Hopkins Cochlear Center for
Hearing and Public Health

 **ICRW**
INTERNATIONAL CENTER
FOR RESEARCH ON WOMEN
PASSION. PROOF. POWER.

National
Association
for Behavioral
Healthcare



Access. Care. Recovery.

REAGAN-UDALL
FOUNDATION
FOR THE FDA

 UNITED NATIONS
FOUNDATION

 **ZERO TO THREE**
Early connections last a lifetime



CDC
CENTERS FOR DISEASE
CONTROL AND PREVENTION

NIH
National Institutes
of Health

FDA

USDA

**HAGER SHARP:
EXPERTS IN VACCINATION
MESSAGING & COMMUNICATION**

Vaccines

Know what you need



Vaccines you may need depending on health conditions or other factors:

This chart shows some (but not all) vaccines you may need. Talk to your healthcare professional about the vaccines recommended for you.

	Hepatitis A Series	Hepatitis B Series	Meningococcal ¹	Meningococcal ²	PPSV23	PCV13
Weakened immune system			*	*	*	*
HIV		*	*	*	*	*
No spleen or spleen does not work well			*	*	*	*
Heart disease					*	
Chronic lung disease (for example COPD or Asthma)					*	
Diabetes: Type 1 or Type 2					*	
Chronic kidney disease or kidney failure		*			*	*
Chronic liver disease	*	*			*	
Chronic alcoholism					*	
Healthcare workers*		*				
Men who have sex with men	*	*				
First-year college student living in residence halls			*			

* You should get one combined one-dose vaccine (Hepatitis A and B) instead of two separate vaccines.
¹ Meningococcal conjugate vaccine (MenACWY)
² Meningococcal polysaccharide vaccine (MenPSV23)

You may need other vaccines for international travel. Visit www.cdc.gov/travel.

Talk with your doctor or other healthcare professional to make sure you are up to date with the vaccines recommended for you.

For more information on vaccines for adults, visit www.cdc.gov/adultvaccine or call 1-800-232-6222. Use the Adult Vaccine Self-Assessment Tool at <http://www.cdc.gov/adultvaccine> to find out which vaccines you may need.

Information Series for Adults

Vaccines

Know what you need

Vaccines prevent diseases that can be very serious. All adults need vaccines to help protect themselves and others. The vaccines recommended for you are based on your age, health condition, job, lifestyle, or travel habits.



Talk to your healthcare professional about which vaccines are right for you!

Vaccines you may need based on your age:

Pneumococcal

WHO? All adults 65 years or older should get one dose of PPSV23 (pneumococcal polysaccharide vaccine). Adults 65 years or older who have never received a dose can discuss and decide, with their vaccine provider, to get one dose of PCV13 (pneumococcal conjugate vaccine).

HOW OFTEN? If someone wants both vaccines, get PCV13 first followed by PPSV23.

Shingles (Zoster)

WHO? Adults 50 and older, including adults who have had shingles or got the previous shingles vaccine (Zostavax).

HOW OFTEN? Two doses, 2 to 6 months apart.

Human papillomavirus (HPV)

WHO? Females and males 26 or younger.

HOW OFTEN? One time series of two or three doses.

Measles, mumps, rubella (MMR)*

Recommended as a catch up if you didn't receive as a child

WHO? Adults born in the United States in 1957 or later who have not received MMR vaccine, or who had lab tests that showed they are not immune to measles, mumps, and rubella.

HOW OFTEN? One time for most adults; however, certain people, such as college students, international travelers, or healthcare professionals, should get two doses.

Chickenpox (Varicella)*

Recommended as a catch up if you didn't receive as a child

WHO? Adults born in the United States in 1980 or later who have not received two doses of chickenpox vaccine or never had chickenpox.

HOW OFTEN? One time series of two doses.

* The vaccine should not be given to pregnant women or people who have a very weakened immune system. Do not include people with AIDS or those with a CD4 count below 200.

Vaccines recommended for everyone:

Influenza vaccine every year during the season, including pregnant women during any trimester.

Tdap vaccine one time, no matter when you got your last tetanus (Td) vaccine. Pregnant women also need Tdap vaccine during every pregnancy.

Tdap or Td booster every 10 years.

Immunization is one of the safest and most effective ways to protect your health. Vaccine side effects are usually mild and go away on their own. Severe side effects are very rare.

DON'T WAIT. VACCINATE!



U.S. Department of Health and Human Services
 Centers for Disease Control and Prevention

March 2018

UNDERSTANDING KNOWLEDGE, ATTITUDES, BELIEFS, AND BEHAVIORS REGARDING VACCINES

To help promote immunization across the lifespan and to assist CDC's efforts in understanding the information needs and gaps in reaching parents and adults about vaccines, Hager Sharp conducts focus groups, in-depth interviews, and surveys throughout the year to understand audiences' perspectives and test messages and materials about a variety of vaccines from MMR and HPV to influenza and COVID-19.



HELPING PROVIDERS STRENGTHEN RECOMMENDATIONS AND INCREASE VACCINATION RATES

Hager Sharp conducts surveys, focus groups, and in-depth interviews with health care providers throughout the year to test messages, apps, and other resources to help them optimize their vaccine recommendations and have effective conversations with parents and adults about various vaccines, including pneumococcal, meningococcal, RSV, and others.

UNDERSTANDING EFFECTIVE MESSAGING AROUND COVID-19 PEDIATRIC VACCINATION

Hager Sharp completed formative research and message testing for the AAP in support of COVID-19 pediatric vaccination. We conducted a literature review to identify key themes, which were used to develop and test pairs of messages (e.g., social media; basic safety; vaccine demand; and trust messages) with parents.

We also conducted focus groups with providers to test CDC's steps to help providers talk with patients about COVID-19 vaccination, based on motivational interviewing.



PROMOTING HPV VACCINATION TO PREVENT CANCER

We created a national campaign, *HPV Vaccine Is Cancer Prevention*, that shifted the conversation about the HPV vaccine from sexual risk to cancer prevention.

HPV vaccination rates among adolescents ages 13 to 17 increased among males from 41.7% in 2014 to 62.6% in 2017 and among females from 60% in 2014 to 68.6% in 2017, during campaign implementation.



**Cancer Prevention Through
HPV Vaccination in Your
Practice:** An Action Guide for
Physicians, Physician Assistants,
and Nurse Practitioners



**Cancer Prevention
Through HPV Vaccination:**
An Action Guide for Large
Health Systems



EQUIPPING CLINICIANS WITH STRATEGIES TO IMPROVE HPV VACCINATION RATES

We worked with National HPV Vaccination Roundtable directors, leaders at medical professional associations, health care systems, and cancer institutions, and practicing clinicians to develop a suite of six action guides tailored to different medical professionals—from physicians to dental providers to office administrative staff to large health systems—to motivate and empower them to improve HPV vaccination rates in their practices in order to protect their patients against HPV cancers.

ENCOURAGING HPV VACCINE UPTAKE AMONG ADOLESCENTS

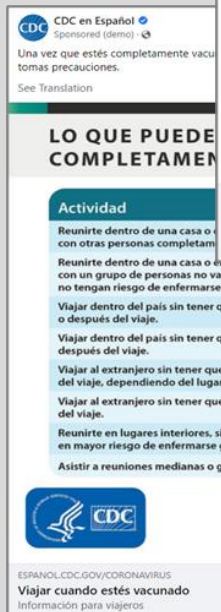
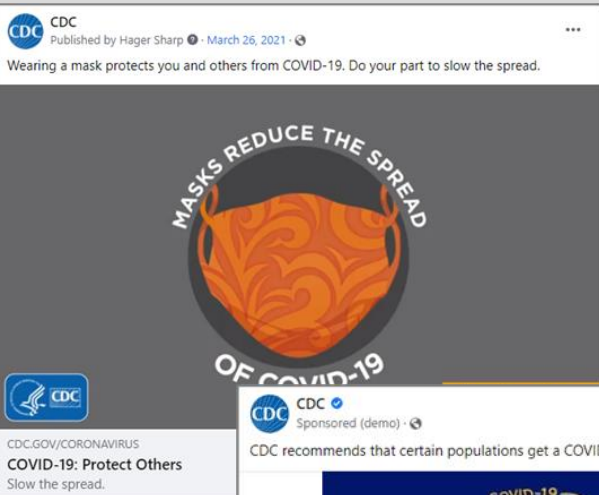
In support of Dr. Philip Massey's research at Drexel University, funded through an NIH National Cancer Institute grant, we developed narrative-based messaging for a social media intervention reaching parents of adolescents regarding HPV vaccination. Using storytelling, the episodic content we created shared common parent experiences and questions through the voices of personas with the goal of promoting HPV vaccination uptake.



PROMOTING HPV VACCINATION AMONG YOUNG ADULTS

Young adults through age 26 who were not fully vaccinated against HPV when they were younger still have a critical opportunity to protect themselves against HPV cancers.

We developed and implemented *HPV VAX NOW* to empower young adults to seek the HPV vaccine and to motivate clinicians to recommend the vaccine to all patients through age 26. The campaign ran in MS, SC, and TX, three states that had some of the lowest HPV vaccination rates in the country when the project began.



PROMOTING COVID-19 VACCINATION

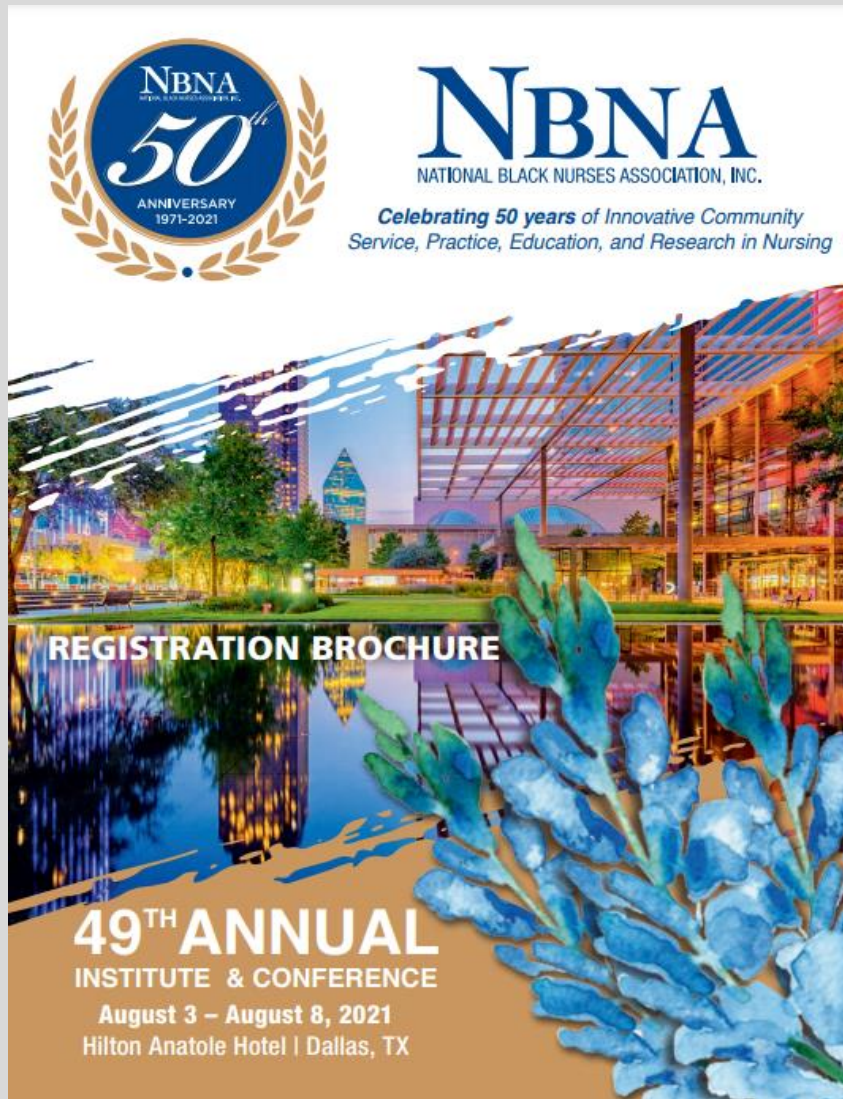
We planned and executed paid media buys across multiple social media channels, including Facebook, Instagram, YouTube, and Pinterest, to help the CDC Office of the Associate Director for Communication promote COVID-19-related messages and reach priority audiences, including Hispanic and African American consumers, rural communities, and parents, among others, in both English and Spanish.

National Black Nurses Association

Annual Meeting

USING LESSONS LEARNED FROM HPV VACCINATION TO INCREASE UPTAKE OF COVID-19 VACCINATION

Our team was selected to present at the 2021 National Black Nurses Association annual meeting on the topic, “Increasing Clinician Confidence and Improving Vaccination Recommendations: Lessons Learned from CDC’s *HPV Vaccine Is Cancer Prevention Campaign* for COVID-19 Inoculation.”



NEWS

Report: U.S. failing to protect kids from HPV

Liz Szabo USA TODAY

Published 12:04 a.m. ET Feb. 10, 2014



The New York Times

Report Says Not Enough Children Get HPV Vaccine

Share full article

By Denise Grady
Feb. 10, 2014

Not enough children in the United States are being vaccinated against the cancer-causing human papillomavirus, or HPV, according to a [report issued on Monday](#) by the President's Cancer Panel. The viruses, transmitted by intimate contact, can cause cancers of the cervix, vagina, vulva, anus and penile throat. Vaccines can protect against two of the most common HPV-related cancers, and a series of three injections for boys and girls starting at age 11 to 12. But only about a third of girls ages 13 to 15 and less than 7 percent of boys in the United States had received the shots. Vaccination rates are higher in Australia (71.2 percent) and Britain (65 percent). Doctors and parents need better education about the vaccine, and pharmacists need to be allowed to administer it, the report also urges that pharmacists be allowed to



HUFFPOST

Log In

Let's Make HPV Vaccination a Public Health Priority

The HPV vaccine has the potential to save lives and prevent millions of avoidable cancers and HPV-related conditions in men and women.

By Hill Harper, Contributor

Award-winning actor; Bestselling author; Member of the President's Cancer Panel

May 14, 2014, 11:34 AM EDT | Updated Jul 14, 2014

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cancertoday
Practical Knowledge. Real Hope.
From the American Association for Cancer Research

In the magazine

FORWARD LOOK

Push Needed to Increase HPV Vaccine Rates

President's Cancer Panel stresses need for more aggressive promotion

by Sue Rochman

March 28, 2014



President's Cancer Panel

Accelerating HPV Vaccine Uptake

PROMOTING URGENCY FOR ACTION ON HPV VACCINATION

Hager Sharp supported the development and release of the President's Cancer Panel's report, *Accelerating HPV Vaccine Uptake: Urgency for Action to Prevent Cancer*. We contributed to this report from inception to release, and we provided strategic counsel and review for report recommendations, the executive summary, and the cover letter to the President.

Hager Sharp developed and implemented the media outreach plan for the national release of the report. Media coverage included *USA TODAY*, the *New York Times*, *HealthDay*, Cancer Today, CBS Radio News, and American Urban Radio Network, among others.

Scenario for Washington, DC Focus Groups

On a December morning, an unmarked truck traveling downtown releases aerosolized dry anthrax spores using a concealed spraying device. The release is scheduled for 9 a.m. to maximize the number of people affected during commuting hours. The anthrax spores spread quickly through the air, reaching every corner of the city and slowly creeping into buildings. It's a windy day, so the anthrax spores get blown around, traveling miles downwind from the initial release. Residents unknowingly breathe in the spores as they go about their daily routine. The spores attach to clothing, traveling home with commuters from work. They seep into businesses, schools, and churches in the area when residents go in and out of buildings.

At first the attack goes unnoticed: The anthrax spores are so small that they cannot be seen, smelled, or tasted. There is no way people would have known. But cases of people reporting fever and chills, cough, stomach pains, and body aches increase in the area in the following days. At first, doctors think this is a spike in flu—it is winter, after all. It's not until three full days after the attack that public health officials confirm that an anthrax attack has occurred. You find out that nearly 350,000 people—including you and your children—have been exposed to anthrax.

EXPLORING PARENTS' DECISION-MAKING TO PROTECT THEIR CHILDREN DURING A BIOTERROR EMERGENCY

The anthrax vaccine is approved by the FDA for use in adults but would be recommended and made available for children in an emergency to protect them after an anthrax exposure. We conducted immersive experience-mapping research to explore consumer and clinician perceptions about an emergency-use anthrax vaccine for children to inform communications strategies for parents and pediatricians in the event of a bioterror emergency.

QUESTIONS?



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