Summary of Webinar

CANCOVID EXPERT PANEL EVENT SERIES: DETECTING AND CORRECTING PUBLIC HEALTH MISINFORMATION: LESSONS LEARNED AND BEST PRACTICES

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Wednesday, November 2, 2022, 11am – 12:30pm EDT

Webinar available on:
[(61) Panel: Detecting and Correcting Public Health Misinformation: Lessons Learned and Best Practices - YouTube](#)

Moderator:

- **Robert Steiner**, MBA, Director, Dalla Lana Fellowship in Global Journalism, Assistant Professor, Dalla Lana School of Public Health, University of Toronto

Speakers:

- **Norma Rabbitskin**, RN, Senior Health Nurse, Sturgeon Lake Health Centre
- **Vivian R. Ramsden**, RN, PhD, MCFP (Hon.), FCAHS, Professor, Director, Research Division, Department of Family Medicine, University of Saskatchewan
- **Shirley Bighead**, Director of Health, Sturgeon Lake Health Centre, Sturgeon Lake First Nation
- **Robert Danisch**, PhD, Professor, Department of Communication Arts, University of Waterloo
- **Ashley Mehlenbacher**, PhD, Associate Professor and Canada Research Chair in Science, Health, and Technology Communication, University of Waterloo
- **Heidi Tworek**, PhD, Associate Professor, International History and Public Policy, University of British Columbia
- **Gabby Stern**, Director of Communications, Department of Communications, World Health Organization

Objective

This document summarizes the key takeaways from an expert panel held on November 2nd, 2022, convened by CanCOVID on lessons learned and best practices from the SARS-CoV-2 pandemic relating to public health communications.

Presenters shared global best practices and perspectives on detecting and correcting misinformation about COVID-19, in relation to community infection, testing, tracing, vaccination, masking, and air quality mitigation.

The presentations described points that broadly related to four themes:
i. Community-based & culturally relevant approaches;
ii. Democratic communications;
iii. Meaning-making versus information transmission; and
iv. Countering misinformation, disinformation, conspiratorial thinking, and online abuse.

i.   Community-based and Culturally Relevant Approaches

Community-based and culturally appropriate approaches are important when communicating public health messages. To prevent the spread of COVID-19, the Sturgeon Lake (SL) First Nation Community relied on traditional medicinal practices and on knowledge keepers (local experts in dealing with diseases). A holistic approach grounded in their cultural beliefs and their connection to Mother Earth helped support community members during the pandemic.

In various ways, First Nations in SL oriented most of their pandemic strategies and interventions around their community. First, a holistic pandemic plan accounting for culturally relevant interventions and strategies to maintain individuals' health and well-being was developed with the help of members and leaders of the community. This kind of citizen engagement informs public health officials of values that are most important to their community which is crucial to effective public health messaging. Citizen participation also allows for the crafting of messaging to which people are most responsive and for best practices to be shaped by the audience.

The fact that SL First Nations have their own community health system gave them control and the capacity to maintain cultural relevance in their pandemic response. In addition, their decision to collect and measure their own COVID-19 data allowed them to deliver services aligned with the community's needs and to maintain the rapport they have been building with community members for the last 20 years. As overcrowding was flagged as a contributing factor to the spread of the virus, the help of external agencies and provincial collaboration was sought to isolate infected individuals in hotels.

Culturally relevant public health messaging in the SL community while maintaining transparency and authenticity was achieved in different ways. First, COVID-19 updates to the community were provided on the radio and the information was also interpreted in Cree language. Situation reports including infographics providing timely information (e.g., cases, testing, vaccination, and death) to community members were also developed.

Second, *Moccasin Telegraph* was another initiative that allowed for the sharing of updates from the chief, the council and health management with members living on the reserve. A phone line connecting COVID-19 positive residents with nurses allowed members of the community to gain knowledge and address myths about the virus.

Third, to reduce the transmission of the virus, logbooks were created, and key pegs were given to keep track of who came in and out of the community. Concerning misinformation, a

situation report dashboard reporting the total number of cases on the reserve was developed to mitigate the spread of false information. The dashboard was continuously updated and posted in various locations such as outside the general store, the public health unit's social media channels and it was also emailed to interagency coordinators. A particularly impressive community initiative involved SL Nation members contacting the health center to self-report their positive status because the government and Northern Inter-Tribal Health Authority stopped reporting the number of COVID-19 cases. This citizen leadership demonstrated a strong sense of collective responsibility to protect one another's health to reduce the severity of the impact of COVID-19.

ii.   Democratic Communications

Communications are a crucial non-pharmaceutical intervention requiring an interdisciplinary approach and some experts encourage a move to think about "democratic" rather than "good" communications.

Pandemic communications intersect with many existing crises such as populism, erosion of local journalism and the anti-vaxxer movement, and some researchers looked at how democracies around the world were communicating during the first six months of the pandemic. From this research, five principles of democratic public health communications emerged: (i) rely on autonomy not orders; (ii) attend to values, emotions, and stories; (iii) pull in citizens and civil society; (iv) institutionalize communications; and (v) describe it democratically.

Of these principles, *institutionalize communications* was emphasized, and refers to how a country implements structural and institutional reforms following a health emergency to better respond to future crises. The post-SARS reform in Taiwan and the legal and institutional post-MERS reforms in South Korea are good examples of institutionalized communications. Health officials had learned from failures of SARS outbreak which led to reforms of the structures and institutions that responded to pandemic emergencies and in both jurisdictions the reforms embedded communications as part of how those jurisdictions would respond to pandemics and epidemics drawing on citizen engagement in communication and providing feedback loops. These examples show how important it is for the institutional capacity for communication to be in place before crises emerge. This invokes the importance of having a crisis communication plan and trained communicators supporting public health experts (Wirz, 2022). An expert from the WHO expressed that the WHO is working to institutionalize communications by gradually integrating lessons learned to improve public health communications. They are achieving this by constantly referring to the outcome of past events to decide whether to approach current communication initiatives similarly.

Another principle, *attend to values, emotions and stories* was also highlighted. Within this principle, authenticity[1] was discussed as another important characteristic to display when communicating with the public during a health crisis and several researchers support that it is more important than accuracy. When the focus is solely on accuracy, there is a risk of omitting the audience's values and misunderstanding how they interpret and make meaning of the information provided to them. Therefore, public health messages should focus on what the audience really needs to know about COVID-19 which requires public health communicators to think about what it means to be seen as authentic.

Authenticity can be exhibited through a person's stance and role in the community or expertise. The basics of rhetoric emphasize that a person's ethos (character), logos (reason) and pathos (emotion) also contribute to creating authenticity because whoever is representing the messaging matters and should be able to relate to the audience. Actively engaging in discussions around COVID-19 with different subgroups also allows for more authenticity.

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[1] Authenticity is the concept of "being true to the self in terms of an individual's thoughts, feelings, and behaviours reflecting their true identity" (Jenkins et al., 2020).

Experts also discussed timing of different types of communications: for example, at the beginning of the pandemic, more emphasis should have been placed on explaining how science works. The first step in that direction would have been for health officials to frame the initial communication around COVID-19 on how the novelty of the virus meant that there was a lot to learn but that almost every scientist in the world was studying the disease. This would have set the backdrop as one of new and accelerated learning and would have helped to perceive the fast-paced change in guidelines and health measures around COVID-19 positively as the result of a process of gaining information and deeper knowledge on the virus. This approach refers to doing what is called a meta framework to help people understand what is going on at a particular moment in the pandemic.

The use of humour and relying on radical transparency was also highlighted in the discussion of the principle, *attend to values, emotions, and stories*. For instance, Taiwan followed the humour-over-rumour approach when talking about the importance of following public health measures. In the context of social distancing, the Taiwanese government's mascot, the "shiba inu dog" was at the centre of many memes used by the government to communicate safety regulations to the public" (Tworek et al., 2020). Regarding radical transparency, the Taiwanese government refrained from deleting disinformation to avoid creating distrust among the public. Also, Taiwan's Minister of Digital Affairs created a digital map showing which pharmacies had masks during the shortage. Continual feedback from citizens and pharmacies on the shortcomings and the strengths of the digital map created a climate conducive to radical transparency between health authorities and the public.

iii.   Meaning-making versus Information Transmission

Throughout the pandemic, experts considered there were instances of deep misunderstanding of what communication is about. Some researchers appealed to theoretical communication models, namely, the **transmission model** (TM), the **rhetorical model (RM)** and the **contextual model** (CM) to bring clarity to how communication operates and how theory translates into practice.

The TM mainly focuses on transmitting information, e.g. public health officials transmit information to the audience (public) and the model was posited as an unhelpful communications model for managing pandemic communications. Over-reliance on this model presumes the human problem of communication is the same of the technical problem of communication. The model also presumes the work of communication is done when information has been transmitted. However, during a pandemic, the translation of information into behavior change is paramount.

The CM and RM models were relatively less used throughout the pandemic yet the CM, is considered helpful for communicating science effectively because it is both scientific, and situated or i.e. gives room for ethical, social and political knowledge to which science must defer. The RM was also described as a helpful approach since it relies on persuasion and assigning meaning to motivate action, in this case the action is to abide and practice health measures such as masking, social distancing and isolation.

When looking at science communication from a rhetorical perspective, experts reminded the audience of the importance of considering the context, the audience, and the purpose of communication. While the introduction of pandemic public health measures was new to the general public, a contest over associating the meaning of the idea of public safety and masks inevitably occurred. Through this contest, meaning is created; meaning being defined as the outcome of communication processes and practices shaped by the kinds of connections and associations we make through language. Hence, experts stress that we must think of communication as an art of managing, making, and re-making these connections and associations. The uptake of health-related behaviors such as mask-wearing are more likely to be motivated to action through things derived from values and meanings. This could have been

accomplished with the help of skilled communicators that tie in the meaning of mask to values such as trust in science and in doctors, which in turn motivate action. There were many ways of assigning meaning such as highlighting values and sharing stories which are communicative mechanisms of creating meaning. While some opportunities of doing so throughout the pandemic were missed, some attempts were made at meaning making. For instance, the Toronto slogan "*We are all in this together*" was an example of public communication attempting to make meaning but which was unfortunately short-lived.

iv. Countering Misinformation, Disinformation, Conspiratorial Thinking and Online

Abuse

Many key factors such as values, virtues, vices, and partisan politics contribute to what we call misinformation[2] and deliberate interfering factors such as predatory publishing[3], scams and conspiracy extremism create misinformation. Additionally, new models of science communication (e.g., pre-prints) problems in science communication (e.g., publication bias) and social media sharing, and algorithm-pushing content further complicate the matter. While the WHO has been working with social media companies and journalists to develop strategies to address and counter misinformation on a global level, this effort also require a whole government response on a national level.

Strategies many researchers recommend to manage misinformation include:

1) Using subject matter experts in messaging, repeating, and amplifying the original message to increase engagement (Janmohamed et al., 2021; Walter et al., 2021).

2) Using computational approaches to identify misinformation (Cacciatore, 2021).

3) Collaborating with tech, social media platforms and search groups to address misinformation. For example, the WHO reached out to Facebook, Instagram, WhatsApp, Twitter, and Google and informed them that they would be a vehicle of both misinformation and accurate information related to COVID-19 and many tech and social media companies stepped up their efforts to counter online misinformation. Having said that, it was expressed that more could have been done with more time and focused resources.

4) Enlist ambassadors to be the voice of facts related to COVID-19. For example, the WHO enlisted several VIPs, celebrities and sports stars who spoke with humility about the novelty of the virus which led the WHO to speak about the journey the world was on in navigating the pandemic. Averting misinformation requires providing high-quality information and supporting health communicators.

Disinformation[4] was discussed and refers to intentionally misleading through bad information or bad faith representation of information spread as misinformation and malinformation[5] which can include propaganda (Mercieca, 2021). Disinformation is an old phenomenon that is usually tied to conspiratorial thinking and extremism (Mehlenbacher, 2021; Cassman, 2022).

In the context of the pandemic, online abuse of health communicators was a growing issue. Several surveys reveal that scientists and health officials were harassed, and some received death threats on social media. The consequences of online abuse are numerous and go beyond having detrimental effects on the psychological health and well-being of health

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[2] Misinformation refers to false information that is not intended to cause harm (The Government of Canada, 2022).
[3] Predatory publishing describes publishers or entities that exploit authors by charging publication fees yet don't deliver on their promise of the editorial and publishing services (such as peer review) that are associated with legitimate publishers (The University of Arizona, 2022).
[4] Disinformation refers to false information that is intended to manipulate, cause damage, or guide people, organizations, and countries in the wrong direction (The Government of Canada, 2022).
[5] Malinformation refers to information that stems from the truth but is often exaggerated in a way that misleads and causes potential harm (The Government of Canada, 2022).

communicators and undermining their professional effectiveness. In addition to pushing certain people away from participating in online public health discourse and going on TV, online abuse contributes to corroding debates on COVID-19 and exacerbating polarization in society.

Online abuse was described as being intertwined with misinformation. As such, the five following themes of online abuse have been identified and overlap with conspiracy theories and disinformation: (i) '*sinister origins of COVID-19'*, (ii) *'corrupt elites',* (iii) *'elites causing injury or death',* (iv) *'freedom is under siege' and* (v) *'all elites are incompetent'*.

To tackle disinformation, a whole-of-government approach[6] because when dealing with a communication problem that has features of extremism, is outside of what communication practitioners can do. Some experts recommended: 1) supports for public health officials and communication experts targeted by threats; 2) tracking data on demographic trends of targeting (e.g., women are more targeted than men); and 3) developing guidelines and reporting frameworks to track targeting.

Conclusion

The key takeaways from the expert panel webinar were how communications should be described democratically and institutionalized. There was emphasis on prioritizing meaning making over the transmission of information. Cultural relevance and citizen engagement were highlighted as being paramount to enabling feedback loops to pandemic communications and facilitating a collective response to the pandemic. Finally, countering misinformation and disinformation requires new strategies to be adopted by government and learning from past mistakes and from other countries is important.

References

1. Cassman, Q. (2022). Extremism: A Philosophical Analysis. New York, NY: Routledge.

2. Cacciatore, M. A. (2021). Misinformation and public opinion of science and health: Approaches, findings, and future directions. *Proceedings of the National Academy of Sciences*, *118*(15), e1912437117.

3. Granados Samayoa, J. A., Moore, C. A., Ruisch, B. C., Boggs, S. T., Ladanyi, J. T., & Fazio, R. H. (2022). A gateway conspiracy? Belief in COVID-19 conspiracy theories prospectively predicts greater conspiracist ideation. *PLOS ONE*, *17*(10), e0275502.

4. Heidi Tworek, Ian Beacock, and Eseohe Ojo, "Democratic Health Communications during Covid-19: A RAPID Response," (Vancouver: UBC Centre for the Study of Democratic Institutions, September 2020).

5. Janmohamed, K., Walter, N., Nyhan, K., Khoshnood, K., Tucker, J. D., Sangngam, N. & Kumar, N. (2021). Interventions to mitigate COVID-19 misinformation: a systematic review and meta-analysis. *Journal of Health Communication*, *26*(12), 846-857.

6. Jenkins, E. L., Ilicic, J., Barklamb, A. M., & McCaffrey, T. A. (2020). Assessing the credibility and authenticity of social media content for applications in health communication: scoping review. *Journal of medical Internet research*, *22*(7), e17296.

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[6] Whole-of-government approach refers to the movement from isolated silos in public administration to working using formal and informal networks cooperatively and which exist in different public agencies and different levels of government. (United Nations E-Government Survey 2012)

7. Mehlenbacher, B., Mehlenbacher, A. R. (2021). The Rhetoric of Big Data: Collecting, Interpreting, and Representing in the Age of Datafication. *Poroi*, *16*(1).

8. Mercieca, J. (2021). The Propaganda Playbook: A section-by-Section Dissection of Tucker Carlson's Communication Strategy. Just Security. Retrieved from https://www.justsecurity.org/77078/the-propaganda-playbook-a-section-by-section-dissection-of-tucker-carlsons-communication-strategy/

9. The government of Canada. (2022). How to identify misinformation, disinformation, and s malinformation. Retrieved from https://cyber.gc.ca/en/guidance/how-identify-misinformation-disinformation-and-malinformation-itsap00300

10. The University of Arizona. (2022). Predatory Publishers: What is a Predatory Publisher? Retrieved from https://libguides.library.arizona.edu/predatory-publishers

11. United Nations E-Governement Survey 2012. (2012). Taking a Whole-of-Government approach. Retrieved from https://publicadministration.un.org/egovkb/Portals/egovkb/Documents/un/2012-Survey/Chapter-3-Taking-a-whole-of-government-approach.pdf