

Addressing Health Misinformation: Lessons from 2020

Introduction

In early December 2020, Facebook and Full Fact, the UK's independent fact checking charity, co-hosted a virtual conference titled 'Addressing Health Misinformation: Lessons from 2020'. This event brought together representatives from industry, academia, media, healthcare, and UK government officials to discuss the health misinformation challenges experienced in 2020 and to share best practice suggestions.

2020 was an unprecedented year for health information. As Covid-19 spread across the world, a flurry of false and misleading information followed. The unique nature of health information is the real world consequences and harm that bad information can have. We saw in real time the risks that came with not understanding how the virus was transmitted or how to protect oneself from it.

Good information is essential to the successful reduction of the spread of Covid-19. Many organisations have taken on this challenge and implemented measures to ensure the availability of reliable and accurate information. For example:

- Fact checkers, including Full Fact, collaborated to catch cross-border claims and identify misinformation trends faster¹
- Civil society groups expanded their monitoring processes to capture claims made on new or increasingly popular platforms and channels²
- All of the largest internet companies improved the supply of high quality, relevant information from local official sources on their platforms, and have announced specific action to reduce the amount of Covid-19 misinformation
- The UK government invested in digital public information campaigns and stood up a counter disinformation unit to monitor for false and misleading narratives.³

These measures have undoubtedly had an impact on the amount of misinformation seen by the public. Ofcom data suggests that in week one of the first UK lockdown, nearly

¹ <https://covidinfodemicurope.com/>

² <https://www.youtube.com/watch?v=n1WVwPQcwRY>

³ <https://www.gov.uk/government/news/government-cracks-down-on-spread-of-false-coronavirus-information-online>

50%⁴ of respondents reported seeing information they thought to be false or misleading about the pandemic. By early December this had dropped to 29%.⁵

Into 2021, it is clear that there is much still to do. There is an increasing worry that false information about vaccines will hinder immunisation efforts, particularly in key high risk groups such as BAME communities.⁶ Multiple vaccines have been approved for distribution in the UK, and in the coming months we are likely to see more approved, or tweaked in response to emerging mutations. Information about the efficacy and safety of each will need to be carefully communicated, as the UK implements the most ambitious vaccination programme in recent history. Bad information may ultimately lead to the prolonging of the pandemic if large numbers decline this effort.

The timely December reflection on the lessons that can be learned from 2020 saw experts from the UK and the US share challenges experienced to date and discussion on what new approaches could strengthen our collective response in the future. This event sought to promote collaboration and knowledge sharing.

Held under Chatham House rules, this event report, written by staff at Full Fact, summarises the conversations held over two days without attribution of specific points made by any individuals or organisations. We highlight eight recommendations for tackling future health misinformation challenges:

1. Make good information available
2. Use a range of trusted voices to communicate information
3. Collaborate through sharing information
4. Take action to suppress misinformation narratives
5. Approach the problem holistically
6. Monitor for future threats
7. Put in place measures to build long-term resilience
8. Invest in research for the future

In designing this event to promote collaboration and knowledge sharing it was important for both Full Fact and Facebook to include a broad range of cross-sector representatives, in recognition that no one organisation can tackle this problem alone. We would like to thank all of those who gave up their time to contribute to the discussion.

⁴<https://www.ofcom.org.uk/research-and-data/tv-radio-and-on-demand/news-media/coronavirus-news-consumption-attitudes-behaviour/previous-results>

⁵<https://www.ofcom.org.uk/research-and-data/tv-radio-and-on-demand/news-media/coronavirus-news-consumption-attitudes-behaviour>

⁶<https://www.rsph.org.uk/about-us/news/new-poll-finds-bame-groups-less-likely-to-want-covid-vaccine.html>

Learning from 2020

Availability of accurate information

In the very early days of Covid-19 it was difficult to find accurate information about the new virus. It took the government and scientists time to set up the right processes to publish accurate and regular information about how the virus was spreading, what we knew about symptoms and transmission. As scientific knowledge about the virus also increased, the information communicated to the public changed. This added to a sense of general confusion. For example, government guidance on whether or not to use ibuprofen to alleviate the symptoms of Covid-19 changed multiple times in response to updated scientific evidence. It was often difficult to keep up with the new information as it came out, which meant that for many organisations keeping the information they shared accurate was a challenge.

An additional challenge was on areas where there were differences in opinion, particularly when different political groups backed opposing views. Separating the science from the politics, and being clear on where there were areas of debate or conflicting evidence was critical. In many cases no single metric could tell the whole story - only by looking at a range of information could conclusions be drawn, but this leaves some evidence open to interpretation.

Where there was a lack of authoritative information to questions being asked online, inaccurate sources could be surfaced and spread. For example, the debate on the consequences of mRNA technology being used in the Pfizer-BioNTech vaccine began long before the vaccine was approved. The delay in accessible information answering these questions allowed conspiracy theories to multiply.

Communicating complex science

The pandemic also highlighted the lack of knowledge in the general public about the science behind viruses and the processes in place to keep medicine safe. In 2020 it was not just trust in vaccines, but confidence in the products, providers and deliverers/ regulators/ governments that was tested. There was very limited knowledge about how vaccines are developed or regulated: issues that are complex to educate the public on. Research papers that would usually be published without any media attention were suddenly being discussed in public. Translating complicated scientific concepts into language that the public could understand was also a challenge for those trying to communicate information and often led to inaccurate reporting, including in mainstream UK newspapers. As additional Covid-19 vaccines with different approaches and outcomes gain approval this confusion could continue.

Some organisations noted an increase in information inequality, as people's usual routines were disrupted and were limited to only that which was available in our homes. There remains a significant proportion of the UK population who are not online; there was also evidence of an increase of people reportedly avoiding the news.⁷

Identifying and using different channels to disseminate information in order to reach all audiences was and remains a critical challenge. Providing information in a range of languages, using different trusted voices for different communities and collaborating and learning from different messaging campaigns are all seen as important.

There have been examples of prominent figures, such as politicians or celebrities, sharing inaccurate information about Covid-19. Particularly in early 2020 some celebrities shared posts doubting the origins of the virus or suggesting that 5G was harmful.⁸ This meant that harmful misinformation often spread quickly and across audiences and platforms, including offline.

Promoting accurate information

In a health crisis misinformation can be harmful in a way that is not seen in other incidents. Numerous false claims have been identified by fact checkers and researchers, from conspiracy theories about the origin of the virus to false information about how to cure or protect oneself. Claims that the virus was actually caused by 5G phone masts translated into real world arson attacks in the UK. There have been various suggestions that health misinformation has directly translated into people being harmed.⁹

Tackling this proved difficult: as with any type of misinformation the majority is legal speech. Much of the misinformation being shared has not been entirely false; often claims have been misleading, based on early reporting or covering areas of ongoing scientific debate. Health misinformation is also particularly emotive, and often shared by those with good intentions. Misinformation has been found in a range of mediums, including long form videos and voice notes, as well as more traditional images and text posts.

Tracking this variety of information and tackling claims quickly was a challenge for many organisations. Fact checkers found it difficult to know which claims to prioritise, found it difficult to get opinions from health experts or struggled to rebut conspiracy theories with no basis in reality.

As a result of the unique potential to cause harm, many internet companies took a robust position and committed to removing or reducing Covid-19 misinformation content on

⁷ <https://reutersinstitute.politics.ox.ac.uk/UK-COVID-19-news-and-information-project>

⁸ <https://www.newstatesman.com/science-tech/social-media/2020/04/how-celebrities-became-biggest-peddlers-5g-conspiracy-theory-coronavirus-covid-19>

⁹ <https://www.bbc.co.uk/news/world-53755067>

their platforms. Facebook, Twitter, Google and TikTok all took significant steps to supply information to users of their platforms - from creating Covid-19 factboxes embedded within platforms to redirecting users to authoritative sources within search results.

Likewise, the use of labels on content to provide further information directly next to misinformation was seen as a welcome step. Measures such as Twitter's "disputed" labels or Facebooks "missing context" were seen as helpful and proportionate measures.

Understanding the impact of misinformation

There has been some good research on the impact of health misinformation, and the internet companies in particular can be commended for their engagement with health bodies and other experts when creating new policies. But what we mean by the "harm" or "impact" caused by misinformation is still contested within the misinformation field. and there remains debate about what proportionate responses should be. Efforts to better understand this remains inconsistent - for example, there does not seem to have been any research funded on Covid-19 misinformation as part of wider scientific efforts to understand the virus. There is also often a lack of evaluation measures embedded into initiatives. Where there is that information, it tends to be held by a few actors and not shared widely. Both prevent effective learning on what works.

8 recommendations to tackle health misinformation

The future brings new challenges as organisations around the world try to tackle distrust in vaccinations, deal with changing rules and restrictions, and respond to new variants of the Covid-19 virus. Below are eight recommendations to consider for the future.

1. Make good information available

Relevant authoritative sources must take responsibility to ensure that good data is publicly available. This means that governments, health bodies and scientists must publish data sets, methodologies and research findings promptly and in full. These sources should also be available for questions and clarifications to news outlets reporting on the findings and to fact checkers who might need an expert opinion to conclude whether a claim is accurate or not. Where information is missing or incomplete, rather than not simply not addressing a claim, organisations should have the confidence to explain why information is missing and what the implication of that is. This is important to prevent an information vacuum that could easily be exploited.

Content that is produced to provide information should also be engaging - both in age-appropriate and culturally sensitive ways - reflecting the need to make the truth as engaging as the lies.

It also means providing information where the public is. The internet companies can have a huge impact by, for example, providing accurate information where users are searching for answers such as Facebook's Covid-19 information centre¹⁰ and help centre¹¹; or introducing prompts and wider context when users share information with their friends and families as Twitter did with the introduction of prompts encouraging users to read an article before sharing¹². This is particularly important for search engines, Google introduced new information snippets¹³ that appear under certain user queries, directing them to accurate, trusted sources.

2. Use a range of trusted voices to communicate information

Once information is available, time should be taken to identify and support trusted voices who can communicate that information effectively to audiences. This needs to be a collaborative effort, including the government, civil society groups, academia, industry, local community groups and many others.

This is particularly important for those audiences who distrust some authoritative sources, such as the government or the media. But there is a need to be tactical about

¹⁰ https://www.facebook.com/coronavirus_info/

¹¹ <https://www.facebook.com/help/230764881494641>

¹² <https://twitter.com/TwitterSupport/status/1270783537667551233>

¹³ <https://blog.google/products/search/connecting-people-covid-19-information-and-resources/>

challenging narratives. Knowing which audience you are targeting is critical. Many vaccine hesitant groups are concerned parents, who could be put off by overly aggressive or dismissive arguments. On the other hand, there will always be some groups who are extremely polarised and so it may be prudent to focus efforts on those that can be persuaded.

Celebrities and others with large public followings can also be useful channels for information. Where appropriate, they could be encouraged to share positive messaging. But this should also go hand in hand with education about the dangers of sharing unverified information.

Organisations should be mindful of information inequality and use a variety of different channels for communication beyond online or TV advertisements.

3. Collaborate through sharing information

Misinformation can quickly spread across countries and across platforms, particularly online. Once an incident is underway, collaborative action to share information can be critical when trying to respond quickly and effectively. Information such as what claims are being shared and going viral, and what evidence there is to rebut claims and what the complexities/ wider implications are can make a difference in how resources are allocated and used most effectively.

Collaboration should include a diverse range of organisations, including internationally. There may be benefit in reflecting existing partnerships on tackling child sexual abuse or terrorist content, although as misinformation is not illegal it would not be appropriate to implement the exact same approach. This is not to say that all action should be joint - different organisations will have different aims and approaches and this should be celebrated and encouraged.

Once events are over collaboration can continue. Sharing data about incidents can support evaluation, thereby refining how incidents are responded to in the future. It can also help to predict future issues and put in place long-term measures such as media literacy and other resilience-building efforts.

4. Take action to suppress misinformation narratives

There are many ways to prevent or mitigate the harm caused by health misinformation. The internet companies are often seen as the front line; the choices made by the companies can have a significant influence on what information is served to the users of their platforms. The right design choices, including the priorities coded into the algorithms that surface content, can suppress the amplification of misinformation, promote accurate information instead or introduce friction that encourages users to pause before sharing information further.

There is a role for other organisations. Fact checkers can be effective by working together to share fact checks, rather than duplicating efforts, prioritising specific themes or building partnerships to further the reach of their content. Media outlets should make sure to not amplify unverified information, particularly when reporting on conspiracies or harmful narratives. And subject experts, such as scientists, can make themselves available to provide expert explanations.

New tools can also be developed to support mitigation actions. For example fact checkers stressed the difficulty of identifying harmful misinformation in videos, which can be extremely long and contain a large number of harmful claims. This is time consuming to review, and tools such as automatic transcripts are important.

Across all of these potential interventions, it is critical that any action is proportionate and transparent. Getting the balance of protecting freedom of expression while preventing harm is essential. Interventions must also have consideration for international contexts and sensitivities, and not assume that one size fits all. Unintended consequences, such as the accidental reduction of distribution of accurate content, should be scoped out in advance and minimised as much as possible.

5. Approach the problem holistically

The information environment is constantly evolving - particularly online - which brings new challenges. But there is a danger that the conversation on how to tackle misinformation focuses too much on one medium, certain platforms or particular types of content. To properly understand the problem, there is a need to look across the entire information ecosystem. New platforms are growing in popularity, and they must be part of this conversation - likewise, we should not forget about the role of offline information sharing, including that of non-internet based media outlets.

There is a need to look beyond individual social media posts, and take a broader look at the narratives and public perceptions which individual posts can contribute to. This includes appreciating narrative (and topical) differences across languages, regions and communities.

6. Monitor for future threats

As well as responding to specific crises when they occur, time must also be spent planning ahead for the longer term and slower felt impacts of misinformation.

For example, organisations who monitor attitudes to vaccination saw an epidemic of vaccine hesitancy emerging a few years ago; likewise Full Fact warned in 2019 that 5G misinformation was growing and could become dangerous.¹⁴ These issues are dynamic,

¹⁴ <https://fullfact.org/media/uploads/tpfc-q1q2-2019.pdf>

volatile and changing and there is a need to keep a finger on the pulse to monitor how they evolve.

Ideally organisations would have an early warning system that looks for signals that could predict a misinformation crisis on the horizon. Further collaborative work is needed on how such a system could function, including on what infrastructure is needed, what the right indicators should be and the capabilities needed to run such a system. Organisations could also consider what partnerships can be built to support this, for example in local communities who often encounter problems on the ground sooner than most. There should also be processes that ensure there is resilience to scale up responses within the community when needed. For example, support for greater funding or training resources.

One piece of work that is underway to tackle these issues is Full Fact’s efforts on incident management through the creation of a five-level framework that sets out options for responding to different misinformation crises in proportionate and effective ways.¹⁵

7. Put in place measures to build long-term resilience

The audiences that are coming across misinformation need regular and consistent media literacy interventions that educate about how to find accurate information, build understanding in key processes and how key organisations function, and about the personal responsibility each person has to not spread harmful information. There may be benefit in efforts that target specific groups, including those with large public followings, or to target understanding on specific topics/themes that tackle the underlying causes of misinformation such as low trust in vaccines in BAME communities.

8. Invest in research for the future

One of the reasons that there is a lack of consensus in how to tackle health misinformation is that there is insufficient research on what effective, evidence-based, and proportionate responses look like. Measuring belief and trust requires research over a number of years; one-off polls on specific issues cannot measure how this has changed over time. Funding and supporting multi-year research and evaluation should be a priority. This includes a commitment from the relevant organisations to share data where it is available and put in place processes to collect the data where it isn’t yet available. When new measures are introduced, there should be clear and transparent metrics on what will be used to evaluate their effectiveness and to decide as to whether and how they should be implemented on an ongoing basis.

There is an ever-increasing number of bodies and organisations working on countering misinformation. We must ensure that information is shared and there is an ability to reflect on, understand and learn from the past.

¹⁵ <https://fullfact.org/blog/2020/dec/framework-information-incidents-five-levels-severity/>

There has always been vaccine misinformation, even going back to the smallpox vaccine in the 1800s. It is likely that these challenges will be with us for years to come. It is only by investing now that we will be able to properly tackle the problems of health misinformation in the future.