Misinformation: a strategic approach

Webinar
Thursday, October 29th 2020
INSTRUCTIONS

Please mute yourself to limit background noise and feedback

Raise hand during discussion to speak

You can submit questions throughout the webinar through the Q&A located at the bottom of your screen

You can respond to questions and engage through the Chat at the bottom of your screen

Please introduce yourself in the chat!
PANELISTS

Moderator
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Boost Community Member

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Immunization Advocate
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POLL QUESTION

What do we mean by misinformation?

a. Intentionally false and misleading information
b. Information that is false, but not necessarily intentionally false
c. False rumors
A scientist who is also a human being cannot rest while knowledge which might be used to reduce suffering rests on the shelf. 

ALBERT B. SABIN

Disarming disinformation and building vaccine demand in the COVID-19 era

Angus Thomson, PhD
Senior Social Scientist
Demand for Immunization
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Disarming disinformation and building vaccine demand in the COVID-19 era

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"We’re not just fighting an epidemic; we’re fighting an infodemic. Fake news spreads faster and more easily than this virus, and is just as dangerous."
– Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization (WHO)

Project VCTR:
Vaccine-critical messages more than doubled in 1st months of COVID-19 pandemic.
From Mar - Jun 2020, these messages were viewed >4.5 billion times

Antivaxx entrepreneurs – people who profit from antivaccine misinformation - increased FaceBook followers by ~1 million

Billion-dollar industry

Project VCTR is a media monitoring system that tracks vaccine-related communications, with a focus on opposition and hesitancy, in public media data. Project VCTR data is used by ~200 public sector health organizations.
The Anti-Vaxx Industry. How Big Tech powers and profits from vaccine misinformation. Center for Countering Digital Hate/CCDH https://www.counterhate.co.uk
Immunization sucked into the perfect storm of COVID-19 disinformation

**Madagascar:** Similar to Comoros
- A. Guiterres statement misquoted – COVID-19 tests in Africans; mutated to COVID-19 test in Comorians

**Comoros:** A. Guiterres statement misquoted – COVID-19 tests in Africans; mutated to COVID-19 test in Comorians

**DRC:** The COVID-19 vaccine is a satanist vaccine

**Haiti:** West is testing unsafe COVID-19 vaccines on African children

**Senegal:** 7 children died after being given COVID-19 vaccine

**Cote D'Ivoire:** COVID-19 vaccine is being tested in CDI to spread coronavirus

**Togo:** A COVID-19 vaccine is being combined with routine vaccines – refuse all vaccination

**France:** France TV – 2 doctors discuss testing candidate vaccines in Africa

**Cote D'Ivoire:** COVId-19 vaccine is being tested in CDI to spread coronavirus

**Immunisation sucked into the perfect storm of COVID-19 disinformation**

« L’Afrique n’est pas un laboratoire. » — Didier Drogba (@didierdrogba)
information

data with meaning

actionable | trusted | sticky
misinformation

unintentional falsehoods

dilutes | distracts | distorts

disinformation

deliberately engineered falsehoods

deceive | stick | spread

Does disinformation change perceptions & behaviours?

Hamsterkauf

‘Coronavirus = bioweapon’
→ hoarding behaviors¹

Microchips

50% of Americans who name Fox News as their primary television news source believe Bill Gates is plotting a mass COVID-19 vaccination campaign to implant microchips in billions of people³

Vaccines

Anti-vaccine conspiracy beliefs significantly correlated with vaccination intentions⁴

¹. A bioweapon or a hoax? The link between distinct conspiracy beliefs about the Coronavirus disease (COVID-19) outbreak and pandemic behavior. Roland Imhoff, Pia Lamberty Preprint (unpublished)
“People often continue to rely on corrected misinformation in their reasoning even if they understand, believe, and later remember the correction”

A continuum of vaccine behaviour

Active Demand
(e.g. actively seeking)

Vaccines Hesitancy
Accept some, delay some, refuse some

Passive Acceptance
Accept all, maybe unsure

Refuse all vaccines
Determinants of immunization behaviours

Vaccination behaviours may be affected by multiple social or psychological factors, and may run quite deep.

Post-truth ˈpəʊstruθ/adjective
Relating to a situation in which people are more likely to accept an argument based on their emotions & beliefs, rather than one based on facts.

"Luke, you're going to find that many of the truths we cling to depend greatly on our own point of view."
truth
trust

Our truths come from the trustworthy

The thought process behind building Facebook was:
"How to consume as much of your time & conscious attention as possible?"

“... a little dopamine hit every once in a while because someone liked or commented on a photo or a post ... It's a social validation feedback loop ... exploiting a vulnerability in human psychology.”

–Sean Parker, First President Facebook
How Misinformation Spreads

Study showed anti-vaccination Facebook pages are more central and numerous than pro-vaccine pages, and more connected to undecided pages. Node size reflects numbers of followers.

Graphic: https://www.sciencemag.org/news/2020/05/vaccine-opponents-are-gaining-facebook-battle-hearts-and-minds-new-map-shows#
Key themes for protecting immunization against misinformation

- **Track, assess & address COVID-19/RI misinformation** in near real-time.

- **Understand and address potential hesitancy and demand for new vaccines** including SARS-CoV-2 and nOPV2

- **Understand and mitigate the impact of COVID-19 on provision, access and demand for immunization services.**
UNICEF is partnering with global leaders in social listening, misinformation and vaccine demand.

Coordination with the Vaccination Demand Hub will enable close inter-agency cooperation and synergies (WHO, GAVI, US CDC, BMGF)

Tools & technical support to enable countries to track & analyze vaccination conversation in digital space & real world

Design and rapid test messages and narratives for efficacy and safety

Help develop infodemic managers
Incorporating online and offline data, UN, public media, country, and research data will create a novel system built to identify opportunities in real time.

- Make sense of big data
- Identify and explore conversations and communities.
- System is customizable for each country.
- System is built for real-world programmatic needs.

Unlike previous efforts, the Vaccination Demand Observatory is built around the field **Infodemic Manager**, rather than dashboards.

The Infodemic Manager provides analytics and actionable insights to inform and measure all engagement.
Preparation

- Build team
- Information Ecosystem Analysis

Listen

- Build Listening system
- Social Listening
- Detect misinformation
- Rumor log

Understand

- Verify Misinformation
- Assess impact
- Analytics & Intelligence
- Regular reports
- Actionable insights
- Rapid reaction

Engage

- Strategic Engagement
- Content development
- Campaigns
- RCCE
- Advocacy

- Monitoring & evaluation of impact
- Lessons learned, best practices, iterative refinement

Integrated misinformation management strategy

National vaccine misinformation strategy, integrated into broader RCCE framework, demand promotion framework, and vaccine readiness and delivery plans.

Training and Capacity Development

Training of field infodemic managers and implementation teams in health misinformation, known tactics and threats, tools and techniques for effective social listening. Webinars, online training, vaccine misinformation management guide.
Behaviour-centered content development, testing & design, implementation guidance

Correcting information can backfire

Scary photo made hesitant parents aware of the dangers of measles but decreased intention to vaccinate\(^5\)

Develop, package, tailor and test content for different engagement strategies

<table>
<thead>
<tr>
<th>Target Issue</th>
<th>Draft message, design</th>
<th>Rapid A/B testing</th>
<th>Implementation/M&amp;E</th>
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</thead>
<tbody>
<tr>
<td>General Vaccine topics</td>
<td>Content development following</td>
<td></td>
<td>Customise content for channels, SM</td>
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<td>Common vaccine misinfo</td>
<td>behavioral principles</td>
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<td>platform, apps, web</td>
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<td>Specific misinfo narratives</td>
<td>Prebunk</td>
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Inoculation

Prebunking

- Prebunk to build community immunity against general misinformation
- Debunk specific misinformation

Set the agenda

Social media
- Shape the conversation
- Amplify trusted voices
- Galvanise new positive voices

News media
- Empower journalists
- Fact check
- Provide reference experts

Infection Control

Support SM platforms to limit spread of disinformation
Deciding when to engage

Misinformation Likely

Innoculate (Prebunk)
- Provide warning
- Explain misleading tactics
- Flag hidden motives

Monitors Closely

Misinformation Present

Ecosystem Analysis

Information Gaps

Myth has traction

Framing and Agenda Fluid

Possible to set agenda

Debunk Specific Myths
- Fact | Myth | Fallacy | Fact formula
- Test debunk
- Credible sources

Framing fixed

Effective Content
- Develop and test content
- Accurate, tailored
- Verified content hubs

Set the Agenda

Raise Voices
- Amplify trusted voices
- Galvanize new voices

60% of shares on social media are never clicked

Protection from Deception

Free 2-week text message course from First Draft that teaches people how to protect themselves & their community from misinformation.

Eng, Es.
https://firstdraftnews.org/sms-course/

Go Viral!

Online game inoculates players against fake news by getting them to play the role of a media manipulator and uncover their tactics.

Eng, Fr, De
https://www.goviralgame.com/en

Informed Health Choices

Learning resources to enable primary students to think critically about health claims and make informed choices. Podcast for adults.


Debunk | Inoculating against specific misinformation


Graphics credit: Dr. John Cook (https://skepticalscience.com)
Set the agenda

- Curate, aggregate and amplify existing resonant content
- Develop content hub4
- Create new accessible, shareable, sticky content

Amplify trusted voices

- Leverage UNICEF & partner SM channels, connect and amplify
- Identify and engage through influencers (including non-health)
- Use push tools like U-Report and IOGT to increase reach

Galvanise new trusted voices

Healthworkers

- International Pediatrics Association (IPA) Vaccine Trust Master Trainer program
- Shots Heard Around the World3

Youth

- Youth for Health, WHO-EMRO2
- Young Coalition for Prevention and Vaccination (YC4PV)1

Religious leaders

3. https://www.shotsheard.org/
4. https://www.vaccinestoday.eu
Empower journalists

- First Draft reporter’s Toolkit
- FACT and FIT Initiative

Fact check

- SNOPES: the internet’s definitive fact-checking resource
- Pesacheck
- First Check (Asia)

Provide reference experts

- Make it easy for journalists to find experts on vaccination
- Scholars Strategy Network and the Council for the Advancement of Science Writing - lists of top experts and scholars available for comment on COVID-19
Support SM platforms to control spread of disinformation

**Redirect & inform**
- Redirect searches for ‘vaccines’ to reliable information (FB, Pinterest)
- Disable recommendations that lead to misinformation

**Reduce misinformation**
- Reduce visibility of groups/pages that spread misinformation
  - **Demonetise:** Reject ads that include vaccine misinformation (FB, YT), remove fundraising option for pages spreading misinformation (FB).
- Where necessary **deplatform** (disable accounts that violate policies)

**Limit spread**
- Limit ability to share misinformation.
- Limit message forwarding. WhatsApp reduced forward text limit from 20 – 5 users, and introduced ‘forwarded’ and ‘highly forwarded’.
- Facebook may give pop-up warnings of misinformation when someone tries to share
Strategy
Ad hoc, reactive responses not sufficient and may backfire
Multifaceted, coordinated actions needed

Inoculation
Inoculate people against misinformation and disinformation
Long-term horizon – build innate immunity against misinformation in communities

Concerned public
Look through the disinformation fog to ensure those with questions feel heard

Change starts at home: FirstDraft public online guide*

Coming soon! Vaccine Misinformation Management Field Guide

*https://firstdraftnews.org/project/too-much-information-a-public-guide/
POLL QUESTION

In your work have you implemented any strategies to manage vaccine misinformation?

a. Yes, we’ve implemented an effective strategy
b. Yes, but there are still issues with vaccine misinformation
c. Not yet, but we have a strategy planned
d. No, where do I start?
A scientist who is also a human being cannot rest while knowledge which might be used to reduce suffering rests on the shelf. - Albert B. Sabin

Use of social/behavioral data to make strategic shifts in interventions for community engagement for COVID emergency

Jonathan Shadid
C4D Chief
UNICEF Pakistan Country Office
COVID-19
Use of social data and evidence to correct misinformation and make strategic shifts in RCCE interventions.

UNICEF Pakistan
C4D section
1. Behavior pattern analysis through use of anthropological and social data
2. Responding to resistance and misinformation
3. Promotion of positive behaviors
4. Advocacy and capacity building
5. Intersectoral coordination and partnerships

To engage families and communities to be aware and promote behavior to reduce risk and limit transmission of Covid-19
Qualitative (UNICEF)
Behavioral Pattern Insight from Anthropological and Social Data, and UNICEF Media Monitoring

Quantitative (UNICEF, IPSOS and other partners)
Behavioral and Epidemiological, various KAP surveys, and seroprevalence studies.

Quantitative and Qualitative.
(UNICEF and partners)
Keyhole, social media sentiment analysis, 1166 Helpline Data, leading Journals, Covid-19 repositories

Total: 15 sources
Crowded religious events were being organized and planned as normal, with no efforts to enforce wearing a mask or social distancing.

Conduct extensive campaigns before Eid Fitr, Eid Adha, Moharam to increase risk-perception and possible transmission during the events as well as spreading the disease to other unaffected rural areas.

- Dedicated coordination of partners
- Extensive Media campaign
- Ring-Back Tone (RBT) messaging alerts
- Decentralized interventions prior to events.
- Engagement of Imams / mosque
- Engage tourism police
- Awareness in market areas and animal sellers
- Activated Community-based approaches.

Early reporting of stigma & violence against health professionals

In early stages, data indicated that health professionals were increasingly infected with Covid-19.

Social listening exposed the rumor that HWs were the source of transmission in the community.

Recommended to initiate a campaign to train HWs and promote their dedication/heroism.

**ACTION**

Initiate *We-Care campaign* with Gov to train and promote appreciation and solidarity towards HWs.

- 2 Videos
- Social Media
- Mass Media
- Trust building
- Community Eng.
- Posters
- Religious leaders
- Mosque messages

**Sources:** RCCE Brief, media monitoring, and Anthropological Behaviour pattern analysis, 2-15 Sept. 2020.
Consistent Social data analytics and social listening is a powerful tool to inform programme, influence decisions, and understand the ‘stickiness’ of misinformation.

Media/Social Media can create a favourable environment for change, however change itself is most sustainable through interpersonal and participatory approaches.

64% say their final decision was most influenced by peers, not experts.

61% do not have strong convictions, they are simply uncertain, and waiting to see how things turn out. Better safe than sorry. Thus, hesitancy.

Also use peer-to-peer influence to combat misinformation, and not only expert driven. 77% trust the opinion of their peers.

Immunize HWs against rumours, as very few are trained on how to counter misinformation. 57% of HW say patients enquire about the truth of rumours they heard.
Thank you
Use of social data to address misinformation around routine immunization in Pakistan

Ayesha Durrani
Communication for Development (C4D)
Specialist – Health Section
UNICEF Pakistan Country Office

"A scientist who is also a human being cannot rest while knowledge which might be used to reduce suffering rests on the shelf."

ALBERT B. SABIN
Use of Social Data to Address Misinformation around Routine Immunization in Pakistan

Ayesha Durrani - C4D Specialist, UNICEF Pakistan
Digital Media Sentiment Analysis on Immunisation

**POSITIVE SENTIMENT**
- #PakistanFightingPolio
- Demand for vaccinations by caregivers, especially for missed doses during lockdown
- Praise of Vaccine Heroes
- Queries on availability of vaccines during COVID-19 pandemic

**NEGATIVE SENTIMENT**
- Rising public concern on protection of children against VPDs
- Parents fear taking their children for vaccination during the pandemic
- Queries about safety precautions at health facilities for vaccinations
- Concerns of parents on missed doses during lockdown
- Comparison of COVID-19 with Polio and fear that it will never be eradicated from Pakistan like polio
- Typhoid cases in Punjab with doctors not being able to differentiate between the two.

**Sentiment Score: 55.62**

- **Positive**: 25%
- **Neutral**: 55%
- **Negative**: 20%

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**Publications:**
- Twitter
- Facebook
- Instagram
- Public News
- Digital News
- Blogs
- Forums
CRISIS ON 1ST DAY OF CAMPAIGN

- Negative post on AEFI in Orangi Town about students fainting due to fear of injection uploaded by JDC Foundation Pakistan
- Video statement by the Chairman of All Private Schools Management Association (APSMA) in Sindh
- 11% negative social media sentiment on day 1 of the campaign

- Video messages of renowned Child Specialists & Commissioner Karachi recorded overnight.
- Videos by JDC Foundation and Media channels to retract their earlier posts.
- Retraction video of APSMA Sindh Chairman posted to counter vaccine refusal in schools.
- Positive content shared widely by social media team, bloggers/influencers, media houses and multiple WhatsApp groups to reduce the negative sentiment to only 4%
Advocacy with Religious Groups

Grand Mufti Pakistan Madrassa Jamia Naemia fully supported TCV SIA

Iconic Madrassah Misbah-ul-Uloom convinced, resulting in increased coverage

TCV Vaccinations conducted in all Madaris (Madarsa-Tul-Madina).

Advocacy with refusal schools

City Schools’ management refused vaccination but advocacy meetings with management of school led to vaccination of 136 children

Bahria Collage Karsaz (Naval Area) refused vaccination. They were convinced and 583 children were vaccinated.

Event at Karachi Press Club
ANTI & PRO VACCINATION TOPICS by public

- Vaccines make people sterile/infertile and are a means of extermination
- Vaccines have toxins/poisonous substances - lead to cancer & health risks
- Rumors during campaigns - children die, become sick/faint after being vaccinated
- More Effective Natural Alternatives - make vaccination unnecessary
- Refusal of government sponsored vaccines – but trusting private practices to deliver service
- Mistrust Experimental Vaccines - TCV is not tested and is manufactured in India

Concerns over Rise in Vaccine-preventable Disease:
Increasing polio rates and emergence of drug-resistant typhoid

Public inspired to combat Polio and Typhoid:
Strong vision against VPDs and new TCV praised highly

Debunking Myths & Promoting Information:
Organic & shared posts to counter misinformation & promote vaccination campaign

Concerns about the Media’s false reporting:
Posts lamenting media’s support to anti-vaccination narrative during campaigns

Awareness Days support narrative:
Many posts during awareness days indicates an opportunity to leverage them
FACEBOOK INSIGHTS & CONSIDERATIONS

Partnership includes data insights and strategic support to develop and launch tailored behavior change campaigns through a Brand Lift Study.

- **80% Adult FB population under 35 yrs**
  - Content to activate younger audiences, e.g. short-videos, quizzes, Instagram stories.

- **Women talk more about vaccines**
  - In Pakistan, women in higher age group talk about vaccine – target young women.

- **Woman vs Men’s interests**
  - Women talk of individual & family issues; men talk of high-level political topics – activate both genders.

- **Pro-Active Counter Messaging**
  - Top shared posts’ showed proactive counter-messaging during campaigns can be effective.

- **Awareness Days can be effective**
  - Leverage awareness days with organic content & engage local media to amplify messages.
EPI DIGITAL MEDIA CAMPAIGN
5 - 16 OCTOBER 2020

#VaccinesWork

14,283,938 REACH
78,980,065 IMPRESSIONS

PARTNER SUPPORT
- Pak Fights Polio
  @PakFightsPolio
- UNICEF Pakistan
  @UNICEF_Pakistan
- Ministry of National Health Services, Pakistan
  @nhsrofficial

ADDITIONAL EXTENSIVE REACH
- ProPakistani
  Page · 1.2M
- Zong
  4.4M
- NetMag
  Page · 70K
- U.S. Embassy Islamabad
  @usembislамabad

EPI FACEBOOK PAGE INSIGHTS
- People reached: 6,045,307
- Post engagements: 143,392
EPI FACEBOOK FOLLOWING BY AGE AND GENDER

Campaign Sentiment & Gender Engagement

Sentiment Score 89.41
- Positive: 42%
- Neutral: 53%
- Negative: 5%

Gender
- Male: 39%
- Female: 61%

Increasing Page Engagement for EPI Facebook
Vaccines are manufactured after going through several stages to ensure their safety & efficacy before any child gets vaccinated.

Vaccines in the EPI schedule are approved by the Government of Pakistan & certified by World Health Organization for their safety & effectiveness.

Misinformation around vaccines is without EVIDENCE... and there is extensive research & study to prove #VaccinesAreSafe & #VaccinesWork.

Over the past many years, vaccines have saved countless lives of precious children across the world because #VaccinesWork!

#VaccinesWork

For more information, please contact us at jdshadid@unicef.org and adurrani@unicef.org
QUESTION FOR THE COMMUNITY

Use the “Raise Hand” function

Can you share how you’ve addressed vaccine misinformation where you work?
A scientist who is also a human being cannot rest while knowledge which might be used to reduce suffering rests on the shelf.

Albert B. Sabin

Questions for panelists?

Use the Q&A function
Upcoming webinar series:

VACCINATION MISINFORMATION CONTROL AND PREVENTION

A partnership of Sabin and UNICEF

Infodemiology in Practice
Dr. Claire Wardle, First Draft
Md Saiful Islam, Univ. of New South Wales

Fireside chat on how to identify, understand and address misinformation based on experience and ongoing work of First Draft and work of Md Saiful Islam.

November 12th 7:00 AM EDT

Inoculation against disinformation
Prof. Stephen Lewandowsky, Univ. of Bristol
Second speaker TBD

From a co-author of the Debunking Handbook and a fellow misinformation academic (TBD), an overview of the theory and practice of debunking and prebunking misinformation.

TBD

Dates to be announced on https://boostcommunity.org/events
JOIN THE BOOST COMMUNITY!

The Boost online platform ([https://boostcommunity.org](https://boostcommunity.org)) enables immunization professionals to **connect** with peers and experts, **learn** skills that build capacity and advance careers and **lead** immunization programs.
• **Join the Boost Community** ([https://boostcommunity.org](https://boostcommunity.org)):
  The Boost Community enables immunization professionals to connect with peers and experts, learn skills that build capacity and advance careers and lead immunization programs. Take advantage of our online platform, including online courses, live workshops, webinars, resources and more!

• **Join Learning Groups** ([https://boostcommunity.org/topics/](https://boostcommunity.org/topics/)):
  Continue sharing your comments, questions and challenges with your peers and experts on topics like Capacity Building, Immunization Supply Chain and COVID-19.

• **Learn about future Events & Webinars** ([https://boostcommunity.org/events](https://boostcommunity.org/events)):
  In the coming weeks, Boost will share details of two upcoming Sabin-UNICEF Vaccination Misinformation Control and Prevention webinar series. Stay tuned!

• **Take Our Survey [XXX]**:
  We want to hear from you! Continue the conversation on vaccination acceptance and share your thoughts on future offerings for the Boost Community.
THANK YOU