

3RD VIRTUAL GLOBAL WHO INFODEMIC MANAGEMENT CONFERENCE

COVID-19 infodemic response overview for South Africa

Sinenhlanhla Jimoh, Ayanda Holo, Lesego Sibilanga, Nileen Gale, Dr Natalie Mayet **DIGITAL POSTER**









Division of the National Health Laboratory Service

COVID-19 INFODEMIC

Response Overview: South Africa

Prepared by Sinenhlanhla Jimoh

"Perhaps the greatest dangers to our country at this time are fear and ignorance. We should stop spreading fake and unverified news and creating further apprehension and alarm."

President Cyril Ramaphosa-05 March 2020

Overview of infodemic response for South Africa



Coordination, resourcing and strategy

- Infodemic management is constantly evolving in South Africa, there is currently no existing strategy, however there are a number of forums that are trying to deal with the infodemic.
- In March 2020 the Government established the National Coronavirus Command Council (NCCC). The main objective of the NCCC is to create awareness of COVID-19, converse with stakeholders and act as a knowledgeable advisory to the South African Government.
- The NCCC plays a critical role in driving public perception of the pandemic and continues to focus its communication efforts to support Government's regulations.
- To amplify how harmful false/fake news is, the Government declared it a criminal offence punishable by a fine, jail time or both.
- The Government established a hotline and Digital Complaints Committee where members of the public can report individuals guilty of sharing misinformation (<u>www.real411.org</u> and WhatsApp line 067 966 4015).

Working relationships across society

In order to yield positive results, the recommended approach was through a collective effort with various stakeholders, including the National Coronavirus Command Council (NCCC) National Department of Health (NDoH), National Institute for Communicable Diseases (NICD), National Health Laboratory Service (NHLS), National Institute for Occupational Health (NIOH), Government Communication and Information System (GCIS), Ministerial Advisory Committee (MAC), Provincial Health Departments, local government, The South African Medical Research Council, local municipalities, other medical institutions, private laboratories, the media industry and other.



Integrated measurement, research and data analysis

- In the absence of a an integrated strategy to tackle the Infodemic in South Africa, there is no existing integrated measurement, research and data analysis.
- Nonetheless different sectors of Government increased capacity to monitor and respond to misinformation and fake news.
- A hi-tech monitoring and evaluation process was adopted to assess complaints and reports
 from the media, the public and other sectors of society, with the ability to take down fake
 news items on a range of platforms and submit cases to the South African Police Service for
 investigation and prosecution.
- This lead to a unique collaboration between the National Department of Health, the Government Communication & Information System, Media Monitoring Africa and the CovidComms volunteer communication network.

Reporting and integration into decision-making

- Monitoring public perception is imperative, as the data can drive change and improve communication efforts.
- Insights from social listening or response activities gives insight into socio-behavioural and epidemiological data; the understanding of both these components are critical to initiating programme and policy design.



Evidence-based interventions and implementation research

- The data collected by the Ministerial Advisory Committee (MAC) painted a picture of the communications landscape and what the public perceive to be true. This includes disinformation, false and harmful information.
- It also gave valuable insight into public sentiment towards governing bodies, enabling communication strategies to be adapted.
- Once misinformation news items or social media content have been identified, the platform owners are notified to remove the content.
- Electronic Communications Services Licensees, including ISP that provide linear and non-linear services, will be responsible for removing fake news from their platforms.



What did infodemic management and response look like before the COVID-19 infodemic in your country?

- Before the Coronavirus pandemic, misinformation was prevalent in the area of HIV, vaccines but was an emerging issue in terms of academia, research and practice.
- However, there is lack of evidence of scientific information of the impact of misinformation. Previously anecdotal evidence suggests that there is impact on HIV, TB and other vaccine preventable diseases.
- South Africa has not experienced an infodemic to this scale before coronavirus.

What has changed in infodemic management and health misinformation response since start of COVID-19?

- Fake news, misinformation, and conspiracy theories have become prevalent in the age of social media and have skyrocketed since the beginning of the COVID-19 pandemic.
- South Africa established a hotline and website for reporting any misinformation. Additionally, a website page that hosted all misinformation for public reference.
- Building eHealth Literacy and science literacy capacity through collaborations with stakeholders (partners and allies) to run campaigns on social media, and other channels that share credible and consistent messaging about the novel virus. These included websites that has .co.za on their domain to include a link to the official country coronavirus website for credible information.
- In addition, TV broadcasters ran adverts providing prevention information, and clinics and community caregivers shared information with patients and community members through deliberate approaches.

Although reactional and disintegrated in its response, South Africa made progress in accurate and timely knowledge translation, minimising distorting factors such as political or commercial influences. Key information was shared timeously and in a manner that elevates credibility and that is accessible to all South Africans.

 $Source: \underline{https://www.thecompassforsbc.org/sbcc-tools/how-fight-infodemic-four-pillars-infodemic-management}\\$

A visual representation of infodemic management in South Africa







What some people said and believed:

- African blood and black skin prevents COVID-19
- The virus only affects rich white people
- Alcohol will prevent or cure COVID 19
- Wearing a mask will make you sick
- COVID-19 is not a serious illness
- Certain foods or drinks can prevent or cure COVID-19
- Certain existing medications can prevent or cure COVID-19
- Authorities are inflating numbers or falsely confirming cases to benefit financially
- Coronavirus was brought here or is being spread by the government
- Treating at home is safer than going to a health facility

What are the lessons learned from the experience of infodemic and infodemic response in COVID-19?





- Efforts need to be research informed, coordinated, multi-disciplinary and integrated.
- The Governing bodies, responsible for the public communications campaigns, should seek advice from technical, scientific and medical experts on a fact-sheet response to the public, clarifying the myths around prevention and cure. This should also include the dangers of wrongful home treatment remedies.
- Use simple, language-relevant, easy to understand explanations that all members of society can identify with. It's easy to feel alienated or intimidated by information that's hard to understand.
- As more research is conducted around the pandemic, more information becomes available which is of public concern. This poses challenges as it fuels the Infodemic, thus need to be managed.
- People's fear of preventative measures leading to other ailments needs to be addressed factually, for instance the notions that hand sanitizer causes cancer and that masks deprive you of oxygen.
- The public question the accuracy of the information Government institutions share, due to the fact that they have already been exposed to an overabundance of information (both accurate and false).
- Insights from social listening or response activities can inform programme and policy design.
- Need to practice and live messages, for example public figures wearing masks in public.

What advice would you give to other countries developing their own infodemic response plans?



- Prepare/strengthen communications systems, guidelines and other resources for future pandemics and infodemics.
- Involve credible and knowledgeable experts. The media funnels information through to the public and can easily (and unknowingly) propagate confusion and fear. Most journalists are not science specialists, nor are they equipped to weed out questionable science or recognise where balanced reporting might be beneficial.
- Refresh communication campaigns regularly (based on data and sentiment) to remain current, especially as new information becomes available (move away from preaching).
- Establish reliable data-free information portals that can easily be accessed by all members of society, that is easy to navigate and a trusted source of information.
- The aforementioned portals need to communicate regular updates, as new information becomes available through research efforts.
- Fact-checking requests from the public will spike as the pandemic peaks. Ensure a team of trained professionals are equipped to respond timeously, especially as the work volume increases.
- Forge and maintain relationships with key stakeholders and align communications efforts to achieve a common goal.
- Adopt a flexible communication strategy, allowing room for reflection and strategy revision
- Detect and understand the spread and impact of infodemics by.
- Respond and deploy interventions that protect and mitigate the infodemic and its harmful effects.
- Evaluate infodemic interventions and strengthen resilience of individuals and communities to Infodemics.
- Create agency with communities, so that communities make informed decisions.

What are your plans for future infodemic management work in South Africa?



- Building a national strategy on dealing with misinformation, involving other stakeholders including technology partners. It may also be key to commission research on why misinformation is spreading so fast across the world.
- Enhanced collaboration across government, at all spheres and between government and social partners, to ensure consistency in content, look and feel of government communications.
- Strengthening of relations with community media for district model success, and improving language relevance of key messages.
- Future plans include measuring and monitoring the impact of infodemics during health emergencies by:
 - O Standardising taxonomies and classifications; developing new metrics to measure and quantify infodemics; analyse and triangulate data from multiple sources; and improve evaluation approaches for infodemic interventions.
- Detect and understand the spread and impact of infodemics by:
 - Understanding how information originates, evolves an spreads on different platforms; asses the role of influencers,
 platforms and channels; understand how misinformation affects behaviour; and develop regulatory and ethical principals to mitigate the spread and propagation of harmful health information.
- Respond and deploy interventions that protect and mitigate the Infodemic and its harmful effects by:
 - O Designing a change model applicable to Infodemic management and unpacking societal, community, individual and health systems interventions.
- Evaluate infodemic interventions and strengthen resilience of individuals and communities to infodemics by:
 - Developing interventions that address individual, community, cultural and societal-level factors affecting trust and resilience to misinformation; understand and learn how misinformation affects behaviour in different populations and contexts and identify factors associated with successful Infodemic management.

Source: Abad, N., Behavioral Science, Cognition, and Infodemic Interventions. Demand for Immunization Team.