Coronavirus “Infodemic” Has Something to Teach
Interview with Anita Makri

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KENNEALLY: The spread of the coronavirus around the world is viral in the common medical sense of the term. A parallel pandemic has simultaneously erupted, too—a virtual viral infodemic of misinformation.

Welcome to Copyright Clearance Center’s podcast series. I’m Christopher Kenneally for Beyond the Book. Anita Makri writes from London on science and global development and has covered previous health emergencies, including the eruption of Ebola across west Africa in 2014. Lessons learned then can help to dispel rumors and myths about COVID-19, Makri asserts. To battle misinformation successfully, she says, we must make an effort to understand it. Anita Makri, welcome to Beyond the Book.

MAKRI: Hi, Chris. Thank you for inviting me.

KENNEALLY: We’re looking forward to chatting with you, because you really do get to the heart of the media story about COVID-19. It’s a story about a health emergency, but it is also a crisis of information. This growing currency of misinformation in our world is a troubling trend, and it’s one, of course, that precedes the global public health problem facing us today. While our reaction to dismiss information or even to wish it to disappear is a natural one, you suggest we would be better served by looking at it closely. I wonder if you can explain why.

MAKRI: Yeah, that’s a fair question. The short answer is that I think it’s both a pragmatic way to do it and a respectful way, respecting the human condition of being anxious in a situation like this.

But let me step back a little bit for the slightly longer version. When we say misinformation, I think a word that’s being used a lot in this context, but it actually means quite a lot of things—or I should say it’s a catchall phrase that encompasses a lot of things. Those things could be maliciously spreading misinformation, so perhaps for political reasons. They could be confusions, so things that some people read and might not completely understand, and then they get passed on in a sort of modified form. And then there are sort of more playful rumors, I guess. All of that gets kind of bunched up together. And I guess our contemporary media landscape
or information landscape makes that easier to sort of take root, because there’s just so many sources.

So when the World Health Organization in February held a meeting and called this an infodemic sort of spreading alongside the disease, it was actually referring to both the large volumes of information and the misinformation that was spreading. That’s where the idea for the article came from.

KENNEALLY: Well, we saw your piece in the London School of Economics blog, and I really thought it was very incisive, because what you’re suggesting, what you’re really asking us all to do, and it’s not easy, is to look at this information closely and see it as an opportunity to understand the people who are expressing these concerns, these anxieties, which you’re suggesting are really legitimate. And we need to appreciate them and understand where they are coming from.

MAKRI: Yes. And just to clarify, the piece was first published in Undark Magazine. But yes, that’s a point of view that actually came to the fore in 2014 more strongly, and that goes back to the spread of Ebola in west Africa. That was a time when a particularly sort of scary and deadly disease was spreading, and public health professionals were having quite a lot of trouble persuading local people to take some of the precautions that were being recommended.

Initially, that was framed as a sort of resistance by the part of local people, perhaps because they weren’t comprehending the instructions. But eventually, with help from social scientists, it became clear that there were actually historical and day-to-day concerns that were underpinning those reactions, and those concerns were legitimate. Once we learned to stop and actually understand what those concerns mean and look for the legitimate reasons behind them, then our messages can change and can be more effective, because they take those reasonings into account.

For example, in west Africa, one prominent case was that of safe burials. People have certain rituals to bury the dead that involve touching the body. Of course, that is a major risk factor for spreading Ebola. So once the concerns were understood, then those practices – those recommended practices of not actually coming in contact with the body were changed in a way that was acceptable to local people, and that helped prevent further spread.

That’s sort of the general idea, and this notion of having social input at the time became a turning point for the World Health Organization, as one of its senior officials, Sylvie Briand, said. We see that part of that is now being incorporated into the COVID-19 response. However, a lot of the discourse online is still about debunking rumors and misinformation. That contrast – that disconnect between
what we learned a few years ago and what we’re seeing now in all of those rumors and misinformations being treated in the same way – that disconnect is what prompted me to make that point.

KENNEALLY: It’s very informative, Anita Makri, I think, because that disconnect you described, that impulse to correct the rumor, to correct the misinformation, is one that’s misplaced. I’m very much taken with this notion that even as we pay attention to what the medical scientists have to say, there is a role here for social scientists. They can be embedded in the emergency response and create a kind of real-time feedback loop, you call it. Explain that.

MAKRI: Yes. So that’s, again, something that emerged in the west Africa context in 2014. There was an anthropology platform set up by the UK-based Institute of Development Studies, and that was led by Professor Melissa Leach. It kind of became a repository of anthropological information and a way for officials to have a way of having that input, and I think it’s something that evolved gradually, to the point that now I believe that they have two or three mechanisms of doing that.

One of them is to have briefings – peer-reviewed briefings on issues that the World Health Organization or other agencies might need input about. Another mechanism is to have social scientists embedded on the ground as part of the crisis response in affected countries. That, I guess, has perhaps more of a tradition in developing countries, where there’s a longer history of a humanitarian response of this scale. A third way is to have dialogues with communities – and again, it is something that happens a lot more often in international development, but you might also see it in community briefings or meetings in other countries. So these are things that social scientists have developed.

And then there are others – like for example, Heidi Larson in the UK leads a Vaccine Confidence Project that tracks misinformation globally. Although I’m not sure how much it is embedded in the response to COVID, it’s still a significant or an interesting project.

KENNEALLY: Clearly, we would all like to see a well-informed public, especially during a public health crisis like the one we’re facing today. That is not only to prevent infection, to prevent the spread, to flatten the curve, as we have now come to understand, but it’s also to prevent unnecessary panics. Panics can be just as dangerous as a disease can.

MAKRI: Yes, I would say so. I think there’s a balance to strike here. Unnecessary panic is dangerous, but also underplaying a threat is also counterproductive. So I think it’s an argument for actually tuning in to the concerns that people have and
trying to respond with evidence-based information, but with one not negating the other. There is a long tradition, I guess, in science, and even in science journalism, that there is a sort of impulse to correct. There’s an impulse to say, no, we have the right answer, because we’ve done the research. But I think more and more, we are realizing that sometimes that impulse isn’t entirely correct, that there is also value in actually trying to understand why people hold the views that they do, because that might give us clues as to what the most appropriate information is to give back, either to avoid unnecessary panic, as you say, or to prompt people to take the right precautions in a really serious situation, as is the one we’re facing now.

KENNEALLY: Anita Makri in London, thank you so much for joining me on Beyond the Book.

MAKRI: Thank you so much, Chris.

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