World view

A lack of information can become misinformation

By Heidi J. Larson

Governments squander their credibility when they suppress messages related to COVID-19.

hen governments or their leaders repress pandemic information in the hope of calming anxious publics, or deliberately release supposedly reassuring misinformation, they risk undermining their own credibility and their abilities to help people to counter real health threats.

Examples of this span the world. US President Donald Trump claimed that there would be a diagnostic test for "anybody that needs a test". Iran, once known for its strong health-care system, has been hit hard by COVID-19. Iranians were already angry and mistrustful following their government's accidental shooting down of a passenger aircraft in January, amid other grievances. In this climate of distrust, new anger emerged as the public felt that the government was not doing enough to slow the outbreak. The foreign minister, Mohammad Javad Zarif, tried to divert this anger by blaming the United States. Although US sanctions have taken a toll on daily life in Iran, and perhaps weakened its capacity in the COVID-19 response, the government also made conscious attempts to repress information about the state of the outbreak. Medical staff in Iran have been warned by authorities not to share any information about infected patients or limited resources, undermining the ability to respond.

The Canadian Broadcasting Corporation reported on 18 March that physicians in Russia fear that there could be "hundreds" of deaths, despite President Vladimir Putin's assurances that all is under control. Some physicians say they are holding back from reporting suspected cases to health authorities because they are concerned about the state of the quarantine facilities where their patients would be sent, and they fear that their own practices would be shut down. And news agency Reuters reported that the White House had kept important COVID-19 meetings classified – even though that meant keeping information from experts who would normally be consulted — while the President trumpeted 'all under control', until reality forced a rapid about-face.

Where official information sources are perceived as untrustworthy, the climate is set for the viral spread of unfounded speculation. COVID-19 has triggered a fountain of rumours — an indistinguishable mix of unverified information, helpful information, misinformation and intentionally manipulated disinformation. Between 1 January and mid-March 2020, our social-media monitoring at The Vaccine Confidence Project had captured more than 240 million digital and social-media messages globally

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referring to the new virus, with an average of 3.08 million messages per day. On Twitter, there have been 113 million unique authors sharing everything from messages from news reports and commentary on COVID-19, to views on quarantining measures, speculation on the source of the virus and details of home-brewed cures. These cures ranged from the relatively harmless — eat garlic — to the downright dangerous — drink bleach. One message falsely claiming to be from Stanford University in California, recommended sipping water to kill the virus, or holding your breath for ten seconds to determine whether you are infected. (Neither works.)

As scientists rushed to investigate the new virus, conspiracy theories started to circulate about whether it was a naturally evolved new pathogen, one that inadvertently slipped out of a high-security laboratory in Wuhan, China, or one that was deliberately created for biowarfare — an idea deemed plausible by some in the current context of geopolitics and deepening tensions between the United States and China.

On 19 February, a group of scientists issued a statement in *The Lancet* to quell the tsunami of conspiracy theories. They confirmed that investigations "overwhelmingly conclude that this coronavirus originated in wildlife". But between the identification of the new virus and the confirmation of its origin, there was no evidence available to counter the rumours that went viral, and — for those who want to put stock in them — they persist.

The challenge for policymakers and health authorities is that, although some information is clearly false, and even harmful, the validity of other posts is less clear-cut. Some are merely stirring up doubts, confusion and conspiracy, and undermining trust in health authorities, but they are difficult to pin down and refute. Some emerging, albeit unverified, information might be valuable, and deleting it would cause harm.

The epidemic began with a poignant example of potential life-saving information that was suppressed as a rumour. On 30 December, Li Wenliang, a young ophthalmologist in Wuhan posted a message to colleagues that tried to call attention to a severe acute respiratory syndrome (SARS)-like illness that was brewing in his hospital. The Chinese government abruptly deleted the post, accusing Li of rumour-mongering. On 7 February, he died of COVID-19.

This is a complicated landscape that is not just a matter of debunking a piece of misinformation. This is about relationships between publics and politicians, a lack of trust in the motives of governing powers, and fears among leaders that the truth would spark public disorder and dissent. Advice to "Keep calm and carry on" can have exactly the opposite effect in the context of a fatal, and evolving, new virus.

Heidi J. Larson

is a professor at, and the director of, The Vaccine Confidence Project at the London School of Hygiene and Tropical Medicine and a clinical professor of health metrics science at the University of Washington in Seattle.

e-mail: heidi.larson@lshtm.ac.uk

ATRICK DOWSE