Defining the Authority of Online Providers of Health Information
Webinar Summary

The National Academy of Medicine (NAM) hosted a webinar on April 5, 2021, to inform its project on Principles for Defining and Verifying the Authority of Online Providers of Health Information.[1] As sponsor of the project, the online video platform YouTube asked the NAM to identify preliminary definitions of authoritative sources of health information and the criteria by which these sources derive and maintain their authority. In response, the NAM convened an expert group to gather insights, deliberate, and publish guidance in an upcoming peer-reviewed discussion paper.

Raynard Kington, MD, PhD, MBA, head of school at Phillips Academy in Andover, MA, and chair of the project's Advisory Group, moderated the session. Also attending the webinar were fellow Advisory Group members **Stacey Arnesen, MS,** Deputy Chief, Public Services Division, National Library of Medicine; **Wen-Ying Sylvia Chou, PhD, MPH,** program director, Health Communication and Informatics Research Branch, Behavioral Research Program, National Cancer Institute; **Sue Curry, PhD,** former dean, University of Iowa College of Public Health; **David Lazer, PhD,** distinguished professor, Political Science and Computer Sciences, Northeastern University; and **Antonia Villarruel, PhD, RN, FAAN,** Margaret Bond Simon Dean of Nursing, University of Pennsylvania.

Perspective from YouTube

Garth Graham, MD, MPH, director and global head of healthcare and public health partnerships at YouTube, began the discussion by outlining the company's goals and processes for enhancing access to authoritative health information on its platform.

One of the most popular websites on the internet, YouTube reaches 2 billion viewers every month, which Graham noted is nearly one-third of the world's population. He said the effort with the NAM is a significant opportunity from a health and public health standpoint, because videos are uniquely capable tools for explaining complicated clinical topics in consumer-friendly formats.

Graham explained that quality of information is a primary focus for YouTube, and the company has developed a strategy for how to deal with misinformation and proactively promote accurate information. YouTube has partnered with the Kaiser Family Foundation, the Black Coalition Against COVID, Tulane University, experts from the NAM, and others to create useful information that can reach local communities through YouTube.

"It's like a garden," Graham said. "When you think about health information, you have a lot of misinformation, which are the weeds. We need to pull the weeds from the garden."

He followed with the question, "How do we fill in the garden with the right kinds of information, evidence-based scientific information, to allow people to make the right decisions in general?"

The Health and Social Consequences of Misinformation

Brendan J. Nyhan, PhD, professor of government at Dartmouth College, noted that social and political problems are reflected on social media platforms, not caused by them, and leaders of these platforms can be "defensive" about being "blamed" for these reflections.

---

[1] https://nam.edu/programs/principles-for-defining-and-verifying-the-authority-of-online-providers-of-health-information.

While a minority of people consume untrustworthy information, social media can nevertheless amplify harmful content, which can then have significant, real-world repercussions – for example, fostering distrust in vaccines. Nyhan noted that more than 50 of the "extremist" channels identified in his research were still up and running as of the time of the webinar.

Nyhan explained that content moderation is more complex than a policy that directs leaving a video up or taking it down. He added that monitoring for problematic word searches – a common content moderation technique – only addresses what is on the surface, and therefore future interventions must do more than focus on a set of keywords.

How Health Information Is Received at the Community Level

Lisa Fitzpatrick, MD, MPH, MPA, founder and CEO of the nonprofit Grapevine Health, detailed lessons learned from speaking with community members in Washington, DC; New Jersey; and Pennsylvania during the COVID-19 pandemic.

Many of those interviewed expressed skepticism of government agencies. Fitzpatrick said it is clear from her interviews that misinformation and conspiracy theories are common at the community level, and that there are trust issues regarding online searches and traditional news media. Seeking information from family members was common.

The interviews showed that people are resourceful when seeking health information, especially through online searches, even if they also receive information from a doctor. Fitzpatrick shared the experience of a physician colleague who offered information about the COVID-19 vaccine to a patient and was surprised when the patient responded, "I'm not looking for *your* information. I'm looking for my *own* information." Other interviewees also expressed negative feelings about COVID-19 tests and vaccines.

Fitzpatrick stressed that if experts do not give the public information that is relatable and easily understood, barriers to sharing high-quality information will persist. She suggested that experts design messages that ensure voice, culture, and context are clear, referencing an interviewee quote: "I don't understand what doctors are saying, and if I don't understand you, I can't trust you."

Unintended Consequences of Content Curation Strategies

Zeynep Tufekci, PhD, McColl Term Associate Professor, University of North Carolina-Chapel Hill School of Information and Library Science, addressed concerns about the societal effects of social media companies' business and algorithmic models. She noted that moderation efforts do not contribute to revenue for social media platforms, and thus interventions that increase moderation at a large scale could make such efforts implausible.

She also explained that institutions are not always capable of moderating social media platforms. For example, during the early days of the COVID-19 pandemic, Facebook followed the World Health Organization's guidelines as a model for reliable information, despite the fact that an inter-science debate was under way. The guidelines proved too limited and were unable to keep up with the evolution of knowledge on the virus.

Tufekci said the pandemic demonstrated that medical sources can be wrong – something she stressed cannot be brushed over – resulting in no easy answers about how to increase scientific authority on social media sites. One possibility, she noted, is that authoritative sources must work to effectively gain the public's confidence, and pointed to Fitzpatrick's presentation as an example that trust must be earned.

Discussion

The webinar concluded with a discussion among the Advisory Group members and the presenters. Nyhan noted that Facebook undertook a similar effort to promote access to high-quality information that yielded no easy answers. He said that a goal of "better than" can work, because a perfect solution will not be possible.

Curry followed up with questions about whether increased viewership of untrustworthy videos correlates to stronger and harder-to-change beliefs among viewers. Nyhan responded that people who tend to have more extreme beliefs and information diets often consume the majority of this content.

Nyhan later noted that when it comes to health sources, trust correlates highly with other kinds of objective indicators of quality and recommended against constructing platform policies around only a small percent of extremists.

Tufekci noted that social media platforms have changed information "ecology" so that news organizations and television networks are competing for attention with content that appears on Facebook, YouTube, and other platforms – thereby requiring researchers to broaden their lens to understand the impacts of social media on health and society.

Fitzpatrick then fielded questions from Villarruel and Graham, noting that from her many years in the health sector, she recognized a long history of ineffective communications with the public about research, clinical, and other issues. She underscored the challenge – that medical experts and institutions must begin by listening to community members and understanding where they get information before building collaborations with those sources. She pointed to faith leaders and social service agencies as examples. She also noted a need to rally community health leaders, digitize their work, and make it available online.

Chou closed the discussion by asking Tufekci if the pandemic provides health experts an opportunity to be more proactive in experimenting with new ways of communicating. Tufekci said that there are ways to better identify authoritative information and address amplification of misinformation, but in the end, the challenge is to convince the public by winning the argument about what is authoritative information.

# # #