INFORMATION SOURCES
Information concerning COVID-19 may be shared in several different ways.
- Newspapers
- TV
- Radio Stations
- Social Media Channels

ADDRESSING COVID-19 MISINFORMATION
Tips for Health Professionals Working with Community Members

Identify Key Misinformation in Your Community
- Listen to misinformation circulating in the community for example, from trusted messengers, in town halls, as rumors, and on social media.
- Stay up on the most current and widespread misinformation circulating, for example, in questions to physicians and community health workers, and call-ins to local talk radio.
- Create a priority list of misinformation and develop fact-based responses.

Choose Which Misinformation to Address
- While all misinformation could be problematic and may need to be addressed, prioritize the most urgent.
  - Select misinformation commonly circulating in the community.
  - Select misinformation shared by sources such as physicians, faith leaders, public figures, community stakeholders (e.g., teachers) and social media influencers.
  - Select misinformation that presents a barrier to action or promotes risky behaviors.
- Distinguish between general disagreement (for example, the vaccine isn’t completely safe) and specific falsehoods (for example, the vaccine will alter DNA because of the mRNA approach).
- Prioritize specific misinformation for fact-based correction.

Acknowledge and Empathize
- Sometimes even the most knowledgeable people may believe, and transmit, misinformation.
- Acknowledge prior institutional wrongs and historical facts that reduce credibility and trust, while also advocating for the acceptance and uptake of approved vaccines.

Empathize and Connect
- In responding to misinformation, consider acknowledging, empathizing with and affirming the person’s (or audience’s) perspective first, then offer fact-based correction. Here’s an example:
  “I understand what you are saying and why you might have concerns. Because of things that have happened in the past, many people have shared similar thoughts. We want to make decisions that we are comfortable with, while avoiding the blind trust of the past. So, when physicians say everything is fine, we will still question and challenge it, but in the end make an informed decision for our loved ones, ourselves, and our community. Here are the facts from people we know and trust…”

Debunk and Explain
- Use plain language; be responsive to literacy levels and culturally acceptable language. Debunk misinformation using fact-based information and persuasive strategies to support the facts. Here’s an example:
  “You care about your community and you want to make an informed decision for yourself, your loved ones, and your community. Here’s what people we know and trust say about the facts behind this decision…”
- Tap credible community members and trusted messengers willing to tell their stories but don’t oversell their stories or sugarcoat real and common physical reactions.
  “The vaccine went fine but I had a sore shoulder for a day or so. Overall, I felt relieved to get my first shot and be on the road to immunity.”
- Accurate claims can be interpreted in misleading ways. The same facts have more than one explanation. Don’t change the facts; challenge the story behind the facts. Here’s an example of a response to a concern that politicians influenced quick approval of the vaccine for their own benefit:
  “It is true that the vaccines were developed at a historically fast pace. Developers and independent review committees worked very carefully and fast to decide whether approval was warranted in order to stop the spread of COVID-19 and save lives.”