A Quick Guide to Public Health Misinformation

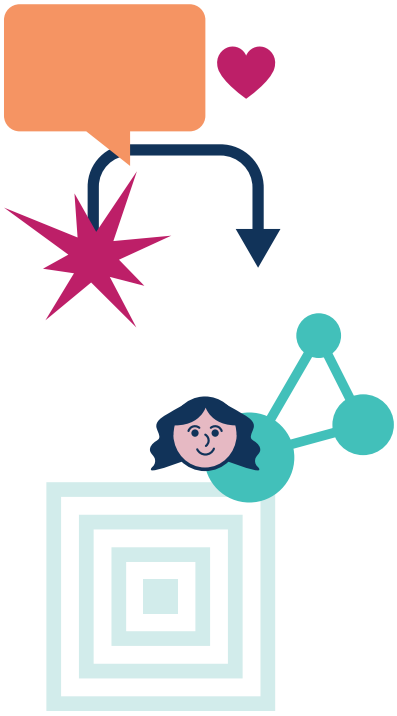
Building continued trust in public health requires communicators to learn how to identify false narratives and respond with clarity, accurate information, and accessible language. The following is a condensed version of the misinformation guide developed by the Public Health Communications Collaborative, released in 2024 in partnership with the Infodemiology Training Program.

Defining Misinformation, Disinformation, and Malinformation

	Is the information true or accurate?	Is there malicious intent by the person spreading the information?
Misinformation is information that is false, partially inaccurate, or misleading.	**No**	**No** Anyone can spread misinformation. People who spread misinformation often do so unintentionally and may not intend to cause harm.
Disinformation is a claim that is false and spread *intentionally*.	**No**	**Yes** "Bad actors" may spread disinformation for many reasons, such as to gain influence or make a profit. Disinformation is often crafted with the intent of causing an emotional response, which makes people more likely to share it.
Malinformation is when accurate information is intentionally manipulated to cause harm.	**Sometimes**	**Yes** "Bad actors" who spread malinformation may take accurate information out of context or share incomplete information deliberately with the intent to cause harm.

Why People Spread Misinformation

- If the misinformation triggers an emotional response, people are more likely to believe or share it.
- People share content to fuel connection or interaction with friends on social media, and may spread misinformation as a result.
- Social media platforms promote content that is popular or likely to drive web traffic — regardless of accuracy — and it can be difficult to resist sharing.
- People share misinformation out of habit or because they have a hard time identifying that it is false.
- When people consume content quickly, they are more likely to share it.



The Impact of Misinformation on Public Health

Misinformation is widespread and has unique impacts on the field of public health.

- **Weakening trust:** Misinformation weakens trust over time by undermining the science, good intentions, and expertise of public health communicators.
- **Compromised public health communications:** Because misinformation spreads faster than the facts, it's difficult for accurate information to break through.
- **Inequitable health outcomes:** Social and systemic inequities can make a person more susceptible to misinformation. As a result, misinformation has the power to influence decisions people make about their health and could lead to negative health outcomes.

Assessing Risk and Determining a Response

- **First,** track what narratives are being shared and where. Several free public health resources like PHCC's Trending Narrative Alerts and The Monitoring Lab can help track narratives by topic, impact level, or region.
- **Next,** assess the qualities that make the information more or less likely to spread. While each organization will have its own risk level thresholds, a sample framework is provided below.
- **Then,** after tracking and assessing, determine if you need to respond to any false narratives. Two common approaches are prebunking and debunking.

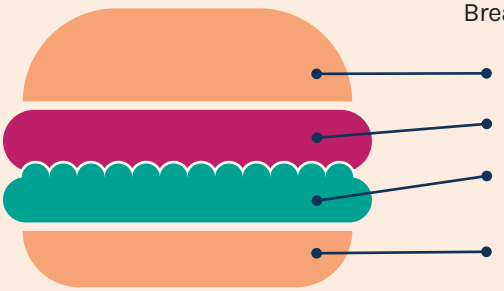
Prebunking is a preventive intervention that works to limit misinformation before it can spread. Prebunking does this by filling in knowledge gaps, focusing on the facts, and breaking down the tactics used to spread misinformation.

Debunking is a reactive approach that responds directly to false claims. When debunking a claim, it is critical to communicate with plain language and clearly explain why the information is false. Even when successfully executed, debunking content will rarely have the same reach as "viral" misinformation, and there is no guarantee the content will reach the same audiences who viewed a false claim.

When in doubt, focus on sharing facts and avoid amplifying false claims. Developing a plan within your organization to track narratives and assess risk levels will provide a solid foundation to determine which tools to use to respond to misinformation in your community.

Narrative Type	Considerations for Response
Low-risk narratives are limited in reach and don't have a significant impact on health decisions. They may signal that your audience is confused or has concerns but often do not pose a direct health threat.	Prebunking is a good fit for low-risk narratives because it is designed to clear up confusion and fill knowledge gaps. These narratives have limited reach, and prebunking helps ensure you will not speed up the spread of false claims.
Medium-risk narratives pose a health threat for several reasons. One is their potential to spread at a high speed. Another is that the information is circulating among a priority population, such as misinformation about vaping among teens. Finally, a medium-risk narrative uses tactics that make it more likely to spread — like emotional language, misleading data, or false claims.	Prebunking is a good fit for medium-risk narratives, largely because their reach is moderate. If a medium-risk narrative reaches a priority population, poses a public health risk, has persisted for a long time, or has a spike in reach, you could consider a debunking approach.
High-risk narratives move quickly, reach many people, and have significant potential to influence health decisions. They often include emotional tactics, target people with a certain worldview, or prey on poor media literacy skills. High-risk false narratives are often more memorable than accurate information.	While high-risk narratives can use prebunking, they are often the best candidates for debunking. This is because they have a wide reach and the potential to influence the health behaviors of a large proportion of the population.

Truth Sandwich Method for Debunking



Break down debunking with the Truth Sandwich method:

1. Always start your Truth Sandwich with a **fact**
2. Introduce a **warning** that you are resharing a false claim
3. **Explain the misinformation**, including any tactics that helped it spread
4. Finish your Truth Sandwich with a **fact**, replacing the misinformation with correct information

FACT	**Childhood vaccines are extremely safe and effective at preventing the spread of disease.**
WARNING	**You might have heard an old myth....**
MISINFORMATION	**that falsely connects vaccines and autism.**
FACT	**This is not true. Research shows there is no link between vaccination and autism. In fact, vaccines are the best way to keep your child safe from deadly diseases.**

Additional Best Practices for Responding to Misinformation

When crafting public health communications in response to misinformation, consider the following best practices to build trust with your communities:

- **Understand the norms, biases, attitudes, and behaviors of your audience** to help make communications memorable and actionable**.**This can include developing culturally driven communications and prioritizing social media accessibility.
- **Start with the most important facts:** People have a short attention span, and it is only growing shorter in the digital age. Craft your communications accordingly.
- **Use plain language best practices** to make your communications easy to find, understand, and use.
- **Be transparent about what you know and what you don't:** Acknowledge that information may evolve based on emerging science, especially when communicating about uncertainty.
- **Make it timely:** When fighting a virus, outcomes are better when you respond quickly. The same is true for misinformation. Even if the situation is still evolving, keep open lines of communication with your audience to let them know you are tracking an ongoing situation and will share more information when you can.

Learn more by reading the complete *Public Health Communicators Guide to Misinformation*.