



# International Monterrey Model United Nations Simulation

American School Foundation of Monterrey



## World Health Organization

**Topic:** Finding ways to spread relevant and accurate medical information to the general public to address those who follow ideas that put public health at risk.

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### I. Committee Background

The World Health Organization (WHO) is responsible for all health-related issues that are tackled by the United Nations. The organization was inaugurated on April 7, 1948, a date that came to be known as World Health Day. The decision-making body for the WHO is the Health Assembly, which mainly determines the policies of the organization and appoints the director-general. The Health Assembly usually convenes in the UN headquarters in Geneva each year during the month of May. The Health Assembly also instructs the Executive Board, “in regard to matters upon which further action, study, investigation or report may be required”. The Executive Board consists of thirty-four technically qualified experts in the field of public health, elected for three-year terms. Generally, the purpose of the Executive Board is to facilitate the work of the Health Assembly. The WHO also relies heavily on its Secretariat, a body consisting of around eight hundred people, which are stationed across the globe, in the institution’s headquarters, and in the regional offices of the organization.

The primary goals of the WHO include, “to improve equity in health, reduce health risks, promote healthy lifestyles and settings, and respond to the underlying determinants of health”. Resolutions passed by the WHO are non-binding and must be approved by both the Health Assembly and the Executive Board. The meeting in which resolutions are approved occurs annually in January. In this conference, resolutions which had been proposed by the WHO are then approved by the Executive Board and passed on to the Health Assembly. There is a shorter meeting in May to address the details of these resolutions and put them into effect.

### II. Introduction

#### Description and Definition of the Topic

Accurate and reliable information has become harder to find since it lives in the midst of falsified facts and unsustainable beliefs, also known as misinformation. The spread of misinformation can cause distress, danger, and death amongst a population (American Heart Association). This type of incorrect information spreads easily as a result of the wish to cause an emotional reaction in the recipient allowing for erroneous interpretation of facts, and another reason is the deliberate fabrication of false propaganda to further political gain (Ullrich Ecker, 2012).

Medicinal information regarding vaccines, viruses, and common treatments is often spread falsely through the internet and social media. As a result, according to over 20 doctors

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and healthcare providers, many choose to reject proper treatment because the misleading medical information “vastly overstates the risks of these drugs” and treatments (Hill et al., 2019). One of the many examples is the popular belief that vaccines cause autism. Even though the Center of Disease Control and Prevention (CDC) showed no causal association —meaning the occurrence of one event causing the other— between vaccines and autism, many people still confuse the apparent correlation between them for a causal association(CDC). This leads to deaths from preventable diseases of many small children whose parents refuse to vaccinate them.

Also, in many occasions, out of date information can be spread and lead to the underestimation of the impact of a certain issue. For instance, when President Donald Trump stated that COVID-19 was similar to the common flu many United States (US) citizens carried on with their lives as if nothing were to happen assuming that what they had heard was factual. However, this information was from the early stages of the pandemic, when little was known about the virus; nonetheless, even with newer information, the president insisted that COVID-19 was not a threat encouraging citizens to go on with their daily lives. This actively illustrates that people do not understand how the research of new viruses work, and how information can change. As a result politicians use the most appealing information —outdated or not— to further their agenda, meanwhile, updated less appealing information will be commonly denied by people (Institute of Medicine).

## The Problem

People are always being exposed to informati; it is inevitable to encounter both false and truthful data within the digital media environment. Through the pandemic, it is essential to appraise sources and differentiate the credibility of news. There was an extensive increase in news consumption during the COVID-19 pandemic quarantine; consequently, there was also a prominent increase in false medical information that was being dispersed to the public both through social media and conventional news media. Those ideologies and half truths, spread by the “false media”, are one of the causes of rising health risks, COVID cases, and deaths around the globe (Flemming, 2020). It is often difficult to obtain valuable research to publish, which can cause a shortage of authentic, precise information. This is the reason for many misleading article titles and headings, which then help the media to easily manipulate people. This is how, the way news is published affects the public reaction to an event (Tumpey 2018).

Part of this problem is a result of people considering social media, such as Facebook and Twitter, reliable sources of information when most of the time the contrary is true. The reality is that neither Facebook nor Twitter are real news sources, and both reliable and unreliable information can be found in them. While some posts come from reliable sources, there are also publications from more questionable sources. According to a study by Princeton University that was published by Forbes, Facebook is “[by] far the worst perpetrator when it comes to spreading fake news” (Travers). As a result, social media causes a greater spread of more medical

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misinformation rather than the reliable data, thus leading people to believe fallacious information and making the outbreak of the virus even more dangerous and confusing.

## III. History of the Topic

### Chronological History of the Topic

Back in the Middle Ages, it was believed that malignant air caused by maligned planets was the root of all health issues. This belief came to be known as *miasma*, and became the explanation for large-scale epidemics in most European and Asian societies. This medical hoax led to millions of deaths from diseases such as cholera, chlamydia, and most infamously the Bubonic plague, commonly known as “The Black Death”, which accounted for the deaths of “almost a third of the European continent's population” (Henderson 9). In those times, there were few scientific advancements, which is why most people relied purely on the Catholic Church's biased communications and oral information. This created a pragmatic system, and aided in the creation of even more outlandish medical practices like bloodletting, animal dung ointments, and the use of the cancer-creating element mercury as medicine for bone damage. At the end of this era, however, Johannes Gutenberg, invented the printing press in the process of revolutionizing communications and increasing access to reliable information. This made a variety of the experimental and unethical methods used before obsolete, as investigations and findings became easier to report to the public. Nevertheless, it also meant that the spread of false or as biased information to the people was equally as simple.

From the 1500's onwards, scientists and intellectuals sought to enlighten the common perception of medicine. For example, anatomist Andreas Vesalius dissected human corpses and published “De Humani Corporis Fabrica” (On the Structure of the Human Body). This was a set of books that gave a detailed description of the human body, which debunked the notion that the dissections of animals were an accurate representation of human anatomy. In the meantime, an English doctor, William Harvey, properly analyzed the circulation system and characteristics of blood. Just like Vesalius's discoveries, Harvey's discoveries positively shifted the reliability of public health officials and made individuals “[abandon] all alchemy and superstition” (School History 2). Overall, this period defined the reconstruction of the medical field for years to come as scientists like Andreas Vesalius, William Harvey, Leonardo Da Vinci, and others developed fact-based, secular information.

In 1918, the US and other nations maintained secrecy both inland and abroad about a new virus. The free Spanish press, however, was not as secretive with its information. It detected a virus emerging in rural Kansas which would later be known as the “Spanish Flu”. Chicago's public health commissioner insisted that “[w]orry kills more people than the epidemic” (Coren). However, this argument came with dire consequences. Americans viewed the Spanish Flu as an overseas problem, which led to a lot of problems within the country. To add on, according to historian John M. Barry from Tulane University and author of *The Great Influenza*, “as the epidemic exploded, officials almost daily assured the public that the worst was over. This pattern repeated itself again and again”, which aggravated the problem even more (Coren).

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Years later, during the 1980s, the AIDS epidemic brought about numerous challenges in spreading significant, relevant, and accurate information concerning the disease. Numerous advertising publications and the lack of government initiative led to the epidemic being unsuccessfully controlled. Jennifer Brier says that “public organizations took to spread information about AIDS”, marking the beginning of a new era in the medical community and its relationship to public safety.

Now, the Coronavirus Pandemic has shown the devastating effects that disinformation can have. The secrecy in part from the Chinese government and the lack of forthright communication in nations such as the US have caused the global spread to be catastrophic. In the US for instance, the president has been extensively involved in efforts to paint the virus as minor, constantly contradicting health experts from his own government. For many Americans, says Michael Coren, “Dr. Anthony Fauci is fulfilling the role of truth-telling doctor amid mixed messages from government officials” (Coren). The rise of social media sites has also allowed for an increase of misinformation in various nations like Russia, India, and the US. More specifically, the lack of regulation in sites like Google, Facebook, Twitter, and Instagram have all given a platform to unsustained information which lead to public health issues.

## Historical Case Studies

### Spanish flu: 1918-1920

In 1918 the Spanish flu, also known as influenza, spread with unprecedented speed and killed over 50 million people around the globe (Parmet & Rothstein, 2018). The deadly disease was able to spread so quickly as a result of misinformation from the media. In the US, the media downplayed the severity of the disease to keep morale up during the war, which caused delayed action when handling the virus, killing thousands of Americans (History.com Editors, 2010). According to The Nature Journal, “Chicago's director of public health [...] decided not to ‘interfere with the morale of the community’” because of the repercussions that it could have (Barry M, 2009). By August of 1918, most Americans assumed that the influenza pandemic was an overseas phenomenon and a complication of malnutrition. On September 20th, the Arkansas Gazette wrote: “Spanish influenza is plain la grippe – same old fever and chills”, over the next month Arkansas had to issue a statewide quarantine with over 1,800 cases (Kessler, 2018). Local officials covered up the death toll to maintain morale during the war. Eventually, the suppression of this information unfolded and mass graves were dug to deal with the deaths.

In contrast, the Spanish media operated freely. They reported new outbreaks and deaths; when the nation's king, Alfonso XII, became ill, the press also reported it. The extensive coverage of the flu in Spain led to an assumption that the flu had originated in that country despite it first appearing in rural Kansas. (Coren, 2020). The overall lack of access to accurate information elsewhere was responsible for prolonging this pandemic and causing misconceptions about the virus and its origins.

### HIV/AIDS:

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During the 1990s, the Acquired Immunodeficiency Syndrome (AIDS) caused the deaths of Freddy Mercury, Kevin Peter Hall, and would cause millions of more deaths for over a decade. According to Our World Publication founders Max Roser and Hannah Ritchie, “between 1996 and 2001 more than 3 million people were infected with HIV/AIDS every year”. This virus was largely incurable and extremely menacing since there was little to no treatment for it; its attacks towards the body's immune system made this virus particularly dangerous. At first the US government did not acknowledge it much, even when about 12,000 Americans had already died from it. President Ronald Reagan, during a press conference, jokingly denied any type of crisis when asked about the issue. In the meantime, the Health and Human Services Secretary Margaret Heckler falsely “announced the development of an AIDS test, and forecast that a vaccine would be available by 1986” (Fitzsimons, 4). These actions withheld the advancement of any type of research to solve this crisis or information being put out through large media outlets, thus hemophiliac populations and other victims were left with minimal care from local medicine.

The biggest struggle dealing with this issue came from the misconceptions that were thought of when talking about the victims of this virus. Due to “sexual contact being the most frequent mode of transmission of HIV”, especially through anal intercourse, many people believed the notion that homosexual men were the only ones affected (Markowitz, 745). Up to the 21st century, AIDS was reported as the “gay plague” and many governmental and evangelical groups stated that it was a consequence of people making this sexuality “a protected way of life” (Jones III). Additionally, as a result of this ridiculous data, some part of the heterosexual population began to incorrectly think that one could not contract the virus from vaginal sex, which led to a steady increase in cases. At its climax (1993), this virus was the “single greatest killer of men ages 25-44” (Altman 1). The public outrage that came with the continuous deaths and transmissions forced the US government to quickly target the issue. Within the span of a few years, the death toll had dropped by “23 percent” (UNAIDS 16). Moreover, it became recognized that the virus affects homosexuals and heterosexuals populations alike, as well as injection drug users. Nonetheless, to this day, the lack of initial medical aid, media targeting of gay individuals, and miscommunications as a whole have created a legacy where people with AIDS continue to be stigmatized and millions of families continue to be affected.

## SARS (2002-2004)

The Severe Acute Respiratory Syndrome (SARS) outbreak lasted about six months and was first found in Asia (2003). This disease spread to about 25 countries around the globe, and was ultimately halted in July of 2003. The first case was reported in the Guangdong province, in southern China and was thought of as a typical pneumonia. The first communication to the world on the issue was brought about by the WHO in March. They informed the public of the complications of the disease through a global alert, despite the virus' unknown origin.

In the US the CDC set a goal for spreading relevant and accurate information on the issue. They hosted a media telebriefing, about the SARS virus. The CDC then issued “interim

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guidelines for state and local health departments on SARS and 'Health Alert Notice' for travelers to the United States from Hong Kong, Guangdong Province (China)" (CDC). Then, they issued domestic guidelines and integrated pandemic planning for SARS to better be prepared to inform the public.

However, China's response, in the nation where the novel coronavirus had begun, was slightly different. John Nkengasong argues that China's response caused "the deaths of 774 people, spread of the disease to 37 countries and an economic loss of over US \$40 billion over a period of 6 months" (Nkengasong). The government was accused of covering up the disease from the domestic and international public, and had relatively minimal procedures in place to handle the epidemic and to inform the public. Reuters says that "the silence on the part of authorities during the early stages of SARS helped create a rumor mill that sparked panic in several major cities and brought the economy to a standstill" (Stanway). The lack of information disclosed was responsible for health and economic disaster. China learned from this virus, which clearly highlighted the weaknesses of China's disease control system. However, once the outbreak ended, the government prioritized the strengthening of their control systems, improving public-health surveillance and laboratory systems, as well as the workforce-development program, through the Field Epidemiology Training Program (Nkengasong).

## Swine Flu Pandemic: (2009)

In the spring of 2009, an outbreak of a new strain of the already known virus "influenza" emerged, spreading instantly around the globe. The new virus, now known as the Swine flu, carried unique and new combinations of genes that were never seen before, and received the name of H1N1 (CDC). The Swine flu overhauled numerous countries creating a dangerous and frightful world, and it is estimated that it killed an estimated amount of 280,000 people. According to the National Public Radio, the problem was that: "while thousands of concerned and misinformed individuals took to Twitter to ventilate their fears, the government and its agencies were still painfully missing from the social media space" (Morozov). The US government officials acknowledged the problem and responded with clear and accurate information to the country, with advice on specific websites (CSIS Editors). The H1N1 Influenza pandemic was a field of misinformation and unsubstantiated news articles, where, according to the New York Times, the government eventually defeated the misinformation providing a sense of security throughout the nation (CSIS Editors).

## COVID-19 Pandemic

In late December 2019, the world was introduced to a virus which was first found in Wuhan City, China, and was named SARS-CoV-2. According to the World Health Organization, symptoms of this disease can include fever, cough and shortness of breath. In severe cases, infection can cause pneumonia or breathing difficulties, and sometimes the disease can even be fatal. These symptoms are similar to those of the flu (influenza) or the common cold (Wright,

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C.). This disease is highly contagious, since this virus is passed on through direct contact of respiratory droplets from an infected person (World Health Organization). With this in mind, the disease was not well addressed during its early stages, and due to lack of information and miscommunication between the healthcare authorities and the people, the disease is now a problem all over the world.

Since the beginning of 2020 people have been bombarded with all types of information on the issue; both accurate, but more relevantly inaccurate information. These fake news that is being spread impacts the measures that people take to try and prevent the spread of the virus, and protect their own health (Wright, C.) The belief of inaccurate information is extremely harmful since it can lead them to stop following the measures recommended by the CDC and other health authorities. It is clear and evident that if miscommunication keeps going on, more people will get infected and continue to spread this deadly virus.

## Past UN Actions

Despite all the rumors, fake news, and inaccurate messages, the UN has been working on spreading authentic information (The Department of Global Communications). The alarming increase in fictitious news has led the UN to make a public statement. According to the United Nations news, "throughout the pandemic, the UN chief has highlighted the need to fight the tide of harmful health advice, hate speech, and wild conspiracy theories that has surfaced alongside COVID-19" (UN News). Furthermore, UN Secretary-General António Guterres also pronounced, "in a video message for the [WHO side event] [...] how the COVID-19 pandemic is also a communications emergency" (UN News). Consequently, there is an urgent need for countries to address the "infodemic" and validate all information; as an absence of trust and credibility in doctors and professionals has been created.

Moreover, some media outlets often present information which highlights the negativity creating fear and uncertainty minimizing hope and optimism. Therefore, the WHO has established a rapid response team named Information Network for Epidemics (EPI-WIN) to "produce and disseminate facts and accurate information" (DGC). The WHO, alongside the UN, has taken precautionary measures to ensure information to governments is accurate in order to dispel rumors and misinformation (The Department of Global Communications). Throughout the pandemic, the United Nations Educational, Scientific, and Cultural Organization (UNESCO) has been working with the International Center for Journalists (ICFJ) to combat this "infodemic". The close relationship has provided the guarantee of accurate health information to reach all communities worldwide (The Department of Global Communications).

The actions to mitigate the spread of misinformation during the current pandemic are largely correlated with the Ebola communication crisis of 2014. United Nations officials such as Dr. Margaret Chan, Director-General of the WHO, Dr. David Nabarro, the Senior United Nations System Coordinator for Ebola, and Anthony Lake, Executive Director of the UN Children's Fund (UNICEF), at that time, actively attempted to communicate that Ebola needed a response that was based on "scientific evidence, not on fear" (World Health Organization 1).

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Nevertheless, users in social media platforms such as Twitter and Facebook created rumor cascades that created unnecessary outrage within the public and blocked essential announcements needed by officials to effectively deal with the Ebola epidemic. In addition, despite the small number of cases outside the African continent, users from western nations were the ones that displayed the largest wave of “widespread fear and media attention” (Sell 9). For that reason, as mentioned, when the “infodemic” occurred at the start of the coronavirus pandemic, the UN dealt with it quickly by stepping up in communications efforts and setting an agenda against cybercrimes that could harm public health.

To this day, there is a continuation of the UN’s support for long-term solutions that are not just laid out for the current Covid pandemic, but also the future where fake news is projected to become more prevalent with the rise of digital media. One of these plans includes the endorsement and subsequent support of The Pause campaign. This initiative was launched through Verified, a UN platform that seeks to provide accurate information, in order to represent stories from all around the world that are completely objective, rather than subjective. In fact, it is the first media effort on “misinformation to mobilize experts and researchers, governments, influencers, civil society, businesses, regulators” (UN 2). It has been largely successful, trending the hashtag #Pledge Pause and pushing the idea that people on social media need to have more media literacy.

Moreover, the WHO has partnered with WhatsApp and Facebook to create messaging systems in a multitude of different languages that serve mainly as a guide to spread vital information about COVID-19 to the international community, as well as give access to the UN so they are able to directly contact people. This ties in with the Rakuten Viber interactive chatbot, which is a messaging tool that lets its users take informational quizzes and receive notifications based on the pandemic to increase knowledge about the issue. It targets the demographics of the population that remain uneducated on the problem. This, paired with the current plan, can “potentially reach over 1 billion people”, which is a significant improvement in interactions in comparison to other initiatives that have taken action in the past (WHO 2). According to the International Telecommunication Union (ITU) and UNICEF, they will enforce this more in underprivileged areas, who might not have the resources to connect with the “interactive chatbot” so that they can “gain the data needed to be safe”. Ultimately, it will go through telecommunication companies’ routers that will provide low-income individuals with text messages that do not need the internet or any other expensive web connection.

## IV. Key Players and Points of View

### United States

As one of the largest countries in the world, the United States is a common victim to misinformation, especially regarding illnesses. As previously mentioned, many patients refuse treatment because of their lack of knowledge and how vulnerable they are to online fabrications (American Heart Association, 2019). Others do not know what to believe because of the controversial opinions that exist around them. These opinions might include vaccines,

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medicines, and treatments regarding certain illnesses. To counteract the effects of false information, in 2016, the Senate passed the “Countering Foreign Propaganda and Disinformation Act” as part of the “National Defense Authorization Act” (Congress, 2015). This bill was aimed towards slowing down the spread of international misinformation that could affect the country’s democracy. Although there were already laws that prevented the spread of foreign misinformation, a variety of bills and laws were passed after the 2016 elections. This was the result of intelligence agencies confirming that Russia had meddled in the elections by spreading false information on social media. This is why in October 2017, Congress announced a bill that required online platforms to “keep copies of ads, make them public and keep tabs on who is paying — and how much” (Funke & Flamini, 2019).

The 2020 COVID pandemic has been defined by a wave of misinformation to the public on everything from the utility of masks to social distancing, and even the promise of untested remedies that could result in death. According to the National Bureau of Economic Research, many media outlets “downplayed the severity of the pandemic [and] saw greater numbers of cases and deaths—because people didn’t follow public health precautions” (Bagherpour & Nouri, 2020). In the United States, misinformation is spread by the general media, public leaders, and individuals with a large influence on all platforms. The government has limited itself to counteract this misinformation and causing millions of deaths which will continue unless action is taken.

## Russia

Russia has passed a series of bills that ban the spread of “unreliable socially-important information” that could “endanger lives and public health, raise the threat of massive violation of public security and order or impede functioning of transport and social infrastructure, energy and communication facilities and banks” (Funke & Flamini, 2019). However, the legislation exempts mainstream news organizations like newspapers and TV stations. Online outlets that are found to be in violation of the bill would be charged up to \$5,000 in fines and 15 days in jail for repeat offenders. The bill faced backlash from a group of Russian free speech and internet activists who protested the bill in March 2019. This is the latest expression of public concern in the country over the constraints on the internet. In May 2019, Russia’s media regulator was planning to launch a database that flagged different sites as ‘fake’. If those sites did not delete their offensive or erroneous content, they would be blocked legally. The same regulator also ordered sites to delete content that shows ‘blatant disrespect’ toward the authorities. The regulatory agency has already successfully “blocked LinkedIn in Russia” (The Moscow Times, 2019). In April 2019, 8,000 people protested when authorities tried to block the public’s access to telegram, a messaging app. The communist party argued that the bill would “give more independence to the Russian segment of the internet and help guard the country against potential cyberattacks” (Stanglin, 2019).

In July 2018, the New York Times reported that the legislation, which lawmakers from the United Russia party submitted mid-July, would hold social networks accountable for

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inaccurate comments that users post. Social Media networks that have more than 100,000 visitors a day would be required for “social media companies 24 hours to delete ‘inaccurate’ information after being notified of its existence [...] or face a fine of up to 50 million rubles, about \$800,000”(Pigman, 2020). Social media Platforms were against the bill since it was unrealistic that social media platforms would be able to “weed out every false comment on a daily basis” (Funke & Flamini, 2019).By limiting some of the websites available, there is a smaller chance that people will spread medical information that could harm or damage people’s health and wellbeing.

## China

China's media environment is tightly controlled and focuses on controlling online rumors that are not politically sensitive or even true. Although the spread of fake health news happens all around the world, in China, there has been a misleading of public opinion, weakening the credibility of the media, and creating negative emotions amongst Chinese citizens, during the past 20 years (Jiang).

The abnormal amount of competition that exists between publishing agencies is one of the major reasons there is a large amount of fake news that is being spread all around China. Their rivalry originates from the lies and scandals in order to get more people to view their headlines of what they are publishing, the more people see it the more their brand will stand out (Jiang). Also, another explanation for this issue is the lack of legal knowledge among Chinese media outlets. Especially local news publishers who do not have a strong knowledge of the laws and policies of the state, and who misinterpret or misunderstand relevant policies unilaterally. Lastly, and one of the major reasons for this issue is trying to hook their reader's attention in order to attain their curiosity, this will cause more readers and their speed of their news (Jiang).

Now focusing on recent events, as the starting point in the COVID-19 pandemic, China has been one of the most influential countries in spreading fake news around the world (Branigan). Through the course of the pandemic there have been many fake statements from China, such as the number of cases and deaths during the early stages of the virus, alarming the world and endangering people worldwide.

## Brazil

As Covid-19 continues to be an issue worldwide, Brazil cases continue to rise alongside the spreading of fake news. Recently, a situation occurred in the northeastern state of Cear where a story was shared through social media and quickly became viral. The message stated that Brazilian officials were burying empty caskets to exaggerate the scale of the pandemic; the information was then determined to be false and it was taken down (Harris). The intentions behind the post were to instil fear, distrust, and uncertainty among the brazilian citizens, to an extent where even families were separated, as there was a division in perspectives (Uchoa).

Unlike other leaders, Brazil's President has taken a clear stand against what the WHO encourages, placing Brazil in 3rd place worldwide, with the most cases of Covid-19, and in 2nd



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place with the most deaths. The political orbit in Brazil has gained power during the pandemic, according to Heinrich Boll Stiftung, “everything becomes a war of narratives, with people trying to convince one another of their existing point of view, says Gilberto Scofield, Jr” (Costa). A study conducted by Avaaz in Brazil, alongside other countries, found that 73 percent of Brazilians that were surveyed believed at least one false story they read in relation to the pandemic (Costa). This indicates the current status of Brazil's misinformation spread, emphasizing the obstacle it has been in regards to containing the virus. There was news in early July that the Brazilian Senate passed a proposal that would force social media groups to ban fake accounts (Costa). However, the bill has brought up conflict in regards to freedom of speech and government surveillance. The scarcity of communication and agreement has led Brazil to report thousands of dead individuals. In the absence of government guidance and transparency, Brazilian citizens have led themselves through this pandemic alone since there is still an urge for government officials to fight this "infodemic" alongside the citizens.

## South Korea

South Korea has been internationally praised for its swiftness in responding to health crises, and its determination to get accurate information to its people in order to ensure public safety. As Collin Marshal explains, even from the time of the very first death, “several times a day, each and every cell phone buzzes with national emergency-alert-system announcements of new confirmed cases. This number reflects an apparent stabilization of the virus’s spread and owes in part to the rapid establishment of testing facilities across the country” (Marshall).

However, South Korea has also been criticized for being too aggressive in their strategies, without being mindful of personal liberties and identity politics. All throughout the crisis, various sources, such as PR Newswire, inform that “many who tested positive for the virus had their identities publicly made known, exposing them to shame and putting them at risk of discrimination and harassment” (UnPresidential). Many argue that although the disclosing of information to the public on who exactly had been exposed to the virus could be helpful to public safety, its consequences far outweigh any hazards the action might prevent. Another challenge South Korea has faced is a struggle to reduce misinformation, particularly from right-wing groups that spread baseless conspiracies that target the government, the validity and existence of the virus, and the measures that have been taken to contain it. Additionally, some christian churches have posed challenges to the government and its implementation of successful policies to reduce the virus’ spread. Many churchgoers have felt angered to be denied access to their Sunday place of worship, but that is where many new cases were identified during the time of the largest outbreaks. BBC says that one of the biggest concerns the government has identified in its containment efforts are “far-right worshippers who are potentially infected believe the virus was planted as part of a conspiracy to close it down” (Bicker). Therefore, these church-members protested for lockdown measures to be stripped, and were one of the most significant challenges in enticing trust in public institutions. This mistrust and misinformation was detrimental for the possibility of quickly getting spread-zones under control.

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## V. Possible Solutions

It is hard to break a constant cycle of fake news and come up with reasonable solutions that will solve this issue. First and foremost, there must be a noticeable improvement in the system of accountability. Publishing agencies should be held accountable for the information that they release to the public, especially for situations which endanger large numbers of people, being responsible towards society, and must bear the corresponding legal responsibility (Jiang). This will push publishing agencies to be more clear and realistic in the things and types of health news that they publish. Secondly, printing agencies need to improve the applicable development standards and regulations regarding news publication—they need to ensure a system of authorizing the factual nature of their sources (Jiang). Lastly, micro-blogs online should use the real name system and it should include the editor and publisher name note like the paper news (Branigan).

Moreover, companies like Facebook have begun to censor and revise some of their content that brings up misleading or false information, especially in a political and social atmosphere. The company claims that its goal in developing tools, like a warning and an information page, is so that when one shares or views a link that has information about the coronavirus on it, the page will in turn “help people understand the recency and source of the content before they share it”, as well as to direct “people to our COVID-19 Information Center to ensure people have access to credible information about COVID-19 from global health authorities” (Statt). The hub they have created serves as a center of carefully revised facts by experts, which is crucial when ensuring safe and accessible information for the public. Implementing strategies in social media companies to regularly monitor and distribute accurate and safe information is crucial when it pertains to public health and safety.

Governments must also ensure national and equitable access to crucial facts and notices in times of hardship and threats to the health of the nation. When the government fails to deliver widespread notices and even hides data, such as China has with the SARS and COVID, there exists a threat of domestic and foreign distrust to the institution in its entirety. Governments must work alongside doctors, experts, communication officials, and community members in order to make informed decisions on how to present the facts. Lastly, education is a long-lasting measure that will help citizens learn to be informed and take the best decisions possible, as well as to hear and understand experts and officials when they need to. Currently, there has been a growing trend of getting one's information from social media sites, and although it can be helpful to prevent the spread of these false news stories and alternative facts, building a nation that is well informed and literate is the best solution and preventative measure to misinformation.

## VI. Current Status

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Misinformation has and will continue to affect and endanger people's lives as well as public health as long as the current pandemic continues to be a worldwide issue. The spread of “fake news” is at an unprecedented rate and is reaching wider audiences due to social media. Recently, Facebook reported that around 50 million posts, regarding COVID-19, had to be flagged with a label of disinformation; furthermore close to 18 million emails were blocked by Google because they contained coronavirus scamming information (UNESCO).

Additionally, along with social media platforms, medical agencies have had to oversee the publishing of millions of scientific studies that have “doubled in number every 11 years” (Gibbens 2). It is evident that with the steady increase of the “infodemic” there has been a need for more precautions by larger cyber networks and organizations, especially on the climax of one the most consequential worldwide health crisis in history. Fortunately, as of recently, the international community is effectively pushing for complete closure to any sources that promote contradictory stories or conspiracy theories that instigate public outrage. Moreover, the United Nations Interregional Crime and Justice Research Institute (UNICRI), among other reliable institutions, “identified several instruments to debunk disinformation and misinformation” that could successfully tackle disinformation about the virus and “[exploitative] algorithms” (UNICRI 11). Furthermore, companies, such as Facebook, Google, and Twitter, have proceeded to make an effort to tackle this problem alongside a coalition of governments such as Canada and the UK. The group formed by the British charity, Full Fact, will “aim to set cross-platform standards for tackling misinformation – as well as how to hold organisations accountable for their failure to do so.” (The Guardian).

Even so, the battle against misinformation continues as governments try to spread accurate information. Regardless of the virus, misinformation about common things such as medicine and other diseases is also prevalent in today’s media. With apps such as Facebook, Instagram, and Twitter, fake information can spread and go viral rapidly (Ullrich Ecker, 2012). Therefore, countries must still find solutions for this long-lasting issue, in hope of diminishing its effects, as its consequences continue to affect millions of people, with social media reaching a bigger percentage of the population each day. This is why it is imperative that the spread of fake news is controlled and accurate medical information is shared amongst all nations.

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