

Navigating Health Misinformation in a Digital Age

Earlier this year, we joined partners in launching the Engaging Citizens in Honest Opinion ([ECHO](#)) project. This timely initiative addresses misinformation and disinformation in the European Union across a wide range of sectors, including health, education and the media. Within [ECHO](#), HAI focuses on the health domain. Since May, we have collected data from 110 healthcare workers across 23 EU countries, to better understand their exposure, capacity and needs to address mis- and disinformation.

Healthcare workers are traditionally seen as the link between health institutions and the public, entrusted to convey scientific information and guidance and support positive health outcomes. However, digital media and technology have changed the way that information, including health information, is produced, spread, and communicated.

Both the public and healthcare workers are increasingly exposed to health information from digital sources like social media and artificial intelligence platforms. Although sometimes beneficial, these platforms can be untransparent, incomplete, or misused by profit-or influence-driven groups. Combined with decreased trust in institutions, and a shift towards personalisation, health care delivery is taking a very different shape.

This raises the question of how healthcare workers' roles are changing, and how they can contribute to identifying mis/disinformation and supporting healthy information environments.

Our research has uncovered seven key findings about healthcare workers' experiences and support needed to address mis/disinformation:

- 1. Healthcare workers reported higher risk and exposure to patient-presented mis/disinformation than mis/disinformation uncovered otherwise**

Healthcare workers perceive their exposure to mis/disinformation through patient presentation as being more frequent and potentially harmful than situations where they uncover mis/disinformation themselves.

- 2. No one population group was perceived to be significantly more vulnerable than another to the impacts of mis/disinformation.**

When asked about population groups that refer to mis/disinformation more frequently, healthcare workers reported a variety of vulnerable groups. That said,

no one group was reported by a majority of healthcare workers.

3. Among identifiable sources, social media was most frequently associated with mis/disinformation, compared with sources such as AI-generated content and traditional media.

Most healthcare workers see social media as a high-risk source for mis/disinformation. However, when asked an open question about experiences with mis/disinformation at work, very few pointed to a specific source where the mis/disinformation came from.

4. Confidence was higher in engaging with patients about mis-/disinformation than identifying it, except in public forums where confidence was lower

Compared to identifying mis/disinformation, healthcare workers reported high levels of confidence in engaging with patients around mis/disinformation. However, confidence in public engagement about mis/disinformation was lowest of all the skills surveyed.

5. Reported approaches to managing mis-/disinformation were limited, with a strong reliance on providing or explaining health information

When asked to describe situations in which they managed mis/disinformation with patients or at work otherwise, very few could report specific strategies. Of those that did name specific strategies, most reported that their approach was to explain or educate patients on the medical evidence.

6. Motivation is high, but resources and support to address mis/disinformation are lacking.

Most healthcare workers responding to the survey felt motivated to address mis-disinformation in their interactions with patients/clients. However, very few actually had access to training materials or support through their work or school.

7. Healthcare workers prefer a combination of self-paced online learning as well as in-person practice with colleagues.

Respondents' preferred way to learn new professional skills was short-online modules as well as in-person workshops with colleagues, along with other support.

What's next and how can you get involved?

Based on the insights laid out above, HAI is developing training materials for healthcare workers, to support them in navigating the spread and impact of mis/disinformation. Over the coming months, we will be holding a series of multistakeholder workshops to explore these findings and discuss implications for

the training materials.

If you'd like to learn more about this work, please contact Emma Shiffman (emma@haiweb.org).