University of Zurich[UZH]
Institute of Biomedical Ethics
and History of Medicine

Swiss TPH
Swiss Tropical and Public Health Institute
Schweizerisches Tropen- und Public Health-Institut

What happens during a public health crisis?

Public:
- What is this? Why is it happening?
- Lots of information become available at the same time. Is it all good?
- Who do I trust?
- How can I filter out non relevant or information?
- ...

Policy makers:
- Choices need to be made. Sometimes hard choices.
- What do people think? How do they behave?
- Are they willing to accept this or that measure?
- Which specific subset of the population is facing the hardest time?
- How do we prioritize interventions?
- ...

There is no “one size fits all” approach

PubliCo is supported by:

World Health Organization

Collegium Helveticum

FNSNF
Fonds national suisse
Schweizerischer Nationalfonds
Fondo nazionale svizzero
Swiss National Science Foundation

Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra
Swiss Confederation

Federal Department of Economic Affairs, Education and Research EAER
State Secretariat for Education, Research and Innovation SERI

Index

Welcome	**Welcome of the Collegium Helveticum, jointly supported by the University of Zurich, ETH Zurich and Zurich University of the Arts.**	**Christian Ritter (Collegium Helveticum)**
Introduction	From infodemics and their impact on societies (in different fields) to strategies for solutions	Beat Glogger (scitec-media)
The need	The infodemic in the context of the COVID-19 crisis, how it impacts people and societies; the need for better ways to inform people and to understand their needs	Tim Nguyen (WHO, health emergencies programme)
The idea	Core idea of PubliCo: quantitative and qualitative tools to listen to people and to provide personalized information	Nikola Biller-Andorno (IBME) / Sonja Merten (SwissTPH)
The strategy	The long way from “it would be nice to have” to “that’s how we’re gonna do it”	Giovanni Spitale (IBME)
The structure	Design process, how to translate ideas into things. Focus on privacy and lean code, easy to deploy even in low tech settings	Giulio Michelon (Belka)
Citizen science	What is citizen science, why it is important to involve citizens as active actors in science, how this was important in PubliCo’s development (ProjectBuilder)	Rosy Mondardini (Citizen Science Centre Zurich)
WHO White paper	Sharing techniques and experiences to infom others.	Kristen Jafflin (SwissTPH)
Future	PubliCo is more than a COVID-19 response tool. Its modularity allows to develop and store different preset modular surveys to be deployed when needed – eg earthquake, flood, biological risk and so on. Also, we will do our best to deploy and test it also in other context than Switzerland, including EU countries but also LMIC. We easily imagine 5-10 years of research in this sense.	Nikola Biller-Andorno (IBME) / Sonja Merten (SwissTPH)
Demo	Demonstration of how the tool works	Samuel Giacomelli (Belka)
Open discussion		

Publi Co

together through the crisis

1. Introduction

Beat Glogger (scitec-media)

2. The need

Tim Nguyen (WHO, health emergencies programme)

The infodemic in the context of the COVID-19 crisis, how it impacts people and societies; the need for better ways to inform people and to understand their needs

Tim Nguyen
World Health Organization

World Health Organization | EPI•WiN | infodemic MANAGEMENT

An infodemic is accompanying the pandemic

- **An infodemic is an overabundance of information** – good or bad – that makes it difficult for people to make decisions for their health
- **Misinformation**[1], **disinformation**[2] and **fake news can cause real harm** to health, public trust, social cohesion and emergency response

[1] inaccurate information
[2] false or inaccurate information intended to mislead

We're not just fighting an epidemic; we're fighting an infodemic. Fake news spreads faster and more easily than this virus, and is just as dangerous.

Tedros Adhanom Ghebreyesus
Director-General, World Health Organization

The COVID-19 infodemic can harm health

- The infodemic can lead to confusion, risk-taking and harmful behaviours
- In some countries, misinformation has generated mistrust in governments, public health authorities and science

Methanol poisoning in Iran

Approximately:

- **700 people have died**
- **5,011 have been hospitalized and**
- **90 have developed blindness or eyesight damage**

after drinking methanol as a "cure" for coronavirus

Photo credits:
https://www.aljazeera.com/news/2020/04/iran-700-dead-drinking-alcohol-cure-coronavirus-200427163529629.html; https://www.sciencemag.org/news/2020/05/unproven-herbal-remedy-against-covid-19-could-fuel-drug-resistant-malaria-scientists; https://www.cnn.com/us/live-news/us-coronavirus-update-04-24-20/h_d3b4da7f4ba4054207abe4cf783b10f4

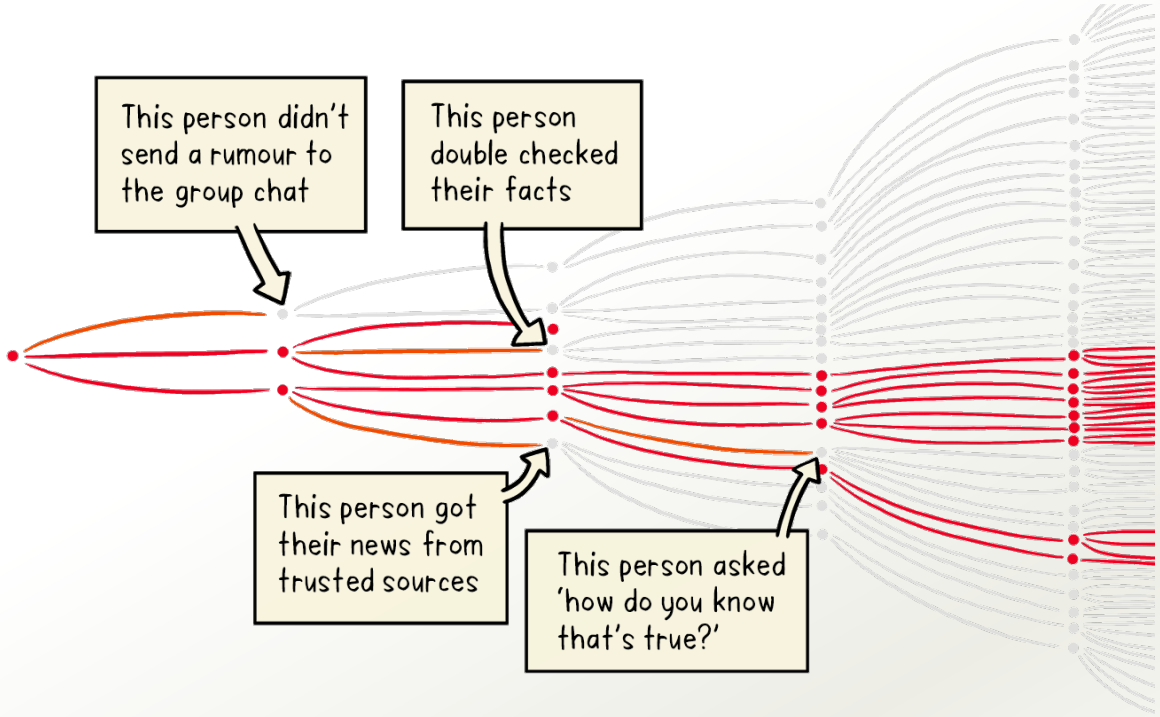
Technology has changed the way information is produced, distributed and consumed

vs.

- Infodemics thrive in the virtual space
- Managing the infodemic has become more challenging with rapid spread of mis- and dis-information through social media
- Managing the infodemic is critical to managing the pandemic

World Health Organization | EPI•WiN | infodemic MANAGEMENT

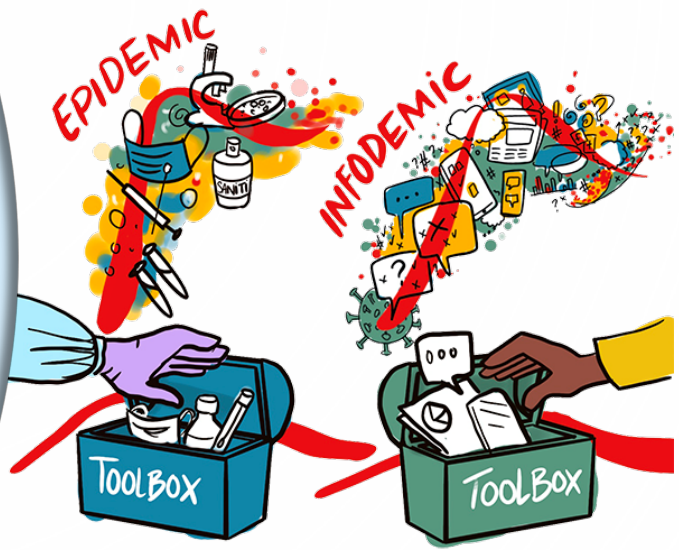
How people receive, process and act on information varies



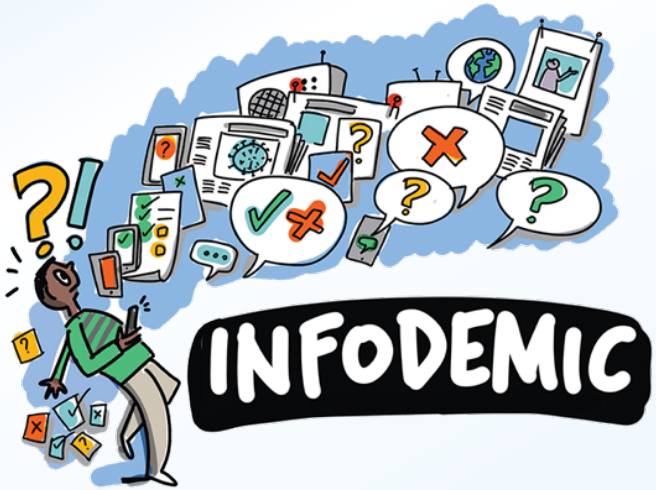
Understanding how information originates, evolves and spreads on different platforms and channels is key to managing the infodemic

The right information at the right time, in the right format

- While it is not possible to completely eliminate, **it *is* possible to manage the infodemic**
- Infodemic management aims to ensure people have **access to factual information in a timely manner that is easily understood**; so they may rapidly adopt behaviours to protect health and the health of others during an epidemic
- Infodemic management must :
  - Be backed up by science
  - Rely on evidence-based interventions
  - Make use of best practices, including sharing experiences and continuous learning



Infodemic management interventions aim to influence health behaviour during epidemics



Infodemic interventions

1. LISTEN TO CONCERNS
2. TRANSLATE SCIENCE & COMMUNICATE RISK
3. PROMOTE RESILIENCE TO MISINFORMATION
4. ENGAGE & EMPOWER COMMUNITIES

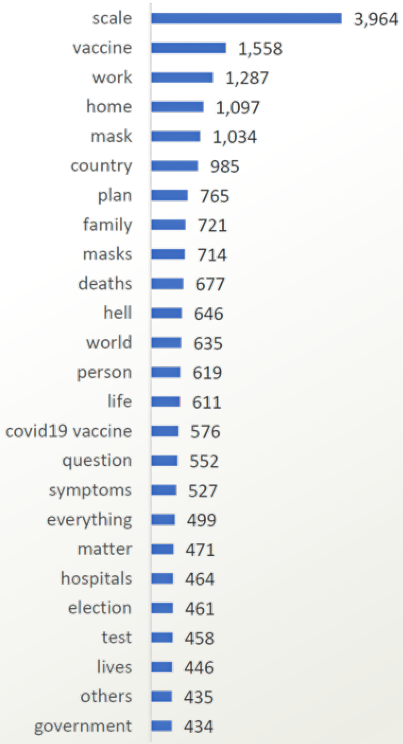
Quantifying information through social listening

WHO uses a digital listening approach which analyses and quantifies information associated with COVID-19. For example, top keywords and topics are tracked in order to identify trends and help manage the infodemic.

Questions on COVID-19

(12 – 18 Nov 2020)

Top key words
(excluding 'COVID-19', 'coronavirus' and 'virus')



Top rising topics

(12 – 18 Nov 2020)

Based on % change of conversation volume from the previous week

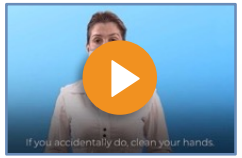
Translating science into protective measures

WHO video guidance on COVID-19

MASKS

Medical and fabric masks: who wears what when?

How to wear a fabric mask safely



How to wear a fabric mask

How to wear a medical mask

TRANSMISSION

How to break the chains of transmission

NEW!

Three factors help you make safer choices during COVID-19

PROTECTING OURSELVES

How to protect yourself against COVID-19

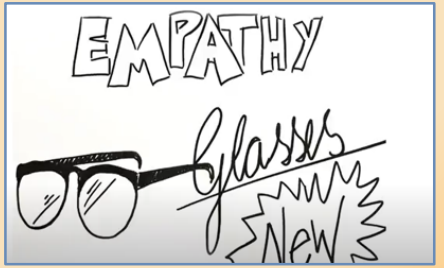
Seven steps to prevent the spread of the virus

Being resistant to misinformation requires an understanding of how information flows, but also understanding of cognition and behaviour

WHO works with communities to protect health during epidemics

- WHO EPI-WIN has established representative groups from key communities (faith-based, youth, employers and workers) who communicate regularly with WHO and give input on projects and initiatives. Examples:
  - **Co-development** of practical guidance on COVID-19 education, preparedness and response to support faith-based organizations and faith communities
  - **Collaborating** with young people to design creative, engaging and relevant communication around 'reducing transmission of COVID-19'
  - **Facilitating** a virtual dialogue series together with leaders and representatives from the World of Work
- Since the beginning of the pandemic, WHO EPI-WIN has hosted **80 COVID-19 related webinars** with **participants from 149 countries**

Examples of youth entries for 'Reducing transmission' Design Lab



Working together to support public health

- Launched in June 2020, the Collective Service is a partnership between the *International Federation of Red Cross and Red Crescent Societies (**IFRC**)*, the *United Nations Children's Fund (**UNICEF**)* and the *World Health Organization (**WHO**)*. The Collective Service leverages active support from the Global Outbreak Alert and Response Network (**GOARN**) and key stakeholders from the public health and humanitarian sectors.

- The **Collective Service** works on **risk communication and community engagement (RCCE)** to ensure consistent, systematic and predictable support to partners involved in public health, humanitarian and development responses to the pandemic

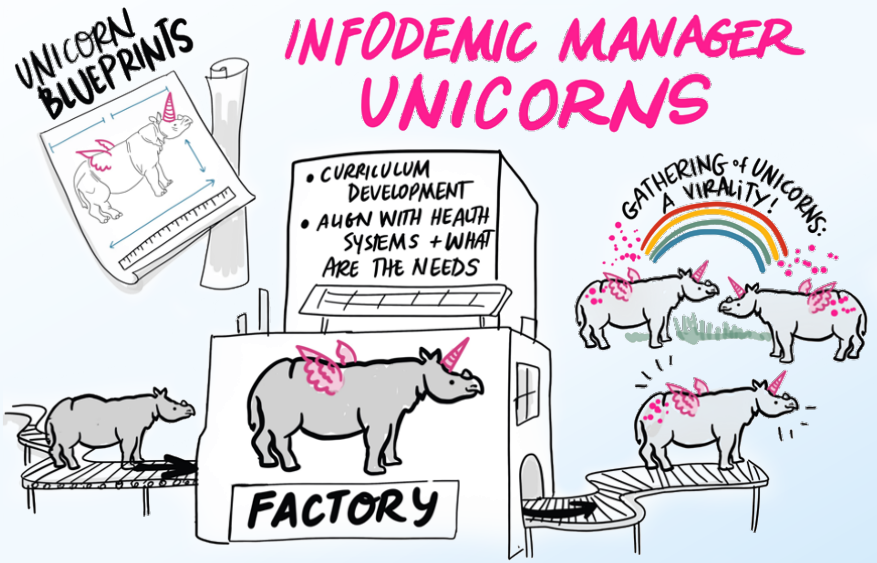
Infodemiology: the science behind infodemic management

Infodemic management is an evolving area of research and practice

- **How do overwhelming amounts of information** affect behaviour in emergencies and what interventions are effective in addressing it
- **How does online behaviour** affect offline action
- **How does misinformation** affect cognition and influence seeking health services
- **Role of policy interventions** to successfully address and mitigate health misinformation
- **How misinformation** affects unnetworked or closed networks and vulnerable populations

First global WHO infodemic manager training completed on 26 November 2020

- **278 participants from 75 countries**
- Various *lectures by infodemic management specialists* on topics such as:
  - *Tools for analysis of the infodemic*
  - *Public health and epidemiology in context of infodemic response*
  - Risk communication and community engagement



Resources on infodemic management

WHO RESOURCES

- **Infodemic management**
  WHO infodemic management work and activities
  https://www.who.int/teams/risk-communication/infodemic-management

- **EPI-WIN updates**
  An archive of COVID-19 related weekly updates
  https://www.who.int/teams/risk-communication/epi-win-updates

- **3rd Virtual Global WHO Infodemic Management Conference**
  Whole-of-society challenges and solutions to respond to infodemics
  https://www.who.int/teams/risk-communication/infodemic-management/3rd-virtual-global-who-infodemic-management-conference

OTHER RESOURCES

- **Sending SMS messages for the general public for COVID-19 response**
  WHO, ITU and UNICEF are collaborating to facilitate sending short messages SMS to inform the general public about COVID-19
  https://www.itu.int/en/ITU-D/ICT-Applications/Pages/COVID-19-public-SMS.aspx

- **When old technology meets new: How UN Global Pulse is using radio and AI to leave no voice behind**
  UN Global Pulse can offer speech to text (radio) listening
  https://www.unglobalpulse.org/2019/04/when-old-technology-meets-new-how-un-global-pulse-is-using-radio-and-ai-to-leave-no-voice-behind/

- **UNESCO series on journalism education**
  UNESCO medio/journalist training
  https://en.unesco.org/unesco-series-on-journalism-education

UPCOMING EVENT

LIVE WEBINAR

3rd virtual global WHO Infodemic Management conference

Whole-of-society challenges & solutions to respond to infodemics

11 December 2020

8:00 EST / **14:00** CET / **20:00** ICT

#societyVSinfodemic

MORE INFO

REGISTER

World Health Organization | EPI•WiN | infodemic MANAGEMENT

www.who.int/epi-win

3. The idea

Nikola Biller-Andorno (IBME) / Sonja Merten (SwissTPH)

3. The idea

- Over the course of the current pandemic, citizens have been exposed to a range of prevention, containment and control measures, communicated by a diverse spectrum of media outlets.

- Information from different sources has an impact on citizens understanding, emotional responses, moral judgements, and behavioral dispositions.

- Not all communication content is equally reliable, and citizens vary in the information sources they can or choose to access.

3. The idea

- Providing high-quality information while actively dismantling myths is a key concern for national and global health authorities.

- At the same time: need to obtain an excellent grasp of public perception in order to allow for continuous adaptations and improvement of communication strategies as well as prevention, containment and control measures.

- Failure to communicate can result in irritation, loss of trust, and suboptimal adherence to public health policies.

3. The idea

- PubliCo is a new tool to provide bi-directional interaction between citizens and policy-makers for risk and crisis communication.
- PubliCo is participatory: Development, deployment and validation cycles are carried forward by an interdisciplinary research team, an expert committee and citizen scientists.
- PubliCo is open and transparent by design, strict data protection.
- PubliCo relies on both quantitative and qualitative data to provide a precise, timely and rich analysis of complex phenomena.

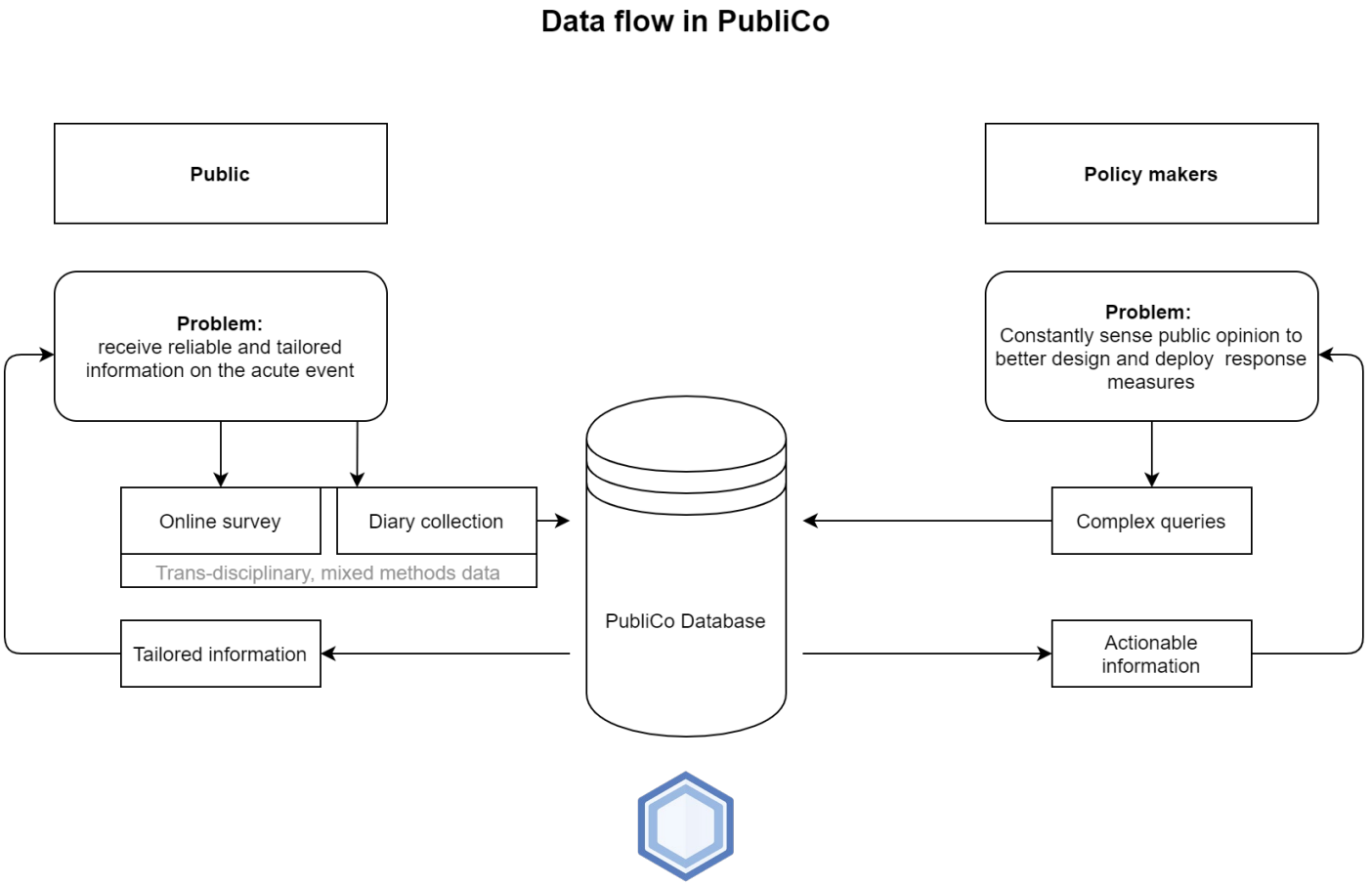
3. The idea

- PubliCo is flexible and allows the inclusion of qualitative data
- PubliCo offers a space to write a diary on everyday experiences during a crisis (anonymous)
- PubliCo diary narratives can add a perspective of people's concerns in real life
- Diary entries may highlight additional concerns, which can then trigger new analyses in PubliCo

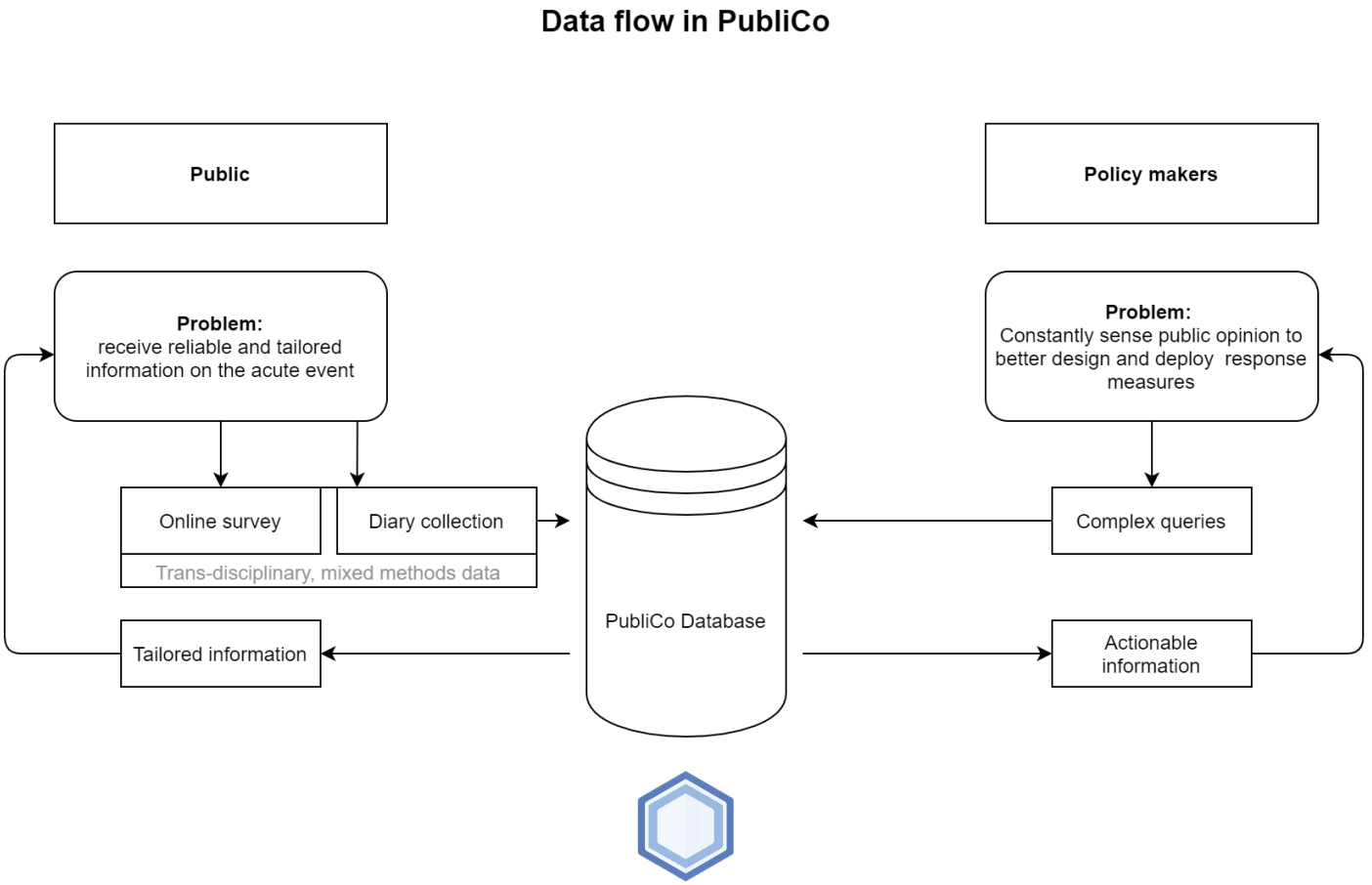
4. Strategy

Giovanni Spitale (IBME)

4. Strategy


Data flow in PubliCo
Public
Policy makers
Problem:
receive reliable and tailored information on the acute event
Problem:
Constantly sense public opinion to better design and deploy response measures
Online survey
Diary collection
Trans-disciplinary, mixed methods data
Complex queries
PubliCo Database
Tailored information
Actionable information

4. Strategy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4. Strategy

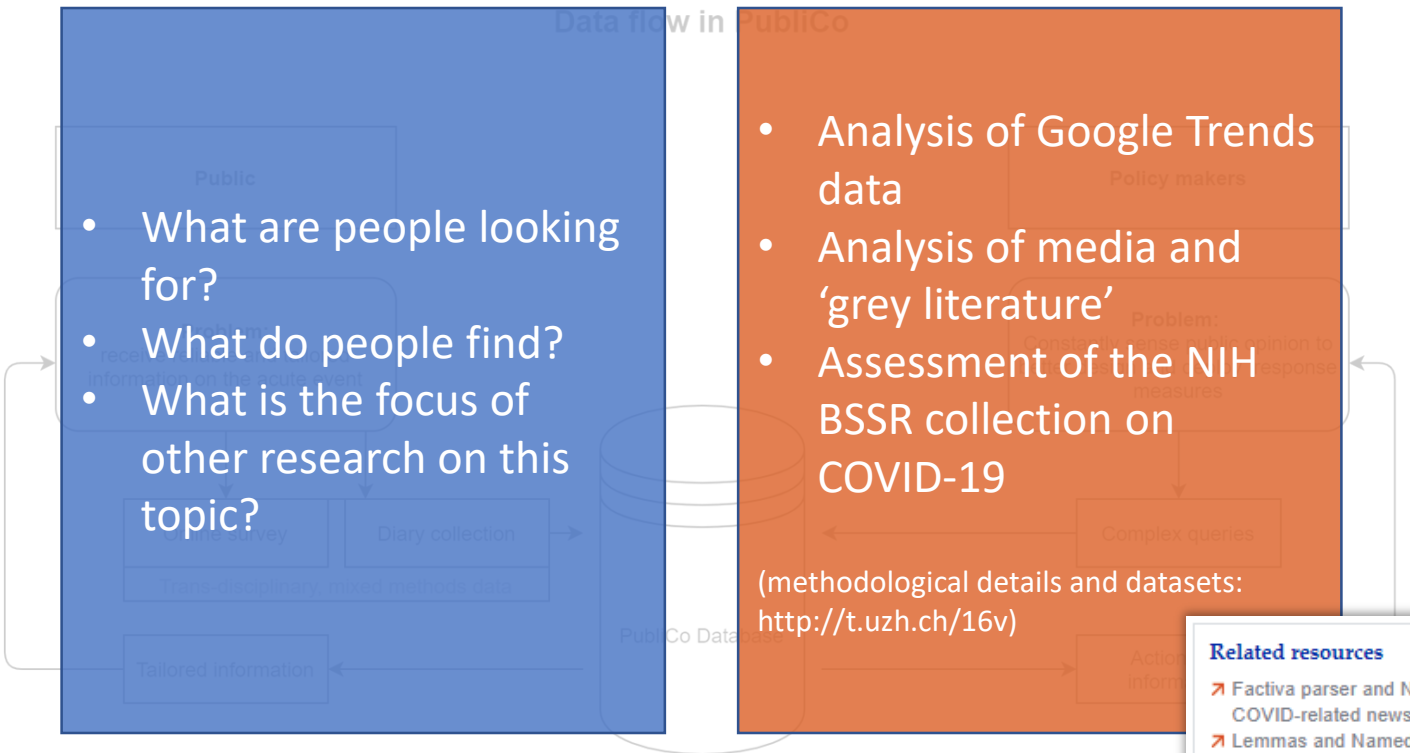
- What are people looking for?
- What do people find?
- What is the focus of other research on this topic?

4. Strategy

- What are people looking for?
- What do people find?
- What is the focus of other research on this topic?

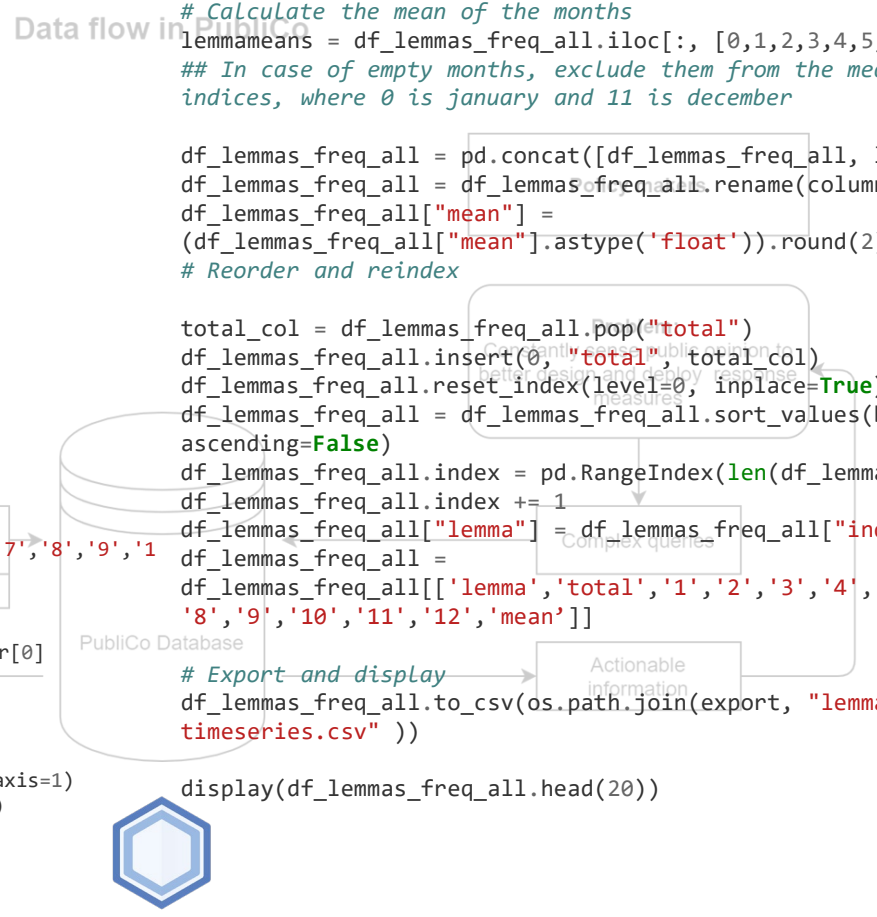
- Analysis of Google Trends data
- Analysis of media and ‘grey literature’
- Assessment of the NIH BSSR collection on COVID-19

(methodological details and datasets: http://t.uzh.ch/16v)



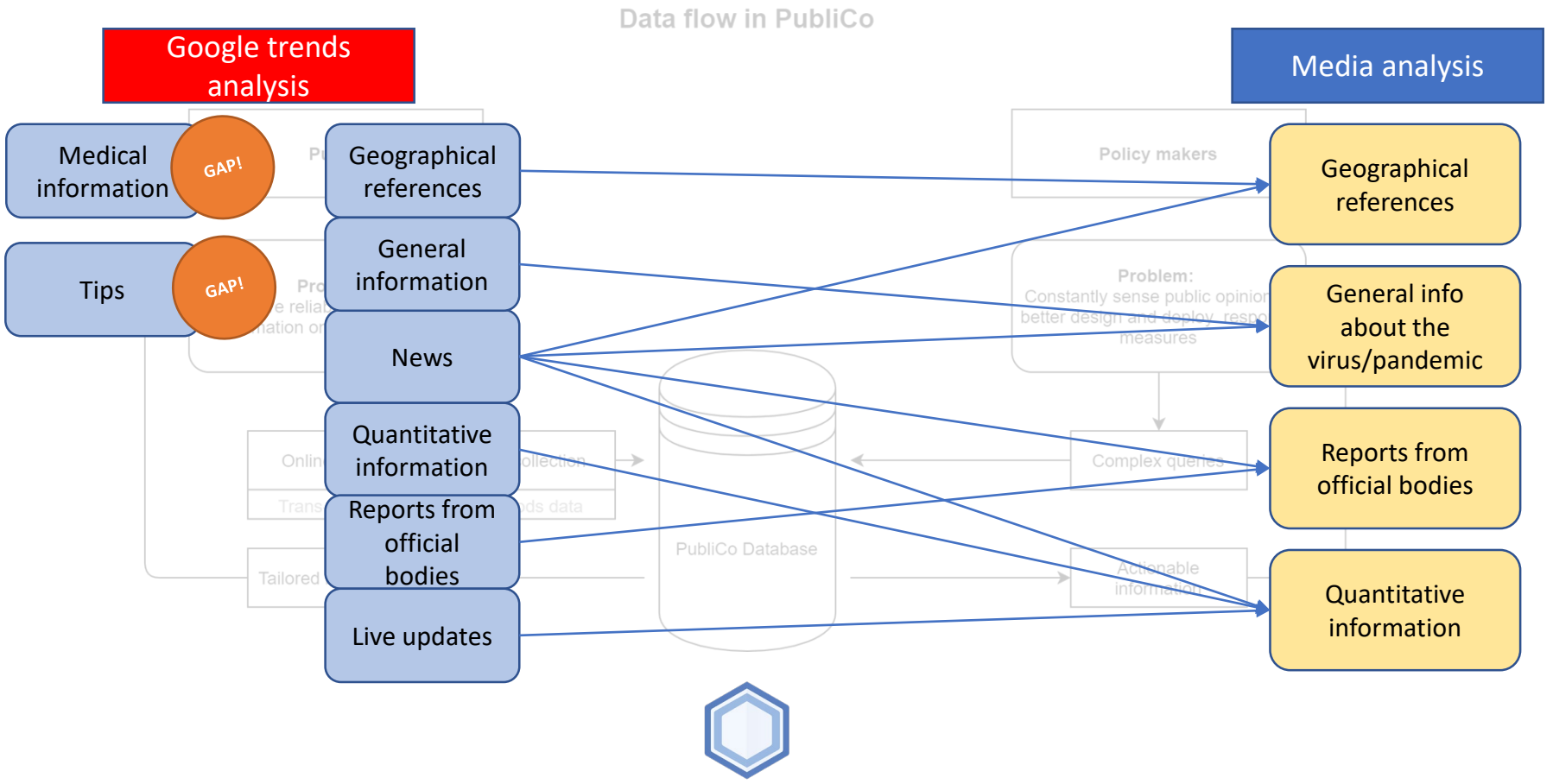
4. Strategy

```
# List of all lemma dataframes
df_lemmas_freq_all = [df_lemmas_freq_january,
                df_lemmas_freq_february,
                df_lemmas_freq_march,
                df_lemmas_freq_april,
                df_lemmas_freq_may,
                df_lemmas_freq_june,
                df_lemmas_freq_july,
                df_lemmas_freq_august,
                df_lemmas_freq_september,
                df_lemmas_freq_october,
                df_lemmas_freq_november,
                df_lemmas_freq_december]

# Loop for index and series
L = []
for x in df_lemmas_freq_all:
                x = x.set_index('Lemma’)
                L.append(pd.Series(x.values.tolist(), index=x.index))

# All together
df_lemmas_freq_all = pd.concat(L, axis=1, keys=('1','2','3','4','5','6','7','8','9','1
0','11','12'))
df_lemmas_freq_all = df_lemmas_freq_all.fillna('0')
for month in df_lemmas_freq_all:
                df_lemmas_freq_all[month] = df_lemmas_freq_all[month].str[0]

df_lemmas_freq_all = df_lemmas_freq_all.astype('int’)

# Calculate the total
lemmasums = df_lemmas_freq_all.iloc[:, [0,1,2,3,4,5,6,7,8,9,10,11]].sum(axis=1)
df_lemmas_freq_all = pd.concat([df_lemmas_freq_all, lemmasums], axis = 1)
df_lemmas_freq_all = df_lemmas_freq_all.rename(columns={0: "total"})
```

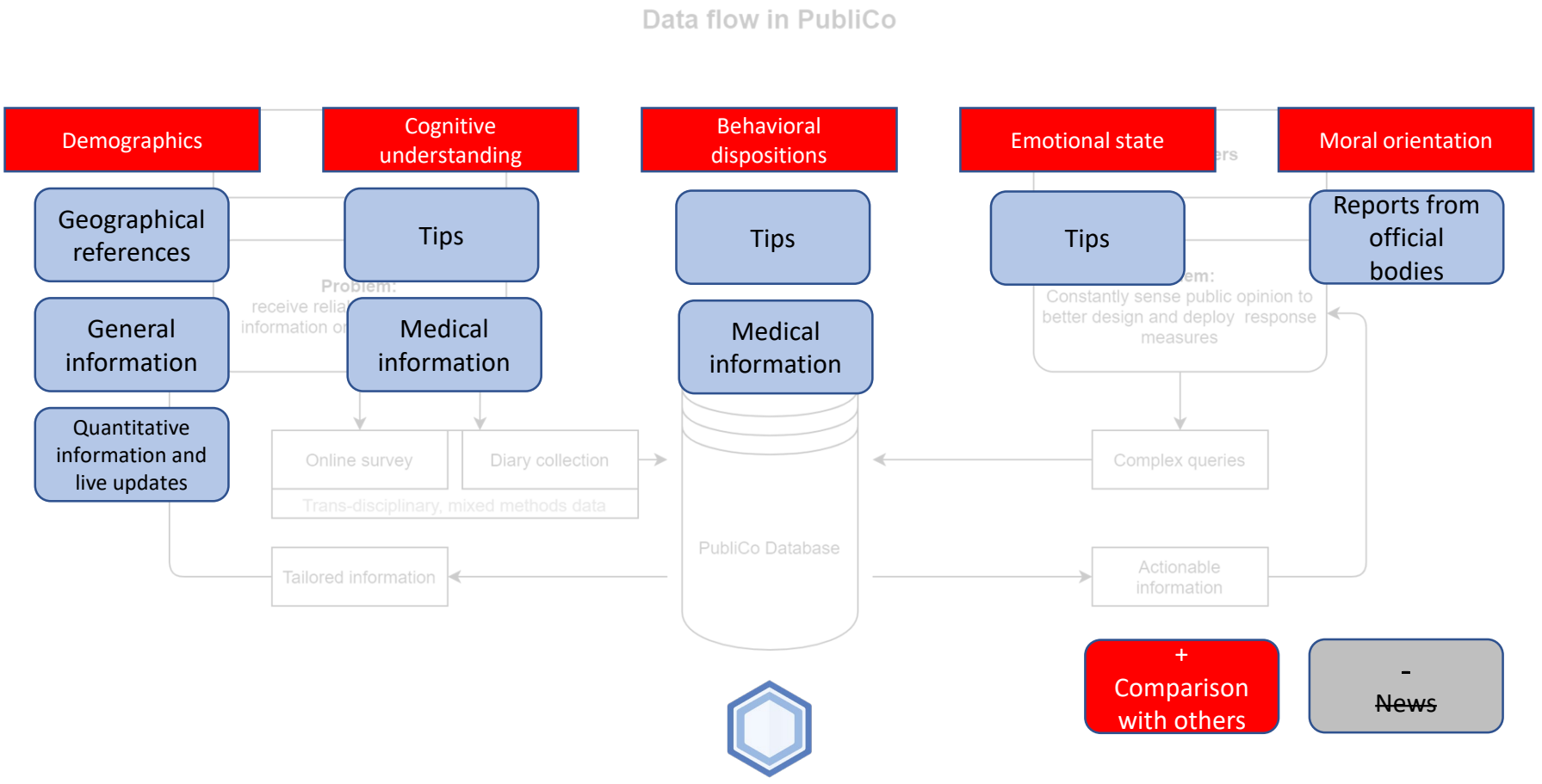



```
# Calculate the mean of the months
lemmameans = df_lemmas_freq_all.iloc[:, [0,1,2,3,4,5,6]].mean(axis=1)
## In case of empty months, exclude them from the mean here! Numbers are
indices, where 0 is january and 11 is december

df_lemmas_freq_all = pd.concat([df_lemmas_freq_all, lemmameans], axis = 1)
df_lemmas_freq_all = df_lemmas_freq_all.rename(columns={0: "mean"})
df_lemmas_freq_all["mean"] =
(df_lemmas_freq_all["mean"].astype('float')).round(2)
# Reorder and reindex

total_col = df_lemmas_freq_all.pop("total")
df_lemmas_freq_all.insert(0, "total", total_col)
df_lemmas_freq_all.reset_index(level=0, inplace=True)
df_lemmas_freq_all = df_lemmas_freq_all.sort_values(by=['total'],
ascending=False)
df_lemmas_freq_all.index = pd.RangeIndex(len(df_lemmas_freq_all.index))
df_lemmas_freq_all.index += 1
df_lemmas_freq_all["lemma"] = df_lemmas_freq_all["index"]
df_lemmas_freq_all =
df_lemmas_freq_all[['lemma','total','1','2','3','4','5','6','7',
'8','9','10','11','12','mean’]]

# Export and display
df_lemmas_freq_all.to_csv(os.path.join(export, "lemmas\lemmas-frequency-
timeseries.csv" ))

display(df_lemmas_freq_all.head(20))
```

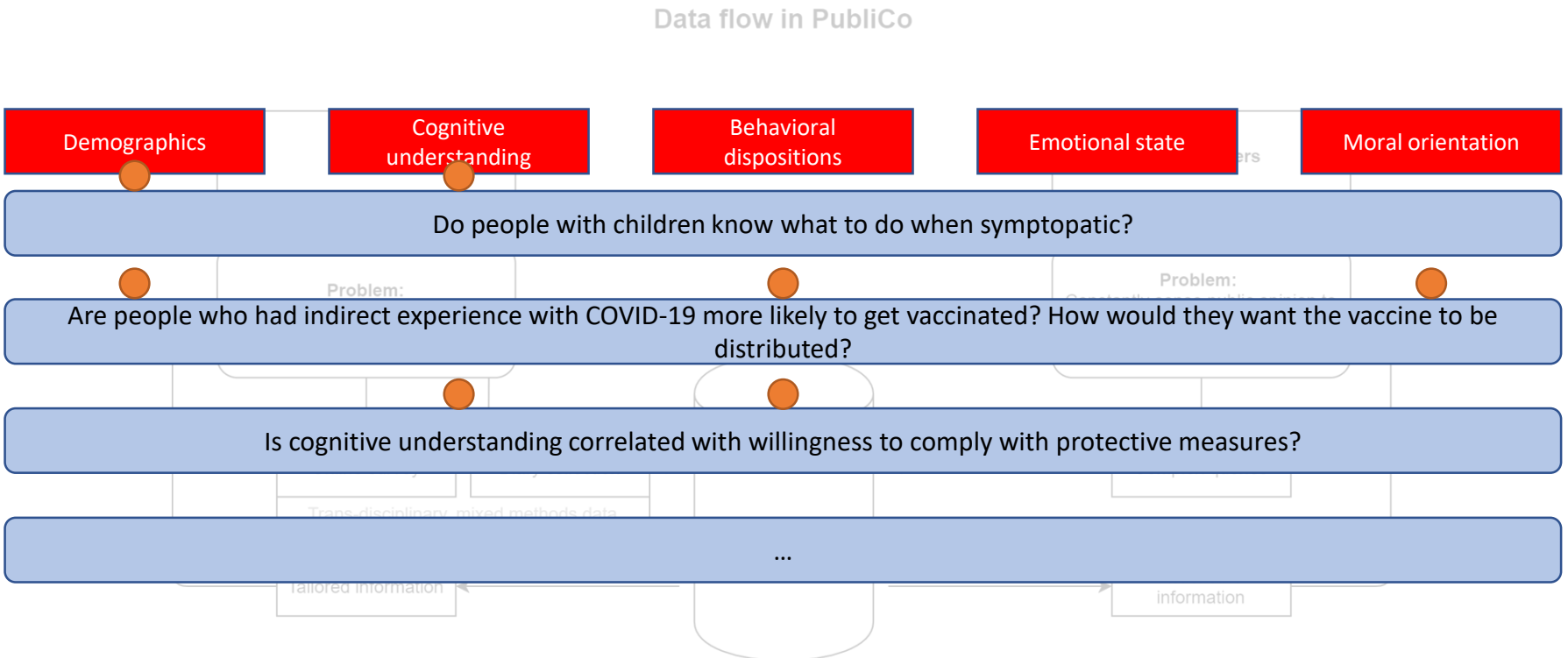
4. Strategy


Data flow in PubliCo
Google trends analysis
Media analysis
Medical information
GAP!
Tips
GAP!
Geographical references
General information
News
Quantitative information
Reports from official bodies
Live updates
PubliCo Database
Policy makers
Problem:
Constantly sense public opinion
better design and deploy
measures
Complex queries
Actionable information
Geographical references
General info about the virus/pandemic
Reports from official bodies
Quantitative information

4. Strategy


Data flow in PubliCo
Demographics
Cognitive understanding
Behavioral dispositions
Emotional state
Moral orientation
Geographical references
Tips
Tips
Tips
Reports from official bodies
General information
Medical information
Medical information
Constantly sense public opinion to better design and deploy response measures
Quantitative information and live updates
Online survey
Diary collection
Complex queries
Trans-disciplinary, mixed methods data
PubliCo Database
Tailored information
Actionable information
+
Comparison with others
-
~~News~~

4. Strategy


Data flow in PubliCo
Demographics
Cognitive understanding
Behavioral dispositions
Emotional state
Moral orientation
Do people with children know what to do when symptopatic?
Are people who had indirect experience with COVID-19 more likely to get vaccinated? How would they want the vaccine to be distributed?
Is cognitive understanding correlated with willingness to comply with protective measures?
...

5. Structure

Giulio Michelon (Belka)

6. Citizen Science

Rosy Mondardini (Citizen Science Centre Zurich)

7. WHO White paper

Kristen Jafflin (SwissTPH)

5. WHO White paper

Developing and sharing our experience and recommendations:

- Getting feedback
- Examining preliminary results
- Refining and revising the PubliCo platform
- Reporting on the process and recommendations in a WHO White Paper

5. WHO White paper

Feedback from:

- International advisory board with diverse array of experts
  - Expertise in bioethics, public health, risk and crisis communication, medicine, social sciences
  - Experts with experience in a wide range of different settings
- Citizen scientists

5. WHO White paper

Preliminary results

- From diaries
- From online web survey
- From Google trends and media analyses

5. WHO White paper

Refining and revising PubliCo platform based on:

- Feedback from experts
- Feedback from citizen scientists
- Preliminary results

5. WHO White paper

White paper will include:

- Overview of PubliCo concept
- Summary of platform development so far
- Description of testing and validation process
- Recommendations for others who wish to develop platforms like PubliCo

8. Future

Nikola Biller-Andorno (IBME) / Sonja Merten (SwissTPH)

8. Future

Develop a framework/standards for good risk and crisis communication

- Targeted information vs. creating «information bubbles»
- Any role for censorship (e.g. anonymized diary entries presenting conspiracy theories)?
- Information vs. nudging/implicit blaming & shaming

8. Future

Potential future modules:

- Risk perception (infection, mortality etc.)
- Allocation issues: who should get access to vaccine, ICU, other goods (nationally, possibly also exploring national interest vs. global solidarity)
- Trade-offs freedom vs. safety
- Media consumption (e.g. movies on pandemics, computer games) and cognitive/emotional/behavioral responses

8. Future

Going global? The transferability of the PubliCo approach to other settings

- Technological preconditions (mobile phones, electricity)
- Cultural: public trust that citizens' voices are taken seriously
- Political: Potential abuse in non-democratic societies (surveillance, identification of citizens with «deviant» opinions)

8. Future

Adding a local perspective also in low-income contexts

- High relevance of obtaining views from all pockets of the population in order to develop or adapt public healt measures
- PubliCo is inclusive – can engage persons from poorer strata and vulnerable population groups who may otherwise be excluded of a public dialogue
- Adaptation of the qualitative diary component to include voices from e.g. community health workers to provide a community perspective

9. Demo

Samuel Giacomelli (Belka)

10. Discussion

THANKS TO OUR ADVISORS

Dr.	Andreas	Reis	WHO, Co-Lead of the Global Health Ethics Team
Dr.	Martin	Feuz	ZHAW School of Management and Law, Institut für Innovation und Entrepreneurship; interaction design expert and Experience Director at PwC Digital
	Beat	Glogger	scitec-media
Dr.	Mattia	Bertin	IUAV University Venice, Planning & Climate Change Lab
Prof. Dr.	Renate	Schubert	Chair of economics, Head of Office of Equal Opportunities ETH Zurich
Prof. Dr.	Alexandra	Trkola	University of Zurich, Institute of Medical Virology
Prof. Dr.	Urs	Greber	University of Zurich, Department of Molecular Life Sciences
Prof. Dr.	Matthias	Allemand	University of Zurich, Department of Psychology
Prof. Dr.	Roger	Kouyos	University Hospital Zurich, Department of Infectious Diseases and Hospital Epidemiology
Prof. Dr.	Andreas	Gutzeit	Hirslanden, Institut für Radiologie und Nuklearmedizin Klinik St. Anna
Dr.	Ambra	d'Imperio	HUG Geneve
Dr.	Peter	Moser	statistics office of the Canton of Zurich

THANKS FOR YOUR TIME!

www.publico.community

t.uzh.ch/16v