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Infrastructure for an Age of Misinformation

CAHSPR
27 March 2026

Speakers: Wendy Levinson, Maureen Smith, Clifton van der Linden, Mike Wilson; **Moderator:** Jenn Thornhill Verma

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Background

Misinformation refers to “information that is false, inaccurate, or misleading according to the best available evidence at the time”[1]

Disinformation or malinformation are other common terms, and refer to instances "…when misinformation is used to serve a malicious purpose, such as to trick people into believing something for financial gain or political advantage.”[1]

Misinformation can delay or prevent effective care, affect mental health, lead to misallocation of health resources, and create or exacerbate public health crises.

1) Confronting Health Misinformation: The U.S. Surgeon General’s Advisory on Building a Healthy Information Environment (https://www.hhs.gov/sites/default/files/surgeon-general-misinformation-advisory.pdf)

Some context (Lancet, 18 Jan 2025)

- *"Health misinformation was weaponised as propaganda, exploiting fear, undermining public trust, and hindering collective action in critical moments*
- *Today*
  - *misleading social media content pervades information on cancer prevention and treatment*
  - *can lead patients to abandon evidence-based treatments in favour of influencer-backed alternatives*
  - *downplays the seriousness of mental health conditions*
  - *promotes unregulated supplements claiming to work for everything from weight loss to reversal of ageing."*

Some additional perspective on what is faced by those engaged in addressing misinformation

- **“A lie travels eight times faster than the truth. But, that means that the truth has to work nine or 10 times harder than a lie. And lies are the thing that are most weaponized. The truth is rarely weaponized, but the lies sure [are], 'cause that's what propaganda is.”**

https://www.nytimes.com/column/ezra-klein-podcast

- 4 November 2024, *Jon Stewart Looks Back with Sanity and/or Fear*

Misinformation in Canada

- **Key findings (quoted from *Shifting perceptions of misinformation in Canada: Trends in exposure, detection and trust, 2025*)**
  - In 2025, 80% of Canadians reported seeing news or information on the Internet that they suspected was misleading, false, or inaccurate at least once a month
  - …the majority (61%) reporting being "very concerned" or "extremely concerned" about online misinformation in 2025
  - Nearly half of Canadians find it more difficult to distinguish between true and false news or information in 2025
  - Those with higher levels of confidence in the media are more likely to have confidence in their ability to distinguish between true and false news

Health misinformation in Canada

The scale of the problem

Health misinformation has been identified by the World Health Organization as one of the top ten threats to global health.

Physicians are spending growing amounts of clinical time countering false or misleading health information

In doing so, they are increasingly expected to act as a ‘myth-buster’ - a role for which they have limited time and limited support

Existing response

While many organizations are already working on tackling parts of the misinformation problem, including:

- **Digital Society Lab** and **ScienceUpFirst** by identifying signals of misinformation
- **Choosing Wisely Canada** for professional guidance
- **Evidence Support Network for Canada** for demand-driven evidence syntheses
- **CMA Media Network** for efforts to combat online misinformation

These efforts are fragmented and uncoordinated.

The gap

The scale and sophistication of health misinformation needs a **systematic, joined-up response.**

Canada needs to begin investing in shared infrastructure, not one-off initiatives.

Possible pillars of a coordinated response

1

Detect

Identify the signals

Each week, track which misinformation claims are likely to be encountered by physicians and are gaining traction with the public.

Digital Society Lab

ScienceUpFirst

2

Find

Find the evidence

Rapidly identify what the evidence says in response to misinformation claims, drawing on insights from evidence synthesis and professional guidance.

Evidence Synthesis Infrastructure Collaborative

Choosing Wisely Canada

3

Package

Shape the message

Use findings from living evidence syntheses on categories of approaches to effectively counter misinformation and package a response.

Evidence Support Network for Canada (MHF and OHRI)

4

Disseminate

Reach the public

Empower physicians with accurate, evidence-based content they can use with confidence and amplify it through partners with trusted, established reach.

CMA Media Network

ScienceUpFirst

Key insights for pillar 3

EVIDENCE-SUPPORT NETWORK for Canada | Evidence synthesis

- **A suite of evidence syntheses focused on aspects of addressing misinformation**
  - Published
    - Impacts of strategies to address health-related misinformation (McMaster Health Forum)
  - In progress
    - Impacts of strategies to address misinformation related to political institutions (McMaster Health Forum)
    - Factors associated with public trust in government health authorities and officials (Montreal Behavioural Medicine Centre's META group – Simon Bacon)
    - Strategies to build, maintain, or repair public trust in health contexts (OHRI – Justin Presseau)

Package

Shape the message

Impacts of strategies to address health-related misinformation

- 60 included studies, organized by 10 categories of strategies (with five having limited evidence – narrative, legislative/policy, economic, curational, investigative)
  - **+ Behavioural science analysis** → Techniques that involved providing a comparison of outcomes was especially effective, such as involving a credible source; and provision of strong pros and weak cons for doing the behaviour

Interventions with evidence of benefit

- Education (26 studies)
- Monitoring and fact checking (24 studies)
- Technical/algorithmic/machine learning (7 studies)
- Credibility labelling (6 studies)
- Counter misinformation campaigns (5 studies)

On outcomes such as:

- Changing beliefs
- Stimulating intentions to take protective actions
- Improving knowledge
- Willingness to share misinformation
- Ability to discriminate misinformation
- Changing beliefs of people exposed
- Critically evaluate messages

Examples identified from in-progress jurisdictional scan (AU, CA, DK, FI, FR, UK)

1

Detect

Identify the signals

- **CA- Digital Society Lab:** Algorithms to identify content, attributes of people involved and how it spreads
- **US - KFF – The Monitor:** Media monitoring and a social listening tool
- **US - Infodemiology.com (Public Good Projects) –** Dashboards that track publicly available online conversations

2

Find

Find the evidence

- **AU - National Centre for Immunisation Research and Surveillance** – Repository of evidence on vaccines and vaccine-preventable diseases with publicly accessible resources to the public and health professionals

3

Package

Shape the message

- **UK – Cambridge Social Decision-Making Lab - Go Viral!** A game that uses 'pre-bunking' theories to understand how COVID-19 misinformation circulates online

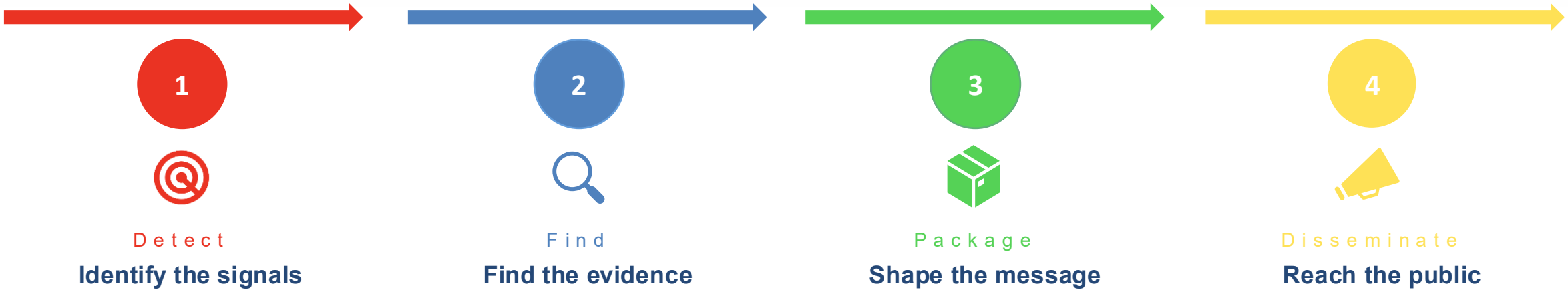
4

Disseminate

Reach the public

- **US – NYC Department of Health Misinformation Response Unit –**Misinformation response unit to monitor messages on social media during the pandemic and worked with over 100 community partners to tailor and disseminate culturally appropriate, accurate messages to different communities and populations

Cross-cutting examples from the jurisdictional scan (AU, CA, DK, FI, FR, UK)



- **UK – Full Fact**
  - AI tools to identify circulating claims in the public debate
  - Claims prioritized based on their potential to cause harm and their potential for spread or media pick up
  - Evidence gathered from a wide array of sources to generate responses (including scientific databases, data sets, and legal documents as well as contacting subject matter experts when specialist knowledge is needed)
  - Articles designed to guide the reader through the evidence identified, with claims responding to each conclusion summarized at the top of the page

- **US – State of Vaccine Confidence Insight Report System (no longer operational)**
  - Example of a mixed-methods approach drawing on social media, news media, search engine queries, polling data, and direct public inquiries to identify and thematically categorize signals of emerging misinformation; grounded in CDC data and behavioral frameworks; packaged into accessible biweekly reports

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Infrastructure for an Age of Misinformation

Panel discussion | 27 March 2026

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ESIC: Evidence Synthesis Infrastructure Collaborative

- **We have a once in a generation chance for a global step-change in evidence synthesis**

- Five foundational investments:
  - **Sectoral hubs** to catalyze radically more timely, relevant and affordable evidence synthesis to support SDG achievement
  - **Regional hubs** to support impacts at the country level, often amplified through UN Country Teams
  - **Open data system** to streamline how we share and reuse synthesis data
  - **Living inventory of AI-enabled digital evidence synthesis tools** to support choice and reporting
  - Agile **monitoring, evaluation and learning infrastructure**

ESIC EVIDENCE SYNTHESIS INFRASTRUCTURE COLLABORATIVE

2025 Health and Media Annual Tracking Survey

When care is out of reach, misinformation moves in

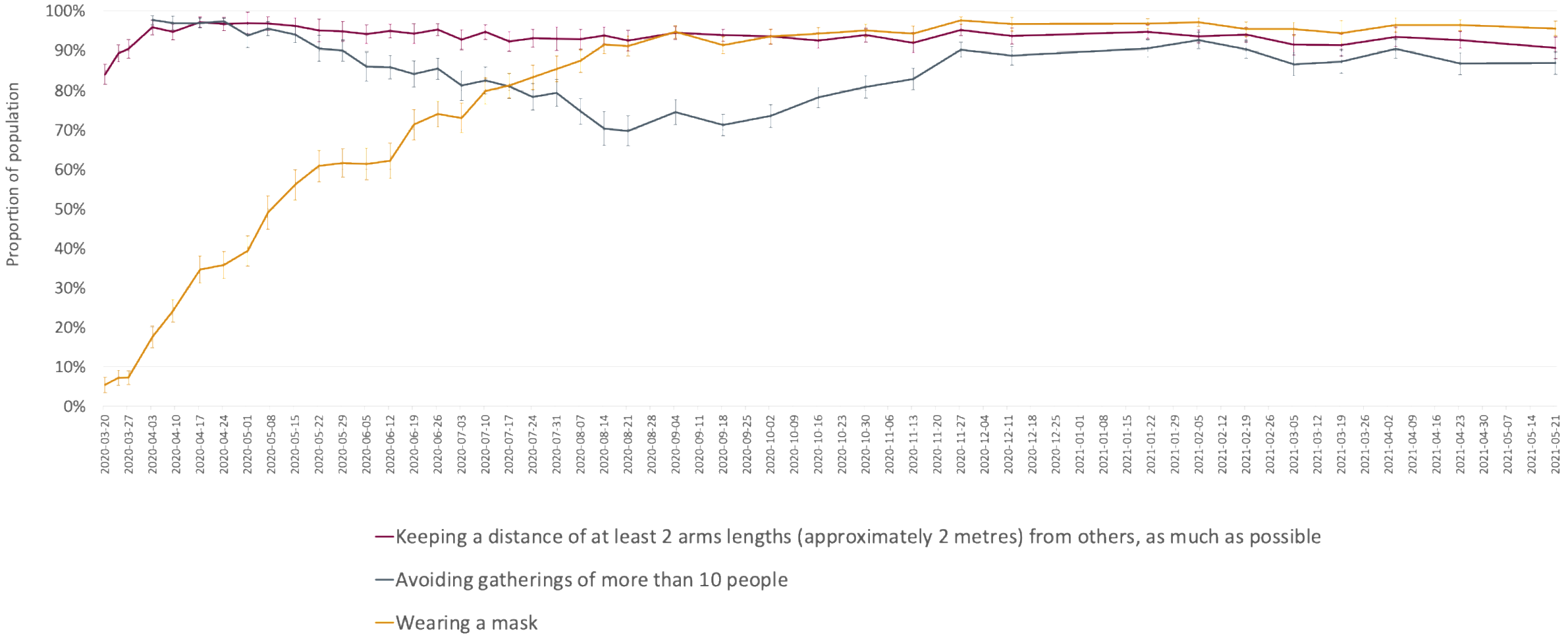
https://www.cma.ca/healthcare-for-real/how-dangerous-health-misinformation-canada

- Over the past year, **Canadians' encounters with health misinformation has increased significantly**, with more individuals than ever recognizing its prevalence and its harmful impact.
- The news media ecosystem remains highly fragmented by age. Concerns about **news avoidance** continue.
- **Those who rely heavily on social media for news remain the most vulnerable**, contributing to a significant rise in susceptibility across the population.
- We're seeing a **direct link between misinformation and negative health outcomes**. Compared to last year, more Canadians report delaying medical treatment, straining personal relationships and experiencing heightened anxiety due to false health claims.
- **Current efforts to combat misinformation are falling short** of what is needed. Collaborative effort will be needed to combat the deepening effects of misinformation in our increasingly fragmented media ecosystem.

COVID-19 Monitor

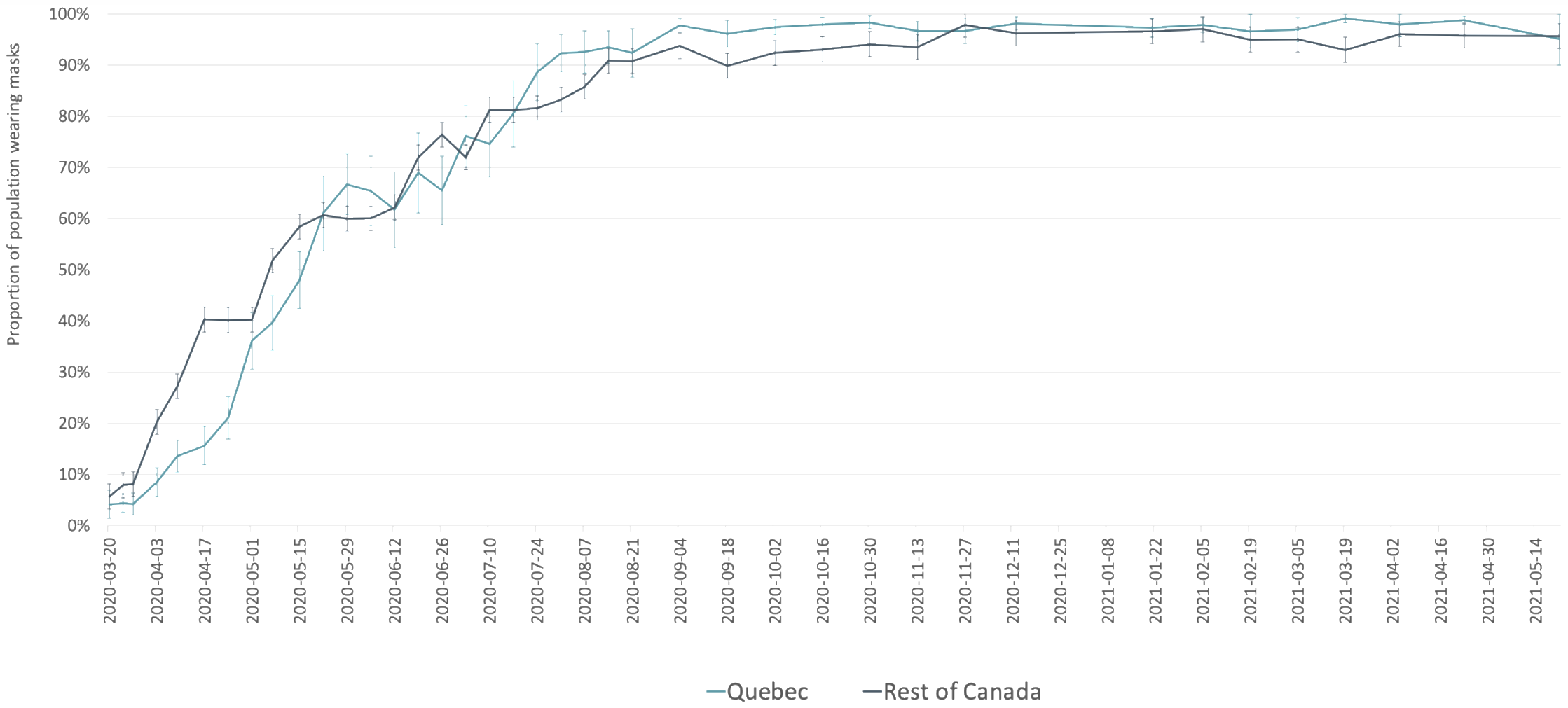
- A rolling public opinion survey conducted by Vox Pop Labs in Canada, Australia, New Zealand, the United Kingdom and United States
- Launched shortly after COVID-19 was declared a pandemic by the World Health Organization
- 96,887 responses in Canada alone across 47 waves from 2020 to 2022
- Top-level findings published at covid19monitor.org

Canadian compliance with public health directives

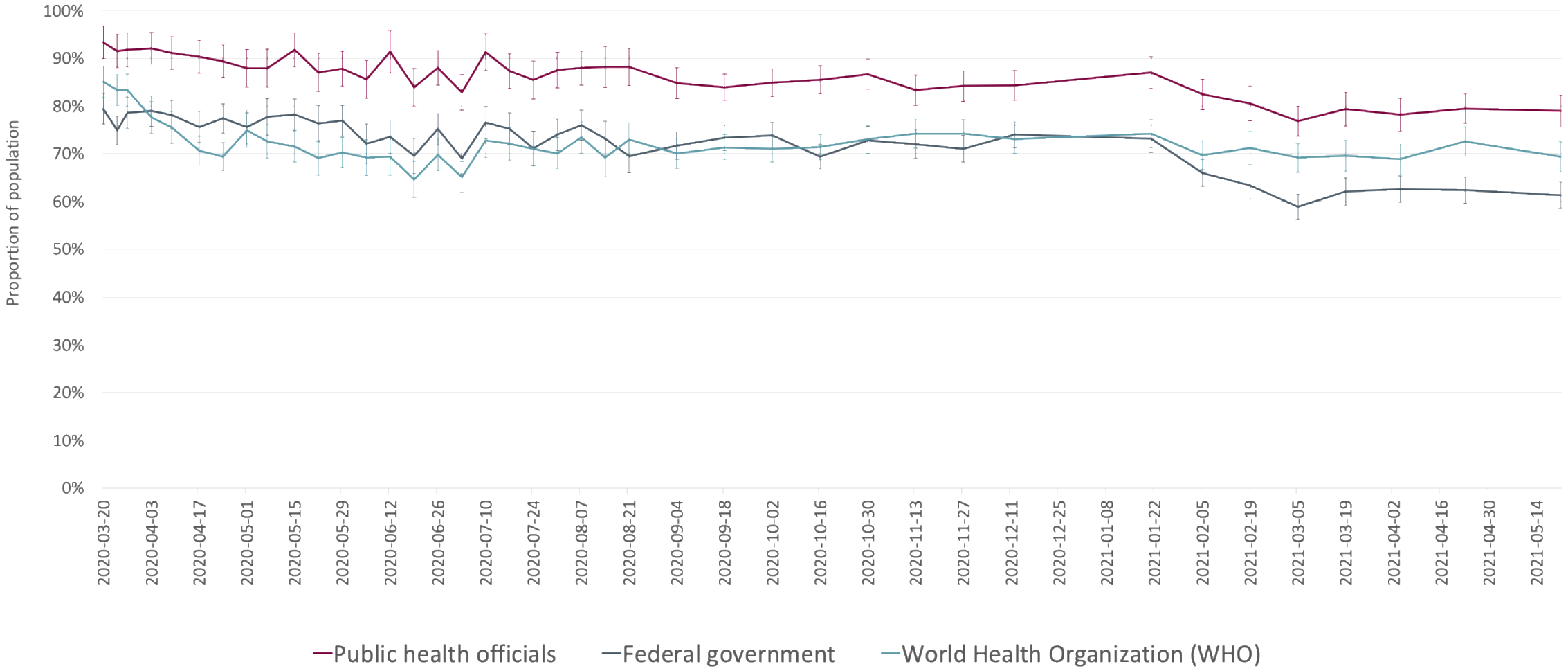


Canadian attitudes toward mask adoption

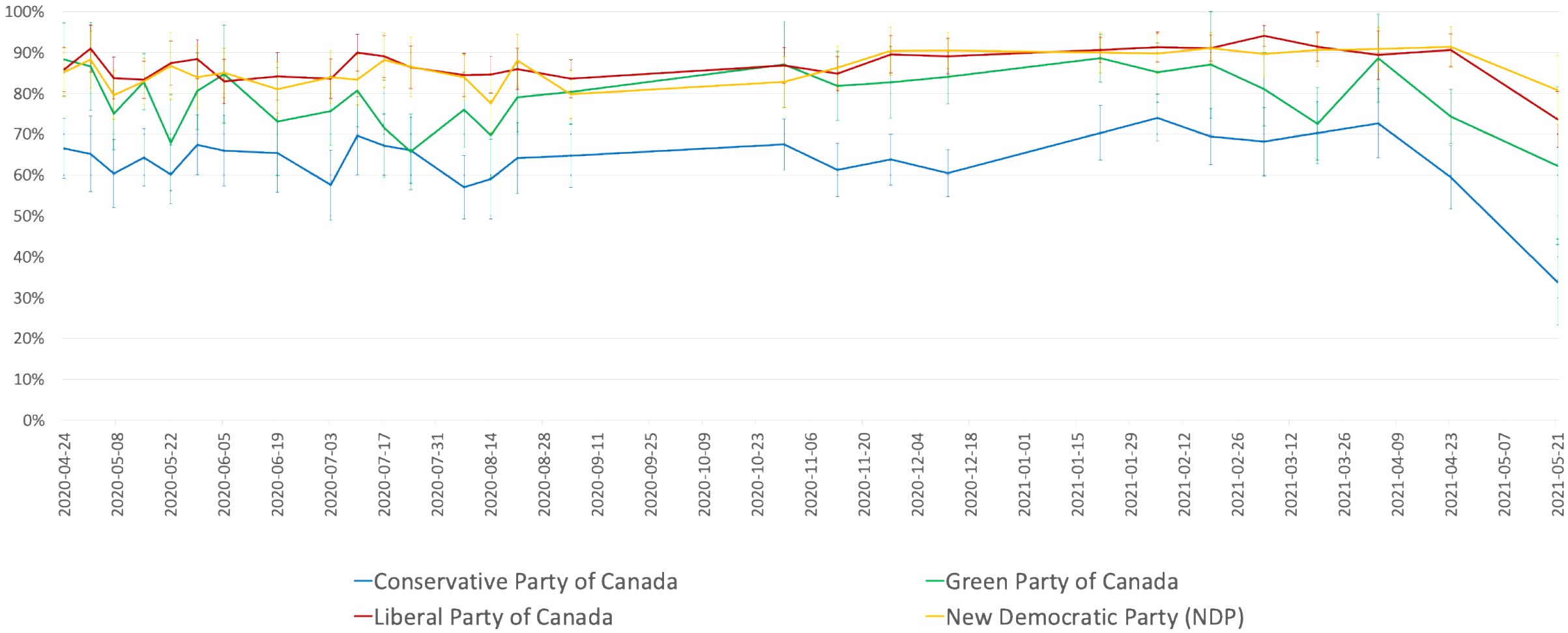
Canadian attitudes toward mask adoption: Quebec versus the Rest of Canada



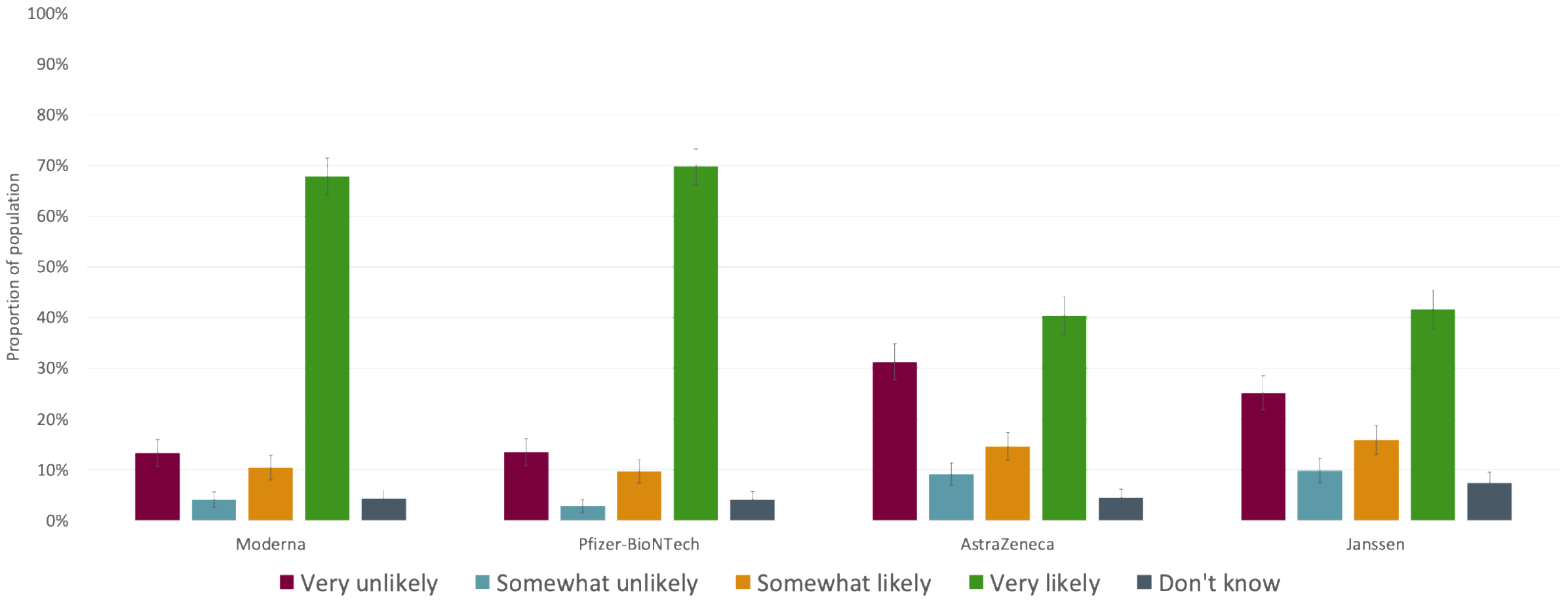
Institutional trust among Canadians



How likely are you to get the COVID-19 vaccine when it becomes available to you? [By vote choice in the 2019 Canadian federal election]

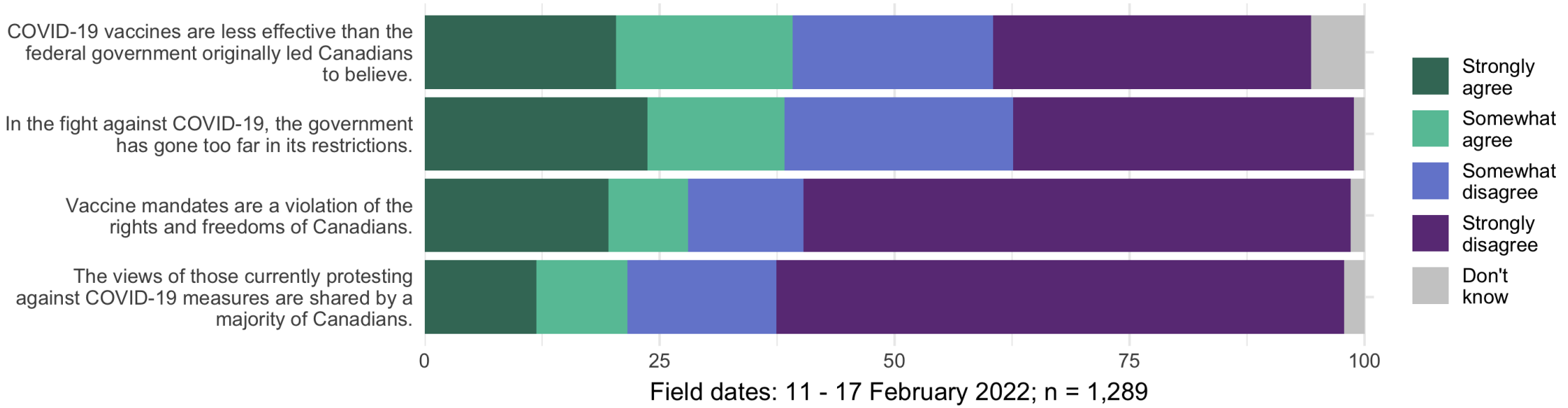


How likely are you to get the following COVID-19 vaccines if they were the only option presently available to you?



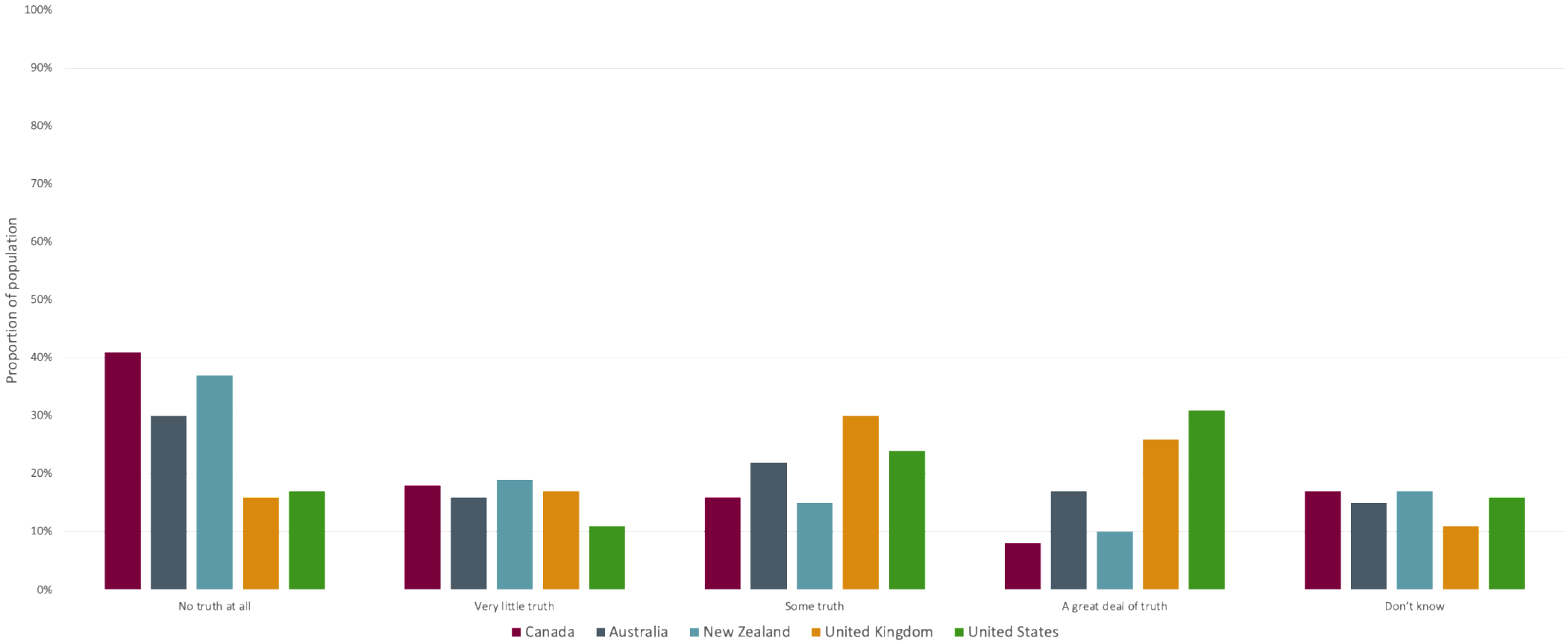
Wave 39 (April 23-28, 2021)

Canadian attitudes toward pandemic mitigation measures



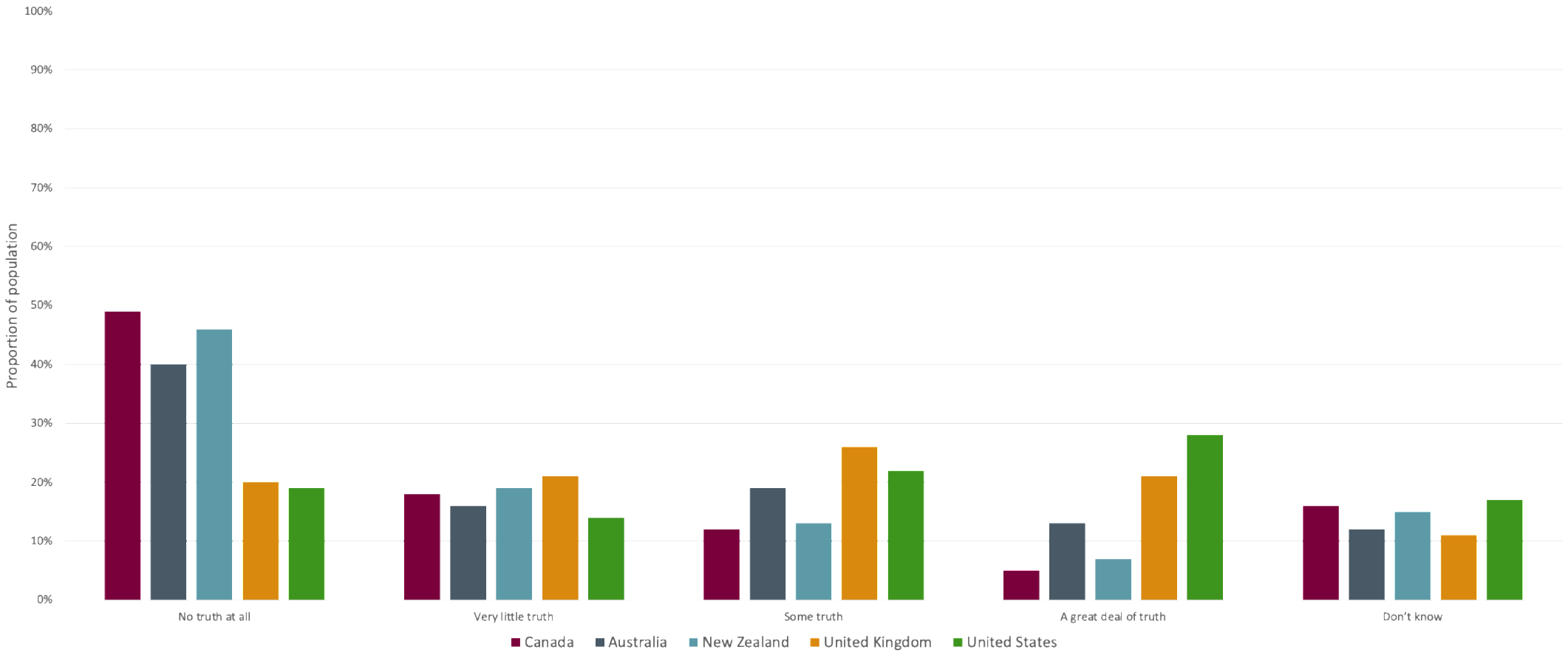
Cross-national variation in attitudes toward conspiracy theories

“The coronavirus escaped from a lab in Wuhan.”



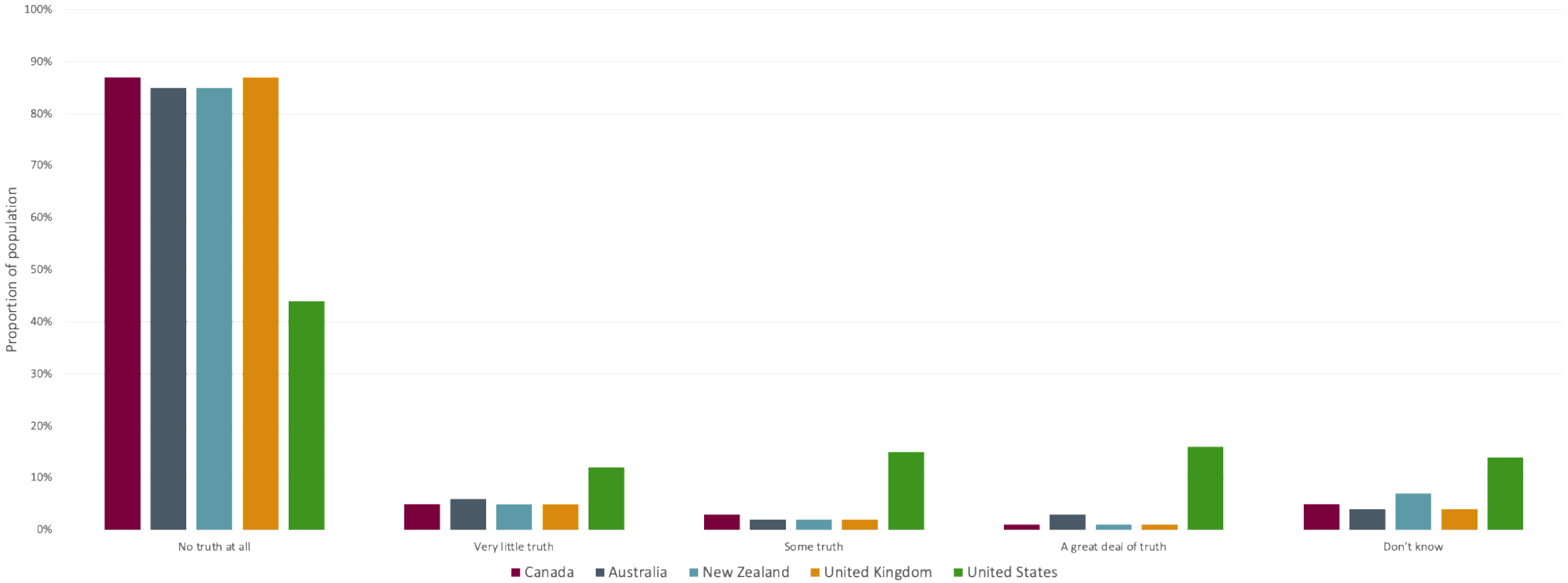
Cross-national variation in attitudes toward conspiracy theories

“The Chinese government engineered the coronavirus in a lab.”



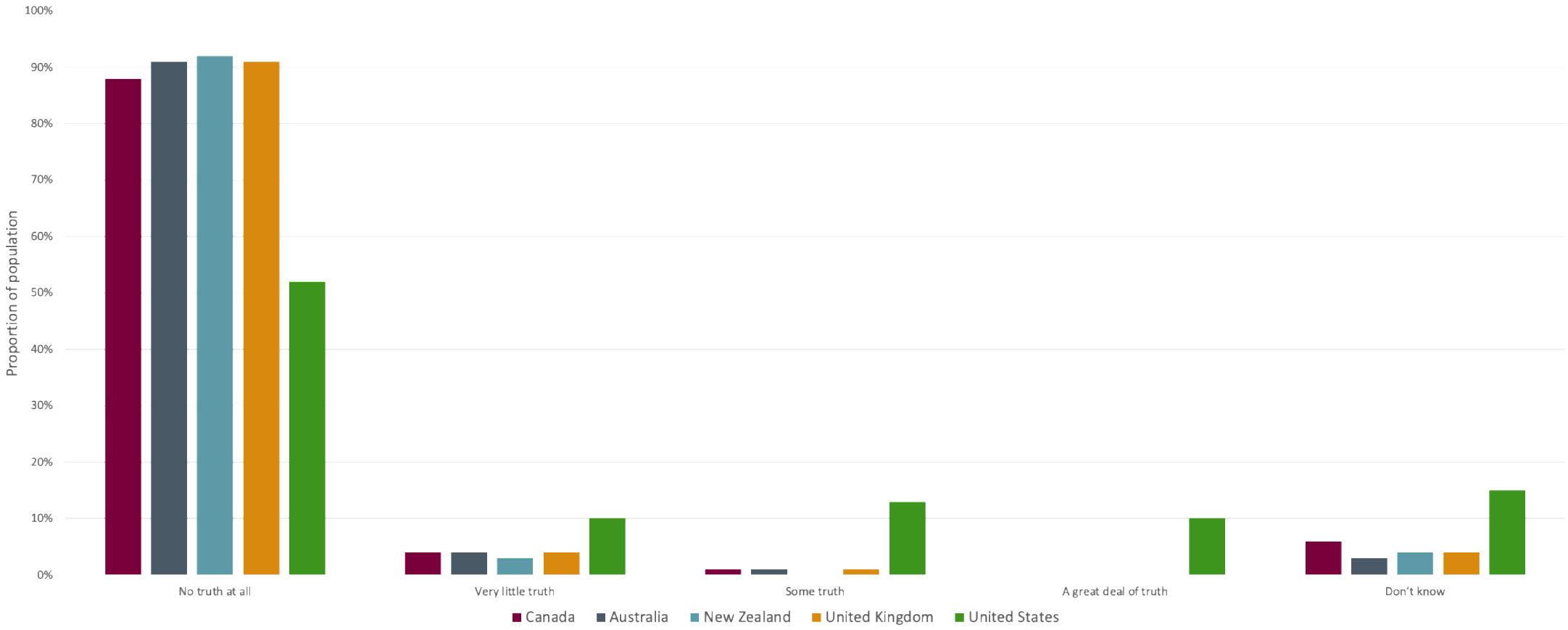
Cross-national variation in attitudes toward conspiracy theories

"Bill Gates is using the coronavirus to push a vaccine with a microchip capable of tracking people."



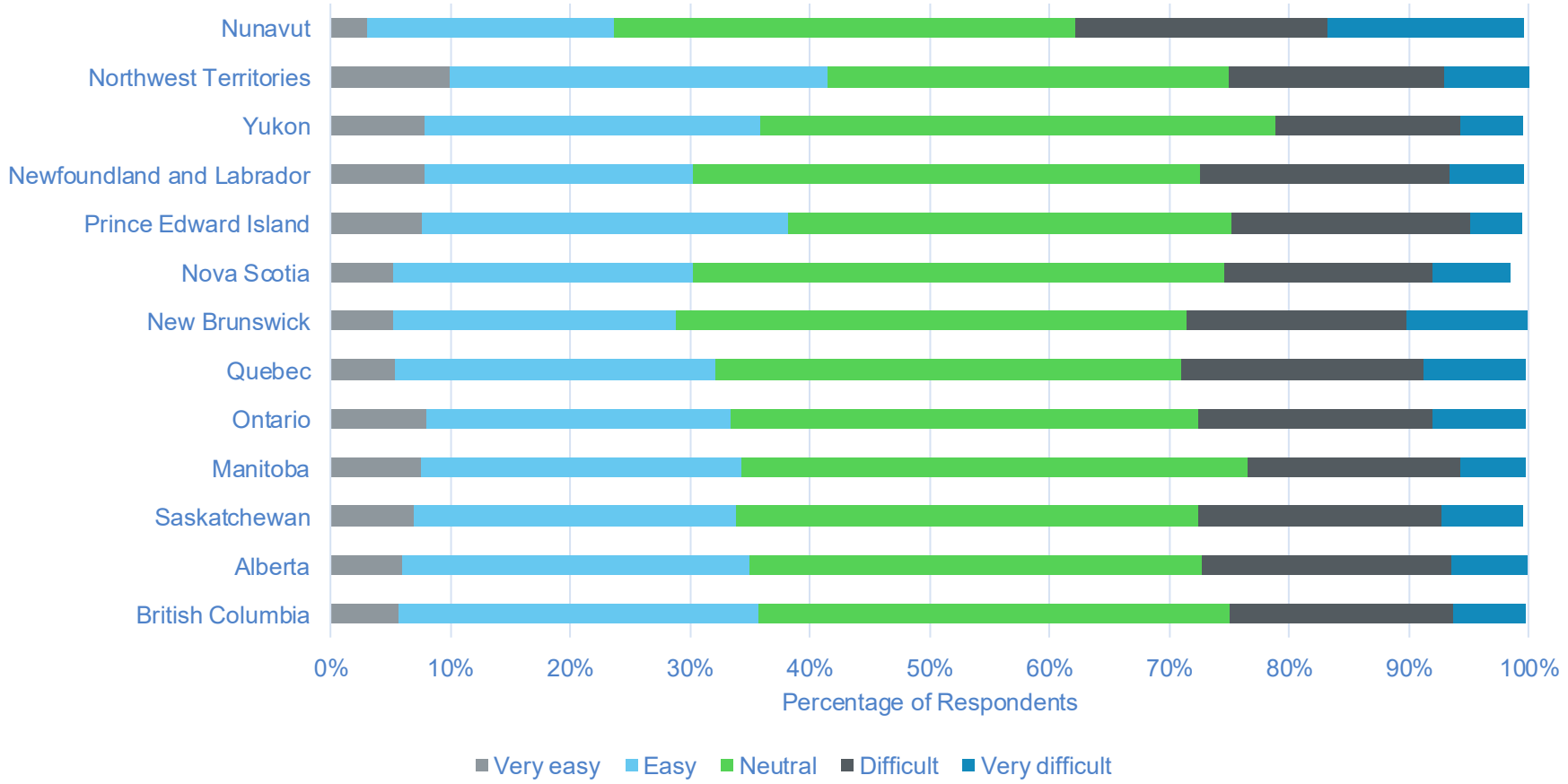
Cross-national variation in attitudes toward conspiracy theories

"There is a link between 5G technology and the coronavirus."



OurCare Project

"How easy is it to find information online that you can trust to help you manage your health?"



Living Evidence Profile

Promising strategies for putting evidence at the centre of everyday life

Approach

- Searched six databases to identify syntheses and single studies relevant to each strategy (HSE, SSE, PubMed/MEDLINE, EBSCOhost, ProQuest and Web of Science)
- 3,304 documents assessed by two reviewers for inclusion based on relevance to each of the five strategies, and 302 deemed eligible and included in the analysis

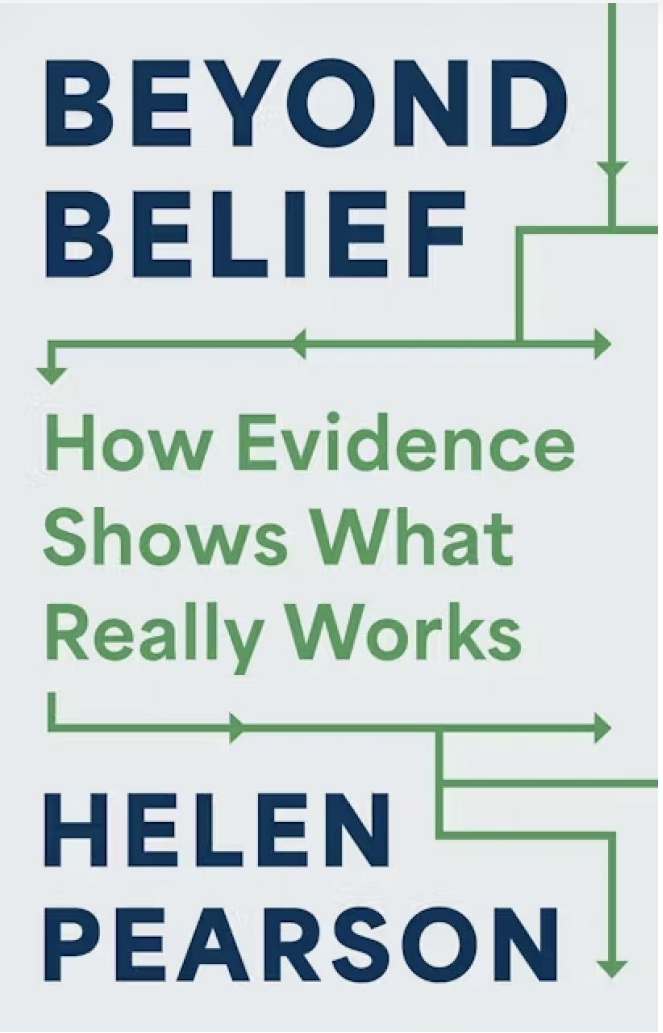
Summary of findings

- Evidence is moderate or limited for the strategies → although there are certain sub-strategies with a well-developed evidence base (e.g., many syntheses and single studies about decision aids, which relate to the second strategy) ; Many key gaps identified

Next steps:

- In progress: Jurisdictional scan to complement the insights from the evidence documents
- In planning: Update the searches and integrate new insights from recently published evidence documents into our results

Beyond Belief: How Evidence Shows What Really Works



The remarkable story of the global movement championing the idea that evidence, not opinions, should guide our decisions...

https://press.princeton.edu/books/hardcover/9780691207070/beyond-belief

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Q&A | 27 March 2026

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Thank you | 27 March 2026

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