

DAY ONE PROJECT

Creating a COVID-19 Commission
on Public Health Misinformation

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Summary

There will be a time, hopefully soon, when our country will have the wherewithal to understand why COVID-19 took such an outsized toll on the U.S. population and economy. To better prepare for future public-health emergencies, the next president should establish several high-level COVID Commissions—modeled on the 9/11 Commission¹—to examine our nation’s response to the 2020 pandemic.

One Commission should focus on public health communication and messaging. The next president should task this Commission with assessing what information about the pandemic was made publicly available, how this information affected societal response, and what should be done to limit the impact of false and dangerously misleading information moving forward, while ensuring robust opportunity for debate and expression.

Challenge and Opportunity

The early stages of the COVID-19 pandemic were characterized by considerable uncertainty. Yet even after scientific consensus emerged around numerous aspects of the disease, false or misleading information about COVID-19 remained prominent in the U.S. public discourse. Much of this information put lives at risk by encouraging dangerous or reckless behavior. Such information included assertions that:

- COVID-19 was a “hoax” or a plot.
- COVID-19 was no worse than the common cold, with symptoms of COVID-19 being “harmless” in nearly all cases.
- Young people are immune to, at no risk of serious illness or death from, or cannot transmit COVID-19.
- Wearing masks does not lower the risk of spreading or contracting COVID-19 and in fact can increase risk.
- Many doctors believe that COVID-19 is not that dangerous, and/or that it is easily cured.
- Certain widely available drugs would treat the disease.

While civil society and academic researchers have exposed a great deal about what the World Health Organization (WHO) has termed a COVID-19 “infodemic”, existing analyses are hampered by a lack of data. A government commission would be better placed to obtain key data and develop data-based strategies for countering public-health misinformation on a wide scale.

¹ 9/11 Commission (2004). National Commission on Terrorist Attacks Against the United States. <https://www.9-11commission.gov/>.

Plan of Action

To that end, the next administration should create a high-level “COVID-19 Commission on Public Health Misinformation” based on the following principles.

Principle 1: The purpose of the Commission is accountability, not punishment, for the role of FCC-licensed and other media outlets and digital platforms in amplifying misinformation. The purpose of the Commission should not be to impose civil or criminal liability for misinformation spread during the COVID-19 pandemic. Rather, the Commission should understand and explain how different media platforms—and the ideas shared on them—shaped societal response to the pandemic. The Commission should focus its efforts on the media and technology platforms where misinformation was and is most prevalent, as opposed to medical institutions such as the U.S. Centers for Disease Control and Prevention (CDC) and the WHO.

Principle 2: Multiple stakeholders must be involved. The Commission’s activities should directly involve representatives of relevant regulatory agencies (such as the Federal Communications Commission, the Federal Trade Commission, the Food and Drug Administration, the Department of Health and Human Services, and the CDC), front-line responders such as hospitals and state and local governments, and media and technology platform companies.

Principle 3: The Commission should identify actions that promoted a “signal” of useful information and/or reduced the “noise” of inaccurate or even harmful information. Different media platforms have handled the COVID-19 pandemic in dramatically different ways. Some platforms downplayed the risk of the disease, likely increasing the incidence of risky behaviors among audiences of those platforms.² Other platforms strove to limit the reach of false information, to fact-check statements, and to promote authoritative counter speech. Advertiser boycotts and public shaming have applied pressure to reduce misinformation. The Commission should assess the entire spectrum of responses, even by platforms over which the federal government has relatively little regulatory authority (such as social media). As stated above, the Commission’s responsibility would not be to take or prescribe enforcement actions, but to enhance public understanding of what decisions have put American lives at risk during the pandemic and what decisions did the opposite.

Principle 4: The Commission must have access to data. To provide policymakers and the public with a comprehensive and accurate understanding of misinformation spread during the pandemic, the Commission must know how different media platforms decided to allow (or prevent) dissemination of certain information. As such, the Commission will need data on both algorithms and editorial policies that platforms use to promote content to their audiences and

² Ingraham, C. (2020). New research explores how conservative media misinformation may have intensified the severity of the pandemic. The Washington Post, June 25.

to address spread of misinformation from platform to platform. These data can and should be shared with the Commission in a way that preserves competitive interests.

Principle 5: The Commission should identify options for federal strategies to limit future spread of misinformation. The federal government already has some tools to prevent harmful information from being circulated. For example, the FCC has a rule (47 CFR §73.1217) that prohibits broadcast licensees or permittees from broadcasting false information concerning a crime or a catastrophe if: (i) the licensee knows this information is false; (ii) it is foreseeable that broadcast of the information will cause substantial public harm; and (iii) broadcast of the information does in fact directly cause substantial public harm. The Federal Trade Commission has the power to enforce against medical misinformation in commercial advertising. The Commission should consider whether rules and tools like these could be strengthened and/or extended to limit transmission of false medical information via media platforms.

Principle 6: The Commission should address not only misinformation, but also the paucity of reliable information. Amplifying reliable information is key to drowning out misinformation. The Commission should work with first responders and other stakeholders to assess the extent to which reliable information on COVID-19 was publicly available and circulated during the pandemic, and to identify what mechanisms might be useful to strengthen the “signal” of reliable information during future emergencies.

Principle 7: The Commission should contribute to a public-education campaign designed to improve national response to future medical crises. One of the most critical steps the Commission could take to limit the spread of misinformation during future medical crises is to help educate the public about the nature of public-health information, how non-medical personnel can mislead the public, what sources to trust and what sources to be skeptical of, and how to verify critical health information.

Principle 8: The Commission should balance First Amendment rights with the Constitutional imperative to “promote the general welfare”. In carrying out its mandate, the Commission should be sensitive to concerns that the government, in seeking to manage information flow, could infringe on First Amendment rights to freedom of speech. Yet courts have recognized that First Amendment rights are not absolute. Freedom of speech does not extend, for example, to making fraudulent claims about various products, including medicines. The Commission should consider how government can best balance First Amendment rights with its Constitutional imperative to promote the general welfare—in the case at hand, by limiting the spread of dangerously false and misleading information about a public health danger.

Among the many steps needed to address the proper place of digital platforms in a democracy, one is a full reckoning with the widespread dissemination of dangerously false and misleading information about a public health danger.

About the Authors



Blair Levin has worked at a high level at the intersection of broadband policy and capital markets for the past 25 years. From 1993–1997, Levin served as Chief of Staff to FCC Chairman Reed Hundt. In 2009, Levin co-led the technology transition team for President-elect Obama. He returned to government service from 2009–2010 to oversee the development of the National Broadband Plan for the United States. Levin is currently an equity analyst at New Street Research and a non-resident Senior Fellow of the Metropolitan Policy Project of the Brookings Institution.



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About the Day One Project

The Day One Project is dedicated to democratizing the policymaking process by working with new and expert voices across the science and technology community, helping to develop actionable policies that can improve the lives of all Americans, and readying them for Day One of a future presidential term. For more about the Day One Project, visit dayoneproject.org.