Online Ubuntu? Exploring digital pandemics in a hyper–networked world

Social media as a technological and cultural phenomenon has revolutionized how information spreads. People can connect in unprecedented ways and exchange and produce information faster than ever before. This shift has profound implications for global health; social media creates the potential for innovation but it also raises many questions about ethical use and factual accuracy. How can health practitioners best leverage social media to improve the health of individuals in their communities?

To explore this intersection, the Harvard Global Health Institute (HGHI) launched the Global Health and Social Media Fellowship early this year. Funded by a 2014 President’s Innovation Fund for International Experiences (PIFIE) award, the fellowship enabled six students to conduct research related to the intersection of social media and health in South Africa, Uganda, Rwanda, and the United States. In June, HGHI Inaugural Fellow Dr. Brittany Seymour and Senior Project Manager Rebekah Getman, with the stateside support of Professor David M. Cutler, led workshops at the three international sites in coordination with on–site partners to begin to frame the issue in context. Those in the South African workshop characterized social media as a modern expression of Ubuntu, a cultural concept that signifies human connectedness, or the idea that “I am because we are.” Read more about the summer interns and their research.

Maybe we think we go to the web for facts, but in truth its greatest power is in relationships. By connecting people who often have strong opinions about health issues, noted Seymour and Getman, the internet also incidentally acts as a platform for media “pandemics,” for example the spread of recent controversies over children’s vaccination as well as the use of fluoride. As the Social Media Fellows found, many...
the use of fluoride. As the Social Media Fellows found, many of the opportunities and challenges related to social media and health are common across different communities. The fluoride and vaccine debates, for example, mobilize people around the world to “friend” or “like” only those individuals and websites that agree with their opinions, often obscuring easy and reliable access to accurate health information about these practices, making it harder than ever for ordinary people to find and recognize scientifically reliable research. Given this transformative potential for connectivity, policy makers and health workers who rely on the web need to push beyond the production and dissemination of health information. To successfully influence health behavior, we need to understand the networks.

Back in the US, Seymour, Getman, and their students and colleagues are now exploring ways to connect strategies that build on these relationships to address the pandemic of online health misinformation. A roundtable lunch in May 2014 began a discussion with invited local media experts, journalists, and writers across the University. That conversation led to formation of a working group to explore opportunities for further research. An open conference or “unconference” — where participants set the agenda during the event itself — at Radcliffe on September 26, 2014, provided a forum for follow-up to explore the theme of “Digital Pandemics: When Advocacy Obscures Accuracy in a Hyper–Networked World.”

Co–facilitated with Dr. David Weinberger, an internet philosopher and Senior Researcher at the Berkman Center for Internet and Society, the unconference drew on insights from summer research to explore potential for change. The event engaged scholars from co–sponsoring organizations that included the Nieman Foundation for Journalism at Harvard, the Berkman Center, the Shorenstein Center on Media, Politics and Public Policy at Harvard Kennedy School, Harvard School of Dental Medicine, and the Harvard Global Health Institute; in addition, the event drew writers from the Global Health Delivery Project, Boston Children’s Hospital, The Boston Globe, The New York Times Magazine, the Global Health Education and Learning Incubator at Harvard, the Edmund J. Safra Center for Ethics at Harvard Law School, as well as faculty from the fields of medicine, public health, and education.

Participant–driven small groups addressed questions such as: What is the media’s responsibility? (or as one participant put it, “As a journalist, do you provide ‘click–bait’ or do you provide substance?”) How do we incentivize trust? Foster transparency for quality assurance? What new evaluation
methods will help us learn from each other and the network? How might health providers, policy makers, and media experts better work with rather than against the online peer networks that drive the digital pandemics? And what’s the best way to move accurate health information from reliable sources out across the network?

“Right now we have more questions than solutions,” said Seymour. Further dialogue over the next few months will help to shape ongoing connections into emerging ideas for new research.