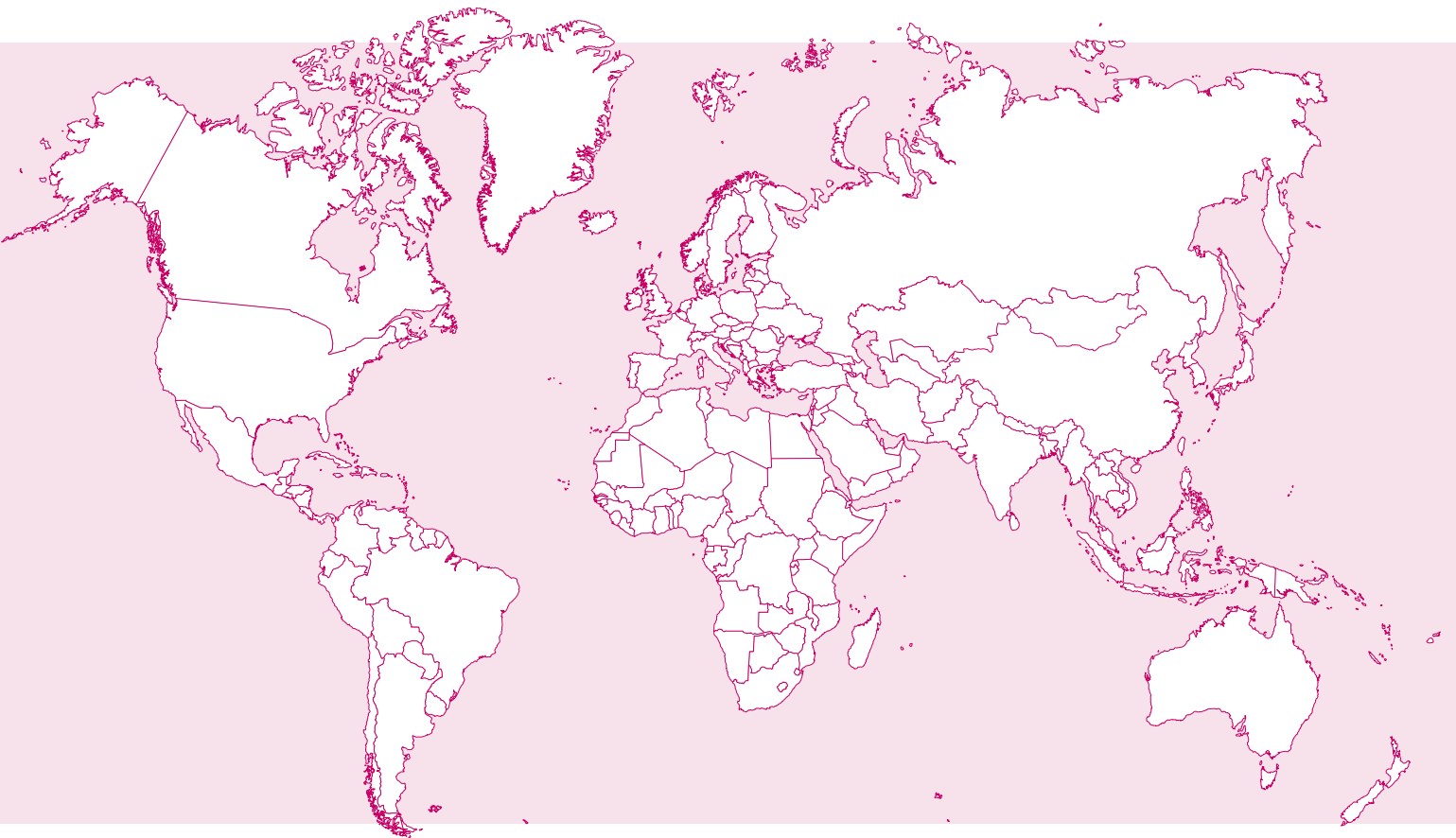


Reflections on the Royal Society of Edinburgh's International Evidence Roundtables.

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The Royal Society of Edinburgh (RSE) held two International Roundtables to gather evidence on Covid-19 communication and public engagement on Tuesday 13th April 2021.

This activity was part of the RSE's Post-Covid-19 Futures Commission, created to help Scotland emerge as positively as possible from the Covid-19 pandemic. As part of the Commission's activity, the Roundtables sought an international perspective on public participation, giving us a valuable insight into the actions and responses of a range of countries including Denmark, Ireland, Brazil, Canada, Argentina, Scotland/UK, Australia, Japan, Taiwan, New Zealand, Malaysia, Ghana and South Africa. These events were under Chatham House rules.

The Democratic Society's report consists of case studies from Canada, Ghana, New Zealand, South Africa and Taiwan and in addition includes representations from Belgium, Brazil and Finland. The report draws attention to important patterns of behaviour as well as good and bad practice in the varied responses. This account of what happened is remarkable.

Insights not just from countries but from a range of experts in misinformation, psychology, respiratory diseases, chemical ecology, citizen engagement, science communication, and social innovation creates a compelling narrative about each country's approach to the pandemic and the experiences of different groups of people: the tensions and the challenges.

Undertaking a thematic analysis of the recordings, the following documents the key points that can be taken from the roundtables. In addition, the report synthesises the findings of the Democratic Society's report *Rapid review of international evidence on Covid-19 communication and public engagement*. The main themes focus on:

- various approaches taken by the different governments
- public messaging
- trust of leaders and experts,
- conflicts between science and politics
- misinformation
- how the pandemic exacerbated existing inequalities
- innovative approaches
- the impact all this will have on democracy and public participation moving forward.

Approaches to tackling Covid-19

What is striking about these conversations is the varied methods that were put in place. Much of the impact will have surrounded the priority taken by central government. For instance, in Japan the priority was focused on preserving the economy. Subsidising travel and promoting consumption meant that numbers grew as people took advantage of these opportunities. Links can be seen here with the UK and the 'Eat Out to Help Out' initiative which had some impact on creating a second wave. Countries like New Zealand strove to suppress the virus at community level and the communication from government supported this approach with culturally meaningful links with messaging that resonated with the public. Most, if not all countries, focused on public health communications via weekly or daily briefings. Politicians shared the platform with scientific experts. South Africa chose to put experts front and centre, where other countries, such as New Zealand, saw politicians sharing a platform with experts to good effect. As an outlier Brazil's government chose to restrict access to information and limit transparency in order to manage the main messages to their public.

Clarity and accessibility of message

A few countries took a paternal approach to public messaging. In the UK, it is believed that the UK Government has a perception of the British public as frail or incapable, with the Government's role being to protect the public from information in order to avoid widespread panic. Hyper-optimism was therefore adopted so as to portray the UK as doing better than it really was to the public. The UK Government has even at times blamed different groups in order to distract from Government performance. This is not unlike the approach by leaders in countries such as Malaysia where the Prime Minister (PM) was referred to as 'Abah' and assumed a father figure approach to public messaging and in South Africa where they refer to public health briefings as 'family meetings'. This may have made people feel part of something bigger, creating a feeling of being protected, and maintaining social order. However, in the UK the approach reportedly led to the public largely feeling patronised and in South Africa there was a significant backlash to some of the more stringent policies.

The New Zealand PM, Jacinda Ardern, made efforts to talk to the public in language people could understand, which included translators and sign language interpreters. They were viewed as being 'straight up' people – honest, transparent, decent people who used human empathetic communication which led to high levels of trust. More than that, Ardern and the experts created a feeling that the response to the pandemic was a team effort.

In Scotland the same effort to have an 'adult conversation' was adopted which has led to more positive responses than towards the Westminster government throughout the pandemic. What has been stark in the UK (and Scotland) is several prominent members of the Government or expert team being caught breaking Covid-19 rules which led to a breakdown of trust betraying the message of 'all being in it together'.

Many countries were slow to think of their communities who did not speak the main language of that country, including Australia, Canada and Ireland. In Ireland structural inequalities were highlighted when people were asked to contact their GPs but much of the messaging was in English and not Irish, Polish and other languages. People could not engage with the messaging and this exposed existing inequalities for many citizens including travellers and refugees. Similarly, some countries were quicker to include Sign Language Interpreters. At times public communication was considered contradictory causing confusion and resulted in surges of new cases in countries such as the UK, Japan and Ghana. Further to this, new language was quickly adopted by governments, experts and citizens including terms such as social distancing, social bubbles, and cuddle contact (Belgium) and these had to be explained clearly before being adopted into everyday vernacular.

It is clear, as Democratic Society's report highlights (Kambli *et al.* 2021, p. 14) that clarity of message is key for compliance and that messaging needs to be clear and straightforward.

Trust of leaders and experts

The popularity or trustworthiness of the government has had an impact on how citizens responded to policy decisions and the Covid response. For instance, in South Africa there was a general sense of anxiety around the authoritarian rules being implemented. The Covid response was driven by President Ramaphosa, supported by a National Command Council, and introduced one of the strictest lockdowns including a ban on the sale of alcohol. Arguably the public felt uneasy about these tighter restrictions and shift of power into the hands of the governments due to their historic relationship with a dictatorship. However, by presenting the scientific councils as the main communicators during press conferences, this helped to build public trust.

Interestingly in Taiwan, a liberal democracy with a very effective digital civic infrastructure, they were able to respond quickly to the pandemic and keep the public informed from very early on. They adopted an open source of information on Covid. They set up a call centre number 1922 that was always answered and calls could be escalated to an upper level if necessary. Ultimately many key ideas or problems were responded to within 24 hours and they made use of social media to ensure the public knew how responsive they were being, thus effectively closing the feedback loop. They Crowdsourced solutions and had daily briefings. Much of the messaging was based on rational choice, individual freedom, and a public message to 'protect yourself'.

In contrast, many other countries pushed home the sense of community and 'all being in it together', including UK, Australia and New Zealand.

Scientific experts became household names in all countries. The adoption of science-led information has brought scientists, epidemiologists and virologists into the home like never before, and in countries like Australia and New Zealand a high level of trust for these experts was seen. Despite the controversial behaviour of the Government in Brazil, experts and doctors found themselves to be an integral part of communicating and breaking down evidence for the public. It was perceived that this vital role 'humanised the experts' throughout the pandemic which resulted in a positive outcome. Yet, this created strong tensions between scientific rhetoric and Government rhetoric meaning the public often did not know who to listen to. Interestingly experts had already been playing a significant role in Australia due to the 2019/20 droughts and bush fires so this had become quite normal for the public. Although similar levels of trust were seen in the UK, medical experts also experienced online abuse and were even attacked in public.

Representatives from Scotland and Ghana all remarked that the daily/ weekly briefings were met with cynicism at times as Government officials were perceived to be politicising the briefings or running an electoral campaign. Conversely, these briefings were trusted and a better rapport seemed to develop over time in New Zealand despite an election also being held during the pandemic (Oct 2020). The continued trust in the Government could be attributed to the low community transmission and low death rates that they were witnessing there.

Vaccinations

Some countries are doing significantly better with their vaccine roll-out which is linked not just to trust of government and scientists, the spread and impact of misinformation but also based on the perceived risk of Covid (Lindholt *et al.* 2021). In Australia it was described as a 'failed vaccine roll-out' and in Malaysia there has been a lot of vaccine hesitancy. When asked, 40% surveyed in Malaysia said they were concerned about transparency, speed of vaccine development, concern that the public was not well informed, and others safety and side effects issues. This is a pattern seen more widely too: a recent study by Lindholt *et al.* (2021) found that vaccine acceptance was as low as 47% in France and Hungary. In South Africa the trust is perceived to be rapidly unravelling, with an estimate that it will be between 16 months – 2 years before people are eventually vaccinated. In many countries' politicians have had their vaccines administered on TV in order to gain public trust.

There are many examples of "breaking down science" and bringing it to the communities by using various platforms to talk about vaccines, such as townhall meetings, social media, and going into schools. This also included engaging famous or public actors to talk to the public.

Critically to ensure trust with experts, there needs to be high levels of transparency, clear communication, the experts must be held to high standards themselves. As the report (Kambli *et al.* 2021, p.13) tells us, there is a real need to include social scientists to improve the communication but also to determine the impact of many of the decisions that were being made.

Conflict between politics and science

During the roundtable and in the report (Kambli *et al.* 2021, p.13) there was evidence that many scientific advisors felt conflicted by the need to show a united front with politicians but also to remain independent and offer clarity where they did not agree. There are examples where politicians would claim their decisions were being guided by the science but on occasion this was not strictly true, for instance the scientific community argued for lockdown but politicians ignored them.

Many experts suffered from burn-out and fatigue with the pressure of being a public face and the overwhelming burden of upholding public trust. Denmark used the united strength of experts to speak out when they did not agree with government decisions. If many experts were vocal it was felt that the Government would struggle to ignore them. While some experts worked within the official policy-making roles in Government committees in the UK and Ireland, others worked purposefully outwith these in order to maintain pressure on the Government to remain transparent and hold them to account, e.g. the UK's Independent SAGE and Ireland's Independent Scientific Advocacy Group (ISAG). In Brazil, scientific experts often spoke in direct contradiction to the President.

It was felt that the media holds a significant amount of responsibility for sharing the key messages – guidelines, evidence, rules – with an emphasis on telling the truth and scrutinising public facing actors. Experts have a duty to make themselves available to the media to help them do that. However, mixed messages and sensationalist headlines have driven polarisation and scepticism in some areas.

Misinformation

Misinformation, fake news and conspiracy theories have been particularly prominent during the pandemic and have spread through social media. In Malaysia a few groups provoked vaccine hesitancy which then had to be quelled by both individual and concerted responses from established scientific and medical communities. Without challenging this, the false narrative became persuasive. The country's leaders needed to produce united statements to dispel this misinformation. It can be seen that this is still challenging for the vaccine roll out.

In other contexts, misinformation or conspiracy theories were met with humour (Canada and Taiwan) or a lack of patience/no nonsense approach in Australia. Finland used social media influencers to dispel the sharing of misinformation and to spread credible, sourced evidence. Also in Finland, they have made effective strides to increase media literacy by teaching school students about digitally altered images, fake news and misinformation. Finland's efforts (Kambli *et al.* 2021, p. 26) to tackle fake news and misinformation and Canada's *Let's Talk Science* (Kambli *et al.* 2021, 14) are particularly notable in that they are working towards creating a critical body of citizenry capable of recognising credible sources and unpacking government information.

Exacerbating inequalities

In all countries the ability of citizens to comply with restrictions has been limited by a range of issues. In many countries, those working in low paid or precarious employment tend to have public facing jobs, have to use public transport and are unable to afford to self-isolate meaning that they were more likely to risk catching the virus. Limited sick pay provisions in countries like Brazil exacerbated this issue.

In Ghana the pandemic exposed weaknesses in the infrastructure including the number of ICU beds available and the need for district and regional level testing. There were significant backlogs and delays in letting people know they had the virus, putting Ghana's performance position (in the context of Africa as a whole) as fairly strong, but not so strong for the country itself.

In Australia some of the indigenous communities managed to keep the pandemic at bay as the Government accommodated them to close their borders. But in other instances, such as New Zealand, Maori and Pasifika communities were not brought into decision-making until later, therefore these longstanding structural issues in New Zealand were hindering the roll out of the Covid response.

In South Africa there are significant inequalities. NGOs and church groups launched an impressive response to help those who were struggling. Not wearing masks became a criminal offence and citizens were encouraged to wash hands, but in many parts, there is no water in communities and in schools. The Government rolled out water provisions to the

whole country through tankers and pipe lines prompting questions as to why this had not been done before. Social inequality was particularly felt in education. Due to being online and the requirement for equipment, many young people were not resourced in rural areas. In South Africa they had social grants programme (Government "levelling up") and £18 a month to help people cope with Covid-19. In Malaysia, the second wave highlighted issues for foreign workers and their living conditions. In Australia and the UK, the pandemic led to conversations about how cities have been occupied with limited access to green spaces available to many citizens and that there needed to be a renewed emphasis on urban planning.

Innovative approaches

The roundtable was an effective way to share "out the box" thinking. For instance, in Australia they experienced a breakthrough where the government tracked the sewage data which allowed them to locate a suburb or area where SARS-CoV-2 – the virus highly associated with Covid-19 - was prevalent. Therefore, they were able to identify areas which required testing and more stringent policies. The public responded to this and where Covid was identified in sewage it led to a higher take up of the public getting tested in that area. In order to combat misinformation or conspiracy theories in Taiwan they used 'humour over rumour'. The Government would look to trending rumours, for example seeing that people were panic buying tissue paper, and they used humour to diffuse a tense and anxious time.

By doing it this way they reached more people, and within a couple of days, panic buying had stopped. They also used a much more participatory approach to problem solving. They made masks a cultural fashion statement and encouraged the public to phone up and suggest solutions where problems existed. The national feeling was that they were all in it together and they used technology and social media to great effect to both publicise public messaging and include the public in problem-solving. In Canada one of the standout learning opportunities was their 'Let's Talk Science' programme which goes to schools and talks to children about the pandemic and vaccines.

Implications for democracy

Many of the themes raised above clearly link to public participation in decision making and raises questions about the implications for democracy. Increased restrictions on people's movement, increased police powers, contact tracing, limited access to basic rights (greenspaces, companionship), and curfews and in extreme situations, information being removed from the public domain (Brazil) have all meant that freedoms previously taken for granted by many have been curbed.

Where countries have done best they have listened to the public, co-produced solutions and created a partnership between decision makers and those whom the decisions most impact. Clarity and accessibility of public messaging is key to inclusion and equal ability to take part.

Confusion and disunity led to a lack of trust and frustration with those in charge. Compliance does not necessarily indicate trust in the government but instead, trust of the scientific experts. Hearing from people and better understanding what prevents them from complying has to be done on the public's own terms, recognising the significant challenges people are facing. A conflict between science and politics exists and the media and experts have a significant role to play in ensuring the key messages are not lost in translation. Citizens must be trusted to understand the complex and nuanced nature of science, and if it is communicated appropriately, they are capable of critically engaging with it. Citizens understand that the science is constantly changing as we learn more, and governments need to be open and transparent about this.

As we understand, vaccine hesitancy is created by fear and misinformation, but as the World Health Organisation (WHO 2021) tells us, we require community engagement in order to better understand how communities perceive government responses to the pandemic but also to hear questions, fears and doubts. Misinformation must be tackled at national and local level to dispel conspiracy theories and identify fake news. A critical citizenry is paramount to this. Upskilling the public to recognise good evidence from bad and be able to ask probing questions is an important step here.

References/further reading

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