

Episode: *Author Interview: “Science and Ethics of ‘Curing’ Misinformation”*

Guest: Isabelle Freiling, PhD

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Transcript by: Cheryl Green

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[bright theme music]

TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I’m your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Isabelle Freiling, an assistant professor in the Department of Communication at the University of Utah in Salt Lake City. She’s here to discuss her article, coauthored with Nicole M. Krause and Dr Dietram A. Scheufele: “Science and Ethics of ‘Curing’ Misinformation,” in the March 2023 issue of the Journal, [Clinicians in Government](#). Dr Freiling, thanks for being on the podcast. [music fades]

DR ISABELLE FREILING: Yeah, thanks for having me.

HOFF: So, to start, what’s the main ethics point that you and your coauthors are making in this article?

FREILING: So, we’re talking about that... researchers doing interventions against misinformation, as well-meaning as they might be, are overstepping their authority as scientists, because scientists and science can answer empirical questions and give input to policy decisions, but those decisions are made with input from other stakeholders, too. And trying to socially engineer a desired behavior regarding how people make sense of information, what interventions against misinformation like psychological inoculation and nudging do, is unethical for scientists. And more importantly, those interventions rely on people not consenting to the treatment, which is of course highly unethical and something we would not do when it comes to medical treatment. And thus, science using those interventions to socially engineer behavior risks losing public support for science, especially among some partisan groups, if it blurs the boundaries between empirical questions that science is qualified to answer and policy questions that can only be answered as part of broader public deliberations about facts, values, and societal priorities.

HOFF: And so, what’s the most important thing for health professions students and trainees to take from your article?

FREILING: If we look at how to communicate science and health information equitably, effectively, and ethically to the audiences that are affected by the science or health information, we want to do that without undermining the affected audience’s agency over what to do with the information. And we need to build our communication of that

science and health information on the best available evidence on how to do this. And this includes framing the information in categories that match up with how people and also different publics make sense of information. An example for that is that data collected during the COVID-19 pandemic about a lack of public buy-in for vaccine passports show how effective alternative framings can be. While conservative audiences were concerned about the term “passport,” which resonated with their concerns about government overreach and federal oversight, they were much more likely to support the “vaccine verification” term, which frames the issue of showing vaccination cards as one of individual choice and responsibility.

And of course, not every frame is meaningful to all publics, especially in an era when hyper-partisanship is the new normal, and we all engage in motivated reasoning, especially when processing information that contradicts our values. And also, many of us navigate online environments that are at least partly defined by filter bubbles that echo voices and sources that are consistent with our prior views and preferences. And basically, we need to start to take these realities into account rather than seeing those whom we are trying to persuade as the ones using motivated reasoning and blaming them and the filter bubbles they are in for adverse outcomes or even exacerbating the problem.

HOFF: And finally, if you could add a point to your article that you didn’t have the time or space to fully explore, what would that be?

FREILING: So, one of the most important things we’re facing right now is that we don’t have access to data on social media regarding what information actually ends up in front of people, because we don’t have access to that kind of social media data, to the algorithms, etc. And we can research as much as possible on misinformation in an experimental setting, but if we don’t have that kind of social media data, we do not know what people actually see, what ends up in front of them. [theme music returns] But that is almost an article of itself.

HOFF: Dr Freiling, thank you so much for being on the podcast today, and thanks to you and your coauthors for your contribution to the Journal as well.

FREILING: Yeah, thank you so much.

HOFF: To read the full article, as well as the rest of this month’s issue for free, visit our site, [JournalofEthics.org](https://www.journalofethics.org). We’ll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.