

Welcome to Dispelling COVID-19 Misinformation



March 8, 2023

12:00PM-1:00PM



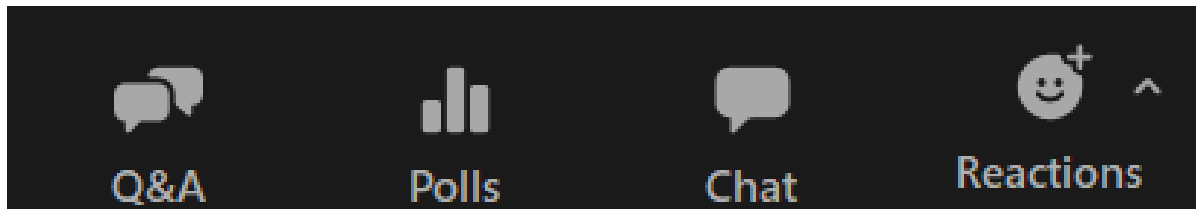
Vaccinate ALL 58

Together we can end the pandemic.



Questions

During today's session, please use the Q&A panel to ask your questions.



Helpful resource links will be dropped into the “chat.”

Housekeeping



For Attendees: This session is being recorded. Please access today's slides and recording through the following link: [EZIZ COVID Crucial Conversations](#)



Please use "Q&A" to ask questions.

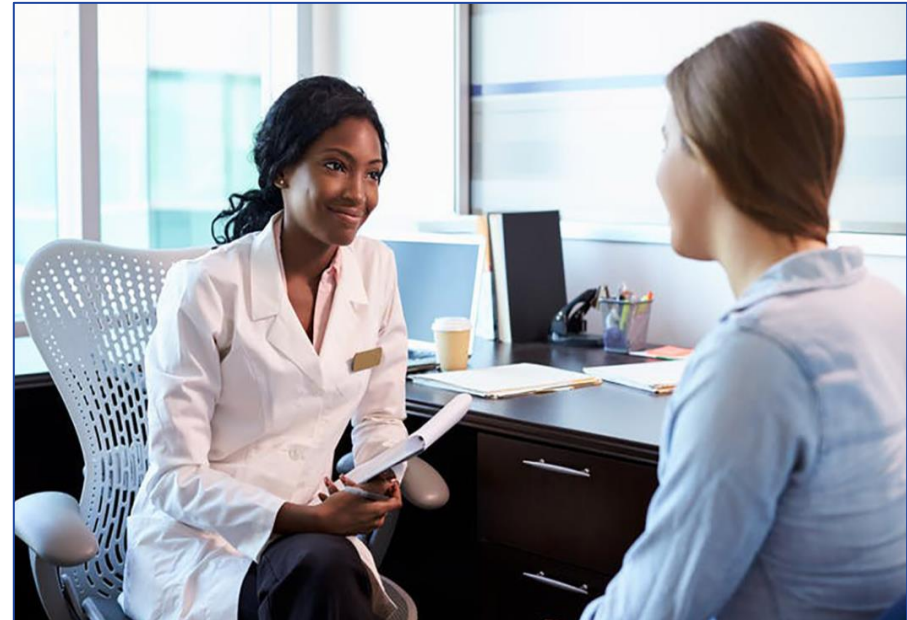
For post-webinar questions, contact rachel.jacobs@cdph.ca.gov

Agenda: Wednesday, March 8, 2023

No.	Item	Speaker(s)	Time (PM)
1	Welcome and Poll	Rachel Jacobs (CDPH)	12:00 – 12:05
2	Dispelling COVID-19 Misinformation	Asha Shajahan, MD, MHSA	12:05 – 12:35
3	Questions & Answers	Asha Shajahan, MD, MHSA, #ThisIsOurShot Floria Chi, MD, MPH, CDPH (COVID-19 Vaccine) Jessica deJarnette, MD, MS, CDPH (COVID-19 Therapeutics)	12:35 – 12:55
4	Poll & Resources	Rachel Jacobs (CDPH)	12:55 – 1:00

This webinar will cover:

- Mis-, dis-, and mal-information overview
- The 3C model for healthcare providers:
Principles for countering medical misinformation
- Talking with patients about COVID-19 vaccines
- Talking with patients about COVID-19
therapeutics



Poll: CDPH appreciates your feedback!

How confident are you in your ability to talk with patients about misinformation and COVID-19?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident



Dispelling COVID-19 Misinformation

Asha Shajahan, MD, MHSA

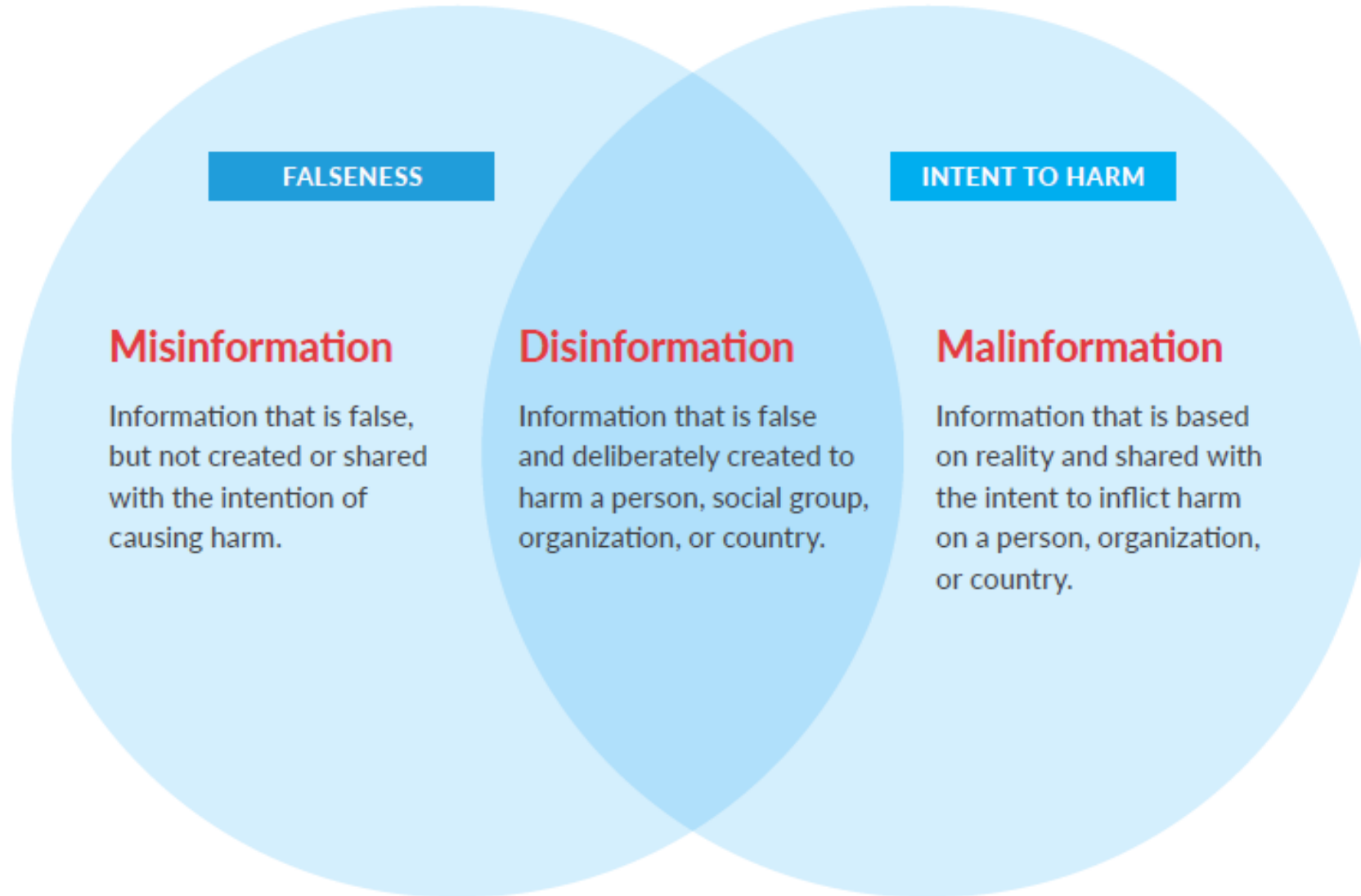
#ThisIsOurShot

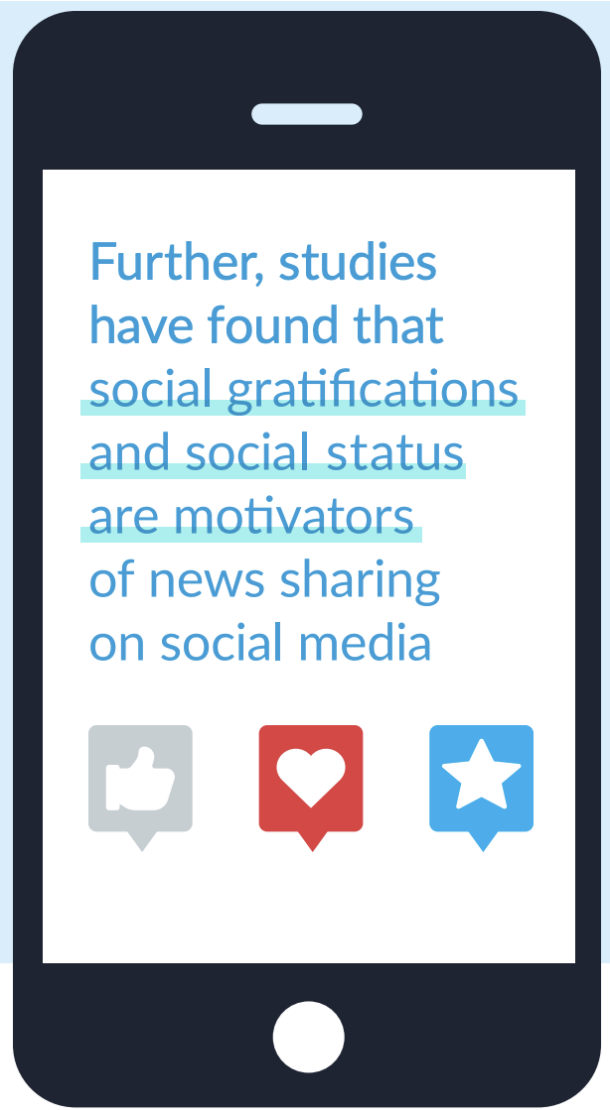




Overview: Mis-, Dis-, and Mal-information

Three Types of Harmful Information

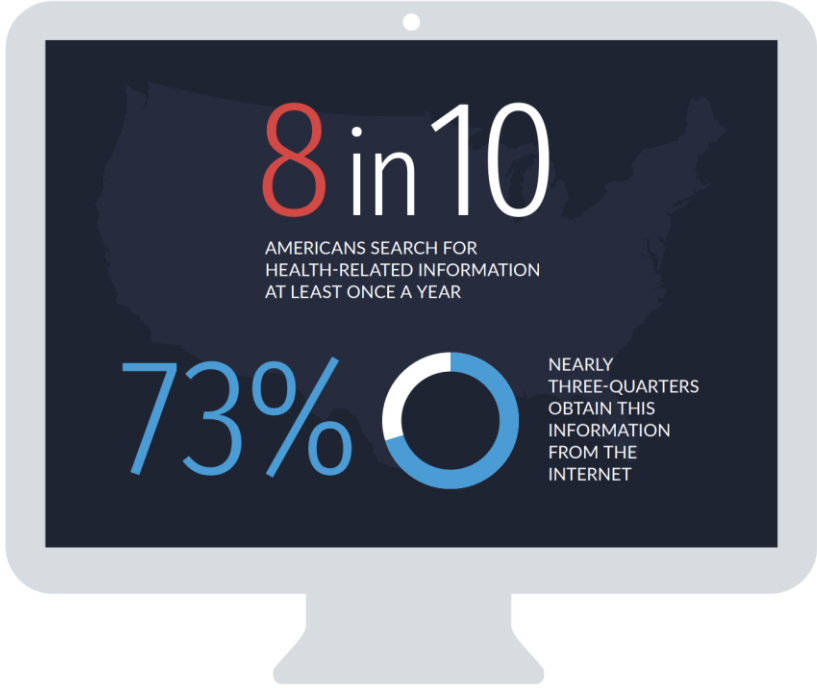




65+



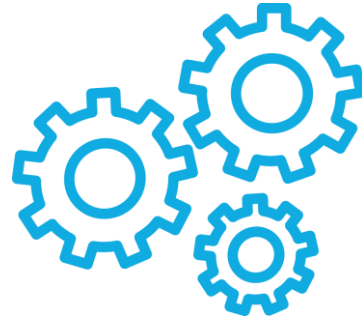
THOSE OVER THE AGE OF 65 WERE SEVEN TIMES MORE LIKELY TO SHARE POLITICAL 'FAKE NEWS' ON FACEBOOK THAN WERE THOSE BETWEEN 18 AND 29



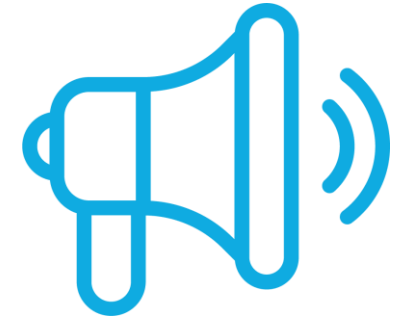
Who Spreads Misinformation?



SOCIAL MEDIA



INDUSTRY



MEDIA



**GOVERNMENT &
POLITICIANS**



**PRIVATE
MESSAGING APPS**

What Makes Us Vulnerable?

01

Motivational Factors

- Insufficient reasoning & attention
- It feels good to share
- Social incentives

02

Psychological Factors

- Cognitive biases & heuristics
- Emotions
- Motivating reasoning

03

Socio-technical Factors

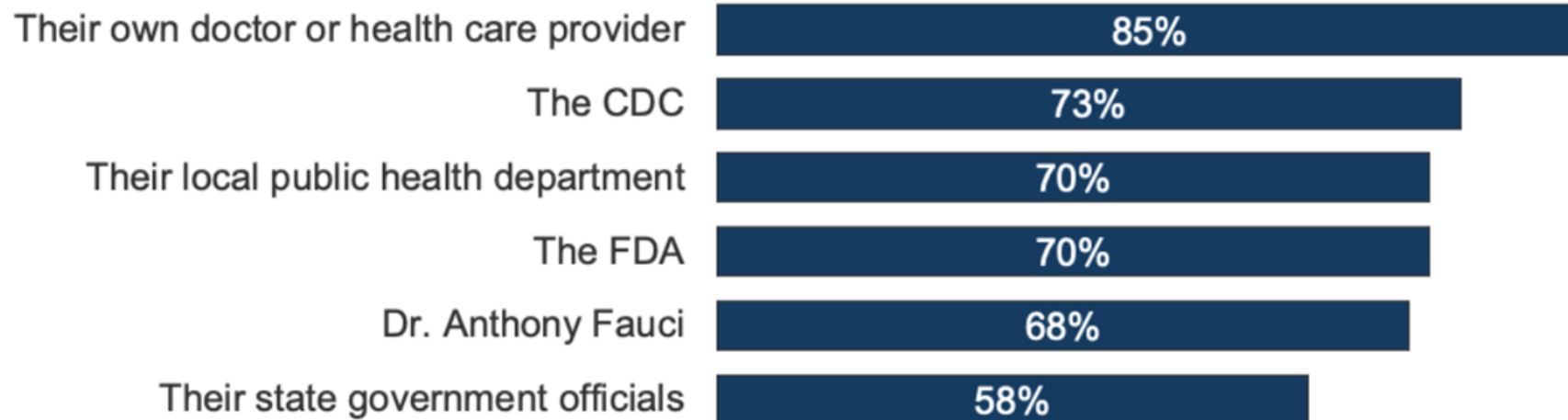
- Constricted information flow
- Echo chambers & filter bubbles
- Information overload

Why should **YOU** combat misinformation on social media?

Figure 15

Personal Health Care Providers Are Most Trusted Source Of Information On COVID-19 Vaccine

Percent who say they have a **great deal** or a **fair amount** of trust in each of the following to provide reliable information about a COVID-19 vaccine:



Why should **YOU** combat misinformation on social media?

- MANY Americans get their news and health information from social media.
- There is a LOT of misinformation out there.
- Healthcare providers are one of the most trusted professionals out there, especially when it comes to health information.
- **Because if you don't, who will?**

HUFFPOST

CORONAVIRUS

Doctors Have Another Enemy To Fight Besides COVID-19 Itself. This Might Help Them.

"Misinformation is causing panic, anger, polarization between political parties, sickness and even death. It's time to assign it a diagnostic code."

Asha Shajahan, M.D., *Guest Writer*
07/15/2020 09:00 AM ET | Updated 2 days ago

📖 📘 🐦 ✉️ 🗨️

HOW TO SPOT FAKE NEWS

CONSIDER THE SOURCE

Click away from the story to investigate the site, its mission and its contact info.

READ BEYOND

Headlines can be outrageous in an effort to get clicks. What's the whole story?

CHECK THE AUTHOR

Do a quick search on the author. Are they credible? Are they real?

SUPPORTING SOURCES?

Click on those links. Determine if the info given actually supports the story.

CHECK THE DATE

Reposting old news stories doesn't mean they're relevant to current events.

IS IT A JOKE?

If it is too outlandish, it might be satire. Research the site and author to be sure.

CHECK YOUR BIASES

Consider if your own beliefs could affect your judgement.

ASK THE EXPERTS

Ask a librarian, or consult a fact-checking site.

IFLA
International Federation of Library Associations and Institutions
With thanks to www.FactCheck.org



ASHA SHAJAHAN

> Many times people who are vaccinated or people who are promoting the vaccine tend to meet people with judgments, and that just doesn't help.



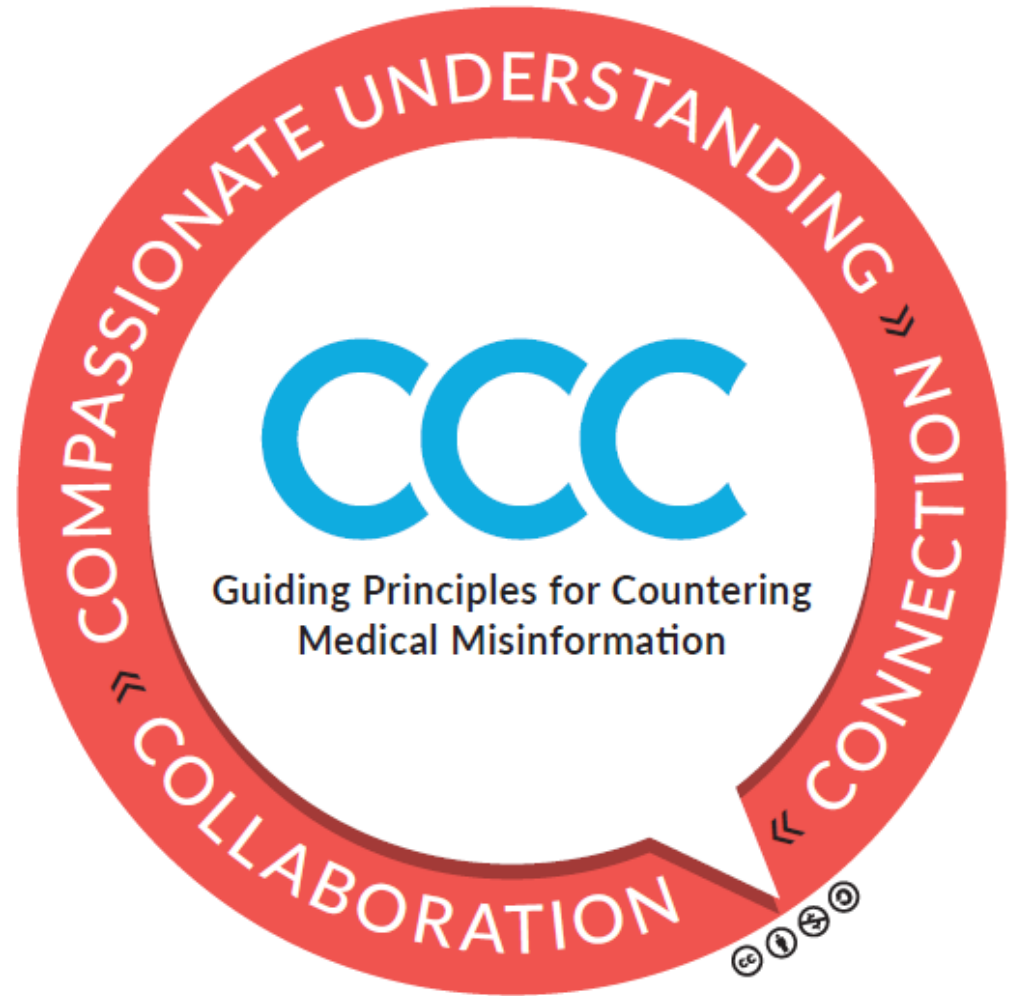
Visit the COVID-19 Information Center for vaccine resources.



The 3C Model for Healthcare Providers

The 3C Model for Healthcare Providers

1. Compassionate Understanding
2. Connection
3. Collaboration



Step 1: Compassionate Understanding

Tip 1: Initiate Bi-Directional Conversation

“Tell me more about why you feel that way.”

“Tell me a little bit about what you know or have heard about that treatment.”

“What are your concerns about that treatment?”

Tip 2: Allow for Patient Self-Expression

Providers should actively listen, employ an open posture, and offer non-verbal cues that demonstrate that they are actively trying to understand the patient. Patients may share cultural beliefs, fears, hesitations, or areas of concern that they wished they knew more about.

Tip 3: Identify what matters to the patient

“Can you share with me what matters most to you in this decision?”

“Can you teach me more about your needs?”

“Why does [e.g., this alternative medicine] appeal to you?”

Step 2: Connection

Tip 4: Meet with Compassion

“Thank you for sharing so openly with me about your concerns and goals for your health.”

“I’m so happy you are looking into your health.”

“I applaud your commitment to your child’s health.”

Tip 5: Confirm what is true and what is false

“Would you like for me to share with you my understanding of the latest research around [treatment]?”

“I am curious to know what questions you have based upon the information that I just shared.”

“How are you feeling right now, especially after receiving that new information?”

Understand patient motivations to help frame your response

Motivation	Response Framing	What to Say
Collective Interests & Social Motivations	Appeal to in-group (members of the patient's community) norms & highlight social group approval	<i>"Almost half the girls your age have received the HPV vaccine"</i>
Political Affiliations	Highlight an overarching identify or highlight bi-partisan support	<i>"A lot of Republican Congress Members were, at first, suspicious of the vaccine but after consulting their expert advisors about the evidence of its safety, most of them have received both doses of the vaccine"</i>
Align with Individual Interests & Values	Focus on how their decision could be beneficial to others	<i>"Getting vaccinated for the flu is an important way we can protect the people we love, like our grandparents, who are more susceptible"</i>

Step 3: Collaboration

Tip 6: Build on Common Ground

“We both want your diabetes under control and for you to feel safe taking your medication.”

“It is clear to me that we both wish to move forward in whatever way is best for your child’s long term health.”

Tip 7: Offer Recommendation, Allow Input

“Thank you for sharing so openly today. Would you like me to share what I would recommend for next steps?”

“How do you feel about this recommendation? Do you have any remaining concerns?”

Tip 8: Wrap Up, Follow Up and Readdress

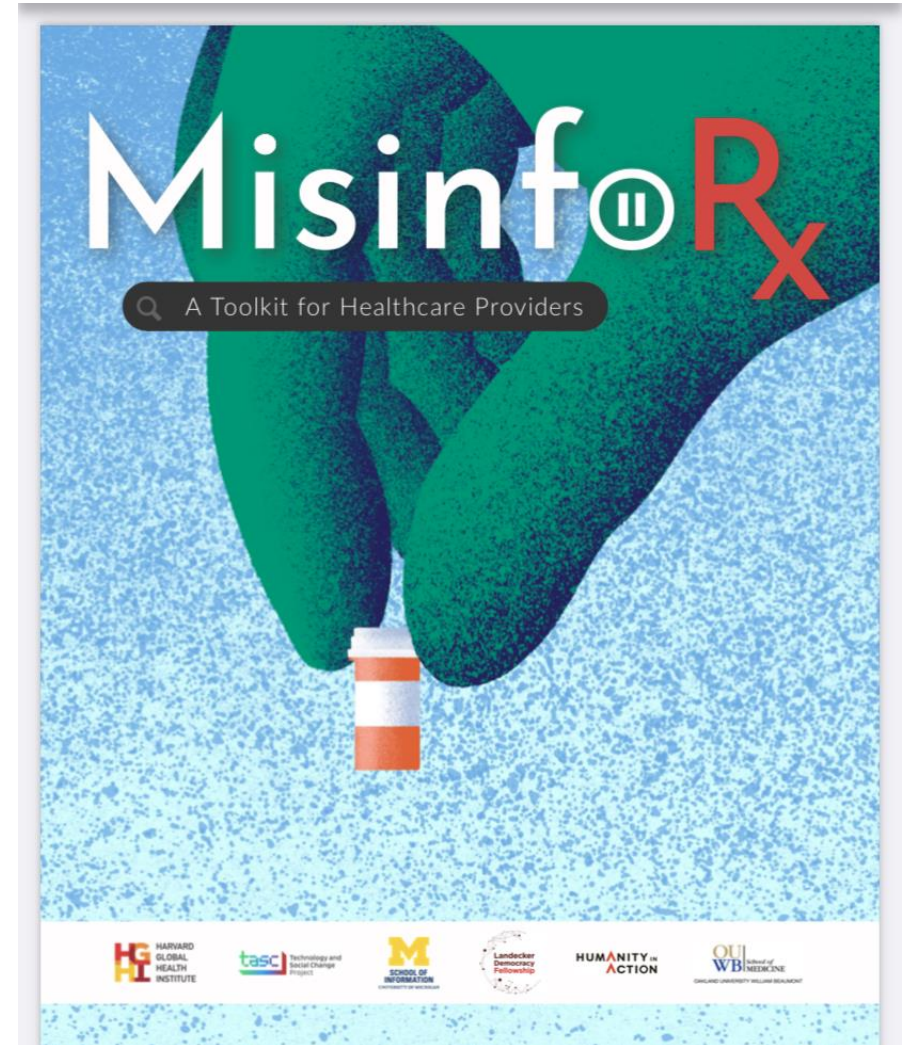
When concluding the conversation, summarize the plan with the patient. Providers can use the “teach back” method for summarizing shared goals.

Download the toolkit!

misinforx.com/download

Questions?

Asha Shajahan: msshajahan@gmail.com





A Community Toolkit for Addressing Health Misinformation

Information that is false, inaccurate, or misleading according to the best available evidence at the time

Office of the U.S. Surgeon General 2021

NewsGuard is a free online tool created by experienced journalists that assesses if a news website is

Reliable **or** Unreliable

Government Communication Service

RESIST 2
Counter-disinformation toolkit

THIS IS OUR SHOT

THE DISINFORMATION DOZEN

WHY PLATFORMS MUST ACT ON TWELVE LEADING ONLINE ANTI-VAXXERS

CCDH
Center for Countering Digital Hate



Talking with Patients about COVID-19 Vaccines

Most U.S. adults have not yet received an updated (bivalent) COVID-19 booster



An **updated booster** may reduce your risk of severe COVID-19 by 50% or more*



For the best protection, get an updated booster



*Vaccine effectiveness varied based on previous vaccination status of the control group and outcome studied

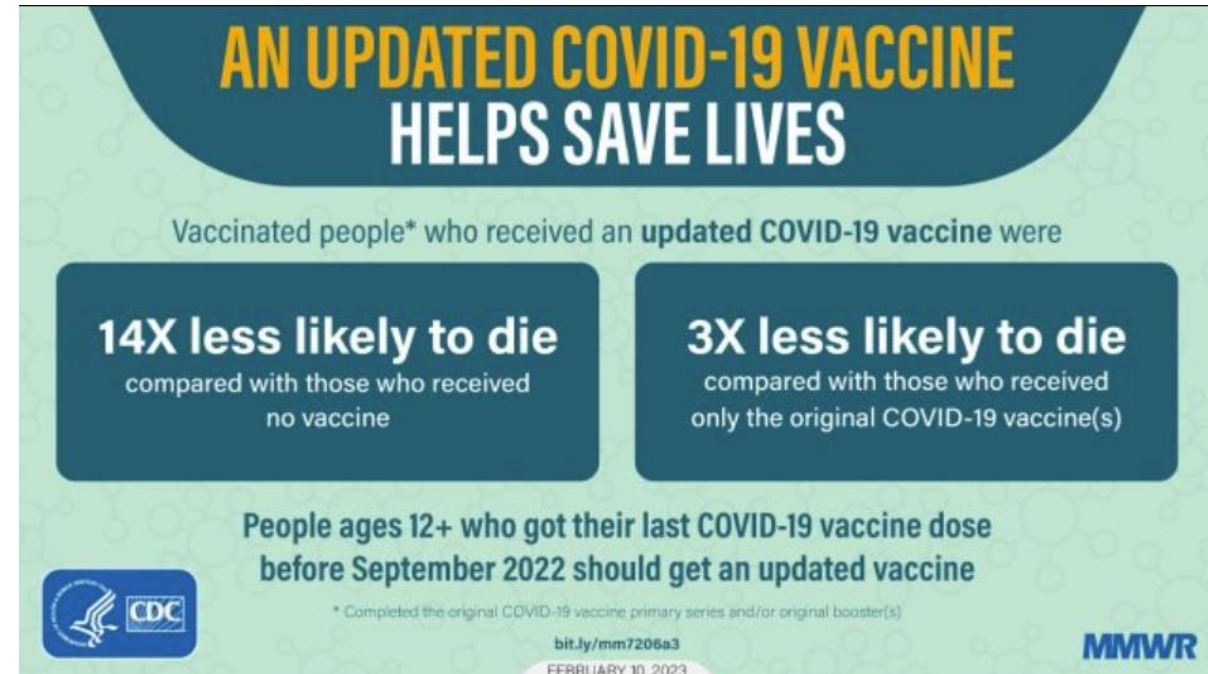
bit.ly/MMWR_COVIDVaccination

DECEMBER 16, 2022

MMWR

Is the updated COVID-19 booster really necessary?

- The updated COVID-19 booster vaccine is **strongly recommended** for all individuals ages 6 months and older.
- COVID-19 vaccines, including booster doses, have been added to the [CDC child and adolescent routine immunization schedules](#).
- Recent data shows that the updated booster provides:
 - Added protection against symptomatic infection in individuals 5 years of age and older
 - Added protection against emergency department (ED) visits and hospitalizations in adults 18 years of age and older



[CDC MMWR: COVID-19 Incidence and Mortality Among Unvaccinated and Vaccinated Persons Ages 12 Years and Older: 2.10.2023](#)

Why do I need the COVID-19 vaccine if I have been sick with COVID-19?

Getting vaccinated is a safer and more dependable way to build immunity to COVID-19 than getting sick with COVID-19.


- Getting a COVID-19 vaccine gives most people a high level of protection against COVID-19 and can provide added protection for people who already had COVID-19.
- One study showed that, for people who already had COVID-19, those who do not get vaccinated after their recovery are more than 2 times as likely to get COVID-19 again than those who get fully vaccinated after their recovery.

Does COVID-19 affect children?

Unfortunately, yes.

In the United States:

- Over 15 million children have become ill with COVID-19
- Over 185,000 children have been hospitalized with COVID-19
- Over 2,000 children have died from COVID-19.



Benefits of the COVID-19 vaccine
(6 months-11 years)

COVID-19 vaccination and boosters are a safe way to protect your kids against the virus and its variants

The side effects of the vaccine are **usually mild** and can include:

- crying
- soreness
- sleepiness
- headache
- chills
- nausea
- vomiting
- fever

COVID-19 vaccination and boosters are a safe way to protect your kids against the virus and its variants.

The FDA granted authorization to Moderna and Pfizer's updated bivalent vaccines for infants and toddlers as they met FDA's rigorous standards of safety and efficacy.

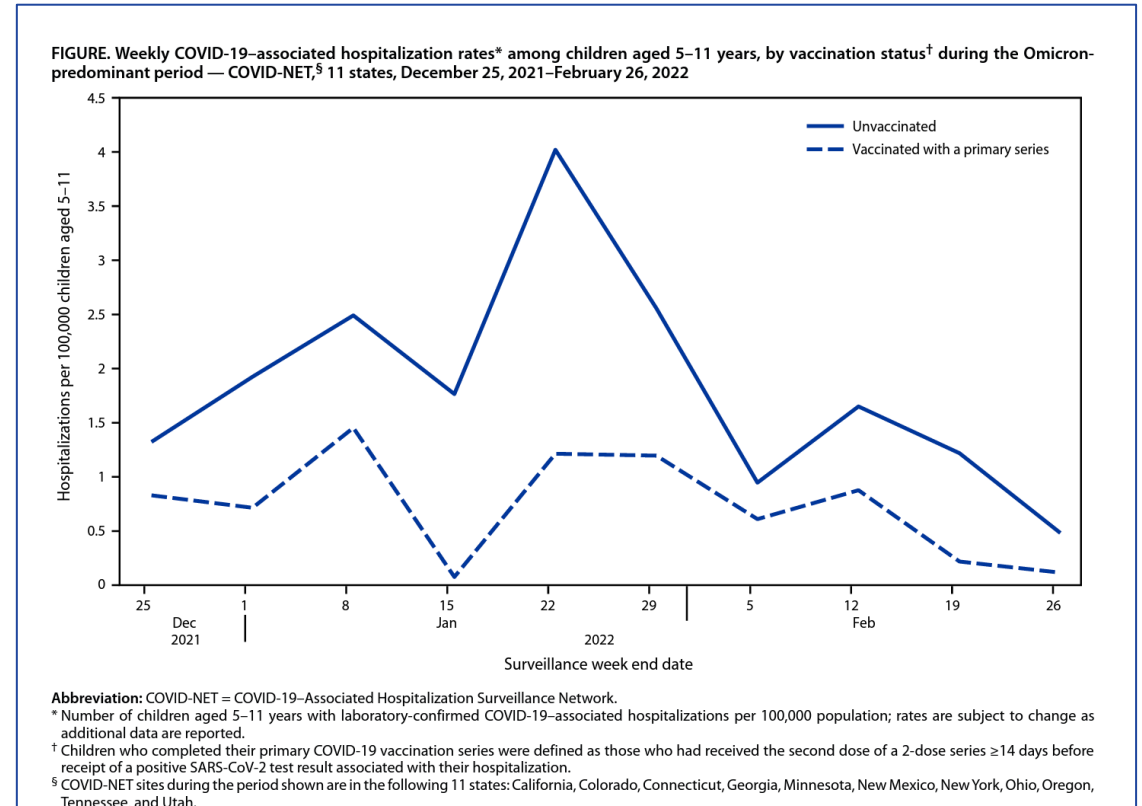
Vaccines contribute to kids' mental health by allowing a return to normalcy:

- ✓ activities they love
- ✓ socializing with friends
- ✓ celebrating milestones
- ✓ attending school without interruption

[CDPH COVID-19 Communication Toolkits](#)

Why should my child get the COVID-19 vaccine?

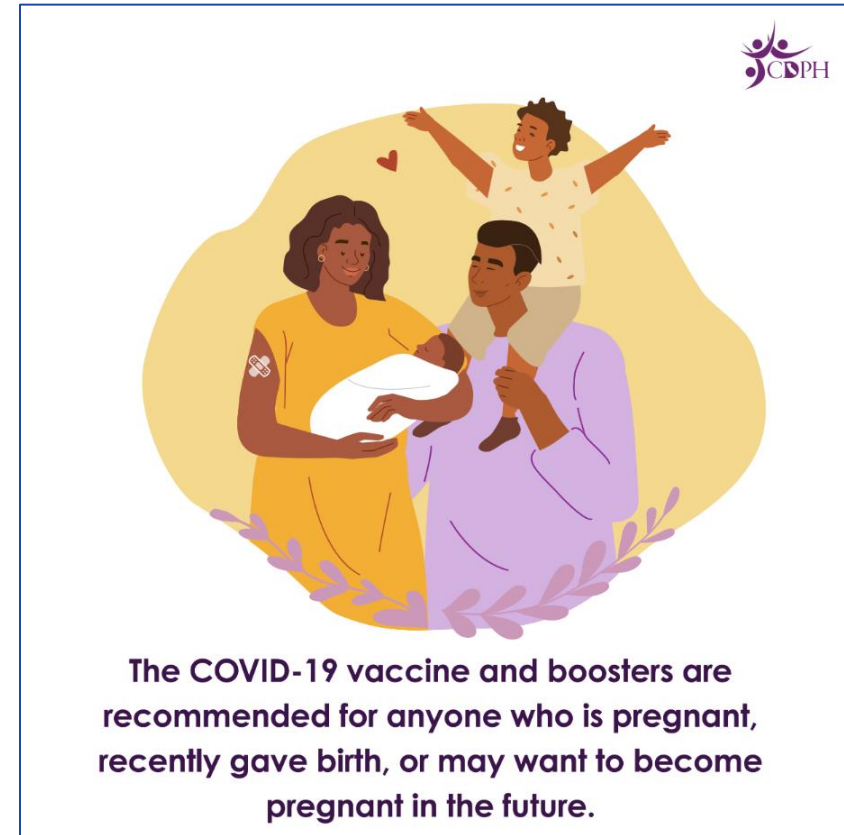
- During the Omicron period, unvaccinated children were more than **twice as likely** to be hospitalized for COVID.
- Multisystem Inflammatory Syndrome in Children (MIS-C) is a serious condition that can happen in children after infection with COVID-19, even if they had mild symptoms or no symptoms at all.
 - The COVID-19 vaccine lowered the risk of MIS-C by **91%, according to data from July-December 2021**.



[CDC MMWR: Hospitalizations of Children Aged 5–11 Years with Laboratory-Confirmed COVID-19](#)

Do COVID-19 vaccines affect fertility & pregnancy?

- Currently no evidence shows that any vaccines, including COVID-19 vaccines, cause fertility problems (problems trying to get pregnant) in women or men.
- COVID-19 vaccination is recommended for people who are pregnant, trying to get pregnant now, or might become pregnant in the future, as well as their partners.



[CDPH: Pregnancy and COVID-19 Vaccines](#)



Talking with Patients About COVID-19 Therapeutics

Why should I take COVID-19 treatment?

- Scientific evidence shows that COVID-19 treatments prevent serious illness, hospitalization, and death from COVID-19 by **up to 88%**.
 - For example, people who take Paxlovid are up to **8 times less likely to need hospitalization** and **10 times less likely to die from COVID-19**.
- Treatments like Paxlovid can prevent the virus from multiplying in your body and infecting more of your cells, which can help you **test negative sooner**.

The infographic features a central dark green speech bubble with the text 'Positive for COVID 19? TREAT IT! Getting treatment right away can make a big difference!'. Below this are three smaller callouts: 'Treatment is free and accessible for all Californians' (blue), 'Feeling sick? Get tested!' (green), and 'Tested positive? Get treatment!' (pink). At the bottom, a dark blue bar contains the text 'Learn more at: covid19.ca.gov/treatment' and 'Call 1-800-232-0233 to find a test to treat location near you!'. The logo 'My Turn.ca.gov' is in the top left corner.

Do I need COVID-19 treatment if I'm “not that sick”?

- COVID-19 is different than a cold or the flu.
- COVID-19 treatment needs to be started within 5 or 7 days of symptom onset. If you wait until symptoms worsen, it may be too late.
- Mild symptoms can progress to severe.
- Treatment can significantly reduce your risk of severe illness, hospitalization and may reduce risk of long COVID.

Am I eligible for COVID-19 treatment?

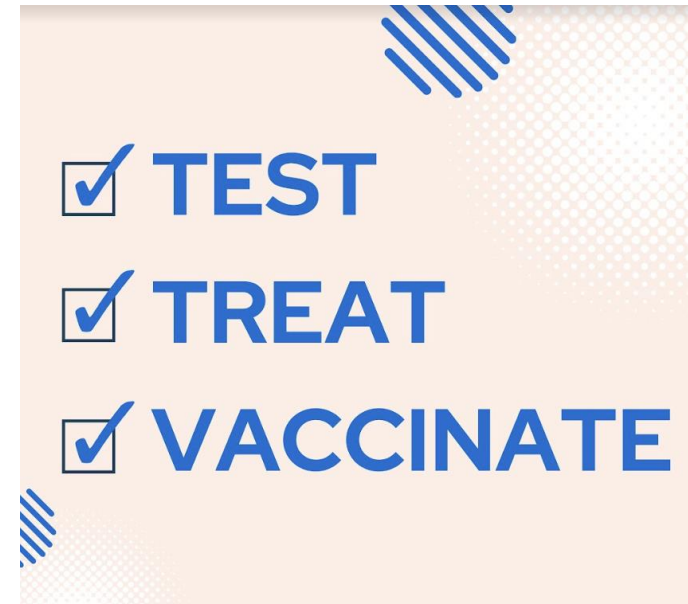
- Most of us don't think of ourselves as "high-risk."
- **In fact, most adults are eligible and should take COVID-19 treatment.**
- Eligible adults have conditions that put them at higher risk for worse COVID-19 illness, such as:
 - Obesity; BMI >30
 - Physical Inactivity
 - Age >50 years
 - Unvaccinated
 - Negatively affected by social determinants of health, such as race, ethnicity, socioeconomic status, or limited access to healthcare
 - People living with diabetes, mental conditions, chronic lung disease, chronic kidney disease, cardiovascular disease

Do treatments have serious side effects?

- Most people have little-to-no side effects
- In clinical studies of Paxlovid, side effects occurred for less than 10% of patients
 - Bad taste (6%)
 - Diarrhea (3%)
- Drug-drug interactions need to be carefully assessed

Do COVID-19 medications cause rebound?

- COVID-19 rebound can occur with or without treatment.
- Less than 20% of people experience COVID-19 rebound.
 - Rebound has been reported at higher rates in those who take Paxlovid.
- If symptoms do return, they are often mild.



The Best Way to Protect Ourselves is Still...
To Be Vaccinated

It doesn't have to be perfect!

- Your job is not to “convince” people or always have the “right” answer.
- You are just one part of the conversation.
- Do your best!

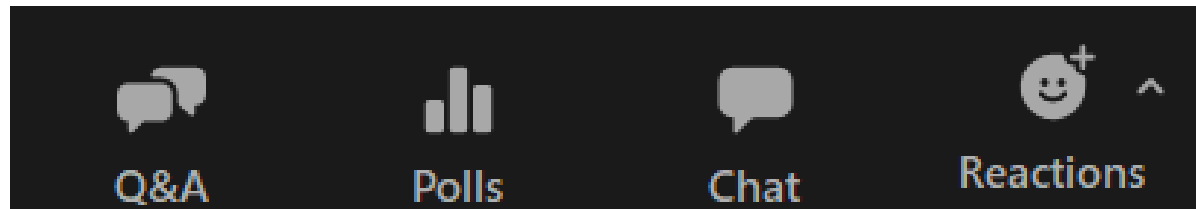


Poll & Resources

Rachel Jacobs, CDPH

Questions

During today's session, please use the Q&A panel to ask your questions so CDPH subject matter experts can respond directly.



Helpful resource links will be dropped into the “chat.”


Poll: CPDH appreciates your feedback

Following this webinar, how confident are you in your ability to talk with your patients about misinformation and COVID-19?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident



CDPH Myths & Misinformation Toolkit

VACCINES HAVE PROVEN TO BE SAFE 

1. How were COVID-19 vaccines authorized?

- Vaccines are only authorized after data review shows clear evidence that they are safe, effective, and any benefits outweigh the risks of vaccination.
- COVID-19 vaccines will continue to undergo the most intensive safety monitoring in U.S. history. COVID-19 vaccine development followed the same steps as other vaccines to ensure they were safe and effective, and no trial phases were skipped.
- Thanks to V-safe, VAERS, and VSD, we know that the vaccine is an incredibly safe way to protect adults and children against COVID-19.

2. How do we know mRNA vaccines are safe and effective?

- We have been studying coronaviruses for years. Prior to the development of the COVID-19 vaccines, researchers had been working with mRNA vaccines for decades.
- We have over two years of data through many clinical studies that shows that mRNA COVID-19 vaccines are an incredibly safe and effective way to protect against severe illness by COVID-19 infection. In addition, mRNA vaccines have been safely given to billions of people around the world.

3. What treatments are available if I get sick from COVID-19 infection?

- The FDA has authorized several COVID-19 therapeutics after scientific evidence showed that they were effective in reducing the risk of serious illness from COVID-19. Reach out to your healthcare provider to learn if these medications can help manage your COVID-19 symptoms.
- The FDA has not authorized Ivermectin for use in preventing COVID-19 as it has not been shown to be safe or effective for humans.

YOUR CHILD'S DOCTOR
~~The internet~~
is a great resource
for questions about
COVID-19 vaccines
for kids.

MyTurn.ca.gov


COVID-19 Therapeutics Myths and Facts Job Aid

COVID-19 Therapeutics Myths and Facts

How to dispel misinformation about treatments

MYTH:
I don't need medication for a mild-to-moderate illness.


PROVIDER ANSWER:
Lots of us are used to waiting out similar cold and flu symptoms to see if they get "bad enough" to need treatment. COVID-19 is different: lots of us are still at risk of having our mild or moderate symptoms develop into something more serious. The treatments can keep you out of the hospital and prevent you from dying, and early evidence shows they may even reduce your chance of developing long COVID.





MYTH:
I'm not high risk.

PROVIDER ANSWER:
Most of us don't think of ourselves as "high risk." However, there are many factors that can make even very healthy people more susceptible to becoming very ill from COVID-19. The truth is: the majority of adults fit into one of these categories. They include:

1. Anyone over age of 50.
2. People living with diabetes, mental conditions (anxiety, depression, ADHD, and more), chronic lung disease (including asthma), chronic kidney disease, and cardiovascular disease.
3. People who are overweight, physically inactive, or who smoke.
4. People who are negatively affected by social determinants of health, such as race, ethnicity, socio-economic status, or limited access to healthcare.
5. People who are unvaccinated or not up-to-date with vaccinations.



Scan the QR code to read more about COVID-19 treatment resources.




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COVID-19 Therapeutics Myths and Facts:

MYTH:
Treatments have serious side effects.


PROVIDER ANSWER:
Of course, we all worry about side effects! Fortunately, most people have little-to-no side effects. In clinical studies of Paxlovid, side effects occurred for less than 10% of patients. The most common side effect of Paxlovid is an unpleasant taste in the mouth, which occurred for 6% of people; smaller percentages of people have experienced diarrhea (3%), hypertension (1%), and/or muscle aches (1%).

Abdominal pain and general malaise have also been noted outside of clinical studies. Some other medications may need to be adjusted while you are taking Paxlovid. If you cannot take Paxlovid for any reason, you may be offered molnupiravir (Lagevrio) instead. Molnupiravir has very few side effects, but you cannot take it if you are pregnant.




MYTH: Rebound caused by treatments is common and can be dangerous.

PROVIDER ANSWER:
Rebound has been in the news a lot! The thing that most people don't realize is that viral rebound happens in people who don't take treatments as well as those who do, and less than 1 in 5 people experience rebound. It does happen somewhat more frequently among people who take Paxlovid. For some people, taking Paxlovid will help you test negative sooner. But for some, the symptoms may return. The good news is that if your symptoms do return, they tend to be mild and do not require repeating the treatment.



HELPFUL RESOURCES FOR PROVIDERS:

- [COVID-19 Therapeutics Decision Aid \(hhs.gov\)](https://hhs.gov)
- [Underlying Medical Conditions Associated with Risk for Severe COVID-19 | CDC](https://www.cdc.gov/media/releases/2022/s220113-covid-19-risk-factors.html)
- [Information Sheet: Paxlovid Eligibility and Effectiveness \(hhs.gov\)](https://hhs.gov)
- [Have questions? Email COVIDRxProviders@cdph.ca.gov](mailto:COVIDRxProviders@cdph.ca.gov)



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Resources to Connect with Healthcare Professionals



Join **#ThisIsOurShot / #VaccinateYa** for newsletters about COVID-19 and vaccine-related talking points, and social media tips for physicians:

<https://thisisourshot.info/> / <https://vaccinateya.com/>



Join **Shots Heard Round the World** to connect with a network of health professionals dedicated to combating online harassment of HCPs:

<https://shotsheard.org/>



Health Defend is the evolution of these three programs. It is designed to educate, empower, equip, and defend healthcare professionals so they feel confident amplifying their trusted voice through social media.

<https://www.healthdefend.com/>

COVID-19 Vaccine Resources and Support

Type of Support

Description

Updated 11.15.22



COVID-19 Provider Call Center

The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.

- Email: covidcallcenter@cdph.ca.gov
- Phone: (833) 502-1245, Monday through Friday from 8AM–6PM



Enrollment Support

For Provider enrollment support, please contact myCAVax Clinic Operations at

- Email: myCAvaxinfo@cdph.ca.gov



myCAVax Help Desk

Dedicated staff provide up-to-date information and technical support on the myCAVax system.

- Email: myCAVax.HD@cdph.ca.gov
- Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM

For training opportunities: <https://eziz.org/covid/education/>



My Turn Clinic Help Desk

For **onboarding support** (those in the process of onboarding): myturnonboarding@cdph.ca.gov

For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: mail to: MyTurn.Clinic.HD@cdph.ca.gov or (833) 502-1245, option 4: Monday through Friday 8AM–6PM

For job aids, demos, and training opportunities: flu at <https://eziz.org/covid/myturn/flu/> and COVID at <https://eziz.org/covid/myturn/>



Archived Communications

For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit

- Website: [EZIZ Archived Communications](#)

COVID-19 Therapeutics Resources and Support



Type of Support

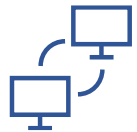
Description

Updated 2.21.23



Clinical Guidance

COVID-19 Therapeutics Warmline: 1-866-268-4322 (866-COVID-CA) is a real time resource for all CA health care providers to access clinical consultation **Monday through Friday 6 am – 5 pm.** (Messages left after hours will be returned on the next business day.) You will be able to speak to a clinician or pharmacist from the UCSF National Clinician Consultation Center.



General Information

[CDPH COVID-19 Treatments Webpage](#) (provides general information for healthcare providers, allocations, distribution and ordering, drug facts sheets, and additional resources)

- [CDPH COVID-19 Treatments Job Aid](#) (questions and answers for the public on COVID-19 therapeutics)

[COVID-19 Therapeutics Best Practices Checklist](#) (testing, prescribing, dispensing, and more)

[Frequently Asked Questions document](#) for clinics, providers, and pharmacists



Locating Resources

Finding Providers and Test-to-Treat Sites

- [COVID-19 Therapeutics Locator](#) (arcgis.com) or call 1-800-232-0233 (TTY 888-720-7489)
- [Test-to-Treat](#) (hhs.gov)



Questions

For general CDPH Therapeutics questions, please email COVIDRxProviders@cdph.ca.gov

For ordering, program inquiries, signing up new HPoP Accounts: please e-mail CDPHTherapeutics@cdph.ca.gov

Upcoming Opportunities



Monday

My Turn and myCAvax Office Hours

Next session: Monday, March 20, 12PM-1PM

Friday

Provider Consolidated Webinar

Next session: Friday, March 10, 9AM-10:30AM

Note: New session length of 90 minutes to include COVID-19 Vaccine and COVID-19 Therapeutics



Special Thanks to Today's Presenter:

Asha Shajahan, MD, MHSA

Q&A Support:

Floria Chi, MD, MPH

Jessica deJarnette, MD, MS

Webinar Planning & Support:

Tyler Janzen, Michael Fortunka, Cecilia LaVu, Blanca Corona, Leslie Amani, Rachel Jacobs

