

Coping with public health 2.0

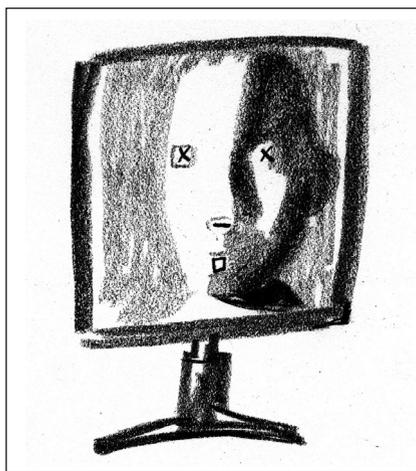
The scope of the Web today is hard to fathom. ... In fewer than 4000 days, we have encoded half a trillion versions of our collective story and put them in front of 1 billion people, or one-sixth of the world's population. ... What we all failed to see was how much of this new world would be manufactured by users, not corporate interests."¹

This statement by the founding editor of *Wired* reflects 2 interrelated phenomena of the Internet: the rapidity of its growth and the amount of information produced by users for free. It is the latter fact, that is at the heart of the second generation of Web services: Web 2.0. These services fuel an individual's desire to connect with others and communicate their views, and allow online collaboration and sharing of content. Web 2.0 applications have grown dramatically in number, size, popularity and influence to include sites such as Wikipedia, YouTube, political blogs such as DailyKos and HuffingtonPost and the social networking sites MySpace and Facebook.

Web 2.0 facilitates both expert and general public communication of health-related knowledge, which can be particularly problematic for public health authorities. De facto, it juxtaposes vetted scientific opinion against information from critics, crusaders and conspiracy theorists, which undermines the critical foundation of trust between public health officials and the public.² This trust is necessary for activities that sometimes require restrictions on individual liberties or impositions on individuals for the benefits of the population.

Antivaccination postings illustrate some of the challenges of this new medium. The usual public health response to concerns about vaccination has been to disseminate well-researched evidence that refutes the claims. To an important extent public health officials have also tried to not bring too much attention to claims made by vaccine critics because of fear that a public debate and subsequent airing of those views, regard-

less of scientific merit, might lend credence to the claims. However, with the Internet and Web 2.0 these strategies are no longer appropriate. YouTube is now being used by a community of individuals concerned about vaccination to communicate their messages.³ MySpace blogs contain a significant number of posts with antivaccination content. Antivaccination viewpoints linking autism to mercury are also being posted on popular blogs such as the HuffingtonPost. By leveraging these new media, vaccine critics have overcome the structural ad-



Fred Sebastian

vantage held by traditional public health in communicating their viewpoints. The consideration of public figures, such as actress-activist Jenny McCarthy, as equivalent an authority, in some media, to top public health officials, and the infiltration of the language and logic of vaccine critics into political discourse is a testament to their success.⁴

The use of Web 2.0 reflects an evolution in medical counterculture movements. Individuals with beliefs outside the mainstream used to have difficulty finding likeminded individuals. But when they did, their ability to hold onto their viewpoints and reject criticism was strengthened. Now, Web 2.0 provides those with alternative beliefs a virtual environment where they can hear their viewpoints echoed and become more confident that their asser-

tions are correct. This interaction also has the potential to sway others.

Although troubling to many in public health, the use of the Internet for these purposes simply cannot be ignored. Web 2.0 is here to stay and will almost certainly influence health behaviours. Health is a logical area in which individuals will want to seek opinions from others and communicate their experiences. In this new era, public health officials need to learn how to more effectively listen to these messages and, simultaneously, develop more lively and engaging messages themselves to communicate with the public.

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