Social Media Information or Misinformation About COVID-19: A Phenomenological Study During the First Wave

Brindha D., PSG College of Arts and Science, India
Kadeswaran S., PSG College of Arts and Science, India
Jayaseelan R., PSG College of Arts and Science, India

ABSTRACT
Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered novel strain of coronavirus, SARS-CoV-2. With the internet, social media has become the most acclaimed tool for freedom of speech, democracy, truth, source of infotainment, and the most-searched venue for information-gathering. However, there are thousands of people spreading information, sensationalism, rumours, misinformation, disinformation, making it crucial for governments and experts to fight the pandemic as well as the infodemic. In this study, the researchers have attempted to find out whether social media is informing or misinforming the public with regard to the COVID-19 pandemic, adopting the qualitative method of phenomenological study. The speed at which information spreads on social media is unimaginable, and the findings will help understand if social media is diffusing information or misinformation to the public about the COVID-19 outbreak. In-depth interviews were conducted using an open-ended question with 13 active social media users from around 11 districts of Tamil Nadu.

KEYWORDS
Coronavirus, COVID-19, Disinformation, ICT, Information, Lockdown, Misinformation, New Media, Pandemic, Quarantine, Social Media

INTRODUCTION
The most severe pandemic of the 20th Century has been the 1918 influenza pandemic, caused by H1N1 virus, which affected one-third of the world’s population and resulted in 50 million deaths (Taubenberger & Morens, 2006). With no vaccine against the infection, efforts to control worldwide were very much limited to non-pharmaceutical interventions that included maintaining good personal hygiene, isolation, quarantine and avoiding public gatherings (Lee, 2018). One hundred years ago, when medical therapies and countermeasures for most of the medical conditions were significantly limited and also information exchange among public to facilitate any health intervention or awareness primarily employed person-to-person interaction, mail or rarely telephone.

DOI: 10.4018/IJICTHD.302081
This article published as an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0/) which permits unrestricted use, distribution, and production in any medium, provided the author of the original work and original publication source are properly credited.
Human coronaviruses were responsible for a considerable proportion of upper respiratory tract infections among children, first in the 1960s (Kahn & McIntosh, 2005). It came to spotlight with the outbreak of SARS (Severe Acute Respiratory Syndrome) in 2003. Now, a century later to the influenza pandemic, coronavirus classified as the Novel Coronavirus (2019-nCoV) and named as SARS-CoV-2 has caused the pandemic, Coronavirus Disease 2019 (COVID-19), currently threatening millions of lives globally. Giant social media platforms have subsumed many methods in order to share information with incredible speed, reach and penetration. Health experts and scientists are using social media to directly engage with the public to share accurate information and discuss awareness, safety measures and emerging research, and community leaders are using it to form networks of public volunteering, to help the vulnerable (Garza, 2020). With more than 2.9 billion individuals accessing social media (Statista report for 2019) on mobile phones regularly, for long stretches of time, it could prove useful at a time when many of us are otherwise isolated from one another. They have become polluted with the inadvertent spread of misleading and false information – misinformation in the form of images, voice messages, text messages and videos. Individuals online, knowingly and unknowingly, spread information at an alarming rate, which could be dangerous or misleading. Information or misinformation on social media can influence public opinion and behaviour with intense consequences, positively or negatively manipulating the perspective of those who consume it.

**ROLE OF ICT DURING CRISIS**

Information and communication technology has opened doors and made anything available for anybody from anywhere all the time. Crisis events world-wide have recorded the notable role played by information and communication technology (ICT) in warning and response activities (Liu, 2007). In many ways, improvements of communication technologies and systems have created new communication platforms that cause economic, political, social and cultural transformations. With Web 2.0 technologies getting common on the internet, social networks have gained extreme importance, especially in the recent years (Kulakli & Mahony, 2014). Public participation is emerging as a wide-ranging space for computer-moderated interaction with inferences for both informal and formal response (Palen, 2007).

Mass broadcasting initiatives based on traditional media, like newspaper, radio and television have been taken over by individuals, public and/or private enterprises on social media platforms and these network-driven new media tools that allow direct broadcasting has proceeded in individual, cultural, social, legal, economic and political consequences (Scaglione, Giovannetti, & Hamoudia, 2015). People are influenced by these social media developments in many ways. People on social media share threats as well as opportunities (Li, Zubielqui & O’Connor, 2015).

ICT has transformed the global scenery of sharing information and enhanced the relationship between public and governments (Shirky, 2011) and social media as online tools offer global platforms for dissemination of information, content and opinion, and also promote social interactions among and between individuals, organisations and governments (Botha & Mills, 2012; Wang et al., 2015).

**PANDEMICS IN THE AGE OF SOCIAL MEDIA**

In today’s modern society, the creation, circulation and manipulation of information are activities that pervade many aspects of our cultural, economic and social life (Bruno et al., 2008). The internet and social media are considered as tools to seek health information (Bahrami et al., 2019). The coronavirus outbreak has not been the first pandemic witnessed in the age of social media. At least three other pandemics have occurred in the last decade; H1N1 virus (swine flu in 2009), Ebola virus (Ebola in 2014) and Zika virus (Zika virus disease in 2015), with all the outbreaks having had prominence, wide documentation and considerable influence on social media. The non-governmental organisations (NGOs), usually non-profit and mostly addressing social issues, were not essentially equipped with
regard to technology, to communicate risk information online about ten years ago. People looked upon social media for directives, but mostly ended up hearing the loudest voices of unreliable and/or unofficial sources. People have lied to one another for as long as verbal communication came into existence, and exciting falsehoods spread faster than boring truths.

Accurate and credible dissemination of right information about the virus causing a pandemic could help in controlling the spread of virus and associated anxiety in the population (Sharma et al., 2017). Initiatives and Achievements of Ministry of Health and Family Welfare: A Year End Review of 2016 made it evident that health organizations took initiatives, planned, prepared and launched their campaigns, and influencers also worked along to help them gain exposure. Social networks still have trouble in dealing with misinformation and identifying them. With tremendous efforts, social networks progressed and matured in terms of their functionality. Big organizations improved at communicating online and people got better at identifying truth from fiction after the misinformation campaigns of 2016, at a large scale.

**DIRECTING PEOPLE TO TRUSTED SOURCES**

Social media allow local issues acquire global awareness through online activations and campaigns. In the current scenario of the Coronavirus Disease 2019 (COVID-19) outbreak, social media platforms are crucially disseminating information worldwide. The Center for Disease Control and Prevention, the World Health Organization (WHO), a large number of healthcare organizations and journals are regularly posting and updating awareness and guidance across a host of online platforms (WHO, 2020). Social media, as online tools offer global platforms for dissemination of information, content and opinion, and also promote social interactions among and between individuals, and organisations (Botha & Mills, 2012; Wang et al., 2015).

Facebook is engaging its newsfeed function to direct users to the websites of WHO and local health authorities. Google Scholar has highlighted leading medical journals and other sites related to the outbreak. Social media sites like Twitter are particular in pointing individuals who search (accounting for misspellings) for coronavirus-related content to reliable resources. Healthcare organizations, physicians and social media influencers similarly direct online traffic to trusted sources. The WHO is working with Facebook, Pinterest, Twitter, Tencent and TikTok to provide the public with accurate information on time and eliminate misinformation and disinformation.

This is also the right time for social media platforms to directly play their role in public health and to educate users, regarding the importance of proper hand washing and social distancing. This approach will increase the probability of millions of people seeing the same messages consistently while accessing different platforms, even if they forgo accessing trusted sites, like WHO website.

**OBJECTIVE OF THE STUDY**

The objective of the study is to identify the role of social media platforms in disseminating information with regard to the COVID-19 outbreak among the people. To find out if people are posting or sharing true verified information or unverified information constituting misinformation. What is being informed and what has to be informed plays a major role, especially during an outbreak and hence the researchers have also lined up to outline the responsibilities of the public, Government and social media platforms for damage control in the given scenario.

**SCOPE OF THE STUDY**

Whilst the tsunami of information about COVID-19 and the speed at which it spreads on social media is unimaginable, an understanding as to whether social media is disseminating information
and misinformation has become pertinent. The study limits to 34 participants from 11 districts around the state of Tamil Nadu, India, all well-educated and active on different social media platforms, to interpret whether or not social media is an effective tool to communicate key information during the COVID-19 pandemic. With limited research available on social media information/misinformation with regard to COVID-19 pandemic, the study opens doors for further research to be carried out with regard to policies to be framed by the Government to regulate the flow of misinformation on social media platforms and other applications, especially given such pandemic situations and also ponder on stricter measures to be adopted by the social media platforms to curb the flow of fake news cautiously.

**REVIEW OF LITERATURE**

**Social Media and Verifiable Information Sources**

Initially, social media companies did not hold any accountability over the content published on their platforms but over the years, they designed a set of automated and human-driven processes to edit, promote or filter published content, as these platforms have become primary sources of information for a large number of users (Yaraghi, 2019). Also, sheer volume of content on social media can make it impossible to meet the level of editorial expectation as that of traditional media. With no perfect set-up or filtering algorithm being perfect, many people are using unpredictable ways to reap profit off of the trending coronavirus situation.

WHO and various other public health organizations have readily taken to social media, as a platform to proliferate information regarding the outbreak to the public, in order to control panic created by the misinformation being circulated by and among the social media users. Social media websites are trying to responsibly fight misinformation and actively curtail fear mongers. Tools to effectively prevent spreading of false news have been engaged by the tech giants, who are extremely skilled in censorship. In order to dispel harmful misconceptions, developers of various social media, like WeChat, are using fact-checking platforms. Western social media such as Twitter, Instagram and Facebook, are also agile in ensuring amplification of right and trustable sources. People are less likely to run into uncorroborated assertions when they search for the word ‘coronavirus’ on one of these platforms.

After Prime Minister, Narendra Modi requesting Indians to clap or ring bells in praise of frontline sanitation workers and medical faculty combating corona, Twitter added that clapping does not kill the virus in its explore section. The most popular application, WhatsApp, along with the Government of India has launched the MyGov Corona Helpdesk Chatbot for the first time, wherein the users have to send a text to +91-9013151515 to receive verified information on COVID-19 (whatsapp.com). The Ministry of Health and Family Welfare Department of India developed the ‘Aarogya Setu’ application as a tool to combat CoV to link critical health services with the Indian citizens. The WHO officials are closely monitoring for misinformation and counteracting it with facts. Social media corporations offer priority to content from reliable accounts while scrutinizing and fact checking is done for non-professional claims beyond suggesting trusted links for COVID-19 updates to users.

**INFORMATION AND SOCIAL MEDIA**

Social media can basically empower a community from structural, psychological and resource empowerment process and help achieve group participation, shared identification and collective control in the community (Leong, Raichatam, Pan & Kaewkitipong, 2015). In today’s scenario, social media should be responsibly utilized to disseminate constant, consistent and reliable information to bring about clarity and awareness, eliminating confusion and panic. As a best and fastest way to share news, social media takes COVID-19 news from individual states, nation and parts of the
world to everyone who can gain access to it. By the end of April 2020, there were more than 8,000 papers in PubMed with the word “COVID-19” (PubMed Search, 2020), in less than 4 months since its appearance in China with all the attention poured into the media.

The Facebook Preventive Health tool provides individuals with vetted guidelines about preventive health recommendations and then directs users to geo-targeted locations where these services are available (Merchant, 2020). Some of the most relevant features of social media platforms during the COVID-19 pandemic has been rapid dissemination of protocols at regional, national and international levels, about treatment, personal protection equipment or even proposals for fair allocation in scarce medical resource settings now having become the new normal (Padilla & Blanco, 2020). Factual news information related to precautions to be adopted, suspected COVID-19 symptoms, duration, step-by-step procedure to get oneself tested with contact information and other courses of action is the need of the hour. Clinicians and researchers through social media shared recommendations and decisions during the times of COVID-19 pandemic, no matter if there was sufficient, scarce or even no evidence at all (Schunemann et al., 2020). Users also could be enabled the option to share the tool and schedule testing with their network. Following Facebook, all social media companies could educate users with step-by-step instructions on spotting misinformation. Responsible use of these social media tools can help quickly disseminate important new information, relevant new scientific findings, share diagnostic, treatment and follow-up protocols, as well as compare different approaches globally, removing geographic boundaries for the first time in history. Social media platforms have been urged to initiate awareness against COVID-19, as well as against the related misinformation.

MISINFORMATION AND SOCIAL MEDIA

Sharing of misleading information is as old as humanity and a regrettable concomitant of the current digital scenario is the augmentation and accelerated spread of medical misinformation (Perakslis & Califf, 2019). Social media has also become a conduit for mushrooming rumours and deliberate misinformation, and many are deploying sites such as Facebook, Twitter, YouTube and WhatsApp to create a state of panic and confusion. With fake news and the spread of misinformation as the defining issues, incorrect, misleading or false medical advice can travel around the world before anyone has a chance to correct it (Emma Charlton, 2020). Social media platforms, such as YouTube and Twitter offer direct access to an unprecedented number of content besides amplify rumours and questionable information. Currently, we are facing an unprecedented crisis of public understanding, with the social media platforms, like Facebook, Instagram, Twitter, YouTube, Snapchat, Reddit, WeChat and Tencent, at the heart of it. Just in YouTube, the second most commonly used social media platform after Facebook, more than a quarter of the most viewed videos related to COVID-19 contained misleading information, representing more than 62 million views (Ho, Bailey, Chan, 2020).

Kasisomayajula “Vish” Viswanath, Lee Kum Kee Professor of Health Communication at the Harvard T.H. Chan School of Public Health, said that the popularity and ubiquity of the various social media platforms means the public is no longer merely passively consuming inaccuracies and falsehoods. It is disseminating and even creating them, which is a ‘very different’ dynamic than what took place during prior pandemics MERS and H1N1. Misinformation could be an honest mistake or the intentions are not to blatantly mislead people, like advising others to eat garlic or gargle with salt water as protection against COVID-19, he added. Misinformation could be deliberately promoted or accidently shared on social media. It can spread rapidly as anybody can say almost anything to anyone, with billions of individuals online each day, it has become pervasive with multiple digital sources without editorial oversight and could easily be trusted or taken seriously (Armstrong & Naylor, 2019). These platforms are the facilitators as well as multipliers of COVID-19-related misinformation. The major reasons behind COVID-19 misinformation were cultural influences, continuous demands during disease prevalence, lack of supervision, trouble-free dissemination of false news on social media and financial inducements (WHO, 2020). COVID-19 stands out as a digital infodemic from the
earlier outbreaks by a hidden epidemic of information. Misinformation and fake news are predictable accompaniments to this information pollution that adds to the uncertainty, agitation, anxiety and fear, and as well lead to faulty treatments, non-compliance to precautionary measures and preconception (Banerjee & Rao, 2020).

Tedros Adhanom Ghebreyesus, the Director-General of the World Health Organisation (WHO), noted and necessitated the urgent measures to be taken now in order to address the ‘coronavirus infodemic.’ This infodemic compromises outbreak response with increased public confusion with regard to trusting information sources. It generates fear and panic through exaggerated and unverified rumours and claims. Even after the dissipation of COVID-19 pandemic, the governments, public health authorities and digital corporations have to not only promote digital literacy, but also combat the irreversible post-truth age spawned by the impact of social media. Policymakers and civil society organisations could take initiatives to upgrade media literacy that could possibly influence the social media trends, independently of any actions by the platforms (Zubrzycki, 2017; Strauss, 2018).

World Health Organization (WHO) developed and dedicated an exclusive section on its website for coronavirus myth-busting.

Always misleading posts have been far more popular than the ones disseminating accurate and relevant public health information about a disease (Sharma et al., 2017). The senseless cruelty of conspiracy theories during a crisis has been a phenomenal response at all times. A natural response that sometimes offers clarity or at least an opportunity to blame somebody for all the happening. Reasonable to this, various conspiracy theories ‘emerged’ and ‘blew up’ that seemed dangerous and interesting, ending up with completely incorrect ways of viewing the situation. A number of conspiracies have been circulated beginning with ‘the virus being a biological weapon, created either by the US (to destroy Chinese) or China (to destroy Americans),’ ‘the outbreak itself was orchestrated by big tech, to undermine China’s status as the high-tech manufacturing world capital,’ ‘COVID-19 is the likely by-product of Chinese foods, like bat soups among other foods,’ ‘unverified home remedies like vitamin C, cow urine, turmeric etc.,’ ‘self-detection test by holding breath,’ ‘cure is controlled by the Government,’ ‘Prime Minister, Modi’s Janata curfew was to break the 14-hour transmission chain of the coronavirus,’ to name a very few.

As Dr. Mike Ryan, Head of WHO’s Health Emergencies Program rightly said, ‘we are in need of vaccine against misinformation.’ Research is needed to better understand the origins and spread of misinformation along with coordinated efforts to disrupt its sources and identify, remove and reduce its dissemination.

INFLUENCING OUTBREAK OUTCOMES

Social media platforms act, both as facilitators and multipliers of COVID-19-related information and misinformation. During the times of outbreaks and crises, a number of questions arise seeking immediate clear and consistent responses. The Government or the officials cannot always respond with accurate, timely information due to various reasons, with welfare of public interest at the top. Sometimes, evidence needed to support statements and arguments, and the standards concerned with how and why people are socially responsible for what they say are ignored. With overabundance of information in the digital age, it becomes difficult for people to identify truthful and trustworthy sources from false or misleading ones (Wemer, 2020) due to which the concerned authorities and experts tend to lose their legitimacy among the public. People continue to rely on the discredited misinformation when asked to draw inferences and make judgments about the news story (Rich & Zaragoza, 2016). The instant and borderless spread of information on social media loses its credibility due to lack of time to analyse and assess the information before communication. Individual differences in reactions to crises depend in part on the variations in social support available to the individual in crisis (Porritt, 2004). The impact of social media misinformation, during an outbreak, is more pronounced. Emerging pandemics necessitate unique health communication and education plans for
public health agencies to satisfy the information needs of the public regarding possible risks while eliminating risk exaggeration and dramatization (Strekalova, 2016). Social media as well as the public have to be socially responsible and ensure that only truthful information from reliable sources are published, as it can influence the public towards a positive outcome from such outbreaks. With this endeavour, a descriptive research question was developed based on the extensive review of literature that extracts the role of social media in disseminating information during the pandemic.

**RQ:** How do you find the social media platforms as major sources of information during COVID-19 outbreak?

**METHODOLOGY**

A qualitative approach was chosen for this study because qualitative methods are especially useful in discovering the in-depth meaning people give to events they experience (Merriam, 1998). As a research methodology, phenomenology is uniquely positioned to help researchers learn from the experiences of others. It is a form of qualitative research that focuses on the study of an individual’s lived experiences within the world (Neubauer, Wiktop & Varpio, 2019). Specifically, the phenomenological method helps understand how participants make meaning of the phenomenon studied, i.e., whether or not social media is an effective tool to communicate key information during the COVID-19 pandemic, in this study. The innovations in social media has paved way for user-generated information leading to early-level warnings, awareness and precautions equally disseminated with misinformation and disinformation during such situations. All social media companies, like TikTok, Twitter, Facebook, Share-Chat and YouTube, are working closely, as per Government of India advisory, to help promote authentic content from reliable sources to generate awareness and to remove fake news or misinformation that would create panic among the public. The researchers have attempted to find out whether social media is informing or misinforming the public with regard to the COVID-19 pandemic outbreak.

Phenomenology is effective in studying a small number of subjects – in this case, 34 participants through purposive sampling – to identify the core of their experiences with the phenomenon (Creswell, 2003), the COVID-19 outbreak - and to produce patterns and identify relationships of meaning that build new knowledge (Moustakes, 1994) – information or misinformation. All of them were well-educated post-graduates or undergoing post-graduation, tech-savvy, active on at least three social media platforms with the habit of frequently checking updates and spending more than 4 hours a day, and were actively participating in contributing to the society through their professions or on the social service front during the COVID-19 outbreak in the districts of Chennai, Coimbatore, Cuddalore, Erode, Kanchipuram, Madurai, Namakkal, Tanjore, Tiruppur, Trichy and Virudhunagar of Tamil Nadu, India. Purposive sampling is form a non-probability sampling method where elements selected for the sample are chosen by the judgment of the researcher. Purposive sampling is widely used in qualitative research for the identification and selection of information-rich cases related to the phenomenon of interest (Palinkas et al., 2015). A heterogeneous or maximum variation purposeive sampling that relies on researchers’ judgment to select participants with diverse characteristics has been done for this study. The qualitative research method includes purposive sampling of people directly involved in the pandemic situation everyday like 6 doctors, 3 nurses, 3 government officials, 4 police officers, 4 primary healthcare officials, 4 academicians, 6 post-graduate students, 1 army officer, 1 super market owner and 2 grocery store owners. These 34 participants were purposively selected to be graduates who are tech-savvy, with smartphones, spending at least more than 2 hours on at least two social media platforms including Facebook, Instagram, YouTube and Twitter. They were chosen to rightly suit the purpose the study of following or sharing or both COVID-19 related information on social media platforms. All of them were actively and directly involved as well as exposed to the scenario in terms of either duty, service or livelihood. Open-ended telephone interviewing was done with systematic
and concurrent data collection procedures to analyse the participants view on whether social media is communicating coronavirus-related information or misinformation in the given scenario.

**PERCEPTION OF COVID-19 INFORMATION ON SOCIAL MEDIA**

The Government doctors concurred that it is obvious and natural for a population to panic in the time of a crisis, like COVID-19, and the degree of panic commonly correlates positively or negatively with the degree of awareness or being informed. Another government doctor agreed that in such situations, our minds primarily focus on the negative or worst, in which case the information we receive influences our reaction to the information and relatively, to the outcome of the crisis. Governments, public health agencies and media collect huge amounts of data, but they do not always share all of it. As an ethic, they jointly work ‘in the best interest of the public,’ though scientific research and conclusions demand a certain amount of data, minimum required for decisions to be made and executed. During a crisis, any data is valuable, provided they are truthful. Comparatively, further he found more of misinformation and fake news, beginning with coronavirus being a bioweapon and ending with a cure for it being found even before the virus was developed, widely spreading on Facebook, WhatsApp, Twitter and other online platforms. The manoeuvre, which most of the public would have tested, i.e., taking a deep breath in and holding it for more than 10 seconds has nothing to do with coronavirus detection. With such news being circulated again and again, social media becomes a dangerous venue for creating havoc and carelessness, especially during a pandemic situation.

One of the private doctors said that it was unfortunate that we are in the current situation. When asked about the information about coronavirus and related issues on social media, she felt it was disheartening to see people sharing unwanted content related to the COVID-19. Another doctor admitted that people are locked to their mobile phones and television with the lockdown active, with nothing much to do. With social media, anyone is able to create a content and share it for everyone around the world to see. Another one of them acknowledged that even with the government reiterating the use of Government websites, official pages and apps for verified updates, people end up with false news and wrong information, primarily because media literacy is something which lacks in our population. They all sympathised that people are more attentive to emotionally-charged content and end up sharing them irrespective of their credibility. They either share exaggerated content simply to establish themselves as well-informed among their peers and followers or to inform and safeguard their dear and near ones, for them to take preventive measures. Images from movies with dead bodies lying around were related to COVID-19 and people ended up sharing these on Facebook, WhatsApp and Instagram without verifying the truth behind those images.

The Government officials felt that information that need diligence are often buried and hardly ever reach the front end. One of them felt that social media offers an online space which could be efficiently accessed to share credible information to improve outcomes in the current critical situation. Two of them opined that though many platforms like Facebook, Twitter, WhatsApp have taken steps to direct their users to trusted sources, prevention and elimination of misinformation has to be more efficient. While they were out placing themselves and their family at risk, most people were sitting at home sharing anything they see or hear about the situation, which should be taken care of given the scenario.

The police officers are diligently offering their services besides the medical staff and sanitation workers towards effectively enforcing the lockdown order of the Government. One of the police officers said that besides ensuring that people stay indoors, they are deployed to control people coming outside, follow up on the list of people with travel history and people who were possibly associated with them, ensure that the positive cases are quarantined, safeguard the home quarantined cases, take action on complaints, besides their regular duties on one side. One of the police officers informed that action would be taken and non-bailable cases would be registered against those who try to spread false information and also refuse to follow orders issued by the government, district administration
and police. She said that it has become equally important to monitor people for circulating false information through social media. Superstar Rajinikanth succumbed to the false news from social media and shared a video regarding the Janata Curfew being a 14-hour timeframe to break the chain of virus infection. Though the video was removed as false information misguiding the public, a large number of similar information is being circulated repeatedly on different social media pages even today.

Messages like disinfectant to be sprayed aerially to contain coronavirus outbreak, a voice message on WhatsApp stating that a ‘poisonous methyl-based’ vaccine would be sprayed using helicopter over the district to kill coronavirus are still being circulated by thousands. They are also happy that contents are generated by users, Government, healthcare organizations, doctors and others as write-ups and videos to create awareness, frighten the public to some extent to psychologically influence them to take precautions are seen on social media, but they still are proportionately very small among an ocean of false information on social media. They said that they are equally fighting against the pandemic and the false information or rumours related to it.

An academician said that researches and articles on COVID-19 related topics in various journals are verified information from trustable sources, but people do not generally look up for researches as a source for news or information. Another academician stated that social media opened doors for citizen journalism and this is altering the news business. Traditional and broadcast media are finding ways to compete with social media content providers. No wonder, healthcare organisations can communicate instantly and directly with the public through social media which bypasses the gatekeeping of traditional media.

Another academician stated that on one-side social media is a useful tool for communication, especially when people are isolated from one another. Conversations on coronavirus in a society could help us walk out of the situation collectively with a positive outcome. The other academician was worried that with thousands of social media users spreading rumours, sharing false information, selling sensationalism, misinformation and disinformation, everything multiplied quickly through shares, it is posing a threat to the society. With contradictory information on COVID-19 drawing attention of users the most, misinformation and sensationalism that misguide people are spread farthest online.

One among the post-graduate students was keen on sharing content online as soon as he found something new. He shared content on different platforms, like from Facebook to WhatsApp and Instagram, etc. One of the students said that most of her family and friends on social media do not actually pay attention to any news. One of them wanted to be the first among friends and relatives to share any new information, especially related to coronavirus to warn and safeguard his family and friends, given the current situation. Two of them merely logged onto social sites, consumed memes and shared the same. They were never interested in checking facts for truth in the memes shared. One of them just wanted to show off that he was up-to-date and the other that he was very active on social media, believing that it would create an identity among others.

Four among the students were volunteering with friends and family during the COVID-19 outbreak. They had formed a help group on social media to help the needy. By sharing their experiences on social media, they were able to obtain more donations and contributions from other known and unknown people around their locality. One of them felt that initially there were true facts related to the outbreak, awareness and precautions on social media, but then false information and fake news overran them. She also voiced that social media is not the right source for updation on COVID-19 as the information found there were mostly misleading.

One of the primary healthcare officials was working full-time with her kids at home. She was on-duty continuously since the COVID-19 outbreak and was moving places each day. She was assigned to search people with travel history and quarantine them at their homes. She was angry and disappointed with people not taking the situation seriously and roaming outside freely as if on holidays. Another healthcare official was angrier when she found fake messages and posts with false information being circulated by irresponsible people. If social media had clearly stressed the true facts, people would not have taken pills to suppress their symptoms and gone back home escaping
medical testing in airports. Two of expressed stated that had it not been the panic created by people on social media, matter would not have gone out of hand. Healthcare workers, government officials and employees have been serving the community and not in a position to monitor what was being shared on social media.

The supermarket owner said that social media was a destination for time-passers who share anything irresponsibly. People were neither bothered about the truthfulness of the information nor the end result of it. The grocery store owners expressed that when the Government announced the 21-day lockdown, news through social media spread at unimaginable speed. They both vocalised that misinformation on lockdown extension, scarcity of daily supplies, estimated increase of cost led to panic buying and over buying which eventually led to scarcity of products and the sellers increasing prices, relatively. People tend to panic and buy when they see posts of other people buying. Even with the government repeatedly asking them, through news channels, to stay calm as daily needs would be made available, people ended up without supplies on a first-come most-serve basis. They agreed that in the given scenario, false information was spreading faster and wider and any news on social media related to coronavirus or COVID-19 has to be verified for validity.

The government hospital nurses voiced that the threat of coronavirus was engulfing not only our nation but the entire world. The whole world was destined to know all about the virus and its impact has led to a raise of panic worldwide. One of them expressed that with the coronavirus having taken thousands of lives on one side, it has also been successful in spreading a sense of threat and anxiety widely. Everyone was looking out for solutions in such a situation. One of them said that people think they gain an intellectual status by sharing new information first. And the common people believe the false information and fall prey to such news. These messages are useless, incorrect and at times, even harmful. Government helplines, websites, news applications and news channel websites should be accessed for any updates in situations like this.

The army officer said that we are still in the stage where the users were unable to differentiate false information from true ones. Unlike traditional media, social media offers two-way communication where people can comment and react to an information. He vocalised that social media offers a window that not only shapes our reaction but also our collective responses to the coronavirus outbreak, both for good and bad. With the COVID-19 outbreak and lockdown in place, social media users, who were barely active previously, are now facilitating important conversations about the virus, sharing content such that sensationalism and misinformation are spread. Social media posts about imposition of emergency was fake and The Indian Army dismissed certain related messages circulated on social media as fake. The country has to deal with fake news next to the coronavirus outbreak. Also news about roping in the services of the retired army personnel and the volunteers enrolled under the National Service Scheme is fake.

While the students pronounced that people depend on social media for immediate updates but that is not always right and everyone should verify information from trusted official sources in any case, the doctors felt that it was their duty and willingness to place themselves in the frontline in the war against coronavirus, but wished that the least other people could do was to stop sharing any COVID-19 related content without verifying the sources, in the safety of their homes. They agreed that with countless videos and blogs on awareness, preventive measures and do’s and dont’s during the lockdown, social media enabling some sort of control over the contents to ensure truthful information to eliminate the dominating misinformation was the need of the hour to save the situation.

A police officer opined that strict action should be taken on people sharing messages against the Government or spreading false information about Government initiatives, officials, healthcare organisations as well as COVID-19 and misguide the public. The other officers voiced that everyone should collectively join hands to not only fight against coronavirus but also false information and fake news on social media. While one academician concurred that social media is constantly evolving. It is most focused on how advertisers can use it to attract new consumers, another agreed that social media, with filters on content, can be best used to positively influence situations like the COVID-19
outbreak outcomes, especially when we are fighting a situation where the misinformation surrounding coronavirus is going viral faster than the virus itself.

The primary healthcare officials felt that people should understand the situation, act responsibly, cooperate in all possible ways and do not act in any way to disrupt other’s efforts towards the welfare of the society. The super market owner and grocery shop owners concurred that people should think logically and analyse the situation before making decisions based on information shared on social media. While the nurses felt that fake news or false information misguiding the public could cause a problem to public health and thereby, to the overall social order, the army officer rightly concluded that the unprecedented information at our fingertips is a double-edged sword which can influence real-time smart decisions as well as create an anxious environment with uncertain outcomes.

**DISCUSSION AND CONCLUSION**

The COVID-19 crisis is still ahead of and everywhere around us and we are taking the situation for granted without realising the actuality. Both, government and corporate organizations use social media more often than traditional media in responding to a crisis (Kim & Liu, 2012). In spite of the Government directing the public towards reliable sources for verified information and updates, social media has transformed the way people communicate around the world, instantly and borderless. In the new media age of inter-connectedness, the outburst of COVID-19, a pandemic caused by coronavirus, has been outpaced by the misinformation related to the pandemic spreading among millions of people globally. False information can result in widespread real-world impact, through the web and social media platforms, because it can be created and spread easily (Kumar & Shah, 2018). There are thousands of false information being circulated on various social media platforms including Facebook, WhatsApp, Twitter, TikTok and others, even after the Government having taken a number of measures to influence the outbreak outcome in the best possible way.

Misinformation may continue to influence beliefs and attitudes even after being debunked if it is not replaced by an alternate causal explanation (Nyhan & Reifler, 2015). Much of the fake news is spread by people merely on an entertainment perspective. Atlantic Council President and CEO, Frederick Kempe tweeted that information, including disinformation and misinformation about the novel coronavirus is spreading faster than the pandemic itself. The irony here is that some news are a blend of factual information and fake news which makes the situation even worse. It is difficult to identify if the true motive behind these news is whether or not to misguide people on a large scale and if yes, who is really behind it. Fake forwards on social media has resulted in people trusting it, falling prey to such news and actually implementing the same in their real lives because of their reliance on social media.

In the era of post-truth, social media could still be the best venues to disseminate information if the people on social network are transmitting news from credible sources. Social media has led to ground-breaking phenomenon such as real-time citizen journalism (Hermida, 2010), at the same time it has led to increased visibility and impact of both true and false information (Mendoza, Poblete & Castillo, 2010). Fake news spreads much faster than real news and real people are to be blamed for this and not the devices or medium (Vosoughi, Roy & Aral, 2018).

Criticisms could be constructive only when it ends on a positive note. Social media should primarily work towards global welfare with their business perspectives aside. They have to ensure that truthful information and data from reliable sources are shared and spread to create the needed awareness for a positive outcome. People are unable to identify the truth from the falsehoods on social media. Being the most common, quick and easily accessed form of information source (Safieddine, Dordevic & Pourghomi, 2017), people are relying more and more on social media for information, the credibility of which is still a big question. An important issue for today’s information consumers is that information on social media platforms relatively lacks professional gatekeeping to monitor
the content and evaluate its credibility (Li & Suh, 2015). In a country where Wikipedia, an online encyclopaedia where anyone can edit the content, is still the most referred site and trusted source of information on an unimaginably wide range of topics, checking reliable sources for updates has become very crucial, especially in today’s COVID-19 scenario.

With regard to the coronavirus outbreak, more of user-generated or user-edited content majorly contribute to misinformation than factual information. Misinformation spreads much faster than these platforms could possibly contain or control. Though some contents are explaining the actual situation, they are countered by a large number of false information or misinformation, misguiding the general public who are unaware of the actual situation. The speed at which information spreads on internet is unimaginable but now may finally be the time for us to slow down.

As socially-responsible citizens, the public should refrain from disseminating inaccurate information, learn to verify and validate information and check the credibility of extensive information. The Government can exercise stricter control measures while the social media platforms can work to take immediate gatekeeping measures in times of a crisis like this. Everyone should limit their participation on social media related to factual information, thereby joining hands to curb the pandemic and the associated fake news. In a pandemic lockdown like this wherein actions like sharing misinformation can cause devastating damages in the actual front, it is the joint responsibility of a common man, the Government as well as the social media platforms to play their role rightly, responsibly, and effectively together.

**FUNDING AGENCY**

Publisher has waived the Open Access publishing fee.
REFERENCES

Banerjee, D., & Rao, T. S. (2020). Psychology of misinformation and the media: Insights from the COVID-19 pandemic. *Indian Journal of Social Psychiatry, 36*(5), 131. doi:10.4103/ijsp.ijsp_112_20

Brand communications in time of crisis. (n.d.). Retrieved from https://blog.twitter.com/en_us/topics/company/2020/Brand-communications-in-time-of-crisis.html

Bruno, R., Conti, M., & Passarella, A. (2008). Proceedings of the 5th International ISCRAM Conference. In *Opportunistic networking overlays for ICT services in crisis management*. Retrieved from http://cnd.iit.cnr.it/andrea/docs/iscram08.pdf

COVID-19. (n.d.). Retrieved from https://search.bvsalud.org/global-literature-on-novel-coronavirus-2019-ncov/?output=site&lang=en&from=21&sort=&format=summary&count=20&fb=&&page=2&skfp=&index=tw&q=

Emanuel, E. J., Persad, G., Upshur, R., Thome, B., Parker, M., Glickman, A., & Phillips, J. P. et al. (2020). Fair Allocation of Scarce Medical Resources in the Time of COVID-19. *The New England Journal of Medicine, 382*(21), 2049–2055. doi:10.1056/nejmsb2005114

Garza, A. D. (2020, February 11). *Coronavirus Researchers Using AI to Predict Virus Spread*. Retrieved from https://time.com/5780683/coronavirus-ai/

González-Padilla, D. A., & Tortolero-Blanco, L. (2020). Social media influence in the COVID-19 Pandemic. *International Braz J Urol.*, 46(Suppl 1), 120–124. doi:10.1590/s1677-5538.ibju.2020.s121

Hermida, A. (2010). *Twittering The News*. *Journalism Practice, 4*(3), 297–308. doi:10.1080/17512781003640703

Kim, S., & Liu, B. F. (2012). Are All Crises Opportunities? A Comparison of How Corporate and Government Organizations Responded to the 2009 Flu Pandemic. *Journal of Public Relations Research, 24*(1), 69–85. doi:10.1080/1062726x.2012.626136

Kinney, J., Haapala, D., & Booth, C. (2017). Keeping People Safe. *Keeping Families Together*, 41-54. doi:10.4324/9780203787786-3

Kulakli, A., & Mahony, S. (2014). Knowledge Creation and Sharing with Web 2.0 Tools for Teaching and Learning Roles in So-called University 2.0. *Procedia: Social and Behavioral Sciences, 150*, 648–657. doi:10.1016/j.sbspro.2014.09.084

Kumar, S., & Shah, N. (2018, April 24). *False Information on Web and Social Media: A Survey*. Retrieved from https://www.infodocket.com/2018/04/24/false-information-on-web-and-social-media-a-survey/

Leong, C., Pan, S., Raicham, P., & Kaekwkitipong, P. (2015). ICT-Enabled Community Empowerment in Crisis Response: Social Media in Thailand Flooding 2011. *Journal of the Association for Information Systems, 16*(3), 174–212. doi:10.17705/1jais.00390

Li, H., Zubielqui, G. C., & O’Connor, A. (2015). Entrepreneurial networking capacity of cluster firms: A social network perspective on how shared resources enhance firm performance. *Small Business Economics, 45*(3), 523–541. doi:10.1007/s11187-015-9659-8

Li, H. O., Bailey, A. M., Huynh, D., & Chan, J. W. (2020). *YouTube as a Source of Information on COVID-19: A Pandemic of Misinformation?* SSRN Electronic Journal. doi:10.2139/ssrn.3569884

Li, R., & Suh, A. (2015). Factors Influencing Information credibility on Social Media Platforms: Evidence from Facebook Pages. *Procedia Computer Science, 72*, 314–328. doi:10.1016/j.procs.2015.12.146

Mendoza, M., Poble, B., & Castillo, C. (2010). Twitter under crisis. *Proceedings of the First Workshop on Social Media Analytics - SOMA 10*. doi:10.1145/1964858.1964869

Merchant, R. M. (2020). Evaluating the Potential Role of Social Media in Preventive Health Care. *Journal of the American Medical Association, 323*(5), 411. doi:10.1001/jama.2019.21084

Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspectives on Medical Education, 8*, 90–97. https://doi.org/10.1007/s40037-019-0509-2
Jayaseelan R. is currently working in PSG College of Arts and Science, Coimbatore. He completed his PhD in the year 2016 and is working as assistant Professor for the past four years and he has more than 10 years of Industrial experience in media. He has worked in leading private FM channel Suryan FM (RED FM) and in one of the National Level NGO named Center for Advocacy Research (CFAR) funded by Melinda Gates Foundation as district coordinator in media research project.