

Submission to the Senate Inquiry into the Combatting Misinformation and Disinformation Bill 2024

Dear Senators,

I appreciate the opportunity to make this submission in response to the proposed Combatting Misinformation and Disinformation Bill (2024). The socio-cultural and political challenges presented by the prevalence of verifiably false information on the internet are undeniable. False information has had a profound impact, contributing to widespread confusion, division, and mistrust in institutions. On a personal level, I have experienced and continue to experience threats to my own safety as a result of such misinformation.

Despite these challenges, I do not support this legislation. I believe it presents more problems than solutions and cannot be effectively implemented in its current form. The primary issue lies in the Bill's definitions of "serious harm," "misinformation," and "disinformation." These definitions are too vague and contested to establish the high threshold necessary to trigger the legislation, and in all probability this 'high threshold' could and would be lowered such that social media companies could be penalised for the dissemination of contestable facts, limiting the ability of Australians to access and debate important social issues.

My focus is primarily on public health, though the same argument applies to each of the criteria deemed to represent serious harm. As we saw during the COVID-19 pandemic, the "public's health" and the measures taken to protect it are contested concepts. Narrow-cast interpretations of the public's health during the pandemic led us down a path of extended pandemic suppression measures that, while intended to protect the public, actively harmed sections of our community. Individuals and families suffered "serious harm" due to how we chose to define "serious harm" in public health terms—whether that harm was in the form of job losses due to vaccine mandates, the inability to see dying loved ones in hospital, or the mental health consequences of prolonged isolation during lockdowns.

No matter the utilitarian arguments advanced in defence of public health measures during the pandemic, that they were implemented to prevent “serious harm” in public health terms and caused “serious harm” to members of our community should be sufficient to demonstrate that these concepts are far from immutable and are subject to ongoing contestation. It is simply not conceivable that the Australian Communications and Media Authority (ACMA), the Minister of the day, or any government body could set an uncontested threshold for “verifiable truth” in public health. Depending on the group of experts consulted, the veracity of information in public health is highly likely to be subject to debate. I say this in full knowledge of the frank misinformation that occurred regarding the COVID 19 vaccines (eg. that they give you COVID, that they contain 5G trackers), but equally in the knowledge of the vociferous and personal attacks that occurred when public health measures were questioned by myself and others¹. These attacks were intended to silence, were grounded in accusations of misinformation and were only ever acceptable because the accusers were thought to be operating from a position of good faith (they were hypervigilant regarding the effects of COVID and that was seen as an acceptable excuse for unacceptable online behaviour). This creates an unworkable situation – *identical thresholds of verifiable untruth and misinformation could be reached by those claiming a motive to protect the public health (eg. individuals with academic tenure) as those who lack such positional authority and yet the former may be excused and the latter trigger the legislation.*

In the post-covid environment the convergence of public health activism and the legislative power to restrict discourse during a public health emergency makes this Bill unworkable. Often this activism resorts to a simplifying ideology that is emotionally compelling and challenging to refute. The pandemic example par excellence was COVID-zero. Concerned Victorians, had extreme difficulty in challenging this public health ideology leading to the most significant example of disruption to community cohesion in recent memory, the protests against the final Victorian lockdown.

¹ <https://www.afr.com/rear-window/the-campaign-to-cancel-nick-coatsworth-20210930-p58w1z>

The most significant example of public health-related disruption to social cohesion during the pandemic occurred due to a government policy, not the propagation of misinformation through social media.

The combination of simplifying ideologies based on a moral imperative to prevent harm to health with the ability to censor discourse can only lead in one direction: in the attempt to limit “verifiably false” information on social media, it is likely that legitimate debate over public health priorities and concerns about the efficacy and necessity of public health measures would be stifled.

The terms “misinformation” and “disinformation” have become overused in public discourse, often employed as a way to dismiss opposing viewpoints without engaging in debate. In an era where limited attention spans hinder reasoned discussion, these terms have become shortcuts to shutting down conversation.

While I have no doubt that this legislation has been tabled with the noblest of intentions and amidst valid concerns over the lack of accountability of social media platforms, legislative intent cannot overcome the insurmountable challenges of implementation. Rather than seeking to impose the truth upon the public through legislation, we must focus on equipping our communities with the tools to critically assess and judge information for themselves.

Thank you for considering this submission.

Yours sincerely,

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