

From: Bartee, Maureen S. EOP/NSC
Sent: Thu, 15 Jul 2021 21:32:43 +0000
To: Bartee, Maureen S. EOP/NSC; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Rowland, Amy (CDC/DDPHSIS/CGH/GID); Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID)
Subject: Informal meeting to discuss CDC strategic for engagement with NSC on COVID misinformation

Hi Maureen and Amy,

Just wanted to touch base how our team can best engage with NSC. There's some strategic nuance here that would be worth hashing out to make sure we all have a common understanding.

Best,

Dimitri

Dimitri Prybylski, PhD, MPH
Demand for Immunization Team Lead
Immunization Systems Branch
Global Immunization Division, US Centers for Disease Control and Prevention
1600 Clifton Rd., NE, MS A-04, Atlanta, GA 30333
Cell: (b)(6) Tel: 404-718-3476
Email: hjt1@cdc.gov



Hi there,

Maureen Bartee is inviting you to a scheduled ZoomGov meeting.

[Join Zoom Meeting](#)

One tap mobile: US: (b)(6) or

(b)(6)

Meeting URL:

(b)(6)

Obtained by America First Legal Foundation through litigation.

Meeting ID:
Passcode:

Join by Telephone

For higher quality, dial a number based on your current location.

Dial:
Meeting ID:
Passcode:

International numbers

Join from an H.323/SIP room system

H.323:
Meeting ID:
Passcode:
SIP:
Passcode:

Obtained by America First Legal Foundation through litigation.

From: Bartee, Maureen S. EOP/NSC
Sent: Thu, 22 Jul 2021 12:57:34 +0000
To: Bartee, Maureen S. EOP/NSC; Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Rowland, Amy (CDC/DDPHSIS/CGH/GID); Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID)
Subject: Informal meeting to discuss CDC strategic for engagement with NSC on COVID misinformation

-----Original Appointment-----

From: Bartee, Maureen S. EOP/NSC (b)(6)
Sent: Thursday, July 15, 2021 5:33 PM
To: Bartee, Maureen S. EOP/NSC; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Rowland, Amy (CDC/DDPHSIS/CGH/GID); Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID)
Subject: Informal meeting to discuss CDC strategic for engagement with NSC on COVID misinformation
When: Thursday, July 22, 2021 9:00 AM-9:30 AM (UTC-05:00) Eastern Time (US & Canada).
Where: (b)(6)

Hi Maureen and Amy,

Just wanted to touch base how our team can best engage with NSC. There's some strategic nuance here that would be worth hashing out to make sure we all have a common understanding.

Best,

Dimitri

Dimitri Prybylski, PhD, MPH
 Demand for Immunization Team Lead
 Immunization Systems Branch
 Global Immunization Division, US Centers for Disease Control and Prevention
 1600 Clifton Rd., NE, MS A-04, Atlanta, GA 30333
 Cell: (b)(6) Tel: 404-718-3476
 Email: hit1@cdc.gov



Obtained by America First Legal Foundation through litigation.

Hi there,

Maureen Bartee is inviting you to a scheduled ZoomGov meeting.

Join Zoom Meeting

One tap mobile: US: [redacted (b)(6)] or

[redacted (b)(6)]

Meeting URL:

[redacted (b)(6)]

Meeting ID:

(b)(6)

Passcode:

Join by Telephone

For higher quality, dial a number based on your current location.

Dial:

US: [redacted (b)(6)]

Meeting ID:

[redacted (b)(6)]

Passcode:

International numbers

Join from an H.323/SIP room system

H.323:

[redacted (b)(6)] (US West)
[redacted (b)(6)] (US East)

Meeting ID:

(b)(6)

Passcode:

SIP:

[redacted (b)(6)]

Passcode:

Obtained by America First Legal Foundation through litigation.

Subject: Information Integrity and Resilience IPC (new room)

Colleagues,

We are rescheduling the second IPC on Information Integrity and Resilience to Tuesday, July 6, from 13:00-14:20 pm. SAP Caitlin Durkovich and SAP Rob Berschinski will co-chair the meeting and participation is requested at the Assistant Secretary or above level. Agenda is below. Discussion paper has been circulated on the SIPR and JWICS.

The IPC meeting will occur over SVTC at the Secret-level. Please ensure your video operation center contacts the White House Situation Room at 202 (b)(6) to confirm appropriate site connection. EOP personnel can join in SMS Large.

Agenda:

(b)(5)

Regards,
Mary Beth and Brian

Obtained by America First Legal Foundation through litigation.

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Tue, 6 Jul 2021 22:07:56 +0000
To: Scully, Brian J. EOP/NSC
Subject: Information Integrity and Resilience IPC - Please confirm D/A attendance

Thank you to everyone who joined today's IPC. Please confirm who attended from your Department and Agency.

Thank you!

Mary Beth Polley
Counter Disinformation and Resilience, Media Freedom
Democracy Directorate, National Security Council
202 (b)(6)

Obtained by America First Legal Foundation through litigation.

From: Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR)
Sent: Wed, 2 Jun 2021 09:19:51 +0000
To: Polley, Mary Elizabeth R. EOP/NSC
Subject: Meeting Forward Notification: IIR Sub-IPC on Counter Disinformation: Lessons Learned from CDC and Census on countering dis/mis information in real time

Your meeting was forwarded

[Wilhelm, Elisabeth \(CDC/DDID/NCIRD/OD\) \(CTR\)](#) has forwarded your meeting request to additional people.

Meeting

IIR Sub-IPC on Counter Disinformation: Lessons Learned from CDC and Census on countering dis/mis information in real time

Meeting Time

Wednesday, June 2, 2021 12:00 PM - Wednesday, June 2, 2021 1:15 PM

Recipients

[Stokley, Shannon \(CDC/DDID/NCIRD/ISD\)](#), [Flores, Stephen \(CDC/DDID/NCHHSTP/DHPIRS\)](#), [Walter-Garcia, Madison \(CDC/DDID/NCIRD/OD\)](#)

All times listed are in the following time zone: (UTC-05:00) Eastern Time (US & Canada)

Obtained by America First Legal Foundation through litigation.

From: Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR)
Sent: Wed, 2 Jun 2021 15:31:10 +0000
To: Polley, Mary Elizabeth R. EOP/NSC
Subject: Meeting Forward Notification: IIR Sub-IPC on Counter Disinformation: Lessons Learned from CDC and Census on countering dis/mis information in real time

Your meeting was forwarded

[Wilhelm, Elisabeth \(CDC/DDID/NCIRD/OD\) \(CTR\)](#) has forwarded your meeting request to additional people.

Meeting

IIR Sub-IPC on Counter Disinformation: Lessons Learned from CDC and Census on countering dis/mis information in real time

Meeting Time

Wednesday, June 2, 2021 12:00 PM - Wednesday, June 2, 2021 1:15 PM

Recipients

[Daskalakis, Demetre \(CDC/DDID/NCHHSTP/DHP\)](#)

All times listed are in the following time zone: (UTC-05:00) Eastern Time (US & Canada)

Obtained by America First Legal Foundation through litigation.

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Wed, 14 Jul 2021 18:33:18 +0000
To: (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; (b)(6)
 godfreyjj2@state.gov; petersonL3@state.gov; BrayL2@state.gov; StrohME@state.gov;
 rosen@state.gov; (b)(6)@ntia.gov; nmuller@usaid.gov; dchisholm@usaid.gov;
 jmachleder@usaid.gov; dparzik@usaid.gov; (b)(6)@usagm.gov; (b)(6)@usagm.gov;
 (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil;
 (b)(6)@mail.mil; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov;
 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@treasury.gov; (b)(6)@treasury.gov;
 (b)(6)@fbi.gov; (b)(6)@FBI.GOV; (b)(6)@FBI.GOV; (b)(6)@fbi.gov; (b)(6)@fbi.gov;
 (b)(6)@FBI.; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; Matheny, Jason G.
 EOP/NSC; Berry, Ruth E. EOP/NSC; Wu, Tim EOP/WHO; Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID);
 Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Scully, Brian J. EOP/NSC; Fitter, David L.
 (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Kolis, Jessica
 (CDC/DDPHSIS/CGH/GID); Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Jennifer Shopkorn
 (CENSUS/ADCOM FED); zachary.henry.schwartz@census.gov; Angha, Negah EOP/NSC; Bagia, Amrit B.
 EOP/NSC; Rosenberg, Brett A. EOP/NSC; Maykish, P.J. J. EOP/NSC; Welch, Jennifer D. EOP/NSC;
 Jefferson, Karrie; Berschinski, Robert G. EOP/NSC; Vail, Justin W. EOP/WHO; Levitt, Justin M. EOP/WHO;
 Bressler, Jonathan A. EOP/NSC; (b)(6)@ucia.gov; (b)(6)@ucia.gov; Tartakovsky, Daniel (HHS/OASH);
 Sicade, Lynn M (DRL); Stalker-Lehoux, Sarah M. EOP/NSC; Stokley, Shannon (CDC/DDID/NCIRD/ISD);
 Flores, Stephen (CDC/DDID/NCHHSTP/DHPIRS); (b)(6)@hq.dhs.gov; (b)(6)@OSD
 OUSD POLICY (USA); Tisdale, Nicole N. EOP/NSC; Sanders, Joshua J CAPT USN JS J5 (USA); Sharma, Saloni
 EOP/NSC; (b)(6)@usaid.gov; Tama, Jason P. EOP/NSC; (b)(6)
 (b)(6) Col USAF JS DOM (USA); Freeman, Andrea K. EOP/NSC; Cameron,
 Beth E. EOP/NSC; (b)(6) CIV OSD OUSD POLICY (USA); (b)(6) CTR OSD OUSD POLICY
 (USA); Callanan, Greg J. EOP/OMB; Papan, Joseph G. EOP/OMB; Mergen, Margaret C. EOP/OMB;
 Gorman, Lindsay P. EOP/OSTP; Beckman, Adam (HHS/OASH); Langdon, David (Federal); (b)(6)
 (Federal); (b)(6) COL USARMY OSD OUSD POLICY (USA); (b)(6) D SES OSD
 OUSD POLICY (USA); Sessoms Lee, Charmaine; Chhabra, Tarun EOP/NSC; Patton, Rodney (NSD); Roberts,
 Kamie M. EOP/OSTP; Durkovich, Caitlin A. EOP/NSC; Nelson, Alondra R. EOP/OSTP;
 Venkatasubramanian, Suresh EOP/OSTP; Lieberman, Dean K. EOP/NSC; Lesko, Max (HHS/OASH);
 Tartakovsky, Daniel (HHS/OASH); Kettler, Brian; Baron, Joshua; Turek, Matthew; Scully, Brian J.
 EOP/NSC; Dyson, Michael (contr-i2o); (b)(6) contr-i2o; (b)(6) Pozmantier,
 Michael
Cc: Martonosi, Margaret; Roberts, Kamie M. EOP/OSTP
Subject: NITRD WG on Information Integrity (Please respond by COB)

Good morning,

We have received initial interest from several Departments and Agencies in a NITRD working group. We would appreciate confirmation by COB today so we can set up a dedicated discussion to finalize the scope.

Thanks so much, Mary Beth

From: Polley, Mary Elizabeth R. EOP/NSC

Sent: Thursday, July 8, 2021 4:04 PM

To: (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov
 (b)(6)@hq.dhs.gov; 'Marzouk, Amir' <MarzoukA@state.gov>; 'hall-godfreyjj2@state.gov'
 <hall-godfreyjj2@state.gov>; 'petersonL3@state.gov' <petersonL3@state.gov>; 'BrayL2@state.gov'
 <BrayL2@state.gov>; 'StrohME@state.gov' <StrohME@state.gov>; 'rosen@state.gov'
 <rosen@state.gov>; (b)(6)@ntia.gov (b)(6)@ntia.gov; 'nmueller@usaid.gov'
 <nmueller@usaid.gov>; 'dchisholm@usaid.gov' <dchisholm@usaid.gov>; 'jmachleder@usaid.gov'
 <jmachleder@usaid.gov>; 'dparzik@usaid.gov' <dparzik@usaid.gov>; (b)(6)@usagm.gov'
 (b)(6)@usagm.gov; (b)(6)@usagm.gov (b)(6)@usagm.gov; (b)(6)@mail.mil'
 (b)(6)@mail.mil; (b)(6)@mail.mil (b)(6)@mail.mil;
 (b)(6)@mail.mil (b)(6)@mail.mil; (b)(6)@mail.mil'
 (b)(6)@mail.mil; (b)(6)@dni.gov (b)(6)@dni.gov; (b)(6)@dni.gov'
 (b)(6)@dni.gov; (b)(6)@dni.gov (b)(6)@dni.gov (b)(6)@dni.gov (b)(6)@dni.gov;
 (b)(6)@dni.gov (b)(6)@dni.gov; (b)(6)@dni.gov (b)(6)@dni.gov; (b)(6)@dni.gov'
 (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov'
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov'
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov; (b)(6)@treasury.gov'
 (b)(6)@treasury.gov; (b)(6)@treasury.gov (b)(6)@treasury.gov;
 (b)(6)@fbi.gov (b)(6)@fbi.gov; (b)(6)@FBI.GOV (b)(6)@FBI.GOV;
 (b)(6)@FBI.GOV (b)(6)@FBI.GOV; (b)(6)@fbi.gov (b)(6)@fbi.gov; (b)(6)@fbi.gov'
 (b)(6)@fbi.gov; (b)(6)@FBI.GOV (b)(6)@FBI.GOV; (b)(6)@fbi.gov'
 (b)(6)@fbi.gov; (b)(6)@fbi.gov (b)(6)@fbi.gov; (b)(6)@fbi.gov'
 (b)(6)@fbi.gov; Matheny, Jason G. EOP/NSC (b)(6) Berry, Ruth E.
 EOP/NSC (b)(6) Wu, Tim EOP/WHO (b)(6); 'Wilhelm,
 Elisabeth (CDC/DDID/NCIRD/OD) (CTR)' <nla5@cdc.gov>; 'Abad, Neetu S. (CDC/DDPHSIS/CGH/GID)'
 <vjx3@cdc.gov>; Scully, Brian J. EOP/NSC (b)(6); 'Fitter, David L.
 (CDC/DDPHSIS/CGH/GID)' <vid3@cdc.gov>; 'Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID)'
 <hjt1@cdc.gov>; 'Kolts, Jessica (CDC/DDPHSIS/CGH/GID)' <ywe5@cdc.gov>; 'Brookmeyer, Kathryn A.
 (CDC/DDID/NCHSTP/DSTDP)' <guu1@cdc.gov>; 'Jennifer Shopkorn (CENSUS/ADCOM FED)'
 <jennifer.shopkorn@census.gov>; 'zachary.henry.schwartz@census.gov'
 (b)(6)@census.gov; Angha, Negah EOP/NSC (b)(6) Bagia,
 Amrit B. EOP/NSC (b)(6); Rosenberg, Brett A. EOP/NSC
 (b)(6); Maykish, P.J. J. EOP/NSC (b)(6) Welch,
 Jennifer D. EOP/NSC (b)(6) 'Jefferson, Karrie'
 (b)(6)@cisa.dhs.gov; Berschinski, Robert G. EOP/NSC (b)(6)
 Vail, Justin W. EOP/WHO (b)(6); Levitt, Justin M. EOP/WHO
 (b)(6) Bressler, Jonathan A. EOP/NSC (b)(6)
 (b)(6)@ucia.gov (b)(6)@ucia.gov; (b)(6)@ucia.gov (b)(6)@ucia.gov; 'Tartakovsky,
 Daniel (HHS/OASH)' <Daniel.Tartakovsky@hhs.gov>; 'Sicade, Lynn M (DRL)' <SicadeLM@state.gov>;

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Thu, 3 Jun 2021 18:46:07 +0000
To: Scully, Brian J. EOP/NSC
Cc: DL NSC Democracy; DL NSC Resilience
Subject: SOC: IIR Sub-IPC on Countering Disinformation and presentations from CDC and Census
Attachments: SOC IIR Sub-IPC on Countering Disinformation 2June2021.pdf, Census 0602 Sub IPC Presentation on Trust and Safety.pdf, Insights-SOVC_May2021_cleared.pdf

Please see the attached SOC from yesterday's sub-IPC, along with the briefings from Census and CDC on their efforts to counter disinformation and build public trust.

Best, Mary Beth

Mary Beth Polley
Counter Disinformation and Resilience, Media Freedom
Democracy Directorate, National Security Council
202 (b)(6)

Obtained by America First Legal Foundation through litigation.

(U) Summary of Conclusions for the Information Integrity and Resilience Sub-Interagency Policy Committee on Countering Disinformation

Date: June 2, 2021

Time: 12:00-1:30pm

(U//FOUO) Participants:

Centers for Disease Control
Central Intelligence Agency
Census Bureau
Cybersecurity and Infrastructure Security Agency
Department of Defense
Department of Homeland Security
Department of Justice
Department of State
Department of Treasury
Federal Bureau of Investigation
National Security Agency
Office of Director of National Intelligence
National Security Council Staff
Domestic Policy Council Staff
National Economic Council Staff

(b)(5)

Obtained by America First Legal Foundation through litigation.

Obtained by America First Legal Foundation through litigation.

Trust & Safety

U.S. Census Bureau

June 2021



Obtained by America First Legal Foundation through litigation.

Combating Mis- and Disinformation

To protect the 2020 Census count, the Census Bureau established the first government Trust & Safety team, a cross-functional network of experts working to proactively combat reputational threats.



These core functions work together to enable proactive messaging, rapid response to cases of mis- and disinformation, and coordination across various external partners.

Continuous Monitoring

A key function of the Trust & Safety Team is continuous monitoring to detect and analyze mis- and disinformation to inform follow up actions.



In the News

We scan the 24-hour news cycle via traditional media sources like television, radio, print, and online media platforms.



On the Ground

We engage with community partners around the nation for information from public events, in-person interactions, and flyers or billboards.



On the Web

We monitor the web through public social media platforms like Twitter, Facebook, and YouTube.



Over the Phone

We receive live tips from Census Bureau Customer Service (1-800-923-8282).



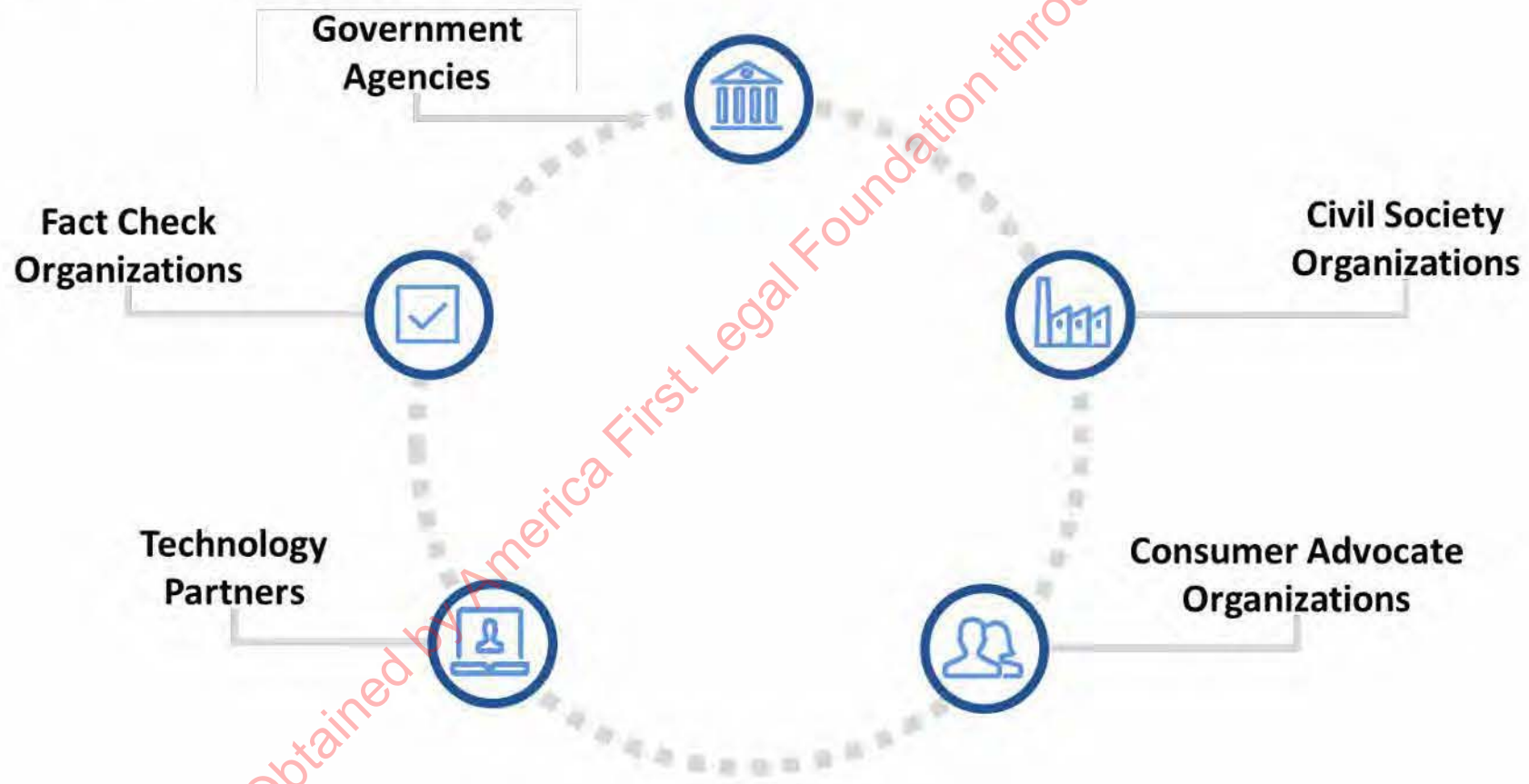
In our Inbox

We receive information from the public via submissions to rumors@census.gov and respondent-advocate@census.gov, as well as the ask.census.gov web intake form.

Our continuous monitoring capabilities allow us to detect mis- and disinformation in real-time and identify larger trends, enabling us to develop updated messaging for the public to proactively combat the spread of mis- and disinformation.

Establishing Partnerships

The Census Bureau could not protect the count alone. We established a partnership network across multiple sectors to help us detect, mitigate, and respond to mis- and disinformation.



Empowering the Public

The Census Bureau began the Internet Self-Response Operation (ISR) in March 2020. In preparation, the Trust & Safety Team proactively empowered the public to take the necessary steps to identify and take action against mis- and disinformation.



Visiting [2020Census.gov](https://www.2020census.gov) for the latest information related to the 2020 Census and tips for avoiding fraudulent activities and scams



Reporting suspicious information and tips to rumors@census.gov



Calling the [Census Bureau Customer Service Hotline](tel:8009238282) at (800) 923-8282 for questions related to the 2020 Census



Reaching out to us via [Twitter](https://twitter.com/USCensusBureau) (@USCensusBureau), [Instagram](https://www.instagram.com/uscensusbureau) (@uscensusbureau), [LinkedIn](https://www.linkedin.com/company/us-census-bureau) (linkedin.com/company/us-census-bureau), and [Facebook](https://www.facebook.com/uscensusbureau) (facebook.com/uscensusbureau)



Accessing updated [frequently asked questions](#) (FAQs), [chatbot](#), and [voice assistant](#) for information on-the-go



Reporting malicious posts violating platform guidelines on [Facebook](#), [Twitter](#), [YouTube](#), [Nextdoor](#), and other networks

Sample Incidents

Examples of Mis- and Disinformation

Obtained by America First Legal Foundation through litigation.

Sample Incident: Home Affairs

The Trust & Safety team identified misinformation that could have posed a safety risk for census workers and suppress the effectiveness of 2020 Census field operations.

Incident Summary

A message circulating on public and private social media channels and in local community centers across the United States warned of officials with the “Department of Home Affairs” visiting homes to collect information for the census and robbing homes.



First Detection: September 18, 2019



Digital Platforms: Facebook, Nextdoor, WhatsApp, Twitter, email

#BeAware: We have been notified this morning there is a group of individuals going to homes and pretending to be officials from "home affairs." They have documents with the letterhead Department of Home Affairs and claim to be confirming that everyone has a valid ID for the upcoming census. Instead, they are robbing homes. There is no initiative like that from the government. They are everywhere and they look presentable. Please alert your family, friends, and neighbors. Immediately call 911 in such case.

Mitigation Strategy

The team determined the hoax originated overseas and was spread in several countries including South Africa, Kenya, and the UK ahead of their census operations. **In addition to continuous monitoring, several actions were executed to address the hoax and mitigate its spread:**



Engaged **Fact Check organizations** and **traditional media** to publish **6** articles debunking the hoax.



Coordinated with **Civil Society organizations** to engage their networks and provide accurate information debunking the hoax.



Reported the hoax on **social media platforms** to partners for removal.



Published an article on **2020census.gov/rumors** to counter the hoax with accurate information.



Are People Posing as "Department of Home Affairs" Workers and Checking IDs for the Census?

There is a false rumor circulating online that individuals posing as workers for the "Department of Home Affairs" are going door-to-door to confirm that everyone has a valid ID for the 2020 Census — and committing crimes at homes they are pretending to canvass.

Sample Incident: Stimulus Check

The Trust & Safety team detected misinformation that insinuated the Census Bureau was sharing personal information of those who responded to the 2020 Census with the Department of Treasury, in violation of Title 13.

Incident Summary

A rumor circulating across social media platforms, text, and email linking completion of the 2020 Census to receipt of an economic stimulus check.



First Detection: March 16, 2020



Digital Platforms: Facebook, Twitter, Email, Text

FYI... Go to 2020census.gov and fill out the census form so you can get you stimulus check. That's how they going to know where to send the checks. Forward this to everyone that you know. If you don't fill it out you will not receive a check in the mail.
\$1000 per Adult \$500 per child \$3K max Per household

Mitigation Strategy

The team saw an immediate increase in online conversation and rumors targeting millions of Americans in need of financial relief. Over the course of two weeks, this rumor resulted in a 273% increase in reports to the rumors mailbox. **In addition to continuous monitoring, several actions were executed to address the rumor and mitigate its spread:**



Published an article on 2020census.gov/rumors to counter the rumor with accurate information.



Engaged **Fact Check organizations** and **traditional media** to publish over a dozen articles debunking the rumor.



Reported the rumor on **social media platforms** to partners for removal.



Developed the first **response from rumors@census.gov** to answer inquiries from the public.

Census Responses Not Tied to Potential Stimulus Packages

Your answer cannot be used to impact your eligibility for any government benefits, including any potential stimulus package.

Will filling out the 2020 Census impact whether you receive a stimulus check?
No. Your answer cannot be used to impact your eligibility for any government benefits, including any potential stimulus package. The Census Bureau is committed to the Title 13 of the U.S. Code to ensure your information is confidential and the answers you provide are used only to produce statistics.



Due to the team's rapid detection and response, within four days the volume of reports and proliferation of the rumor on social media decreased dramatically.

- For Discussion Only -

Census Accomplishments

Results to Date

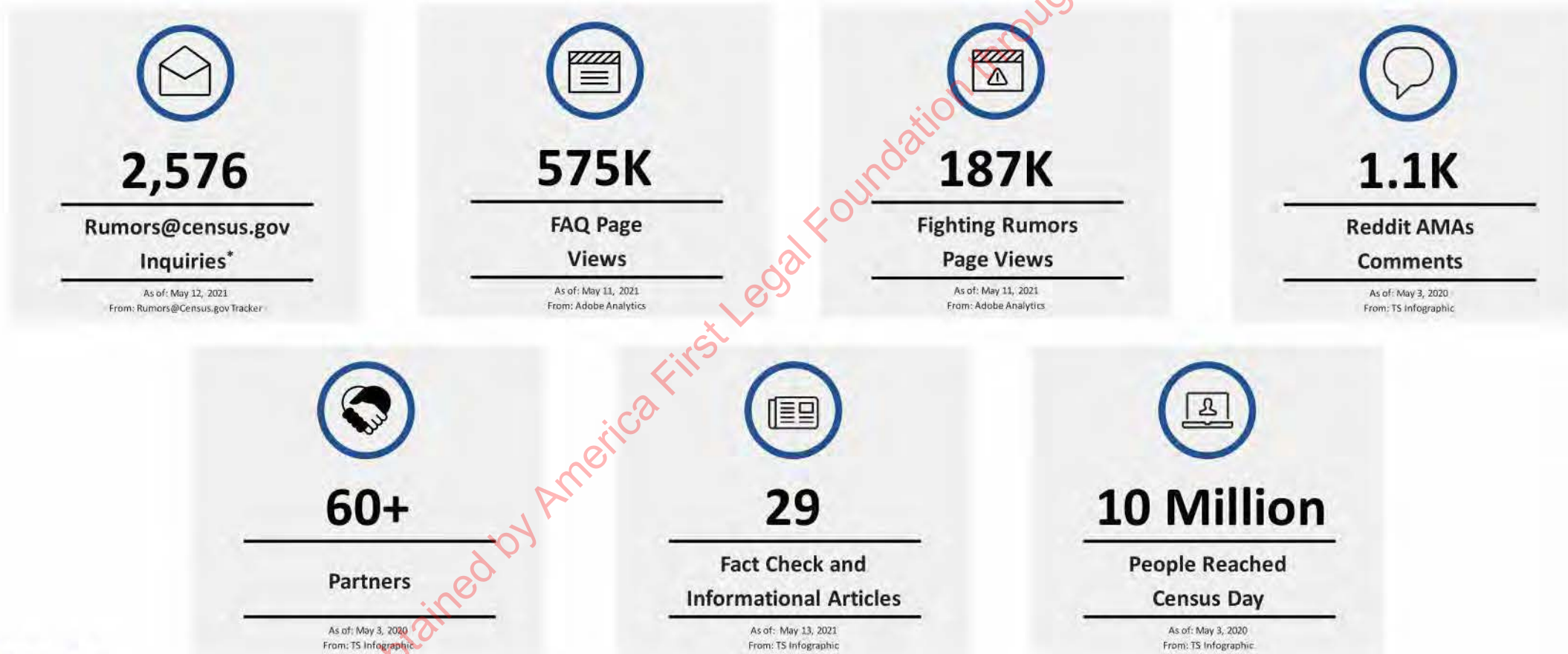
Obtained by America First Legal Foundation through litigation.



- For Discussion Only -

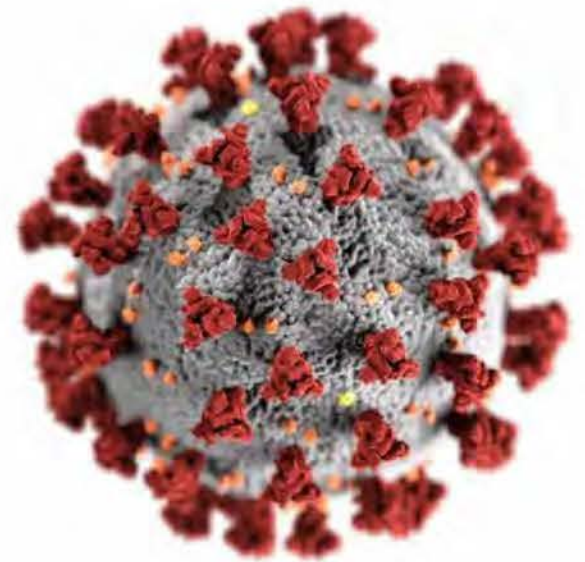
Team Accomplishments

Our core functions enabled the Census Bureau to develop content, detect threats, and reach the public directly resulting in:



COVID-19 State of Vaccine Confidence Insights Report

Jess Kolis, MPH, CHES
Kate Brookmeyer, PhD
Insights Unit
Vaccine Confidence and Demand Team
Vaccine Task Force, CDC



Obtained by America First Legal Foundation through litigation.



Vaccinate with **Confidence**

cdc.gov/coronavirus

Vaccine misinformation has undermined immunization campaigns and trust in health systems globally

- Measles-rubella vaccine campaign in India and Indonesia
 - Polio vaccine campaign in Peshawar, Pakistan
 - Ebola vaccine in DR Congo →
 - HPV vaccine in Japan and Denmark
- **Damage to vaccine confidence = lower uptake = more outbreaks**



A member of UNICEF's Ebola outreach team addresses the public in Beni, Democratic Republic of the Congo. © UNICEF/UN0228985/NAFTALIN

Fighting Ebola is hard. In Congo, fake news makes it harder

Zaid Hamid
@ZaidZamanHamid

By law, no medicine can be sold or administered in Pakistan without certain preconditions.
Registered manufacturer.
Date of expiry.
Complete medical brochure explaining ingredients/their side affects etc.
Polio vaccine is the only medicine where end users are denied this info



13K views 0:00 / 1:02



Obtained by America's Legal Foundation through litigation.

CDC's Efforts to Address Vaccine Misinformation

- 2016: Center for Global Health's Global Immunization Division creates Demand for Immunization Team
- October 2020: Vaccine Task Force (VTF) Vaccine Confidence Team created to support COVID-19 vaccine rollout
- February 2021: Insights Unit within VTF Vaccine Confidence team created to monitor and address COVID-19 vaccine-related misinformation and detect information voids that could harm health or damage vaccine confidence in the United States



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Vaccinate with Confidence

CDC's Strategy to Reinforce Confidence in COVID-19 Vaccines

Build Trust

Objective: Share clear, complete, and accurate messages about COVID-19 vaccines and take visible actions to build trust in the vaccine, the vaccinator, and the system in coordination with federal, state, and local agencies and partners.

- ✓ Communicate transparently about the process for authorizing, approving, making recommendations for, monitoring the safety of, distributing, and administering COVID-19 vaccines, including data handling.
- ✓ Provide regular updates on benefits, safety, side effects and effectiveness; clearly communicate what is not known.
- ✓ Proactively address and mitigate the spread and harm of misinformation via social media platforms, partners, and trusted messengers.

Empower Healthcare Personnel

Objective: Promote confidence among healthcare personnel* in their decision to get vaccinated and to recommend vaccination to their patients.

- ✓ Engage national professional associations, health systems, and healthcare personnel often and early to ensure a clear understanding of the vaccine development and approval process, new vaccine technologies, and the benefits of vaccination.
- ✓ Ensure healthcare systems and medical practices are equipped to create a culture that builds confidence in COVID-19 vaccination.
- ✓ Strengthen the capacity of healthcare professionals to have empathetic vaccine conversations, address myths and common questions, provide tailored vaccine information to patients, and use motivational interviewing techniques when needed.

Engage Communities & Individuals

Objective: Engage communities in a sustainable, equitable and inclusive way—using two-way communication to listen, build trust, and increase collaboration.

- ✓ Empower vaccine recipients to share their personal stories and reasons for vaccination within their circles of influence.
- ✓ Work with health departments and national partners to engage communities around vaccine confidence and service delivery strategies, including adaptation of vaccination sites to meet community needs.
- ✓ Collaborate with trusted messengers—such as faith-based and community leaders—to tailor and share culturally relevant messages and materials with diverse communities.

*Personnel = All staff working in healthcare settings, including physicians, PAs/NPs, nurses, allied health professionals, pharmacists, support staff, and community health workers

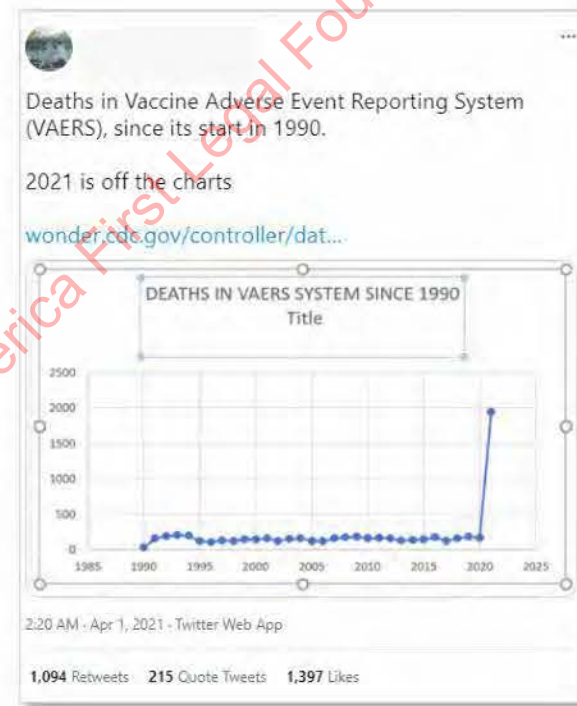
What we have learned about COVID-19 misinformation and information voids and how to address them

Obtained by America First Legal Foundation through litigation.



Chasing individual pieces of misinformation in attempts to debunk them ignores the real, larger social and cultural forces that caused these pieces of misinformation to emerge and gain traction in the first place.

- Understanding why mis- and disinformation is spreading and then developing programmatic and communications approaches to address the underlying narratives is critical.



State of Vaccine Confidence Insight Reports: What's Different

- Real-time rapid assessment of public sentiment around COVID-19 vaccination by:
 - Analyzing public perception and opinions
 - Identifying information gaps and voids and message penetration issues
 - Detecting mis- and disinformation as it emerges
- Utilizes a mixed deductive and inductive approach
- Themes include ways to act for federal agencies, states and jurisdictions, partners, and more.



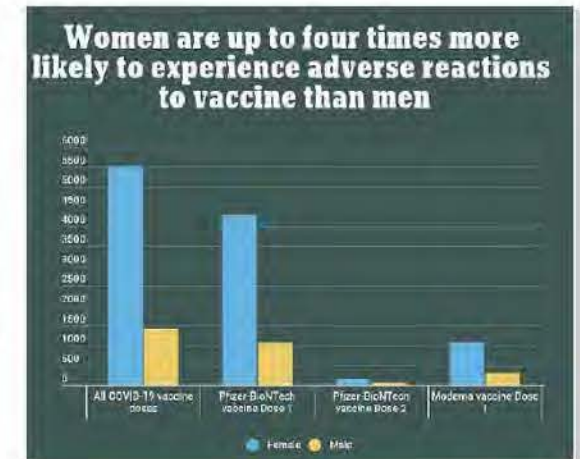
Women are experiencing unique and increased side effects after vaccination.

There are a growing number of media reports of women being more likely to experience side effects and experiencing different side effects than men.⁴² More reports of headaches, fatigue, dizziness, and rashes at the site of infection were made for women than men, according to data in the Vaccine Adverse Event Reporting System (VAERS).⁴³ This sex difference could be the result of a disproportionate number of women reporting to VAERS (differential reporting), biological differences, or even gender bias in clinical trials.^{44,45} Following vaccination, a subset of women report experiencing atypical menstruation, including changes in timing and nature of menstruation.⁴⁶ Such reports have been co-opted and incorporated into misinformation narratives that warn of a link between COVID-19 vaccination and infertility.^{47,48}

Of the reported cases of CVST following vaccination with J&J/Janssen COVID-19 Vaccine, nearly all occurred in women of reproductive age.⁴⁹ Therefore, some experts have suggested reserving the J&J/Janssen COVID-19 Vaccine for men only and that the adverse events may be linked to hormonal differences.^{50,51} Others argue that doing so would be premature while researchers continue to examine the issue.⁵²

Ways to take action:

- Conduct further research on women's health needs and COVID-19 vaccines, including irregular menstrual cycles following vaccination. Empower healthcare professionals to relay information about vaccine safety to patients; strengthen their capacity to have empathetic vaccine conversations. Offer healthcare providers and trusted advocates content prioritized for female patients concerned about vaccine safety and effectiveness.
- Partner with healthcare professionals to address misinformation clearly and transparently about COVID-19 vaccines, fertility, and reproductive health — especially those healthcare professionals who provide care to women.



Source: COVID vaccine: Women report more side effects than men. Here's why. (usatoday.com)

State of Vaccine Confidence Insights Report Process



Identify relevant data

- Social listening
- Media monitoring
- Inquiry analysis
- Web metrics
- 3rd party listening & analysis



Individual Analyst Theme Identification

- Repetition
- Similarities/ Differences
- Indigenous categories
- Missing data
- Deeper dives with key words in context searches



Theme Determination & Coding

- “Lone-wolf” coder approach
- Consensus determination of report contents
- Structural and analytical coding



Narrative Crafting

- Description of theme
- Summative statement of the reactions/ concerns
- Interpretive statement of what theme means to vaccine confidence



Scalar Judgements

- Dimension of novelty
- Directionality
- Threat to vaccine confidence







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Process: Scalar Judgements

Vaccine Confidence Threat Classification Matrix

Theme Classification

How do you classify this theme/information?			
High risk	Moderate risk	Low risk	Positive sentiment
 <ul style="list-style-type: none"> May lead to vaccine refusals and decreased uptake Wide reach, pervasive 	 <ul style="list-style-type: none"> Potential to trigger hesitancy to vaccination Moderate reach, modest dissemination 	 <ul style="list-style-type: none"> Concerning, but low risk to vaccine confidence Limited reach, limited dissemination 	 <ul style="list-style-type: none"> Could increase vaccine confidence, intent, or motivation Variable reach and dissemination

How has this theme/idea changed over time (since last report or over the course of multiple reports)?

 <p>Increasing Information spreading rapidly</p>	 <p>Stable Information remaining constant at prior level</p>	 <p>Decreasing Information is not gaining further traction and there has been no indication of additional activity</p>
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Threats to Vaccine Confidence Change Over Time

Example: Access to COVID-19 Vaccines for Communities of Color

February

February 12

High-priority populations facing physical and digital barriers to vaccination

March

March 1

Barriers to vaccine access remain, despite national expansion to retail pharmacy administration sites

March 15

Johnson & Johnson's Janssen COVID-19 Vaccine raises concerns about equity for communities of color

March 29

Vaccine hesitancy concerns are disguising structural and practical barriers

May

May 10

Consumer access to vaccines remains an issue for communities of color, despite many states and jurisdictions reporting excess supply

Time ----->

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Using Insights to Inform Action

Inform communication actions and content within the Vaccine Task Force.

Myths and Facts about COVID-19 Vaccines

Updated May 20, 2021 | Updated 4:29 PM | 9 min

Now that there are authorized and recommended COVID-19 vaccines in the United States, accurate vaccine information is critical and can help stop common myths and rumors.

How do I know which COVID-19 vaccine information are accurate?

It can be difficult to know which sources of information you can trust. Before considering vaccine information on the Internet, check that the information comes from a credible source and is updated on a regular basis. Learn more about [finding credible vaccine information](#).

Do any of the COVID-19 vaccines authorized for use in the United States shed or release any of their components?

No. Vaccine shedding is the term used to describe the release or discharge of any of the vaccine components in or outside of the body. Vaccine shedding can only occur when a vaccine contains a weakened version of the virus. None of the vaccines authorized for use in the United States contain a live virus.



The mRNA and viral vector vaccines are the two types of currently authorized COVID-19 vaccines available.

Learn more about [how mRNA COVID-19 vaccines work](#).

Learn more about [how viral vector vaccines work](#).

Adapting methods to perform rapid assessments and deep dives into specific issues or populations.

Rapid COVID-19 State of Vaccine Confidence Insights Report

Recommendation to Pause Use of Johnson & Johnson's Janssen COVID-19 Vaccine
Special Report | April 21, 2021 | Date Range: April 13-15, 2021



In response to the [joint CDC/EMA recommendation](#) to pause the use of Johnson & Johnson's Janssen COVID-19 Vaccine, a rapid assessment based on the methods and inputs from the COVID-19 State of Vaccine Confidence Insights Report was conducted.

The Rapid COVID-19 State of Vaccine Confidence Insights Report seeks to better understand consumer, provider, and state and jurisdiction chief concerns about the recommendation to pause use of the J&J/Janssen vaccine. The report describes threats to COVID-19 vaccine confidence, content gaps and information voids, circulating mis- and disinformation, and action steps for federal agencies to take now.

The information in this report is a snapshot from April 13, 2021 through April 15, 2021.



Contents

- 2. Preceptions, Concerns and Threats to Vaccine Confidence
- 3. Content Gaps and Information Voids
- 5. Misinformation and Disinformation Themes
- 6. Ways for Federal Agencies to Take Action Now
- 8. Appendix: Inputs and Sources

Centers for Disease Control & Prevention, COVID-19 Response, Vaccine Task Force Vaccine Confidence Team, Insights Unit

The findings, interpretations, and conclusions are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention (CDC).
DOI:10.26434/chemrxiv-2021-04-01

Collaborating with #ThisIsOurShot – grassroots campaign in California that elevates the voices of more than 25,000 health workers and vaccines advocates.

Alex M. McDonald, MD CAQSM FAAFP
@AlexMMDri

Vaccines are working. Only 0.008% of vaccinated people in the US have caught #COVID19 #ThisIsOurShot @ThisIsOurShot [sciencealert.com/75-million-ame... bjsm.bmj.com/content/early/...](#)



Only 0.008% of Vaccinated People in The US Have Caught COVID-19. New Data ... Working as intended @sciencealert.com

8:54 PM · Apr 20, 2021 · Twitter for iPhone

Obtained by America First Legal Foundation through litigation.

Next Steps

Internal CDC Actions

- Evaluate who uses the Insights Reports, how reports are used, and the effectiveness of the resulting intervention efforts
- Strengthen and expand links to communications team, policy team, and funded states and jurisdictions to implement report actions

External Actions

- Work together as USG to address and mitigate the spread of mis/disinformation via social media platforms and other online sources
 - Establish a regular cadence of communication between USG entities for mis/dis awareness and action steps needed
 - strengthen regional Inetworks for listening to and monitoring mis/disinformation.
 - Global integration and amplification

Help Wanted

- Evaluation support, analyst deployers, confidence consultants on mis/disinformation

Jess Kolis, MPH, CHES

ywe5@cdc.gov

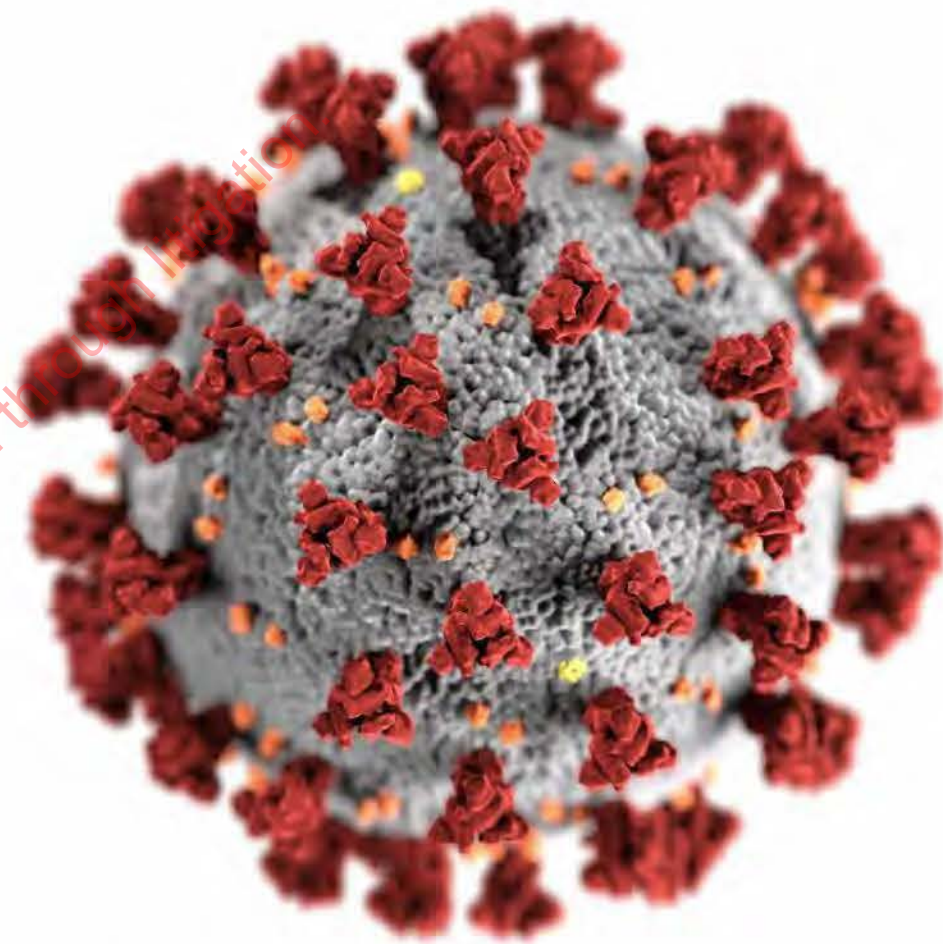
Kate Brookmeyer, PhD

guu1@cdc.gov

To receive COVID-19 State of Vaccine Confidence Insights report, email eocevent515@cdc.gov

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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Global Infodemic Management: CDC Engagement to Date



In collaboration with WHO's Quantify Team in EPI-WIN*:

1. Co-led world's **1st WHO infodemiology conference** (June '20)
2. Developed **draft global infodemic management research agenda** (Aug '20)
3. Planned **UNGA High Level Side Event on infodemic management** (Sept '20)
4. Co-led **1st WHO infodemic manager training** (Nov '20)
5. Supported launch of the **Africa Infodemic Response Alliance** (Nov '20)
6. Developed **joint call for infodemiology papers** (Feb '21)
7. Authoring **chapters in WHO-led IM textbook** (May '21)
8. Lecturing and facilitating at **4th WHO infodemiology conference** (May '21)
9. Co-leading **2nd infodemic manager training** (June '21)

*EPI-WIN: WHO's Information Network for Epidemics

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Tue, 13 Jul 2021 02:33:58 +0000
To: Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID); dparzik@usaid.gov; Bray, Leah; Marzouk, Amir; Nils Mueller; Joshua Machleder; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Winter, Peter B
Cc: Prince, Dale; Scully, Brian J. EOP/NSC
Subject: RE: Update: CDC/State/USAID Efforts to Counter COVID disinfo
Attachments: SOC IIR Sub-IPC on Countering Disinformation 2June2021.pdf

CDC, USAID, and State Colleagues,

I am following up on the SOC item from the June 2 sub-IPC on State, USAID and CDC working together to ensure best practices are provided to post on how to address vaccine related misinformation and to provide an update to the interagency on that collective work? We last heard that USAID and CDC had met and started to collaborate. Is that now (b)(5)? Are there any discussions about to provide (b)(5) (b)(5)? We'd like to pass forward an update to our leadership as soon as possible.

Thanks, Mary Beth

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Tuesday, June 22, 2021 9:27 AM
To: Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID) <nla5@cdc.gov>; dparzik@usaid.gov; Bray, Leah <BrayL2@state.gov>; Marzouk, Amir <MarzoukA@state.gov>; Nils Mueller <nmueller@usaid.gov>; Joshua Machleder <jmachleder@usaid.gov>; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP) <guu1@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vjx3@cdc.gov>; Tek, Nathaniel <TekN@state.gov>; Rico, Rita A.B. <RicoR@state.gov>
Cc: Prince, Dale <PrinceD@state.gov>; Scully, Brian J. EOP/NSC <(b)(6)>
Subject: RE: Update: CDC/State/USAID Efforts to Counter COVID disinfo

Elisabeth – thanks so much. Have you been able to sit down with (b)(5) to identify ways we can leverage our (b)(5) to implement best practices to counter COVID-related disinformation (b)(5) (b)(5) might also be a good partner. Perhaps laying out best practices in a (b)(5) on this and what (b)(5) (b)(5)

From: Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID) <nla5@cdc.gov>
Sent: Tuesday, June 22, 2021 9:10 AM
To: Polley, Mary Elizabeth R. EOP/NSC <(b)(6)>; dparzik@usaid.gov; Bray, Leah <BrayL2@state.gov>; Marzouk, Amir <MarzoukA@state.gov>; Nils Mueller <nmueller@usaid.gov>; Joshua Machleder <jmachleder@usaid.gov>; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP) <guu1@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vjx3@cdc.gov>; Tek, Nathaniel <TekN@state.gov>; Rico, Rita A.B. <RicoR@state.gov>
Cc: Prince, Dale <PrinceD@state.gov>; Scully, Brian J. EOP/NSC <(b)(6)>
Subject: RE: Update: CDC/State/USAID Efforts to Counter COVID disinfo

Hi Mary Beth,

Apologies for the tardiness—this was just cleared by PRM for sharing. Please find attached. Don't hesitate to reach out if you have any further questions.

Sincerely,

Elisabeth Wilhelm *(she/her)*

Vaccine Confidence Strategist

| Deployment Job: Team Co-Lead of Vaccine Confidence and Demand Team on COVID-19 Vaccine Task Force

| Day Job: Health Communications Specialist, Demand for Immunization Team, Global Immunization Division

M: + [redacted] (b)(6)

E: nla5@cdc.gov

From: Polley, Mary Elizabeth R. EOP/NSC <[redacted] (b)(6) >

Sent: Tuesday, June 22, 2021 8:37 AM

To: dparzik@usaid.gov; Bray, Leah <BrayL2@state.gov>; Marzouk, Amir <MarzoukA@state.gov>; Nils Mueller <nmueller@usaid.gov>; Joshua Machleder <jmachleder@usaid.gov>; Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID) <nla5@cdc.gov>; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP) <guu1@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vjx3@cdc.gov>; Tek, Nathaniel <TekN@state.gov>; Rico, Rita A.B. <RicoR@state.gov>

Cc: Prince, Dale <PrinceD@state.gov>; Scully, Brian J. EOP/NSC <[redacted] (b)(6) >

Subject: RE: Update: CDC/State/USAID Efforts to Counter COVID disinfo

Good morning CDC, USAID, State Colleagues,

I wanted to follow-up and get an update on coordination between CDC, State and USAID on COVID mis- and disinformation response as laid out in the SOC for the June 2 briefing with CDC and Census. Appreciate on coordination and planned activities as we move ahead with the global vaccine rollout.

[redacted] (b)(5)

(b)(5)

Best, Mary Beth

Obtained by America First Legal Foundation through litigation.

(U) Summary of Conclusions for the Information Integrity and Resilience Sub-Interagency Policy Committee on Countering Disinformation

Date: June 2, 2021

Time: 12:00-1:30pm

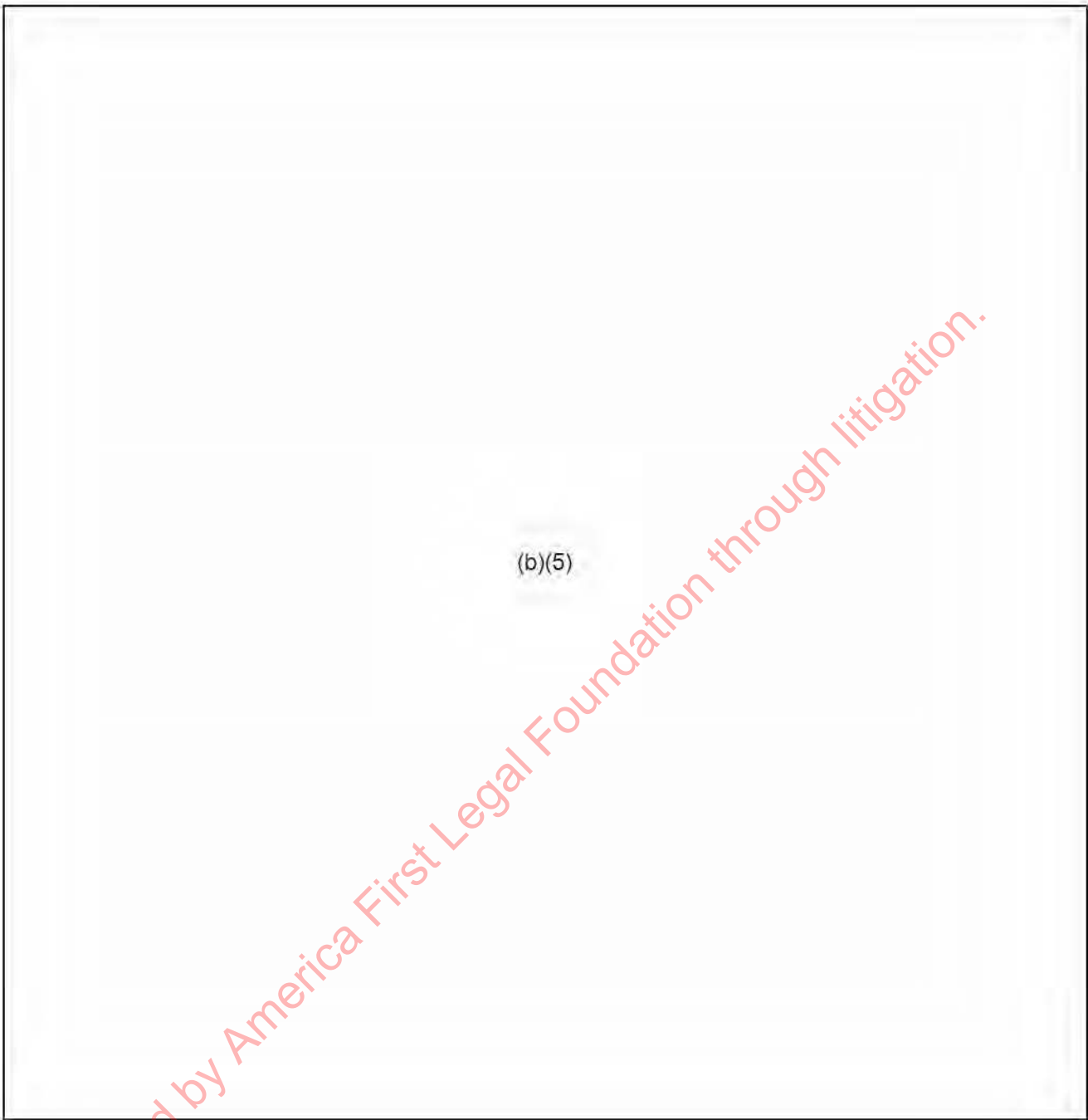
(U//FOUO) Participants:

Centers for Disease Control
Central Intelligence Agency
Census Bureau
Cybersecurity and Infrastructure Security Agency
Department of Defense
Department of Homeland Security
Department of Justice
Department of State
Department of Treasury
Federal Bureau of Investigation
National Security Agency
Office of Director of National Intelligence
National Security Council Staff
Domestic Policy Council Staff
National Economic Council Staff

(U//FOUO) It was discussed and agreed that:

(b)(5)

Obtained by America First Legal Foundation through litigation.



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From: Scully, Brian J. EOP/NSC
Sent: Tue, 10 Aug 2021 13:41:33 +0000
To: Polley, Mary Elizabeth R. EOP/NSC; (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov;
 Marzouk, Amir; hall-godfreyjj2@state.gov; petersonL3@state.gov; BrayL2@state.gov; rosen@state.gov;
 (b)(6)@ntia.gov; nmuellet@usaid.gov; dchisholm@usaid.gov; jmachleder@usaid.gov;
 (b)(6)@usaid.gov; (b)(6)@usagm.gov; (b)(6)@usagm.gov; (b)(6)@mail.mil;
 (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil;
 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov;
 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@treasury.gov; (b)(6)@treasury.gov; (b)(6)(CD) (FBI); (b)(6)
 (b)(6) (CyD) (FBI); (b)(6) (CyD) (FBI); (b)(6) (CD) (FBI); (b)(6) (CyD) (FBI);
 (b)(6) (CD) (FBI); (b)(6) (CyD) (FBI); CD_NSC; CyberPolicy; Matheny, Jason G.
 EOP/NSC; Berry, Ruth E. EOP/NSC; Wu, Tim EOP/WHO; Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID);
 Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Fitter, David L. (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri
 (CDC/DDPHSIS/CGH/GID); Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Brookmeyer, Kathryn A.
 (CDC/DDID/NCHHSTP/DSTDP); Jennifer Shopkorn (CENSUS/ADCOM FED);
 zachary.henry.schwartz@census.gov; Angha, Negah EOP/NSC; Bagia, Amrit B. EOP/NSC; Rosenberg,
 Brett A. EOP/NSC; Maykish, P.J. J. EOP/NSC; Welch, Jennifer D. EOP/NSC; Jefferson, Karrie; Berschinski,
 Robert G. EOP/NSC; Vail, Justin W. EOP/WHO; Levitt, Justin M. EOP/WHO; Bressler, Jonathan A.
 EOP/NSC; (b)(6)@ucia.gov; nicholji@ucia.gov; Tartakovsky, Daniel (HHS/OASH; Sicade, Lynn M (DRL;
 Stalker-Lehoux, Sarah M. EOP/NSC; Stokley, Shannon (CDC/DDID/NCIRD/ISD); Flores, Stephen
 (CDC/DDID/NCIRD/OD); (b)(6)@hq.dhs.gov; (b)(6) SES OSD OUSD POLICY (USA;
 Tisdale, Nicole N. EOP/NSC; (b)(6) CAPT USN JS J5 (USA; Sharma, Saloni EOP/NSC; Dowe,
 Tiffany Anita Clarke (CD) (FBI); (b)(6)@usaid.gov; Tama, Jason P. EOP/NSC; (b)(6) (CD)
 (FBI; Murphy, Jonathan; (b)(6) Col USAF JS DOM (USA; Freeman, Andrea K.
 EOP/NSC; Cameron, Beth E. EOP/NSC; (b)(6) CIV OSD OUSD POLICY (USA; (b)(6)
 CTR OSD OUSD POLICY (USA; Callanan, Greg J. EOP/OMB; Pipan, Joseph G. EOP/OMB; Mergen, Margaret
 C. EOP/OMB; Gorman, Lindsay P. EOP/OSTP; Beckman, Adam (HHS/OASH; (b)(6) (Federal;
 (b)(6) (Federal; (b)(6) COL USARMY OSD OUSD POLICY (USA; (b)(6)
 SES OSD OUSD POLICY (USA; Sessoms Lee, Charmaine; Chhabra, Tarun EOP/NSC; Patton, Rodney (NSD)
 (JMD; Roberts, Kamie M. EOP/OSTP; Durkovich, Caitlin A. EOP/NSC; Nelson, Alondra R. EOP/OSTP;
 Venkatasubramanian, Suresh EOP/OSTP; Lieberman, Dean K. EOP/NSC; Lesko, Max (HHS/OASH; Kettler,
 Brian; Baron, Joshua; Turek, Matthew; (b)(6) (contr-i2o; (b)(6) (contr-i2o; (b)(6)
 (b)(6) Pozmantier, Michael; (b)(6) LTC USARMY OSD OUSD POLICY (USA); LaFave, Helen
 G; James Noble; Saupp, Kevin; Furst, Hala; Young, Margaret A (Meg); Laskowski, Lauren C; Katherine
 Hart; Kalathil, Shanthi A. EOP/NSC; Geltzer, Joshua A. EOP/NSC; Y. Judy Chock; Hale, Geoffrey
 (b)(6)@cisa.dhs.gov); (b)(6)

Subject: RE: UK Briefing on their Approach to Addressing Information Manipulation
 (agenda and dial-in added)

Attachments: US Interagency presentation - 10 August 2021 FINAL.pdf

Good morning,

Attached are the slides that will be used in the presentation this morning.

Regards,
Brian

-----Original Appointment-----

From: Polley, Mary Elizabeth R. EOP/NSC (b)(6)

Sent: Monday, August 2, 2021 4:50 PM

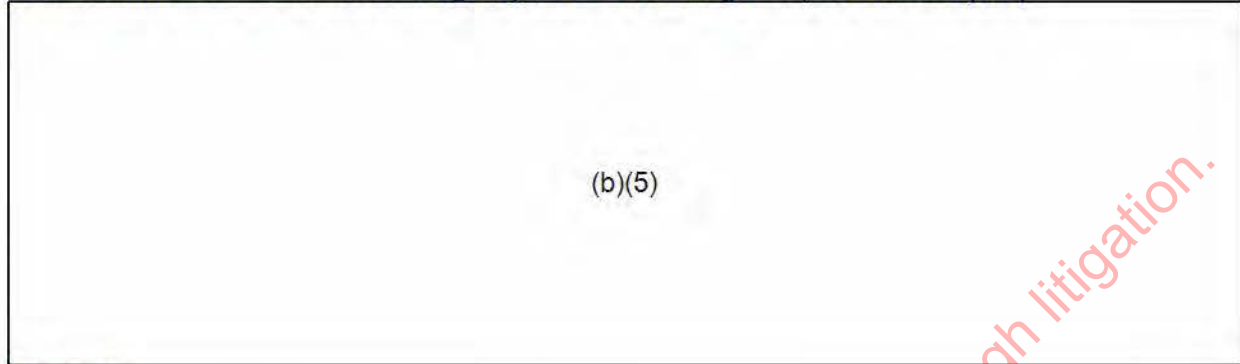
To: Polley, Mary Elizabeth R. EOP/NSC (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov;
 Marzouk, Amir; hall-godfreyjj2@state.gov; petersonL3@state.gov; BrayL2@state.gov; rosen@state.gov;
 (b)(6)@ntia.gov; nmuellet@usaid.gov; dchisholm@usaid.gov; jmachleder@usaid.gov;
 dparzik@usaid.gov (b)(6)@usagm.gov (b)(6)@usagm.gov; (b)(6)@mail.mil;
 (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil;
 (b)(6)@dni.gov (b)(6)@dni.gov (b)(6)@dni.gov (b)(6)@dni.gov (b)(6)@dni.gov;
 (b)(6)@dni.gov; (b)(6)@dni.gov (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@treasury.gov; (b)(6)@treasury.gov; (b)(6) CD (FBI); (b)(6)
 (b)(6) CyD (FBI); (b)(6) CyD (FBI); (b)(6) CD (FBI); (b)(6) CyD (FBI);
 (b)(6) (CD) (FBI); (b)(6) (CyD) (FBI; CD_NSC; CyberPolicy; Matheny, Jason G.
 EOP/NSC; Berry, Ruth E. EOP/NSC; Wu, Tim EOP/WHO; Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR;
 Abad, Neetu S. (CDC/DDPHSIS/CGH/GID; Scully, Brian J. EOP/NSC; Fitter, David L.
 (CDC/DDPHSIS/CGH/GID; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID; Kolis, Jessica
 (CDC/DDPHSIS/CGH/GID; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP; Jennifer Shopkorn
 (CENSUS/ADCOM FED; zachary.henry.schwartz@census.gov; Angha, Negah EOP/NSC; Bagia, Amrit B.
 EOP/NSC; Rosenberg, Brett A. EOP/NSC; Maykish, P.J. J. EOP/NSC; Welch, Jennifer D. EOP/NSC;
 Jefferson, Karrie; Berschinski, Robert G. EOP/NSC; Vail, Justin W. EOP/WHO; Levitt, Justin M. EOP/WHO;
 Bressler, Jonathan A. EOP/NSC; (b)(6)@ucia.gov; nicholji@ucia.gov; Tartakovsky, Daniel (HHS/OASH;
 Sicade, Lynn M (DRL; Stalker-Lehoux, Sarah M. EOP/NSC; Stokley, Shannon (CDC/DDID/NCIRD/ISD;
 Flores, Stephen (CDC/DDID/NCHHSTP/DHPIRS (b)(6)@hq.dhs.gov; Phu, (b)(6) SES OSD
 OUSD POLICY (USA; Tisdale, Nicole N. EOP/NSC (b)(6) CAPT USN JS J5 (USA; Sharma, Saloni
 EOP/NSC; (b)(6) CD (FBI; kgarrison@usaid.gov; Tama, Jason P. EOP/NSC;
 Wightman, Michael C. (CD) (FBI; (b)(6) (b)(6) Col USAF JS DOM (USA;
 Freeman, Andrea K. EOP/NSC; Cameron, Beth E. EOP/NSC; (b)(6) CIV OSD OUSD POLICY (USA;
 (b)(6) (b)(6) CTR OSD OUSD POLICY (USA; Callanan, Greg J. EOP/OMB; Pipan, Joseph G.
 EOP/OMB; Mergen, Margaret C. EOP/OMB; Gorman, Lindsay P. EOP/OSTP; Beckman, Adam (HHS/OASH;
 Langdon, David (Federal; (b)(6) Federal; (b)(6) COL USARMY OSD OUSD
 POLICY (USA; Harris, Milancy D SES OSD OUSD POLICY (USA; Sessoms Lee, Charmaine; Chhabra, Tarun
 EOP/NSC; Patton, Rodney (NSD) (JMD; Roberts, Kamie M. EOP/OSTP; Durkovich, Caitlin A. EOP/NSC;
 Nelson, Alondra R. EOP/OSTP; Venkatasubramanian, Suresh EOP/OSTP; Lieberman, Dean K. EOP/NSC;
 Lesko, Max (HHS/OASH; Kettler, Brian; Baron, Joshua; Turek, Matthew; (b)(6) (contr-i2o;
 (b)(6) contr-i2o; (b)(6) Pozmantier, Michael (b)(6) C LTC USARMY
 OSD OUSD POLICY (USA); LaFave, Helen G; James Noble; Saupp, Kevin; Furst, Hala; Young, Margaret A
 (Meg); Laskowski, Lauren C; Katherine Hart; Kalathil, Shanthi A. EOP/NSC; Geltzer, Joshua A. EOP/NSC; Y.
 Judy Chock; Hale, Geoffrey ((b)(6)@cisa.dhs.gov); (b)(6)

Subject: UK Briefing on their Approach to Addressing Information Manipulation (agenda and dial-in added)

When: Tuesday, August 10, 2021 10:00 AM-11:30 AM (UTC-05:00) Eastern Time (US & Canada).

Where: Teams with Phone Dial-In

UK Disinformation brief to US Interagency on Tues 10th Aug 2021, 10-11.30am (EST)



Teams Link

Microsoft Teams meeting

Join on your computer or mobile app

[Click here to join the meeting](#)

Join with a video conferencing device

Video Conference ID

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Or call in (audio only)

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Obtained by America First Legal Foundation through litigation.



Department for
Digital, Culture,
Media & Sport

Counter Disinformation Unit

Department for Digital, Culture, Media & Sport
(DCMS)

Obtained by America First Legal Foundation through litigation.

Counter Disinformation

Defining the Problem



Disinformation is the **deliberate** creation and dissemination of false and/or manipulated information that is **intended to deceive and mislead audiences**, either for the purposes of **causing harm, or for political, personal or financial gain.**



Misinformation refers to **inadvertently** spreading false information



Obtained by America First Legal Foundation through litigation.

The DCMS led-Counter Disinformation Unit works across Departmental boundaries and is mandated to provide the most **comprehensive picture possible about the extent, scope and impact** of disinformation during times of heightened risk by **bringing all the relevant information into one place**.

We've previously stood up an operational response to counter disinformation during the 2019 European elections, the 2019 UK General Election, and the local and devolved UK elections in May of this year.

We've been stood up since March last year in response to Covid-19.

The objectives of a dedicated coordination structure are to provide:



Fuller picture of disinformation threats than that provided by individual teams



A process which enables rapid sharing of information



Support formulation of a coordinated Government response

The CDU is a cross-Departmental system

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Home Office
Disinformation
Analysis Team (DAT)
Analyses the domestic implications of disinformation

Foreign, Commonwealth and Development Office
Open Source Unit (OSU)
Foreign disinformation activity

External Commercial Provider
Social media monitoring analysis

Cabinet Office
Rapid Response Unit (RRU)
Monitoring & analysis on narratives gaining traction

Monitoring and Analysis

Agencies



Reporting and Insight

Ministers

Senior Responsible Owner

Cabinet Office
National Security Unit

Other Government Departments
e.g. Health

Cabinet Office
National Security Communications Team (NSCT)



May 2021 elections

Devolved and local elections across the UK

Obtained by America First Action Foundation through litigation.

“Categories” of mis/disinformation used during May 2021 Election

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Intent is different, but impact on audience can be as great.

Disinformation

Misinformation

Risk to Democratic Processes

Risk to Public Order and Public Safety

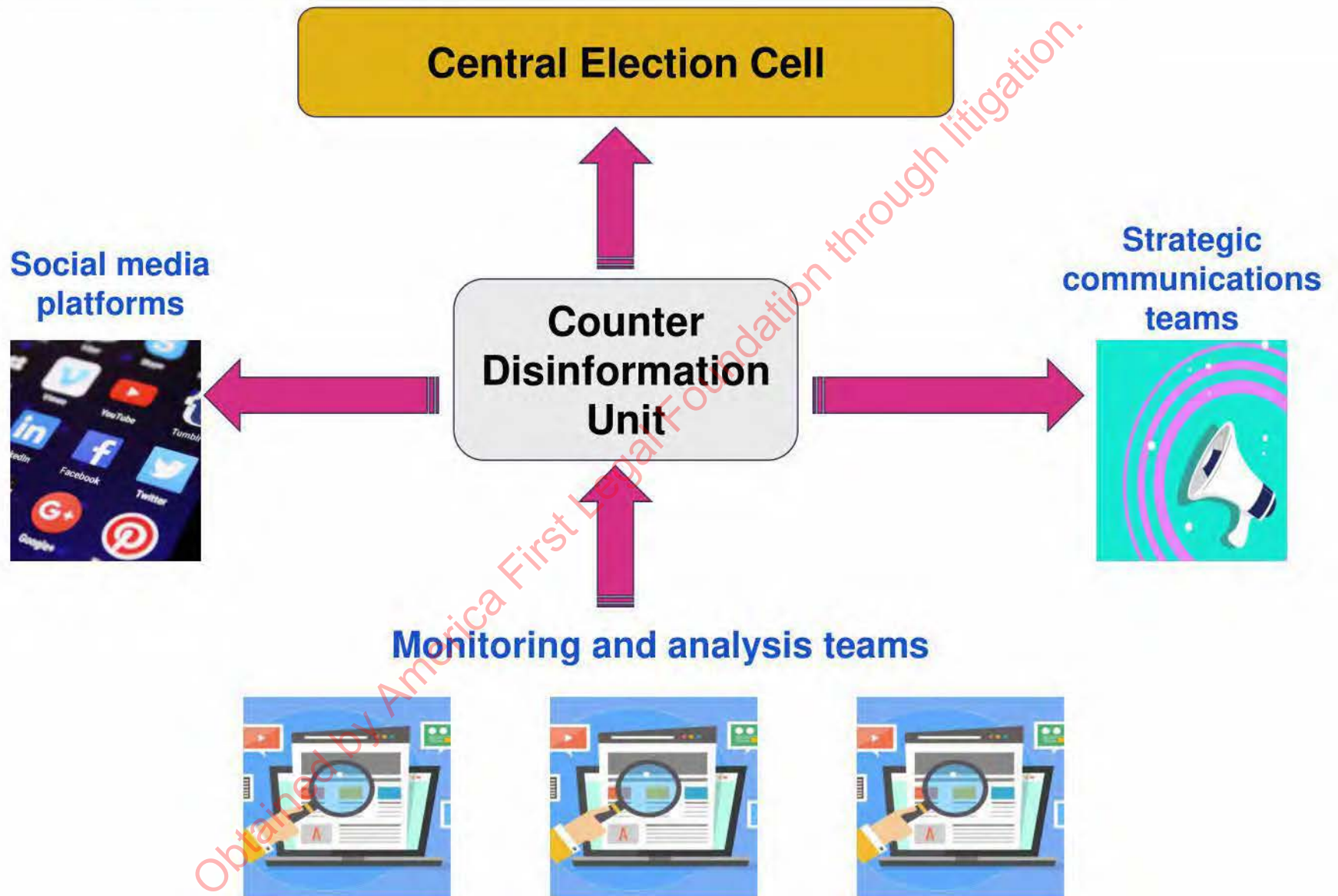
Risk to National Security

Suspected foreign interference

Covid-19

Targeting Minority and Vulnerable Groups

Obtained by America First Legal Foundation through litigation.



Obtained by America First Legal Foundation through litigation.

Alleged Iranian interference in Scottish election

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Iran 'meddling in Scots election'

Voters targeted by fake accounts impersonating independence supporters, think tank claims

Iranian operatives spent three

months in a covert bid to influence the Scottish independence vote in the run-up to the referendum, a report has revealed.

A new report by the think tank, the Henry Jackson Society, says that Iranian operatives used fake social media accounts to impersonate Scottish independence supporters and target voters in the run-up to the referendum.

The report, which was published on Monday, says that Iranian operatives used fake social media accounts to impersonate Scottish independence supporters and target voters in the run-up to the referendum.

protesters and encourage real ones to take part in rallies. It also says that Iranian operatives used fake social media accounts to impersonate Scottish independence supporters and target voters in the run-up to the referendum.

The report is part of a wider review of Iranian interference in the UK, which is being led by the Home Secretary, Theresa May.

The report's findings are based on a review of social media posts and other evidence that was obtained from the UK's intelligence agencies.

It is noted that evidence of Iran's involvement in the Scottish parliament's decision to set a referendum date, with the increasing possibility of a second Scottish independence referendum.

The report, which was published on Monday, says that Iranian operatives used fake social media accounts to impersonate Scottish independence supporters and target voters in the run-up to the referendum.

The report's findings are based on a review of social media posts and other evidence that was obtained from the UK's intelligence agencies.

one way for the Scottish National Party, the Tories, and the Labour Party to support the Scottish independence vote in the run-up to the referendum.

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IN THE NEWS

Fresh start for Johnson
The Scottish Conservative Party's new leader, Douglas Ross, has been elected as the party's first Scottish leader.

Clarke's Bafta links
The actress has been nominated for Best Actress at the Bafta awards.

Apps against Isis
New apps have been developed to help identify and report suspicious activity.

Lo Pen sets out stall
The Labour Party's new leader, Jeremy Corbyn, has set out his vision for the party.

Markets 'like casinos'
The Chancellor of the Exchequer, George Osborne, has said that the financial markets are like casinos.

Gerrard's legacy
The former Liverpool captain has been named as the new manager of the club.

- Taken from a yet-to be published report from the Henry Jackson Society report;
- Didn't align with our monitoring;
- Discussed with social media platforms who found no evidence;
- Once we obtained the report, conclusions of active interference in May elections weren't supported by any current evidence but based on assumptions of past behaviour;
- Gained little traction on social, print or broadcast media;
- Prepared for possible 'unfair result' type narratives post election;
- No major impact.



Wider disinformation policy work

Department for Digital, Culture, Media & Sport

(DCMS)

Obtained by America First Legal Foundation through litigation.

Updates to UK legal approach: Online Safety Bill

Slides For Presentation Purposes Only. Do Not Distribute

- The draft Online Safety Bill has now been published.
- The Bill delivers the government's commitment to make the UK the safest place in the world to be online whilst defending freedom of expression.
- The Online Safety regulatory framework includes a new legal duty of care on companies, which will be enforced by the appointed regulator, Ofcom.
- The duty of care will require companies to address harms to individuals on their online platforms, including misinformation and disinformation.

Online Safety Bill

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Measures

- The new laws will have **robust and proportionate measures** to deal with misinformation and disinformation that could **cause significant physical or psychological harm to an individual**, such as anti-vaccination content and falsehoods about COVID-19.

Category 1 Services

- Services with the largest audiences and a range of high risk features (known as 'Category 1 services'), including the **major social media platforms, will be required to set out what content**, including many types of misinformation and disinformation that harms individuals, **is and is not acceptable in their terms and conditions.**

Enforcement

- **Companies will need to enforce this effectively**, including removing content if they've made it clear it is not allowed on the platform. If what is appearing on their platforms doesn't match up with the promises made to users, **Ofcom will be able to take enforcement action.**

Online Safety Bill

Slides For Presentation Purposes Only; Do Not Distribute

The Regulator

- This Bill will **give Ofcom the tools it needs to understand how effectively misinformation and disinformation is being addressed** through transparency reports, and to take action if needed. This will be the first time a regulator has been given these powers.

Additional Measures

- The regulatory framework will also include **additional measures to address disinformation**, including:
 - establishing an expert advisory committee;
 - provisions to boost people's resilience to disinformation through media literacy; and
 - supporting research on misinformation and disinformation.

Freedom of Expression & Democracy

- These legislative measures are **designed to uphold and protect freedom of expression online, and promote a thriving democracy**. Our approach is therefore proportionate to the risks mis/disinformation poses to users, whilst ensuring these protections are maintained.

Working with platforms: operational vs. strategic

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Counter-Disinformation Unit identifies harmful content



OPERATIONAL RESPONSE

Through trusted flagging relationships, flag content which violates terms of service or could be eligible for fact checking / labelling

BILATERAL APPROACH

This work also informs non-platform interventions, such as proactive and reactive communications.



STRATEGIC RESPONSE

Examination of platform policies and enforcement to determine whether they are fit for purpose and consideration of effectiveness other interventions such as promotion of authoritative information.

BILATERAL & MULTILATERAL APPROACH

Key challenges

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Data access

There is currently an information asymmetry between the data that platforms hold and what we can access that needs to be addressed

Closed groups

Closed platforms and groups present a unique challenge, especially given the increased risk to minority groups

Ecosystem

New and emerging platforms such as Brand New Tube and Bitchute do not have explicit policies - users are exploiting loopholes to share videos on larger platforms

Obtained by America's Digital Foundation through litigation.

What is the Measuring Effective Interventions Framework?

- Developed in consultation with key stakeholders from industry, civil society and academia as part of the UK Government's COVID-19 Counter Disinformation Policy Forum.
- Platforms have introduced a range of interventions (e.g. increased fact checking and authoritative information centres) to respond to COVID-19 mis/disinformation.
- It is essential to understand how effective these measures are.
- Presently, platforms only provide limited data on content moderation, enforcement against accounts and fact-checking.
- There is little available to help us understand how user behaviour is changing, whether the risk posed to users is decreasing and which measures are driving this.
- The Framework is a solution. It seeks to build consensus on the best data and corresponding metrics for understanding whether platform interventions are working.

The benefits of the framework and an international approach...

- The framework is a crucial component in our multifaceted approach to tackling mis/disinformation.
- The data sought by the framework would enable large and small platforms to focus their resources in the right places, guiding a better targeted and more effective whole of industry response.
- There are also significant benefits to collaborating with international partners:
 - Clear message that the international community is prioritising this policy area, encouraging cooperation from platforms.
 - A consistent ask would support industry in efficiently implementing new systems and processes.
- ***So far, encouraging response from international partners. We would be pleased to share the framework with you and arrange a follow-up meeting to discuss this subject further.***



Department for
Digital, Culture,
Media & Sport

Home Office Disinformation Analysis Team (DAT)

Obtained by America First Legal Foundation through litigation.

Home Office Disinformation Analysis Team

Home Office Disinformation Analysis Team analyses the domestic implications of disinformation:

- How it spreads online and offline;
- Which UK audiences are most vulnerable to it and why;
- If and how it is impacting attitudes and behaviours;
- and, which interventions are effective.

DAT has five main strands of activity:

1. Open source monitoring of domestic information environment to identify divisive narratives potentially exploitable by disinformation actors. Delivered in partnership with Oxford University's Oxford Internet Institute.
2. In-house open source investigations into emerging disinformation issues.
3. Primary research to identify domestic audiences most vulnerable to disinformation and potential interventions.
4. Working with academia and the private sector to develop innovative tools to better identify and analyse disinformation.
5. Discrete work with UKIC to understand disinformation activity targeted at the UK.



Department for
Digital, Culture,
Media & Sport

Foreign, Commonwealth and Development Office (FCDO)

Obtained by America First Legal Foundation through litigation.



Foreign, Commonwealth
& Development Office

COUNTER DISINFORMATION AND MEDIA DEVELOPMENT

STRUCTURES IN THE FOREIGN, COMMONWEALTH &
DEVELOPMENT OFFICE TO TACKLE DISINFORMATION

Obtained by America First Legal Foundation through litigation.

STRUCTURES: Strategic communications, HMG Russia Unit



Foreign, Commonwealth & Development Office

OPEN SOURCE
UNIT

PROGRAMMES

INTERNATIONAL
ENGAGEMENT

CAMPAIGNS

Obtained by America First Legal Foundation through litigation

INTERNATIONAL ENGAGEMENT



Foreign, Commonwealth
& Development Office

- International engagement with partners to counter disinformation.
 - Sharing ideas and open source intelligence
 - Building coalitions
 - Sharing lessons learned
- Exploring and delivering programmes and joint campaigns
- Multilateral cooperation to counter disinformation
 - IPCSD
 - CFI
 - G7 RRM

CAMPAIGNS



Foreign, Commonwealth
& Development Office

- Operate within a strategic communications framework creating outputs to:
 - Increase reputational cost to hostile states for conducting malign activity
 - Increase the resilience of audiences
 - Build support for cooperation
- Translate policy objectives into communications objectives
- Audience insight
- Counter brand approach to messaging
- The Response Options Playbook

Counter Disinformation and Media Development Programme



Foreign, Commonwealth
& Development Office

- Launched in 2016.
- FY 2021-22: £29.8m
- Supports NSC Russia Strategy objective to “protect national security by reducing the harm to democracy and the rules-based international order caused by Russia’s information operations”.
- Supports a whole-of-society approach aimed at changing Russia's cost benefit analysis by
 - Strengthening the Information Environment
 - Increasing Resilience to Disinformation
 - Building a Strong UK and Western Response
- Operates across the Baltic States, Eastern Neighbourhood, Central Europe and the NATO space.
- Projects support partner governments, media organisations, civil society to promote independent media, collect open-source information and, where appropriate, to expose disinformation.

CDMD: Theory of Change Overview

Overall strategy – reduce disinfo impact on sovereignty, democracy and RBIS

Deter Hostile State Actors from using IO to:

- Undermine State Sovereignty
- Undermine faith in Western-style democracy
- Undermine adherence to the RBIS

Impacts

1. Consumption of disinformation is reduced in Programme Audiences

2. Consumption of quality, independent media is increased

3. Exploitable Social Fractures are Reduced

4. Increased support for liberal democratic values

5. Responses to Hostile State information operations are coordinated and impactful

Outcomes

- 1. General public more resilient to disinformation
- 2. Vulnerable audiences more resilient to disinformation
- 3. Technology developed to reduce the spread of disinformation
- 4. Partner governments take action against disinformation

- 5. Investigative journalism exposes corruption and stimulates debate
- 6. Increased engagement with content presenting gender equality
- 7. Balanced, independent media available for vulnerable audiences
- 8. Increased audience share amongst general public for independent media

- 9. Audiences reduce identification with pre-existing social biases
- 10. Alleviating groups' standing grievances with Partner governments

- 11. Democratic events and processes more resilient to disinformation
- 12. Support for free and fair elections increased
- 13. Support for gender equality in political processes increases
- 14. Vulnerable audiences are meaningfully engaged in democratic discourse

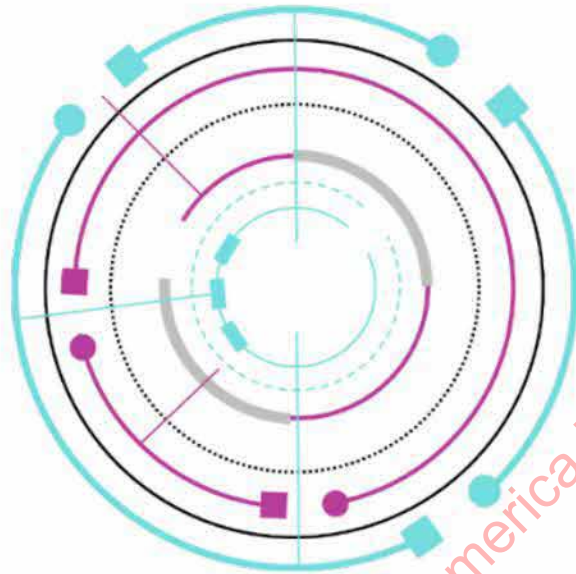
- 15. Partner countries increase capacity and willingness to counter IO
- 16. Partner countries have increased strat and crisis comms capability
- 17. Strong partnerships and networks against disinformation supported

All-outcome enablers: *Understand, Campaigns, International Engagement, Security*

Obtained by Justice First Fund Foundation through litigation.



Overview of the Open Source Unit (OSU)



Established in 2016 to transform how the FCDO does diplomacy through the better use of open source data

OSU brings together three specialisms to tackle foreign policy priorities:

- Data Science
- Behavioural Science
- Open Source Intelligence

Obtained by America First Legal Foundation through litigation.

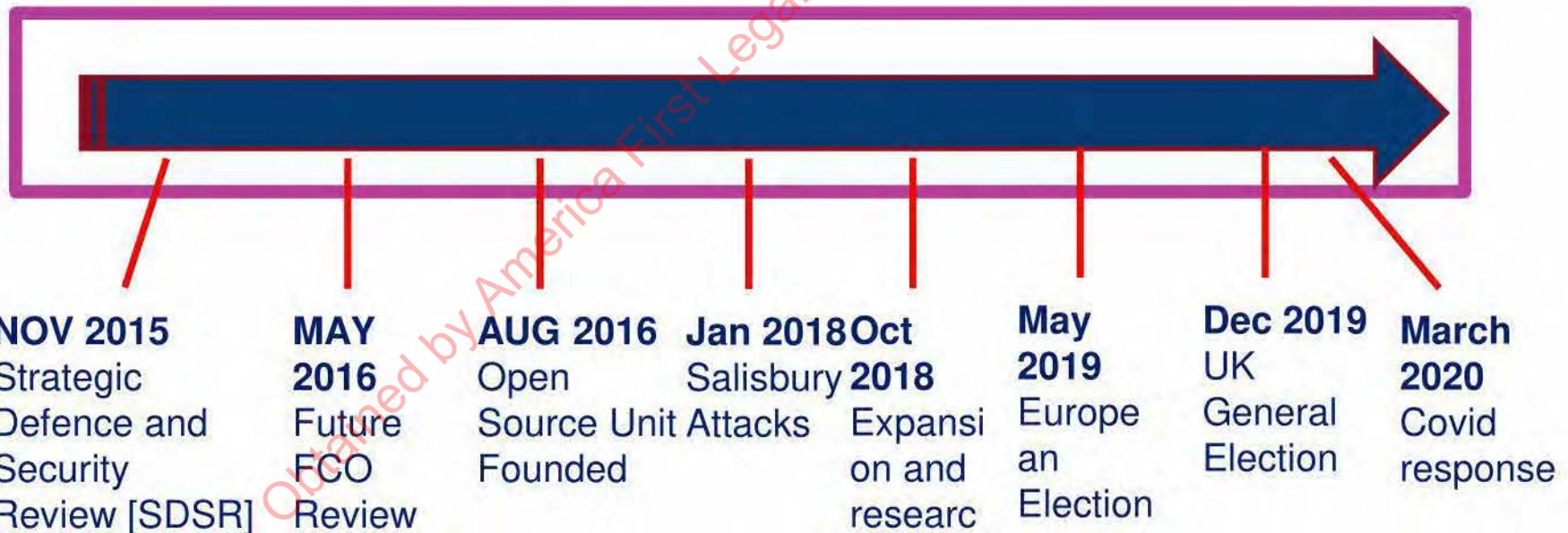


Foreign, Commonwealth
& Development Office



What is the OSU?

- The OSU helps the FCDO and our partners make use of open source analysis to understand the world we operate in, develop policy, respond to international events, further UK National Security priorities by verifying Hybrid Threats, and evidence our impact.
- Policy agnostic capability unique in UK government and recognised by our allies and partners as at the cutting edge for the way the OSU brings together pillars of expertise with thematic and language specialism





Foreign, Commonwealth
& Development Office



Objective Uphold Rule of Law and International Norms

State Agnostic

To understand the wider international threat
To remain aware of the domestic threat

Threat Agnostic

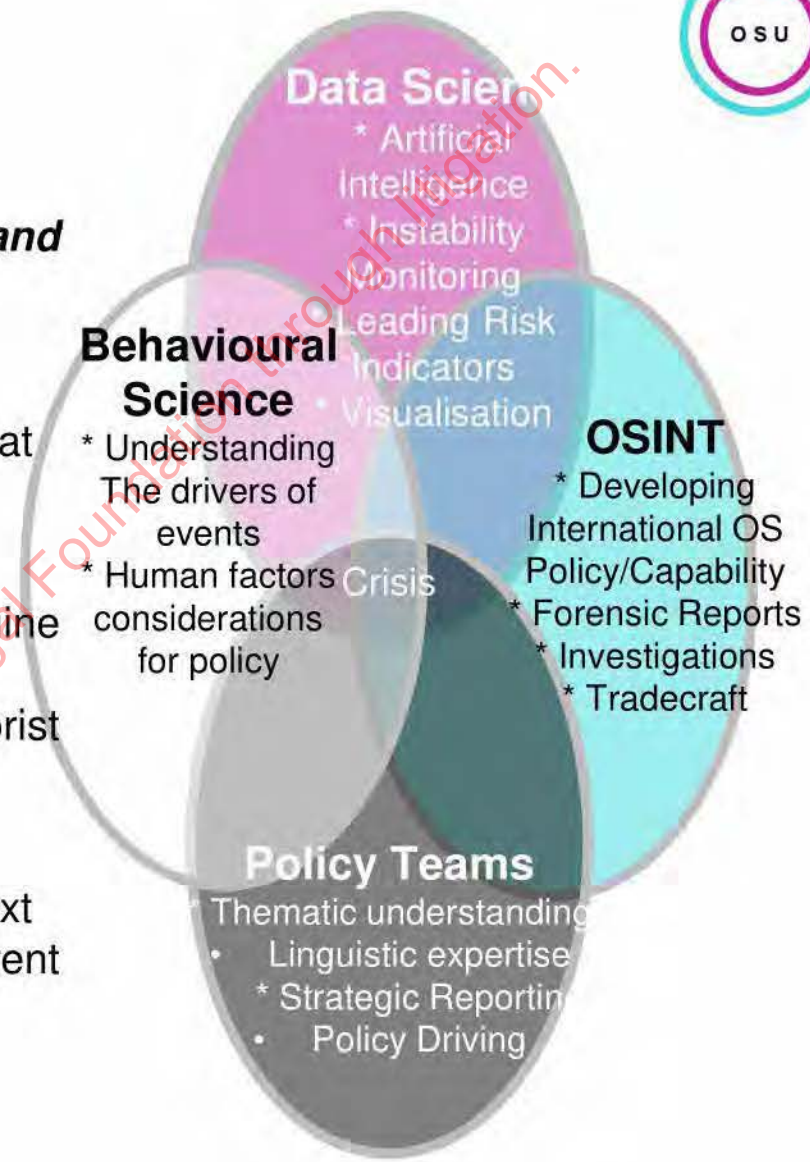
Disaggregate malign intent from genuine public voices
Incorporate evidence of extremist/terrorist networks

Hybrid Threats

Places disinformation within a wider context
Provide accountable and transparent assessments

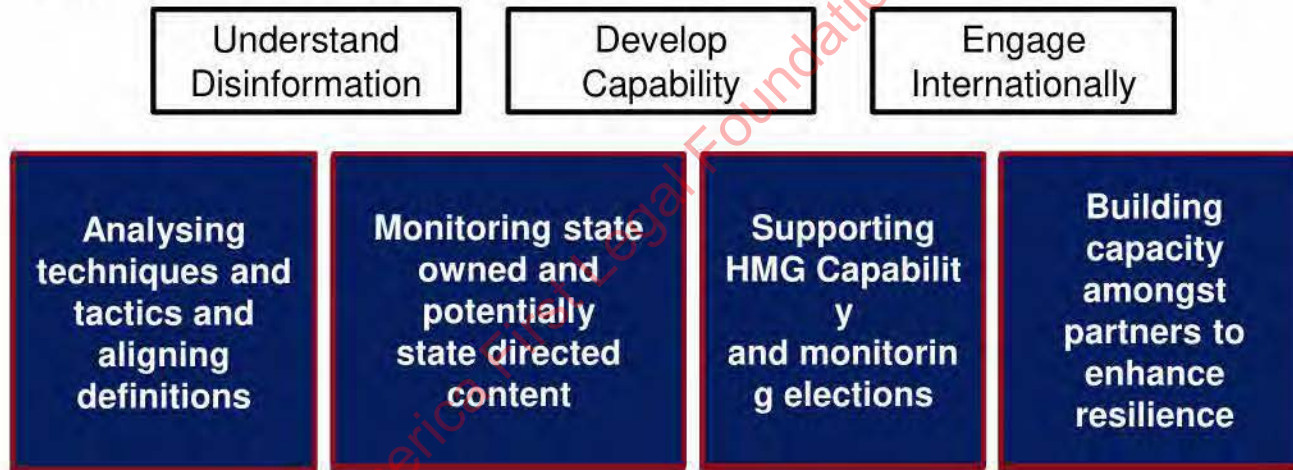
Capacity Building

UK and International



Understanding Disinformation

The **Counter Disinformation Cell** was established in November 2018. It is funded by the Conflict Stability, and Security Fund (HMG Russia Unit) with a specific mandate to analyse Hostile State Information Operations and disinformation with an international component.



Tactics: Using Influencers

Vaccine trials under political pressure to deliver

Published 23 September 2020
© James Wilson



Source: EUReporter (EUReporter.co), 23 September. Archived screenshot from 25 September



Influencers Say They Were Urged to Criticize Pfizer Vaccine

A disinformation effort to reduce public confidence in Covid-19 vaccines tried to enroll social media commentators in France and Germany.



Техническое задание для блогера некоммерческая реклама

Что рекламируем?

Мы общественная организация по делам молодежи. Мы хотим предостеречь детей от участия в несогласованных акциях.

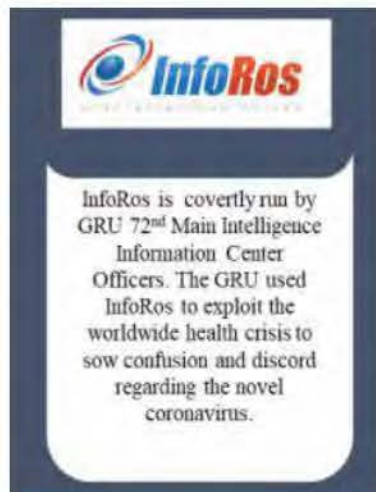
Что важно рассказать в видео?

1. В целом всё это надоело, очень устали от этого шума с Навальным. Невозможно сидеть в тиктоке, один Навальный!
2. Детей вытащили и за ними прятались.
3. Провоцировали полицию, это было явно не мирное шествие
4. Собралось мало людей.

Один любой тезис надо использовать в рекламе. Можете сделать в шуточной форме. **НЕЛЬЗЯ ГОВОРИТЬ СЛОВО В СЛОВО!!!**

Tactics: Understanding Sources

InfoRos is a disinformation outlet, sanctioned on 15 April 2021 for ties to Russian intelligence.



OSU has identified 1,362 domains linked to InfoRos based on forensic website infrastructure analysis

Patriot Media



In October 2019, four news outlets affiliated with the IRA announced that they had formed the Patriot Media Group



1

Federal News Agency (FAN)

2

Nation News (Narodniye Novosti)



3

Politics Today (Politika Segodnya)



4

Economics Today (Ekonomika Segodnya)

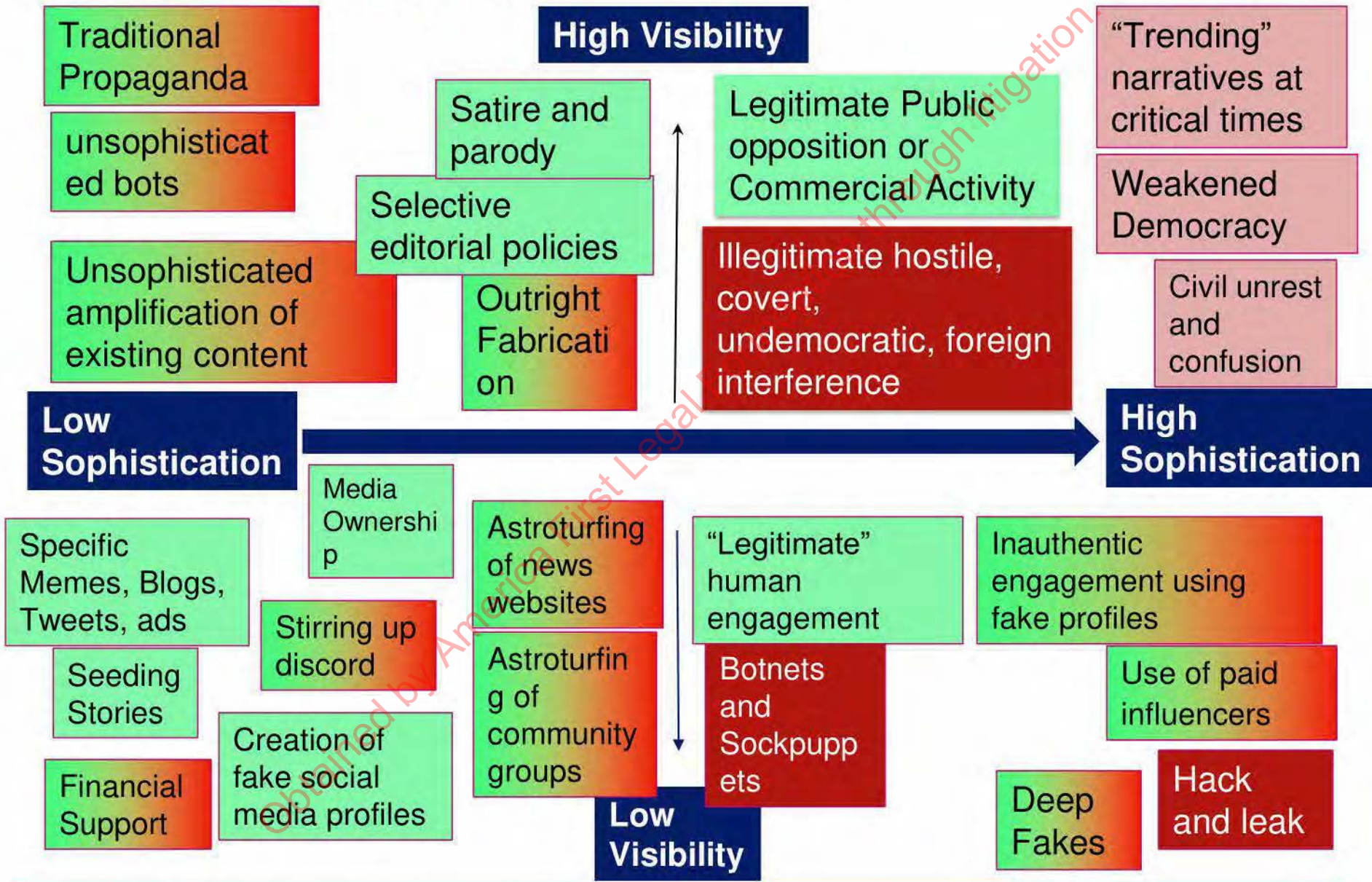


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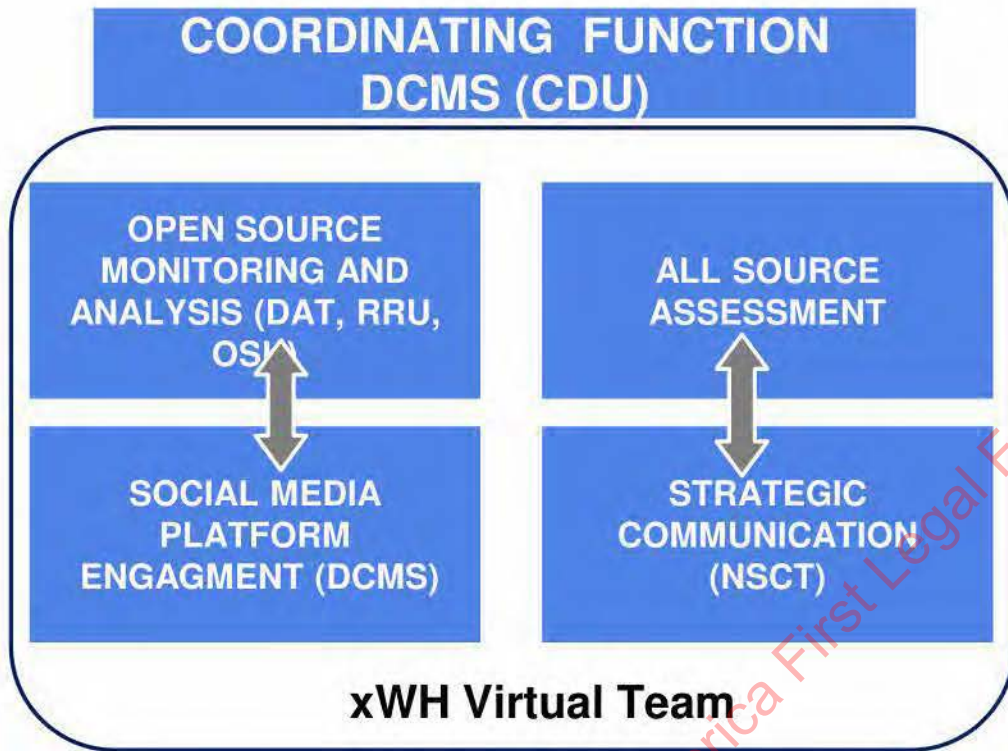
PolitRussia



Understanding Other Tactics



Monitoring: Narratives, Elections and Events



**WANT TO LEAVE THE EU ASAP?
CAN'T DECIDE WHICH WAY TO VOTE?
PUT YOUR X IN BOTH THE
CONSERVATIVE
AND
BREXIT PARTY BOXES
MAKE DAMN SURE WE LEAVE!**

Britain Bites Back
17 mins · 🌐

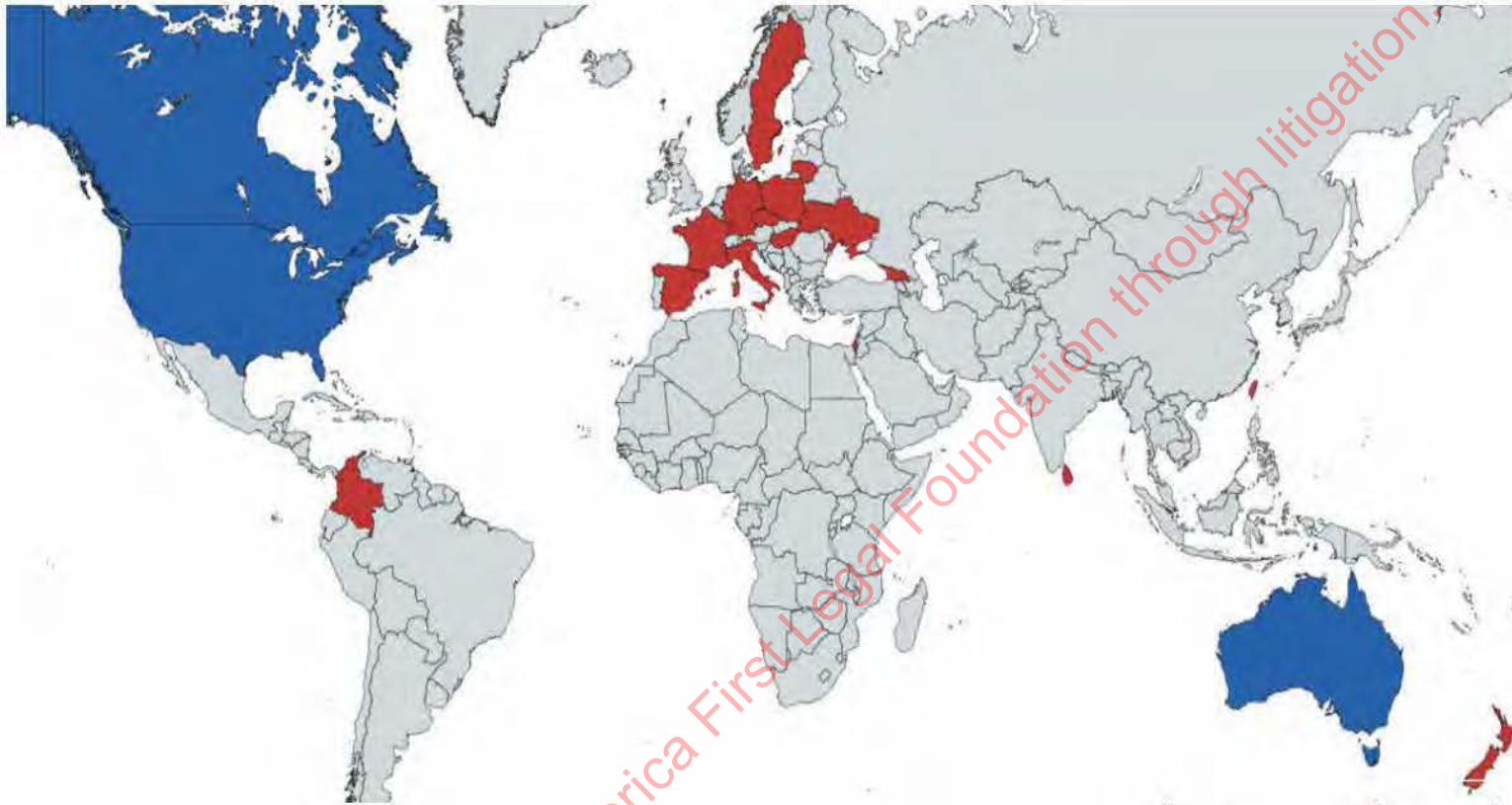
IMPORTANT. In the European elections next month it is vital that we do not split the Leave vote. Supporters of UKIP and the Brexit Party should ensure they place a cross next to BOTH candidates on the ballot paper. Please pass this on to your friends. The mainstream media will be trying to keep this quiet!

👍👍👍 You and 211 others · 126 comments · 38 shares



Obtained by America First Legal Foundation

International Engagement



Joint working
With US,
Canada,
Australia

Bilateral
engagement with
20+ countries

International training
and capability



Training, report
sharing



Department for
Digital, Culture,
Media & Sport

Any questions?

Obtained by America First Legal Foundation through litigation.

From: Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR)
Sent: Thu, 3 Jun 2021 14:04:09 +0000
To: Jennifer Shopkorn (CENSUS/ADCOM FED); Polley, Mary Elizabeth R. EOP/NSC; Zachary Henry Schwartz (CENSUS/ITSMO FED); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Fitter, David L. (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID)
Cc: Scully, Brian J. EOP/NSC; Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Stokley, Shannon (CDC/DDID/NCIRD/ISD); Flores, Stephen (CDC/DDID/NCHHSTP/DHPIRS)
Subject: RE: Interagency Brief on Census/CDC Efforts to Counter Disinformation
Attachments: Insights-SOVC_May2021_cleared.pdf

Thank you, USG colleagues!

It was an honor. We're happy to speak with any agency about our process, what we're doing domestically and globally, and suggested ways to take action and behavioral interventions we are developing that lean on social inoculation to pre-bunk misinformation.

Happily, the next SOVC report will drop on Monday and we expect to have the reports all online in the next week. A more detailed methods paper is also coming soon if you're interested. Do email eoevent515@cdc.gov if you'd like to be subscribed.

Meanwhile, please find our presentation attached.

Wishing you a good day ahead,

Sincerely,

Elisabeth Wilhelm
Vaccine Confidence Strategist

| Deployed to CDC Vaccine Task Force as Team Co-Lead of Vaccine Confidence and Demand Team
 | Day Job: Demand for Immunization Team, Global Immunization Division

M: (b)(6)
E: nla5@cdc.gov

| Contractor with Tanaq

From: Jennifer Shopkorn (CENSUS/ADCOM FED) <jennifer.shopkorn@census.gov>
Sent: Thursday, June 3, 2021 9:04 AM
To: Polley, Mary Elizabeth R. EOP/NSC (b)(6); Zachary Henry Schwartz (CENSUS/ITSMO FED) <zachary.henry.schwartz@census.gov>; Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR) <nla5@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vx3@cdc.gov>; Fitter, David L. (CDC/DDPHSIS/CGH/GID) <vid3@cdc.gov>; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID) <hjt1@cdc.gov>

Cc: Scully, Brian J. EOP/NSC (b)(6)

Subject: Re: Interagency Brief on Census/CDC Efforts to Counter Disinformation

Mary Beth,

Thank you for the chance to share an overview of our Trust & Safety Team's work combatting mis/disinformation around the 2020 Census. We are always happy to speak with folks if additional questions arise, including talking to GEC. Please find our slides from yesterday attached.

Thanks,
Jen

Jennifer C. Shopkorn (she/her)

Senior Advisor for Communications

Communications Directorate

U.S. Census Bureau

O: 202-465-5982 | M: (b)(6)

[census.gov](https://www.census.gov) | [@uscensusbureau](https://twitter.com/uscensusbureau) | [2020census.gov](https://www.2020census.gov)

From: Polley, Mary Elizabeth R. EOP/NSC (b)(6)

Sent: Wednesday, June 2, 2021 9:00 PM

To: Jennifer Shopkorn (CENSUS/ADCOM FED) <jennifer.shopkorn@census.gov>; Zachary Henry Schwartz (CENSUS/ITSMO FED) <zachary.henry.schwartz@census.gov>; Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR) <nla5@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vjx3@cdc.gov>; Fitter, David L. (CDC/DDPHSIS/CGH/GID) <vid3@cdc.gov>; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID) <hjt1@cdc.gov>

Cc: Scully, Brian J. EOP/NSC (b)(6)

Subject: RE: Interagency Brief on Census/CDC Efforts to Counter Disinformation

CDC and Census Colleagues,

Thank you so much for your presentations. I have had several requests for your slides. I have also had a request for a point-to-point briefing for the GEC at State. I can't thank you enough for taking the time to share your real world experience and look forward to building on your lessons learned going forward.

Best, Mary Beth

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Tuesday, June 1, 2021 9:12 PM
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Cc: Scully, Brian J. EOP/NSC <(b)(6)>
Subject: Interagency Brief on Census/CDC Efforts to Counter Disinformation

Census, CDC Colleagues,

Thanks so much for taking the time to talk with the interagency tomorrow about your work to counter disinformation. As we have explained, we are running an interagency process to identify ways to improve and streamline the federal government's efforts to identify, counter and build resilience to disinformation. Your work brings those discussions together with real-time events and I would encourage you to keep your remarks focused on (b)(5) including identifying and addressing (b)(5), as well as your efforts to (b)(5) through highly visible (b)(5). We are looking to (b)(5) into your thinking and if you have advice or lessons learned, please share them.

We have an hour for tomorrow's discussions so I would ask each agency to try to keep your remarks to 20 minutes to allow for Q&A. Please also share any final materials you would like shared with group and we would welcome your thoughts on how the federal government could better address disinformation, regardless of the topic or source.

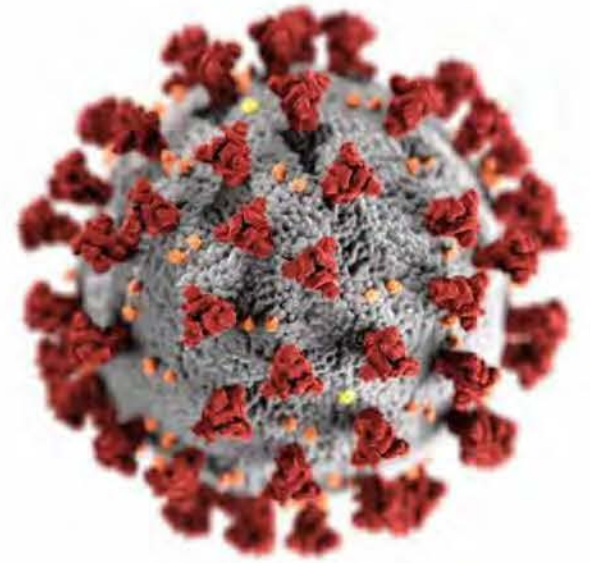
Look forward to hearing from you tomorrow. You may want to log-on a few minutes early and the Zoom information has been added to the invite.

Thanks so much,
 Mary Beth

Mary Beth Polley
 Disinformation, Foreign Malign Influence (Temp) and Resiliency
 Democracy and Human Rights Directorate
 National Security Council

COVID-19 State of Vaccine Confidence Insights Report

Jess Kolis, MPH, CHES
Kate Brookmeyer, PhD
Insights Unit
Vaccine Confidence and Demand Team
Vaccine Task Force, CDC



Obtained by America First Legal Foundation through litigation.



Vaccinate with **Confidence**

cdc.gov/coronavirus

Vaccine misinformation has undermined immunization campaigns and trust in health systems globally

- Measles-rubella vaccine campaign in India and Indonesia
 - Polio vaccine campaign in Peshawar, Pakistan
 - Ebola vaccine in DR Congo →
 - HPV vaccine in Japan and Denmark
- **Damage to vaccine confidence = lower uptake = more outbreaks**



A member of UNICEF's Ebola outreach team addresses the public in Beni, Democratic Republic of the Congo. © UNICEF/UN0228985/NAFTALIN

Fighting Ebola is hard. In Congo, fake news makes it harder

Zaid Hamid
@ZaidZamanHamid

By law, no medicine can be sold or administered in Pakistan without certain preconditions.
Registered manufacturer.
Date of expiry.
Complete medical brochure explaining ingredients/their side affects etc.
Polio vaccine is the only medicine where end users are denied this info



13K views 0:00 / 1:02



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CDC's Efforts to Address Vaccine Misinformation

- 2016: Center for Global Health's Global Immunization Division creates Demand for Immunization Team
- October 2020: Vaccine Task Force (VTF) Vaccine Confidence Team created to support COVID-19 vaccine rollout
- February 2021: Insights Unit within VTF Vaccine Confidence team created to monitor and address COVID-19 vaccine-related misinformation and detect information voids that could harm health or damage vaccine confidence in the United States



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Vaccinate with Confidence

CDC's Strategy to Reinforce Confidence in COVID-19 Vaccines

Build Trust

Objective: Share clear, complete, and accurate messages about COVID-19 vaccines and take visible actions to build trust in the vaccine, the vaccinator, and the system in coordination with federal, state, and local agencies and partners.

- ✓ Communicate transparently about the process for authorizing, approving, making recommendations for, monitoring the safety of, distributing, and administering COVID-19 vaccines, including data handling.
- ✓ Provide regular updates on benefits, safety, side effects and effectiveness; clearly communicate what is not known.
- ✓ Proactively address and mitigate the spread and harm of misinformation via social media platforms, partners, and trusted messengers.

Empower Healthcare Personnel

Objective: Promote confidence among healthcare personnel* in their decision to get vaccinated and to recommend vaccination to their patients.

- ✓ Engage national professional associations, health systems, and healthcare personnel often and early to ensure a clear understanding of the vaccine development and approval process, new vaccine technologies, and the benefits of vaccination.
- ✓ Ensure healthcare systems and medical practices are equipped to create a culture that builds confidence in COVID-19 vaccination.
- ✓ Strengthen the capacity of healthcare professionals to have empathetic vaccine conversations, address myths and common questions, provide tailored vaccine information to patients, and use motivational interviewing techniques when needed.

Engage Communities & Individuals

Objective: Engage communities in a sustainable, equitable and inclusive way—using two-way communication to listen, build trust, and increase collaboration.

- ✓ Empower vaccine recipients to share their personal stories and reasons for vaccination within their circles of influence.
- ✓ Work with health departments and national partners to engage communities around vaccine confidence and service delivery strategies, including adaptation of vaccination sites to meet community needs.
- ✓ Collaborate with trusted messengers—such as faith-based and community leaders—to tailor and share culturally relevant messages and materials with diverse communities.

*Personnel = All staff working in healthcare settings, including physicians, PAs/NPs, nurses, allied health professionals, pharmacists, support staff, and community health workers

What we have learned about COVID-19 misinformation and information voids and how to address them

Obtained by America First Legal Foundation through litigation.



Chasing individual pieces of misinformation in attempts to debunk them ignores the real, larger social and cultural forces that caused these pieces of misinformation to emerge and gain traction in the first place.

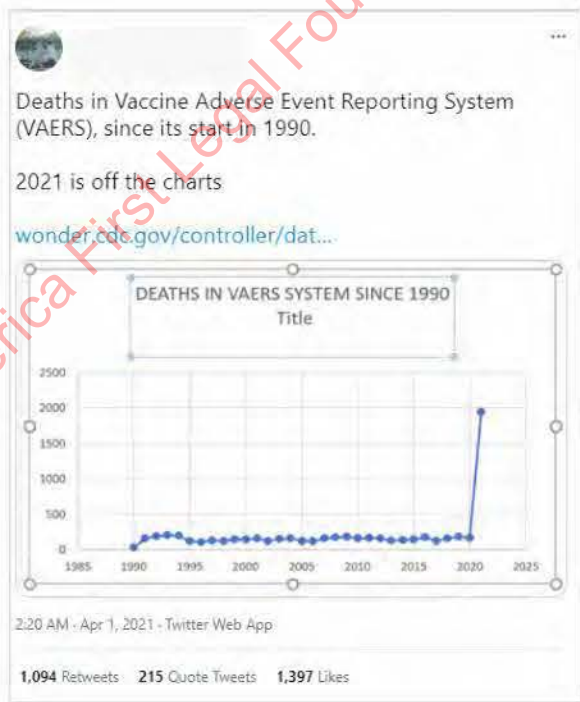
- Understanding why mis- and disinformation is spreading and then developing programmatic and communications approaches to address the underlying narratives is critical.

Nurse speaks out: "Our residents are dying after they've taken this COVID-19 vaccine", "We had people who were once walking who can no longer walk, people who were once talking who can no longer talk, people who were once able to think, could no longer think properly, they are dropping like flies"



0 Comments · Share · Save · Hide · Report

107.5min



Truth Seek... in Covid Vaccine Awareness Group...
Forwarded from @mgshowchannel

Dr. Fauci & Chinese Communist Caught Colluding on Mass Vaccinations, Extended Lockdowns

https://trendingpolitics.com/dr-fauci-chinese-communist-caught-colluding-on-mass-vaccinations-extended-lockdowns-knab/?utm_source=mgshow

Trending Politics

Dr. Fauci & Chinese Communist Caught Colluding on Mass Vaccinations, Extended Lockdowns

Dr. Anthony Fauci, who is looked at as the pre-eminent authority figure on the COVID-19 pandemic, recently appeared on a virtual panel [...] More

t.me/vaccineawareness/43821 · 16.6K · Mar 24 at 19:34

State of Vaccine Confidence Insight Reports: What's Different

- Real-time rapid assessment of public sentiment around COVID-19 vaccination by:
 - Analyzing public perception and opinions
 - Identifying information gaps and voids and message penetration issues
 - Detecting mis- and disinformation as it emerges
- Utilizes a mixed deductive and inductive approach
- Themes include ways to act for federal agencies, states and jurisdictions, partners, and more.



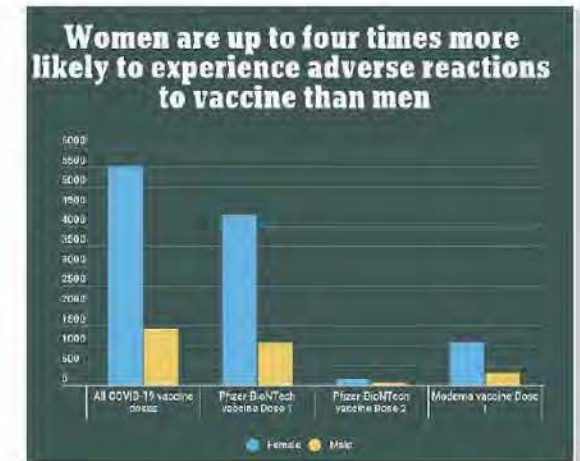
Women are experiencing unique and increased side effects after vaccination.

There are a growing number of media reports of women being more likely to experience side effects and experiencing different side effects than men.⁴² More reports of headaches, fatigue, dizziness, and rashes at the site of infection were made for women than men, according to data in the Vaccine Adverse Event Reporting System (VAERS).⁴³ This sex difference could be the result of a disproportionate number of women reporting to VAERS (differential reporting), biological differences, or even gender bias in clinical trials.^{44,45} Following vaccination, a subset of women report experiencing atypical menstruation, including changes in timing and nature of menstruation.⁴⁶ Such reports have been co-opted and incorporated into misinformation narratives that warn of a link between COVID-19 vaccination and infertility.^{47,48}

Of the reported cases of CVST following vaccination with J&J/Janssen COVID-19 Vaccine, nearly all occurred in women of reproductive age.⁴⁹ Therefore, some experts have suggested reserving the J&J/Janssen COVID-19 Vaccine for men only and that the adverse events may be linked to hormonal differences.^{50,51} Others argue that doing so would be premature while researchers continue to examine the issue.⁵²

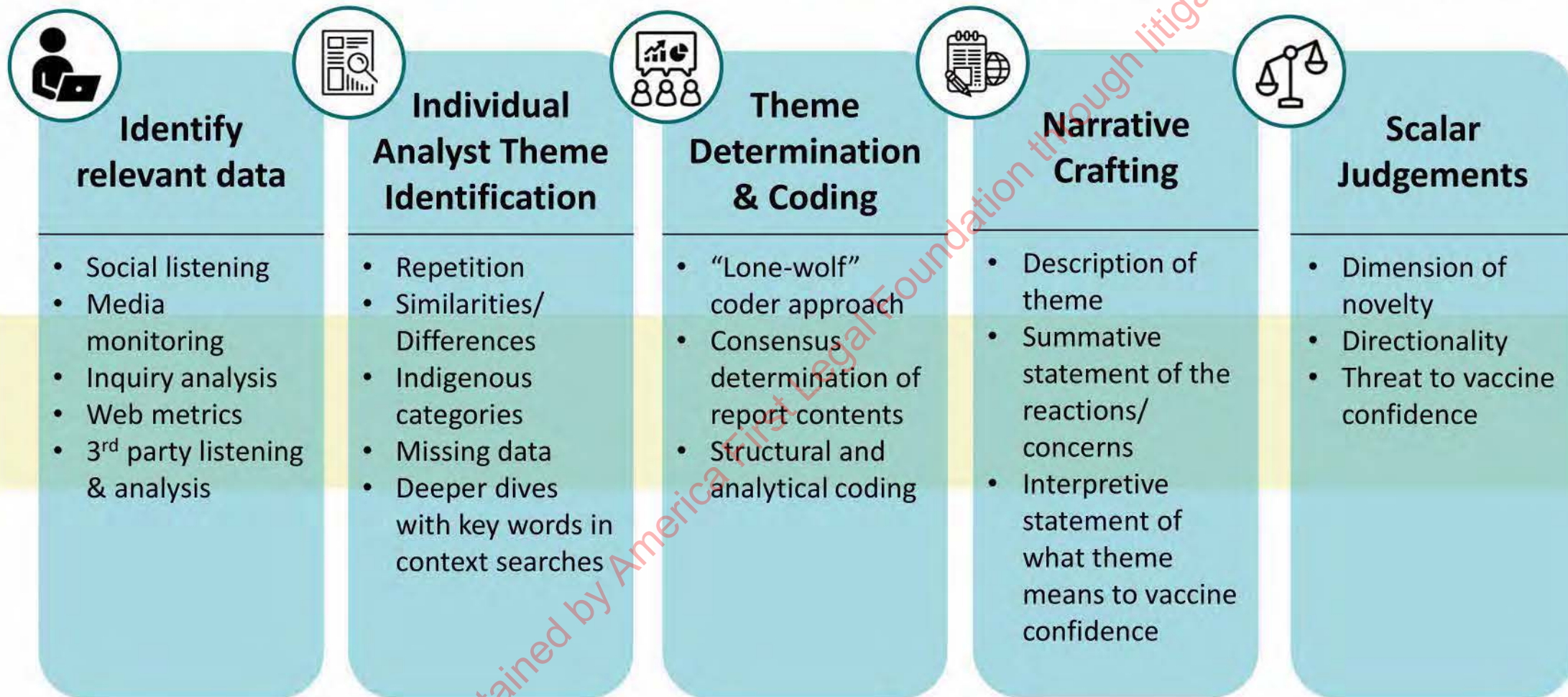
Ways to take action:

- Conduct further research on women's health needs and COVID-19 vaccines, including irregular menstrual cycles following vaccination. Empower healthcare professionals to relay information about vaccine safety to patients; strengthen their capacity to have empathetic vaccine conversations. Offer healthcare providers and trusted advocates content prioritized for female patients concerned about vaccine safety and effectiveness.
- Partner with healthcare professionals to address misinformation clearly and transparently about COVID-19 vaccines, fertility, and reproductive health — especially those healthcare professionals who provide care to women.



Source: COVID vaccine: Women report more side effects than men. Here's why. (usatoday.com)

State of Vaccine Confidence Insights Report Process







Obtained by America First Legal Foundation through litigation

Process: Scalar Judgements

Vaccine Confidence Threat Classification Matrix

Theme Classification

How do you classify this theme/information?			
High risk	Moderate risk	Low risk	Positive sentiment
 <ul style="list-style-type: none"> May lead to vaccine refusals and decreased uptake Wide reach, pervasive 	 <ul style="list-style-type: none"> Potential to trigger hesitancy to vaccination Moderate reach, modest dissemination 	 <ul style="list-style-type: none"> Concerning, but low risk to vaccine confidence Limited reach, limited dissemination 	 <ul style="list-style-type: none"> Could increase vaccine confidence, intent, or motivation Variable reach and dissemination

How has this theme/idea changed over time (since last report or over the course of multiple reports)?

 <p>Increasing Information spreading rapidly</p>	 <p>Stable Information remaining constant at prior level</p>	 <p>Decreasing Information is not gaining further traction and there has been no indication of additional activity</p>
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Threats to Vaccine Confidence Change Over Time

Example: Access to COVID-19 Vaccines for Communities of Color

February

February 12

High-priority populations facing physical and digital barriers to vaccination

March

March 1

Barriers to vaccine access remain, despite national expansion to retail pharmacy administration sites

March 15

Johnson & Johnson's Janssen COVID-19 Vaccine raises concerns about equity for communities of color

March 29

Vaccine hesitancy concerns are disguising structural and practical barriers

May

May 10

Consumer access to vaccines remains an issue for communities of color, despite many states and jurisdictions reporting excess supply

Time ----->

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Using Insights to Inform Action

Inform communication actions and content within the Vaccine Task Force.

Myths and Facts about COVID-19 Vaccines

Updated May 20, 2021 | Updated 4:29 PM | 90%

Now that there are authorized and recommended COVID-19 vaccines in the United States, accurate vaccine information is critical and can help stop common myths and rumors.

How do I know which COVID-19 vaccine information are accurate?

It can be difficult to know which sources of information you can trust. Before considering vaccine information on the Internet, check that the information comes from a credible source and is updated on a regular basis. Learn more about [finding credible vaccine information](#).

Do any of the COVID-19 vaccines authorized for use in the United States shed or release any of their components?

No. Vaccine shedding is the term used to describe the release or discharge of any of the vaccine components in or outside of the body. Vaccine shedding can only occur when a vaccine contains a weakened version of the virus. None of the vaccines authorized for use in the United States contain a live virus.



The mRNA and viral vector vaccines are the two types of currently authorized COVID-19 vaccines available.

Learn more about [how mRNA COVID-19 vaccines work](#).

Learn more about [how viral vector vaccines work](#).

Adapting methods to perform rapid assessments and deep dives into specific issues or populations.

Rapid COVID-19 State of Vaccine Confidence Insights Report

Recommendation to Pause Use of Johnson & Johnson's Janssen COVID-19 Vaccine
Special Report | April 21, 2021 | Date Range: April 13-15, 2021



In response to the [joint CDC/EMA recommendation](#) to pause the use of Johnson & Johnson's Janssen COVID-19 Vaccine, a rapid assessment based on the methods and inputs from the COVID-19 State of Vaccine Confidence Insights Report was conducted.

The Rapid COVID-19 State of Vaccine Confidence Insights Report seeks to better understand consumer, provider, and state and jurisdiction chief concerns about the recommendation to pause use of the J&J/Janssen vaccine. The report describes threats to COVID-19 vaccine confidence, content gaps and information voids, circulating mis- and disinformation, and action steps for federal agencies to take now.

The information in this report is a snapshot from April 13, 2021 through April 15, 2021.



Contents

- 2. Preceptions, Concerns and Threats to Vaccine Confidence
- 3. Content Gaps and Information Voids
- 5. Misinformation and Disinformation Themes
- 6. Ways for Federal Agencies to Take Action Now
- 8. Appendix: Inputs and Sources

Centers for Disease Control & Prevention, COVID-19 Response, Vaccine Task Force Vaccine Confidence Team, Insights Unit

The findings, interpretations, and conclusions are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention (CDC).
DOI:10.1181/04192021.0000004 | 1/4/2021

Collaborating with #ThisIsOurShot – grassroots campaign in California that elevates the voices of more than 25,000 health workers and vaccines advocates.

Alex M. McDonald, MD CAQSM FAAFP
@AlexMMTr

Vaccines are working. Only 0.008% of vaccinated people in the US have caught #COVID19 #ThisIsOurShot @ThisIsOurShot [sciencealert.com/75-million-ame... bjsm.bmj.com/content/early/...](#)



Only 0.008% of Vaccinated People in The US Have Caught COVID-19. New Data ... Working as intended @sciencealert.com

8:54 PM · Apr 20, 2021 · Twitter for iPhone

Obtained by America First Legal Foundation through litigation.

Next Steps

Internal CDC Actions

- Evaluate who uses the Insights Reports, how reports are used, and the effectiveness of the resulting intervention efforts
- Strengthen and expand links to communications team, policy team, and funded states and jurisdictions to implement report actions

External Actions

- Work together as USG to address and mitigate the spread of mis/disinformation via social media platforms and other online sources
 - Establish a regular cadence of communication between USG entities for mis/dis awareness and action steps needed
 - strengthen regional Inetworks for listening to and monitoring mis/disinformation.
 - Global integration and amplification

Help Wanted

- Evaluation support, analyst deployers, confidence consultants on mis/disinformation

Jess Kolis, MPH, CHES

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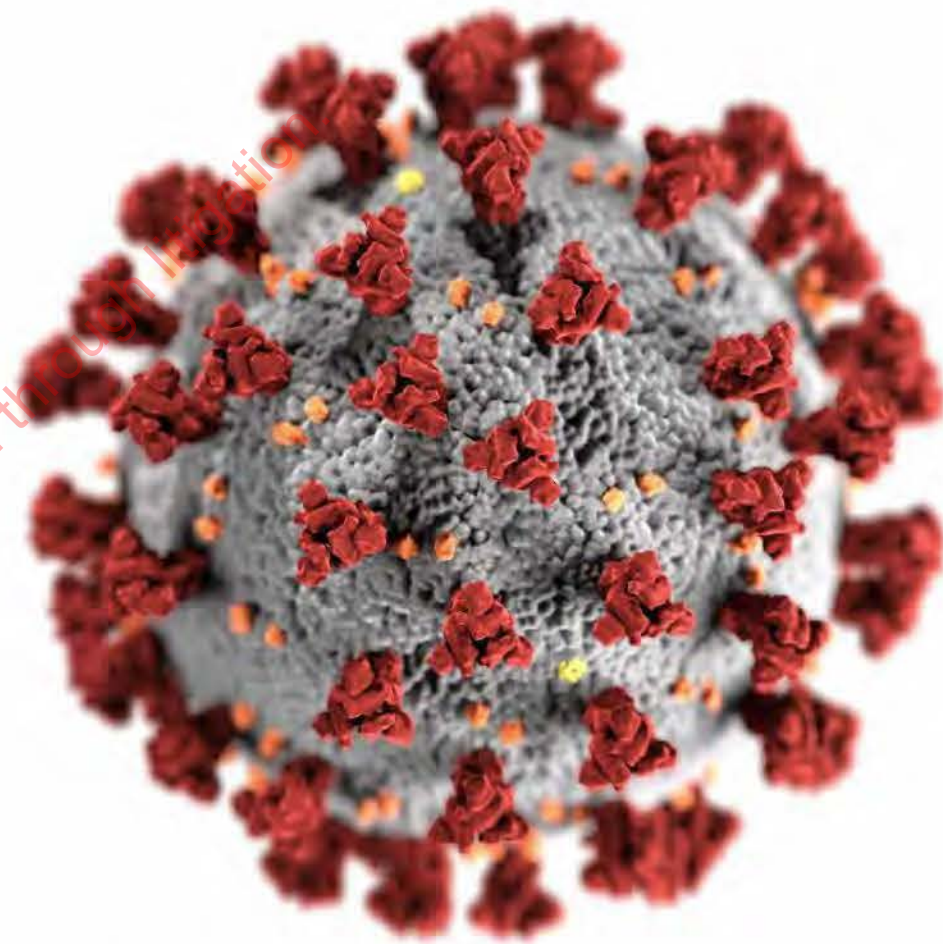
Kate Brookmeyer, PhD

guu1@cdc.gov

To receive COVID-19 State of Vaccine Confidence Insights report, email eocevent515@cdc.gov

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Obtained by America First Legal Foundation through litigation

Global Infodemic Management: CDC Engagement to Date

In collaboration with WHO's Quantify Team in EPI-WIN*:

1. Co-led world's **1st WHO infodemiology conference** (June '20)
2. Developed **draft global infodemic management research agenda** (Aug '20)
3. Planned **UNGA High Level Side Event on infodemic management** (Sept '20)
4. Co-led **1st WHO infodemic manager training** (Nov '20)
5. Supported launch of the **Africa Infodemic Response Alliance** (Nov '20)
6. Developed **joint call for infodemiology papers** (Feb '21)
7. Authoring **chapters in WHO-led IM textbook** (May '21)
8. Lecturing and facilitating at **4th WHO infodemiology conference** (May '21)
9. Co-leading **2nd infodemic manager training** (June '21)



*EPI-WIN: WHO's Information Network for Epidemics

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Cc: Martonosi, Margaret; Roberts, Kamie M. EOP/OSTP
Subject: NITRD WG on Information Integrity (Please respond by COB)

Good morning,

We have received initial interest from several Departments and Agencies in a NITRD working group. We would appreciate confirmation by COB today so we can set up a dedicated discussion to finalize the scope.

Thanks so much, Mary Beth

From: Polley, Mary Elizabeth R. EOP/NSC

Sent: Thursday, July 8, 2021 4:04 PM

To: (b)(6)@hq.dhs.gov <(b)(6)@hq.dhs.gov>;
 (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov>;
 (b)(6)@hq.dhs.gov (b)(6)@hq.dhs.gov>; (b)(6)@hq.dhs.gov
 (b)(6)@hq.dhs.gov>; (b)(6) <MarzoukA@state.gov>; 'hall-godfreyjj2@state.gov'
 <hall-godfreyjj2@state.gov>; 'petersonL3@state.gov' <petersonL3@state.gov>; 'BrayL2@state.gov'
 <BrayL2@state.gov>; 'StrohME@state.gov' <StrohME@state.gov>; 'rosen@state.gov'
 <rosen@state.gov>; (h)(6)@ntia.gov (h)(6)@ntia.gov>; 'nmueller@usaid.gov'
 <nmueller@usaid.gov>; 'dchisholm@usaid.gov' <dchisholm@usaid.gov>; 'jmachleder@usaid.gov'
 <jmachleder@usaid.gov>; 'dparzik@usaid.gov' <dparzik@usaid.gov>; (b)(6)@usagm.gov'
 (h)(6)@usagm.gov>; (b)(6)@usagm.gov (b)(6)@usagm.gov>; (b)(6)@v@mail.mil'
 (b)(6)@mail.mil>; (b)(6)@mail.mil (b)(6)@mail.mil>;
 (b)(6)@mail.mil (b)(6)@mail.mil>; (b)(6)@mail.mil'
 (b)(6)@mail.mil>; (b)(6)@dni.gov (b)(6)@dni.gov>; (b)(6)@dni.gov'
 (h)(6)@dni.gov>; (h)(6)@dni.gov (b)(6)@dni.gov>; (b)(6)@dni.gov (b)(6)@dni.gov>;
 (b)(6)@dni.gov (b)(6)@dni.gov>; (b)(6)@dni.gov (b)(6)@dni.gov>; (b)(6)@dni.gov'
 (b)(6)@dni.gov>; (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov>;
 (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov>; (b)(6)@cisa.dhs.gov'
 <(b)(6)@cisa.dhs.gov>; (h)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov>;
 (h)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov>; (b)(6)@cisa.dhs.gov'
 <(b)(6)@cisa.dhs.gov>; (b)(6)@cisa.dhs.gov (b)(6)@cisa.dhs.gov>;
 (b)(6)@cisa.dhs.gov <(b)(6)@cisa.dhs.gov>; (b)(6)@treasury.gov'
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 (h)(6)@fbi.gov <(b)(6)@fbi.gov>; (b)(6)@FBI.GOV (b)(6)@FBI.GOV>;
 (b)(6)@FBI.GOV (b)(6)@FBI.GOV>; (h)(6)@fbi.gov (h)(6)@fbi.gov>; (b)(6)@fbi.gov'
 <(h)(6)@fbi.gov>; (b)(6)@FBI.GOV (b)(6)@FBI.GOV>; (b)(6)@fbi.gov'
 <(h)(6)@fbi.gov>; (h)(6)@fbi.gov (b)(6)@fbi.gov>; (b)(6)@fbi.gov'
 (b)(6)@fbi.gov>; Matheny, Jason G. EOP/NSC <(b)(6) Berry, Ruth E.
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Stalker-Lehoux, Sarah M. EOP/NSC (b)(6); 'Stokley, Shannon (CDC/DDID/NCIRD/ISD)' <zma2@cdc.gov>; 'Flores, Stephen (CDC/DDID/NCHHSTP/DHPIRS)' <sif2@cdc.gov>; (b)(6)@hq.dhs.gov' (b)(6)@hq.dhs.gov'; (b)(6) SES OSD OUSD POLICY (USA)' (b)(6)mail.mil>; Tisdale, Nicole N. EOP/NSC (b)(6) (b)(6) CAPT USN JS J5 (USA)' (b)(6)@mail.mil>; Sharma, Saloni EOP/NSC (b)(6); 'Tiffany Dowe' (b)(6)@fbi.gov>; 'kgarrison@usaid.gov' <kgarrison@usaid.gov>; Jason P. EOP/NSC Tama (b)(6) (b)(6); 'Michael Wightman' (b)(6)@fbi.gov>; 'Murphy, Jonathan' (b)(6)@hq.dhs.gov'; (b)(6) (b)(6)ol USAF JS DOM (USA) (b)(6)@mail.mil>; Freeman, Andrea K. EOP/NSC (b)(6) Cameron, Beth E. EOP/NSC (b)(6); (b)(6) CIV OSD OUSD POLICY (USA)' (b)(6)@mail.mil>; (b)(6) CTR OSD OUSD POLICY (USA)' (b)(6)@mail.mil>; Callanan, Greg J. EOP/OMB (b)(6)>; Pipan, Joseph G. EOP/OMB (b)(6) Mergen, Margaret C. EOP/OMB (b)(6) Gorman, Lindsay P. EOP/OSTP (b)(6); 'Beckman, Adam (HHS/OASH)' <Adam.Beckman@hhs.gov>; (b)(6) (Federal)' (b)(6)@doc.gov>; (b)(6) (Federal)' (b)(6)@doc.gov>; (b)(6) COL USARMY OSD OUSD POLICY (USA) (b)(6)@mail.mil>; (b)(6) D SES OSD OUSD POLICY (USA) (b)(6)@mail.mil>; Sessoms Lee, Charmaine (b)(6)@CISA.DHS.GOV>; Chhabra, Tarun EOP/NSC (b)(6) Patton, Rodney (NSD (b)(6)@usdoj.gov>; Roberts, Kamie M. EOP/OSTP (b)(6); Durkovich, Caitlin A. EOP/NSC (b)(6); Nelson, Alondra R. EOP/OSTP (b)(6)>; Venkatasubramanian, Suresh EOP/OSTP (b)(6)>; Lieberman, Dean K. EOP/NSC (b)(6); Lesko, Max (HHS/OASH) <Max.Lesko@hhs.gov>; 'Tartakovsky, Daniel (HHS/OASH)' <Daniel.Tartakovsky@hhs.gov>; Kettler, Brian (b)(6)@darpa.mil>; Baron, Joshua (b)(6)@darpa.mil>; Turek, Matthew (b)(6)@darpa.mil>; Polley, Mary Elizabeth R. EOP/NSC (b)(6) Scully, Brian J. EOP/NSC (b)(6); (b)(6) (b)(6) contr-i2o) (b)(6)@darpa.mil>; (b)(6) contr-i2o) (b)(6)@darpa.mil>; Maughan, Douglas (b)(6)@nsf.gov>; Pozmantier, Michael <mpozmant@nsf.gov>

Cc: (b)(6)@nsf.gov>; Roberts, Kamie M. EOP/OSTP (b)(6)

Subject: Department and Agency Contacts for Possible NITRD WG on Information Integrity

Good afternoon,

As discussed at Tuesday's meeting, there is agreement on the need for a dedicated working group to review current and ongoing research and development related to disinformation as well as to establish Federal priorities going forward to improve understanding of the impact of disinformation, evaluate mitigation measures and assess effectiveness of programs to improve societal resilience to information manipulation. A [National Information Technology Research and Development \(NITRD\)](#) working group has been identified as an option for this type of interagency collaboration. Attached is a list of NITRD POCs across the interagency so IPC participants can follow-up with their NITRD leads and confirm D/A support for a NITRD WG on Information Resilience.

From: Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID)
Sent: Sun, 6 Jun 2021 18:47:48 +0000
To: Scully, Brian J. EOP/NSC
Cc: Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Fitter, David L. (CDC/DDPHSIS/CGH/GID);
 Mary Elizabeth Polley (b)(6)
Subject: RE: NSF Proposal Reviews

Hi Brian,

Yes!

I just spoke to Dimitri and between our team for Vaccine Confidence and Demand (domestic) and Dimitri's Demand for Immunization Team (global) we can scare up at least three infodemic experts to help our NSF colleagues out. ☺

Please do put us in touch with Mike.

Warm regards,

Elisabeth

From: Scully, Brian J. EOP/NSC (b)(6)
Sent: Thursday, June 3, 2021 4:14 PM
To: Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR) <nla5@cdc.gov>; Abad, Neetu S. (CDC/DDPHSIS/CGH/GID) <vx3@cdc.gov>; Fitter, David L. (CDC/DDPHSIS/CGH/GID) <vid3@cdc.gov>; Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID) <hjt1@cdc.gov>
Cc: Polley, Mary Elizabeth R. EOP/NSC (b)(6)
Subject: FW: NSF Proposal Reviews

Good afternoon CDC,

The National Science Foundation is looking for proposal reviewers for their NSF Convergence Accelerator for mis/disinformation and inauthentic behavior proposals (more info in the email below). I thought you all would be excellent reviewers and wanted to see if you would be ok with me connecting you with Mike from NSF?

Regards,
Brian

From: Pozmantier, Michael <mpozmant@nsf.gov>
Sent: Thursday, June 3, 2021 3:43 PM
To: Polley, Mary Elizabeth R. EOP/NSC (b)(6); Scully, Brian J. EOP/NSC

(b)(6)

Subject: NSF Proposal Reviews

Mary Beth and Brian,

Following up on previous conversations regarding proposal reviews. The review panels will be conducted as 4 one-day, virtual panels, held one each day on July 15, 16, 19, and 20. I'm working on lining up enough reviewers so that no reviewer has more than four proposals to review. I'd like to get more government representation on the review panels to give more balance to interests, experience, and viewpoints. Would you like to join as reviewers and is there anyone on your team or in other agencies that I should reach out to? It would work out to about a half day commitment when you take into consideration the number of panel discussions that will take place that are for proposals that you wouldn't have reviewed.

For reference, I've pasted the standard email I've been sending to prospective panelists below.

Thanks,

Mike

The [NSF Convergence Accelerator](#) will soon be receiving proposals dealing with mis/disinformation and inauthentic behavior for our solicitation: [NSF 21-572](#). The Convergence Accelerator is a two-year-old program that is focused on bringing together fully integrated, multi-disciplinary teams made up of a combination of academia, industry, non-profits, and government to solve large scale, complex issues facing our nation. Teams must produce deliverables such as software, hardware, education programs, processes, and a host of other possible outcomes to produce societal impact—this is well beyond the normal NSF programs that focus on papers. We're here to accelerate the results of basic research into practice.

Our program is structured into two phases. Phase I consists of a one-year award for up to \$750K for planning, participating in our curriculum, and working on their proof of concepts or possibly prototypes. Our curriculum consists of training in the areas of human-centered design, team science, conducting user interviews, and communications/pitching. Phase II is a two-year award for up to \$5M focused on building deliverables and determining and executing a sustainability model in order for the project to persist after the award is completed to continue delivering value into the future.

For this solicitation we expect to see Phase I proposals dealing with the following areas, and are therefore seeking reviewers from this broad range of disciplines:

- Political science
- Sociology
- Psychology
- Communications
- Marketing
- Education
- Journalism
- Law

- Computer Science
- Cognition
- others

Proposals for this solicitation are due on **June 14**, I expect to have proposal assignments to reviewers by **June 18, with a target of 3-4 proposals per reviewer**. There will be four separate one-day virtual panels, held each day on **July 15, 16, 19, and 20**. If you are interested in participating in reviewing and are available on at least one the dates listed, please let me know. I am putting together our pool of reviewers taking into consideration balancing representation from different institutions, the requirements for coverage of each discipline, and conflicts of interest.

Obtained by America First Legal Foundation through litigation.

From: Scully, Brian J. EOP/NSC
Sent: Tue, 10 Aug 2021 13:41:33 +0000
To: Polley, Mary Elizabeth R. EOP/NSC (b)(6)@hq.dhs.gov;
 (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov;
 Marzouk, Amir; hall-godfreyjj2@state.gov; petersonL3@state.gov; BrayL2@state.gov; rosen@state.gov;
 (b)(6)@ntia.gov; nmuellet@usaid.gov; dchisholm@usaid.gov; jmachleder@usaid.gov;
 dparzik@usaid.gov; (b)(6)@usagm.gov; (b)(6)@usagm.gov; (b)(6)@v@mail.mil;
 (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil;
 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov;
 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov;
 (b)(6)@treasury.gov; (b)(6)@treasury.gov; (b)(6) (CD) (FBI); (b)(6)
 (b)(6) (FBI); (b)(6) (CyD) (FBI); (b)(6) (CD) (FBI); (b)(6) (CyD) (FBI);
 (b)(6) (CD) (FBI); (b)(6) (CyD) (FBI); CD_NSC; CyberPolicy; (b)(6)
 EOP/NSC; Berry, Ruth E. EOP/NSC; Wu, Tim EOP/WHO; Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID);
 Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Fitter, David L. (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri
 (CDC/DDPHSIS/CGH/GID); Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Brookmeyer, Kathryn A.
 (CDC/DDID/NCHHSTP/DSTDP); Jennifer Shopkorn (CENSUS/ADCOM FED);
 zachary.henry.schwartz@census.gov; Angha, Negah EOP/NSC; Bagia, Amrit B. EOP/NSC; Rosenberg,
 Brett A. EOP/NSC; Maykish, P.J. J. EOP/NSC; Welch, Jennifer D. EOP/NSC; Jefferson, Karrie; Berschinski,
 Robert G. EOP/NSC; Vail, Justin W. EOP/WHO; Levitt, Justin M. EOP/WHO; Bressler, Jonathan A.
 EOP/NSC; (b)(6)@ucia.gov; (b)(6)@ucia.gov; Tartakovsky, Daniel (HHS/OASH; Sicade, Lynn M (DRL;
 Stalker-Lehoux, Sarah M. EOP/NSC; Stokley, Shannon (CDC/DDID/NCIRD/ISD); Flores, Stephen
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 Tisdale, Nicole N. EOP/NSC; (b)(6) CAPT USN JS J5 (USA; Sharma, Saloni EOP/NSC; (b)(6)
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 (FBI); (b)(6) ol USAF JS DOM (USA; Freeman, Andrea K.
 EOP/NSC; Cameron, Beth E. EOP/NSC; (b)(6) CIV OSD OUSD POLICY (USA; (b)(6)
 CTR OSD OUSD POLICY (USA; Callanan, Greg J. EOP/OMB; Pipan, Joseph G. EOP/OMB; Mergen, Margaret
 C. EOP/OMB; Gorman, Lindsay P. EOP/OSTP; Beckman, Adam (HHS/OASH; (b)(6) (Federal;
 (b)(6) Federal; (b)(6) COL USARMY OSD OUSD POLICY (USA; (b)(6)
 SES OSD OUSD POLICY (USA; (b)(6) Tarun EOP/NSC; Patton, Rodney (NSD)
 (JMD; Roberts, Kamie M. EOP/OSTP; Durkovich, Caitlin A. EOP/NSC; Nelson, Alondra R. EOP/OSTP;
 Venkatasubramanian, Suresh EOP/OSTP; Lieberman, Dean K. EOP/NSC; Lesko, Max (HHS/OASH; Kettler,
 Brian; Baron, Joshua; Turek, Matthew; (b)(6) contr-i2o; (b)(6) (contr-i2o; (b)(6)
 (b)(6) Pozmantier, Michael; (b)(6) LTC USARMY OSD OUSD POLICY (USA); LaFave, Helen
 G; James Noble; Saupp, Kevin; Furst, Hala; Young, Margaret A (Meg); Laskowski, Lauren C; Katherine
 Hart; Kalathil, Shanthi A. EOP/NSC; Geltzer, Joshua A. EOP/NSC; Y. Judy Chock; Hale, Geoffrey
 (b)(6)@cisa.dhs.gov; (b)(6)

Subject: RE: UK Briefing on their Approach to Addressing Information Manipulation
 (agenda and dial-in added)

Attachments: US Interagency presentation - 10 August 2021 FINAL.pdf

Good morning,

Attached are the slides that will be used in the presentation this morning.

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Thu, 8 Jul 2021 20:04:30 +0000
To: (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov;
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 (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil;
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 (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov;
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 (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Kolis, Jessica
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 (b)(6) Col USAF JS DOM (USA); Freeman, Andrea K. EOP/NSC; Cameron,
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 Gorman, Lindsay P. EOP/OSTP; Beckman, Adam (HHS/OASH); (b)(6) Federal); (b)(6)
 (Federal); (b)(6) COL USARMY OSD OUSD POLICY (USA); (b)(6) SES OSD
 OUSD POLICY (USA); Sessoms Lee, Charmaine; Chhabra, Tarun EOP/NSC; Patton, Rodney (NSD); Roberts,
 Kamie M. EOP/OSTP; Durkovich, Caitlin A. EOP/NSC; Nelson, Alondra R. EOP/OSTP;
 Venkatasubramanian, Suresh EOP/OSTP; Lieberman, Dean K. EOP/NSC; Lesko, Max (HHS/OASH);
 Tartakovsky, Daniel (HHS/OASH); Kettler, Brian; Baron, Joshua; Turek, Matthew; Polley, Mary Elizabeth
 R. EOP/NSC; Scully, Brian J. EOP/NSC; (b)(6) (contr-i2o); (b)(6) (contr-i2o); (b)(6)
 (b)(6) Pozmantier, Michael
Cc: Martonosi, Margaret; Roberts, Kamie M. EOP/OSTP
Subject: Department and Agency Contacts for Possible NITRD WG on Information
 Integrity
Attachments: NITRD-SC-Roster_7-2021.xlsx

Good afternoon,

As discussed at Tuesday's meeting, there is agreement on the need for a dedicated working group to review current and ongoing research and development related to disinformation as well as to establish

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Thu, 27 May 2021 16:36:38 +0000
To: Polley, Mary Elizabeth R. EOP/NSC; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; Marzouk, Amir; hall-godfreyjj2@state.gov; petersonL3@state.gov; BrayL2@state.gov; StrohME@state.gov; rosen@state.gov; (b)(6)@ntia.gov; nmueller@usaid.gov; dchisholm@usaid.gov; jmachleder@usaid.gov; dparzik@usaid.gov; (b)(6)@usagm.gov; (b)(6)@usagm.gov; (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@mail.mil; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@treasury.gov; (b)(6)@treasury.gov; (b)(6)@fbi.gov; (b)(6)@FBI.GOV; (b)(6)@FBI.GOV; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; Bartee, Maureen S. EOP/NSC; Bouri, Nidhi EOP/NSC; Berry, Ruth E. EOP/NSC; Wu, Tim EOP/WHO; Wilhelm, Elisabeth (CDC/DDID/NCIRD/OD) (CTR); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Scully, Brian J. EOP/NSC; Fitter, David L. (CDC/DDPHSIS/CGH/GID); Prybylski, Dimitri (CDC/DDPHSIS/CGH/GID); Kolis, Jessica (CDC/DDPHSIS/CGH/GID); Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Jennifer Shopkorn (CENSUS/ADCOM FED); zachary.henry.schwartz@census.gov

Cc: DL NSC CHINA; DL NSC Defense; DL NSC CLIMATE; DL NSC Democracy; DL NSC DevGlobalHealth; DL NSC INTEL; DL NSC Legal; DL NSC Legislative; DL NSC Press; DL NSC Resilience; DL NSC Russia; DL NSC STRATPLAN; DL NSC TechNatSec; Matheny, Jason G. EOP/NSC; Angha, Negah EOP/NSC; Bagia, Amrit B. EOP/NSC; Rosenberg, Brett A. EOP/NSC; Maykish, P.J. J. EOP/NSC; Welch, Jennifer D. EOP/NSC; Jefferson, Karrie; Berschinski, Robert G. EOP/NSC; Vail, Justin W. EOP/WHO; Levitt, Justin M. EOP/WHO; Bressler, Jonathan A. EOP/NSC; (b)(6)@ucia.gov; (b)(6)@ucia.gov; Sicade, (b)(6) (DRL); Schaffer, Audrey M. EOP/NSC; DeCesaro, Jennifer A. EOP/NSC; Grant, Rachel R. EOP/NSC; Lissner, Rebecca R. EOP/NSC; Davida, Gabriella S. EOP/NSC; Pohl, Jill H. EOP/NSC; Cedarbaum, Jonathan G. EOP/WHO; Khan, Puneet EOP/NSC; Redmon, Casey C. EOP/NSC; Johnston, Meredith A. EOP/NSC; Print, Josh R. EOP/NSC; Rault, Nick M. EOP/NSC; Ellis, Bryan j. EOP/NSC; Stalker-Lehoux, Sarah M. EOP/NSC; Stokley, Shannon (CDC/DDID/NCIRD/ISD); Conover, Katherine C. EOP/NSC; Flores, Stephen (CDC/DDID/NCHHSTP/DHPIRS); Khosla, Divya D. EOP/NSC; C.Music, Francesca ((b)(6)); Kaloudis, Stergos C. EOP/NSC; Hahn, Sarah B. EOP/NSC; (b)(6)@hq.dhs.gov; (b)(6)@hq.dhs.gov; SES OSD OUSD POLICY (USA); Tisdale, Nicole N. EOP/NSC; Etim, Linda EOP/NSC; (b)(6) CAPT USN JS J5 (USA)

Subject: IIR Sub-IPC on Counter Disinformation: Lessons Learned from CDC and Census on countering dis/mis information in real time

Attachments: SoVC_report8_5.24.21.pdf

This discussion will be held at the unclassified level. All departments and agencies are encouraged to hear how a broad range of open-source tools and counter-measures are being used in real time to address mis- and disinformation from a variety of sources. CDC's latest report is attached.

- Agenda:
- Overview of CDC efforts to counter COVID/vaccine-related mis- and disinformation
 - Overview of Census efforts to counter Census-related mis- and disinformation

From: Polley, Mary Elizabeth R. EOP/NSC
Sent: Thu, 8 Jul 2021 22:52:17 +0000
To: Polley, Mary Elizabeth R. EOP/NSC; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@dni.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; (b)(6)@cisa.dhs.gov; Curylo, Amanda; (b)(6)@treasury.gov; (b)(6)@treasury.gov; (b)(6)@fbi.gov; (b)(6)@FBI.GOV; (b)(6)@FBI.GOV; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@FBI.GOV; (b)(6)@fbi.gov; (b)(6)@fbi.gov; (b)(6)@fbi.gov; Wilhelm, Elisabeth (CDC/DDPHSIS/CGH/GID); Abad, Neetu S. (CDC/DDPHSIS/CGH/GID); Jennifer Shopkorn (CENSUS/ADCOM FED); zachary.henry.schwartz@census.gov; (b)(6)@hq.dhs.gov; (b)(6) CAPT USN JS J5 (USA; (b)(6) CTR OSD OUSD POLICY (USA; (b)(6) COL USARMY OSD OUSD POLICY (USA; (b)(6) D SES OSD OUSD POLICY (USA; (b)(6) (NSD; PROTENTIS, LAUREN; Vujica, Darjan; Sauvage, Constantin L; Flanagan, Kevin A; Scully, Brian J. EOP/NSC; (b)(6) (Moscow); Marzouk, Amir; Prince, Dale; Hamilton, Stevie B; Dada, Kameel; (b)(6)@ucia.gov; (b)(6)@ucia.gov; Nelson, Alondra R. EOP/OSTP; DL NSC Legal; Scherlis, William; Kettler, Brian; Turek, Matthew
Subject: Sub-IPC on Counter-Disinformation

Please note this meeting is now 50 minutes. Agenda is below and discussion paper will be sent in separate email.

Agenda:

(b)(5)

Obtained by America First Legal Foundation through FOIA request.

This looks good. Thanks for checking.

Yes, we can discuss the pediatric vaccines early next week but let me give you some general info: ACIP is likely to vote on this on Nov 2. CDC is likely to start posting final information on Nov 3 (possibly late Nov 2), if that helps to know. There will be many updates so the changes might span over a few days. We are also looking ahead and misinformation and hope to have a BOLO type meeting later that week with platforms that are interested.

From: Jan Antonaros <jantonaros@google.com>
Sent: Thursday, October 28, 2021 8:00 AM
To: Stanley Onyimba <sonyimba@google.com>; Megan Ryskamp <mryskamp@google.com>; Smith, Fred (CDC/OD/OADC) <evp9@cdc.gov>; Jamal, Catherine (CDC/OD/OADC) <cqj0@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cyj1@cdc.gov>
Subject: Re: Booster Shots

Hi CDC team,

Stanley's OOO so I'm also adding +Megan Ryskamp who is helping while he is out. Given that CDC booster [guidance](#) has changed, we wanted to raise awareness of this upcoming change to our product experience. Please see below for our new text and a mock up and let us know if you have any feedback.

Anticipated new text: "If you have been fully vaccinated with a Pfizer, Moderna or Johnson & Johnson vaccine, you may be eligible for a booster shot."

Anticipated new mock:

Getting the vaccine

- Everyone 12 years of age and older is now eligible to get a COVID-19 vaccination.
- If you have been fully vaccinated with a Pfizer, Moderna or Johnson & Johnson vaccine, you may be eligible for a booster shot.



Learn more & register at [vaccines.gov](https://www.vaccines.gov)



1-800-232-0233

Also, do you have time to connect early next week on the anticipated guidance on vaccines for 5-11? It would be great to connect as the CDC plans communications on authoritative information for pediatric vaccines.

Thank you,
Jan and Megan

Jan Fowler Antonaros

Google US Federal Government Affairs and Public Policy

[25 Mass Ave NW, 9th FL](#)

[Washington, DC 20001](#)

jantonaros@google.com

Android Mobile:

On Thu, Sep 30, 2021 at 5:34 PM Stanley Onyimba <sonyimba@google.com> wrote:

<cqj0@cdc.gov>

Subject: Booster Shots

Hi Fred,

Following up on our call earlier this week to share a planned update to our vaccine general availability banner (current experience below).

As discussed, we plan to add a one liner on the latest booster shot guidance from the CDC/Vaccines.gov. Please let us know if the CDC is comfortable with the following summary sentence based on the [CDC's banner](#):

- *You may be eligible for a booster shot if you received a second dose of the Pfizer COVID-19 vaccine 6+ months ago and are an adult age 65+ years, or 18+ years and at risk due to circumstances or a medical condition.*

Thanks,

Stanley

--

Stanley Onyimba | Global Product Partnerships | sonyimba@google.com

--

Jan Fowler Antonaros

Google US Federal Government Affairs and Public Policy

[25 Mass Ave NW, 9th FL](#)

[Washington, DC 20001](#)

jantonaros@google.com

Android Mobile: (b)(6)

From: Jan Antonaros <jantonaros@google.com>
Sent: Thursday, October 28, 2021 7:06 PM
To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Cc: Stanley Onyimba <sonyimba@google.com>; Megan Ryskamp <mryskamp@google.com>;
Smith, Fred (CDC/OD/OADC) <evp9@cdc.gov>; Jamal, Catherine (CDC/OD/OADC)
<cqj0@cdc.gov>
Subject: Re: Booster Shots

Thanks both for the quick response! On Monday, we can make 3:30pm est work, but anyway 4pm est is open?

Jan Fowler Antonaros

Google US Federal Government Affairs and Public Policy

[25 Mass Ave NW, 9th FL](#)

[Washington, DC 20001](#)

jantonaros@google.com

Android Mobile: (b)(6)

On Thu, Oct 28, 2021 at 5:13 PM Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov> wrote:

Jan – of course not that I look again, I would recommend changing “Learn more & register at Vaccines.gov” to Find a vaccine at Vaccines.gov.

From: Crawford, Carol Y. (CDC/OD/OADC)
Sent: Thursday, October 28, 2021 5:11 PM
To: Jan Antonaros <jantonaros@google.com>; Stanley Onyimba <sonyimba@google.com>;
Megan Ryskamp <mryskamp@google.com>; Smith, Fred (CDC/OD/OADC) <evp9@cdc.gov>;

Jamal, Catherine (CDC/OD/OADC) <cqj0@cdc.gov>
Subject: RE: Booster Shots

I'm sorry this has been in my draft all day!!

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From: Jan Antonaros <jantonaros@google.com>
Sent: Thursday, October 28, 2021 8:00 AM
To: Stanley Onyimba <sonyimba@google.com>; Megan Ryskamp <mriskamp@google.com>; Smith, Fred (CDC/OD/OADC) <evp9@cdc.gov>; Jamal, Catherine (CDC/OD/OADC) <cqj0@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjyl@cdc.gov>
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[25 Mass Ave NW, 9th FL](#)

[Washington, DC 20001](#)

jantonaros@google.com

Android Mobile:

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Great, thanks!

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Thanks,

Stanley

--

Stanley Onyimba | Global Product Partnerships | sonyimba@google.com

--

Jan Fowler Antonaros

Google US Federal Government Affairs and Public Policy

25 Mass Ave NW, 9th FL

Washington, DC 20001

jantonaros@google.com

Android Mobile: (b)(6)

From task force:

I would suggest deleting everything after the list of side effects (plus correcting the list as shown in red). For that bottom text, the first sentence is duplicative of the bulleted list (fever/chills). We don't have any cleared language, as far as I know, to support the second and third sentences.

What are the side effects of getting a COVID-19 vaccine?

You may have some side effects, which are normal signs that your body is building protection. These side effects might affect your ability to do daily activities, but they should go away in a few days. Some people have no side effects.

You might experience:

Pain, redness or swelling in the arm where you got the shot

Tiredness

Headache

Muscle pain

Chills

Fever

~~Joint pain~~

~~Nausea~~

You may get a high temperature or feel hot or shivery 1 or 2 days after having your vaccination. More serious side effects are extremely rare. A person is far more likely to be seriously harmed by a disease than by its vaccine.

From: Genelle Adrien <genelleadrien@fb.com>

Sent: Tuesday, May 4, 2021 9:19 AM

To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>

Cc: Payton Itheme <payton@fb.com>

Subject: CDC approval requested: FAQ Content

Hi Carol – Hope the week is off to a great start. Our content specialist, recently made copyedits to two CDC questions for our new FAQ modules appearing in the COVID-19 Information Center.

These are fairly minor edits to what you've already provided, but if you have additional edits, could you please let us know by COB if possible?

From: [Crawford, Carol Y. \(CDC/OD/OADC\)](#)
To: [Genelle Adrien](#); [Dempsey, Jay H. \(CDC/OD/OADC\)](#)
Cc: [Payton Iheme](#); [McDaniel, Rebecca \(CDC/OD/OADC\)](#)
Subject: RE: CDC approval requested: FAQ Content
Date: Tuesday, May 11, 2021 1:50:00 PM
Attachments: [Facebook COVID-19 vax numbers unsigned licensing agreement.docx](#)

If you call can sign this we can move forward with the logo add. Thanks!

From: Genelle Adrien <genelleadrien@fb.com>
Sent: Tuesday, May 4, 2021 8:45 PM
To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>
Cc: Payton Iheme <payton@fb.com>; McDaniel, Rebecca (CDC/OD/OADC) <ldy8@cdc.gov>
Subject: Re: CDC approval requested: FAQ Content

Thanks, Carol! This is great feedback. The proactive comms was in reference to this new FAQ module.

Speaking of the logo approval, the action page is live here: <https://about.facebook.com/actions/responding-to-covid-19>. And, we will add the CDC logo once we have your go ahead.

Thank you—
Genelle

From: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Date: Tuesday, May 4, 2021 at 7:53 PM
To: Genelle Adrien <genelleadrien@fb.com>, Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>
Cc: Payton Iheme <payton@fb.com>, McDaniel, Rebecca (CDC/OD/OADC) <ldy8@cdc.gov>
Subject: RE: CDC approval requested: FAQ Content

Hi Genelle — one Q was fine but our SMEs said the below on the other question. Also, just to check — was the proactive comms note about the item I'm getting the logo approved for?

From task force:

I would suggest deleting everything after the list of side effects (plus correcting the list as shown in red). For that bottom text, the first sentence is duplicative of the bulleted list (fever/chills). We don't have any cleared language, as far as I know, to support the second and third sentences.

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These are fairly minor edits to what you've already provided, but if you have additional edits, could you please let us know by COB if possible?

A quick note that our new launch date is 5/17. We are not planning any proactive comms at the moment, but if we do, we will let you know and coordinate accordingly.

Thanks and let me know if you have questions!

Best,
Genelle

Please see edits below for the Prevention and Treatment tabs. Please let me know if you have any questions.

Prevention Tab – Green highlighted denotes change in order. Blue highlight denotes edit.

To help prevent the spread of COVID-19:

- **Wear a mask to protect yourself and others and stop the spread of COVID-19.**
- Stay at least 6 feet (about 2 arm lengths) from others who don't live with you.
- Avoid crowds and poorly ventilated spaces. The more people you are in contact with, the more likely you are to be exposed to COVID-19.
- **Get a COVID-19 vaccine when it's available to you.**
- Clean your hands often, either with soap and water for 20 seconds or a hand sanitizer that contains at least 60% alcohol.
- Avoid close contact with people who are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- ~~Clean and disinfect frequently touched objects and surfaces daily.~~ Update to: **Clean frequently touched objects and surfaces daily. If someone is sick or has tested positive for COVID-19, disinfect frequently touched surfaces.**
- Monitor your health daily.

Treatment Tab (under Medical treatments)– Remove the yellow highlighted content

Treatments used for COVID-19 should be prescribed by your healthcare provider. People have been seriously harmed and even died after taking products not approved for COVID-19, even products approved or prescribed for other uses. Your healthcare provider will decide on what approach to take for your treatment.

Treatment Outside of the Hospital

- **Bamlanivimab and casirivimab plus imdevimab are available under FDA EUAs for patients at high risk of disease progression and severe illness. Preliminary data suggest that some outpatients may benefit from receiving anti-SARS-CoV-2 monoclonal antibodies early in the course of infection. The NIH COVID-19 Treatment Guidelines find that, to date, there are insufficient data from clinical trials to recommend for or against these treatments and these treatments should not be considered standard of care.**

Your healthcare provider also may recommend the following to relieve symptoms and support your body's natural defenses.

- Taking medications, like acetaminophen or ibuprofen, to reduce fever.

- Drinking water or receiving intravenous fluids to stay hydrated.
- Getting plenty of rest to help the body fight the virus.

Treatment in the Hospital

- Remdesivir (Veklury) is an antiviral medication approved by FDA to treat COVID-19.
- Dexamethasone is a steroid medication, similar to a natural hormone produced by the body. Dexamethasone is recommended for patients who need supplemental oxygen.

If someone is showing emergency warning signs, get medical care immediately. Emergency warning signs include:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

Becky McDaniel
Health Communication Specialist
(404) 536-6002

Obtained by America First Legal Foundation through litigation.

5. **K-12 schools** should be the last settings to close after all other mitigation measures in the community have been employed, and the first to reopen when they can do so safely.
 - All schools should use and layer mitigation strategies.
 - Schools providing in-person instruction should prioritize two mitigation strategies:
 - Universal and correct use of masks should be required.
 - Physical distancing (at least 6 feet) should be maximized to the greatest extent possible.

From: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Sent: Tuesday, February 16, 2021 2:06 PM
To: Bretthauer-Mueller, Rosemary (CDC/DDNID/NCIPC/OD) <zhk0@cdc.gov>
Cc: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>
Subject: Google meeting at 4

They said they do want to discuss vaccines: "VaccineFinder and vaccine locations in addition to general timelines/key messages for upcoming campaigns."

Hoping you have his updated appt but if not here is the right teams info:

Join on your computer or mobile app

[Click here to join the meeting](#)

Or call in (audio only)

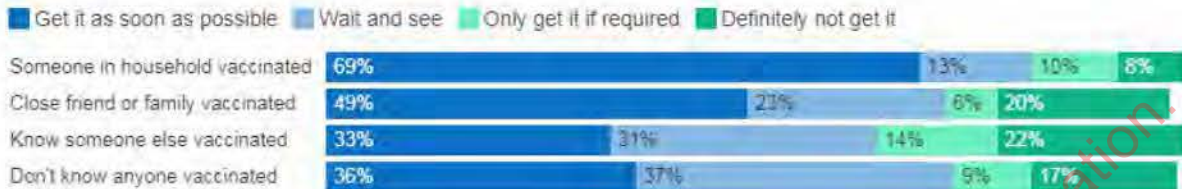
[+1 404-498-3000, 917281315#](tel:+14044983000917281315) United States, Atlanta

[\(888\) 994-4478, 917281315#](tel:(888)9944478917281315) United States (Toll-free)

Figure 11

Those With Closer Connections To People Who Have Been Vaccinated Are More Likely To Say They'll Get Vaccinated As Soon As Possible

When an FDA approved vaccine for COVID-19 is available to you for free, do you think you will... ?



NOTE: Among those who have not been vaccinated for COVID-19. See topline for full question wording.
SOURCE: KFF COVID-19 Vaccine Monitor (Feb. 15-Feb. 23, 2021) • [Download PNG](#)

KFF COVID-19
Vaccine Monitor

We also saw positive interaction our flu campaign [#SleeveUp to #FightFlu](#) effort on social media.

-KLP

From: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>

Sent: Friday, February 26, 2021 4:57 PM

To: Jorgensen, Cynthia (CDC/DDID/NCIRD/OD) <cj4@cdc.gov>; Jones, Christopher M. (CDC/DDID/NCIPC/OD) <FJR0@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Sokler, Lynn (CDC/OD/OADC) <zsz0@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>

Cc: Cory, Janine (CDC/DDID/NCIRD/DVD) <jyc5@cdc.gov>; LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Bretthauer-Mueller, Rosemary (CDC/DDID/NCIPC/OD) <zhk0@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>

Subject: RE: Awareness: Facebook "I got a COVID-19 Vaccine" frame

Answering what I have read so far in one e-mail...

Cynthia - Yes, when we promote the frame, we can definitely be sure the promotion materials & targeted influencers represent the demographics of our ACIP stages. And just incase not clear, the frame would show up around the persons existing Facebook profile picture. So how it will seem when you are looking at your Facebook feed is you'll see your friends pictures with the frames around it, if they have been vaccinated and chose to add the frame. Also, Facebook plans to only surface the frames, at first, for those who are eligible based on demographics of their facebook profile.

As for Dagny's concerns, they did give us an option without CDC but recommended we include CDC. You do have a good point and might be a reason to drop CDC from the frame. I think however on the permission structure for relaxing prevention measures...I believe a frame or many frames will be created whether we are part of it (by some other group/orgs or Facebook themselves) as this is just a common thing done on Facebook, so I think we may want to put aside that concern. A frame was already part of the VTF plans also, FYI. But we can definitely discuss it.

Chris concerns – Facebook indicated that they would roll this out slowly and build promotion as we move further into vaccine supply but we can shore that up too.

Cc: Stanley Onyimba <sonyimba@google.com>; Megan Ryskamp <mryskamp@google.com>; Smith, Fred (CDC/OD/OADC) <evp9@cdc.gov>; Jamal, Catherine (CDC/OD/OADC) <cqj0@cdc.gov>

Subject: Re: Booster Shots

Thanks both for the quick response! On Monday, we can make 3:30pm est work, but anyway 4pm est is open?

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Jan – of course not that I look again, I would recommend changing “Learn more & register at Vaccines.gov” to Find a vaccine at Vaccines.gov.

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Subject: RE: Booster Shots

I'm sorry this has been in my draft all day!!

slight shift to the attitude question to align with a pre-approved format on our end. Does the adjusted format below still capture the intent/goal you had in mind?

Current version

Knowledge:

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

Recommended pre-approved format

Attitude: How important is wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

1. Very important
2. Somewhat important
3. Barely important
4. Not important
5. I don't know

-Airton

Concierge support available [here](#)

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Tuesday, January 12, 2021 at 9:55 AM

To: Julia Eisman <juliaeisman@fb.com>

Cc: Airton Tatoug Kamdem <airtonkamdem@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>, Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>

Subject: RE: Brandlift

Thanks so much, Julia.

From: Julia Eisman <juliaeisman@fb.com>

Sent: Monday, January 11, 2021 7:59 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>

Cc: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>; Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>

Subject: Re: Brandlift

Thank you all for the endless push!! I believe we have what we need for next steps on our end.

Wanted to quickly check in to make sure there wasn't anything else you needed from our us toward this end?

Best,
Airton

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Tuesday, December 22, 2020 12:49 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Michael Sullivan (b)(6) <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: Re: RE: Brandlift

Thank you, Kelsey,

Great question, since we're ultimately limited to 3 total questions, you would only be able to leverage one question for the knowledge format. Depending on what proportion of your ads will cover the message discussed in this question, you could be able to work with this if the message is covered in the vast majority of units, otherwise, if you'd like to continue with the Knowledge question format, it could be worth exploring more general questions or frameworks around the importance of masks in broader contexts that might include some of the common concepts captured or implied in each ads. I have some directional examples below based on your previous inputs with this question format, please let us know if this makes sense.

Do you agree or disagree that wearing a mask properly (over your mouth & nose) will slow the spread of Coronavirus (COVID-19)?

Do you agree or disagree that wearing a mask everywhere outside your home, even if alone, will slow the spread of Coronavirus (COVID-19)?

Thank you,
-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Tuesday, December 22, 2020 at 10:56 AM
To: Michael Sullivan (b)(6) <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Hi Airton,
Previously I asked if we do a bundle of messages (like the 3 were are proposing on masks), would the same polling questions have to work for every ad in the bundle and you answered that people exposed to our ads should be able to answer our polling questions favorably. That being said, will we have 3

different knowledge questions that match to each individual ad? If we go with the below knowledge question, people who only see our grocery store ad, may not be able to answer the question below correctly, however, it could be used for both the rideshare and public transportation ad.

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

From: Michael Sullivan (b)(6) @fb.com>

Sent: Thursday, December 17, 2020 4:10 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>

Cc: Dempsey, Jay H. (CDC/OD/OADC) <jfb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>

Subject: RE: RE: Brandlift

Sorry about the confusion on my end, Kelsey. Our internal teams have approved knowledge questions with incorrect answers as long as we include "do you think"? (It may be worth noting that the CDC's name does not appear in the BL poll.) The POV is that while there could be some risk, this language choice reduces the chance of misinterpreting the question as a statement of fact. However, I completely understand if your teams would prefer not to include inaccurate response.

If only correct answers are preferred, I'd recommend against using the knowledge question. I don't think the results would be worthwhile. An alternative could be to ask about one fact individually like the question below. Otherwise, the attitude and practice question are questions we often sufficient on their own to evaluate effectiveness.

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

I hope this helps.

From: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>

Sent: Thursday, December 17, 2020 3:04 PM

To: Michael Sullivan <mgs1517@fb.com>; Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia

Eisman <juliaeisman@fb.com>

Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Mike,

Yes, we originally were going with a few incorrect answers for that exact reason, but during internal review we were asked to not include any incorrect answers that could potential perpetuate misinformation. Do you have any suggestions on how to reframe our knowledge question to better measure lift?

Thanks,
Kelsey

From: Michael Sullivan <(b)(6)@fb.com>

Sent: Thursday, December 17, 2020 2:55 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hey all,

Just quickly jumping in re the knowledge question. I'd suggest adding one or two incorrect potential answers. Otherwise, we aren't giving the test much room to measure lift. If all answers are the desired response except "I don't know", then the only potential lift will be in how many fewer people in the test group (that saw the ad) choose I don't know than in the control group. I wouldn't expect a large % to select I don't know in either group.

@Kelsey, has your team encountered any common misperceptions/misinformation that might be good options? Or another answer that would suggest that masks need to be worn less often. Below are couple suggestions, but there may be better options rooted in your team's expertise.

-Mike

- Don't wear at home when family visits
- Only wear in groups larger than 10

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Thursday, December 17, 2020 12:16 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Hi Kelsey,

Thanks for the note, the format you previously shared (below) actually works well so making sure to include only true statements as part of this format could work here. Please let us know if this makes sense?

Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

Thank you,
-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Wednesday, December 16, 2020 at 8:28 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <qck9@cdc.gov>
Subject: RE: RE: Brandlift

Thanks, Airton. Carol informed me that you and her discussed changing the knowledge question based on our internal review feedback. Before we go back to the original answers (all true + I don't know), let me know if your team has any suggestions on a better knowledge question or how to reframe this one.

Thanks,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Tuesday, December 15, 2020 12:38 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <mgs1517@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>
Subject: Re: RE: Brandlift

5M would just be the total reach, we only poll a couple hundred people.

-A

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Tuesday, December 15, 2020 at 12:35 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Quick question - For \$30K would that be (b)(4) people that see the add or (b)(1) people that see the polling questions (with (b)(4) seeing the ad)?

Thanks,
 Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Tuesday, December 15, 2020 12:06 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <mgs1517@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: Re: RE: Brandlift

Hi Kelsey,

Ultimately, it would depend on a number of factors around the campaign including creative, placements, optimizations etc but \$30k is typically the minimum bound we see for tests like this one. At \$30k you can reliably reach at least (b)(1) people over 2/3 weeks, which is sufficient for this test, and with (b)(1) you should be able to reach over (b)(4) people over this same time period. Please let us know if this makes sense.

Best,
 -Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Tuesday, December 15, 2020 at 11:18 AM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Thanks, Airton. Could you give me a breakdown of run time and expected reach for \$30,000 vs (b)(4) credits or more?

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Tuesday, December 15, 2020 10:53 AM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)

<gck9@cdc.gov>

Subject: Re: RE: Brandlift

Hi Kelsey,

We're working through getting approvals on our end as well but if everything goes through on both ends, then we would need to launch the test *before* you launch any media so that our measurement team can set holdout groups. a 2–4 week test period works well, but what is also important here is actually the overall expected reach of the campaign. This is partially determined by factors such as audience size, objective, creative, and budget. Do you have a sense of how much budget you'd want to put behind this campaign/test?

Best,
Airton

From: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>

Sent: Monday, December 14, 2020 9:42 AM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Airton,

I am still waiting on CDC clearance of the polling questions, but in the meantime we are drafting a schedule for these posts. Once we have approval, would we start running the ads and your team starts using the polling questions or will you wait a few days to start the questions? We propose running the ads for 2-4 weeks. Does your team have a preference based on past projects like this?

Thanks,
Kelsey

From: Schwarz, Kelsey (CDC/OD/OADC)

Sent: Friday, December 11, 2020 12:05 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Ok, thanks. I will let you know once they are cleared on our end.

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Friday, December 11, 2020 10:59 AM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford,

Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Thanks Kelsey,

confirming these are good to go from our end (copied and ranked below for reference) – feel free to take the next steps on your end and we’ll wait for your signal to tackle the next parts of planning.

+Ad Recall:

Do you recall seeing an ad **about masks** online or on mobile device in the past 2 days?

- Yes
- No
- Not sure

1)Action Intent:

How likely are you to **wear a mask when you are out in public?**

- Very likely
- Somewhat likely
- Somewhat unlikely
- Very unlikely
- I don't know

2)Knowledge:

Which of the following statements do you think are true about **masks?**

- **Wear over your mouth only**
- **Wear in public buildings (grocery/retail stores)**
- **Wear while riding in vehicles with others**
- **Wear everywhere outside your home, even if alone**
- I don't know

3)Attitude:

How important is **wearing a mask to prevent the spread of COVID-19?**

- Very important (DR)
- Somewhat important (DR)
- Somewhat unimportant
- Very unimportant
- I don't know

-A

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Thursday, December 10, 2020 at 3:09 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie

(CDC/DDID/NCIRD/OD) (CTR)" <qck9@cdc.gov>

Subject: RE: RE: Brandlift

Thanks!

Outside of Ad Recall, our priority of questions is as follows:

1. Action Intent/Behavior Polling Format
2. Knowledge Polling Format
3. Attitude Polling Format

As a reminder, before posting these ads and having the polling questions run, I will need to get OMB approval. Once you provide feedback, I can start that process.

Best,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Thursday, December 10, 2020 1:45 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>

Subject: Re: RE: Brandlift

Really good point Kelsey, it's actually common for organizations to include "wrong" answers here as well for the reason you just mentioned.

Ultimately, we'll follow your guidance to identify the 5 strongest candidates to include as part of the poll, we would *not* pick these at random.

Okay we will review these answers and provide feedback here as soon as possible.

--

Could we build out a knowledge question more like this –

Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

Best,
-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Thursday, December 10, 2020 at 1:40 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>,

"Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Could we build out a knowledge question more like this –
Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

This way we are including two false statements other than "I don't know". If you have any suggestions or advice based on how other organizations framed these knowledge statements, please let me know.

From: Schwarz, Kelsey (CDC/OD/OADC)

Sent: Thursday, December 10, 2020 1:27 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Ok, we feel that we will better understand any misconceptions people have about masks if we can have a few wrong answers in the mix. Would you pick 5 at random to include for each poll or would we have to narrow it down to the same 5 for all?

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Thursday, December 10, 2020 1:19 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Hi Kelsey,

Yes, we're ultimately limited to 5 on these, but if you have additional strong candidates, feel free to throw them in -- never hurts to have options here.

-A

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Thursday, December 10, 2020 at 1:10 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, <nle5@cdc.gov>

"Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Quick question – Can we only have 5 answers for the knowledge section including “I don’t know”?

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Thursday, December 10, 2020 10:00 AM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: Re: RE: Brandlift

Hi Kelsey,

Thank you for putting this together – very helpful and it should work well. Two more technical notes to keep in mind on this end before we’re good to go with the questions.

- The answers to the knowledge question do have a technical limitation of 50-characters, so where possible it’d be helpful to condense or think through alternative knowledge statements. I included the answers below along with demarcations of where the character limit would currently cut off in red.
- We will ultimately be able to select 3 polling questions including Ad Recall, if you get a chance we’d love to also get a sense of how you’d rank each of these selected polls as they align with your learning objectives so we have a good sense of how to prioritize.

--

Knowledge Polling Format:

Which of the following statements do you think are true about masks?

- Masks, when worn over mouth and nose, are effective at slowing the spread of COVID-19
- Masks should be worn when you grocery shop
- Masks should be worn when you use a rideshare service
- Masks should be worn when you are on public transit
- I don’t know

Thank you,
 -Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Wednesday, December 9, 2020 at 3:12 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Hi Airton,

Our suggested polling questions are below. Let me know if these work.

Ad Recall Polling Format:

Do you recall seeing an ad **about masks** online or on mobile device in the past 2 days?

- Yes
- No
- Not sure

Attitude Polling Format:

How important is **wearing a mask to prevent the spread of COVID-19?**

- Very important (DR)
- Somewhat important (DR)
- Somewhat unimportant
- Very unimportant
- I don't know / not relevant to me

Action Intent/Behavior Polling Format:

How likely are you **wear a mask when you are out in public?**

- Very likely (DR)
- Somewhat likely (DR)
- Somewhat unlikely
- Very unlikely
- I don't know / I already got vaccinated

Knowledge Polling Format:

Which of the following statements do you think are true about **masks?**

- **Masks, when worn over mouth and nose, are effective at slowing the spread of COVID-19**
- **Masks should be worn when you grocery shop**
- **Masks should be worn when you use a rideshare service**
- **Masks should be worn when you are on public transit**
- I don't know

Thanks,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Wednesday, December 9, 2020 2:33 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Thank you Kelsey,

Based on this context, we can certainly look at using this test to measure any shifts in knowledge and action/behavior intent within your audiences. Below I've highlighted a few polling questions designed around the flu vaccine this year. The org names and messages in the brackets are interchangeable so you can fill in anything about wearing masks, social distancing or any other key messages you'd want to push and better understand. Would you be able to adapt these formats to the message(s) you're hoping to get deeper insight into? Once you have some of these initial focus points we can work to finalize.

Ad Recall Polling Format:

Do you recall seeing an ad from [ORG NAME] online or on mobile device in the past 2 days?

- Yes
- No
- Not sure

Attitude Polling Format:

How important is [getting the flu vaccine this year]?

- Very important (DR)
- Somewhat important (DR)
- Somewhat unimportant
- Very unimportant
- I don't know / not relevant to me

Action Intent/Behavior Polling Format:

How likely are you [to get the flu vaccine this year]?

- Very likely (DR)
- Somewhat likely (DR)
- Somewhat unlikely
- Very unlikely
- I don't know / I already got vaccinated

Knowledge Polling Format:

Which of the following statements do you think are true about [the flu vaccine this year]?

- [The flu vaccine is recommended and safe]
- [Knowledge statement #2]
- [Knowledge statement #3]
- [Knowledge statement #4]
- I don't know

Thank you,

-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Wednesday, December 9, 2020 at 11:20 AM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <qck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Airton,

Carol Y. Crawford
Chief, Digital Media Branch
Division of Public Affairs
Office of the Associate Director for Communication
Centers for Disease Control and Prevention
404-498-2480
ccrawford@cdc.gov
Cell: 678-920-0578

<Final Polling Questions.docx>
<Final Approved OADC Social Media Paid Ads Masking BrandLift.docx>
<20_321133-H_Firchow_Minimalist_Masking_Transit.png>
<20_321133-G_Firchow_Minimalist_Masking_Ridesharing_v2-01.png>
<Final Polling Questions.docx>

Obtained by America First Legal Foundation through litigation.

<gck9@cdc.gov>; Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>

Subject: Re: Brandlift

Good morning Kelsey,

Hope the holiday weekend went well, confirming that we are good to go on our own end. Our team is going to begin setting up the study. Would you all be able to begin structuring the campaign *without launching* and provide the corresponding campaign IDs so we can append measurement?

Please note, it is important that the campaign *not* be launched/active prior to launching the study as this allows us to set a holdout.

-Airton

Concierge support available [here](#)

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Wednesday, January 13, 2021 at 11:30 AM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>, Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>
Subject: RE: Brandlift

That sounds great, thanks.

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Wednesday, January 13, 2021 11:23 AM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>; Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Subject: Re: Brandlift

Thanks Kelsey,

That is correct -- we'll proceed with #2 as stated, please note the final question along with a slight grammatical adjustment below.

We'll follow up as soon as we're good to go from our end as well!

2. How important is wearing a mask while riding in vehicles with *others in slowing* the spread of Coronavirus (COVID-19)?

Thank you,

-Airton

Concierge support available [here](#)

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Wednesday, January 13, 2021 at 9:56 AM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <qck9@cdc.gov>, Michael Sullivan <(b)(6)@fb.com>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>
Subject: RE: Brandlift

Ok, so the attitude polling question would change from #1 to #2, correct? If so, it is fine to proceed from our end.

1. How important is wearing a mask to prevent the spread of COVID-19?
2. How important is wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

Thanks,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Tuesday, January 12, 2021 4:33 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>; Michael Sullivan <(b)(6)@fb.com>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Subject: Re: Brandlift

Thank you so much for the continued push here Kelsey and Carol!

As Julia noted, we're sending these through some layers of review on our end as well. If this still aligns with the intent of the question and doesn't further complicate things for you, we're recommending a slight shift to the attitude question to align with a pre-approved format on our end. Does the adjusted format below still capture the intent/goal you had in mind?

Current version

Knowledge:

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

Recommended pre-approved format

Attitude: How important is wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

1. Very important
2. Somewhat important
3. Barely important
4. Not important
5. I don't know

-Airton

Concierge support available [here](#)

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Tuesday, January 12, 2021 at 9:55 AM
To: Julia Eisman <juliaeisman@fb.com>
Cc: Airton Tatoug Kamdem <airtonkamdem@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>, Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>
Subject: RE: Brandlift

Thanks so much, Julia.

From: Julia Eisman <juliaeisman@fb.com>
Sent: Monday, January 11, 2021 7:59 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>
Cc: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>; Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Subject: Re: Brandlift

Thank you all for the endless push!! I believe we have what we need for next steps on our end.

And wow, Carol... that is incredible that you had to sit through that training!! Definitely brings back some memories. ☐ THANK YOU for running all the traps internally.

We will follow up if we need anything more. We have to put this through a few approvals on our end, and will follow up. Shouldn't take too long but we will keep you posted on timing.

Thanks,
Julia

On Jan 11, 2021, at 4:59 PM, Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov> wrote:

Hi Airton,

<cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Thank you, Kelsey,

Great question, since we're ultimately limited to 3 total questions, you would only be able to leverage one question for the knowledge format.

Depending on what proportion of your ads will cover the message discussed in this question, you could be able to work with this if the message is covered in the vast majority of units, otherwise, if you'd like to continue with the Knowledge question format, it could be worth exploring more general questions or frameworks around the importance of masks in broader contexts that might include some of the common concepts captured or implied in each ads. I have some directional examples below based on your previous inputs with this question format, please let us know if this makes sense.

Do you agree or disagree that wearing a mask properly (over your mouth & nose) will slow the spread of Coronavirus (COVID-19)?

Do you agree or disagree that wearing a mask everywhere outside your home, even if alone, will slow the spread of Coronavirus (COVID-19)?

Thank you,

-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Tuesday, December 22, 2020 at 10:56 AM

To: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Airton,

Previously I asked if we do a bundle of messages (like the 3 were are proposing on masks), would the same polling questions have to work for every ad in the bundle and you answered that people exposed to our ads should be able to answer our polling questions favorably. That being said, will we have 3 different knowledge questions that match to each individual ad? If we go with the below knowledge question, people who only see our grocery store ad, may not be able to answer the question below correctly, however, it could be used for both the rideshare and public transportation ad.

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

From: Michael Sullivan <(b)(6)@fb.com>
Sent: Thursday, December 17, 2020 4:10 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>
Subject: RE: RE: Brandlift

Sorry about the confusion on my end, Kelsey. Our internal teams have approved knowledge questions with incorrect answers as long as we include "do you think"? (It may be worth noting that the CDC's name does not appear in the BL poll.) The POV is that while there could be some risk, this language choice reduces the chance of misinterpreting the question as a statement of fact. However, I completely understand if your teams would prefer not to include inaccurate response.

If only correct answers are preferred, I'd recommend against using the knowledge question. I don't think the results would be worthwhile. An alternative could be to ask about one fact individually like the question below. Otherwise, the attitude and practice question are questions we often sufficient on their own to evaluate effectiveness.

Do you agree or disagree that wearing a mask while riding in vehicles with others will slow the spread of Coronavirus (COVID-19)?

- Strongly agree
- Somewhat agree
- Neutral
- Disagree
- I don't know

I hope this helps.

From: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>
Sent: Thursday, December 17, 2020 3:04 PM
To: Michael Sullivan <(b)(6)@fb.com>; Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>
Subject: RE: RE: Brandlift

Hi Mike,

Yes, we originally were going with a few incorrect answers for that exact reason, but during internal review we were asked to not include any incorrect answers that could potential perpetuate misinformation. Do you have any suggestions on how to reframe our knowledge question to better measure lift?

Thanks,
Kelsey

From: Michael Sullivan <(b)(6)@fb.com>
Sent: Thursday, December 17, 2020 2:55 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>
Subject: RE: RE: Brandlift

Hey all,

Just quickly jumping in re the knowledge question. I'd suggest adding one or two incorrect potential answers. Otherwise, we aren't giving the test much room to measure lift. If all answers are the desired response except "I don't know", then the only potential lift will be in how many fewer people in the test group (that saw the ad) choose I don't know than in the control group. I wouldn't expect a large % to select I don't know in either group.

@Kelsey, has your team encountered any common misperceptions/misinformation that might be good options? Or another answer that would suggest that masks need to be worn less often. Below are couple suggestions, but there may be better options rooted in your team's expertise.

-Mike

- Don't wear at home when family visits
- Only wear in groups larger than 10

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Thursday, December 17, 2020 12:16 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <qck9@cdc.gov>
Subject: Re: RE: Brandlift

Hi Kelsey,

Thanks for the note, the format you previously shared (below) actually works well so making sure to include only true statements as part of this format could work here. Please let us know if this makes sense?

Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

Best,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Thursday, December 10, 2020 1:45 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: Re: RE: Brandlift

Really good point Kelsey, it's actually common for organizations to include "wrong" answers here as well for the reason you just mentioned. Ultimately, we'll follow your guidance to identify the 5 strongest candidates to include as part of the poll, we would *not* pick these at random.

Okay we will review these answers and provide feedback here as soon as possible.

--

Could we build out a knowledge question more like this –
 Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

Best,
 -Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Thursday, December 10, 2020 at 1:40 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Could we build out a knowledge question more like this –
 Which of the following statements do you think are true about masks?

- Wear over your mouth only
- Wear in public buildings (grocery/retail stores)
- Wear while riding in vehicles with others
- Wear everywhere outside your home, even if alone
- I don't know

This way we are including two false statements other than "I don't know". If you have any suggestions or advice based on how other organizations framed these knowledge statements, please let me know.

From: Schwarz, Kelsey (CDC/OD/OADC)
Sent: Thursday, December 10, 2020 1:27 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Ok, we feel that we will better understand any misconceptions people have about masks if we can have a few wrong answers in the mix. Would you pick 5 at random to include for each poll or would we have to narrow it down to the same 5 for all?

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Thursday, December 10, 2020 1:19 PM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>
Subject: Re: RE: Brandlift

Hi Kelsey,

Yes, we're ultimately limited to 5 on these, but if you have additional strong candidates, feel free to throw them in -- never hurts to have options here.

-A

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>
Date: Thursday, December 10, 2020 at 1:10 PM
To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>
Subject: RE: RE: Brandlift

Quick question – Can we only have 5 answers for the knowledge section including "I don't know"?

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>
Sent: Thursday, December 10, 2020 10:00 AM
To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>
Cc: Michael Sullivan <mgs1517@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)

<gck9@cdc.gov>

Subject: Re: RE: Brandlift

Hi Kelsey,

Thank you for putting this together – very helpful and it should work well. Two more technical notes to keep in mind on this end before we’re good to go with the questions.

- The answers to the knowledge question do have a technical limitation of 50-characters, so where possible it’d be helpful to condense or think through alternative knowledge statements. I included the answers below along with demarcations of where the character limit would currently cut off in red.
- We will ultimately be able to select 3 polling questions including Ad Recall, if you get a chance we’d love to also get a sense of how you’d rank each of these selected polls as they align with your learning objectives so we have a good sense of how to prioritize.

--

Knowledge Polling Format:

Which of the following statements do you think are true about masks?

- Masks, when worn over mouth and nose, are effective at slowing the spread of COVID-19
- Masks should be worn when you grocery shop
- Masks should be worn when you use a rideshare service
- Masks should be worn when you are on public transit
- I don’t know

Thank you,

-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Wednesday, December 9, 2020 at 3:12 PM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>, "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Airton,

Our suggested polling questions are below. Let me know if these work.

Ad Recall Polling Format:

Do you recall seeing an ad about masks online or on mobile device in the past 2 days?

- Yes
- No
- Not sure

Attitude Polling Format:

How important is wearing a mask to prevent the spread of COVID-19?

- Very important (DR)
- Somewhat important (DR)
- Somewhat unimportant
- Very unimportant
- I don't know / not relevant to me

Action Intent/Behavior Polling Format:

How likely are you **wear a mask when you are out in public?**

- Very likely (DR)
- Somewhat likely (DR)
- Somewhat unlikely
- Very unlikely
- I don't know / I already got vaccinated

Knowledge Polling Format:

Which of the following statements do you think are true about **masks?**

- **Masks, when worn over mouth and nose, are effective at slowing the spread of COVID-19**
- **Masks should be worn when you grocery shop**
- **Masks should be worn when you use a rideshare service**
- **Masks should be worn when you are on public transit**
- I don't know

Thanks,
Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Wednesday, December 9, 2020 2:33 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <[\(b\)\(6\)@fb.com](mailto:(b)(6)@fb.com)>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR) <gck9@cdc.gov>

Subject: Re: RE: Brandlift

Thank you Kelsey,

Based on this context, we can certainly look at using this test to measure any shifts in knowledge and action/behavior intent within your audiences. Below I've highlighted a few polling questions designed around the flu vaccine this year. The org names and messages in the brackets are interchangeable so you can fill in anything about wearing masks, social distancing or any other key messages you'd want to push and better understand. Would you be able to adapt these formats to the message(s) you're hoping to get deeper insight into? Once you have some of these initial focus points we can work to finalize.

Ad Recall Polling Format:

Do you recall seeing an ad from **[ORG NAME]** online or on mobile device in the past 2 days?

- Yes
- No
- Not sure

Attitude Polling Format:

How important is [getting the flu vaccine this year]?

- Very important (DR)
- Somewhat important (DR)
- Somewhat unimportant
- Very unimportant
- I don't know / not relevant to me

Action Intent/Behavior Polling Format:

How likely are you [to get the flu vaccine this year]?

- Very likely (DR)
- Somewhat likely (DR)
- Somewhat unlikely
- Very unlikely
- I don't know / I already got vaccinated

Knowledge Polling Format:

Which of the following statements do you think are true about [the flu vaccine this year]?

- [The flu vaccine is recommended and safe]
- [Knowledge statement #2]
- [Knowledge statement #3]
- [Knowledge statement #4]
- I don't know

Thank you,

-Airton

From: "Schwarz, Kelsey (CDC/OD/OADC)" <nle5@cdc.gov>

Date: Wednesday, December 9, 2020 at 11:20 AM

To: Airton Tatoug Kamdem <airtonkamdem@fb.com>, Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>, "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>,
"Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>, "Averbach, Hallie

(CDC/DDID/NCIRD/OD) (CTR)" <gck9@cdc.gov>

Subject: RE: RE: Brandlift

Hi Airton,

For the Brandlift, we would like to find out what knowledge is gained from our messaging and how likely someone is to practice the behavior (wearing a mask) after seeing our messaging. Overall, we want this project to help us determine if our campaign is working and where adjustments should be made.

Thanks,

Kelsey

From: Airton Tatoug Kamdem <airtonkamdem@fb.com>

Sent: Tuesday, December 8, 2020 10:51 PM

To: Schwarz, Kelsey (CDC/OD/OADC) <nle5@cdc.gov>; Julia Eisman <juliaeisman@fb.com>

Cc: Michael Sullivan <(b)(6)@fb.com>; Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>; Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>; Averbach, Hallie (CDC/DDID/NCIRD/OD) (CTR)

Cc: Dempsey, Jay H. (CDC/OD/OADC) <ifb5@cdc.gov>
Subject: Re: Brandlift

Carol,

Great to hear from you, and yes absolutely would love to meet on this. Let me know if any of the avails below work:

- Thursday (tomorrow): 12-1pm, 5-5:30pm
- Friday: 1-1:30pm, 2-3pm
- Monday: 12-1:30pm, 2-2:30pm, 3-3:30pm

Thanks!
Julia

From: "Crawford, Carol Y. (CDC/OD/OADC)" <cjy1@cdc.gov>
Date: Wednesday, October 28, 2020 at 1:40 PM
To: Julia Eisman <juliaeisman@fb.com>
Cc: "Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>
Subject: Brandlift

Julia – We would like to finally follow up on this. We've had some staff look at the materials you sent but I think it would help for us to meet with you and discuss some ideas we have. Is the offer still open? ☐

Thanks!

Carol Y. Crawford
Chief, Digital Media Branch
Division of Public Affairs
Office of the Associate Director for Communication
Centers for Disease Control and Prevention
404-498-2480
ccrawford@cdc.gov
Cell: 678-920-0578

- <Final Polling Questions.docx>
- <Final Approved OADC Social Media Paid Ads Masking BrandLift.docx>
- <20_321133-H_Firchow_Minimalist_Masking_Transit.png>
- <20_321133-G_Firchow_Minimalist_Masking_Ridesharing_v2-01.png>
- <Final Polling Questions.docx>

From: Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP)
Sent: Fri, 19 Mar 2021 00:24:43 +0000
To: payton@fb.com; Priya Gangolly; Crawford, Carol Y. (CDC/OD/OADC); Layton, Kathleen (CDC/OD/OADC); Dempsey, Jay H. (CDC/OD/OADC); chelseylepage@fb.com; genelleadrien@fb.com; katherinemorris@fb.com
Cc: Airton Tatoug Kamdem; Nisha Deolalikar; Julia Eisman; Stephanie Bousheri; Liz Lagone; kthornton@fb.com; Kolis, Jessica (CDC/DDPHSIS/CGH/GID)
Subject: RE: Call or VC- Facebook weekly sync with CDC

Hi Facebook team,

I apologize that my sound cut out on the call today! It was great to hear you present on your excellent work.

In terms of understanding and building vaccine confidence – what would be incredibly helpful to our team is if you had the vaccine willingness variables and perceived barriers to vaccination variables segmented by county, or even by state. We have had an incredibly hard time getting granular data at this level and this would be so useful to our mapping efforts and our Insights Reports – as well as understanding the local factors working together to impact vaccine confidence. In both our mapping efforts and Insights Reports we use multiple data sources to better understand the factors currently affecting vaccine confidence and uptake. Our funded states and jurisdictions would be so happy and eager for this data as well!

Do you think such segmentation is possible? How often does your data refresh? Are all your vaccine confidence data indicators asked the same way at each wave of data collection?

Kindest regards and look forward to hearing your thoughts,
Kate

Kate Brookmeyer, Ph.D.
Behavioral Scientist

Vaccinate with Confidence Team | Insights Unit
Vaccine Task Force | Chief Medical Office
Centers for Disease Control and Prevention
Mobile: +1.404.435.2872

Division of STD Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention
Centers for Disease Control and Prevention
Work: +1.404.639.8058

-----Original Appointment-----

From: payton@fb.com <payton@fb.com>
Sent: Tuesday, March 16, 2021 10:43 AM
To: payton@fb.com; Brookmeyer, Kathryn A. (CDC/DDID/NCHHSTP/DSTDP); Priya Gangolly; Crawford, Carol Y. (CDC/OD/OADC); Layton, Kathleen (CDC/OD/OADC); Dempsey, Jay H. (CDC/OD/OADC); chelseylepage@fb.com; genelleadrien@fb.com; katherinemorris@fb.com
Cc: Airton Tatoug Kamdem; Nisha Deolalikar; Julia Eisman; Stephanie Bousheri; Liz Lagone;

Best,

Payton

From: Carol Crawford <cjy1@cdc.gov>
Date: Wednesday, April 28, 2021 at 2:32 PM
To: Payton Iheme <payton@fb.com>
Cc: Genelle Adrien <genelleadrien@fb.com>, Chelsey Lepage <chelseylepage@fb.com>
"Dempsey, Jay H. (CDC/OD/OADC)" <ifb5@cdc.gov>
Subject: RE: CDC "Guides" and this week's meeting

+Jay to weigh in on that guide. I think he'll have latest info. I think it would be great to get that kind of promotion on it – thanks for offering.

I still hope to get you some health equity info...but agree we can pull down meeting tomorrow.

Are you being asked by WH to do anything on vaccine.gov/[vaccinefinder](https://vaccinefinder.gov)? If so, can you share any plans in a nutshell via e-mail?

From: Payton Iheme <payton@fb.com>
Sent: Wednesday, April 28, 2021 1:10 PM
To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Cc: Genelle Adrien <genelleadrien@fb.com>, Chelsey Lepage <chelseylepage@fb.com>
Subject: CDC "Guides" and this week's meeting

Hi Carol,

We wanted to flag a couple of items for you this week.

Instagram Guides Promotion Opportunity: Our Instagram team is looking to run a promotion to amplify vaccine-related Instagram Guides. We saw that the CDC has a great one on its feed <https://www.instagram.com/cdcgov/guide/covid-19-vaccines/18186825229053919/>.

The team is planning to launch an in-feed promotion of the Guides on Monday. It would run for three weeks, and the anticipated reach is 60-80% of people in the US on Instagram.

We wanted to know if the Guide above is up-to-date (or if you'd be willing to update it if needed) and if it is something we can include in the promotion? Happy to discuss further if this is something you may be interested in or if you have any questions.

We can discuss more tomorrow on our weekly if you'd like. Otherwise, unless you have additional topics to cover on your end, we could pull down tomorrow's meeting to give back time. Let us know what you think.

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Sent: Wednesday, April 28, 2021 1:10 PM
To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Cc: Genelle Adrien <genelleadrien@fb.com>; Chelsey Lepage <chelseylepage@fb.com>
Subject: CDC "Guides" and this week's meeting

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We can discuss more tomorrow on our weekly if you'd like. Otherwise, unless you have additional topics to cover on your end, we could pull down tomorrow's meeting to give back time. Let us know what you think.

Also, FYI we are hoping for an update on our COVID-19 misinfo reporting, but that is not ready for this week. Just wanted to make sure we updated you on that.

Best,

Payton

From: Crawford, Carol Y. (CDC/OD/OADC)
Sent: Wed, 31 Mar 2021 18:23:11 +0000
To: Payton Ihome
Subject: RE: This week's meeting

Got it, thanks.

From: Payton Ihome <payton@fb.com>
Sent: Wednesday, March 31, 2021 2:18 PM
To: Crawford, Carol Y. (CDC/OD/OADC) <cjy1@cdc.gov>
Subject: Re: This week's meeting

Hi Carol,

We are working on a proposal of how set up sharing partnership on the misinform items...what it would look like.... so we can discuss Thursday.

Lots of team members out the last two weeks due to all the holidays, but that is the plan so we can discuss on the Thursday call.

From: Carol Crawford <cjy1@cdc.gov>
Date: Wednesday, March 31, 2021 at 2:07 PM
To: Payton Ihome <payton@fb.com>
Subject: RE: This week's meeting

Can you explain what you originally meant when you said this "will know in a few hours (I am told if we have a plan to present for Census Thursday or if it needs more work)". I'm still a bit confused.

But here is what Census mentioned that they would like to discuss:

- It looks like the posts from last week's deck about infertility and side effects have all been removed. Were those re-evaluated by the moderation team or taken down for another reason?
- One of the main themes we're seeing and from the CrowdTangle report is local news coverage of deaths after receiving the vaccine. What's the approach for adding labels to those stories?
 - [Example: No label](#)
 - [Example: Label that links to WHO](#)
- Can we add the Census team to CrowdTangle?
- How should we best engage regularly going forward on the Census/CDC reports.

Thanks.

From: Payton Ihome <payton@fb.com>
Sent: Tuesday, March 30, 2021 7:46 PM