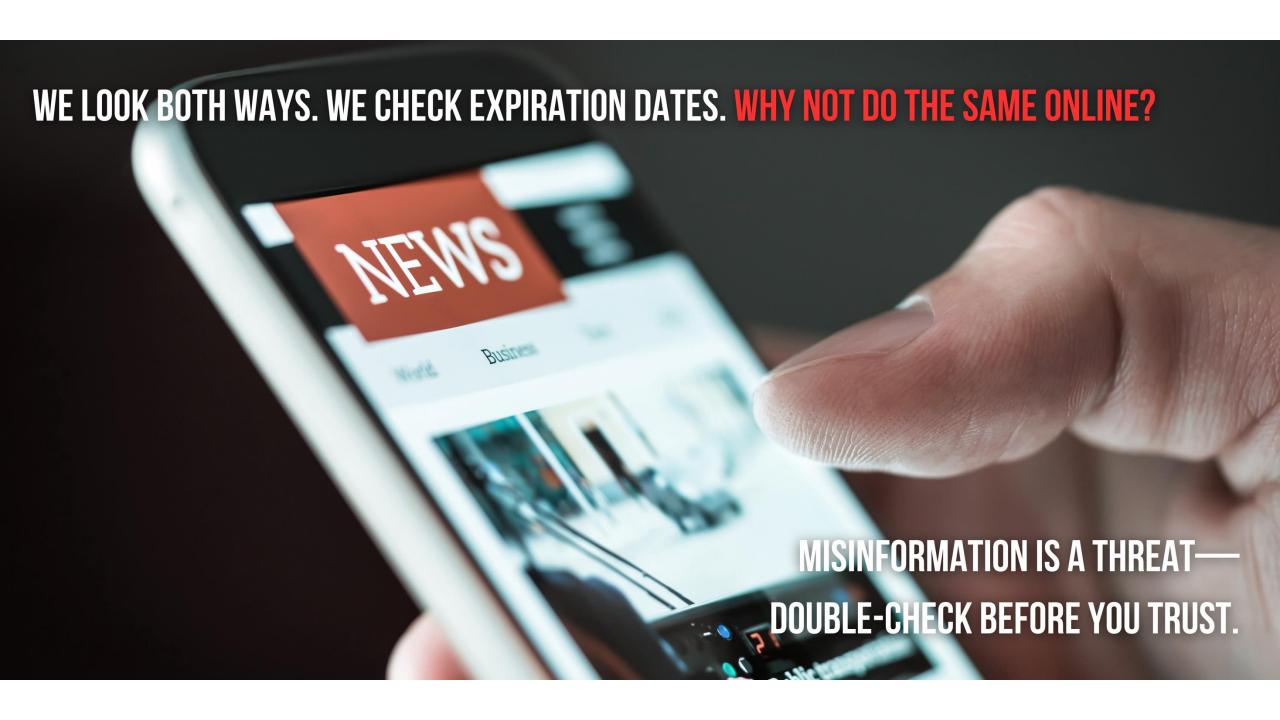
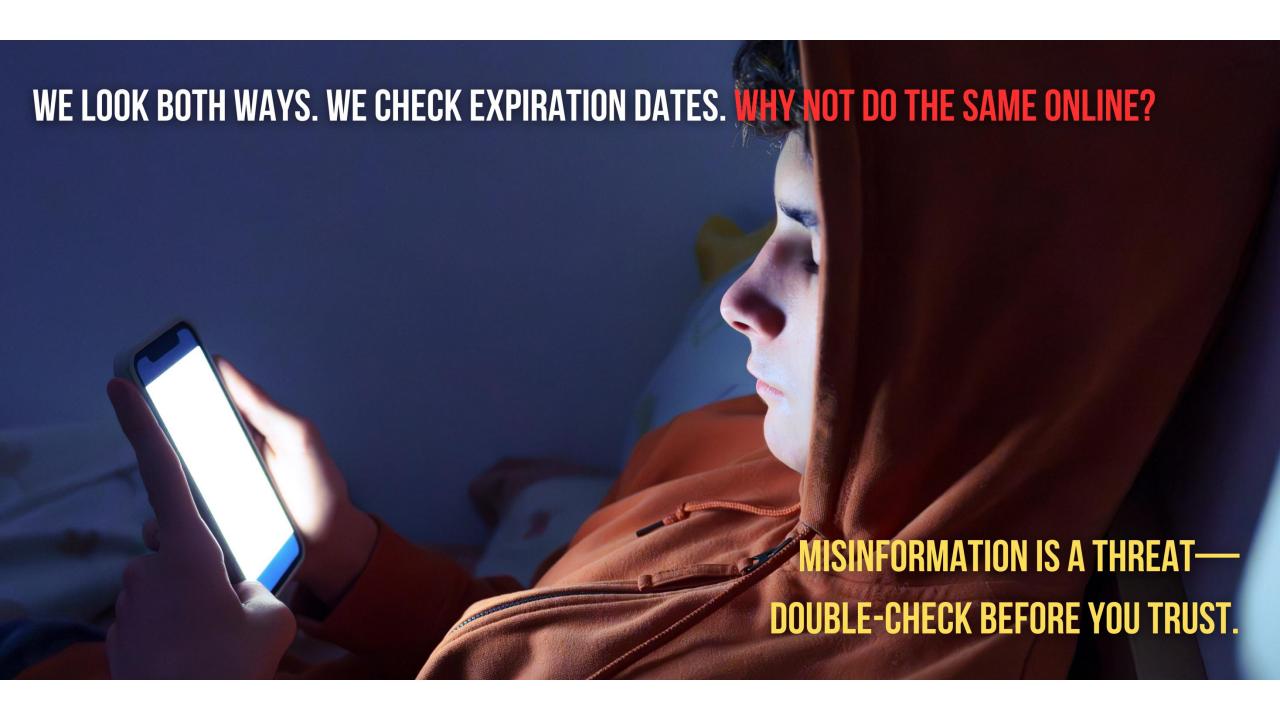
WE LOOK BOTH WAYS. WE CHECK EXPIRATION DATES. WHY NOT DO THE SAME ONLINE?



MISINFORMATION IS A THREAT—DOUBLE-CHECK BEFORE YOU TRUST.





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The state of the s						remin	d oth	ers to	thin	k twic	ce abo	out th	е		
	content they consume online. Misinformation often:														
ATT OF THE OWNER, AND	Fuels hatred (e.g., racist dialogue)														
•	 Deludes people on health issues (e.g., abortions, vaccines, climate change) Increases stigma around sensitive topics (e.g., mental health) 														
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				T	arg	et l	Pop	oula	atio	n					
•	Location: New York City, USA (with the ability to expand nationwide)														
•	 Demographics: All Ages Likely to impact young people the most (Roughly Ages 12-45). 														
	Relevant Characteristics: Transit Users, Internet/Social Media Users														
	• Relevant Characteristics: Iransit Osers, Internet/Social Media Osers														
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											• 1	ike 🗖 Con	nment 🧀 S	hare	3

Justification Misinformation has been on the rise with the onset of social media, especially spreading rapidly during global events. This was seen most recently through events like the COVID-19 pandemic, political elections, and disease outbreaks. When applying the Health Belief Model, our posters act as a <u>Cue to Action</u> to motivate individuals to participate in preventative behaviours. In this case, the preventative behaviour would be fact-checking before believing or sharing misinformation seen online. last, pender, age, et Characteristics Perceived Benefits

						Rat	tion	ale	•						
Rationale for using posters as our health communication channel:															
Diverse distribution across multiple platforms. Can be used both in-person and digitally. Transit platforms, trains, buses, billboards, etc.															
	 Transit platforms, trains, buses, billboards, etc. Social media posts and ads (Instagram, Facebook, X, LinkedIn, etc.) 														
•		/lemora	able im	agery a					ease o		Marie Contract Contra				
Personable. Our messaging speaks to the viewer directly, creating an interpersonal relationship between us and them.)	
															5

						Na	rrat	tive							
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The Property of the Control of the C			l news				•			•					
think	You glance up to check the ETA of your train. You notice one of our posters on the wall. You think about what it means. Have you seen anything on your phone today that was														
questionable? Your train arrives. You sit down and, again, you see one of our posters. Was that tweet you															
saw o		r phon	e reall					k it up.							
				le rem	ninder	: We h	abitual	lly perf	orm ac	ctions t	that are	e mear	nt for c	our	
safety	y and v	wellbei	ing, so	we sh	ould d	lo the s	same v	with wh	nat we	see or	nline.				
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			Pr	σр	ose	ed l	Dis	ser	nin	atio	on				
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	o E	Expand	to oth	ner sub	oway s	stations	s and r	nodes	of tran	sporta	ation (e	e.g., bu	ıses).		
•	Post	on so	cial n	nedia	via t	ruste	d acc	ounts	and/	or pa	id ads	s.			
•	Takin intera		ne ste					socia	medi	a can	npaigr	n by a	dding	an	
	0 E	Exampl		QR co	ode to	scan a	nd ente	er for a	giveaw	ay.					
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					Soc	ciet	al I	mp	ac	t					
•	 Misinformation has entered the public health sphere as an urgent issue in recent years; however, it is hard to tackle at the source. Social media is difficult to monitor due to the socio-political and capitalist interests present. Content is also created at a much faster pace than can be screened/removed. 														
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													1	FARE	8

