PERIL's approach and evidence of success

How our video-based inoculation works:

- **Step 1:** Field scan (qualitative and quantitative) to produce a comprehensive codebook of the narratives, rhetoric, and tropes used in the type of propaganda/conspiratorial content. Typically produces a codebook with 36-50 types of persuasive content
- **Step 2:** Determine which of those persuasive narratives are most salient for different demographics. Strategies vary depending on budget but include:
- a) nationally representative survey (we did this with 2,000 participants on anti-vaxx content, with an emphasis on health care workers and middle-aged mothers, and with 4,500 youth participants aged 14-30 for our project on youth attitudes toward guns)
- b) focus groups (sometimes in conjunction with national survey)
- c) message testing
- d) narrative testing/reactions w/targeted groups (e.g., existing youth gun safety orgs, etc.)

Step 3: Produce and test series of short-form videos

- a) Pick a narrator based on the target demographics and desired platform for distribution (e.g., YouTube vs. TikTok style of video) and decisions about trusted messengers (e.g., health care workers, veterans, existing influencers, etc.)
- b) Script and produce videos (in collaboration with our partner video production company or with existing influencer or selected narrator)
- c) Test videos on lab-based platform (Qualtrics) against control group video to quantify successful reduction of the persuasiveness of the propaganda, behavioral intent (would you share, would you support group, etc.), and other metrics
- **Step 4: Distribute widely**: through partner social media and channels, in strategic partnership with social media platforms, as pre-roll ads, through social media, & more. Goal is millions of views per video. Impact can be tested through brand lift surveys depending on budget.

Existing evidence on PERIL's work:

- -We pre-and post-test all resources for significant effectiveness on increased awareness, intention & confidence to engage with an at-risk person, and awareness of how to get more help. Our tools give participants a sense of efficacy and concrete steps for action; provoke thought about these topics which helps them feel more prepared when these situations do arise; and become the gateway for people to access wide range of other resources that they didn't even know existed
- -In videos as short as 30-seconds, we have shown it is possible to reduce the persuasiveness of propaganda (gratification) and behavioral intent to share it or support the group that produced it
- -We demonstrated it only takes 7-11 minutes of reading for people to improve understanding of harmful online content—this improves both their confidence and their willingness to engage
- -CARE work now launched in 2 states will expand to 200 sites nationally over the next 5 years
- -Metrics of success for CARE center work are comprehensive (led by a full-time social psychologist and anthropologist) & include outputs (downloads, views, people trained), outcomes (pre-and post-test assessments of trainings, workshops etc) and impact (less violence, reduced antisemitism, conspiratorial beliefs in target populations, etc.)