

In collaboration with Centre for Evidence-Based Chinese Medicine, Beijing University of Chinese Medicine Affiliate of Cochrane China Network, CEBCM-BCUM

Shaping and sharing evidence with social media



China was the first country affected by COVID-19 and people didn't know what to expect. We used a mobile telephone social media app to find out what doctors, nurses and members of the public wanted to know about COVID-19 and to share evidence with them.

What we did



Aim

China was the first to identify COVID-19, but people didn't know much about the virus in the early stages. Health professionals wanted to know how to help people and avoid panic around the time of the Chinese New Year. Twenty-four EBM teams in Cochrane China Network and 56 medical student volunteers, called on by EBM teams in Beijing University of Chinese Medicine (Institute of Excellence in Evidence-Based Chinese Medicine, Beijing GRADE Center, Centre for Evidence-Based Chinese Medicine, Beijing University of Chinese Medicine Affiliate of Cochrane China Network), aimed to find out what information doctors and nurses wanted and provided it for them.



Activity

WeChat is a social media messaging app. It is a common way for people to communicate in China, more so than email. About 1 billion people use it each month.

We used WeChat to advertise a survey to find out what doctors and nurses wanted to know about preventing and treating COVID-19. We used a WeChat group to keep in touch with people who were interested. We found evidence to help answer the questions that doctors and nurses asked. We used WeChat to invite volunteers to help us find evidence and translate it.

We used people's feedback to shape the evidence available. We suggested topics for Cochrane's Special Collections about COVID-19. These are collections of evidence from many different Cochrane reviews. We translated all the Special Collections into simplified Chinese. We used WeChat and our website to share the evidence and easy to understand short summaries.



Collaboration

We worked with 24 organisations in China and elsewhere to help find evidence.

What we achieved

We used social media to answer people's practical questions. This led to:

1 More interactions with doctors and nurses:

WeChat was a good way to ask people what they needed. We could have two-way conversations to get feedback in real-time. We shared our evidence through our networks and got a lot of engagement from physicians, health workers and researchers.

2 More people wanting to use evidence to inform their decisions:

The number of people following us on WeChat increased (3293 to 4189) during the first months of the pandemic. This meant more people were exposed to Cochrane evidence and translated Plain Language Summaries.

3 More people volunteering to get involved:

We asked for volunteers to help us find and translate evidence. Over 75 people volunteered to help with language translations. This meant we could work rapidly. In the first six months of 2020 we published over 600 translations of evidence, which is more than we did in total in 2019. There is a Chinese saying that if a lot of people act together, they have power. Having so many people involved in this work helped to find, translate and share much more than any of



See more here:

<https://china.cochrane.org/cochrane-china-network-centre-evidence-based-chinese-medicine-beijing-university-chinese-medicine>

What we learnt

1

Social media is a good way to engage with doctors, nurses and members of the public. We could get feedback quickly about what people wanted to know, share evidence with a large number of people and ask audiences to give advice about how to make evidence easy to understand and useful.

2

EBM teams in Cochrane China Network was able to **respond quickly**, even as the pandemic was just beginning to emerge in the rest of the world. We reached out to our networks to find volunteers and quickly trained them to help us search for the evidence, translate it into simplified Chinese and share it.

3

We are always eager to keep developing. We ask for feedback and we **use feedback to shape what we do**. This does not have to be complicated or formal. We learnt that people are pleased to provide suggestions or offer help when asked.



Learn more

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