A crisis of credibility: the global cost of US vaccine misinformation

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The global health community faces a deepening challenge—not only from infectious diseases but also from a pandemic of misinformation.[1] The USA, long a cornerstone of global health leadership, has become an unexpected source of global instability in vaccination confidence. While US institutions such as the Centers for Disease Control and Prevention (CDC) and National Institutes of Health (NIH) remain internationally respected, their credibility has been compromised by domestic political interference, institutional undermining, and unregulated digital platforms. The consequences are global.

During the COVID-19 pandemic, contradictory messaging on masking, vaccine safety, and mandates created domestic confusion and emboldened fringe narratives. While misinformation is not uniquely American, its scale and global reach are. An analysis of 316 million vaccine-related tweets from October, 2019 to March, 2021 across 18 languages found that the USA functioned as a major exporter of COVID-19 vaccine misinformation, with American accounts disproportionately represented as central hubs in global misinformation networks.[2] This cross-border amplification was facilitated by the design of mainstream social media platforms—most of which are headquartered in the USA—whose algorithmic architectures prioritised emotionally charged and polarising content. A separate longitudinal analysis of almost 300 million tweets on Twitter (now X) in 2021 found that only 800 "superspreader" accounts were responsible for a third of all vaccine misinformation retweets, with the most prominent account belonging to Robert F Kennedy Jr, accounting for more than 13% of these retweets.[3] These accounts operated primarily within the US digital ecosystem but had global reach, reinforcing the role of American-origin misinformation as a destabilising force in international vaccination confidence.

In West Africa, particularly Nigeria and Ghana, viral social media posts from the USA promoting conspiracy theories have eroded trust and reduced demand for COVID-19 and childhood vaccines as reported in UNICEF's 2023 *State of the World's Children Report*.[4-6] In Eastern Europe, particularly Romania and Bulgaria, similar dynamics have contributed to low vaccine uptake intentions. In a 2021 survey, 60% of respondents in Bulgaria stated that it was unlikely they would get vaccinated against COVID-19.[7] A study of the misinformation campaigns around vaccination in Bulgaria conducted around the same time showed that although most of the false claims originated from Bulgaria, these were followed by false claims from the USA.[8] In Romania, by January, 2022, national COVID-19 vaccination coverage was below 45% in a context where fears stemming from fake news seeded distrust and influenced vaccine refusal.[9]

This transnational dissemination of falsehoods about vaccines has undermined not only trust in public health programmes, but also the institutions that deliver them. International collaborations with the CDC and other US public health and scientific institutions depend on perceptions of competence and trust. When their authority is domestically challenged, as happened in June, 2025, with the abrupt removal and replacement of the Advisory Committee on Immunization Practices (ACIP) panel members, public as well as health-care professionals' confidence in official vaccine information sources wanes, driving them to seek other information sources.[10,11] The US Agency for International Development (USAID), which has faced major cuts during 2025,[12,13] and other agencies working in partnership with Gavi, the Vaccine Alliance, WHO, and national ministries are increasingly confronted by vaccine hesitancy grounded in exported disinformation, much of it directly traceable to American political discourse and media.

Cutting US funding of vaccine equity abroad and tolerance of anti-vaccine sentiment at home presents a strategic vulnerability.[14-16] The global health system relies on credibility as much as funding. When a leading donor cuts substantial portions of international funding for science as well as vaccine delivery, among multiple other health programmes, it challenges global health efforts and allows conspiracy and misinformation to flourish globally. The loss is to the funding and reputation of multilateral efforts and to crucial support for credible information sources, fuelling the spread of

misinformation, undermining trust in vaccines and risking lives.[17]

A clear strategy is needed to counter US vaccine misinformation. First, scientific independence within federal health agencies needs to be protected. Political appointees should not interfere with technical guidance. Congressional mechanisms must guarantee the autonomy of bodies such as the CDC and NIH, irrespective of the incumbent administration. Second, regulation of digital platforms must address cross-border health harms. Voluntary content moderation has failed. Legislative tools must compel transparency in algorithms and enable coordinated misinformation takedown efforts in collaboration with global partners.

Globally, the USA should lead not through exceptionalism, but on the basis of accountability. A binding international code on digital health integrity, co-developed with WHO and regional organisations such as the African Union and ASEAN, is long overdue. Central to such a framework must be algorithmic transparency. Current social media platforms use proprietary content recommendation systems that are not subject to independent moderation or oversight, despite growing evidence that these algorithms systematically amplify misinformation.[18] The EU and its Digital Services Act requires large social media platforms to assess how the design of their platforms, including algorithmic recommender and content moderation systems, might promote systemic risks that include illegal content dissemination or risks associated with public health.[19]

Coordinated fact-checking infrastructure should be built into platform operations, not outsourced or voluntary, and must be adaptable to local languages and sociocultural contexts. Misinformation transcends borders, yet most regulatory responses remain national and fragmented. Vaccine confidence—and public trust in health systems more broadly—cannot be rebuilt if nations operate in epistemic silos while dangerous content spreads algorithmically across platforms that are globally integrated but minimally accountable.

The barriers to these measures are real. The First Amendment of the US Constitution has been invoked to oppose platform regulation, although US jurisprudence has long recognised boundaries when speech causes public harm.[20] Meanwhile, trust in health institutions has declined among certain populations partly due to long-standing inequities, particularly among marginalised communities.[21] Any strategy must therefore go beyond technical fixes to address social trust. That means funding local messengers, strengthening civil society, and engaging in communication rooted in cultural legitimacy—not top-down persuasion.

The urgency is compounded by what lies ahead. With climate-linked disease emergence, conflict-driven displacement, and increasing zoonotic risk, the next pandemic might already be incubating. A world fragmented by health misinformation is ill-prepared to respond to the next pandemic threat. Rebuilding public trust and immunisation resilience will require consistent, evidence-based messaging from the world's most influential actors, alongside strong, equitable health infrastructures that reliably deliver life-saving vaccines.

There is still time to act. But it requires confronting uncomfortable truths about the role of the USA in fuelling mistrust, and the political choices that have allowed it. The world cannot afford another crisis in which lives are lost not for lack of vaccines, but for lack of truth.

HJL is the Founding Director of the Vaccine Confidence Project, which receives funding from the Gates Foundation, Merck, GSK, and the Hong Kong Government. HJL has consulted with the Gates Medical Research Institute and ApiJect on issues of Vaccine Confidence; received travel support from Rice University, the University of North Carolina, and Stanford University in the USA and Nagasaki University in Japan; and is an unpaid member of the PATH Board of Directors. SJP reports that between 2020 and 2024 as part of the Vaccine Confidence Project he was a principal investigator of a project funded by the UK Government and was involved in projects funded by UNICEF, Meta, WHO, and the Hong Kong Government. SJP is the founder of the New Imagination Lab, a start-up research initiative exploring the future coexistence of humans and artificial intelligence.

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