

EDITORIAL

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We have reached the end of 2020. An atypical year that challenged everyone and that will be forever marked in the history of humankind. An unknown disease of catastrophic proportions, which has spread throughout the world. Yes, a pandemic! That remains unanswered, without specific treatment protocols or mass immunization, and that made the world stop, in the face of so many questions and fears.

In times of pandemic, we assist health professionals on the front lines, being applauded by the community, but also, with many becoming ill from infection, from unhealthy work conditions, others from physical and mental health that were already exhausted, and many others, who died as a result of their profession. We saw the movement of non-essential activities into our homes, the so-called home office. Researchers running out of time, looking for answers to so many questions. The community, often afraid or incredulous, amid this process, with some refusing to understand what is happening and going against preventive measures and further spreading the virus and misinformation.

Despite all the losses suffered, which were many - deaths, illnesses, job and financial losses, never before there had been a volume of research produced so quickly. After all, we want and need answers!

However, at the same time, we saw an exponential increase in so-called “Fake news”. The spread of false news, which puts in check the science produced, the credibility of educational and health institutions, and which directly impact the community's non-adherence to effective preventive measures, so important in this pandemic.

A study based on data from the “Eu fiscalizo” application, from Fundação Oswaldo Cruz, pointed out that in the period from March 17 to April 10, 2020, 65% of the false news transmitted was about homemade and inadequate methods of preventing COVID- 19. 20% reported home treatments for infection; 5.7% were financial fraud and a further 5% requested false collections for research institutions. 4.3% linked the new coronavirus to a political strategy.¹ With this volume of false news circulating, the population began to discredit the true scientific evidence and spread fake news so quickly.

When assessing the ways in which this news reaches the population, it was found that 73.7% are sent via Whatsapp, mainly in groups; 15.8% via Facebook and 10.5% through posts on Instagram.¹

Thus, currently, fake news, as well as the pandemic, represent a serious public health problem, which puts the health of the population at risk. But then, how to end them? This is an instigating, difficult and complex question for the media and all of society today. It is recommended that the population check the information through official sources, before passing on the content but, in parallel, it is necessary that reliable research results reach the population in an accessible, simple and free way.¹

The term knowledge translation is used to describe the application of the results of scientific research in the population's real life. In general, it takes many years to observe the implementation of research results in practice.² However, nowadays, with the advancement of research and, in parallel with the spread of false news, it is a process that is essential that must accompany the advancement of science. Translating knowledge, in this context, aims to reduce the gap between science and the community and promote healthier habits, based on the best scientific evidence.

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Translating scientific knowledge into different and diverse contexts of practice and promoting dialogical exchanges involving professionals, managers, public policy makers, services users (patients), family members and other interested community members are strategies capable of promoting equity and quality to health services³. It is also a unique opportunity for this moment of uncertainty that we are experiencing, exploring different resources, such as social media and online environment (internet). It is to make sure that it actually reaches those who need the information.

In this issue of REAS, results of research with a quantitative and qualitative approach are presented; with different methodological designs and with a wide diversity of target audience (puerperal women, women of reproductive age; children and adolescents; cancer patients; people living with the HIV virus; nursing and nutrition workers and municipal managers). Based on this publication and, through online access, REAS moves towards translating knowledge for the entire population.

We wish you all an excellent reading and share and disclose the results of the researches presented here.

REFERENCES

- 1 Galhardi CP, Freire NP, Minayo MCS, Fagundes MCM. Fato ou fake? Uma análise da desinformação frente à pandemia da COVID-19 no Brasil. *Cad Saúde Pública* [Internet]. 2020 [citado em 28 nov 2020]; 25 (Supl 2):4201-10. doi:10.1590/1413-812320202510.2.28922020
- 2 Andrade KRC, Pereira MG. Tradução do conhecimento na realidade da Saúde Pública brasileira. *Rev Saúde Pública* [Internet]. 2020 [citado em 28 nov 2020]; 54. doi: 10.11606/s1518-8787.2020054002073
- 3 Vieira ACG, Gastaldo D, Harrison D. Como traduzir o conhecimento científico à prática? Conceitos, modelos e aplicação. *Rev Bras Enferm.* [Internet]. 2020 [citado em 28 nov 2020]; 73(5):e20190179. doi: 10.1590/0034-7167-2019-0179