

Appendix 2 - Comparison of Governance Approaches to Health Risk Communication in the Age of AI in Brazil and Germany

6.1 Organizational Regulations and Individual Responsibilities as Core Governance Pillars			
Observations	Similarities (Brazil & Germany)	Differences: Brazil	Differences: Germany
1 Core challenges in AI and health risk communication	Both countries face comparable challenges related to information disorders driven by socio-technical assemblages (platforms, actors, big data, political and commercial incentives). AI, bots, and algorithms amplify mis-, dis-, and malinformation.	---	---
2 Regulatory priorities and governance direction	Both prioritize mitigating harmful information, regulating digital intermediaries, promoting transparency, and strengthening media pluralism. AI is framed as both a risk and a solution.	Regulation is politically contentious; strong resistance from big tech and far-right actors.	Regulations embedded in an EU framework (e.g., DSA); enforcement challenges remain, but within a more structured supranational system.
3 Role of AI in governance	AI is understood as an ambivalent tool - both contributing to and helping mitigate information disorders; governance framed as a socio-technical assemblage requiring multi-level intervention.	PBIA presents AI as a means to support SUS (Brazil's Unified Health System) and solve public health challenges.	AI governance is strongly articulated through EU obligations and platform accountability under the DSA.
4 Governance of organizational factors and political context	Both focus on organizational factors but organizational regulations often reach their limits. Both face tensions	Enforcement can be fragile due to political, judicial, and economic pressures. Strong political	Enforcement complicated by platform power and freedom-of-expression debates, but in a more

	between free speech, platform power, and accountability in addressing harmful content.	polarization; far-right actors frame regulation as censorship; big tech actively lobbies against regulation.	institutionalized environment. Debate framed within EU governance; platforms exert influence but under tighter institutional oversight.
5 Individual competencies and digital literacy	Both emphasize strengthening individual responsibility, digital literacy, and health literacy.	There is an even stronger focus on individual responsibility due to weaker regulatory capacity, with an emphasis placed on education and resilience.	Emphasis on media education, transparency, and digital health literacy within strong institutional programs.
6.2 Governance Blind Spots: Interactional Dynamics and Societal Contexts			
Individual vulnerabilities	Both address individual factors largely through the lens of <i>health literacy</i> , yet the underlying conditions, values and individual vulnerabilities that shape people's capacity to access, interpret, and act upon health information remain insufficiently considered.	---	---
Societal factors: Post-truth dynamics and trust in epistemic institutions	Both approaches neglect broader societal factors, even though they are similarly affected by a decline in trust in epistemic authorities – a development that facilitates the spread of mis-, dis-, and mal-information.	Post-truth dynamics strongly politicized and aligned with far-right political disinformation networks. Consequences aggravated by politicized health crises and erosion of institutional legitimacy.	---
Interactional factors	Both approaches fail to adequately	---	---

	address the interactional factors arising from AI's role as a socio-technical assemblage, as well as the international interaction dynamics that shape the transnational circulation of health information.		
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