Why Audiences' Voice on Developing Anti-Smoking Messages Matters

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ABSTRACT

Mediated health campaigns are a significant promotive and preventive approach to public health. However, most health communication and campaigns in Indonesia tend to deliver explicit messages about the danger of addictive substances. For example, smoking is framed as harmful and unfavourable. Anti-smoking Public Service Advertising (PSA) depicts the severe adverse effect of smoking on health, sometimes resulting in people resisting the message. In contrast, pro-smoking through tobacco advertisements is associated with fun and enjoyable behaviour, encouraging people to smoke or start smoking. Besides quality, anti-smoking PSAs in the country cannot compete with accessible cigarette advertising in terms of quantity. As a result, intervention to prevent tobacco use remains lacking. The effectiveness of anti-smoking PSA is usually assessed by looking at and counting the significant impact of the messages on people's intention to change their behaviour. This top-down approach is missing from understanding why people perceive the messages as meaningful and how they are likely to accept or reject them, particularly where smoking remains socially and culturally normalised, like in Indonesia. By reviewing the relevant literature on audience research, this paper aims to propose the cultural media audience as a valuable approach and framework in health communication and provide an analysis of some mediated smoking campaigns in Indonesia. The existing PSA tends to underscore people's perceptions and expectations of the messages. It is argued that a cultural-media audience approach allows for staging people's voices about persuasive health messages and helps to develop meaningful smoking-related interventions or campaigns.

Keywords: Anti-smoking, health communication, media audience, message, Indonesia.

INTRODUCTION

The positivistic paradigm through quantitative method is the common practice used in evaluating health communication. Formative studies through surveys are one of the accepted strategies used to collect information on what people think about the messages (Bryant & Oliver, 2009). A similar approach is applied in developing effective health messages, such as messages on the harms of smoking. For example, existing tobacco control media campaigns in Indonesia tend to adopt the 'global message' approach to assume that audiences across the country may have the same interpretation and reaction toward the counter-advertising (Hoffman et al., 2017; Kupersmidt et al., 2012). Although the scientific approach is significant in providing background information about behaviour, this method is argued to be lacking in presenting the bigger picture of the reality, which is likely dependent on specific contextual settings, such as cultural and religious practices.

Meanwhile, different views and approaches to understanding how people perceive messages as meaningful or meaningless suggest that people are an active audience. Their beliefs and behaviours are influenced by their meaning-making practice of the messages within a specific context (Nightingale, 2011). The method examines how people perceive health messages by assessing the potential impact of the information that may lead to people's intention to change their risky behaviour. However, limited studies are still found to comprehend how people interpret and understand those messages from this cultural perspective. For example, women's meaning-making practices regarding the smoking or antismoking messages are likely to vary and be determined by their interaction with the symbolic meanings surrounding the messages, such as objects, peoples, or ideas that occurred in the society in a specific situation. Including stigma toward women smokers in Indonesia.

This paper reviews relevant literature on different approaches in health communication and analyses some anti-smoking media campaigns in Indonesia. We draw and adapt the concepts of reflexivity from Mohan Dutta in the cultural-communication approach, which in the following sets the groundwork to explain the practical approach to examining and evaluating existing health-mediated messages or relevant health communication practices. Finally, the paper offers critical points and a brief takeaway message on the need to administer a cultural-media audience approach in assessing and developing health messages by incorporating audiences' voices and experiences.

LITERATURE REVIEW

Between Positivistic and Cultural Approach in Health Communication

a) Positivistic and Humanistic Approach in Health Communication

Health communication has been long applied in public health, which briefly emphasises promotion and preventive intervention through media. As a distinct subdiscipline in communication, the definition of health communication has gone through a profound transformation. Scholars have acknowledged health communication as an interdisciplinary discipline. For example, health communication is included in the literature on public health (Ayub et al., 2017; Harrington, 2015; Kreps & Thornton, 1992; Kreps, 2012), cultural approach and social change (Airhihenbuwa et al., 2014; Dutta-Bergman & Dutta, 2005; Dutta & de Souza, 2008; Dutta & Zapata, 2018; Nutbeam et al., 2010; Watson et al., 2012; Zoller & Dutta, 2008), and media, communication, and health (Marinescu & Mitu, 2016; Emma, 2007; Seale, 2002; Thompson et al., 2003; Thompson et al., 2011).

The mediated-health campaign is a powerful tool to disseminate health information, influence and change people's behaviour, prevent disease risk, and promote healthy lifestyles. Early prominent health communication scholars, such as Gary L. Kreps, argued that most health-related issues are directly related to the effectiveness of health communication (Thomas, 2006). Most of the health communication studies on risky behaviours, such as alcohol use and smoking—within this approach looked at the effectiveness of messages by examining and measuring the relationship between messages' impacts on people's behaviour. These likely 'cognitive-based studies' were carried out to identify, predict, and quantify determinant factors influencing people's behavioural intentions and change (Cupp et al., 2015). Other scholars within this paradigm have argued for the significance of psychological theories in examining and providing interventions for personal, social, and contextual change.

Both cognitive and psychology-based theories have been widely used in studies examining the influence of anti-smoking messages on people's knowledge, understanding, and behavioural change of the adverse of tobacco use. In addition, various quantitative approaches, such as systematic reviews, field experiments, randomised-trial controlled (RCT), longitudinal community and population-based studies, and qualitative studies, have been used to examine the effects of anti-smoking advertising on teenagers and adults (Davis et al., 2008; Wakefield et al., 2003). For instance, the review of the government-funded anti-smoking campaigns in the United States found that mediated-tobacco control campaigns have a more positive influence on pre-adolescence or early adolescence. Meanwhile, the empirical studies reviewed in the National Cancer Institute (NCI) Tobacco Control Monograph reported the profound impact of an anti-smoking media campaign on smoking reduction and preventing smoking initiation among youth and adults (Davis et al., 2008).

Similarly, in the context of Indonesia, most of those studies focused on the health effects of tobacco use (particularly for individuals), interventions to reduce tobacco use, and tobacco control policies (Djutaharta & Viriya Surya, 2003; Putra et al., 2020). Moreover, these surveys were carried out among youth and adults across countries, including Indonesia. For instance, a nationally representative survey as part of the Global Tobacco Surveillance System (GTSS)—the Global Youth Tobacco Survey (GYTS) and the Global Adult Tobacco Survey (GATS) were introduced by WHO and the US Centers for Disease Control and Prevention (CDC). However, these typical global and national surveys do not explain how the mediated antismoking messages influence people's perception and understanding of smoking-related issues. For example, to what extent have the messages influenced them to quit smoking, and why do individuals think these messages do not counter current tobacco advertisements?

Scholars under these positivistic paradigms have extensively placed messages or texts as determinant factors influencing people's behaviour. The media are perceived as extremely powerful in promoting health beliefs and creating role models for contemporary people. Hence, there is still debate in understanding how and in what circumstances media content or message impacts people or entire audiences. For instance, Donohew et al. (2012) described one of the shortcomings of the practice of public health campaigns (in the case of drug abuse prevention) is not cost-effective. They called such a campaign "an expensive failure". They argued that some reasons for the failures are: (1) ambitious expectation of direct media effect on people's behaviour, and (2) fail to reach the target audiences. Finally, these scholars addressed how to get people seriously to attend to the health information they need.

Besides questioning factors that shape a message to be effective or not, applying the cognitive-behavioural theories to understand message effectiveness is argued to be insufficient to predict people's behaviour. Joseph N. Capella (2006) argued that the message effects paradigm needs to be integrated with the predictors of individuals' behaviour change (attitude, subjective norm, and perceived behavioural control) and how they recall the advertising content.

Moreover, the positivistic approach, which is mainly carried out through the quantitative method, fails to answer (1) what the best-defined messages are addressing those behaviour change predictors that need to be developed; and (2) how to ensure people will accept those messages (Bergsma, 2004; Bergsma & Carney, 2008). Capella, Bergsma and Carney's arguments underlie the importance of considering other aspects that may be the potential to influence people's behaviour that is beyond the text, such as cultural context. Findings on the effect of anti-smoking advertising on people's perception and behavioural change might yield different results if similar theories and approaches were applied in a different context, for example, in specific sub-groups in developing countries.

Thus, Kegler et al. (2002) argued that to better translate and adapt the existing humanistic approaches to health communication, researchers and health practitioners need to explore and understand the cultural context that determines why and how people interpret the media message addressing the unhealthy behaviour, such as smoking. In a similar vein, Werder (2017) proposed the need to acknowledge individual reactance towards health messages. He argues that understanding how people react (accept or reject) to health information may give insight into what, why, and how the messages are relevant to them. In addition, drawing from their thoughts and experience with the messages will help determine which aspects of the messages need further improvement.

In brief, the dominant positivistic media studies approach to health communication which focuses on the impact of media and the message on behavioural change, is insufficient to understand how the message becomes meaningful for the people—audiences, viewers, or readers. Furthermore, the humanistic approach fails to address circumstances that may contribute to people's behavioural change regarding health issues. Such factors include why particular messages influence people's behaviour while other messages do not have the same impact and the determinant factors that may explain people's health and well-being—the social, economic, cultural, and environmental contexts.

b) Shifting Definition of Audience

The media audience's understanding of the active recipient was developed from the Cultural Studies tradition. This school of thought identifies itself differently from the behaviouristic perspective or the social cognitive theories. Instead, media audience or reception—which are used interchangeably—focus on individual differences, socially constructed through the economy, politics, and social and cultural power relations (Staiger, 2005).

The notion of the audience as 'active' participants in media engagement was initially formulated through Stuart Hall's Encoding/Decoding perspective, which has become one of the early audience research theories. The theory examines the relationship of 'production-text-audience' in a more hermeneutic approach. Hall argues that culture plays an essential role in how people create or constructs those different meaning and how the meaning tends to be contested (Ott & Mack, 2013). Thus, Hall criticised the behavioural-social cognitive approach that undermines the social context of reading/decoding practice. "If there were no limits, audiences could simply read whatever they liked into any message" (Hall, 1980; Hall et al., 2003; Staiger, 2005).

Hall's Encoding/Decoding framework has greatly influenced some media studies scholars. For instance, Janet Staiger has demonstrated the early version of reception studies. Staiger explained how reception studies are viewed through two approaches: structural-functionalism and critical cultural studies. Unlike structural functionalism, which sees power relations distributed equally among various social classes, the latter argues that power is in the hand of certain groups; for example, regarding media, power is possessed by those who have control of media production. At the same time, the audience is considered members of social groups with insignificant power that may consciously struggle to resist the hidden power in the messages conveyed through the media (Staiger, 2005).

Even though Hall's theoretical approach was much influenced, Staiger contested the reading classification offered by Hall. Staiger's arguments, in summary, include: First, television and other texts do not always produce the dominant ideology. Thus, preferred reading or preferred meaning-making becomes problematic. Second, there is a tendency to assume that class/culture is unitary (single) and unaffected by other circumstances such as

pleasure and identities; thus, the model does not acknowledge subject and pleasure. Third, the message's resistance suggests the audience is unaware of the dominant or preferred meaning. Fourth, there is no evidence that oppositional reading provides an avenue for individuals to make a social change. Fourth, the oppositional reading might be defined beyond reading, and five, most readings resemble a text negotiation. Moreover, Livingstone proposed a critique of audience theories in the development of mass media in the digital era. The audiences are still displayed as homogeneous, vulnerable, and easily manipulated in the face of powerful and all-pervasive digital media (Livingstone, 2007).

Despite the Encoding/Decoding theory becoming the benchmark for the audience and reception studies, scholars such as Virginia Nightingale, Dennis McQuail, Nick Couldry, David Morley, Andy Ruddock, Sonia Livingstone, and Ien Ang challenged and tried to refine Hall's conceptual definition of the 'audience' (Ang, 2006; Ang & Couling, 1985; Couldry, 2011; Livingstone, 2013; Livingstone, 2005; McQuail, 2013; Morley, 1986, 1990, 2003; Nightingale, 1996; Nightingale, 2011; Ruddock, 2000). For instance, Ang clarifies a key point shared by many researchers in this tradition: audiences are difficult to define because audience hood is a complicated and interconnected issue (Ang, 2006). Ien Ang is amongst early scholars who applied media audience or media reception studies within feminist studies. Specifically in understanding people's meaning-making process of popular culture messages, including the social practice that influences and explains their interpretation or reading of such media messages/texts (Van Zoonen, 1994).

Moreover, Nightingale challenged Hall's theory of lacking specifying terms such as *code, language, and discourse* which, according to her, was unclear. Nightingale said that audience research is not only talking about the text but also offers balanced cultural criticism. The audience is said to engage in the production of culture. Audience research measures media's effect on people's behaviour and talks about a more interpretive activity that involves how much effect is proposed to lie in people's lived relationships with popular text in the media (Nightingale, 1996; Nightingale, 2011).

McQuail argued that the definition of the audience as 'attentive listeners/spectators' in early media studies is irrelevant, stating that "(...) issues of changes in the means of distribution and reception is that the forms taken by the audience were bound to multiply and diversify, straining at any single version of the audience experience or the way it might be construed" (McQuail, 2013, pp. 12). Couldry suggested a similar point of view. Although in traditional media, the audience can be a receiver and a producer at the same time, it is far much different in today's broader media environment, and "(...) audience practice is likely to go on being reproduced within the larger landscape of media-related practice, and much more diverse" (Couldry, 2011, pp. 225).

Moreover, in his study of "Nationwide Television," Morley argued that the audience's social position influences an audience's reading/decoding of messages and how the TV programs "talk" to them. Morley framed the term audience as 'community,' and his study shifted the interaction of audience-medium to audience-text (Nightingale, 2011, pp. 149). Andy Ruddock claimed that placing media communication studies, especially looking at the impact of messages on the audience from the cultural studies lens, is somehow problematic. Cultural studies have not been set as a fixed theoretical-methodological framework; instead, it is set as a venue that welcomes everyone interested in the issue of power relation and ideology to be on board the discussion (Ruddock, 2000).

Sonia Livingstone reminded us of the danger of oversimplifying the concept of audience. Instead, she argues the need to consider the interaction and conversation between individuals or people as active audiences/viewers or active text-readers (micro-levels) and the structure in the society, including groups, organisations, institutions, and cultural production (macro-levels). Understanding this multi-level perspective requires tedious effort to unpack the problematic relationship between the micro and macro levels of audience research (Livingstone, 2005). Later media audience scholars, including Annette Hill, expanded our knowledge of the complexities of audiences, including how media messages are interpreted differently, for example, among higher-income or lower-income groups or different ethnicities.

To the present day, various scholars have explored the need to incorporate the concept of 'interactivity' in understanding media audiences, especially about new media (Reinhard, 2011). However, as Adrian Athique pointed out, audiences are becoming much more challenging to define due to urbanisation, mass transportation, or crowd dynamics, which has formed what he called a "transnational audience" (Athique, 2016). Furthermore, we need to bear in mind the kind of argument of the audience. For instance, Harindranath argued that the audience could not be only characterised based on geographical context because each audience remains to experience a 'complex interlocking dynamic of 'race, class, gender, and ethnicity,' including culture (Harindranath, 2005). Therefore, the shifting definition of 'audience' in terms of geographic, socio-cultural, religious, or political differences is likely to contribute to how they perceive and interpret health-related messages.

The concept of audience, viewer, or reader has evolved significantly. As demonstrated by the above scholars, the shifting definition of the audience is not just because they are seen as active interpreters; the development of the media landscape also influenced the complexity of the audience's engagement with the media. The obscure interaction between the audience and the media applied across different levels (individual to social), socioeconomic status (lower to high income), and gender (men and women).

c) Cultural Approach in Health Communication

The cultural approach to health communication aims to revisit approaches to understanding the field of health communication. The media and audience interaction complexity challenges the dominant media effect paradigm. Various scholars have shifted the focus of health communication to aspects beyond the health message to the cultural context — notably Mohan J. Dutta-Bergman. Dutta pointed out that focusing only on the targeted audience's cognitive aspects of the conveyed health messages does not explain people's motivation and reason to whether later accept or reject the addressed messages. He emphasised that these approaches also do not guarantee generating the expected behavioural change (Dutta-Bergman & Dutta, 2005).

Dutta disagrees with the theoretical, methodological, and practical approaches found in applying "individualistic bias." He argues that the approach ignores the context of constructed, negotiated, and cognitively oriented (Dutta-Bergman & Dutta, 2005). In addition, Dutta argues that the 'subjective norm' proposed by these theories as driven by individual motivation is somewhat contradictory that individual behaviour and decision making are influenced by the collective's decision (socio-cultural context).

Understanding the contextual aspect of the meaning-making process is significant in understanding how the audience reads advertising messages. In resonance with Dutta, Schiavo argued that: "one of the key objectives of health communication is to engage,

empower, and influence individuals and communities". The goal is admirable because health communication aims to improve health outcomes by sharing health-related information. However, the broader mandate of health communication is intrinsically related to its potential impact on vulnerable and underserved populations (Schiavo, 2013). Similarly, Dutta criticises the nature of health communication that merely targets human behavioural change for biomedical models and purposes. He argues that while meeting the biomedical purpose, at the same time, the practice tends to undermine people's voices and neglect the cultural sensitivity which underlies why and how they behave (Dutta & de Souza, 2008).

Other scholars have also emphasised the prominence of cultural approach in health communication, particularly in exploring deviant behaviour such as stigma, which has proven to be the leading barrier to health promotion (Bayer & Stuber, 2006; Corrigan & Watson, 2002; Evans-Polce et al., 2015; Major et al., 2014; Scheffels, 2009; Smith, 2011). For instance, Smith explains, "the relationship between stigma, health, and communication is complex, dynamic and may hamper people with health challenges to look for treatment and social support" (Smith, 2011). Stigma is defined as a situation of an individual or group disqualified from full social acceptance (Goffman, 2009a). In order words, stigma is a social construction shared among the community to discredit, devalue, and disregard others seen as different or involved in deviant behaviours (Smith, 2011). Health-related stigma is usually addressed to marginalised groups and sub-groups, such as indigenous people, children, and people. Stigmatised health behaviour toward specific sub-groups, such as indigenous people with mental health issues or smoking, is culturally inappropriate. This stigmatising or labelling practice may not help them overcome their health-related problem; instead, it might place them in a more vulnerable position (Corrigan & Watson, 2002; Evans-Polce et al., 2015; Goffman, 2009a; Smith, 2011).

An example of a research project that employed the cultural perspective is the case of HIV prevention programs for people by Wingwood and DiClemente (2009). The study applied the theory of Gender and Power to evaluate the HIV prevention program designed for the African American people. The project 'SISTA love is strong, safe, and surviving' represents the people's cultural pride, safe-sex awareness, and survival experience facing the hardship of having HIV disease. Unfortunately, the evaluation of the project failed to determine the social structure's influence on people's health since some routine social practices are unaware and taken for granted. However, the study revealed important information for further intervention (Wingood & DiClemente, 2000).

In the context of Indonesia, an empirical study applying a cultural approach to health communication is research by Dyah Pitaloka understanding the use of mobile phones in rural Javanese settings. This field experiment explored how message texting has been utilised to facilitate self-help and negotiating knowledge. The poor access to high and expensive technology may exclude people (poor in urban and rural areas) from accessing health-related information (Pitaloka & Hsieh, 2015). This study helps to understand that understanding health as a shared value and practices from people's point of view may help understand how to promote health issues.

The above studies explored through the cultural paradigm lens proposed by Mohan Dutta are seemingly ideal for carrying out better health promotion or health communication approaches. In sum, the cultural studies approaches emphasise the culturally situated nature of health communication interaction and processes and locate culture in the realm of structure and power. Cultural studies and interpretive paradigms in health communication focus on how health meaning is created within the local context (Zoller & Dutta, 2008, p. 7). Dutta et al. claimed that health communication involves the negotiation of shared meanings embedded in socially constructed identities, relationships, social norms, and structure) (Dutta-Bergman & Dutta, 2005; Dutta & de Souza, 2008; Zoller & Dutta, 2008).

Dutta's notion of understanding socio-cultural context through a participatory approach may be plausible only to capture the backdrop of the context under investigation. However, Dutta's normative framework has not specifically explored other circumstances related to media studies (both production and reception). Dutta's work challenges media production (such as media ownership). His broad cultural perspective on health communication practices does not explain both message and socio-cultural that interconnectedly influence audiences' interpretation of the media messages, especially regarding health issues. Thus, to provide the better or best practice of health communication, including on the issue of smoking, Dutta and de Souza propose the critical-cultural approach through a 'reflexive modernity perspective. The approach questions the media, the culture, the focus on responsibility, structural condition, and knowledge in understanding the development and health-related campaigns. The 'reflexive modernity' approach in health communication and campaign development requires more participatory culture-centred research and examines the social practices of the media-audience engagement multidimensional issue (Dutta & de Souza, 2008, p. 329-228). Dutta's argument resonates with the health communication practices in most developing countries, including Indonesia which develop health messages based on best practices in other countries.

DISCUSSION

Emerging Cultural-Media Audience Approach: A Reflection

This "normative" model to explore health communication practices portrays broader aspects that may contribute to people's meaning-making of the social construction of smoking behaviour. The model may help explain the driving factors that lead to people smoking behaviour or analyse how smoking-related issues are socially constructed in Indonesia. However, the model may not be practical to explore how people read the anti-smoking messages or explain how the messages become meaningful for them to counter their risky behaviour. The model is missing from understanding in-depth what conditions influence people's interpretation of the messages and why the circumstances shape their acceptance or rejection of the media messages, specifically if the audience is not well-represented in the smoking discourse, such as women smokers in Indonesia.

Meanwhile, media audience studies drawing from cultural studies refute the idea that an audience is passive but active message receivers and can give meaning to a received message. Instead, audiences' beliefs and behaviours are influenced by their meaning-making practice of the messages within a specific context (McQuail, 2013; Nightingale, 2011; Ott & Mack, 2013; Staiger, 2005). These scholars agree that the complex impact of media cannot be solely understood from the media production (as producer) or the media messages (text/message analysis). It must also be seen from the audience's perspective, who constructed meaning through their engagement with the media (message reception). Therefore, message reception cannot be a linear one-way process from media to audience but rather a reciprocal process determined by many factors. The shifting perspective from merely focusing on media production and message/text has contributed to the research development in media audience studies discussed by many scholars. In short, the early audience reception studies explain how audience interpretation of the text message supports the dominant culture carried out by the media production. Scholars in this early phase development of audience studies have acknowledged audiences as active viewers of media texts; their perspectives heavily focus on the media production's hegemonic or dominant messages. Audiences' interpretation is examined directly in how audiences respond (decoding or reception) to the dominant messages (opposing or accepting). Thus, the early theoretical framework of audience research has evolved rapidly due to the shifting definition of 'audience' in terms of function, background (location, gender, and cultural context), and the approach or method to study the audience.

The body of work on health communication has been well-acknowledged and reviewed from the media and communication perspectives in some countries (Dutta-Bergman & Dutta, 2005). The media campaign is considered a cost-effective strategy yet powerful for disseminating health information (Davis et al., 2008). Most public health studying health messages or health campaigns examined the direct relationship between messages and people's attitudes and behaviour. The media campaign has the potential to address health-related issues, both smoking and anti-smoking behaviour, and health communication or promotion in Indonesia is commonly perceived and studied through the public health lens. Therefore, most health media campaign studies are assessed for their impact on people's behavioural change—the awareness, knowledge, belief, intention, and behaviour change using social psychological models, such as Theory Reasoned Action and Health Belief Model (Corbett, 2009; Cupp et al., 2015).

Pro-smoking messages in many media channels significantly contribute to young group smoking behaviour, such as intention to smoke or continue smoking (Duke et al., 2009; Sargent et al., 2009). These messages are delivered through many forms of media; electronic media—television (Gidwani et al., 2002), printed media—newspapers, billboards (Luke et al., 2000), and new media (Depue et al., 2015; Freeman, 2012). Similarly, studies on anti-smoking messages in media influence people's decision to stop smoking (Allen et al., 2015; Freeman, 2012; Tharp-Taylor et al., 2012; Goffman, 2009; Montazeri & McEwen, 1997; Pechmann & Ratneshwar, 1994).

Considering that most smokers are from low-middle income households, where television remains the vital mass communication for gaining and sharing information, thus investment in tobacco control campaigns through mainstream media, such as television, remains crucial for reaching all audiences. Referring to evidence-based research, producing a health media campaign is one of the reasons behind the government's effort to tackle the problem. However, the limitation when applying this approach is the understanding that the success or failure of the campaign relies on merely who delivered the messages (source), what messages are addressed (content), and how it is conveyed (channels/medium). The following examples showcase how media audience study is essential to understanding people's interpretation of anti-smoking messages.

Since 2014, the World Lung Foundation (WLF), now called Vital Strategies Indonesia (VSI), has been working with the Health Ministry to produce anti-smoking Public Service Advertisings (PSAs) focusing on smoking cessation and smoke-free campaigns. Formative research carried out by the WLF to test the four launched PSAs aims to understand which messages have the most impactful reaction to audiences. The PSAs tested are Mother's testimonial, Father's testimonial, Robby's Band, and Robby's Dream (WLF, 2015). *Messages* with impactful reactions are defined as messages with a straightforward story, easy

to follow, emotionally touching message & message delivery; is highly dependent on how the messenger delivers the message. The scenes enable viewers to imagine feeling what the characters are feeling, an apparent, rational reason not to smoke and strike fear and drive consumers to fear to have a similar experience.

Moreover, the messages that do not have an impact give viewers reasons to shift the blame away from cigarettes and make viewers (particularly smokers) feel attacked, thus triggering a defensive reaction. The survey findings revealed that the PSAs carrying out emotional appeals have more impactful reactions than health effect appeals. For example, the mother and Father's testimonials are shown to have positive responses. In addition, people said the messages were exciting and provided local wisdom (WLF, 2015). The findings are different from the previous studies of anti-smoking advertisements, which suggest that the fear-appeal messages showing the adverse health effect of smoking are more effective and acceptable (Durkin et al., 2013; Wakefield et al., 2011).

Furthermore, a population-based survey examining tobacco industries' compliance with implementing a 40% Pictorial Health Warning (PHW) on cigarette packs found that besides tobacco industries' low compliance with the regulation. People prefer graphics health messages which are less scary or disgusting (Soerojo, 2014). These findings suggest that fear appeal messages are effective. However, further investigation reveals that people do not care and are not influenced by messages in the pack because they can easily buy cigarettes with single sticks and even replace the cigarettes with 'special box/can' produced and sold by tobacco industries (Soerojo, 2014).

Consequently, the different outcomes of these similar studies in understanding message effectiveness to people's perception and behaviour in Indonesia have shown that the perspective and approaches (theoretical and methodology) used to carry out the research have some limitations. *First* is the inadequacy to understand the reasons beyond people's preference of which message is effective or ineffective. *Second*, not all "global" approaches refer to "westernised" best-practice and can generally be applied to other countries' health communication practices (Durkin et al., 2013; Durkin et al., 2009). *Third*, the positivistic approach, which attempts to explain a one-way relationship between the media message and people's behaviour, is insufficient to capture the media's complexity and people's (audience) relations in the actual social world. Therefore, holding with Dutta's argument, we argue that different approaches and more cultural-centred methods are needed to employ health messages targeting specific audiences.

Furthermore, as most of the studies revealed, most of the intervention is a top-down approach that underestimates other factors such as the social and culture of a particular cultural context and marginalised group, like people (Pitaloka & Hsieh, 2015). For instance, by focusing more on reducing male smokers as the current predominant smokers in the country, the government risks missing a more significant target group, such as women. That may potentially become a prominent agent to raise awareness about the harms of smoking to smokers and the future generation.

In broad agreement with Dutta-Bergmann, we would argue there is a need for reflective thinking on how the health media message and campaign allow effect change, especially among the vulnerable and underreported group in the society, such as people (Dutta-Bergman & Dutta, 2005). Thus, the media audience discourse approach underpins this study talks about audience engagement with the media within their everyday lives. Including the notion of media consumption and how people interpret smoking counter-advertising. People's voices and experiences with smoking related-issued may be significant to

understanding their interpretation of the existing anti-smoking messages. However, other aspects contribute to their reading practice of the messages—as described by Ang, including both the production of the media/text and people's interpretation of the text; or the interplay of the messages with the socio-cultural context (Ang & Couling, 1985; Ang, 2006).

With the advent of information and communication technology, the use of social is significant even in remote areas and among women; audiences have used media content to negotiate their identities, including maintaining relationships through online and social media (Bilandzic et al, 2012). Thus, this type of media can be an alternative platform for women's voices and experiences dealing with and overcoming their risky behavior.

CONCLUSION

The linear top-down approach failed to understand whether the message becomes meaningful to the audience, which later may help to prevent risky behaviour. This perspective tends to miss out on the critical aspect of the media message campaign: the users/audiences who received the information. Hence, this study aims to fill in the gap in works of literature on health communication in Indonesia from the media studies perspective. We argue that the media audience's cultural analysis fits to capture an arguably sensitive context, such as people, smoking issue, and their interpretation of the mediated smoking messages. From two interrelated disciplines—media studies and public health, the current practice of health communication is expected to apply a more cultural-media audience approach. The cultural-media approach emerged due to the shifting definition designated to the audience and ways to examine and assess health-mediated groups to be heard and acknowledged. Consequently, encouraging audiences to involve and participate in developing meaningful messages based on their needs and desire to help them with their risky behaviour.

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