

MESSAGE STRATEGIES AND YOUTH'S INTERPRETATION ON TELEVISED ANTI-SMOKING ADVERTISING CAMPAIGNS

กลยุทธ์สารและการตีความของกลุ่มเยาวชนผู้รับสารต่อภาพยนตร์โฆษณา
รณรงค์เลิกสูบบุหรี่ทางโทรทัศน์ฟรีทีวีไทย

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Abstract

The study targeted to studying an agreement between message strategies used advertising appeals and advertising execution in televised anti-smoking advertising campaigns, both in general and participatory types and tailored between 2011 and 2013 and youth's interpretation on such smoking cessation campaigns launched on television stations. The mix methods of content analysis, documentary research, in-depth interviews, and focus groups were, therefore, employed. The findings revealed that there was a shared agreement between what the Thai Health Promotion Foundation *per se* intended to convey and that what the youths interpreted. This just happened with the general televised anti-smoking advertisements, not with being exposed to the ones created by the youths. It was specifically apparent that emotional appeals and information/rational appeals were delivered in both types of advertisements. Although reminder advertising was disseminated in the general types, it was not seen in their counterparts. However, teaser advertising was highlighted in participatory advertisements, but not for reminder advertising.

The youths shared their perspectives that more odds of perceived awareness, feelings, and acceptance were generated when smokers and nonsmokers were being exposed to the advertisements initiated by the Thai Health Promotion Foundation than the ones produced by the youths. Failures in the participatory advertising were because of their specific target audiences, no impacts of changing smoking behaviour, and perceived negative image and thoughts on those who smoked. This research contributed to the further development of an advertisement and campaign focusing on a particular target group including secondhand smokers, male smokers, and female smokers.

Keywords: Anti-smoking campaigns, Message strategies, Youth's interpretation, Participatory advertising

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บทคัดย่อ

งานวิจัยนี้มีวัตถุประสงค์เพื่อศึกษากลยุทธ์ กรณีนี้นุ่งศึกษาแรงจูงใจและการดำเนินการในโฆษณา ในภาพยนตร์โฆษณาณรงค์เลิกสูบบุหรี่ทางโทรทัศน์ ทั้งที่ผลิตโดย สสส. และเยาวชนที่เข้ามามีส่วนร่วม ในปี พ.ศ. 2554-2556 และการตีความของเยาวชนผู้รับสารต่อภาพยนตร์โฆษณาณรงค์ดังกล่าว งานวิจัยชิ้นนี้เป็นงานวิจัยเชิงผสมผสาน โดยประกอบด้วยการวิเคราะห์เนื้อหา (Content Analysis) การวิจัยเอกสาร (Documentary research) การสัมภาษณ์ (In-depth interviews) และการสัมภาษณ์กลุ่ม (Focus groups) ผลการวิจัยพบว่า มีความสอดคล้องกันระหว่าง ความตั้งใจของผู้ส่งสารที่จะส่งสารออกไปและการตีความของเยาวชน ซึ่งกรณีนี้จะเกิดขึ้นแต่เฉพาะโฆษณาณรงค์เลิกสูบบุหรี่ของ สสส. เท่านั้น ผลการวิจัยชี้ให้เห็นอย่างชัดเจนว่า โฆษณาทั้ง 2 แบบ ใช้กลยุทธ์ด้านอารมณ์ความรู้สึกและกลยุทธ์ด้านข้อมูลเหตุผล แม้ว่าการใช้กลยุทธ์ด้านการย้ำเตือนจะถูกใช้ในโฆษณาณรงค์เลิกสูบบุหรี่ของ สสส. แต่ไม่เกิดขึ้นในโฆษณาณรงค์แบบมีส่วนร่วมของเยาวชน แต่การใช้กลยุทธ์ด้านการย้ำเตือนจะพบได้ในภาพยนตร์โฆษณาณรงค์แบบมีส่วนร่วมของเยาวชน แต่ไม่พบในโฆษณาณรงค์เลิกสูบบุหรี่ของ สสส.

ขณะที่เยาวชนสูบบุหรี่และไม่สูบบุหรี่ เมื่อดูโฆษณาของ สสส. จะมีความตระหนัก มีความรู้สึกร่วมและการยอมรับมากกว่าโฆษณาณรงค์เลิกสูบบุหรี่แบบมีส่วนร่วมของเยาวชน ความล้มเหลวของโฆษณาที่เยาวชนผลิตเกิดขึ้นจากการมีกลุ่มเป้าหมายเฉพาะเจาะจงมากเกินไป ไม่มีผลกระทบต่อการเล่นพฤติกรรมการสูบบุหรี่และเกิดภาพลักษณ์ เกิดความคิดในเชิงลบต่อคนที่สูบบุหรี่ งานวิจัยชิ้นนี้ก่อให้เกิดประโยชน์ในด้านการพัฒนาภาพยนตร์โฆษณาณรงค์เลิกสูบบุหรี่ และโครงการรณรงค์ที่เป็นเฉพาะกลุ่มเป้าหมายใดเป้าหมายหนึ่ง เช่น กลุ่มผู้สูบบุหรี่มือสอง กลุ่มผู้สูบบุหรี่ชายและหญิง

คำสำคัญ: กลยุทธ์สาร การเลิกสูบบุหรี่ การมีส่วนร่วม ภาพยนตร์โฆษณาณรงค์ การตีความ

Introduction

In the recent and forthcoming decades, there are the odds of being dead before comes of age among male and female adults, primarily, results from cigarette smoking (World Lung Foundation/American Cancer Society, n.d.). Smoking is a major cause of death when approximately almost 50 million people globally are killed by heart attacks (about one-thirds). It is followed by cancer and acute respiratory infection (World Health Organization-Regional Office for South-East, 2008).

Although people, especially teenagers in Thailand are aware of risks and drawbacks of tobacco use and are exposed to anti-smoking

campaigns (National Statistics Office, 2012; Phanucharas & Chalongsuk, 2009), they start smoking at an earlier age, i.e. 16.2 years of age (National Statistics Office, 2012). The non-stop smoking is mainly reasoned by imitating surrounding people, particularly friends and family members and being perceived as adulthood and maturity (Health Literacy Special Collection, n.d.; Vichit-Vadakan et al., 2004). Interestingly, there is a dramatic shift in smokers' gender when more female students presently are becoming smokers than previously because of gender empowerment and equality (Thai Health Promotion Foundation (2007). The study of Klangrahad, Bhoon-Nak & Ruengvilaivate

(2006), likewise, further clarified that trial, imitation, social activities, familiarity, and accessibility are the important rationales why female students involve in a smoking circle.

Advertised smoking cessation campaigns have continuously be promoted by many organizations and foundations including the Thai Health Promotion Foundation. It plays vital roles of initiating, encouraging, supporting, and cooperating with several parties concerning to drive and build Thais' physical, affective, cognitive, and social wellness and happiness (Thai Health Promotion Foundation, n.d.). The organisation has paid for anti-smoking interventions about a quarter a year (World Health Organization-Regional Office for South-East Asia, n.d.). Nonetheless, some stop-smoking campaigns are unlikely to be effective in quitting tobacco use (Sirirassamee et al., 2012; Zawahir et al., 2013). The cause appears to be a lack 'of dialogical communication rather than on linear communication' (Tufte & Mefalopulos, 2009: 2).

The Thai Health Promotion Foundation recognises the importance of youths' and teenagers' participation which is still being lacked. The benefits of it are as follows: 1) there are more cooperated partners, 2) they can get risked students and teenagers away from being a new smoker, and 3) they will be speaking the same language as do the Thai Health Promotion Foundation's targeted audience (teenagers),' says a Thai Health Promotion Foundation staff (interviewed on 23 December 2013).

Previous and recent studies are normally based on exploring factors affecting smoking (53.33 percent) and strategies to quit smoking (46.67 percent) (Jitaram, 2010), moreover. A 360-degree, S-R research project has not been discovered and the one protecting people from using tobacco has found little. The Thai Health Promotion Foundation (interviewed on 23 December 2013) confirmed that understanding and studying what we intend to communicate and what the audiences interpret helps giving more valuable thoughts and future development in anti-smoking campaigns.

This research, therefore, targeted to studying message strategies applying- advertising appeals and advertising execution in televised anti-smoking advertising campaign, both in general and participatory types and tailored between 2011 and 2013 and to exploring youth's interpretation on such smoking cessation campaigns launched on television stations by comparing between smokers and nonsmokers.

The current statistics of the National Statistical Office (n.d.) revealed that although Thai people have a limited time of relaxation, i.e. 3.6 hours a day, the most favourite activity they do in their free time is watching television. Likewise, analogue and digital television are the first two channels advertisers use to launch their advertisements. (Advertising Association of Thailand, 2015)

This research provides academic and practical contributions. First of all, it underlines the importance of media literacy, i.e. people can interpret, analyse, and differentiate as well

as interact with media messages wisely and consciously. Furthermore, this study shifts scholars' viewpoints from a single to a 360-degree research. Later on, the findings of the study can be employed as a platform to develop smoking cessation campaigns and strategies for the ultimate goal of reducing health risks and producing and promoting good health outcomes.

Literature Review

Advertising involves people's daily lives and people in any walk of life because, as an integrated marketing communication tool, it helps tailor information and contents of products and/or services in order to build understanding among consumers and persuade them to decision making and buying behaviour or behavioural change (Paosawatyanong, 2003; Sampattavanich, 2003; Sareerat, 1994). Particularly, the objectives of advertising are to raise awareness; to inform about products and/or services; to draw image-building; to remind; and to persuade (Akkaworakit, 2008). Success or failure in advertising depends on advertising strategy, creative creation, achievement, and media selection (William et al., 2007).

Message Strategy

Even being out of date, but it is true that defining a [message] strategy is shaped by an individual (Thongmeearkom, 1988) and consisted of appeal types and creative presentation techniques (Samroeng, 2002). In this study, however, message strategy is divided into three

components appeal types, creative mix, and creative presentation techniques or creative execution.

Appeal types involve how an advertisement can respond to a person's need (Samroeng, 2002). If benefits are advertised, it will be rational motive. But, if psychological and social and perceptual needs are responded, emotional motive can be the result (Samroeng, 2002; Sangloun (n.d.); Sareerat, 1994) further articulated that emotional appeals can be acted by using humor, fear, sex, guilt, security, and convenience.

Verbal-brand name, headline, slogan, and so on and nonverbal components- picture, sound effect, music, logo, trademark, space, colour, font size, and so forth are meant to creative mix Sangloun (n.d.) secondly. According to the study of Sriwisai (2008), it is shown that more nonverbal communication including picture and space are superior to the verbal counterpart because these can draw audience imagination and engagement.

Basing on the literatures of Belch & Belch (2001); Sangloun (n.d.); Poorat (2005), creative presentation techniques or creative execution how to present an advertisement include straight sell of factor messages, scientific/technical evidence, demonstration, comparison, testimonial, animation, personality symbol, fantasy, dramatization, and humor.

Audience Interpretation

Whether or not an advertisement and campaign is successful impinges upon listening

not only to a sender, but also to a receiver or audience because there must be a specific target group defined (Utsahakit, 1989). Humans, normally, pay more attention to one rather than another, due to their relevance (Sperber & Wilson, 1986). They further stated that communication is surrounded by encoding and two levels of intention, i.e. the information intention- to raise awareness and the communication intention- to decode meaning and objective. Whatsoever, it varies, following to different contexts.

This study keeps an eye on three types of interpretation proposed by Belch & Belch (2001) including cognitive, affective, and behavioural responses. As for cognitive response, it is audiences' attempt to think, understand information received or advertising messages, and finally analyse if a claim is acceptable. In other words, it is asked in extent to which messages are obvious and understandable (Well, Burnett & Moriarty, 1989), which is framed by personal belief, knowledge, and experience (Hawkins, Best & Coney, 1995). Emotions, for instance, fear, enjoyment, and humor are the interpretation the audience emotionally express while or after being exposed to an advertisement. Regardless of having prior knowledge of a product or message and cognitive response, affective interpretation can emerge. It is interestingly stated that affective factor is mostly attached to product categories of beer, wine, cloth, fragrance, mobile service, and computer because decision-making is caused by imitation and brand experience

(Julapongsathorn, 2001). Without considering whether it meets an objective of an advertisement, last but not least, behavioural response is the intention to have a behaviour (Belch & Belch, 2001; Rook, 1985).

Research Methods

Following to the research questions of the study, i.e. what kind of message strategies were used in televised, advertised campaigns against tobacco use by making a comparison between general and participatory commercials and how did smokers and nonsmokers interpret messages of such advertisements?. This research, hence, employed a mixed method of in-depth interviews, altogether with content analysis and documentary research for the former research question and focus groups for the latter one.

As for discovering message strategies of smoking cessation advertising campaigns in terms of advertising appeals and advertising execution, the researchers conducted the in-depth interviews key informants from the Thai Health Promotion Foundation. Also, 17 advertisements created by the Thai Health Promotion Foundation and launched from 2012 to 2013 and four participatory commercials aired in 2011 were analysed en masse. The 17 commercials were *Tobacco = Cigarette = Death (A Temple)*, *Kung - Sutirat Wongthewan*, *Jinreedkao Wongthewan - Surang Pewon*, *Third - Passakorn Klangmontree*, *Prang Sipaporn (Bubha Saenboonsri)*, *Peaw Peaw - Preawpan Hassadee*, *Mkie Piromporn*, *Un Yong - Kamrawee Kosolpisit*, *Easy to Addict*, *Difficult to Quit*

(*Nong Aday*), *Nonsmoking House Super Jiew V.1*, *Nonsmoking House Super Jiew V.1*, *Smoking Kids (Thai)*, *Smoking Kids (English Subtitle)*, *Cigarette is Dangerous (Uncle and Aunt)*, *Mouth, Smoke, and I do not smoke* and the four participatory advertisements were *Opponents*, *Nonsmoking Beauty*, *Broken Heart*, and *Stay Alive*. It is worth noting that those advertisements against smoking lasting 30 seconds were selected and scrutinised. Only headlines, content/body, and conclusion were, likewise, of concern. The ones allowing youths and teenagers to share their ideas and creativities had been broadcasted only in year 2011.

Drawn and applied from Advertising and Sales Promotion by Belch & Belch (2001), Advertising Principle, and Persuasive Speech Rubric were, in addition, developed. In details, advertising appeals included four factors of information/rational appeals, emotional appeals, reminder advertising, and teaser advertising. There were 11 issues highlighted for advertising execution, alike, i.e. straight sell of factor message, scientific/technical evidence, demonstration, comparison, testimonial, slice of life, animation, personality symbol, fantasy, dramatization, and humour. Far beyond, three levels of rubrics taken from Persuasive Speech Rubric 1) always communication: advertising appeals and advertising execution were communicated throughout the advertisements; 2) neutral communication: advertising appeals and advertising execution were communicated partly or in a part of headlines, content/body,

and conclusion; and 3) less communication: no advertising appeals and advertising execution were communicated in the commercials were designed.

To listen to smokers' and nonsmokers' voices, focus groups were conducted and divided into four homogeneous groups. In other words, there were male smokers, female smokers, male nonsmokers, and female nonsmokers. For those who smoked, they were between 18 and 25 years of age and could be new or experienced for smoking with an unlimited period of time while those who did not, their ages were also between 18 and 25 years of age but had never smoked before. Each group consisted of five participants. These participants were recruited via personal network and connection because convenience and familiarity were preferable. Also, these selected smokers and nonsmokers had to be exposed to one of the stimulus driving the flow of information were four general *Tobacco = Cigarette = Death (A Temple)*, *Smoking Kid*, *Easy to Addict*, *Difficult to Quit (Nong Aday)*, *Cigarette is Dangerous (Uncle and Aunt)* and the other four participatory advertisements *Opponents*, *Nonsmoking Beauty*, *Broken Heart*, and *Stay Alive*. The partakers were, moreover, given the opportunities to listen to (voice heard only), watch (picture watched only), and both listen to and watch the stimulus once.

It was very important to mention that this research was approved by the Research Ethics Committee, Bangkok University.

Findings

The result revealed that message strategies the Thai Health Promotion Foundation intended to communicate and the youths interpretation were not found different, but in a condition of the general anti-smoking campaigns, i.e. the ones that were created by the Thai Health Promotion Foundation. It was, however, vice versa for the participatory advertising.

For extension of the findings, both the general and participatory commercials shared their similarities in advertising appeals. In other words, emotional appeals were of most popularity. Even having disparity in emotional types, i.e. sorrow and anger, for instance, both *Cigarette is Dangerous (Uncle and Aunt)* and *Opponents* communicated emotional, visual and audio messages throughout the entire advertisements. It was usual that when learning and experiencing new things were driven by one's own curiosity and enthusiasm (Chusin, 1998). Information/rational appeals were taken for granted afterwards.

A slight difference was discovered when reminder advertising, but none of teaser advertising was cultivated among general anti-smoking commercials. It was vice versa for their counterparts when teaser advertising failed into the participatory advertising, but not for reminder advertising. The key informant from the Thai Health Promotion Foundation (2013) uttered that "repetition/reminding could make viewers remembering content/story rolled out and aware of disadvantages of smoking cigarettes."

In consideration of advertising execution, in the advertisements designed by the Thai Health Promotion Foundation itself, testimonial was frequently tailored. It was followed by slice of life, comparison, scientific/technical evidence, and demonstration. It could be reasoned by the information provided in the Thai Health Promotion Foundation website that people were viewed as non-innocent who had experienced smoking, due to an increasing number of smokers. Because anecdotal, personal evidence was told by youths and teenagers who got involved in storytelling and thinking of speaking the same language, in turn, slice of life was prioritised. For example, the story of *Broken Heart* advertisement brought a teenager's love story and the starting of smoking cigarettes forward. That is to say, whenever teenagers faced a problem, they chose an inappropriate solution, because of their immaturity and, rather than parents, psychologically, friends were the best choice to go with because mental and attitudinal similarities were noticeable and parents' are a child's forgiveness is always, but it not for friends (Mental Health Association Under the Royal Patronag, 2008). The other top-of-mind advertising execution was comparison and dramatization, respectively.

Thanks to smokers and nonsmokers' interpretation, they had no disparity in understanding and feeling of the general anti-smoking and participatory advertisements, no matter through voices heard only, pictures watched only, and both audio and visual components. There was

an exception, though, when more effectiveness of the general cigarette-quitting than its counterparts because the former could give the sampled youths knowledge and benefits, e.g. dangers of smoking and quitline and information and arouse their emotional feelings, perceptions, and acceptance. In contrast, the participatory commercials specifically tailored to a specific, unique group of people and could make smokers and nonsmokers aggressive and pessimistic about a smoker's image.

Particularly, all male and female smokers and nonsmokers understand the messages delivered and felt depressed, amazed, fearful, and so forth after watching the commercials designed by the Thai Health Promotion Foundation. An outstanding finding was that because those who smoked, a guilty of being a smoker was avoided by speaking other matters. Further to this, feelings were expressed more by male and female smokers than their opponents. For example, they elucidated

'[I felt] like I was slapped in the face at a traffic light, if a kid asked why you smoked even though it was not good.'
(male smoker, 2015)

'It is so frightening. I'm afraid that it would happen to me.' (female smoker, 2014)

'When I saw this advertisement [Tobacco = Cigarette = Death], I quit. Because I couldn't stand on it, however, I repeat smoking.' (male smoker, 2015)

In contrast to the general advertisement, the participatory advertisements could not make male and female smokers understand and feel anything about smoking cessation. More importantly, they felt as if these commercials initiated by the youths were not designed to persuade them to stop using tobacco.

On the contrary, male and female non-smokers shared their common understanding and emotional-oriented concerns about smokers' health status and consequences. They, additionally, just felt what the advertisements truly reflected and communicated. They viewed the stories on a truly basis rather than self-imagination. They were lucky not to be a victim of dangerous smoking. It was notably found that such participatory endorsements were funny and made the nonsmokers confused what were communicated after being exposed to the commercials.

It was, moreover, impossible to draw a difference between female smokers and non-smokers after consuming the general smoking cessation commercials because these two groups reached to a main point of disadvantages to smoking and were a real thrill to get from the aftermath of smoking. Though, the agreement was not revealed when comparing between the male smokers and their nonsmokers. Although they had same sex, the male smokers were against the persuasion to cease smoking and viewed smoking optimistically as not a bad manner; on a contrary; naturally, the male nonsmokers projected smoking as a dreadful behaviour and should not start it unless a person would be a burden to his next of kin.

In terms of the reflection to the participatory commercials, the male smokers, exceptionally, felt that these were absurd and did not like some commercials since they were an insult to smokers even though they were trying to be a good person. It was vice versa, though, for the male nonsmokers when they found the commercials funny, but creative.

When the participants, in more details, just listened to the advertising stimuli, understanding and feeling varied, following to a particular commercial. Most participants understand well in all the commercials, excepting *Cigarette is Dangerous (Uncle and Aunt)*. With no surprise, this was because the presenter had an actual problem with his throat, windpipe, and speaking, so, he could not speak clearly. As a result, the participants, especially the female smokers and nonsmokers had no understanding and asked to repeat after being heard to the commercial. No or low understanding and feeling of the participatory advertising was presented. After being exposed to *The Opponent*, for example, a male nonsmoker (2015) suddenly expressed that ‘I don’t know what [the advertiser] is trying to say. Instead, I felt rather that children are fighting than quitting is encouraged’. No idea and understanding was articulated, either when the participants were listening to other advertisements. For instance,

‘[I] thought it is a mouthwash advertisement. After listening to the advertisement, I’m not aware of the importance of quitting smoking.’ (female nonsmoker, 2015)

‘It seems to me that if you want to be more beautiful, you should use a collagen cream.’ (male smoker, 2015)

Conclusion and Discussion

Data collected from the in-depth interviews, content analysis, documentary research, and focus groups reported that there was a shared agreement between what the Thai Health Promotion Foundation intended to convey and that what the youths interpreted. This just happened with the televised anti-smoking advertisements created by the Thai Health Promotion Foundation per se. It was the other way round when being exposed to the ones allowing youths to participate in creating the advertisements. It was recommended to launch participatory advertising in free television channels and find out effective measures.

Emotion and information/ rationality were the first two preferable appeals, in the sights of the Thai Health Promotion Foundation and the youths. It was consistent with the study of Samroeng (2002) when emotional appeals are frequently delivered so that needs of behavioural change were met. Even being difficult to change someone’s behaviour, to reduce a ratio of smoking behaviour was the ultimate goal the Thai Health Promotion Foundation reinforced, though. Although the smokers and nonsmokers could interpret directly the messages delivered by the Thai Health Promotion Foundation, long-term smoking cessation did not even happen. Sharing feelings, attention, interest, and, sometimes, desire was only expressed. Failures in campaigning

against smoking continued even though people disagreed with the use of cigarettes and moderately stopped smoking, exposure and remembrance to anti-smoking campaigns were ineffective (Keelapang, 2011). One important reason was the exclusion of secondhand smokers who received the negative effects of smoking alike. Future researches and campaigns should, therefore, target to this particular group by boosting them to take care of themselves and to give warning and suggestion to smokers.

It was the other way round for the participatory advertising, i.e. the stories were directed to the youths not to become a new comer and more innovative, creative than the general advertising. Nonetheless, the smoking and nonsmoking participants had produced no awareness of the dangers of smoking. Having greater risk of adverse health effects and outcomes was also unreasonable. The participatory advertising only played the role as ‘a turning-point guideline for the youths’.

More execution and different angles of storytelling were found in the general anti-smoking commercials than their counterparts. The Thai Health Promotion Foundation favoured testimonial most while the youths fell in love with slice of life. Reality was more perceived in the former than the latter. It was still curious about reinforcing long-term, non-smoking behaviour and decreasing a number of new smokers because the participants had pointed out that actors/actresses contained no credibility, for example, continuing and repeating smoking behaviour and wounds possibly caused from

other factors, not just from smoking. Vagueness should be eliminated for future anti-smoking advertisements. This could be the reason why people had a low level of media exposure and remembrance (Keelapang, 2011). With bias, more interestingly, smoking represented socialisation and no fault, in the interpretation of the male and female smokers whereas the opponents agreed on smoking’s bad effects on one’s own and others.

Sexual difference highlighted different interpretations, i.e. males were more likely to escape from the reality when they kept asking the extent to which smokers could get bad effects of smoking and whether there should be other variables causing the death. Future anti-smoking advertisements and campaigns should be designed and developed to meet a particular target group including male and female.

Not only a three-year research study, but also a larger-scale study should be taken into consideration for the future.

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